Peer Mentoring Guide

RESOURCES FOR HELPING PEERS IN DISTRESS

Modeled from the Boise State University Reaching Out Handbook
Edited by Dr. Suprawee Tepsuporn, Lauren Mosesso and Ashley Taylor
Message from UD Peer Mentoring Group

Thank you for serving as a peer mentor! We recognize your dedication and commitment to creating a welcoming, supportive and collaborative learning environment at the University of Delaware. Your service to the University, College and academic community advances a culture of belonging that helps our graduate students thrive and achieve their academic, personal and professional goals.

The University of Delaware Peer Mentoring Guide: Resources for Helping Peers in Distress was created for the purpose of providing peer mentors like you with information about counseling services and other campus resources, and how to most effectively assist your mentee(s) in distress. Our goal is to help you recognize some of the symptoms of mentee distress, as well as provide some specific options for intervention and for referral to UD campus resources. It is important to remember that peer mentoring is not academic or research advising, mental health counseling, or meant to burn you out. Please refer your mentees to trained professionals who are best equipped to help them.

This handbook offers guidelines, and each individual will need to consider what is appropriate in a given situation. Basic topics covered in this manual include identifying individuals in distress, ways of supporting these individuals, and how to refer them for counseling. Dealing with the reluctant individual, scheduling an appointment with Counseling Services and confidentiality issues are also discussed. A list of campus referral resources, including Counseling Services, is listed at the beginning of this guide. The UD Center for Counseling and Student Development is available to assist you with problem situations and to consult with you on whether to intervene with a particular individual and when to refer.

We offer our appreciation to you for serving as a peer mentor and making a positive change in your mentee's life! We hope this handbook helps you in your peer mentoring journey.

Thank you to those who helped contribute to this handbook, including Dr. Suprawee Tepsuporn, Lauren Mosesso, Ashley Taylor and the College of Engineering’s EmPOWER group.
## Peer Mentoring 101

### ROLES OF A PEER MENTOR

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<thead>
<tr>
<th>SUPPORTER</th>
<th>EFFECTIVE</th>
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<tr>
<td></td>
<td>● Listens carefully to mentee</td>
<td>● Fixes the mentee's problems</td>
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<td>● Ensures a safe environment</td>
<td>● Overprotects the mentee</td>
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<td>● Maintains privacy and confidentiality</td>
<td>● Gives too much advice</td>
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<td>● Shows empathy when listening to mentee’s concerns</td>
<td>● Brushes off mentee's feelings</td>
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<th>REFERRAL AGENT</th>
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<td></td>
<td>● Explains policies and expectations of university and department</td>
<td>● Does not follow up to ensure the resources were helpful</td>
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<td>● Identifies resources to help mentee with specific problem</td>
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<td>● Expands mentee’s network</td>
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<td></td>
<td>● Guides the mentee based on interactions</td>
<td>● Tells the mentee what to do</td>
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<td>● Empowers mentee to solve their problems independently</td>
<td>● Tries to “fix” problems quickly</td>
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<td>● Give mentee positive and constructive feedback</td>
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<th>CHALLENGER</th>
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<tr>
<td></td>
<td>● Encourages mentee to attend EmPOWER events</td>
<td>● Pushes too far too soon</td>
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<td>● Encourages mentee to participate in professional development activities (workshops, conferences)</td>
<td>● Does not attend events themselves (poor role model)</td>
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### Communicate Like a Mentor

**TO ACKNOWLEDGE:**

““I see.”

“Thank you for sharing.”

“That must be frustrating.”

**PARAPHRASING:**

“It sounds like you are concerned about ________.”

“Let me tell you what I heard, so I can make sure I understand you.”

“Let me make sure I understand.”

**TO GET MORE INFORMATION:**

“Tell me more.”

“Help me understand.”

“I heard you say ________. Tell me more about that.”

“I am curious about ________.”

**SHARING EXPERIENCES:**

“I can relate to your situation.”

“I experienced something similar.”

**WHEN YOU DON’T KNOW HOW TO HELP:**

“Let’s brainstorm together.”

“Thank you for sharing. Do you mind if I take some time to think about this and get back to you?”

**TO HELP THE MENTEE CONSIDER ALTERNATIVES:**

“What if ________?”

“Have you considered ________?”

“I am concerned that you ________.”

“That is a good idea! Do you have any other thoughts about ________?”

“How are you feeling about ________?”

**TO BRING FOCUS BACK TO MENTEE:**

“Let me stop talking and hear your perspective.”
Campus Resources

ASIAN PACIFIC ISLANDER AND DESI AMERICAN (APIDA) RESOURCES

Graduate Student Organizations
- Indian Graduate Student Association (IGSA)
- Korean Graduate Student Association (KGSA)
- Nepalese Student Association (NSA)
- Persian Student Association
- Saudi Students Association
- Taiwanese Student Association
- Turkish American Student Association (TASA)

BLACK AND AFRICAN-AMERICAN RESOURCES
- Center for Black Culture https://sites.udel.edu/cbc/
- Black Graduate Student Association https://sites.udel.edu/bgsa/

DACA AND UNDOCUMENTED RESOURCES
- https://sites.udel.edu/studentlife/diversity/daca/

FIRST GENERATION RESOURCES
- https://sites.udel.edu/studentlife/diversity/firstgen/

