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The ETSU Suicide Prevention Plan promotes positive mental health among students, faculty, and staff and prevents suicide through collaborative, campus-wide efforts to:

- Strengthen practices and policies relating to suicide prevention and mental health services
- Reduce the stigma surrounding mental health issues by providing education to the ETSU community
  - Promote help-seeking behaviors among our students, faculty, and staff
- Offering virtual and telehealth sessions during the pandemic

Suicide is a complex public health issue with several causes, including psychiatric illnesses that may have not been recognized or treated. Substance abuse and mental disorders account for approximately 90 percent of those who have died by suicide, but these illnesses are treatable and people suffering from them do get better. Many treatment options are available, and there have been several recent advances in treating and understanding suicide. This guide was designed to offer assistance to ETSU students, faculty, and staff who may be considering suicide, or who are trying to assist another person who may be suicidal.

**Emergency Suicide Prevention Info**

The rule of thumb is simple: If you believe you might need help now, you DO.

If you are experiencing suicidal thoughts, take action right now.

Call 911 or the National Suicide Prevention Lifeline at 1-800-273-TALK (8255) (Veterans, press 1) ask for help.

The Crisis Text Line, an offshoot of the social change organization DoSomething.org, is also available around the clock by texting TALK to 741741.

If you are concerned that someone you know is contemplating suicide, get help for them. Call the NSPL at 1-800-273-TALK (8255), go to the emergency room, or call 911. Keep them away from anything that might serve as a weapon. Never leave a suicidal person alone; always stay with them until help arrives.
ETSU RESOURCES AND SUPPORT FOR STUDENTS

ETSU Counseling Center

- Offering virtual and telehealth sessions during the pandemic
- Individual counseling for students
- Group therapy for students
- Let's Talk - informal drop in consultation
- 24/7 Crisis Line - BucsPress2: 423-439-4841, then Press Option 2
- Workshops on suicide prevention and stress management
- Nell Dossett Residence Hall, 3rd Floor
- 423-439-3333
- https://www.etsu.edu/students/counseling/

Behavioral Health and Wellness Clinic

- (Associated with the Department of Psychology)
- Offering virtual and telehealth sessions during the pandemic
- Lucille Clement Hall
- 423-439-7777
- https://www.etsu.edu/cas/psychology/bhwc/

University Health Center

- Offering behavioral health services alongside acute medical care
- Offering virtual and telehealth sessions during the pandemic
- 160 Roy S. Nicks Hall
- 423-439-4225
- https://www.etsu.edu/nursing/universityhealth/

Quillen College of Medicine

- The medical school has a professional and academic resource center (PARC) that provides confidential counseling services to medical students, residents, and their families. https://www.etsu.edu/com/studentsvcs/parc.php

Gatton College of Pharmacy

- The pharmacy school has professional counseling services available to students. Contact Student Affairs at the GCOP for more information:
  - Phone: (423) 439-6338
  - Office Hours: 8:00 am to 4:30 pm (EST) Monday through Friday
  - Location: Building 7, Room 212, Maple Avenue
  James H. Quillen VA Medical Center Campus
  (Across the street from ETSU's Main Campus)
For emergency medical situations on campus please contact:

**ETSU Public Safety**

- Welcome Center
- 1043 Jack Vest Drive, Parking Garage, 2nd Floor
- 423-439-4480 or 911 from any campus phone
- [https://www.etsu.edu/dps/](https://www.etsu.edu/dps/)
- Students can download the ETSU Safe App, which includes resources related to mental health support

**OTHER RESOURCES:**

24/7 Crisis Hotline: National Suicide Prevention Lifeline Network
[http://www.suicidepreventionlifeline.org/](http://www.suicidepreventionlifeline.org/)

1-800-273-TALK (8255) (Veterans, press 1)

**Crisis Text Line**
Text TALK to 741-741 to text with a trained crisis counselor from the Crisis Text Line for free, 24/7

**Veterans Crisis Line**
Send a text to 838255

**Vets4Warriors**

**SAMHSA Treatment Referral Hotline (Substance Abuse)**
1-800-662-HELP (4357)

**RAINN National Sexual Assault Hotline**
1-800-656-HOPE (4673)

**National Teen Dating Abuse Helpline**
1-866-331-9474

Also visit your:

