



# CRISIS INTERVENTION SELF-HELP RESOURCES

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Please Note: These resources are not intended to replace professional counseling.

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# AN INTRODUCTION TO CRISIS INTERVENTION

## Feeling apprehensive?

You might be wondering what will happen, how you will react, what the counselor will be like, and whether the experience will be helpful and meaningful to you. This page will highlight some of the benefits you can expect from crisis intervention and offers a guideline to assist you in taking full advantage of the experience.

## Why Seek Help?

These are some of the signs or issues that prompt people to seek counseling:

- stress or anxiety
- depression
- academic motivation
- career choice confusion
- eating disorders
- substance abuse
- family relationship conflicts
- financial stress
- grief/loss issues
- intimacy, commitment, or relationship issues
- identity concerns (e.g., ethnic/racial identity; sexual orientation, spiritual identity)
- thoughts and feelings about suicide or self-harm
- anger or thoughts of violence

Typically, people struggle with these kinds of issues internally, mulling them over in their minds trying to sort out possible solutions to their dilemmas. They may talk things over with family members and friends, but sometimes that may not feel like it's enough.

## What can I expect from the Crisis Intervention process?

What happens in crisis intervention depends on the unique needs and strengths of each person seeking assistance. For this reason, each crisis intervention experience is unique, just as every individual is unique.

Typically, the first few sessions are spent clarifying the problem and examining what solutions have already been tried. This process assists the counselor in determining which crisis intervention strategies will be most helpful to you. Once you clarify your issues, you and the counselor will delineate crisis intervention goals. There are many approaches to dealing with these issues. Often, the process will include learning new problem-solving or coping skills, increasing self-understanding, exploring life patterns, and gaining a better sense of how you are influenced by your surroundings.

## How can I get the most out of the Crisis Intervention process?

- Attempt to clarify your goals, and/or what you hope to get out of the experience
- Consider how you feel about the counseling relationship
- Be an active participant
- Focus on what is most important to you
- Recognize and express feelings
- Be patient with yourself
- Ask questions

## EATING DISORDERS

### What is an eating disorder?

Anorexia, bulimia and binge eating are the three most common eating disorders.

#### SOMEONE WITH ANOREXIA:

- has an intense fear of gaining weight and typically has lost 15% of their original body weight
- has a distorted body image and often engage in intense and excessive exercise
- Women may experience an interruption in their menstrual cycle due to weight loss and inadequate nutrition.
- may experience hunger but feel in control when they resist the urge to eat

#### SOMEONE WITH BULIMIA TYPICALLY:

1. engages in binge eating - eating large portions of food at one sitting, often in response to emotional, environmental stressors, or dieting
2. These episodes are often characterized by a feeling of being out of control of their eating.
3. very often purges after bingeing to alleviate the discomfort and guilt created by food intake

#### THOSE WITH BINGE EATING TEND TO:

- eat more than what is needed to maintain a healthy body
- generally eat in response to emotional or environmental stressors as well as responding to intense hunger from deprivation and dieting
- have usually dieted repeatedly in the past and have experienced shame about food and body
- feel discouraged and view their ability to handle their problems as inadequate

All of these eating disorders are serious health problems, perhaps life threatening, and can benefit from professional help.

## Sources and Helpful Websites are:

- National Eating Disorders Association: [www.nationaleatingdisorders.org](http://www.nationaleatingdisorders.org)
- Anorexia Nervosa and Associated Disorders: [www.anad.org](http://www.anad.org)
- Eating Disorder Referral and Information Center: [www.edreferral.com](http://www.edreferral.com)
- The Renfrew Center Foundation: [www.renfrew.org](http://www.renfrew.org)
- Body Positive Website: <http://www.bodypositive.com>

## Challenge Yourself to Have a Positive Relationship with Your Body

How much of your mental energy is spent on body image? Is your self-esteem affected by the extent to which you maintain control over your diet and weight? To help you become more aware of these destructive thoughts, we invite you to take a week and challenge yourself each day with the following.

- Monday- We challenge you to refuse to diet or engage in any dieting behavior. Studies have shown that weight-loss dieting only serves to promote diet/weight preoccupation and eating disorders.
- Tuesday- The challenge today is to refuse to engage in conversations pertaining to weight, diet or body image. Steer conversation away from these issues if they arise. (Notice how much time you usually spend on these issues).
- Wednesday-Go to the Counseling and Testing Center and pick up Eating Disorder brochures, and make it a point to discuss the contents with at least one other person.

- Thursday-Allow yourself two 15-minute periods for relaxation today. By allowing your body to relax, you become more connected to this part of yourself.
- Friday-At the start of every hour, think of something positive about your body and challenge any negative feelings. You are a valuable person exactly as you are.
- Saturday-Examine your attitudes toward obesity.
- Sunday-Approach but don't control! Approach someone that you feel may be suffering from an eating disorder. Let this person know you are concerned and be direct, but don't try to control their eating behavior. The best you can do for this person is to let them know you care and that you are there to offer support.

## COPING SKILLS FOR TRANSITIONS

When preparing for any transition, it might be helpful to think of previous transitions in your life. Sometimes the newness of a situation can feel overwhelming and your emotional response may feel very intense and perhaps even scary. Hence, to remember that in the past you have lived through similar experiences and that in spite of your initial reaction you were able to adjust eventually, can be comforting. Also, it may be better to share your reactions with someone in spite of your possible worry that no-one would understand. Chances are, keeping a fear locked up inside yourself, it grows in intensity and becomes pervasive. To find a way to express your concerns/reactions to someone, provides relief and possibly a new perspective. Remind yourself that your thoughts and feelings are important whether they are shared by others or not. Allow yourself to 'listen' to your feelings/thoughts/reactions rather than pushing them down or medicating yourself with alcohol, drugs, food, etc. You might gain insights which may lead to different ways of dealing with your experience. Going abroad is not only a chance to learn about a new culture, it also provides the opportunity to get to know yourself better.

Remember it is generally helpful to:

### ACKNOWLEDGE

Acknowledge your thoughts, feelings, reactions (at least internally) without making a judgment.  
e.g. I am really feeling sad; I am angry, scared; I am feeling inadequate, etc.

### ASK

Ask 'what might be going on for me?' 'What does this situation remind me of?' Invite your thoughts to go wherever they want to in order to get as much awareness/insight as possible. Sometimes a person experiences strong emotions that seem like an overreaction; it might be possible that the present circumstances provoke an emotional memory of a previously stressful/painful situation. To recognize this connection might allow you to have a better understanding of your present situation. If you worry about something excessively (obsess)

and/or engage in compulsive obsessing, etc. what might be the **real** worry, fear...that gets masked by your conscious, obsessional thoughts?

