Helping Students in Distress: A Faculty/Staff Resource Guide

Towson University’s Guide to Options, Resources and Support
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Helping Students in Distress: A Faculty/Staff Resource Guide has been developed to provide you with a useful resource for recognizing students who may be experiencing emotional, physical or developmental challenges and difficulties. This booklet will provide some basic guidelines for a wide range of student behaviors. It also serves as a guide to assist you in making voluntary referrals to campus resources. We do not expect you to act as a professional counselor. Instead, we hope this information will be helpful as you work with students in your role as a faculty or staff member.

College students typically encounter a great deal of stress during their academic experience. Although many students cope successfully with the demands of college life, for some the pressures can become overwhelming and unmanageable. Students may experience stress as they attempt to perform well academically, begin their career path, navigate interpersonal relationships, and as they balance academic, social, work and family obligations. Some may feel isolated, sad, helpless and hopeless. The emotional and behavioral consequences are often played out on campus in classrooms, residence halls or offices.

As a faculty or staff member interacting with students, you are in a unique position to identify and help students who are in distress. You are likely to be the first person a student reaches out to for help. You might be the first person to notice troubling behavior or to receive a concerning communication from a student who does not ask directly for help. Your ability to recognize the signs of emotional distress and potential health or mental health issues and to make an initial intervention can have a significant impact on a student’s future well-being.

The purpose of this booklet is three-fold: To help you to 1) recognize some of the important symptoms of students in distress, 2) address your observations supportively with the student and 3) facilitate an appropriate referral, whether to the Counseling Center, the Health Center, Disability Support Services, or another help provider. Your colleagues in these offices are available to consult with you and assist you with all these activites.

Counseling Center
Director:
Gregory N. Reising, Ph.D.
University Health & Counseling Services Second Floor
410-704-2512
www.towson.edu/counseling

Health Center
Director:
Matthias Goldstein, DHSc, PA-C.
University Health & Counseling Services First Floor
410-704-2466
www.towson.edu/healthcenter

Disability Support Services
Director:
Susan Willemin, M.A.S.
Administration 232
410-704-2638
www.towson.edu/dss

Student Affairs LIFELINE
410-704-LIFE (5433)
studentaffairs@towson.edu
Signs of Distress

Academic Problems
• career and course indecision
• excessive procrastination
• uncharacteristically poor preparation or performance
• repeated requests for extensions or special considerations
• disruptive classroom behavior
• excessive absence/tardiness
• avoiding or dominating discussions
• references to suicide or harm to others in verbal statements or writing

Interpersonal Problems
• always asking for help with personal problems
• dependency
• hanging around office
• withdrawing
• disruptive behavior
• inability to get along with others
• complaints from other students

Behavioral Problems
• change in personal hygiene
• dramatic weight gain or loss
• frequently falling asleep in class
• irritability
• unruly behavior
• impaired speech
• disjointed thoughts
• tearfulness
• intense emotion

• inappropriate responses
• difficulty concentrating
• physically harming self
• destruction of property
• anxiety and panic
• inability to communicate clearly
• loss of reality contact (e.g., hallucinations, poor thought connections)

Common Causes of Emotional Distress
• relationship problems/break-ups
• family problems
• grief and loss
• divorce of parents
• loneliness
• academic pressure or failure
• serious illness or injury
• difficulty adjusting to university life
• anxiety
• eating disorders
• difficulty adjusting to American culture

• sexual or physical abuse or assault
• identity confusion
• depression
• drug/alcohol abuse
• career indecision
• loss of goal or dream
• low self-esteem
• unplanned or undesired pregnancy
• language barriers
• financial problems

What You Can Do

A faculty or staff member is often the first person to recognize when a student is in distress and to reach out to that student. Faculty and staff are not expected to provide personal counseling to students. Rather, faculty and staff play an important role in encouraging students to use campus resources, including facilitating referrals to the Counseling Center, Health Center and Disability Support Services when needed.

We encourage you to speak directly and compassionately with students when you sense that they are in academic or personal distress. Openly acknowledge that you are aware of their distress, that you are sincerely concerned about their welfare and that you are willing to help them explore their options.