- Primary care provider
- Local psychiatric hospital
- Local walk-in clinic
- Local emergency department
- Local urgent care center
ETSU RESOURCES AND SUPPORT FOR EMPLOYEES

Employee Assistance Program

- [https://www.etsu.edu/humanres/benefits/eap.php](https://www.etsu.edu/humanres/benefits/eap.php)
- Partners for Health at 1-855-Here4TN (1-855-437-3486)
- Contact the State of Tennessee Benefits Administration at (615) 741-1925
- ETSU Office of Human Resources at 423-439-5825 for additional information or online access to resources, screenings, tools, and on-line training, log on to [http://www.here4tn.com/](http://www.here4tn.com/).
- [Employee and Family Welcome Page](https://www.etsu.edu/humanres/benefits/eap.php)

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- Offering virtual and telehealth sessions during the pandemic
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- 423-439-7777
- [https://www.etsu.edu/cas/psychology/bhwc/](https://www.etsu.edu/cas/psychology/bhwc/)

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- Primary care provider
- Local psychiatric hospital
- Local walk-in clinic
- Local emergency department
- Local urgent care center
SUICIDE WARNING SIGNS

- Withdrawing from friends and family

- Taking steps to tie up loose ends, such as giving away possessions, settling debts, etc.

- Researching or discussing suicide methods

- Reckless or unsafe behavior

- Significant increase in irritability and/or aggression

- Expressing feelings of being especially depressed, in pain, trapped, angry, sad or hopeless

- New or increased abuse of drugs or alcohol

- No longer participating in activities or hobbies that used to bring enjoyment

- Experiencing extreme mood swings

- Drastic change in sleeping habits

- Talking about wanting to die or being better off dead
SUICIDE RISKS

There are numerous risk factors related to suicide. Here’s what you need to know to be alert to the possibility of a serious danger, not only in others, but in yourself as well.

Internal Factors

• Mental health issues, such as depression, anxiety or bipolar disorder
• Abuse of drugs or alcohol
• History of abuse, or being abused
• Having a chronic disease, or a terminal illness
• Suffering from intense internal conflict, such as being deeply in debt or trying to hide sexual orientation or gender identity
• Being part of culture or religion that accepts suicide as a means to resolve issues
• Loss of a relationship or loved one

External Factors

• Friends, family members, coworkers or peers that have attempted, completed or glamorized suicide
• Access to methods of suicide, such as firearms, poisons or drugs
• Loss of a relationship or loved one
• Loss of a job
• Victim of bullying or harassment

Prior Documented Factors

• History of suicide attempts
• History of mental health issues
• History of substance abuse problems
• Family history of suicide
TREATMENT OPTIONS FOR SUICIDALITY

Talk Therapy

Psychotherapy, or talk therapy, is a way to help people with a broad variety of mental illnesses and emotional difficulties. Psychotherapy can help eliminate or control troubling symptoms so a person can function better and can increase well-being and healing.

Problems helped by psychotherapy include difficulties in coping with daily life; the impact of trauma, medical illness or loss, like the death of a loved one; and specific mental disorders, like depression or anxiety. There are several different types of psychotherapy and some types may work better with certain problems or issues. Psychotherapy may be used in combination with medication or other therapies.

Therapy Sessions

Therapy may be conducted in an individual, family, couple, or group setting, and can help both children and adults. Sessions may be held weekly, bi-weekly, or monthly. Both patient and therapist need to be actively involved in psychotherapy. The trust and relationship between a person and his/her therapist is essential to working together effectively and benefiting from psychotherapy.

Psychotherapy can be short-term (a few sessions), dealing with immediate issues, or long-term (months or years), dealing with longstanding and complex issues. The goals of treatment and arrangements for how often and how long to meet are planned jointly by the patient and therapist.

Confidentiality is a basic requirement of psychotherapy.

Medication

Psychotherapy is often used in combination with medication to treat mental health conditions. In some circumstances medication may be clearly useful and in others psychotherapy may be the best option. For many people combined medication and psychotherapy treatment is better than either alone.