LATINX RESOURCES
- https://sites.udel.edu/studentlife/diversity/latinx/
- Hispanic/Latino Graduate Student Association https://sites.udel.edu/hlgsa-students/

LGBTQ+ RESOURCES
- https://sites.udel.edu/studentlife/diversity/lgbtq-resources/
- Queer & Trans Graduate Student Union https://www.instagram.com/ud_qtgsu/

RELIGIOUS AND SPIRITUAL RESOURCES
- https://sites.udel.edu/studentlife/religious-spiritual/
- Reflection and interfaith spaces at Morris Library Room 233 and Trabant University Center Room 223. Open daily for students, faculty, and staff of all faiths, religions, and spiritualities for private meditation, prayer, and reflection.
- Chinese Christian Fellowship Group

LIST OF GRADUATE STUDENT ORGANIZATIONS
- https://www.udel.edu/academics/colleges/grad/current-students/grad-student-organizations/

CENTER FOR COUNSELING & STUDENT DEVELOPMENT
- https://sites.udel.edu/counseling/

CONTACT INFORMATION
- 302-831-2141, Front Desk during business hours
- 302-831-1001, Helpline after business hours or when the line is busy, available 24/7
- Text UDTEXT to the Crisis Text Line at 741741, available 24/7
- BIPOC students can text STEVE to the Crisis Text Line at 741741, available 24/7
- 911, in an emergency

ADDRESS
- The Wellbeing Center at Warner Hall
- 280 The Green, Newark, DE 19716

HOURS
- 8 a.m.-5 p.m., Monday through Friday (when University offices are open)
- 1-4 p.m., Monday through Friday for consultations and emergency appointments

STUDENT HEALTH SERVICES
- https://sites.udel.edu/studenthealth/

CONTACT INFORMATION
- Main Number: 302-831-2226
- Fax Number: 302-831-6407
- Women’s Health Clinic: 302-831-8035
- Sports Medicine Clinic (located in Bob Carpenter Center): 302-831-2482

ADDRESS
- Laurel Hall, 282 The Green, University of Delaware, Newark, DE 19716
HOURS

• Student Health is open by appointment Monday through Friday, 8:30 a.m.-5 p.m.

Emergencies and After-Hours Care:

• Medical Emergencies: 911
• Christiana Care Health System: 302-733-1000
• Newark Urgent Care: 302-738-4300
• CareNet After-Hours Medical Advice: 800-681-3957

Emergency Resources

PHONE

911 - All emergencies, on or off campus
1-800-FORCE-12 (1-800-367-2312): Anti-Terrorism Tip Line
302-831-UDPD (8373) or 302-831-2222: Non-emergency calls
302-831-RIDE (7433): Safety Escorts
302-831-1204: Department administration
302-831-4138: Security services and special events
302-831-7433: Criminal Investigations
302-831-8538: Community Resource Unit

Speech or hearing impaired callers can call the UD Police with a Baudot TTY device or by texting 911

HELPFUL RESOURCES

302-831-1001: UD Helpline 24/7/365
302-831-3457: Sexual Offense Support (S.O.S.)
302-831-2141: Center for Counseling and Student Development (PSC)
302-733-4799: Sexual Assault Nurse Examiners (SANE) – located at Christiana Hospital
302-831-4146: Billing inquiries

Reporting a Zoombombing:
www.udel.edu/forms/zoombomb
Your mentee needs help with...

**MENTAL WELLNESS**
- Time and stress management
- Work-life balance
- Interpersonal conflict
- Family issues
- Mental Health

Non-emergency:
- Listen to the mentee empathetically
- Provide self-care resources
- Refer the mentee to the Center for Counseling & Student Development (CCSD) 302-831-2141. Remind the student that counseling is confidential.

Emergency:
- Call the UD Helpline 302-831-1001, available 24 hours, everyday of the year
- Provide the mentee with the Crisis Text Line number: Text “UDTEXT”, or “STEVE” for students of color, to 741741
- If someone is in immediate danger of hurting themselves or others, call the police at 911

**DIVERSITY AND INCLUSION**
- Asian American, Pacific Islander & Desi American
- Black & African-American
- DACA & Undocumented
- First Generation
- International
- Latinx
- LGBTQ+
- Religious & Spiritual

**SEXUAL MISCONDUCT**
- Student Health Center
- Title IX Coordinator
- UD Police

Mandatory Report

**ADVISOR CONFLICTS**
- Technical
- Personal
- Qualifying Committee
- Grad Academic Advisor or Coordinator
- Grad Program Director
- Grad College/Dean of Students
- Department Chair

**DEGREE GUIDELINES**
- Departmental milestones
- Classes to take
- Departmental Policies
- Graduate Academic Advisor

**REPORT A DISCRIMINATION, SEXUAL MISCONDUCT OR TITLE IX INCIDENT**
Use this Responsible or Third Party Report Form for incidents based on:
- Race
- Color
- National Origin
- Sex
- Disability
- Religion
- Age
- Marital Status
- Veteran Status
- Gender Identity
- Retaliation
- Sexual Orientation
- Dating/Domestic Violence
- Sexual Assault
- Sexual Exploitation
- Sexual Harassment
Guidelines for Intervention

You can have a profound effect on your mentee when you openly acknowledge their distress, are sincerely concerned about their well-being, and are willing to help them explore options. Here are some suggestions on how to assist a mentee with academic or personal distress.