If you are very concerned about a student and need consultation and assistance, call the Counseling Center (410-704-2512) or the Office of the Vice President for Student Affairs (410-704-2270).

On the following pages are some specific issues you may encounter and how you can deal with them.

The following are general suggestions for providing support and encouragement to students:
• Request to see the student in private.
• Briefly acknowledge your observations and perceptions of the student’s situation and express your concerns directly and honestly.
• Listen carefully to what the student is troubled about and try to see the issue from his or her point of view without agreeing or disagreeing.
• Follow up with the student to see how he or she is doing.
• Strange and inappropriate behavior should not be ignored. The student can be informed that such behavior is distracting and inappropriate to the situation.
• Your ability to connect with an alienated student will allow him or her to respond more effectively to your concerns.
• Help the student identify options for action and explore possible consequences; if possible offer to phone or accompany the student to the Counseling Center or other resources.
• Avoid labeling or judging the student’s behavior or the issues presented.
• Inform the student about what can be gained by meeting with a counselor to talk about his or her problems.
• Be open about the limits on your ability to help the student.
• If the student appears to be in imminent danger of hurting self or others, consult the Counseling Center or the Towson University Police immediately. Do not promise to keep threats to self or others secret.
Identifying Troubling Behavior

Troubling behavior from a student usually causes us to feel alarmed, upset or worried.

When faculty or staff members encounter troubling behavior, they feel concerned about the student’s well-being. Students exhibiting troubling behavior may have difficulties in and out of the classroom.

Examples of troubling behavior may include:
- A student who jokes about killing himself or herself.
- A student who is extremely anxious and uncomfortable when giving a presentation in front of the class.
- A student who discloses that his or her loved one was diagnosed with a terminal or serious illness.
- A student who seems to work harder than most students but can’t pass an exam.
- A student who appears to be losing significant weight yet speaks with pride about how little he or she eats.
- A student whose writing appears disjointed and fragmented as though he or she cannot maintain a logical sequence of thought.
- A student who reports what appear to be bizarre or paranoid beliefs.

Interventions for Troubling Behavior

Faculty and staff have options for responding to student behavior that they find troubling.

If a university professional is unsure how to respond to a troubled student, here are some suggestions:
- Seek advice and counsel from the department chair or supervisor, the Office of the Vice President for Student Affairs or the University Counseling Center.
- Initiate a discussion with the student about the behavior that is of concern.
- Refer the student to campus departments or offices that have the necessary expertise and personnel to help him or her.
- If you believe the situation deserves university attention or follow-up, call the Counseling Center (410-704-2512) or the Office of the Vice President for Student Affairs (410-704-2270).

Identifying Disruptive Behavior

Disruptive behavior is student behavior that interferes with or interrupts the educational process of other students or the normal operations of the university.

A disruptive student typically resists interventions or corrective action.

Specific examples of disruptive behavior include:
- A student who verbally abuses or intimidates another
- A student who is overly demanding of faculty or staff
- A student who interrupts the educational process in the class by making hostile remarks out of turn or aggressively taking over the lecture
- A student who notably disrupts the environment outside the classroom

Interventions for Disruptive Behavior

The university professional may find the following procedures helpful when dealing with disruptive behavior:
- Verbally request that the student stop the disruptive behavior.
- If the problem persists, ask the student to leave the class or the area.
- Initiate a discussion with the student about the behavior that is of concern.
- Inform the student of the behavior that needs to change, define a timeline for when the change needs to be made, and explain the consequences if the change does not occur.
- After meeting with the student, document the content of the meeting in writing. It is sometimes helpful and/or necessary to provide the student with a written copy of the requirements and the consequences discussed.
- Contact the department chair or supervisor for advice and support.
- Consult with the Counseling Center to debrief and assist you, other faculty and staff members, and other students. This can be done before or after you initiate discussion with the student. The Counseling Center may also be able to assist the student for whom the disruptive behavior is a symptom of mental health problems.
- Consult with the Office of Student Conduct and Civility Education about possible next steps.