There are a number of medications available that work in slightly different ways and have different side effects. When prescribing a medication that is likely to work well for you, your doctor may consider:

- Your particular symptoms. Symptoms can vary, and one medication may relieve certain symptoms better than another. For example, if you have trouble sleeping, a medication that is slightly sedating may be a good option.
• Possible side effects. Side effects of medications vary from person to person. Bothersome side effects, such as dry mouth, weight gain or sexual side effects, can make it difficult to stick with treatment. Discuss possible major side effects with your doctor or pharmacist.

• Whether it worked for a close relative. How a medication worked for a first-degree relative, such as a parent or sibling, can indicate how well it might work for you.

• Interaction with other medications. Some medications can cause dangerous reactions when taken with other medications.

• Pregnancy or breast-feeding. A decision to use medication during pregnancy and breast-feeding is based on the balance between risks and benefits. Certain medications, such as paroxetine (Paxil, Pexeva), may be discouraged during pregnancy. Work with your doctor to find the best way to manage your needs when you’re expecting or planning on becoming pregnant.

• Other health conditions. Some medications may cause problems if you have certain mental or physical health conditions. Others may treat an array of needs. For example, bupropion (Wellbutrin, Aplenzin, Forfivo XL) may help relieve symptoms of both attention-deficit/hyperactivity disorder (ADHD) and depression. Other examples include using duloxetine (Cymbalta) to help with pain symptoms or fibromyalgia, or using amitriptyline to prevent migraines.

• Cost and health insurance coverage. Some medications can be expensive, so it's important to ask if there's a generic version available and discuss its effectiveness. Also, make sure that your medication is covered by your insurance.

Lifestyle Changes

Healthy lifestyle improvements, such as good nutrition, regular exercise and adequate sleep, can be important in supporting recovery and overall wellness.

Recent studies on wellness have suggested that lifestyle changes that consider balance as it relates to the ten dimensions of wellness lead to positive mindsets. The ten dimensions of wellness are:

1. Social: family and social support and cohesion
2. Physical: physical vitality, active lifestyle practices, structured exercise
3. Environmental: living conditions and physical surroundings from immediate to global
4. Medical and dental: screening, prevention, adherence
5. Nutritional: diet and food choices, healthy weight
6. Spiritual: core values, identity, and purpose
7. Psychological and emotional: mental state, coping and problem-solving skills, stress management, decision making
8. Behavioral and intellectual: thoughts and actions that have positive or negative effects on life
9. Occupational: activities in which we engage, interests, skills, performance, satisfaction,
10. Financial: planning and saving, cash and credit management, risk management
DEPRESSION

Suicidal thoughts typically follow a long period of sadness, anxiety and dark thoughts. It is not unreasonable to feel pain and unhappiness after a negative event, but when sadness persists or seems to come out of nowhere, it may be a sign of a depressive disorder. Symptoms that distinguish normal sadness from depression include severity and duration.

To qualify as an acute depression, at least five of the below symptoms would be present at least 14 days in a row.

- Depressed mood on most days, for a large portion of each day
- Significant changes in appetite and/or weight
- Great loss of pleasure most of the time
- Sleeping too much or not enough on most days
- Slowness or agitation
- Tiredness, loss of energy
- Feelings of guilt and worthlessness virtually all of the time
- Trouble with concentration
- Thoughts of death or suicide

Treatment for Depression can Reduce Suicide Risk

- About 90% of those who attempt suicide have a diagnosable psychiatric disorder.
- Depression affects 20-25% of Americans over the age of 18 in any given year.
- Only half of those experiencing severe depression seek treatment.
- 80-90% of adolescents who seek treatment for depression are treated successfully.
- Successful treatment of depression can lead to mitigation of suicidal thoughts and tendencies.
Help for Depression: The Steps

Depression can leave you feeling adrift, uncertain of where to turn or what to do. The good news is that there are very concrete things you can do to combat depression. Simply taking firm, clear steps toward getting better can actually make you feel better. Here’s how:

Seek help

Students: Call the ETSU Counseling Center, University Health Services, or other mental healthcare services on campus and get information about appointments.

Faculty and Staff: Access your Employee Assistance Program benefits to get a mental healthcare professional.

Keep appointments

Once you have made an appointment with a counselor, keep it! Talking to a professional is a vitally important part of depression treatment.

Take medications as prescribed

Your counselor might determine that medication will help. Take medicine as it is prescribed. Don’t stop because you start to feel better.

