



What is a

What is a Crisis?

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- “A crisis,” as defined in Crisis Intervention Book 2: The Practitioner’s Sourcebook for Brief Therapy, “is an upset in a steady state, a critical turning point leading to better or worse, a disruption or breakdown in a person’s or family’s normal or usual pattern of functioning. The upset, or disequilibrium, is usually acute in the sense that it is of recent origin.”¹ A crisis constitutes circumstances or situations which cannot be resolved by one’s customary problem-solving resources.
- A crisis is different from a problem or an emergency. While a problem may create stress and be difficult to solve, the family or individual is capable of finding a solution. Consequently, a problem that can be resolved by an individual or a family is not a crisis.
- An emergency is a sudden, pressing necessity, such as when a life is in danger because of an accident, a suicide attempt, or family violence. It requires immediate attention by law enforcement, CPS, or other professionals trained to respond to life-threatening events. If a situation can wait 24 to 72 hours for a response, without placing an individual or a family in jeopardy, it is a crisis and not an emergency.

Elements of a Crisis

- The three basic elements of a crisis—a stressful situation, difficulty in coping, and the timing of intervention—interact and make each crisis unique.

Client Feelings During Crisis

- Bewilderment: Experiencing new and unusual feelings.
- Confusion: Mind is muddled and not working well.
- Danger: Feelings of tension, fear, and impending



WHAT IS A CRISIS?

Stress-Producing Situations

Everyone experiences times when they feel upset, disappointed, or exhausted. When such feelings are combined with certain life events or situations, they often lead to mounting tension and stress. There are five types of situations or events that may produce stress and, in turn, contribute to a state of crisis:

- **Economic Situations** – sudden or chronic financial strain is responsible for many family crises, such as loss of employment, a theft of household cash or belongings, high medical expenses, missed child support payments, repossession of a car, utilities cut off from services, money “lost” to gambling or drug addiction, and poverty.
- **Community Situations** – neighborhood violence, inadequate housing, a lack of community resources, and inadequate educational programs illustrate some ways the community may contribute to family crises.
- **Significant Life Events** – events that most view as happy such as a marriage, the birth of a child, a job promotion, or retirement can trigger a crisis in a family; a child enrolling in school, the behaviors of an adolescent, a grown child leaving home, the onset of menopause, or the death of a loved one can also be very stressful life events.
- **Natural Elements** – crises are created by disasters such as floods, hurricanes, fires, and earthquakes, or even extended periods of high heat and humidity, or gloomy or excessively cold weather.



STRESS-PRODUCING SITUATIONS



Assisting the Suicidal Student

A Student is suicidal when there is imminent life-threatening or violent behavior to self or others. It is a crisis if the student:

- Expresses imminent suicidal thoughts and/or a plan
- Exhibits bizarre or unusual behavior
- Expresses imminent homicidal thoughts
- Experienced recent domestic or sexual assault
- Loses emotional control severely
- Shows gross impairment in thinking ability

Get Help Immediately!

Call the:

Ten Broeck Hospital of Jacksonville

(904) 724-9202: Ask for Immediate Mobile Evaluation and describe the crisis.

Police: Campus Security and 911 when there is imminent life-threatening or violent behavior to self or others.

It is important to be aware of the feelings people typically experience during a state of crisis. A crisis can have a devastating impact on one's senses and psychological functioning. However, that impact is often short lived when interpreted and dealt with correctly.

SUICIDE

SUICIDE

WHAT CAN WE DO?

Steps in making a referral for a distressed (non-suicidal) students

Step 1 - Listening

- As students share concerns, listen carefully and show interest.
- Try to speak to the student in person if you receive an e-mail or voicemail that suggests the student is in need of further assistance.
- Limit criticism even if you think it is constructive.
- Respect the student's values and beliefs.
- Avoid offering advice; listening provides the student with a feeling that his or her concerns have been understood.