If the situation is serious and requires immediate assistance, call the Towson University Police 410–704–4444
Identifying Threatening Behavior

Threatening behavior from a student typically leaves us feeling frightened and in fear for our personal safety. These behaviors should be taken very seriously.

If you have concerns about immediate safety, call the TU Police at 410-704-4444.

Examples of threatening behavior include:

• A student who implies or makes a direct threat to harm himself, herself or others.
• A student who displays a firearm or other weapon.
• A student who physically confronts or attacks another person.
• A student who stalks or harasses another person.
• A student who sends threatening e-mails, letters or other correspondence to another person.

Interventions for Threatening Behavior

The safety and well-being of the campus community is the top priority when a student exhibits threatening or potentially violent behavior.

Specific interventions include:

• Immediately contact the TU Police (410-704-4444).
• Contact the department chair/supervisor for advice and support.
• Inform the Office of Student Conduct and Civility Education and file a complaint.
• Consult with the Counseling Center to debrief and assist you, other faculty and staff members and other students.

If the situation is serious and requires immediate assistance, call the Towson University Police 410-704-4444

The Suicidal Student

Suicide is the second-leading cause of death among college students. Suicidal persons are often intensely ambivalent about killing themselves and typically respond to help. Suicidal states are often time-limited and have a situational component. Being suicidal does not imply that the person has a mental illness or thought disorder. High-risk indicators include: feelings of hopelessness and futility; a severe loss or threat of loss; a detailed suicide plan; history of a previous attempt; history of alcohol or drug abuse; and feelings of alienation and isolation. Suicidal students usually want to communicate their feelings; any opportunity to do so should be encouraged.

The Suicidal Student Continued

Do:

• Be available to listen, to talk, to be concerned.
• Ask very directly about suicide in order to get a clear answer. (e.g.), “Are you considering suicide?” or “Are you thinking of killing yourself?” (Asking someone if they want to ‘hurt’ themselves is a different question).
• Acknowledge that a threat or attempt at suicide is a plea for help.
• Take the student seriously. Many of those attempting suicide give warning of their intent.
• Refer the student to the Counseling Center or other appropriate resources to provide additional support.
• Care for yourself. Helping someone who is suicidal is hard, demanding and draining work.

Don’t:

• Don’t minimize the situation or depth of feeling, (e.g.), “Oh, it will be much better tomorrow”.
• Don’t be afraid to ask the person if they are so depressed or sad that they are thinking of suicide, or want to hurt themselves. (e.g.), “You seem so upset and discouraged that I’m wondering if you are considering suicide”.
• Don’t overcommit yourself and, therefore, not be able to deliver on what you promise.
• Don’t promise to keep the risk information secret.
• Don’t ignore your limitations.

The Depressed Student

These students show a multitude of symptoms, which may include guilt, low self-esteem, and feelings of worthlessness and inadequacy. Physical symptoms include decreased or increased appetite, difficulty sleeping and low interest in daily activities. Depressed students often show low activity levels and have little energy.

Do:

• Let the student know you’re aware he or she is feeling down and you would like to help.
• Reach out and encourage the student to express how he or she is feeling. The student is often reluctant to talk initially, yet attention from others helps the student feel more worthwhile and comfortable opening up.
• Tell the student of your concern for him or her.

Don’t:

• Don’t say, “Don’t worry,” “Crying won’t help,” or “Everything will be better tomorrow”. Such platitudes have little basis in reality and generally are not experienced as helpful or empathic.
• Although it might feel difficult, ask very directly whether the student might be suicidal, (e.g.), “Are you feeling so badly that you are thinking of suicide?”. Your question will not increase suicidal risk and might save a life.
Dealing with unexpected events and conflicts are primary causes of anxiety. Unknown and unfamiliar situations raise anxiety; high and unreasonable self-expectations also increase anxiety. These students often have trouble making decisions.

Do:
- Let them discuss their feelings. Often, this alone relieves pressure.
- Remain calm and reassure students when appropriate.
- Be clear and explicit.

