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WHY CONSIDER MENTAL HEALTH?

For college students there are many stressors that comes with college, you are expected to effectively juggle studies, work, family, friends, health, fraternal and sorority obligations and many other things that are a part of life. It is a well-known fact that mental health can quickly need a tune-up, and often we do not do enough to consider our own mental well-being.

WHAT IS MENTAL WELL-BEING?

Researchers suggest that there are indicators of mental well-being, representing three domains. These include the following:

**Emotional well-being**
This is the ability to successfully express and manage an entire range of feelings, including anger, doubt, hope, joy, as well as many others. Positive emotional well-being encompasses high self-esteem, positive body image, knowing how to regulate feelings and knowing where to seek support and help regarding mental health. It is not limited to seeking counseling services.

**Psychological well-being**
Such as self-acceptance, personal growth including openness to new experiences, optimism, hopefulness, purpose in life, control of one’s environment, spirituality, self-direction, and positive relationships.

**Social well-being**
Social acceptance, beliefs in the potential of people and society, personal self-worth and usefulness to society, sense of community. This is the ability to build healthy relationships based on interdependence, trust and respect. It includes being aware of the feelings of others. Socially well individuals develop a network of friends and co-workers who share purpose, who provide support and validation.

WHAT DO THE NATIONAL STATISTICS SHOW?

Statistics from the National Alliance on Mental Illness (NAMI) show the top issues surrounding college students’ mental health:

- 25% young adults aged 18-24 have a diagnosable mental health issue.
- 80% of students feel overwhelmed by their responsibilities at college.
- 50% of students feel that their mental health is poor or below average.
- 30% of students have problems with schoolwork because of a mental health issue.
- 40% of students with problems involving mental health fail to seek help.
- 24.5% of college students say that they were or are currently taking medication for mental illness.

This essentially means that one in every four students has either taken or is still taking medications for their mental health.

- 75% of all mental health issues are established by the age of 24.

It seems that most mental health problems start very early, which makes it even more important to place a higher emphasis on solving the many college students’ health issues.

73% of students with a mental health condition had a crisis on college grounds.

This is a troubling statistic that may show the place where we come to be empowered can indeed be the same environment that may exacerbate or be the cause for mental health issues. This same college student mental health statistic states that only 34.2% of these students have reported that they had a crisis to college staff or faculty. We must feel empowered and empower others to fight through the stigma of mental health issues and seek help.

75% of students who have problems with depression don’t seek help.

ANXIETY

- 40 million adults suffer from an anxiety disorder, and as many as 75% of them have first felt the issues by the age of 22.
- 85% of college students report feeling overwhelmed by everything they must do.

This points to the common stress and anxiety that college students endure on our campuses.

- 41.6% of students say that anxiety is their top concern.

Such a top concern for college students nationally shows how common anxiety is, and its potentially debilitating effects.

SUICIDE RATES AND COLLEGE STUDENTS

1,000+ suicides occur on campuses in the US every year (SafeColleges Study).

We can safely agree that suicide is the worst possible outcome of an unresolved mental health issue. As that’s the case, this number is particularly devastating. What’s more, it makes suicide the second most common cause of death in the college student community, according to these highly reputable college suicides statistics. The first cause is accidents, which include deaths related to alcohol injuries.

OVER 50% OF ALL COLLEGE STUDENTS HAVE SUICIDAL THOUGHTS.

Most of it is not serious at all, and just a passing thought. However, according to these college student mental health statistics, as many as 10% of these students have serious thoughts about committing suicide. (SafeColleges Study)

SUICIDE RATES AMONG YOUNG ADULTS FROM 15-24 HAVE TRIPLED SINCE THE 1950S.

This point to the seriousness of overall mental well-being and the need to attend to ourselves and our peers when signs arise. Mental illness should not be taken lightly. (Verywell mind)

9% of students have thought about suicide in any given year (College Stats).

The thought of suicide is not an idea that only a few students consider. It is far more common and must be given attention.

Mental health problems range from the worries we all experience as part of everyday life to serious long-term conditions.