Call a friend

Telling someone you are depressed can open the floodgates and give you some relief from the pressure of the negative thoughts.

Make yourself move

Depression can lead to the desire to stay in with the blinds closed. Force yourself to get outside and walk around, feel the sunshine, and interact socially.

Keep a journal

Rather than use this as a venting tool, use the journal as a way to record your thoughts so you can look for patterns.
Get eight hours of sleep

Try to get no more, no less. A good sleep schedule can make you feel much more centered, rested and healthy.

Continue doing things you enjoy

Even though you might not get as much enjoyment from them anymore, keep doing them.

Eat properly

A well-balanced diet can help you feel better. Look for things that will boost the healthy vitamins you need, such as dark leafy greens, vegetables of all kinds, fruits, and lean meats.

Stick with it

Coming back from depression can be a long, hard road. Don’t let up with any of these points, because all of them combined lead to the best way to get better.
SUICIDE RISK AMONG SPECIFIC POPULATIONS

Almost everyone can be at risk for depression and the sometimes-accompanying suicidal thoughts. Some populations of the college community are more prone to risk than others. These students face very unique challenges that can make preventing suicide more difficult.

LGBTQ

According to the CDC, members of the lesbian, gay and bisexual community are four times more likely to attempt suicide as their straight peers, and questioning youth are three times more likely. Nearly half of transgender youths report thoughts of suicide, while a quarter of this group reports at least one suicide attempt. According to the Suicide Prevention Resource Center, there are several reasons behind these numbers, but one important reason is because the perception of being “different” in some communities may lead to isolation. Other contributing factors include a higher rate of substance abuse in the LGBTQ community and a lessened likelihood of positive support resources that would normally dissuade or prevent a suicide attempt. The following resources are devoted to the focus of suicide in the LGBTQ community:

The Trevor Project

A nationwide program focused on suicide prevention forgay, lesbian, bisexual, transgender and questioning teenagers and young adults.

https://www.thetrevorproject.org/
1-866-488-7386

GLBT National Help Center

Provides peer support to members of the GLBT community. Support is provided through an online chat and hotline.

https://www.glbthotline.org/
1-888-843-4564
It Gets Better Project

A movement that aims to reassure and inspire gay, lesbian, bisexual and transgender youth around the world that yes, it does get better – as well as take steps to actually help make things better.

https://itgetsbetter.org/

Under-Represented Students

The reasons these students are at special risk for suicide is as diverse as the types of under-represented students that attend class on campus. Cultural beliefs, financial difficulties, familial pressure, racial discrimination and prejudice – they can all play a part in creating emotional harm. Learn more from these resources:

Asian American Suicide Prevention and Education

According to The Ohio State University Suicide Prevention Program, Asian students are at higher risk of suicide compared to most of their peers. This site is a combination of two nonprofit organizations which aim to reduce suicide among Asian Americans.

https://aaspe.net/
1-877-990-8585
(Mandarin, Japanese, Cantonese, Fujianese, and Korean language offered)

Mental Health America

This organization promotes mental health in the United States. The website contains specific discussions on mental health problems in specific demographic and racial groups, such as Hispanics, Asian Americans and African Americans.

https://www.mentalhealthamerica.net/
1-800-969-6642

National Organization for People of Color Against Suicide

A nonprofit organization focusing specifically on suicide prevention in communities of color.

http://nopcas.org/
National Center for the Prevention of Youth Suicide

The teenage years are rarely easy. Learning who you are, earning more responsibility, dealing with peer pressure – it all makes for a difficult and stressful time. In fact, suicide is one of the leading causes of death for those aged 15 to 19. Treatment options are available, and so is help.

https://www.preventyouthsuicide.org/

Veterans

Veterans can also be at an increased risk for both suicide and post traumatic stress disorder (PTSD). Learn more and receive support from these resources:

ETSU Student Veterans of America (SVA)

ETSU Student Veterans of America is a group of college students who are also veterans and aim to support student veterans in higher education.