Don’t:
- Don’t take responsibility for the student’s emotional state.
- Don’t make things more complicated.
- Don’t overwhelm him or her with information or ideas.

Eating disorders are believed to impact 20 percent of college students. Anorexia involves restricting one’s eating, often leading to malnourishment. Bulimia usually entails binge eating followed by excessive exercise or attempts at purging by inducing vomiting or using laxatives. Eating disorders are widely considered to be the most dangerous mental health issues due to a high mortality rate. A person with an eating disorder can be at risk of sudden death even if he or she does not appear emaciated or in ill health. Eating disorders aren’t limited only to women; men also can have an eating disorder.

The presence of an eating disorder in a student’s life not only impacts his or her body image and food intake but can also affect a student’s social and academic functioning. Students may struggle with attention and concentration issues, depressive symptoms, physical pain, low energy, social isolation and low self-esteem. Eating disorders are both medical and a mental health problem.

Do:
- Recognize the danger associated with eating disorder behaviors rather than viewing them as a choice, lifestyle or an attempt to obtain attention.
- Encourage the student to seek out formal help including counseling and a thorough medical assessment.
- Support the student even if she or he is not currently motivated to obtain help.

Don’t:
- Don’t assume that all thin students have an eating disorder, remember that these issues impact students of all shapes and sizes.
- Don’t confront a student by stating “I think that you have an eating disorder”. Instead share your concerns with the student by naming the behaviors you’ve witnessed.
- Don’t encourage the client to “just eat” or “stop throwing up”. Recovery from an eating disorder often requires mental health treatment to alter behaviors and address underlying emotional problems.

A variety of substances are available that provide escape from pressing demands. The most abused substance is alcohol. Alcohol poisoning and other drug-related accidents remain the single-greatest cause of preventable death among college students.

Do:
- Share your honest concern and encourage the student to seek help.
- Be alert for signs of alcohol and drug abuse: preoccupation with drugs, periods of memory loss, deteriorating performance in class.
- Get necessary help from Towson University Police in instances of intoxication.

Don’t:
- Don’t ignore the problem.
- Don’t chastise or lecture.
- Don’t in any manner encourage the behavior.

Estimates put the rate of attempted and/or completed sexual assaults for college students at 1 in 4. Moreover, these assaults are overwhelmingly committed by someone the student knows. Incidents of sexual assault are very traumatic.

The violation of sexual assault can feel intensely humiliating to the victim, making this crime very difficult to talk about. Students who are survivors of sexual assault may have difficulty with concentration or motivation, suffer sleep disturbance, have trouble trusting others and may feel chronically anxious or afraid. Women, as well as men, can be victims of sexual assault.
The Student who has been Sexually Assaulted, Continued

Do:
- Be aware that staff and faculty who learn of an incident of sexual assault must inform the university so that the affected persons can be offered resources and that perpetrators can be dealt with.
- Listen to what they are telling you and believe them.
- Help students to understand and consider their options regarding medical and psychological care, as well as legal or judicial proceedings.
- Encourage them to seek support. Let students know about the free and confidential services offered at the Counseling Center.
- Students can also seek help from the local sexual assault crisis center (Turnaround, Inc., 410-377-8111), or other outside resources. Help with an outside referral is available from the Counseling Center (410-704-2512).

Don’t:
- Don’t ask a lot of prying questions. You may inadvertently send the message that you don’t believe them or that you are questioning how they handled themselves in that situation.
- Don’t blame them for what happened and let them know it was not their fault.
- Don’t be skeptical or show that you don’t believe them. The vast majority of students will not make up stories about being assaulted
- Don’t try to be this person’s only support. Recovery takes a long time and often involves the need for professional services.
- Don’t promise confidentiality — due to your reporting obligations to the university.

The Academically Underachieving Student

While it is easy to conclude that the academically underachieving student is simply unmotivated, the real situation is often more complicated. Students may be preoccupied with situational and family problems, or have emotional problems that are distracting and disabling. They may have learning disabilities, Attention Deficit Disorder or substance abuse problems. Previous failures for any reason can engender a hopeless outlook and a defensive attitude of “I don’t care”.