1. Request to see the mentee in private. This should help minimize embarrassment and defensiveness. Be respectful of their privacy.

2. Briefly share your observations and perceptions of their situation. Express your concerns directly and honestly.

3. Listen carefully and attentively. Try to see the issues from their point of view without making judgment.

4. Attempt to identify the problem. Are they connected with any on-campus resources? You can help by exploring options for referrals.

5. Acknowledge inappropriate or strange behavior. Comment on what you observe without sounding judgmental. (i.e. using I statements such as, "I have noticed...")

6. Involve yourself only as far as you are comfortable, and then refer the mentee to the appropriate resources. As you attempt to reach out to the mentee, do not become more involved than your time or skill permits.

Consultation and Confidentiality

CONSULTATION

If you are unsure how to assist your mentee, contact the Center for Counseling and Student Development (CCSD) by calling 302-831-2141 during business hours. A brief consultation may help you sort out the relevant issues and explore alternative approaches. Peer mentors can use the helpline, 302-831-1001, for after-hours consultation.

**If a mentee is already receiving counseling services, they must give written permission for us to disclose confidential information.**

Conveying your concern and willingness to help is perhaps the most important thing you can do. Your support, encouragement and reassurance will be particularly helpful to a mentee in distress.

If you feel that the mentee needs immediate attention, the mentee is willing to cooperate and it is before 5 p.m., walking with them to the Center for Counseling and Student Development is highly recommended.

If it is after hours and you believe it to be a mental health emergency, call Campus Security and Police, 302-831-1001 (UD Helpline 24/7/365), and/or 911. Individuals may also access supportive services at the Gender Equity Center, for issues related to sexual and relationship violence and/or stalking, and gender identity and sexual orientation.

CONFIDENTIALITY

The staff at Counseling Services strictly complies with legal and ethical obligations. It cannot discuss a client's situation or reveal that counseling is being received without the client's written consent. The CCSD cannot disclose if a mentee has made an appointment or any information regarding the mentee without their written consent.
Referring Mentees for Counseling

In many instances, you may be the right person at the right time to make an intervention that brings about an improved situation for your mentee. They may seek you out because they trust your judgment and support, and timely help in problem-solving may be just what is needed. However, if the mentee's concerns are chronic or severe or overstep your limits of expertise, a referral to Counseling Services, or to another, appropriate support service may be in order. Explain your concerns to the mentee and say why you think assistance would be helpful. By having mentees call for a counseling appointment, you increase their sense of responsibility. However, offering to help the mentee schedule an appointment as a gesture of support may be useful. It is extremely helpful if you give Counseling Services a “heads-up” on what to expect. There are times when accompanying your mentee immediately to the CCSD is an appropriate action.

IF YOUR MENTEE IS RELUCTANT TO SEEK PROFESSIONAL HELP

- Acknowledge and validate the mentee's fears and concerns about seeking help.
- Normalize the process of seeking help and suggest Counseling Services as a possible resource.
- Reluctant mentees might be relieved to know they can speak to a counselor on a one-time basis without making a commitment to a series of sessions.
- Reassure the mentee that any information shared will be kept confidential and will not be disclosed to parents, faculty or University departments (unless the mentee is at risk of harm to themselves or others or disclosing information about child abuse).

If the mentee remains reluctant to seek help and there is continued concern for their safety, consult with the Counseling Services staff. If they are an immediate/imminent risk, call Campus Security and Police Services at 911.

URGENT CONCERNS THAT INDICATE THE NEED FOR IMMEDIATE INTERVENTION

- Suicidal statements, gestures, intent or plan
- Recent death of a loved one
- Physical assault
- Sexual assault
- Fear of losing control
- Recent abuse (victim or self-abuse)
- Thinking about harming someone else
- Stalking (whether in person or electronically)
- Verbal or implied threats to one’s well-being

A Peer with Depression

Depression is part of a natural emotional and physical response to life’s ups and downs. It is safe to assume most mentees will experience periods of situational depression. A mentee needs assistance when the depressive symptoms become extreme or last so long that they begin interfering with their ability to function in school, work or social environments.

Patterns/signs of Depression may include:

- Expressing thoughts of suicide and/or hopelessness
- Tearfulness or excessive emotions inappropriate to the situation
- Noticeable performance issues
- Infrequent class attendance
- Increased anxiety (generalized, test or performance)
- Irritability
- Deterioration in personal hygiene
- Significant weight gain or loss
- Lack of energy or motivation
- Alcohol or drug use

Individuals experiencing mild depression often respond well to additional attention over a short period of time. Prompt intervention increases their chances of returning to earlier wellness levels. Do not attempt to provide in-depth counseling.

Helpful Actions:

- Let the mentee know you are aware they are feeling down and you would like to provide support and assistance.
- Ask the mentee directly if they are having suicidal thoughts. Your asking will not encourage them to harm themselves but could help identify suicidal thoughts.
- Encourage the mentee to make an appointment with a professional counselor.

Unhelpful Actions:

- Minimizing the mentee’s feelings (“Everything will be better tomorrow”).
- Bombarding the mentee with fix-it solutions or advice.
- Trying to solve the mentee’s problems.
- Ignoring signs of suicidal tendencies.
A Peer Who is Suicidal

It is paramount to take all suicidal comments seriously. Watching for some of the following behaviors will offer clues on the mentee’s frame of mind.