## REASSURE

Reassure yourself that whatever you **think** or **feel** it is alright even if it is negative; there is a difference between thinking and feeling something and acting it out which may not be healthy, constructive or acceptable. **Thoughts/feelings do NOT equal actions.** Ask yourself, given your feelings/thoughts, what would be helpful right now? What might you be able to do to comfort yourself and/or to deal with the situation constructively.

## REMEMBER

Remember previous adjustments; e.g., when you first moved away from home...imagine what you felt like when you were, for the first time alone in your room, had to face a day on your own. Note your feelings, thoughts...how did you deal with it, what was comforting to you?

## HOW DO YOU GENERALLY DEAL WITH STRESS?

What else could you do to soothe/take care of yourself? (e.g., make a list of activities)

## WHAT CAN YOU DO INSTEAD?

Do you ever use drugs, alcohol, or food to help yourself 'feel better?' If so, what could you do instead?

## Tips for mental health on a daily basis:

1. Exercise regularly.
2. Pay attention to your nutrition, eat regularly.
3. Interact/have contact with a person.
4. Learn/try something new.
5. Do something nice for yourself, do something nice for someone else, write into a journal.

6. In regards to alcohol use, if you choose to drink, it is wise to:
  - set a limit for yourself before you start drinking, e.g., "I'll have no more than two 8 oz. of beer."
  - pace yourself, drink slowly, have a non-alcoholic beverage in between drinks.
7. If you choose not to drink, it might be easier to let your host family/friends know ahead of time; if you feel uncomfortable with sharing the real reason, it is perfectly alright to think of a less vulnerable explanation, e.g., 'due to a medical' condition...

Source: [www.nimh.nih.gov](http://www.nimh.nih.gov)

## KEEPING A JOURNAL

### Have you ever kept a journal?

Why or why not? If you do, what purposes does it serve? If you don't, would you like to? What's stopping you?

A journal can be a valuable tool for knowing yourself better. It is a willing ear and a confidant who keeps your secrets. It's also a way to hear yourself, to record and then re-approach your problems and ideas later, when you may be feeling differently. Your journal both affirms and challenges your beliefs about yourself. Are there patterns to your feelings? Do you always seem to wind up in relationships with the same kind of person? Do you have recurrent dreams? What do you think about that?

Another way a journal can help you is by reflecting your feelings about yourself, feelings you may not be aware of until you look back at some of your entries. What's the dominant tone of your journal? Are you usually confident, or are you typically down on yourself? Do you hold yourself to high standards of perfection? Criticize yourself constantly? Do you only write when you're depressed? If the answer to any of these questions is "yes," can you think of a way to use your journal to restore some balance to your life?

To use a journal, you've got to keep one. If you want to start a journal but haven't, you may be comparing your writing unfavorably to an idea you already have about what a journal should be. You may be unwilling to write unless you know in advance that you'll produce something beautiful and significant. Under these circumstances, you'll probably never write anything. Natalie Goldberg (*Writing Down the Bones*) suggests giving yourself permission to write the worst journal entry ever. This frees you from your fear of failure and can get you started.

Fortunately, journal writing has no rules. Try writing a page of lies, scribbling with colored markers, copying down the words to a song you like, or tearing a page out. Leave space to go back later and comment on what you've written. Your own interests and needs will shape your writing.

A number of journal writing books are available. Some are workbook/exercise style. You'll find them in the Self Help section of bookstores. Others, such as Kimberly Snow's [Word Play/Word Power](#),

combine readings and exercises. Ronald Klug offers tips on [How to Keep a Spiritual Journal](#). Julia Cameron's [The Artist's Way](#) uses insights from the addiction and recovery process as a framework for getting in touch with your creativity. These books tend to be sold in the Reference section with other books on reflective and creative writing.

#### WHAT DO YOU NEED TO START KEEPING A JOURNAL?

Some people like a particular kind of pen or pencil. You'll need something to write on: a spiral notebook, graph paper, a steno pad. Some people like bound, blank books; beautiful ones are available (with and without lines) in many sizes. Check around at bookstores and art supply stores.

You've got a lot to gain, and nothing to lose, by keeping a journal. Whether it's for fun or for solving difficult problems, for writing poetry or writing about your last therapy appointment, keeping shopping lists or writing letters, a journal gives you a quick and easy way to talk to, support and value yourself.

Sources: [www.mytherapyjournal.com](http://www.mytherapyjournal.com)

## DEPRESSION

Most likely, everyone will experience feeling depressed one time or another during their lifetime. A person may feel depressed for an obvious or no apparent reason at all (see list below.) At times, these feelings of depression may become overwhelming, intense and prolonged. Daily functioning may become difficult, if not impossible. Thoughts of hurting oneself in some way, even ending one's life, may appear to be the only option. As a result, it is important to recognize depressive symptoms early on and seek help from others including professionals.

Although each person may experience a depressive state differently, here is a list of common symptoms that many people feel when they are depressed:

### Symptoms:

- Lack of emotional response (i.e. "I just feel numb.")
- Loss of warm feelings toward family and friends.
- Feeling all alone or wanting to isolate themselves from others.
- Helplessness and/or hopelessness.
- Inability to experience pleasure, even from activities that used to feel good.
- Loss of sexual desire.
- Feelings of self-blame and/or guilt.
- Feeling worthless.
- Feeling physically, emotionally and mentally tired, lethargic, or exhausted.
- Feeling irritable and seeing everything in a negative light.
- Change in sleeping (i.e. sleeping longer hours, waking up frequently, unable to fall asleep, etc.)
- Loss of or increase in appetite.
- Physical symptoms such as headaches, upset stomach, etc.
- Academic difficulties due to inability to concentrate, study or attend classes.

## Why does someone become depressed?

- Loss of a significant relationship.
- Leaving home or transition to an unfamiliar environment.
- Academic, professional and/or financial difficulties.
- Parental conflict.
- Relational difficulties (romantic and otherwise.)
- Existential concerns (e.g.: “meaning of my life” questions or uncertainty about future after graduation.)
- Substance abuse; alcohol and/or drug addiction.
- Other chemical or biological factors such as hormonal imbalance, reactions to certain medications, etc.
- Environmental circumstances

## Things you can do to help yourself:

- Be kind to yourself and give yourself a break from stressful situations.
- Seek out support, validation and assistance from friends, family and others.
- Engage in activities that were pleasurable in the past even if you do not enjoy them right now.
- Exercise and spend time outdoors (both help alleviate symptoms through endorphin release.
- Avoid making long term commitments or decisions until your depression has lifted.
- Take one day, hour, activity, etc., at a time.
- Attempt to accomplish small goals as opposed to trying to solve everything at once.
- Journaling and/or painting may be a way to express your thoughts and feelings. Reassure the person that you care and want to be supportive. Do not discount or minimize the person’s experience.