Do:
- Inquire compassionately as to what the problems are.
- Provide enough time for the student to open up. His or her initial defensiveness might be off-putting to an instructor who values involvement and dedication in students.
- Help the student assess the source of underachievement, e.g., distractions, preoccupations, emotional problems, depression, difficulties with underlying academic and study skills.
- Empathically address the difficulty of dealing with a failure mentality.

Don’t:
- Don’t take the student’s problem personally or be insulted that they do not find the class engaging.
- Don’t assume too quickly the problem is mere laziness.
- Don’t punish the student for lack of involvement.
- Don’t dismiss the student and problem as unworkable in one meeting.

Campus Resources

How to Make a Referral

Presenting yourself as knowledgeable about campus resources can ease a student’s discomfort about seeking help. Let the student know you are concerned about them and their well-being. Assist the student in understanding that a referral is not a rejection of them. You will still be interested in following-up to see that they are getting the help they need. Here are some suggestions:

Emergency Referrals:
- When the student is in imminent danger of hurting self or others
  - Take the student seriously; show concern.
  - Acknowledge the student’s call for help.
  - Ask the student if he or she is so depressed or sad that he or she is thinking of suicide, or wants to hurt self or others.
  - If the Counseling Center is open, call the Counseling Center (410-704-2512) for a consultation. You may be asked to walk the student over to the Center while immediate help is arranged.
  - Call the TU Police (410-704-4444) if the student is judged to be in clear immediate danger, if it is after business hours, or if the student is not cooperative with an immediate referral to appropriate help.

Non-Emergency Referrals:
- Encourage the student to contact the appropriate department directly to schedule an initial appointment. Suggest that the student call from your office as a courtesy or if you believe your extra support and encouragement will help the student make the contact.
- Discuss confidentiality and privacy of services that are outlined on the next pages of this booklet. Remember that you can call the relevant office immediately for more information about this or any other question the student may have.
- Provide information on other appropriate campus resources using the phone numbers listed at the back of this booklet.
- With your student’s permission, consider calling the Counseling Center (410-704-2512) while the student is with you. This can help the student make a good initial contact with the Center and be more willing to follow through with a referral.
- Arrange a follow-up meeting with the student to ensure that the student has followed through with plans to get help. With the student’s permission, you might be able to receive some advice about how to further support the student without becoming primarily responsible for providing help.
Counseling Center Services

Brief Individual and Couples Counseling
Brief individual counseling offers a private setting for resolving personal difficulties and achieving personal growth. Couples counseling provides a safe atmosphere for couples to examine and improve their relationship.

Group Counseling
Counseling groups are particularly helpful for many concerns, giving members an opportunity to share experiences, gain support, solve problems and practice new skills.

Psychiatric Services
Psychiatry consultants are available for those situations in which psychiatric evaluation and medication should be considered.

Alcohol and Drug Counseling
Specialized services are available for those who are troubled either by their own or someone else’s abuse of alcohol or drugs. Various individual and group counseling programs are offered, and may be approved for students with university sanctions or other legal charges. In most cases, the waiting time for these services is minimal. Should the needed services not be quickly available, the student can be assisted with a community referral.

Referral
When needed, Counseling Center staff members can assist the student with a high quality outside referral that is compatible with the student’s health insurance. We include follow-up arrangements in our procedure in an attempt to make sure the referral has been successful.

Outreach and Consultation
The Counseling Center staff provides workshops and programs to the Towson University community on various topics, including time management, assertiveness training, stress management, and communication skills. These workshops and programs may be customized to meet the needs of the situation. Faculty and staff are invited to request programs when they perceive a need. Staff members are also available to consult with students, faculty and staff on various topics, including improving the campus environment, diversity issues or other issues relating to the quality of life in our University community.