If a mentee exhibits any of the symptoms below, refer him or her to Counseling Services immediately:

• Withdrawal from friends and family
• Expression of extreme hopelessness or guilt
• Sudden mood or behavior changes
• Giving possessions away
• Comments that life isn’t worth living
• Recurrent thoughts or statements about suicide

Helpful Actions:

• Be confident, caring and prepared to provide information about available resources.

• If you have an intuition that something is wrong with the mentee, call Counseling Services, 302-831-2141, for consultation with professional staff. For more information on UD counseling services, please visit sites.udel.edu/counseling/.

• If you believe there is imminent danger, call 911 or UD Police at (302) 831-2222.

• If it is after hours and the mentee is cooperative, call a friend, family member or Campus Security and Police, 302-831-2222 or 911. Additionally, the UD Helpline (302-831-1001) can be called 24 hours a day, seven days a week, 365 days of the year.

• If it is after hours or the mentee is uncooperative, call Campus Security and Police at 911.

• Know that the UD Helpline can always be reached at any time any day as they are available 24 hours a day, seven days a week, 365 days of the year. 302-831-1001.

Unhelpful Actions:

• Becoming involved with the mentee beyond your levels of expertise or comfort.

• Ignoring comments such as, “I won’t be a problem much longer,” or “Nothing matters; it’s no use.”

• Delaying or being too busy to intervene.

CAMPUS CONNECT GATEKEEPER TRAINING

The University offers gatekeeper training for those who may work with suicidal mentees. The training is available at no cost to all faculty, staff and graduate students; however, advance registration is requested. Please contact Counseling Services for more information.

— National Suicide Prevention Hotline: 1-800-273-TALK (8255)

A Peer with Anxiety

Anxiety is a normal response to an unsettling situation and/or perceived danger or threat to one’s well-being. While most people experience occasional anxiety, sometimes the level of anxiety can become overwhelming. For some, the cause of anxiety is clear; for others, it is difficult to pinpoint the reason for their distress.

Regardless of the cause, your mentee may experience some of the following symptoms. Please note that symptoms of anxiety can overlap with physical illness. If the person has not already checked in with student health, this is also a good referral.

• Difficulty concentrating
• Feeling “on edge”
• Having difficulty making decisions
• Experiencing sleeping problems
• Feeling unable to complete work
• Being too afraid to take action
• Rapid heartbeat
• Chest pain or discomfort
• Dizziness
• Sweating
• Trembling
• Shaking

Individuals may experience physical symptoms that can be spontaneous and intense or anxiety that increases over time. The following guidelines are appropriate in most cases:

Helpful Actions:

• Let the mentee discuss their feelings and thoughts in an appropriate setting; this alone often relieves a great deal of pressure.

• Provide reassurance.

• Be clear and direct.

• Talk slowly and remain calm.

• Discern whether you are able to respond adequately to the mentee’s concerns or if a referral is necessary.

• Provide a safe and quiet environment until the symptoms subside.

Unhelpful Actions:

• Minimizing the perceived threat to which the mentee is reacting.

• Taking responsibility for the mentee’s emotional state.

• Becoming anxious or overwhelmed yourself
A Peer Experiencing Panic Attacks

A panic attack is the abrupt onset of intense fear or discomfort that reaches a peak within minutes and includes at least four of the following symptoms:

- Heart palpitations; pounding heart/accelerated heart rate
- Excessive sweating
- Trembling/shaking
- Shortness of breath
- Feelings of choking
- Chest pain/discomfort
- Nausea/abdominal distress
- Feeling dizzy/unsteady/lightheaded
- Chills or heat sensations
- Numbness or tingling sensations
- Feelings of unreality or feeling detached from oneself
- Fear of losing control
- Fear of dying

Panic attacks are sudden and extremely intense in nature, without an obvious immediate triggering stimulus. Anxiety symptoms generally intensify over a period of time, and are highly correlated to excessive worry about some potential “danger.”

**Helpful Actions:**
- Stay with the person and keep calm.
- Move the person to a quiet place.
- Speak to the person in short, simple sentences.
- Help slow the person’s breathing by breathing with them or by counting slowly to 10.
- Discern whether you are able to respond adequately to the person experiencing the panic attack or if a referral is necessary. If a referral is necessary, while the person of concern is present, contact Counseling Services at 302-831-2141.

**Unhelpful Actions:**
- Minimizing the perceived threat to which the mentee is reacting.
- Taking responsibility for the mentee’s emotional state.
- Overreacting to the situation by becoming anxious or overwhelmed yourself.

A Peer Experiencing Food Insecurity

Individuals who experience food insecurity struggle to meet their basic nutritional needs commonly due to financial barriers. They may struggle to know where they will get their next meal or how they will pay for food. Food insecurity is a serious problem that affects many different areas of life. A mentee with food insecurity may experience difficulty concentrating, fatigue, dizziness and other health complications. In addition to health consequences, they may also experience shame or symptoms of depression and/or anxiety. A decline in academic performance is also highly correlated to these symptoms.

**Helpful Actions:**
- Speak to the mentee in private and share your support and concern for their well-being.
- Listen without conveying judgment.
- Learn about food resources available both on campus (see below) and in the community. Make appropriate referrals.
- Encourage the mentee to make an appointment with the dean of students to explore resources available and/or to address underlying concerns.