Anxiety and depression are the most common problems, with around 1 in 10 people affected at any one time. Anxiety and depression can be severe and long-lasting and have a big impact on people’s ability to get on with life.

WHAT DOES MENTAL WELL-BEING LOOK LIKE ON THE UNL CAMPUS?

According to the American College Health Association (ACHA-NCHA III) conducted at the University of Nebraska-Lincoln Fall 2019:

- Within the last 12 months, students rated their overall level of stress experienced:
  - 23.1% Low Levels
  - 50% Moderate Levels
  - 25.3% High Levels

Naturally, not all of them have mental health issues, but some could develop such as self-acceptance, personal growth including openness to new experiences, optimism, hopefulness, purpose in life, control of one’s environment, spirituality, self-direction, and positive relationships.
2% of UNL students surveyed indicated they had attempted suicide within the last 12 months.

19.1% of UNL students surveyed reported diagnoses for depression. (e.g., major depression, persistent depressive disorder, disruptive mood disorder).

23.4% of UNL students surveyed reported diagnoses for anxiety. (e.g., generalized anxiety, social anxiety, panic disorder, specific phobia).

5% of UNL students surveyed reported diagnoses for PTSD. Acute stress disorder, adjustment disorder, or other trauma related conditions.

**Mental Health Myths & Facts**

**Myth:** Mental health problems are very rare.

**Fact:** 1 in 4 people will experience a mental health problem in any given year.

**Myth:** People with mental illness can’t work.

**Fact:** We probably all work with someone experiencing a mental health problem.

**Myth:** Young people just go through ups and downs as part of puberty. It’s nothing.

**Fact:** 1 in 10 young people will experience a mental health problem.

**Myth:** People with mental health illnesses are usually violent and unpredictable.

**Fact:** People with a mental illness are more likely to be a victim of violence.

**Myth:** It’s easy for young people to talk to friends about their feelings.

**Fact:** Nearly 3 in 4 young people fear the reactions of friends when they talk about their mental health problems.

**Recognizing Common Stressors & Signs of Distress**

College students today often experience considerable personal and school-related stress. In addition to the pressure to achieve and work out a path to professional success, students must cope with a variety of personal stressors and pressures. Many of these personal stressors are age-related developmental factors, some are situational, and some are psychological.

In an attempt to juggle the demands of college and their personal lives, student sometimes act out aggressively or self-destructively. Strong feelings of anger, depression and anxiety are common. Sometimes just one added situation or stressor can precipitate a crisis.

**Common stressors that students experience include:**
- Isolation and loneliness
- Death of a loved one
- Break-up of an intimate relationship
- Serious illness
- Perceived rejection by family
- Academic pressure or failure
- Identity confusion
- Cultural oppression/discrimination
- Low motivation or inability to establish goals
- Outside work pressures
- Parenting responsibility

**Signs of possible distress:**
- Decreased motivation/concentration
- Increased irritability or anxiety
- Exaggerated emotional response that is inappropriate to the situation
- Increased isolation or sadness
- Hyperactivity or very rapid speech
- Marked change in personal hygiene, including weight loss or gain
- Excessive confusion
- Bizarre or erratic behavior
- References to suicide (e.g., feelings of helplessness or hopelessness)

**Recognizing Signs of Stress & Anxiety**

**What is stress?**

Feeling stressed is normal, it helps motivate us and even helps protect us. However, feeling too much stress is not healthy. If you start feeling stressed out on a regular basis, this could lead to greater health problems, and could negatively interfere with your relationships and everyday life.

- **Common external** causes of stress include major life changes, work, relationship difficulties, financial problems, being too busy, and family
- **Common internal** causes of stress include inability to accept uncertainty, pessimism, negative self-talk, unrealistic expectations, perfectionism, and lack of assertiveness

**What is Anxiety?**

Anxiety helps us get out of harm’s way and prepare for important events, and it warns us when we need to take action. But you may experience anxiety that is persistent, seemingly uncontrollable, and overwhelming. If it’s an excessive, irrational dread of everyday situations, it can be disabling. When anxiety interferes with daily activities, you may have an anxiety disorder. It is okay to seek and/or ask for help.