Consultation About a Possible Student in Distress
Counseling Center staff clinicians are available any time we are open about the welfare of a student in distress as described in this booklet. We are also available to consult about any concerning campus situation or group of students in distress. In an after-hours emergency, help can be obtained by calling the TU Police (410-704-4444).
Health Center Services

- Fast Track Clinic (for simple complaints needing same day appointments)
- Allergy Shot Clinic
- Birth Control Services
- Treatment of Common Illnesses and Minor Injuries
- Diet and Nutrition referrals to campus Nutritionist
- Emergency Contraception
- Hormonal Contraceptives and contraceptive counseling
- Well woman annual exams and problem GYN visits
- Health Education Services
- Rapid HIV Testing
- Immunizations
- Lab services (in-house rapid tests for Strep throat, mono, flu, etc.) and specimen collection for outside referral lab tests
- Physical Exams
- Minor Surgery
- Formulary of commonly prescribed medications
- Referral Network of Specialists in Towson Community
- Routine and Sports Related Injuries
- Sexually Transmitted Disease (STDs) testing and treatment

Urgent Problems

Most urgent problems and routine problems do not warrant a costly visit to a hospital emergency room. They often can be handled much more quickly at the TU Health Center or a local urgent care center. When the Health Center is open, go there. Call ahead if possible (410-704-2466), to let us know you are coming. If the Health Center is closed, calling the same number will connect you to our Nurse Advice Line for assistance.
Medical Emergencies and Urgent Care, Continued

St. Joseph's Medical Center
410-337-1000
7601 Osler Drive, Towson, MD.
www.sjmcmd.org

Greater Baltimore Medical Center Urgent Care
410-849-2000
6550 North Charles St., Towson, MD.
www.GBMC.org

Disability Support Services
Administration Building, Suites 232-235
Hours: Monday-Friday, 8 a.m.-5 p.m.

What is Disability Support Services?
Disability Support Services (DSS) is the office on campus that works with undergraduate and graduate students with all types of disabilities to ensure equal educational opportunities. The types of disabilities include medical health disabilities, as well as learning disabilities, attention-deficit/hyperactivity disorder, autism, brain injuries, speech and language disabilities, physical/mobility and medical disabilities, and vision and hearing impairments. The office also works with students with temporary conditions (lasting six months or less, as appropriate).

What is a Disability?
Under the ADAAA (Americans with Disabilities Amendments Act), a disability is a physical or mental impairment that substantially limits one or more major life activities. Major life activities include but are not limited to caring for oneself, performing manual tasks, seeing, hearing, eating, sleeping, walking, standing, lifting, bending, speaking, breathing, learning, reading, concentrating, thinking, communicating, and working. While some disabilities are apparent, or visible, the majority of people have invisible disabilities. While an invisible may not be apparent, the impact of the condition is real. It is important to note that some people may have more than one disability.

A mental health disability or mental illness is a health condition that impacts a person’s thinking, feelings, or behavior (or all three) and causes the person distress and difficulty functioning. The course of a mental illness is unique for each person and may limit one or more major life activities such as learning or working. Some examples of mental health disabilities include major depression, bipolar disorder, schizophrenia, anxiety disorder and post-traumatic stress disorder.

Reasonable Disability Accommodations:
Students who have a diagnosed mental health condition, or other disabling condition, may be eligible to receive reasonable accommodations. A reasonable accommodation is a modification or adjustment to a course or program that enables a qualified student with a disability to have an equal opportunity to participate. Examples of accommodations in an academic setting include access to class notes, extended test time, and a reduced distraction test environment.

Accommodations are determined individually by the DSS office based on an intake interview with the student, documentation of the student’s disability, and if needed, consultation with faculty. There is often more than one way to accommodate a situation or activity, but each student is still expected to meet the core standards of a course or program and comply with the TU Code of Conduct.
Scheduling an Initial Appointment with DSS:
Students who wish to request an accommodation should make an intake appointment by calling or visiting the DSS office between the hours of 8 a.m. and 5 p.m., Monday through Friday. In order to register with DSS, the student will be asked to provide documentation of his or her disability and to complete a DSS application. Information regarding the type of documentation needed and the application are available at the DSS office and on-line at: www.towson.edu/dss/studentguide.

If a student is in distress or has an urgent need, we will make every attempt to see the student the same day or as soon as possible.