If feelings of depression persist and or worsen, it is advisable to reach out to a mental health professional. Remember, depression is a common issue that many students face. You are not alone

and alleviation of your symptoms is definitely possible. In addition to exploring your issues with a therapist, it might be helpful to consult with a psychiatrist to evaluate whether anti-depressant medication might be indicated.

## How can I help someone else who may be depressed?

- Listen and acknowledge the person's feelings and thoughts.
- Reassure the person that you care and want to be supportive.
- Do not discount or minimize the person's experience.
- Ask the person, "What would be helpful right now? Is there anything I can do?"
- Suggest professional resources (UCTC, SHC, etc.)
- Offer to accompany the person to an appointment.

Sources: [www.webmd.com](http://www.webmd.com) and [www.nimh.nih.gov](http://www.nimh.nih.gov)

# GRIEF

## Suggestions for Individuals Dealing With Grief

- Talk regularly with a friend.
- Carry or wear a linking object. Carry something in your pocket or purse that reminds you of the one who died - a keepsake they gave you perhaps, or a small object they once carried or used, or a memento you select for just 'this purpose.
- Create a memory book. Compile photographs which document your loved one's life. Arrange them into some sort of order so they tell a story.
- Recall your dreams. Your dreams often have important things to say about your feelings and about your relationship with the one who died.
- Tell people what helps you and what doesn't.
- Plant something living as a memorial.
- Keep a journal.
- Structure alone time. You may have your full share of alone time, in which case you'll want to ignore this suggestion. But if you're often among family, friends, and colleagues, make sure you also have time all by yourself. A large part of the grieving process involves what goes on inside yourself-your thoughts, your feelings, your memories, your hopes and dreams.
- Listen to music.
- Do something your loved one would enjoy.
- Screen your entertainment Some TV shows and movies are best not viewed when you're deep in grief. The same goes for certain books or articles. If you have any question, do a bit of research before you find yourself in the midst of an experience which brings up too many feelings for you to handle comfortably.
- Allow yourself to laugh.
- Allow yourself to cry.
- Take a day off.
- Give yourself rewards.
- Do something to help someone else.

## Offering Support to Bereaved Persons

- Be empathic.
- Get involved.
- Be an active listener.
- Offer non-verbal support.

## Unsupportive Responses to Bereaved Persons

- Fails to include the mourner in decision-making.
- Tries to relate to the bereaved person by discussing non-generalized personal experiences.
- Neglects to consider the individualized nature of the grieving process.
- Inability of the support person to discuss issues of death and loss.
- Forcing the grieving individual to discuss the death or loss.
- Judging the mourner by stating, "Why are you acting this way?"
- Claiming to fully understand by stating, "I know exactly how you feel."

Sources: [www.webmd.com](http://www.webmd.com) and [www.psychologytoday.com](http://www.psychologytoday.com)

## HEALTHY RELATIONSHIPS

Being in a healthy relationships means...

1. Respecting individuality, embracing differences, and allowing each person to “be themselves”
2. Discussing things, allowing for differences of opinion, and compromising equally.
3. Expressing and listening to each other’s feelings, needs, and desires.
4. Trusting and being honest with yourself and each other.
5. Resolving conflicts in a rational, peaceful, and mutually agreed upon way.

### Other Characteristics of a Healthy Relationship

- Each person has individual rights
- Open communication
- Trust
- Mutual respect for opinions
- Equality in decision making Shared respect for each other’s values
- Respect for each person’s sexual boundaries
- Willingness to honestly discuss problems
- Willingness to tell your partner what you need or want
- Honesty
- Always using a nonviolent approach to resolving conflict
- Understanding that conflict and anger are okay
- Taking responsibility for yourself

- Accepting the fact that everyone makes mistakes
- Owning your own mistakes
- Commitment
- Joy and playfulness

Direct, kind, and clear communication is the most effective way to communicate with your partner. We can minimize conflict by learning to express our needs, wants, hopes, and desires clearly and caringly. We can also listen to other people and hear what they have to say. Respecting them as well as ourselves is part of this process.

#### EXAMPLES:

- “I want this, but what do you want?”
- “How can we work this out?”
- “I care about what you need. I want to solve this.”

#### RESULTS:

- You often get your needs met.
- You build and maintain the relationship.
- Your partner respects you.
- You work towards peace in the relationship.

Source: [www.medicinenet.com](http://www.medicinenet.com)

## Signs of an Unhealthy Relationship

A climate of negativity within the relationship; a disproportionate number of negative comments about each other vs. positive comments about the relationship. E.g. “we never have any fun,” vs. “we laugh a lot.” Constant negativity can be emotionally draining.

Allowing hurtful behavior from one another. A high tolerance for bad behavior in the beginning of a relationship may lead to trouble down the road.

Conflict escalates from the get-go with one partner making a critical or contemptuous remark in a confrontational tone. Blaming and exploding cause more harm than good... as can avoiding or burying the conflict. E.g. “give it to me now...,” or “I don’t care, it doesn’t matter to me...”

Seek help early. If you and your partner are experiencing problems in your relationship, consider seeking help from others instead of living with the unhappiness for too long. The UCTC offers both individual and couples counseling, and often has groups running that focus on establishing healthy relationships.

### Sources:

Advocates for Youth: <http://www.advocatesforyouth.org/>

“Young Men’s Work” (1995) by Allan Creighton & Paul Kivel.

The Gottman Institute: <http://www.gottman.com/marriage-couples/>

## LONELINESS

Feeling lonely at times is very human. There are different kinds of loneliness: feeling as though you don't have enough (or any) friends; feeling unseen or unknown by those you know; difficulty feeling good when alone or making use of one's time. Sometimes we suffer because of a false belief about ourselves: "If I am alone, then something must be wrong with me. Perhaps I am unlovable." This feeling may be a symptom of insufficient self-love. On the other hand, growing up in a society that promotes a dependence upon, or even an addiction to external things for a sense of well being - food, clothes, drugs, other people - leaves many of us floundering when left all to ourselves. Some of us may have internalized the false view that to be happy is to be surrounded by others at all times, regardless of how we may feel in their company.

And yet, if we can learn to be truly intimate with ourselves, then we are never alone. This sort of intimacy, however, is not always easy to come by. It may take facing the wounded, deficient parts of ourselves, as well as the wonderful, abundant parts. In many families such parts were rejected and denied, and therefore went underground, perhaps festering into a low-grade depression. Therapy frequently involves facing and integrating these rejected parts and experiences. These neglected parts of ourselves often carry a heavy burden of shame. Shame too can isolate us from others, contributing to our loneliness. Group therapy and other mutually accepting relationships can offer an antidote to shame, as we explore our common vulnerability and see that our deepest secrets are not the terrible beasts we imagined.