**Everyday Anxiety or an Anxiety Disorder?**

**Everyday Anxiety**

- Worry about paying bills, landing a job, a romantic breakup, or other important life events
- Embarrassment or self-consciousness in an uncomfortable or awkward social situation
- A case of nerves or sweating before a big test, business presentation, stage performance, or other significant event
- Realistic fear of a dangerous object, place, or situation
- Anxiety, sadness, or difficulty sleeping immediately after a traumatic event

**Anxiety Disorder**

- Constant and unsubstantiated worry that causes significant distress and interferes with daily life
- Avoiding social situations for fear of being judged, embarrassed, or humiliated
- Seemingly out-of-the-blue panic attacks and the preoccupation with the fear of having another one
- Irrational fear or avoidance of an object, place, or situation that poses little or no threat of danger

Recurring nightmares, flashbacks, or emotional numbing related to a traumatic event that occurred several months or years before
TIPS TO MANAGE STRESS & ANXIETY

Take a look at Greater Good in Action for more interactive stress coping strategies.

When you’re feeling anxious or stressed, these strategies will help you cope:

• Take a time-out. Practice yoga, listen to music, meditate, get a massage, or learn relaxation techniques. Stepping back from the problem helps clear your head.
• Eat well-balanced meals. Do not skip any meals. Do keep healthy, energy-boosting snacks on hand.
• Limit alcohol and caffeine, which can aggravate anxiety and trigger panic attacks.
• Get enough sleep. When stressed, your body needs additional sleep and rest.
• Exercise daily to help you feel good and maintain your health. Check out the fitness tips below.
• Take deep breaths. Inhale and exhale slowly.
• Count to 10 slowly. Repeat, and count to 20 if necessary.
• Do your best. Instead of aiming for perfection, which isn’t possible, be proud of however close you get.
• Accept that you cannot control everything. Put your stress in perspective: Is it really as bad as you think?
• Welcome humor. A good laugh goes a long way.
• Maintain a positive attitude. Try to replace negative thoughts with positive ones.
• Get involved. Volunteer or find another way to be active in your community, which creates a support network and gives you a break from everyday stress.
• Learn what triggers your anxiety. Is it work, family, school, or something else you can identify? Write in a journal when you’re feeling stressed or anxious and look for a pattern.
• Talk to someone. Tell friends and family you’re feeling overwhelmed and let them know how they can help you. You are also empowered to reach out to a peer well-being coach.
  • Talk to a Well-Being Coach

FITNESS TIPS: STAY HEALTHY & MANAGE STRESS = INCREASED PHYSICAL AND MENTAL WELL-BEING

Take a look at Campus Recreation Fitness & Wellness Resources.

Physical Well-being

This is the ability to actively make healthy decisions daily. It includes eating a nutritionally balanced diet, getting adequate sleep, visiting the doctor routinely, maintaining positive interpersonal relationships, and making healthy sexual decisions consistent with individual values and beliefs. A physically-well individual exercises three to five times per week, limits or abstains from alcohol and drugs, possesses the ability to identify and fulfill personal needs, and is aware of and respects their body’s limitations.

For the biggest benefits of exercise, try to include at least 2½ hours of moderate-intensity physical activity (e.g., brisk walking) each week, 1¼ hours of a vigorous-intensity activity (such as jogging or swimming laps), or a combination of the two.

5 X 30
Jog, walk, bike, or dance three to five times a week for 30 minutes.

Set small daily goals and aim for daily consistency rather than perfect workouts. It’s better to walk every day for 15-20 minutes than to wait until the weekend for a three-hour fitness marathon.

Lots of scientific data suggests that frequency is most important.

Find forms of exercise that are fun or enjoyable. Extroverted people often like classes and group activities. People who are more introverted often prefer solo pursuits.

Distract yourself with audiobooks, podcasts, or music. Many people find it’s more fun to exercise while listening to something they enjoy.

Recruit an “exercise buddy.” It’s often easier to stick to your exercise routine when you have to stay committed to a friend, partner, or colleague.

