AIDING STUDENTS IN DISTRESS ABROAD

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Overview

- Introductions
- Relationship-building pre-departure
- Self Care
- Recognizing students in distress
- Assessing risk/severity
- Application
- Summary
- Questions & Answers
Introductions

• Please share the following:
  • Name
  • Length of time involved with Study Abroad programs
  • 1 thing you enjoy about your work/experiences with Study Abroad programs
  • What you hope to gain from today’s presentation
Relationship-building Pre-Departure

- Emphasize prevention
  - MH management plan(s) for all students

- Open Door policy
  - Role of mentorship

- Encourage self-awareness & help-seeking

- Operate from harm reduction model re: alcohol use
  - Social norms
  - Drink responsibly
  *Highest cause of MH incidents

- Building Commonality & Connectivity
  - Everyone at one time or another experiences some form of distress → healthy coping
Relationship-building Pre-Departure

- **How to Engage: Connecting through dialogue**
  - Open questions & Active listening
  - Avoid using labels
  - Avoid a barrage of multiple questions
  - Normalize
  - Strengths-based perspective

- **Cultural Considerations:**
  - Be aware of issues surrounding mental health – especially stigma, discrimination, & privilege
  - Be Aware of words, voice tone, body language & facial expressions
Stress – double edged sword
Stress affects all aspects of you

Thoughts
- Fears/worries—negative lens
- Past/future
- Difficulty focusing
- No motivation
- Rumination
- Worthlessness

Physical Reaction
- Headaches
- Muscle tension
- Stomach/GI
- Fatigue
- Appetite changes
- Weight changes
- Sleep changes
- Anxious
- Irritable
- Unsettled/restlessness

Mood
- Depressed mood
- Burnt out
- Numbness

Behaviour
- Procrastination
- Isolation/withdrawal
- Flurry of activity
- Distractions
Self Care

• Self care is vital to optimal functioning: overall health, learning, & efficiency! It MUST be prioritized!
  • This is true for students and program leaders

IT IS NOT SELFISH TO REFILL YOUR OWN CUP, SO THAT YOU CAN POUR INTO OTHERS. IT’S NOT JUST A LUXURY. IT IS ESSENTIAL.
Recognizing Students in Distress

- Headaches
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Recognizing Students in Distress

“YELLOW FLAGS”
- Verbal acknowledgement of stress or you can observe they are stressed

Explore, Support, Problem Solve: ALLOW AGENCY

“RED FLAGS”
- You may or may NOT see that they are different somehow
  - Behaviorally: not attending or completing responsibilities, isolating
  - Suicidal ideation: intent and plans

Stay Calm, MANAGE YOUR OWN ANXIETY,
Assess, Support, Problem Solve: IMMEDIATE SOLUTIONS

- At-risk: trauma, recent grief/loss, acute/chronic stressors
- Culture: Students of color, international students may present differently than white American students

**You need to be OK in order to notice**
Assessing Risk/Severity

- **Should the student stay or go?**
  - **Factors to consider:**
    - What resources are available in the host country?
    - What is the feasibility & sustainability of a safety plan for the immediate future?
    - Will stabilization occur best here or in the U.S.?
    - How much of the trip remains?
    - What is the student’s current alcohol use? Drug use (e.g. Rx, OTC, & ‘illicit’)?
    - Is the student expressing suicidal ideation?
    - Is the student considering/engaging in self-harm?
    - Is the student experiencing **active psychosis** (e.g. hearing/seeing things that are not there) or mania (e.g. drastic shifts in mood, impulsivity, & over-activity)?
  - **CRITICAL** to involve student in the decision-making process!
APPLICATION: REAL LIFE EXAMPLES

• Role Play
• Small → Large group discussion of vignettes
Application: Role Play

The first night on a study abroad program, a student has a panic attack.

Questions for discussion:

What is a panic attack?

What are signs/symptoms of a panic attack?

How can you help someone ‘deactivate’/resume calm?

What might ‘trigger’ a panic attack?
Students on the program approach the program leader and express concern for a fellow student (Student X). They report that Student X has expressed that they are feeling very down and like a failure because they have been doing poorly in classes. They report that Student X has been writing emotional things like “I hate everything” in a journal. They explain to the program leader that Student X has a history of depression and that they are worried about Student X. Student X is not forthcoming with the program leader and insists that nothing is wrong. Student X refuses the program leader’s offer to arrange a visit to a counselor. Student X hasn’t been doing great in classes but is also not doing terribly. Student X’s behavior has not been erratic but Student X seems down and disinterested. Student X has been late to a few classes. It is not clear to the program leader if Student X has a mental health diagnosis of any kind, or is on medication, or is a danger to themselves.
A program leader notices a student with cuts on the inside of their wrist. These cuts seem new and consistent with self-harm. The program leader asks to speak with the student in private. During their meeting, the program leader asks the student gently about the cuts and offers the student resources. The student insists that they are fine. When asked directly about the cuts, the student explains that they cut themselves when they fell off their bicycle earlier in the day. This seems implausible to the program leader. The strange cuts notwithstanding, the student appears to be in good humor and content. The student is doing well academically and is engaged in the program.
Summary

• **Self-care is critical for EVERYONE!**
  - Modeling for students
  - Recognition of your own distress; theirs may be similar or different

• **Risk assessment/safety must be an ongoing conversation**
  - Pre-departure emphasize prevention; later, emphasize harm reduction
  - Pre-departure set foundation for open, honest communication & promote help-seeking
  - Cultural considerations are critical

• **Involve student in decision-making process to the extent possible**
THANK YOU!

Questions? Comments?