**Unhelpful Actions:**
- Ignoring the concern.
- Blaming the mentee.
- Making judgments or demanding an explanation as to why someone is struggling with food insecurity.
- Telling others about the situation, except for the professionals who can offer adequate support.

**Additional Resources:**
- Blue Hen Bounty: a campus-area food pantry that is fully stocked with canned meats, fruit and vegetables; various grains and single-serve meals; cereal, snacks and condiments; assorted beverages; and even basic toiletries such as shampoo and toothbrushes. Located at St. Thomas’ Parish at 276 South College Ave, students can access the Blue Hen Bounty by simply showing their UD OneCard. The pantry is open by appointment; call 302-368-4644 or visit Blue Hen Bounty online for more information.
A Peer Who is Engaging in Self-Injury

Self-injury is any damage intentionally caused to one's own body. This behavior is also referred to as self-harm or self-mutilation. Self-harming behaviors can occur more often among females and/or those who have experienced trauma or physical, emotional or sexual abuse. Even though a self-inflicted injury could be fatal, self-injury is not considered to represent a suicide attempt. Self-injury usually occurs when people feel overwhelmed by their emotions and are desperate to find relief from intense feelings, pressure or anxiety. Self-injurious behavior can leave scars resulting in permanent damage.

Common methods of injuring oneself include (but are not limited to) the following behaviors:

• Cutting
• Burning (or “branding” with hot objects)
• Picking at skin or reopening wounds
• Hair pulling (trichotillomania)
• Headbanging

**Helpful Actions:**
• Speak honestly to the mentee about your concerns and describe specifically what you have observed that makes you suspect they have been engaging in self-injury.
• Encourage the mentee to make an appointment with Counseling Services to help them address the distress that is causing the behavior.
• If the mentee is hesitant to make an appointment for themselves, please consult with a counselor in Counseling Services.

**Unhelpful Actions:**
• Responding with shock, horror or disgust to the self-injurious behavior.
• Ignoring the behavior and the possibility of serious physical damage.
• Becoming overly involved with the mentee beyond your level of expertise.

A Peer with Bipolar Disorder

Bipolar disorder is a type of mental illness that involves a disorder of affect or mood. The mentee's mood can fluctuate between periods of high mood or irritability (mania) to periods of feeling sad and hopeless (depression), with periods of stable mood in between. Bipolar disorder usually begins in late adolescence, often appearing as depression during teen years.

Signs of bipolar disorder include:

**The Highs:**
• Significant increase in goal-directed behavior
• Decreased need for sleep
• Reckless behavior such as spending sprees, erratic driving, irrational decisions
• Extreme irritability and distractibility
• Excessive “high” or euphoric feelings
• Increased energy, activity, restlessness
• Racing thoughts, rapid speech
• Abuse of drugs or alcohol

**The Lows:**
• Inability to sleep or oversleeping
• Persistent sad and/or anxious mood
• Feelings of hopelessness or pessimism
• Loss of interest or pleasure in activities
• Decreased energy, fatigue
• Inability to concentrate, make decisions

**Helpful Actions:**
• Speak directly to the mentee about your concerns and be concrete in describing the behavior that concerns you.
• Encourage the mentee to make an appointment with a counselor at Counseling Services.
• If the mentee is not in a state to be reasoned with (manic, distorted thinking, psychotic), contact Counseling Services to consult on how best to proceed to help the mentee.

**Unhelpful Actions:**
• Minimizing the seriousness of the mentee's presenting behavior.
• Making demands that the mentee see a professional (they may be feeling great and not realize anything is wrong).
• Becoming involved with the mentee beyond your level of expertise.
• Ignoring signs of suicidal tendencies.
A Peer in Poor Contact with Reality

Some mentees may have difficulty distinguishing their thoughts and perceptions from reality. Their thinking is typically illogical, confused or irrational (e.g., speech patterns that jump from one topic to another with no meaningful connection), their emotional responses may be out of control, and their behavior may appear bizarre and disturbing. The mentee may experience hallucinations and may report hearing voices or seeing things that are not really there (e.g., statements that someone is threatening to harm or control them). If you cannot make sense of a mentee's statements, contact Counseling Services as soon as possible.

**Helpful Actions:**
- Respond with warmth, kindness and firm reasoning.
- Remove extra stimulation from the environment (turn off the radio, step outside of a noisy classroom).
- Explain your concerns and assist the mentee in getting help. Contact Counseling Services as soon as possible.
- Acknowledge the mentee's feelings or fears without supporting the misperception (“I understand you think someone is following you, and it must seem real to you, but I don't see anyone”).
- Acknowledge that you are having difficulty understanding the mentee and ask for clarification.
- Focus on the here and now.
- Try to walk the mentee to Counseling Services.

**Unhelpful Actions:**
- Arguing or trying to convince the mentee of the irrationality of their thinking, as this commonly reinforces the false perception.
- Encouraging further discussion of the delusional processes or playing along with the mentee's delusion (“Oh, yes, I hear voices, too”).
- Demanding, commanding or ordering the mentee to do something to change their perceptions.
- Expecting customary emotional responses.