Sources: [www.psychcentral.com](http://www.psychcentral.com)

## RELATIONSHIP BREAK-UPS

### Coping With a Break-Up

Successful intimate relationships take on added significance during college. It is no wonder then, that students find themselves consumed with pursuing, maintaining, ending, and recovering from the loss of romantic relationships. While each of these stages of relationships can be difficult and challenging, it is commonly when relationships end that students struggle the most.

#### INTENSE FEELINGS:

Relationship break-ups can create a sense of crisis and trigger a mixture of many feelings:

- confusion
- anger
- sadness
- ambivalence
- anxiety
- depression
- guilt
- loneliness
- betrayal
- isolation
- loss
- fear
- relief
- rejection

Relationship endings can also impact our daily lives and alter our abilities to function as we usually do. It's common to experience loss of energy, lack of motivation or direction, inability to focus, changes in sleeping and eating patterns, and disruption or a sense of emptiness in typical routines and activities. Dealing with external events and continuing to perform ordinary tasks can become a struggle during this time. After a break up, it is common to feel emotionally overwhelmed and experience frequent, sometimes uncontrollable, emotional outbursts or become "numb" with little expression of feeling.

## Unhealthy ways of coping

In an attempt to cope, we sometimes try to avoid our feelings. We react by obsessing or being preoccupied with our lost love, withdrawing from others and retreating into fantasy, immersing ourselves into other relationships or coursework, or trying to find a "fix"—using our addictions to numb the pain and escape the situation. These types of reactions and attempts to cope frequently create deeper despair.

## Let yourself grieve

The best way to deal with the ending of a relationship is to let yourself grieve. A significant loss can generate many strong and important feelings, and although experiencing these feelings is often painful, frustrating, and unpleasant, it is in doing this that we begin to recover and let go.

## Self-reflect

The grieving process we can be a time for self-reflection, a chance to focus on our own growth and development:

- What did you notice about yourself in the relationship?
- What is positive? What would you like to change?
- Were there patterns or issues that brought you into this relationship, and/or caused it to end.

Beyond examining yourself in the relationship, this can also be a time to re-learn what it is that you like and take pleasure in:

- What are your priorities and preferences in life?
- What were these before your relationship began?
- Who are you on your own and how do you want to live your life?

## Talk with others

Sometimes it is helpful to talk these things through with others (i.e. family, friends, other support people, and professionals). Putting emotions into words helps to clarify our experience and assist us in constructing realistic goals or expectations. Seek out those that feel helpful to you and truly validate your experiences.

## Recovery

Ideally, as you work through this process of recovery you will begin to make new choices for yourself and feel better. Loss "takes time" to heal from. However, if you let yourself grieve, acknowledge the loss, focus on learning from your experience, and spend your energy concentrating on yourself... with time you will find yourself "moving on". Whether this means you choose to remain single or enter into new romantic relationships, you will notice you feel differently than you did in the beginning and realize you are now doing things differently as well.

Source: [www.helpguide.org](http://www.helpguide.org)

## DEALING WITH THE AFTERMATH OF TRAGEDY IN THE CLASSROOM

### For Instructor

Take time to talk as a group or class. Consider providing an opportunity at the beginning of a class period. Often, a short time period is more effective than a whole class period. This serves the purpose of acknowledging that students may be reacting to a recent event, without pressuring students to speak. Introduce the opportunity by briefly acknowledging the tragic event and suggesting that it might be helpful to share personal reactions students may have. Have students discuss “facts” first, then shift to emotions

Often the discussion starts with students asking questions about what actually happened and “debating” some details. People are more comfortable discussing “facts” than feelings, so it’s best to allow this exchange for a brief period of time. After facts have been exchanged, you can try to shift the discussion toward sharing personal and emotional reactions.

You might lead off by saying something like: “Often it is helpful to share your own emotional responses and hear how others are responding. It doesn’t change the reality, but it takes away the sense of loneliness that sometimes accompanies stressful events. I would be grateful for whatever you are willing to share.”

### RESPECT EACH PERSON’S DEALING WITH THE LOSS.

Some will be more vocal or expressive than others with their feelings and thoughts. Everyone is affected differently and reacts differently.

### BE PREPARED FOR BLAMING.

### GIVE YOURSELF TIME TO REFLECT.

Remember that you have feelings, too, and thoughts about what occurred, and these thoughts and feelings should be taken seriously, not only for yourself, but also for the sake of the students with whom you may be trying to work. Some find it helpful to write down or talk out their feelings and thoughts.

COME BACK TO THE FEELINGS AS A GROUP AT A LATER TIME.

It is important to acknowledge the adjustments people have made. Just because everything seems to be back to normal does not mean that everyone has finished having feelings about the loss.

*Special Thanks to Virginia Tech's Cook Counseling Center and Northern Illinois University's Counseling and Student Development Center for this material.*

## ABUSIVE RELATIONSHIPS

Relationship abuse occurs in epidemic proportions. Here are some recent statistics:

- One in three women experiences at least one physical assault by a partner during adulthood.
- Young women ages 19-29 reported more violence by intimates than any other age group.

Although some relationships are mutually abusive, more frequently there is an imbalance of power in abusive relationships. While abuse may take the form of physical violence, abuse can also occur on an emotional and verbal level.

### Signs of Abuse

- Persistent put downs or statements that diminish one's worth or ability.
- Controlling behavior.
- Intense jealousy of friends, family, or other outside social contact.
- Yelling, shouting, and intimidation.
- Interrogating one's partner about time spent apart from the relationship.
- Feeling threatened and intensifying the abuse when one's partner begins to move toward autonomy or independence, e.g., getting a better job, going back to school, making new friends, seeking counseling.
- Demanding or coercing sex when one's partner is not interested.
- Borrowing money without repaying it or taking things without asking and not returning them.
- Physical abuse or the threat of physical harm.

Individuals who abuse their partners sometimes abuse substances as well or display other addictive behavior.

While appearing to be powerful, abusive individuals are often very dependent upon their partners for their sense of self-esteem. Sometimes they expect their partners to take care of day to day tasks which most adults handle for themselves. Abusive partners often feel powerless in the larger world; the relationship may be the only place where they feel a sense of power. Attacking their partner's abilities or worth is one way that abusive individuals maintain a sense of power, esteem, and control. At a deep emotional level, abusers often feel that they are not good enough and fear abandonment. By keeping their partners in a diminished, fearful, or dependent state, they attempt to ensure that their partners will not leave them.