423-439-6819

Facebook: Student Veterans of America at ETSU

US Department of Veterans Affairs

Provides mental health resources and information to veterans who are dealing with a variety of concerns, including thoughts of suicide.

https://www.mentalhealth.va.gov/

Veterans Crisis Line

Veterans, their families and friends can call, text, or chat with someone at the Veterans Crisis Line to deal with a crisis situation, such as a veteran about to engage in self harm.

https://www.veteranscrisisline.net/

1-800-273-8255 (Press 1)

Or text 838255 for assistance

Online chat available at the website/ TTY: 1-800-799-4889
ETSU EDUCATION AND AWARENESS INITIATIVES

Student Life and Enrollment

- Promotion of CARE Reporting on campus by self or others
- CARE Reports allow anyone on or off-campus to report a concern about a student
- CARE report link can be found at [www.etsu.edu/bucscare](http://www.etsu.edu/bucscare)
- Coordinates CARE Team review on regular basis
- The [Dean of Students office](#) offers a variety of resources and support

ETSU Counseling Center

- Virtual and telehealth services are offered during the pandemic
- Individual counseling for students
- Group therapy for students
- Let's Talk - informal drop in consultation
- 24/7 Crisis Line - Bucs Press 2: 423-439-4841, Press 2
- Workshops on suicide prevention and stress management

THRIVE Outreach Program, ETSU Counseling Center

- Suicide Prevention Workshop presented to classrooms and student organizations
- Ask, Listen, Refer - online training that gives students information on how to help someone who may be suicidal.
- Online social media content for students to increase awareness of mental health issues and resources
- Partnerships with student groups and organizations of statistically at-risk populations to promote well-being for students.

Department of Housing and Residence Life

- Question, Persuade, Refer (QPR) Training: All DHRL student staff and professional staff members participate in QPR training as a part of our August preparation for the year.
- DHRL student staff receive information regarding Bucs Press 2 at their employee training and throughout the year. Bucs Press 2 information is placed on bulletin boards in all residence halls.
- DHRL residential curriculum addresses suicide prevention. Staff ask students how they are adjusting and about their challenges, so that we can make appropriate referrals.
- DHRL collaboration with the ETSU Counseling Center are planned to develop additional supports within residence halls.
Emergency Preparedness

- Inclusion of resources available to the community (counseling services, Bucs Press 2) in ETSU’s Annual Security and Fire Safety Report
- Mental health resource information concerning suicide prevention in the ETSU Safety App
- Bucs Press 2 information on the Staying Safe on Campus website

Department of Public Safety

- Officers receive training to assess situations involving suicidality or other mental health crises
- The Department responds actively and sensitively to students, faculty, staff experiencing crises and needing transport to appropriate facilities

University Health Services

- Office visits available with nurse practitioners
- Office visits available with behavior health specialists
- Psychiatry services available
- Patient Health Questionnaire (PHQ) screen on every patient visit
- Participate in Tennessee Suicide Prevention Network (TSPN) Committee Meetings monthly
- TSPN/University Health Services Walk scheduled annually to spread suicide awareness on campus

Athletics

- Athletic trainers screen students with questions related to mental health and refer as appropriate to the ETSU Counseling Center or other appropriate resources.

Human Resources

- Coordinates benefits, including the Employee Assistance Program
- Will offer guidance and advice on how to approach employee concerns
- Phone: 423-439-4457
- Main Office: Burgin Dossett Hall, Room 307, 1276 Gilbreath Dr., Johnson City, TN 37614-1707
- Benefits Center Location: E-203 MSHA Athletic Center, Johnson City, TN 37614
POST-VENTION PLAN

The loss of a student, faculty, or staff member affects the ETSU community in various ways. It is important for the university to respond in a way that offers sensitivity, care, and respect to the person affected, his or her family, and our campus community. Therefore, while the following steps offer a guideline for response, each case is unique and appropriate actions will be taken to address the situation at hand.

Community Actions

1. In the event of a certain manners of death, including death by suicide, counselors or student leaders may address the subject matter, in general, within student groups, residence halls or in other circles in order to offer support. There is value in having these conversations in a timely manner following an event that has the potential to cause trauma and stress to the campus community. The name of the deceased and circumstances surrounding the death will not be discussed.

2. The Dean of Student’s office may designate an area on campus as a “grief room,” where students or others may gather to meet, meditate, and/or receive optional mental health support. If the student was a resident in campus housing, the room may be located within a housing facility.