What DSS-Registered Students Should Expect:
When a student seeks to register with DSS, the student is assigned to a DSS specialist with an area of expertise that matches the student’s needs. In addition to classroom and testing accommodations, the student may be eligible to receive support services from the DSS specialist including disability consultation, advocacy assistance, supplemental academic advising, learning and study skills help, as well as referral information. Students with disabilities may also be eligible to receive accommodations for internships. These types of accommodations typically require DSS and the student to work closely with faculty in determining what accommodations would be reasonable and appropriate given the internship environment.

All DSS-registered students are provided with memos to give to their instructors that specify their approved accommodations. Students are required to obtain their memos from the DSS office and give them to their instructors as early as possible each term. Throughout the term, DSS specialists are available to provide assistance to both students and faculty in implementing accommodations as they relate to specific course requirements.

Confidentiality
Information related to a student’s disability is confidential and is not part of the student’s academic record. Disability-related information may be shared with faculty or staff on a need-to-know basis in order to provide accommodations and services, with permission of the student or as otherwise permitted under the university’s student records policy and applicable laws.

Making a Referral
DSS strongly encourages students with disabilities to talk with their instructors about the accommodations specified in their memos and the impact of their particular disability on classroom learning and test-taking. Sometimes students disclose that they think they may have a disability or have a history of a disability but have not registered with DSS. These students should be referred to DSS and encouraged to schedule an appointment to meet with a DSS specialist who will discuss the student’s concerns and needs, and provide appropriate assistance.

Also, if a student has not disclosed a disability but you suspect he or she may have one, our staff is available to consult with you about how to talk with the student and determine if a referral to our office would be appropriate.

Please note that DSS also provides accommodations for TU faculty and staff with disabilities. For further information on Disability Support Services, please call us or visit our website.
Student Conduct & Civility Education

Administration Building 236
Hours: Monday–Friday, 8 a.m–5 p.m.
410-704-2057

Mission
The Student Conduct & Civility Education Office in partnership with the university community:
• Promotes learning and student development by adjudicating alleged student misconduct
• Contributes to the educational mission and core values of the university community through the implementation of the Code of Student Conduct
• Assures standards of acceptable behavior that protects student’s health, safety, welfare and property

Scheduling an Appointment
To schedule an appointment, a student can visit the Student Conduct & Civility Education Office or call the office (410-704-2057) between the hours of 8 a.m. and 5 p.m., Monday through Friday. Another way to reach the Student Conduct & Civility Education Office is by e-mailing studentconduct@towson.edu. In case of emergency, contact the TU Police (410-704-4444) prior to contacting this office.

What to Expect from Student Conduct & Civility Education Office
Our caring staff will take the time to listen to a student’s concerns. We are experienced with the excellent resources available to students and will be able to help refer the student to the most applicable resource for his or her needs.

Student Conduct & Civility Education Office serves as a resource to faculty and staff for best practices in dealing with disruptive students. The Student Conduct & Civility Education Office staff offers suggestions and guidelines for faculty and staff to follow when addressing disruptive behavior in the office or the classroom. Also, the Student Conduct & Civility Education Office staff is available to attend faculty meetings and staff meetings to discuss procedures for handling disruptive students and answer any questions the attendees may have.

As a result of more significant or repetitive behavior, Student Conduct & Civility Education Office may also charge students with appropriate violations of the Code of Student Conduct, after receiving a report from a faculty or staff member.

Veteran’s Office

Psychology Building, Room 107
Hours: Monday–Friday, 8:30 a.m–5 p.m.
410-704-2991

Student veterans are becoming more and more prevalent on campuses across the country. They are often met with curiosity, misunderstanding, and in some cases anxiety. While many veterans are returning without any physical signs of trauma, what lies beneath can be complicated to understand especially for the veteran. Post Traumatic Stress Disorder (PTSD) can be a result of any traumatic experience and is not isolated to the veteran population. Nonetheless it can affect mood, communication skills, and motivation. Returning veterans may also be struggling with less severe issues as a result of their service that includes Traumatic Brain Injury (TBI), Combat Stress, and simple readjustment issues.