## Steps for Abusers

If you have abused your partner physically or emotionally, the following steps may help you begin to change this pattern:

- When you start to feel angry, take a deep breath, focus on your body, and walk away from your partner. You can return once you've cooled down.
- Recognize that anger is usually a secondary emotion masking more vulnerable feelings. Try to recognize the fear and hurt that lie beneath the anger.
- Reflect upon the fact that your angry outbursts, while exerting a sense of control in the short term, may ultimately drive your partner away.
- Redirect your anger in a way that does not hurt other people, such as engaging in intense physical activity.
- Start keeping a journal. When you become angry, sit down with your journal and write down your thoughts and feelings.
- Allow yourself to question your assumptions and expectations of your partner. For instance, when you feel hurt, this may reflect your own vulnerabilities, rather than any attempt by your partner to hurt you.

- Recognize the need for help and seek it out. Talk to friends and others who can support your effort to change.
- Work with a counselor to learn how to express your feelings without hurting or belittling your partner.
- Join an anger management workshop or group.
- Partners of abusive people often engage in "enabling" behavior. In essence, enabling behavior consists of taking care of the abusive partner, making excuses for him or her, and otherwise going along with the pattern of abuse. Enabling behavior may include the following:
  - Denying that a problem exists or convincing oneself that in spite of all evidence to the contrary, things will get better.
  - Maintaining a "front" to the outside world that everything is fine. Cleaning up after the abusive partner's messes or outbursts, e.g., intervening for them at work, apologizing for starting the fight, fixing broken doors and windows, putting on make-up to cover the bruises.
  - Smoothing over or tiptoeing around conflict areas in order to stay out of harm's way and to maintain a sense of peace.
  - Taking over everyday tasks that most adults do for themselves.

Enabling behavior is often a symptom of poor self-esteem. By taking care of one's partner physically or emotionally, one can feel needed or even loved. At a deeper level, a person who enables an abusive partner may feel that no one could love them for who they are, but only for what they can provide to others. This is why abusers often try to convince their partners that "no one else would want them." Enabling behavior not only traps one in an unhealthy, unsupportive relationship, but keeps one's abusive partner in a dependent position as well. The point here is not to blame oneself, but to understand one's relationship patterns.

## Positive Steps for Coping with an Abusive Relationship

- Maintain outside relationships and avoid isolation.
- Seek "reality checks" by talking to others if you suspect that your partner has been abusive.
- Learn about resources available to people in abusive relationships.
- Identify a "safe place" you can go to in an emergency if your partner becomes threatening or violent.
- Read self-help books about healthy and unhealthy relationships.
- Seek professional counseling or talk to someone you trust to help you sort through the issues that may be keeping you in an abusive relationship.
- Begin to develop a support system, so that if you choose to leave the relationship, you will not be alone.
- Rather than dwelling on blaming yourself for what you've done in the past, focus on how you want to live from this day forward and then take steps to make this happen.

Sources: [HelpGuide.org](http://HelpGuide.org)

## SEXUAL HARASSMENT: MYTHS AND REALITIES

**MYTH:** Sexual harassment is rare.

**FACT:** Sexual harassment is extremely widespread. It touches the lives of 40 to 60 percent of working women, and similar proportions of female students in colleges and universities.

**MYTH:** The seriousness of sexual harassment has been exaggerated; most so-called harassment is really trivial and harmless flirtation.

**FACT:** Sexual harassment can be devastating. Studies indicate that most harassment has nothing to do with "flirtation: or sincere sexual or social interest. Rather, it is offensive, often frightening and insulting to women. Research shows that women are often forced to leave school or jobs to avoid harassment; may experiences serious psychological and health-related problems.

**MYTH:** Many women make up and report stories of sexual harassment to get back at their employers or others who have angered them.

**FACT:** Research shows that less than one percent of complaints are false. Women rarely file complaints are false. Women rarely file complaints even when they're are justified in doing so.

**MYTH:** Women who are sexually harassed generally provoke harassment by the way they look, dress and behave.

**FACT:** Harassment does not occur because women dress provocatively or initiate sexual activity in the hope of getting promoted and advancing their careers. Studies have found that victims of sexual harassment vary in physical appearance, type of dress, age, and behavior. The only thing they have in common is that over 99% of them are female.

**MYTH:** If you ignore harassment, it will go away.

**FACT:** It will not. Research has shown that simply ignoring the behavior is ineffective; harassers generally will not stop on their own. Ignoring such behavior may even be seen as agreement or encouragement.

## Legal definition of Sexual Harassment

ACCORDING TO THE UNITED STATES EQUAL EMPLOYMENT OPPORTUNITY COMMISSION:

Harassment on the basis of sex is a violation of Title VII of the Civil Rights Act and Title IX of the Education Amendment. Unwelcome sexual advances, requests for sexual favors, and other verbal or physical conduct of a sexual nature constitute sexual harassment when:

- Submission to such conduct is made either explicitly or implicitly a term or condition of an individual's employment;
- Submission to or rejection of such conduct by an individual is used as the basis for employment decisions affecting such individual; or
- Such conduct has the purpose or effect of substantially interfering with an individual's work performance or creating an intimidating, hostile or offensive work environment."

The college's policies and information about reporting Sexual Harassment at the college can be found in our policies.

*Policies Regarding Sexual Harassment:*

- [Board Policy 3.01.09 Sexual Harassment \(pdf\)](#)
- [Board Policy 3.01.09.10 Sexual Assault, Dating Violence, Domestic Violence, and Stalking \(pdf\)](#)

## Types of Sexual Harassment

### GENDER HARASSMENT

Generalized sexist statements and behavior that convey insulting or degrading attitudes about women. Examples include insulting remarks, offensive graffiti, obscene jokes or humor about sex or women in general.

## SEDUCTIVE BEHAVIOR

Unwanted, inappropriate and offensive sexual advances. Examples include repeated unwanted sexual invitations, insistent requests for dinner, drinks or dates, persistent letters, phone calls and other invitations.

## SEXUAL BRIBERY

Solicitation of sexual activity or other sex-linked behavior by promise of reward; the proposition may be either overt or subtle.

## SEXUAL COERCION

Coercion of sexual activity or other sex-linked behavior by threat of punishment; examples include negative performance evaluations, withholding of promotions, threat of termination.

## SEXUAL IMPOSITION

Gross sexual imposition (such as forceful touching, feeling, grabbing) or sexual assault.

Of these five types of behavior, gender harassment is by far the most common, followed by seductive behavior. The "classic" forms of sexual harassment (bribery and coercion) are in fact relatively uncommon, while other forms of sexual imposition happen more frequently than most people think. Recent court decisions have also found that certain types of offensive visual displays in the workplace, such as pornography, can be considered sexual harassment.

The defining characteristic of sexual harassment is that it is unwanted. It's important to clearly let an offender know that certain actions are unwelcome.