Step 2 - Expressing Concern

- Explain your concerns and your observations of specific behaviors.
- Acknowledge that you understand the student might be going through a hard time and that you would like to help.
- Assure the student that seeking counseling is an indication of strength and maturity.

Step 3 - Making a Referral

- Share your knowledge of the referral source. Cite personal experience or cases of other students who have benefited from counseling.
- In cases that do not involve concerns of suicide, provide the student with the name, location and phone number of the referral.
- It is best for you to document your conference with the student, the reasons for your concern, the actual referral and the student's receptivity.
- Consider allowing the student to call the referral source from your office.

Step 4 - Follow-up

- Call the referral source and verify that the student arrived safely and is seeking help
- Call student one week (?) later to check

Incidents of Child Abuse

If a student reports an incident of physical, sexual, emotional abuse or neglect of a child, you must report the incident to the Florida Department of Children and Families (DCF). In the State of Florida, School Officials or Other School Personnel are mandatory reporters of suspected child abuse or neglect according to Florida Statute (§ 39.202, F.S.).

DCF describes harm in the following ways:

- **ABUSE:** Non-accidental infliction of physical or psychological injury or sexual abuse by a parent, adult household member, or other person responsible for care of the child.
- **NEGLECT:** Failure/omission by a caretaker to provide the care, supervision, services or protection necessary to maintain physical and mental health.
- **THREATENED HARM:** A situation, circumstances or behavior which lead a prudent person to have reasonable cause to suspect abuse or neglect has occurred or may occur in the immediate future if no intervention is provided.



<http://www.dcf.state.fl.us/abuse/definitions.shtml>

CHILD ABUSE

CHILD ABUSE

WHAT CAN WE DO?

Reporting Suspected Abuse

Print the following document as a valuable resource regarding the reporting process:

<http://www.dcf.state.fl.us/abuse/publications/mandatedreporters.pdf>

Make a report

- By telephone: 1-800-96ABUSE (1-800-962-2873)
- By Fax: 1-800-914-0004
- By TDD: 1-800-453-5145
- DO NOT delay in reporting even if you do not have all of the relevant information. Let the Abuse Hotline Counselor make an assessment of the available information.
- If possible, be able to describe “who was involved, what occurred, when and where it occurred, why it happened, the extent of any injuries sustained, what the victim said happened, and any other pertinent information are very important.” p. 6 of Reporting Abuse of Children and Vulnerable Adults.
- Have ready: name, date of birth (or approximate age), race, gender, for all adult and child subjects.
- Be prepared to provide your name when reporting. Your name is entered into the report but will be held confidential. Use your discretion when determining whether or not you will inform the caretaker that you are reporting the suspected or reported abuse.

Helpful Resources Regarding Child Abuse & Reporting of Suspected Abuse

Helpful Resources Regarding Child Abuse & Reporting of Suspected Abuse:

Department of Children and Families Abuse Website

<http://www.dcf.state.fl.us/abuse/>

National Clearinghouse on Child Abuse and Neglect Information

<http://nccanch.acf.hhs.gov/>

Mandatory Reporting Legal Information & Definitions

<http://www.childwelfare.gov>



Incidents of Adult Abuse

Adult abuse comes in many forms.

Physical abuse can consist of:

- slapping, hitting, choking, kicking, shaking, throwing objects, threats of violence, physical restraint.

Emotional abuse is seen in:

- name calling, verbal attacks, humiliation, destroying keepsakes, harming pets, and extreme jealousy.

Sexual abuse consists of:

- unwanted touching and forcing sexual acts.

Economic abuse may present itself as:

- refusing to share control of money, or not allowing a partner to work.

Although there is no mandatory reporting of abuse to adults, vulnerable or otherwise, the Florida Abuse Hotline will accept reports of vulnerable adult abuse.

adopted from Hubbard House website:

<http://www.hubbardhouse.org/domestic/whatisabuse.asp>

ADULT ABUSE

ADULT ABUSE

WHAT CAN WE DO?