3. The campus community and family members of the deceased will be invited to an annual memorial service, ETSU Remembers, in the Spring semester of the academic year. The Dean of Student’s office coordinates this event to acknowledge the passing of any faculty, staff, or student that has occurred since the previous service. ETSU Remembers offers the community a unified and personalized way to reflect upon and remember those who have been part of the ETSU family.

Suggestions for Support

For students, faculty, and staff:

A. Make contact with friends of the deceased to offer support.

B. Familiarize yourself with campus resources and support for your own use, and encourage the use of those by others. A list can be found at the end of this document.
C. Encourage the sharing of feelings and emotions. Discourage fixation on death or upon the manner of death.

D. In the event of suicide:

1) Do not glamorize or romanticize the death

2) If other friends struggle with depression, anxiety, or other mental health issues, encourage them to seek support of mental healthcare providers, their families, and friends

3) Do not share details of the method of death; describe it as unexplainable; or as a result of one problem

4) Do not portray suicide as a solution to the challenges of life

E. Encourage others to maintain their routine

F. Faculty who are teaching a class within which the deceased was enrolled should expect to have students who want to discuss the death. It is important to convey support and encouragement, but also to maintain a sense of normalcy and routine within the class. It is also important to respect personal information associated with the deceased. Attendance and class schedule policies should be followed. The Dean of Students office and the ETSU Counseling Center welcome inquiries from faculty or staff in regard to appropriate information sharing, including referrals to mental healthcare. If concern about the well-being of an impacted student or students continues, the Dean of Students office should be notified by phone (423-439-4210) or through the submission of an online CARE report so that appropriate intervention can occur and support be given:


Additional considerations for faculty dealing with the death are listed below.

In emergency situations Public Safety should be notified by calling 423-439-4480 or 911 from a campus phone.

G. Staff and faculty deaths will be addressed most effectively by the division, unit, or department within which they were employed. Colleagues should offer support to each other and encourage the use of EAP services. Attendance should follow the university bereavement policies and/or work attendance policies.

For faculty:

Normalcy and Routine Help Provide a Sense of Security
Continuing to hold classes allows for students to come together, while also allowing faculty/staff to monitor and identify vulnerable students, as students process the crisis. However, students who cannot attend should not feel pressured to do so.

Remember that Student Learning Will Be Compromised

Crises of this nature present cognitive as well as emotional effects. Students may not be functioning at 100%. You may want to postpone big projects or exams that were due. Writing reflections may be more beneficial than class discussions at this time. Faculty need to focus on their primary roles as teachers/instructors rather than counselors.

Allow for Grief, But Don’t Assume It

Some students will not feel affected by the circumstances, and they should not be made to feel guilty for this. Communicate with all students that it is normal for people to have different reactions to or feelings about death.

Avoid Mental Health Stakeouts

Most students are and will be okay. Only reach out and refer those that truly raise concerns.

Avoid the Blame Game

Don’t bring up perceived issues or reasons as to what happened or how things were handled in the moment, especially to students. Make the administration aware of any concerns after the immediate timeframe of the crisis.

Console without Romanticizing or Judging

This is particularly important when dealing with the aftermath of a suicide. Don’t reinforce death as being a more peaceful or better alternative (i.e., “He’s in a better place now.” Or “At least she’s at peace now.”). Understand that anger is a natural reaction and be able to communicate positively when faced with students who may say things, such as, “Why was he so selfish?” You can help them look toward the future with statements such as, “What can we do to alleviate stress and pain for ourselves and others?”
Know Your Limits

Be cautious about how far you offer yourself as a resource. Remember you have other primary responsibilities. Refer students to professionals on campus trained to deal with these types of situations long term.

Nudge Students Toward Forward Momentum

It is okay to transition from the immediate crisis back to our day-to-day lives. You can discuss that our lives will often be affected by tragedies. However, steer the focus toward optimism for what lies ahead.

Support the Front-Line Staff

Recognize and show appreciation for those primary personnel members supporting vulnerable students, who may be wrestling with their own issues of guilt and self-doubt during this time. Most times these individuals are members of student services, including wellness, residential, and mental health personnel.

Take Care of Yourself

Model and communicate personal self-care techniques to your students. You can’t care for them if you are not caring for yourself.