Be patient when you start a new exercise program. Most sedentary people require about four to eight weeks to feel coordinated and sufficiently in shape so that exercise feels easier.
Consider these additional resources:
Campus Recreation is committed to enhancing the educational experience and promoting lifelong wellness through excellent recreation programs, services, and facilities. Workout facilities are available on City and East Campuses.
Outdoor Adventures Center is home to the Outdoor Adventures program, existing to engage individuals and groups in adventure experiences for escape, education and enjoyment.

Bike UNL is a registered student organization at the University of Nebraska-Lincoln with the mission to empower bicycling and bicycle education in the UNL community. Bike UNL is composed of students at the University of Nebraska-Lincoln that believe in bettering the university through the support of bicycling.

Group challenge Life is full of challenges. Challenges can be opportunities for personal growth, development and self-discovery. Do more than you ever imagined. Work with a team to overcome seemingly impossible obstacles. Learn when to lead and when to follow.

RECOGNIZING SIGNS OF DEPRESSION

WHAT IS DEPRESSION?
Depression is different from normal sadness in that it interferes with your day-to-day life - your ability to work, study, eat, sleep, or have fun. Some depressed people don’t feel sad but may feel empty, angry, aggressive, restless or apathetic.

Depression comes in many forms:
Major depression: characterized by the inability to enjoy life and experience pleasure. Left untreated, it typically lasts 6 months. It is common for major depression to be a recurring disorder.
Dysthymia: a type of chronic “low-grade” depression. More days than not, you feel mildly depressed, although you may have brief periods of a normal mood. These symptoms last for around two years.
Seasonal Affective Disorder (SAD): characterized by feelings of depression that are more prominent during the fall or winter when overcast days are frequent and sunlight is limited.
Bipolar Disorder: Though there are two different kinds of bipolar disorder (I and II), both are generally characterized by cycling mood changes. Episodes of depression alternate with manic episodes, which can include impulsive behavior, hyperactivity, rapid speech, and little to no sleep. Typically, the switch from one mood extreme to the other is gradual.

COMMON CAUSES AND RISK FACTORS FOR DEPRESSION:
• Pandemics
• Loneliness
• Lack of social support
• Recent stressful life experiences
• Family history of depression
• Marital or relationship problems
• Financial strain
• Education issues (e.g., grades, overwhelmed)
• Early childhood trauma or abuse
• Alcohol or drug abuse
• Unemployment or underemployment
• Health problems or chronic pain
• Personal (e.g., gender and/or race inequality)

SIGNS & SYMPTOMS:
• Feelings of helplessness and hopelessness
• Loss of interest in daily activities
• Appetite or weight changes
• Sleep changes
• Anger or irritability
• Loss of energy
• Self-loathing
• Reckless behavior
• Concentration problems

• Unexplained aches and pains
• Warning Signs of Suicide with Depression
• A sudden switch from being very sad to being very calm or appearing to be happy
• Talking or thinking about death
• Making comments about being hopeless, helpless, or worthless
• Saying things like “It would be better if I wasn’t here” or “I want out”
• Clinical depression (deep sadness, loss of interest, trouble sleeping and eating) that gets worse
• Having a “death wish” or tempting fate by taking risks that could lead to death, such as driving through red lights
• Losing interest in things one used to care about
• Putting affairs in order, tying up loose ends, or changing a will
• Talking about suicide

PREVENTION:
It is important to seek help through a friend or a counselor if you feel depressed. A counselor can offer you ways to cope as well as prescribe any treatments that he or she sees fit. Depression carries a high risk of suicide. Anyone who expresses suicidal thoughts or intentions should be taken very, very seriously.

TREATMENT:
People who suffer from depression cannot just “pull themselves together” and get better--they need treatment. The good news is depression is among the most treatable of mental disorders. Treatment usually involves cognitive behavior therapy, antidepressant medication, or a combination of the two.

• Cognitive behavior therapy: Cognitive behavior therapy can help you to identify unhealthy, negative beliefs and behaviors and replace them with healthy, positive ones.
• Antidepressants: Antidepressants include many types of antidepressants and other mood stabilizers. They can help lift one’s mood and ease the feelings of sadness and hopelessness.
• You’ll need to work with your doctor to find the depression treatment that is most effective with the fewest side effects.