Some students may not be currently distressed about the abuse, but will want to process the effects of their current functioning. If this is the case, follow the **STEPS IN MAKING A REFERRAL FOR A DISTRESSED (NON-SUICIDAL) STUDENT.**

Rape Recovery Team Helpful Phone Numbers

Women's Center of Jacksonville

Rape Recovery Team

904-722-3000

www.womenscenterofjax.org

Emergency on-call pager

904-617-7888

Quigley House (Clay County)

904-284-0061

www.quigleyhouse.org

Rape Crisis Hotline

904-355-RAPE (7273)

Hubbard House (Duval, Baker, Nassau Counties)

904-354-3114

www.hubbardhouse.org

Betty Griffin House (St. John's County)

904-824-1555

www.bettygriffinhouse.org

Micah's Place (Nassau County)

904-225-9979

www.micahsplace.org

Child Abuse Hotline

800-962-2873



SEXUAL ASSAULT

SEXUAL ASSAULT

WHAT CAN WE DO?

Incidents of Sexual Assault

We may see a student under extreme distress, who has been a victim of sexual assault or attempted sexual assault. Our main role in this situation will be to connect the student to the Rape Recovery Team organized through the Women's Center of Jacksonville.

Step 1 - Listening

- As students share concerns, listen carefully and show interest.
- Try to speak to the student in person if you receive an e-mail or voicemail that suggests the student is in need of further assistance.
- Limit criticism even if you think it is constructive.
- Respect the student's values and beliefs.
- Avoid offering advice; listening provides the student with a feeling that his or her concerns have been understood.

Step 2 - Expressing Concern

- Explain your concerns and your observations of specific behaviors.
- Acknowledge that you understand the student might be going through a hard time and that you would like to help.
- Assure the student that seeking counseling is an indication of strength and maturity.
- Share your knowledge of the referral source. Cite personal experience or cases of other students who have benefited from counseling. Express to the student that trained professionals will be with them throughout the reporting process.

- The Women's Center of Jacksonville's Rape Recovery Team works to streamline and simplify this process so that victims and their families can feel that recovery is possible. The Rape Recovery Team responds quickly and compassionately to survivors of sexual assault whether or not they have chosen to report the assault to the police. On call 24-hours a day, 7 days a week, trained Advocates provide crisis intervention, assist victims in understanding their rights and options, guide them through the medical treatment and legal process, and provide the emotional support necessary for recovery. The Rape Recovery Team also includes a licensed mental health professional who provides counseling services, a rape educator who specializes in community education, and a volunteer coordinator who recruits and trains volunteers.

See www.womenscenterofjax.org for more information.

Step 3 - Contacting the Rape Recovery Team

- Call or have the student call the Women's Center of Jacksonville's Rape Recovery Team at 722-3000
- Wait with the student until the team member arrives
- It is best for you to document your conference with the student, the reasons for your concern, the actual referral and the student's receptivity
- Follow-up with the student

Workplace Violence (Disruptive, Threatening, or Violent Behavior)

Disruptive behavior

- Disturbs, interferes with or prevents normal work functions or activities. Examples: yelling, using profanity, waving arms or fists, verbally abusing others and refusing reasonable requests for identification.

Threatening behavior

- Includes physical actions short of actual contact/injury (e.g. moving closer aggressively), general oral or written threats to people or property, ["You better watch your back" or "I'll get you"] as well as implicit threats ["you'll be sorry" or "this isn't over"].

Violent behavior

- Includes any physical assault with or without weapons; behavior that a reasonable person would interpret as being potentially violent [e.g. throwing things, pounding on a desk or door, or destroying property], or specific threats to inflict physical harm [e.g. a threat to shoot a named individual].