Do:
• Talk to the student about their experiences outside the classroom.
• Gain their trust. Trust is a large part of military culture and is thought to be earned not given.
• If there is a concern regarding their behavior, bring it up to them in private.
• If you have questions or concerns regarding a student veteran in class or on campus, please contact the University Veterans Center (410-704-2991), which is located in room 107 in the Psychology Building.

Don’t:
• Single them out in class for their military service. If they are not comfortable with acknowledging it to the class then they won’t be comfortable with you doing it.
• Be under the impression that they are going to freak out in the middle of class and make a scene.
• Assume that since they served in the military that they have been diagnosed or may suffer from a mental disorder.
• Ask intrusive questions about their combat experiences, such as whether they may have killed or injured anyone.
Student Concerns Committee

Mission

The mission of the Towson University Student Concerns Committee is to coordinate the support resources of Towson University to assist students in maintaining satisfactory academic progress and in promoting their health and well-being.

Purpose

The purpose of the Student Concerns Committee is to serve as a central network focused on prevention and early identification of, and intervention in community situations involving students experiencing extreme distress or engaging in harmful or disruptive behaviors. The team will develop strategies and provide consultations to the university community when concerns arise about students’ well-being or when behavior exists that is potentially harmful to self, others, or is disruptive or threatening. This team will regularly assess these situations in the university community and will recommend actions in accord with existing university policies.

Responsibilities

- Coordinate the university response to potentially harmful or disruptive situations.
- Develop specific strategies to manage potentially harmful or disruptive behavior with regard to safety and rights of others and minimize the disruption to the university community.
- Make recommendations to university officials on appropriate action consistent with university policies and procedures.
- Receive, gather and catalog information about difficult situations involving students, coordinating with the chairperson of the Student Concerns Committee, Dr. Jana Varwig, Associate Vice President for Student Affairs (410-704-2270).

Other Resources

TU Resources

- Academic Achievement Center
  410-704-2291
- Cook Library 324
- Academic Advising Center
  410-704-2472
- Lecture Hall
- Campus Ministry
  410-704-2051
- University Union 208B
- Career Center
  410-704-2233
  7800 York Road, Suite 206
- Speech, Language & Hearing Clinic
  410-704-3095
- Olympic Place, Suite 200, York Road
- Housing and Residence Life (HRL)
  410-704-2516
  West Village Commons 309
- International Student and Scholar Office
  410-704-2421
- Administration Building 246
- Center for Student Diversity
  410-704-2051
- University Union 313
- Student Activities
  410-704-3307
- University Union 217
- University Police
- Emergency: 410-704-4444
- General Info: 410-704-2134
- Public Safety Building
- Vice President for Student Affairs
  410-704-2055
- Administration Building 236
- Women’s Resources
  410-704-2051
- University Union 313

Community Resources

- Baltimore County/Baltimore City Police: 911
- Center for Eating Disorders (at Sheppard Pratt Hospital)
  410-938-5252
- www.eatingdisorder.org
- Grass Roots Crisis Intervention Hotline
  410-531-6677 or 1-800-422-0009
- www.grassrootscrisis.org
- Mental Health Association of Maryland
  410-992-4258 or 410-992-6815
- Baltimore Metropolitan exchanges
  301-596-3999 - Montgomery County, D.C., Laurel, Bowie, and some Columbia exchanges
- www.marylandpsychology.org/
- Maryland Youth Crisis Hotline
  1-800-422-0009
- National Suicide Prevention Lifeline and Veterans Crisis Line
  1-800-273-TALK (8255)
  1-800-SUICIDE (784-2433)
- Sheppard Pratt Hospital Therapy Referral
  410-938-5000
- Turnaround
  410-377-8111
- www.turnaroundinc.org
- Sexual Assault/Domestic Violence
  24-Hour Hotline
  410-828-6390

Towson University’s policies, programs, and activities comply with federal and state laws and University System of Maryland regulations prohibiting discrimination on the basis of race, color, religion, age, national origin, sex, disability, and sexual orientation.

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