The CAPS office on-campus is a great place to get started. A counselor can help diagnose your condition and help facilitate treatment.

SELF-CARE:
Greater Good in Action has wonderful resources to consider for personal reflection. See those on optimism and purpose.

HOW DO WE INTERVENE?

PREPARING TO TALK TO AN INDIVIDUAL WITH MENTAL HEALTH ISSUES
When you feel that something’s up with a fraternity or sorority member, classmate, friend or loved one – there’s something going on in their life or you notice a change in what they’re doing or saying – it’s time to trust your gut instinct and ask them “Are you okay?”

Preparing to Talk to an Individual with Mental Health Issues
You don’t have to be an expert to ask the question. Asking shows someone you care about them and that can make a positive difference in their life and help them access appropriate support long before they’re in crisis.

In any of these situations your calmness, your willingness to help, and your knowledge of whom to call is important. You may choose to approach the individual, or the individual may seek your help with a problem. Below are some suggestions which might be helpful:
• Demonstrate your respect for the individual by talking to the individual when both of you have sufficient time and are in a private place free from disturbance by others.
• Give the individual your undivided attention.
• Express concern for the student in clear, direct, behavioral, non-judgmental terms (e.g., “I’ve noticed you’ve been absent from class lately and I’m concerned,” rather than “Why haven’t you
WELL-BEING TOOLKIT

GET INVOLVED:
BIG RED RESILIENCE & WELL-BEING

REACH® SUICIDE PREVENTION GATEKEEPER TRAINING
Anyone can help prevent suicide by learning the risk factors, warning signs, and how to intervene. REACH® is the name of the university’s suicide prevention gatekeeper training program designed to help the campus community prevent suicide by teaching faculty, staff and students how to:

- Recognize warning signs
- Engage with empathy
- Ask directly about suicide
- Communicate hope
- Help suicidal individuals to access care and treatment
- Big Red Resilience & Well-Being offers REACH® trainings only to university- and student-affiliated organizations, departments, colleges and programs. The training is designed to last 90 minutes and cannot be shortened. Participants who finish the 90-minute training receive certificates and lapel pins verifying their completion of the program.
- Contact Kenji Madison at kmadison2@unl.edu or Kenzie Miers at mmiers2@unl.edu.

WELL-BEING COACHING
Well-being coaches are student volunteers who help other students thrive and create the life they want to live, both now and in the future. They promote the nine dimensions of well-being that provides a framework for exploration and balance. Well-being coaches have been trained to help students build resilience through techniques like practicing gratitude, cultivating self-compassion, taking in the good, and more. Well-being coaches help other students focus on strengths and use the nine dimensions of well-being model as a framework for generating goals. Fraternity and sorority members are especially needed as coaches to help chapter members, councils, and community to be the best that they can be! Contact Kenji Madison- kmadison2@unl.edu for more information on how you can be a leader in well-being advocacy within the fraternity and sorority community.

MENTAL HEALTH RESOURCES AT CAPS
UNL Counseling and Psychological Services (CAPS) (402) 472-7450 | caps.unl.edu

Regular hours are Monday through Friday 8 a.m.-5 p.m. Same day crisis counseling is available. An on-call counselor is available 24/7. Most counseling services are completely covered by student fees. This includes individual counseling, support groups, therapy groups, etc.

If you feel overwhelmed, worried or alone, CAPS can help! Students often seek help for:

- Depression and anxiety
- Diversity issues
- Grief and trauma
- Concerns about a friend
- Homesick/adjustment struggles
- Drug and alcohol counseling
- Relationship difficulties
- Eating/body image concerns
- Social justice issues
- Sexuality concerns
- Other personal concerns

SERVICES INCLUDE:

- **Individual Counseling**
  Students who are new to CAPS should call to schedule an initial evaluation.

- **Groups & Workshops**
  Work through personal issues in a group setting. Participants learn to understand themselves and how others experience you. They receive support from other students experiencing the same issues. Drop-in groups are open to all students. For therapy groups, call CAPS at (402) 472-7450.