IN AN EMERGENCY

- Disturbs, interferes with or prevents normal work functions or activities. Examples: yelling,
- For crimes in progress, violent incidents or specific threats of imminent violence, call 9-1-1.
- Immediately contact the campus security or have someone call for you if an individual
- makes threats of physical harm toward you, others, or him/herself;
- has a weapon; or
- behaves in a manner that causes you to fear for your own or another's safety
- Use a phone out of sight/hearing of the individual. The police will respond and take appropriate action.
- Do not attempt to intervene physically or deal with the situation yourself. It is critical that the police take charge of any incident that can or does involve physical harm.
- Get yourself and others to safety as quickly as possible.
- If possible, keep a line open to police until they arrive. If you cannot stay on the line, call 911 and the dispatcher will direct the police to you. The more information the police receive, the more likely they can bring a potentially violent situation to a safe conclusion.

WORKPLACE VIOLENCE

WHAT CAN WE DO?

How to respond to disruptive, threatening, or violent behavior

STEP 1: General response to disruptive behavior (no threats or weapons)

- Respond quietly and calmly. Try to defuse the situation.
- Do not take the behavior personally. Usually, the behavior has little to do with you, but you are used as a target in the situation.
- Ask questions. Respectful concern and interest may demonstrate that aggression is not necessary
- Consider offering an apology. Even if you've done nothing wrong, an apology may calm the individual and encourage cooperation. "I'm sorry that happened. What can we do now that will solve the problem?"
- Summarize what you hear the individual saying. Make sure you are communicating clearly. In crisis, a person feels humiliated and wants respect and attention. Your summary of the individual's concerns reflects your attention. Focus on areas of agreement to help resolve the concern.
- If this approach does not stop the disruption, assess whether the individual seems dangerous. If in your best judgment he/she is upset but not a threat, set limits and seek assistance as necessary.

STEP 2: Step 1 response ineffective, individual DOES NOT seem dangerous

- Calmly and firmly set limits. "Please lower your voice. There will be no disruptions in this office." "Please be patient so that I can understand what you need and try to help you."
- Ask the individual to stop the behavior and warn that official action may be taken. "Disruption is subject to University action. Stop or you may be reported."
- If the disruption continues despite a warning, tell the individual that he/she may be disciplined or prosecuted, state that the discussion is over, and direct them to leave the office. "Please leave now. If you do not leave, we will call the Police."

- If the individual refuses to leave after being directed to do so, state that this refusal is also a violation subject to discipline, exclusion from work, or arrest.

STEP 3: Step 1 response ineffective and the individual SEEMS DANGEROUS

- If possible, find a quiet, safe place to talk, but do not isolate yourself with an individual you believe may be dangerous. Maintain a safe distance, do not turn your back, and stay seated if possible. Leave the door open or open a closed door, and sit near the door. Be sure a co-worker is near to help if needed.
- Use a calm, non-confrontational approach to defuse the situation. Indicate your desire to listen and understand the problem. Allow the person to describe the problem.
- NEVER touch the individual yourself to try to remove him/her from the area. Even a gentle push or holding the person's arm may be interpreted as an assault by an agitated individual who may respond with violence towards you or file a lawsuit later.
- Set limits to indicate the behavior needed to deal with the concern. "Please lower your voice." "Please stop shouting (or using profanity) or I'll have to ask you to leave."
- Signal for assistance. The individual may be antagonized if you call for assistance so use a prearranged 'distress' signal to have another staff member check on you to determine how you are. If you need help, the co-worker should alert your supervisor and/or the police.
- Do not mention discipline or the police if you fear an angry or violent response.
- If the situation escalates, find a way to excuse yourself, leave the room/area and get help. "You've raised some tough questions. I'll consult my supervisor to see what we can do."

Referral Agencies

A great resource for referral agency information is the 24-hour information and crisis assistance network organized through United Way. The system, also called 2-1-1, is available both by telephone and internet. This is a public service, so you can also provide this information to students who may need assistance with referrals for support services. 2-1-1 is for NON-emergency assistance only. Callers needing emergency medical, fire or police aid should call 9-1-1.