## Effects of Sexual Harassment

Being sexually harassed can devastate your psychological health, physical well-being and vocational development. Women who have been harassed often change their jobs, career goals, job assignments,

educational programs or academic majors. In addition, women have reported psychological and physical reaction to being harassed that are similar to reactions to other forms of stress. They include:

## Psychological Reactions

- Depression, anxiety, shock, denial
- Anger, fear, frustration, irritability
- Insecurity, embarrassment, feelings of betrayal Confusion, feelings of being powerless Shame, self-consciousness, low self-esteem
- Guilt, self-blame, isolation
- Physiological Reactions
- Headaches
- Lethargy
- Gastrointestinal distress
- Dermatological reactions
- Weight fluctuations
- Sleep Disturbances, nightmares
- Phobias, panic reactions
- Sexual problems

## Career-Related Effects

- Decreased job satisfaction
- Unfavorable performance evaluations
- Loss of job or promotion
- Drop in academic or work performance due to stress

- Absenteeism
- Withdrawal from work or school
- Change in career goals

## What Can You Do If You Are Harassed?

There is no one way to respond to harassment. Every situation is different and only you can evaluate the problem and decide on the best response.

Friends, affirmative action officers, human resource professionals and women's groups can offer information, advice and support, but only you can decide what is right for you. The only thing you can be absolutely certain of is that ignoring the situation will not cause it to go away. Above all, **DO NOT BLAME YOURSELF FOR THE HARASSMENT**. It is not your fault. Place the blame where it belongs--on the harasser. Self-blame can cause depression and will not help you or the situation.

## Many Women Have Found These Strategies Effective:

- Say NO to the harasser! Be direct.
- Write a letter to the harasser. Describe the incident and how it made you feel. State that you would like the harassment to stop. Send the letter by certified mail. Keep a copy.
- Keep a record of what happened and when. Include dates, times, places, names of persons involved and witnesses, and who said what to whom.
- Tell someone; don't keep it to yourself. By being quiet about the harassment, you don't help stop it. Chances are extremely good that you aren't the only victim of your harasser. Speaking up can be helpful in finding support and in protecting others from being victims.
- Finding out who is responsible for dealing with harassment on your organization and whether you can talk in confidence to that person. Almost all organizations have sexual harassment policies, procedures and individuals or counselors who administer them.

- Find out what the procedure is at your workplace or school; it is the organization's responsibility to provide you with advice, help and support, but such meetings at the workplace can provide an important record if legal action is ever advisable.
  - If you are a union member, speak to your union representative. Unions are generally very committed to eliminating sexual harassment in the workplace.
  - If you are experiencing severe psychological distress, you may want to consult a psychologist or other mental health professional who understands the problems caused by sexual harassment.
- Reprinted from the Journal of the American Psychological Association

## HOW TO HELP A FRIEND WHO HAS BEEN RAPED

Sexual assault is unwanted contact or touch of a sexual nature. Rape is forced vaginal or anal intercourse. Rape by instrumentation is vaginal or anal penetration with an object. Rape and sexual assault can be committed by anyone -- a stranger, a date, an acquaintance or even a friend. Assaults happen to both women and men.

Sexual assault and rape are violent crimes. Neither is motivated by sex or sexual desire; rather they are motivated by anger and aggression. Sexual assault is not uncontrolled passion - it is a hostile attack, an attempt to hurt, dominate and humiliate the victim. If someone you know has been assaulted or raped you can help them in the following ways:

### If the Assault Just Occurred

- Make sure they are safe.
- Help them get the medical attention they need.
- Offer to be with them or call someone they want to stay with them.
- Offer to call the police to report the rape. Reporting the assault does not mean you must prosecute, but it will ensure the availability of that option in the future, should the survivor so decide.
- Offer to call for rape advocate services. This will allow an objective, supportive person to assist her in dealing with the immediate issues of the trauma.

### At Any Time - Immediately After or Much Later

- As a friend, it is important that you LISTEN to what the survivor tells you. Sometimes assault victims need to talk about the attack.

- Allow the survivor the freedom to choose when, where and how to talk about the trauma.
- Be supportive: BELIEVE the survivor. People rarely make up stories about being sexual assault survivors. Reinforce that the survivor is not to blame. Avoid using words that imply blame.
- Be sensitive: Let the person know that you do not subscribe to any of the common myths about sexual assault. Understand that the person has suffered extreme humiliation. Let them know that you do not see them as defiled or immoral.
- Be patient. Recovery from rape trauma is slow. Let the person proceed at their own pace. Realize that you have strong feelings about the trauma. If needed, seek counseling for yourself. Avoid communicating your biases and negative emotions to the survivor.
- Remember that whatever the rape victim did to survive the attack was exactly what he or she needed to do. The victim did not cause the attack and is not at fault.

Source: [www.safehelpline.org](http://www.safehelpline.org)

### **Referral Sources**

Sexual Assault Support Services

1-800-788-4727

## PROCRASTINATION/TIME MANAGEMENT

Do you find yourself avoiding specific tasks or not getting around to things that need to get accomplished? Guilt, though a common reaction, often serves to just discourage you further.

### Common Causes of Procrastination

#### BEING OVEREXTENDED

Is it humanly possible to meet all the obligations you currently have? If not, can you omit or reschedule some of these obligations?

#### LOW MOTIVATION

Is the task relevant to you personally? Is it another person's goal rather than your own? Try to find some personal reward or relevance for completing the task. Are you really interested in the project? If not, can you find a way to make it interesting or let go of it?

#### LACK OF TRAINING

Are you unprepared or incapable of completing the task? On a new task, do you find you're afraid of the unknown? Are the expectations ambiguous? You may want to ask for guidance, support, or a new perspective from someone who is more familiar with the process or skilled in the area.

#### FAULTY ASSUMPTIONS

Are you assuming that if you ignore the task long enough it will disappear? Do you tend to underestimate how much time and effort the job will take? Do you have a tendency to over-estimate the difficulty of getting the task done? Try sitting down and writing out each step of the job, how long each step will take, and then tackling the job one step at a time.

## PERFECTIONISM

Are fears of doing a less than perfect job interfering with your productivity? Remember that perfection is unobtainable. Often it will feel worse to not do a job at all instead of doing it in a less than perfect manner. Ask yourself "what level of performance on this task would I expect from a friend/co-worker?"

## FEAR OF EVALUATION

Are you overly concerned with another individual's response to your performance? Try to assess how much total impact upon your life this one reaction will have. No one performs highly all the time, or in every area. Try to focus on completing the task with a goal of lessening your workload and anxiety, regardless of the evaluation.

## AVOIDANCE OF NEGATIVE EXPERIENCE

**Do you just HATE DOING THIS TASK?** Does it rate up there with painful dental visits or cleaning out the refrigerator? Is there any way to make it more pleasurable or enjoyable? If not, try doing the dreaded task first, while you still have energy. Often it can be helpful to have a friend or co-worker nearby for encouragement (and to keep you on task!).