- **Crisis Care**
  These appointments are same-day to provide an opportunity to speak with a counselor about an immediate crisis, get support, and develop a plan to help manage the crisis. You define “crisis.” Examples include feeling suicidal, experiencing a recent trauma, or the recent death of a loved one. Help is available 24/7.

- **Disordered Eating & Body Image Services**
  Eating disorders are treatable and most individuals do recover. However, recovery can be a process which takes months or years. A large factor in recovery is your motivation to make positive changes in your life. CAPS seeks to foster the emotional and physical well-being of students.

- **Alcohol & Other Drug Counseling & Workshops**
  Services include substance use evaluations, individual counseling (not for students required by law), screening and intervention programs for alcohol and cannabis, and an alcohol psychoeducational workshop.

- **LGBTQA+ Center Liaison from CAPS**
  Dr. Scott Winrow specialized in LGBTQQA+ issues. He is available at swinrow2@unl.edu or (402) 472-7450.

- **Online Mental Health Screening**
  Mental health is a key part of your overall health. Brief screenings are the quickest way to determine if you or someone you care about should connect with a mental health professional - they are a checkup from your neck up. This program is completely anonymous and confidential, and immediately following the brief questionnaire you will see your results, recommendations, and key resources.

WHAT HAPPENS WHEN YOU VISIT CAPS?
Counseling sessions are of no cost for students. Students should be encouraged to make their own appointments by calling (402) 472-7450, or stopping by the University Health Center, Suite 223, during office hours.

In order to best serve students who often have competing demands in their schedules, CAPS operates on a same-day Initial Evaluation scheduling system for students new to CAPS.

If you need to speak with a counselor about an immediate crisis or urgent need, when you call, request a Crisis Care Appointment. This service is available for new and returning clients.

Initial Evaluation appointments are typically 1-1½ hours in length, which includes time spent to complete the necessary paperwork. The purpose of this appointment is to discuss the concerns you’re currently experiencing so your counselor can provide information and recommendations for ongoing services at CAPS or in the community; or determine if another service at UNL would better fit your needs. At the end of this appointment, one of the following will typically happen:

- You will be scheduled to move into short-term individual counseling.
- You will be scheduled for CAPS Group Counseling Programs.
- You will be scheduled for a Couples Evaluation to discuss couples/partner counseling.
- You will be scheduled for a one-time consultation.
- You will be scheduled for a referral appointment with the CAPS Care Manager to provide you with resource information and/or appropriate referrals.
If the Individual: | Take Immediate Action
--- | ---
Threatens the safety of self or others | UNL Police Department
Acts in a frightening or threatening manner | Campus Phone: 2-2222
Refuses to leave the classroom after being asked to leave | Cell Phone: (402) 472-2222
Reporting or initiating a threat or bomb scare | UNL Police Department
Acts significantly out of character | (402) 472-2222
Acts peculiar and this is cause for alarm | Counseling and Psychological Services (CAPS)
Displays unhealthy or dangerous patterns of behavior | (402) 472-7450
Indicates loss of touch with reality | follow prompts for after-hours assistance
Reflects suicidal thoughts or actions, depression, hopelessness, anxiety or difficulty dealing with grief | Center for Advocacy, Response & Education (CARE)
Indicates having been a victim of a stalking, hazing, or other crime | (402) 472-3553
Reports sexual assault or relationship violence | Voices of Hope 24-Hour Crisis Line
(402) 475-7273
Is not attending class for an extended period of time | Student Advocacy & Support
Seems overwhelmed by a problem that could affect university attendance or persistence | (402) 472-7030
Exhibits behavior that substantially impairs, interferes, or obstructs orderly processes and functions of the university | Services for Students with Disabilities
Exhibits behavior that deliberately interferes with instruction or office procedures | (402) 472-3787
Exhibits behavior that is lewd or indecent or breaches the peace | University Health Center Medical Clinic
Reflects debilitated feeling or overwhelmed by a family or personal emergency | (402) 472-5000
Is having academic difficulty due to physical, psychological or learning disability | Institutional Equity and Compliance
Indicates a need for disability accommodations | (402) 472-3417
Is having academic difficulty due to medical concerns/illness |