A Peer Under the Influence

Alcohol is the most widely used psychoactive drug and a preferred drug on college campuses. Fads and peer pressure affect patterns of use. Binge drinking, defined as five drinks in a row for men and four for women, can quickly become lethal. Other adverse effects of alcohol consumption include:

- Hangovers
- Hospitalization for alcohol overdose
- Poor academic performance
- Class absences
- Injury
- Risky sexual activity

Alcohol is the most common drug used by sexual predators to incapacitate victims and perpetrate sexual assault. Substance abuse problems are often recognized when a mentee's behavior affects the learning situation (e.g., drunk and disorderly conduct in class) or when a combination of the health and social impairments associated with alcohol or drug abuse sabotages their performance. Those who use alcohol are also likely to use other drugs, both prescription and illegal. Be aware that substance use may result in overly aggressive behavior. In such cases, remain calm and get help. Stay safe by retaining access to a door, knowing whom to call (Campus Security, 302-831-2222; for emergencies, call 911), and keeping furniture (e.g., a desk) between you and the person. Do not threaten, corner or touch the mentee.

**Helpful Actions:**
- Privately confront the mentee if you feel safe about the specific, observed behavior that concerns you.
- Offer support and concern for their well-being.
- Suggest the mentee talk with someone about these issues and maintain contact with the mentee after a referral is made.
- If the behavior continues, consult with Counseling Services.

**Unhelpful Actions:**
- Conveying judgment or criticism of the mentee's substance use.
- Making allowances for the mentee's irresponsible behavior.
- Ignoring signs of intoxication in the classroom.
A Peer Who is a Victim of Relationship Violence

Relationship violence is a term used to describe abuse within a relationship that is psychological, emotional, sexual or physical. Abusive behaviors may include physical abuse, verbal abuse, name calling, sexual violence, isolation, coercion, harassment, economic control, abusing trust, threats and intimidation, emotional withholding, destruction of property, or self-destructive behavior. Relationship violence is recognized under legal and university systems.

Victims may be hesitant to report this crime for a number of reasons, including:

• Fear of retaliation or increased abuse
• Isolation from support systems
• Diminished sense of self-worth
• Commitment to the relationship
• Self-blame
• Hope that the abuser will change
• Treats made to the victim, children or pets

A mentee who is the victim of relationship violence may experience a number of academic or work challenges, such as:

• Inability to concentrate
• Emotional, physical or mental trauma
• Physical harm
• Abuser preventing them from attending class or completing coursework

Helpful Actions:

• Listen to and believe the mentee.
• Understand the seriousness of all forms of abuse.
• Respect the mentee’s right to make their own decisions.
• Help the mentee to identify resources such as the Office of Equity and Inclusion, Counseling Services, Health Services, the police and the Women’s and Children’s Alliance.
• Offer to accompany them to a place of support.
• Let the mentee know that if the abuser has threatened harm to another person, you may need to report this to Campus Security and Police.

Unhelpful Actions:

• Minimizing abuse that is not physical. All forms of abuse can be traumatic.
• Blaming the mentee for staying in the relationship. The dynamics of relationship violence are complex and the victim is NEVER at fault for the abuser’s behaviors.
• Giving advice or pressuring for decisions: The mentee knows the dynamics of the abusive relationship best and will know what feels safe.
• Criticizing the abuser instead of the abuser’s behavior may cause defensiveness in the mentee.

A Peer Who is a Victim of Stalking

Stalking is any behavior that would make a reasonable person feel threatened, intimidated, annoyed or afraid. A stalker may start with small, annoying, persistent actions and progress to criminal behavior. These mentees may be people you do not know but are more likely to be someone you do know.

Some examples of stalking behaviors are:

• Trying to start or keep a relationship that the other person does not want.
• Threatening the person or the safety of someone close to the person.
• Becoming physically aggressive with the person.
• Unwanted repeated calls, emails, texts or letters.
• Following the person.

Helpful Actions:

• Encourage the mentee to not deal with this potentially dangerous situation by themself.
• Validate them for confiding in you about the situation.
• Advise the mentee to stay alert and pay attention to the stalker and to themselves. Never ignore the first signs of stalking. Do they have a strange feeling about someone? Trust your instincts.
• Suggest the mentee consider talking to Campus Security and Police who can assist you with documentation and confronting a stalker.
• Impress upon the mentee the importance of documenting thoroughly. Write down all of the stalker’s behavior in detail. Keep voicemails, letters, emails, text messages, gifts, photos, etc.
• Advise the mentee to consider talking to UD’s Title IX coordinator, Danica Myers, (302-831-8063), The Gender Equity Center (302-831-8063) and/or Counseling Services (302-831-1001).

Unhelpful Actions:

• Minimizing the potential danger of the situation.
• Discounting the mentees’ concerns and anxiety.
• Ignoring the problem.
A Peer Who is a Victim of Sexual Assault

Sexual assault is sexual contact made without consent. Consent may not be inferred from silence, passivity or inebriation. A current or previous relationship, including marriage, does not constitute consent. Sexual assaults are predominately committed by men against women; however, men can be assaulted by women. Same-sex assaults do occur as well. The majority of assaults (90%) are committed by an acquaintance of the victim and may involve the use of alcohol by one or both individuals. Incidents of sexual assault are against the law and University policy. There are many emotional and psychological reactions that victims of sexual assault can experience. One of the most common of these is depression. Additionally, survivors of sexual assault may experience severe feelings of anxiety, stress or fear; they may also experience acute stress or post-traumatic stress disorder (PTSD) as a direct result of the assault.