## Time Management Techniques:

- Create a work area for yourself free from distractions (phone, roommates, tv), and commit to staying there for a one to two hour period.
- Recognize that your obligations and resulting stress are as important as other people's needs, and set limits around being interrupted or rescheduling your work time.
- Break larger tasks, such as papers or projects, into smaller goal steps.
- Create a schedule for yourself, by doing the following:
  - List all projects, exams, and papers with their due dates.

- Break larger tasks into smaller goals, such as "library research for paper 2" and select target dates for completion of the smaller goals.
- Identify what time of day you have the highest energy and what time of day is your low energy period. Schedule tasks that take greater effort (concentration, enthusiasm) during high energy periods and plan rest breaks and more mundane tasks (such as laundry) during low energy periods.
- Plan out a realistic, weekly schedule hour by hour. Remember to schedule time out every day for sleep, meals, social time, and some exercise and/or relaxation time.
- If possible, have someone who knows you well look over your schedule and give you feedback.
- Try your new schedule. Remember, you're trying something new. It's okay to fine tune it or adjust it after you give it a try for a week.

Source: [www.procrastinationadvice.com](http://www.procrastinationadvice.com)

## STRESS AND EFFECTIVE STRESS MANAGEMENT

### What Is Stress?

Looming deadlines, a relationship crisis, a dead battery and the fuse gets shorter and shorter. We think of stress as something which is coming from out there, and that the best response we can make is to grit our teeth and carry on. The word "stress," however, actually refers to our response, in mind, body, and spirit, to what is buffeting us--and there's a lot we can do about that!

You might be able to chill when the dog eats your term paper. But then, when you go to reprint it, you find that the printer is out of ink. By the time you leave the house to replace the ribbon, your shoulders are tense. You slide into the car and turn the ignition. The engine won't start! Now you're feeling seriously stressed. Your fingers squeeze the steering wheel. Your stomach is clenched in a knot. Maybe you scream or cry.

This example reveals that stress is cumulative. Perhaps you can handle each particular stressor no sweat, but when they start to pile up, that's when your engine overheats. Picture the stress response as an inverted U shape. You begin the day at some baseline level of stress. (The baseline approaches zero perhaps only when we're in dreamless sleep or have attained enlightenment.) Then when the toaster burns your bagel, your stress begins to rise. Ideally, you then undergo a recovery period, and your stress goes back to baseline.

Very often, however, we don't take the time to recover. So each additional stressor is stacked on top of the previous one like a precarious house of cards, until the last ill-placed card causes the entire house to crumble. That's when our body-mind forces us to recover, say by making us depressed or sending us to bed with a headache.

## What Is Stress Made Of?

Stress actually has four components:

1. The precipitating event or condition,
2. The set of assumptions and the belief systems we carry, which determine,
3. Our perceptions of the event or situation, and
4. Our responses - physiological, behavioral and emotional.

## What About Different Types of Stress?

It's important to distinguish between Type I stress and Type II. Type I refers to discrete events that have a readily identifiable solution. Most of the examples above are Type I, e.g., the burned bagel, the inkless printer. When you solve the problem, say by replacing the ink cartridge, your stress has a chance to fall back to baseline. Type II stressors are more vaguely defined, tend to persist over time, and are not easily resolved. Examples include ongoing conflict with your parents, persistent financial distress or a bad relationship. While Type II stressors are not as readily resolved, they are amenable to mind and body techniques, which underscores the fact that stress is not an external event but our physiological and psychological response to events.

## How Can I Lower My Stress Level?

Since stress is both physical and mental, we can lower our stress through physical and psychological means. Typically, it's not the small stuff that wears us down – but the cumulative impact of small stressors or major events like a serious accident or losing a relationship. Following are some reliable strategies for both lowering your baseline stress and recovering from stress that arises:

- Exercise
- Sensory Nurturing such as warmth, good food, hot tub or bubble bath, finger painting

- Relaxation and Imagery Practices
- Meditation and Yoga
- Sleep gives your mind and body a chance to recover
- Laughter – watch a comedy, tickle with a friend
- Set priorities and learn to say ‘no’ to reduce the sense of being overwhelmed
- Music, dance or other expressive, creative activity
- Assertiveness Training – when we can’t assert ourselves, needs go unmet, feelings get hurt, and stress rises
- Reward yourself for work accomplished or hurdles crossed
- Express your emotions to a friend or loved one – bottled up feelings are a ticket to increased baseline stress
- Avoid using drugs to lower your stress, since they can lead to other problems and limit your opportunity to grow and learn new skills
- Together these strategies can be summarized as Create More Balance in your life. The result will not only lower your stress but will enhance your quality of life. If you were given a brand new sports car, you wouldn’t run the tires down below the tread, spill ketchup and mustard over the fine upholstery, drive it 16 or 18 hours a day without refueling or an oil change. So why treat your mind and body this way?

## What to Do When I Feel Overwhelmed?

Ideally, we catch our stress before it catches us. However, if you notice yourself snapping at your roommates, unable to concentrate for any length of time, feeling exhausted, emotionally numb or perhaps unusually vulnerable – it’s probably time to slow down and give yourself a break.

It's easy to feel overwhelmed when you're juggling the demands of four or more classes along with a job and other commitments. Even students who sailed through high school, may enter the university without ever having developed good study habits or time management skills.

Also, if you're feeling overwhelmed by your commitments, maybe you should try dropping something. While in the short run this may feel like a loss, an even greater loss would be getting sick or failing out of school.

Some of us have a more difficult time pulling back when we're juggling positive activities. This goes especially for you perfectionists out there, those who pride yourselves on how fast you can climb Mt. Everest, dragging your tents and oxygen bottles.

Feeling overwhelmed invites us to step out of our routines. Consider one or more of the following:

- A long walk in nature
- Calling a close friend with whom you haven't spoken in a long time
- A spiritual retreat through church, meditation, ritual
- Taking a "mental health" day away from work and school
- A bubble bath or massage
- Losing yourself in a good book or movie

## How Do We Create Our Own Stress With Our Thoughts?

Recently, I observed a man at the post office complaining about a piece of mail he felt he'd received by mistake. The postal clerk patiently explained to him that the letter in his hand was a piece of junk mail.

But the patron would hear none of it. He continued to badger her, insisting that she deliver him to the higher authority who must be responsible for this egregious act of personal invasion.

While most of us do not get spun around the axle over junk mail, like this outraged postal patron we do tend to live in a world of our own making. For instance, if you walk around thinking that it's good to be alive, everyone around you loves you, and you're capable of accomplishing whatever you set out to achieve, you likely will feel good and be able to shrug off small stressors.