(From Sanger 2018, The Chronicle of Higher Education)

For family:

A. The university will accommodate the family to the extent possible, including:

1) Providing temporary campus housing for the immediate family, if they do not reside locally, in order to allow for civil procedural and mortuary plans.

2) Assistance with providing contact information for mortuary services, campus administrative and enrollment procedures, financial aid procedures, etc.

3) Assistance with packing personal items, mementos, and other belongings of the deceased.

4) Assistance with making connections to pastoral care and/or counseling care.
Procedures for Student Info and Accounts

Financial Aid
A tuition refund would be processed to the student’s account. Financial Aid would cancel any pending disbursements to the student. Any award items that have already been paid and posted to the student’s account, including the tuition refund, will remain. Financial Aid will not charge loan monies or scholarship monies back to a student’s account. Financial Aid debt incurred by the student may be eligible for discharge.

ETSU Financial Aid: 423-439-4300
Federal Direct Student Loan customer service line: 1-800-557-7391
Perkins Loan customer service line: 1-888-549-3274

Admissions/ Registrar
The student’s account will be marked inactive. The student’s transcript may be requested from the Office of the Registrar. A death certificate is required.

ETSU Office of Admissions: 423-439-4213
ETSU Office of the Registrar: 423-439-4230

Housing
Housing will cancel any contract on file for the student and process any applicable refund. Housing staff will assist the family with a plan to pick up belongings.

ETSU Department of Housing: 423-439-4446

Post Office
The PO Box will be closed. ETSU Post Office: 423-439-4232

Any mail to that box is held for one week. After one week, credit card statements, bank statements, and any bills are then marked RTS (return to sender). An identified family member can request a FORWARD for that mail but that needs to be done in person at the Post Office.

Academics
Professors will be notified by Student Life and Enrollment. Grades for the term will not post.
Student Life and Enrollment can be reached at 423-439-4210 or studentlife@etsu.edu
Internet Accounts / Email

Student’s Goldlink course account will be disabled. Student’s Goldmail email account will be disabled.

ETSU Information Technology Services: 423-439-6809

Procedures for Employee Info and Accounts

The Office of Human Resources will work closely with family members to guide them through the process to discuss benefits, insurance, or other concerns after the death of an active employee. They can be reached at 423-439-4457.

The family of retired employees may also contact the Office of Human Resources if they have questions related to benefits.

Active and retired employee deaths are acknowledged at the annual ETSU Remembers ceremony. ETSU Remembers offers the community a unified and personalized way to reflect upon and remember those who have been part of the ETSU family.
COVID-19 and Mental Health

COVID-19 continues to cause significant impacts to the physical health of the people infected with the disease. To a greater extent, anxiety and depression associated with the fear of getting infected or with having loved ones who become ill or die torments people around the world. Data shows that not only are people expressing significant mental health concerns to professionals, but that delivery of services has been impacted by the pandemic. The World Health Organization reports that mental health services have been disrupted or discontinued in 93% of the countries worldwide. Chronic underfunding of mental healthcare has made these disruptions even more daunting.

According to the World Health Organization (WHO)...

Fear, worry, and stress are normal responses to perceived or real threats, and at times when we are faced with uncertainty or the unknown. So it is normal and understandable that people are experiencing fear in the context of the COVID-19 pandemic.

Added to the fear of contracting the virus in a pandemic such as COVID-19 are the significant changes to our daily lives as our movements are restricted in support of efforts to contain and slow down the spread of the virus. Faced with new realities of working from home, temporary unemployment, home-schooling of children, and lack of physical contact with other family members, friends and colleagues, it is important that we look after our mental, as well as our physical, health...

And the pandemic is increasing demand for mental health services. Bereavement, isolation, loss of income and fear are triggering mental health conditions or exacerbating existing ones. Many people may be facing increased levels of alcohol and drug use, insomnia, and anxiety. Meanwhile, COVID-19 itself can lead to neurological and mental complications, such as delirium, agitation, and stroke. People with pre-existing mental, neurological or substance use disorders are also more vulnerable to SARS-CoV-2 infection – they may stand a higher risk of severe outcomes and even death.

Should you or a loved one be experiencing mental health concerns due to the pandemic, please contact one of the resources listed in this plan.