Helpful Actions:

• When possible, speak to the person in private. Be aware that when a person discloses information about an assault to you, they are demonstrating trust in you and the desire for help.
• Listen without conveying judgment. Victims can feel shame and anger toward themselves.
• Offer emotional support, understanding, patience and encouragement. Respect the mentee’s right to make decisions that are helpful in maintaining privacy, keeping safe and obtaining support.
• Refer the mentee to Campus Security and Police Services, if the person wants to make a police report. If they are under the influence of alcohol and/or other drugs, please encourage them to call the police without fear of punishment.
• Refer the mentee to Counseling Services (302-831-1001) and/or the Gender Equity Center (302-831-8063). They can also speak to a Title IX coordinator at 302-831-8063.

Unhelpful Actions:

• Minimizing the situation.
• Telling others about the incident, except for those who need to know.
• Conveying negative judgment even when high-risk behavior, such as intoxication, is involved.
• Delaying referring the mentee to a sexual harassment advisor or other supportive professional or services.
• Putting extra pressure on the mentee to make a police report.

A Peer Who is Aggressive

Individuals can become aggressive in situations they perceive as beyond their control. Sometimes feelings of anger are displaced from the situation onto the nearest target. If a mentee becomes violent, remain calm and get help. Do not deal with this mentee alone (Send another person for help. Stay safe by retaining access to an exit door, knowing whom to call, and keeping distance between you and the mentee. Do not threaten, corner or touch the mentee. Take all threats of violence seriously. Clarify what is meant by asking, “What do you mean by that?” or saying, “I am taking your words very seriously.” Call Campus Security and Police Services for consultation.

Helpful Actions:

• Pay attention to the warning signs (e.g., body language, clenched fists).
• Acknowledge the mentee’s anger and frustration, (“I hear how angry you are”). Rephrase what they are saying and identify the emotion (“I can hear how upset you are, and you feel like nobody will listen”).
• Do not place yourself in harm’s way. Call for assistance.
• Be straightforward and firm about the types of behavior you will not accept (“I need for you to step back.”).
• If the situation appears to be escalating, leave the scene of the situation and call Campus Security and Police Services at 911 for all emergencies, on or off campus:
  – 302-831-UDPD (8373) or 302-831-2222 — non-emergency calls.
• Debrief the incident with your supervisor or department chair.
• If you become desperate and are convinced you will be harmed if you don’t cooperate, say whatever you need to in order to escape to safety, even if you don’t mean it, (e.g., “Okay, I guess I can see your point and will give you a passing grade.”). Call Campus Security and Police Services at 302-831-UDPD (8373) immediately after.

Unhelpful Actions:

• Becoming defensive or getting into an argument or shouting match.
• Pressing for an explanation of their behavior.
• Acting hostile or punitive (“I’m going to give you an F in this class.”)
A Peer Who Presents as Threatening

All encounters have the potential for escalation into violence, and escalation tends to have predictable, and identifiable, behaviors. If you ever feel unsafe or threatened, call Campus Security and Police Services, **302-831-UDPD (8373)**, or call **911** for assistance.

There are two forms of violence:

**Impromptu Violence** — Spontaneous, unplanned, usually emotionally driven, violent outburst in reaction to circumstances of an event. (Example: receiving a perceived unjustified failing grade in a class)

**Intended Violence** — Planned, premeditated attack on a specific target. (Example: stalking a former relationship partner with intent to harm)

**IMPORTANT OBSERVATIONS:**

a) If you know the person, react on all levels of functioning — any mental impairment, head injury, alcohol use?

b) Do you observe signs of agitation: foot tapping, pacing, facial contortions, etc.?

c) Trust your gut – if the situation feels dangerous, leave the scene of it or get help ASAP.

d) If there is any physical aggression, such as throwing something or punching walls, call Campus Security and Police Services at **911** for all emergencies on or off campus.

**ADDRESSING THE CONFLICT:**

1) Personal Space: Resist the urge to get close and stay far enough back that they can’t reach you. Stay close to an exit and do not back into a corner. Once they are calm, it may be OK to move to closer range.

2) Body Language: Assume a nonthreatening stance. Use moderation with eye contact.

3) Communication: Keep voice tone calm and even, and volume low. Give more information. Identify behaviors you are observing and the consequences if they continue.

4) Setting Limits: Redirect back to task. If the incident is public, say, “I can see you are really upset. Can we go down the hall/step into this room, and talk about it?” Do not talk to a mentee who is threatening alone. It may be necessary to have another mentee assist with the situation. Empathize, yet be rm….. “I understand this doesn’t make sense to you.” Don’t make threats or tell them you’ll have them arrested. You can say, “If you don’t calm down, I will call the police.” Ask them to step back if they are in your space.

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A Peer Who is Grieving

When someone suffers a loss, it may disrupt their sense of the order of things and can sometimes lead to feelings that life is out of control and meaningless. Deaths may be accidental, may be sudden, or may be the result of a long illness. Feelings are often compounded by a sense of shock and a longing for the opportunity to “say goodbye.” Regaining meaning and a sense of control may help mentees endure the grieving process. Those experiencing grief tend to function better within an already established support system. Grief is a natural process but may become complicated (e.g., the person may become depressed and not able to function), and therefore the mentee may need additional assistance.

