

## 10. Protocols

This notification relays what assistance the members of the University community can expect from the Division of Student Affairs in the event a student's behavior causes concern. The following procedures should be followed when various contingencies arise:

### **1. When a student talks about committing suicide or tells you she/he has made an attempt:**

University community members are **legally** required to immediately notify the Dean of Students Office (201-692-2190, 867 SUB Lane) so that help for the student can be mobilized and so that personal or institutional legal liability is not incurred. Remember, once a member has been given such information by a student, he/she must take action. If you are unable to reach the Dean of Students Office, contact the Department of Public Safety (201-692-2222, 870 River Road). The Office of Residence Life (201-692-2250, 880 Lone Pine Lane) may have to be notified if the student lives on campus. The Office of Student Counseling and Psychological Services will also be notified. That office requires that it forbid a student from remaining on campus until a psychological evaluation has been completed and it is determined that the student no longer poses a danger to himself/herself or to others. Most students removed in this fashion eventually return to the University. In some circumstances, the Dean of Students Office notifies the person the student has named as his/her emergency contact.

### **2. When a student tells you of plans to physically harm himself/herself or another person, threatens to do so and/or actually does it:**

a. Notify the Dean of Students Office (201-692-2190, 867 SUB Lane) and/or the Department of Public Safety (201-692-2222, 870 River Road).

b. The University has an obligation to respond expeditiously to all incidents of violence.

c. The University has an obligation to warn potential victims of violence if the threat is at all a credible one. You must take such threats seriously and react expeditiously and appropriately. Do not assume it is an idle threat.

### **3. When a student complains of sexual harassment by a professor, staff member or another student:**

Refer the student to the Dean of Students Office (201-692-2190, 867 SUB Lane) immediately and/or the Department of Public Safety (201-692-2222, 870 River Road).

### **4. When a student complains of discrimination because of race, color, ethnic or national origin, religion, age, gender, disability, veteran status or sexual orientation:**

Refer the student to the Dean of Students Office (201-692-2190, 867 SUB Lane).

### **5. When a student indicates verbally and/or behaviorally that anxiety, depression, substance abuse, family problems, etc., are a concern:**

a. Talk to the student and assess whether you believe professional assistance might be helpful or is, in fact, required.

b. If you believe such help is or might be needed, refer the student to the Office of Student Counseling and Psychological Services (201-692-2174, 914 River Road). It is best to personally escort the student or to telephone ahead with your referral whenever possible.

c. If you are unsure whether the person needs professional help or if you would like to talk over how you can be more helpful, call the Office of Student Counseling and Psychological Services (201-692-2174, 914 River Road) for a consultation. More specific referral information is available through the Office of Student Counseling and Psychological Services.

## **Substance Abuse/Warning Signs, Symptoms**

### **Alcohol**

- Decreased academic performance.
- Pattern of accidents, injuries.

- Social conflicts, impaired relationships with family and friends.
- Unsatisfactory job performance, dismissals for tardiness, absenteeism, etc.
- Poor health, greater incidence of illnesses.
- Acts of violence or vandalism, automobile accidents. Persistent trouble with authority figures.
- Increased tension, anxiety, anger, isolation or a denial that alcohol is a problem. Obsessive talk about alcohol use.
- “Blackouts,” i.e., memory losses.
- A new set of less-desirable “friends.”
- Weight gain (or later weight loss through malnutrition), pronounced fatigue.
- Drinking to get drunk; frequent references to being “smashed,” “crocked,” etc.
- Failure to keep promises about the amount of alcohol to be consumed in a set period of time;.
- Visibly varying effects from consuming the same amount of alcohol.

### **Marijuana**

- Reddening of the eyes, distorted sense of the passage of time.
- Talkativeness, hilarity, a “high” feeling or dreamy, relaxed withdrawn behavior.
- Increased sense of heightened sensitivity to color, sound, taste.
- Decreased coordination, reaction times.
- High doses by inexperienced users may result in impulsive behavior, anxiety or panic.
- Heavy chronic users may experience an “anti-motivational syndrome,” i.e., loss of interest in conducting everyday business, loss of interest in long-term goals, confused expression of thoughts.
- Decreased academic performance due to short-term memory deficits and interference with the ability to concentrate.
- Persons with pre-existing psychological problems may have those problems exacerbated by marijuana use.

### **Cocaine**

- Short-term euphoria, energy, self-confidence.
- Depression or anxiety following this burst of energy and pleasure. Paranoia and/or hallucinatory behavior may become evident. The “low” following the “high” creates a craving for more cocaine.
- “Crack” is related to aggressive and violent behavior in some users.
- Dulled sensations of pain or illness may result in neglect of the body.
- Sleeplessness and loss of appetite and/or loss of weight.
- Lateness, absence, missed deadlines, financial problems, alienation from family, regular friends and loss of interest in normal activities.
- Severe physical reactions including heart attacks and strokes are possible. Blood pressure and heart rate dramatically increase after cocaine use. The respiratory system may fail.
- “Crack” is particularly dangerous. Users can become addicted quickly and often find overcoming their dependence very difficult.

### **Suicide Warning Signs**

- Previous suicide attempt(s).
- Overt (or sometimes veiled) threats to commit suicide.
- Extreme depression evidenced by lack of interest in people or activities once of interest.
- Preparations for death such as giving away prized possessions, acquiring weapons, pills, etc.

- Changes in personality or behavior such as sleeplessness, weight loss, lack of appetite, withdrawal.
- A sudden change in mood for the better which may mean the decision to commit suicide has been made.
- Family history of suicide or suicide attempts.
- Academic failure especially on the heels of an expressed need to succeed coming from the self or family.

**Also refer to the “How to Talk to a Distressed Friend” brochure provided by the Office of Student Counseling and Psychological Services.**