Daniel Memorial Project Prepare

4203 Southpoint Blvd., Jacksonville, 32216
– 296-1055 (main #), www.danielkids.org. They take Medicaid, taking new clients depends on the service. Project Prepare does have a waiting list but that changes frequently. JaxBuild has a specific enrollment time. Provides following services:

- Transitional living program for young adults in crisis
- independent living skills training (ages 16-21 only, contact-Lesley Williams or Harold Porter)
- one-to-one case management
- vocational training (JaxBuild, contact-Robin Rountree)
- outpatient counseling (contact-Lynelle)
- 24 hr on call

Family Counseling Services

1639 Atlantic Blvd., Jacksonville, 396-4846 Services provided:

- short term outpatient counseling
- No psychiatric counseling
- Do not take insurance, pay on sliding scale based on gross income
- Offices in San Marco and Orange Park
- Do not administer meds

Mental Health Center

695-9145. Services provided:

- Outpatient medicine management
- Inpatient/outpatient counseling

Link Program

305 N. Washington Street, 358-2411. Services Provided:

- Homeless outreach
- Mental health counseling for the homeless
- Mental health case management

Mental Health Resource Center

3333 W. 20th Street and 11820 Beach Blvd, 642-9100 or 595-9145. Services Provided:

- Inpatient/outpatient mental health counseling
- Accept insured and uninsured, Medicaid
- Pay on sliding scale based on income

Renaissance Behavioral Health Systems, Inc.

900 University Blvd. N., Suite 500, 743-1883. Services Provided:

- job coaching
- life skills training

Child Guidance Center

5776 Saint Augustine Road (Main office), 448-4700

Provides the following services for children up to age 18:

- Outpatient Psychiatry
- Case Management
- Psychological counseling
- School based – therapists in school
- Family Case Management

REFERRAL AGENCIES

Family and Mental Health Counseling

Family Life Center

(connected with Saint Vincent's Hospital)

2577 Park Street, Jacksonville, 32204

308-7474

Have 3 counselors on staff, take no insurance, can pay on sliding scale. Services offered: a retreat for couples in distress, mental health counseling

2nd Chance

9951 Atlantic Blvd., Suite 126, Jacksonville, FL

(904) 724-9960

- Individual Counseling
- Crisis Counseling

Catholic Charities – Emergency Assistance

Department – 354-3416 – this number connects you with a recording that lists the services below. Choose the service needed and you are connected with a message explaining the appointment procedure for obtaining services.

- Rent and Mortgage
- Adoption
- Utility
- Post-adoption
- Deposit (for renting)
- Maternal and Children's Services
- Food
- Counseling
- Transportation
- Refugee Resettlement
- HIV/AIDS
- Information Seminar on Reverse Mortgages

Ways to Access the 2-1-1 Network

- Dial 2-1-1
- If your phone does not allow you access to 2-1-1, call 904-632-0600
- Toll-free 866-318-0211
- The website is: <http://www.nefl211.org/>
- Click on the Search for Help button to open up the agency search. The agency search function is available for services across the state and country, so try to enter city and state information to narrow the search. Selecting a keyword from the list is also an effective in limiting the search.

Student Records and Privacy

The following records are maintained in students' files: application for admission, transcripts from other colleges, academic history records and general correspondence.

The following information about individual students is classified as "directory information" and will be released upon request to any person. Individual students or parents (if eligible) have a right to submit a request in writing to the custodian of student records that all or any part of the directory information NOT be released.

1. Name
2. Major field of study
3. Dates of attendance
4. Degrees, certificates, or diplomas received
5. Honors received

No other information than that listed above may be released to any person. This is pursuant to Public Law 93-380, The Family Educational Rights and Privacy Act of 1974. This information may also be found in the college catalog under Student Rights and Responsibilities.