If you are aware that someone is grieving or has experienced a loss, they may be experiencing some of the common grief reactions. These reactions to loss may include:

- Physical reactions
- Cognitive reactions
- Emotional reactions
- Fatigue/exhaustion
- Difficulty concentrating
- Guilt
- Sleep disturbance

**Helpful Actions:**

- Listen carefully. This can help the mentee gain an understanding of their feelings and clarify options for dealing with them.
- Do not force the mentee to discuss the loss.
- Encourage the mentee to utilize their social support system.
- Be aware that family may be urging the mentee to stay at school or at work, even though the mentee longs to be at home (particularly with the death or imminent death of a parent).
- Encourage the mentee to talk with someone. Refer the mentee to Counseling Services (302- 831-1001). If the mentee appears in imminent danger, call Campus Security and Police Services at **911** for all emergencies on or off campus.

**Unhelpful Actions:**

- Saying phrases like “everything happens for a reason.”
- Minimizing the loss or suggesting the mentee must just move forward.
- Judging the mentee’s response to death.
A Peer Preoccupied with Food, Exercise or Weight

Preoccupation with food, exercise or weight may be a sign of an eating disorder, which is a complex condition that can arise from a variety of causes, including body image issues, self-esteem struggles, trauma and mental illness, and cultural messages. Preoccupation with food, exercise or weight can be a constant, deep-seeded, and often frustrating concern for many people, and at the same time be the only coping strategy a mentee feels they have.

Some concerning signs to watch for include:

- Rigid exercise or food rituals
- Fixation on dieting
- Purging — vomiting after eating, misuse of laxatives
- Binging — consumption of excessive amounts of food in a short period of time
- Unusual interest or obsessive thinking/talking about food, exercise, weight or body image
- Avoidance of food or social situations that include food
- Recent rapid weight change that is not explained by another medical condition
- A person believing they are fat when others consider them to be too thin

Helpful Actions:

- Do not ignore the problem.
- Speak to the mentee about your specific concerns and behaviors you have observed.
- Let the person know that you and others care about them unconditionally.
- Thank them for trusting you enough to talk about their struggle.
- Encourage the mentee to make an appointment with a healthcare professional.
  “There are people who are trained and understand what you are going through. Can I help refer you?”

Unhelpful Actions:

- Although often well-meaning, it is not helpful to give advice or simple solutions (“If you’d just stop, everything would be fine”).
- In an attempt to promote a neutral relationship with food or weight, do not make comments about the mentee’s weight loss or food consumption (“I wish I was as skinny as you,” “You’re so much better at staying away from treats than I am”)

Final Thoughts

Congrats, you made it through the University of Delaware Peer Mentoring Guide: Resources for Helping Peers in Distress. We hope you will refer to this resource in the future to help you recognize and assist your mentee in distress. We covered several campus and emergency resources and how to intervene and refer mentees to the Center for Counseling and Student Development. Graduate school can be stressful and overwhelming, and new students can cope in many ways. To help you recognize and best assist in these situations, we also walk you through several situations and offer suggestions on how best to help. Here are the key takeaways:

- Listen carefully and empathically to the information being shared with you by your mentees.
- If you are unsure how to assist your mentee or you do not feel comfortable or safe, please contact the CCSD at (302) 831-2141.

Thank you so much for serving as a peer mentor!
Additional Resources

Office of Institutional Equity: https://sites.udel.edu/diversity/
UD Office of Disability Support Services: https://sites.udel.edu/dss/
Parking: https://sites.udel.edu/parking/permit-info/
UD Shuttle Routes: https://sites.udel.edu/transportation/bus-routes/
UD Shuttle Map: https://udshuttle.doublemap.com/map/
UD Writing Center: https://www.writingcenter.udel.edu/
UD Career Center: https://www.udel.edu/students/career-center/students/
UD Information Technology (Tech Support): http://www1.udel.edu/it/index.html
UD Student Printing (Full-time graduate students have printing accounts): https://services.udel.edu/TDClient/32/Portal/KB/ArticleDet?ID=82

BOOKS:
• Published: a guide to literature review, outlining, experimenting, visualization, writing, editing, and peer review for your first scientific journal article — Deetjen.
• Writing Successful Science Proposals — Friedland, Folt, and Mercer. ISBN: 0300226705
• Writing Science: How to Write Papers That Get Cited and Proposals That Get Funded — Schimel. ISBN: 0199760241

PANDEMIC-SPECIFIC RESOURCES:
• “Psychology Tools: Guide to Living with Worry and Anxiety Amidst Global Uncertainty” (pdf)
• “SAMHSA: Taking Care of Your Behavioral Health – Tips for Social Distancing, Quarantine, and Isolation During an Infectious Disease Outbreak” (pdf)

WHERE TO GO AROUND DELAWARE:
• City of Newark, Delaware Website: https://newarkde.gov/
  Click on “Inform Me” to sign up for notifications even if you don’t live in Newark.
• Delaware Department of Motor Vehicles Website: https://www.dmv.de.gov/
• “Newark Post” readers choose the best businesses/services in the Newark, Delaware area: Readers pick Newark’s best businesses — “Newark Post”
• Things to do in Delaware: https://www.visitdelaware.com/things-to-do/top-things-to-do