On the other hand, if your inner monologue is like the following: I'm incapable . . . no one likes me . . . I'm going to blow it . . . the world is a Darwinian rat race . . . people are mean and petty . . . then a negative cloud will likely follow you. Each small stressor confirms your bleak view of yourself and of the world.

THOUGHT PATTERNS THAT CONTRIBUTE TO STRESS OFTEN TAKE THE FORM OF:

- All or Nothing Thinking - "I have to get an A or I'm a total failure."
- Tunnel Vision – Focusing exclusively on what could go wrong or some minor fault rather than seeing the larger picture.
- Shoulds – Everyone should like me. If they don't, then something must be wrong with me.
- Labeling – When you make a mistake, you call yourself "stupid" or a "loser."
- Catastrophizing – turning a small bump in the road into a life or death matter.

## How Can We Change Thoughts That Underlie Stress?

Chronic thought patterns are like tapes that play constantly in the background, sort of like dispiriting Musak – or like a virus-infected computer operating system. One way to tackle stress-inducing thoughts is by replacing them with more uplifting thoughts. For instance, if you dread an upcoming

event, instead of thinking about everything that could go wrong, steer your mind toward thinking about everything that could go right.

Another example might be - instead of dwelling on all the qualities and material possessions that you lack, take time to consciously appreciate all that you have. You might even make this into a meditation. Once you have developed this ability to shift your focus to the positive, you can apply it in other situations, say to the way you look at your friends, your classes or your family.

The point is not to be Pollyannaish about life, but rather to take charge of your own outlook. Also, it's important to acknowledge that sometimes we do need to change our outer circumstance in order to find fulfillment and happiness.

As a great spiritual teacher once said: "Most people want what they don't have and have what they don't want. Why not simply reverse this?"

The method we're suggesting here is

1. First become aware of background thoughts that shape your mood and experience,
2. Challenge these thoughts, turning the inner monologue into an inner dialogue,
3. Employ uplifting thoughts to refocus your awareness and transform your mood.

To foster this inner dialogue you might find it helpful to think of people who inspire you and imagine what they might say or think about the stressful situation.

For instance, what would Gandhi, Jesus or the Buddha say about this flat tire, burned pizza or unfinished term paper? By calling up the image of someone who embodies a wise, compassionate outlook, you can learn to tap into your own inner wisdom.

## How Can I Tackle The Deeper Sources Of My Stress?

Chronic stress may reflect deeper issues such as poor self-esteem, a sense of inadequacy or social anxiety. While these can be addressed by the methods described above, sometimes a “healing relationship” with a therapist, mentor or trusted friend is what brings about a fundamental shift in one’s view of oneself and the world.

Remember, while we can’t control all the events around us, we can take charge of our response to them by noticing our reactions, cultivating a sense of inner balance, and redirecting our thoughts toward that which nourishes and inspires us.

Said a wise teacher: “It’s easier to build a good pair of shoes than to carpet the world.”

Source: [www.nimh.nih.gov](http://www.nimh.nih.gov)

## TAMING THE BUTTERFLIES

Now is the age of anxiety.

--W.H. Auden

### What is Anxiety?

You enter a large room crowded with strangers. Everyone seems to know somebody except you. You wonder if others can see how anxious you are, how out of place you feel. As you entertain such thoughts, your heart begins to race, and your palms begin to sweat. Your head feels encased in shrink-wrap. You feel an urge to bolt from the room.

Anxiety is part of our natural defensive system – a close cousin to fear. With fear, however, the threat is more readily identifiable. For instance, someone is waving a gun. A dog is barking, crashing against the cyclone fence.

Like fear, anxiety is the body's red warning light that something is amiss. The brain releases adrenaline. The pupils dilate. The heart pumps out blood like an engine on steroids, gearing the body to stand up and fight. Or perhaps to run faster than we ever imagined.

A manageable amount of anxiety can actually enhance our performance — by motivating us to prepare for a test, to drive with care, or to gird ourselves for a difficult confrontation. Anxiety also might carry important information. For instance, if I'm anxious at home, it might be helpful to reflect on what's wrong in order to figure out ways to change it. Perhaps my roommate makes me uncomfortable or maybe I need to have a conversation I've been avoiding. The problem, however, is when our anxiety becomes disproportionate to the situation or is so paralyzing that we are unable to perform. Another related problem is when anxiety becomes pervasive and free floating, no longer linked in any recognizable way to specific demands, challenges or threats.

# Stress

At this point, it might be helpful to distinguish between two kinds of stress.

## TYPE I STRESS

Type I stress involves a specific stressor, e.g., a cockroach in the bedroom, a car alarm shooting off, a midterm exam. Type I stressors are definable and time limited. Typically, once time passes or we take appropriate action, the stress dissipates.

## TYPE II STRESS

Type II Stress on the other hand, tends to be chronic and vaguely defined. Examples include living in a dangerous neighborhood, persistent financial worries, growing up in a dysfunctional family, anxiety about one's future or the future of the planet. With Type II stress, we often have a difficult time naming the stress, let alone feel empowered to resolve it. Type II stressors often involve a strong subjective component. For instance, people who are prone to worry will find a host of Type II events on which to focus their anxiety. We all know someone who thinks, what if . . . (name the bad thing that can happen). Other people will feel little or no anxiety about the same possibilities or events.

It's worth taking a moment to focus on social anxiety. Social anxiety may take the form of fearing large groups, unstructured social situations, or going out on a date. Some anxiety when interacting with strangers is quite normal. There may be something biological here since, after all, human beings are the most dangerous animals prowling the Earth. Social anxiety becomes problem when it keeps us from interacting with or getting close to others. The person who is socially anxious may doubt whether he or she is smart enough, attractive enough, likeable enough, \_\_\_\_\_ enough (fill in the blank). In sum, this individual may feel socially undesirable and inadequate, uncertain how to connect with others in a meaningful way. Nonetheless, even a socially anxious person may feel comfortable within a narrow circle that includes close friends, roommates, and/or family members. This illustrates that the experience of anxiety is not black or white but rather straddles a continuum.

## WHAT ABOUT PANIC ATTACKS?

Panic Attacks are episodes of extreme anxiety often accompanied by such physical symptoms as shortness of breath, racing heart, sweaty palms, dizziness, tingling. Sometimes a person experiencing a panic attack will think that he or she is having a heart attack or is dying.

Physiologically, panic attacks involve an activation of the sympathetic nervous system or **fight-flight response**. When we are faced with an extreme danger, this innate response mobilizes us to confront or escape the danger, sometimes performing what seem like “super-human” feats. This fight-flight response is designed to protect us, not to harm us. Panic attacks occur when this hard-wired, physiological response occurs in the absence of a real threat. Instead of mobilizing us for action, the activation of our nervous system is channeled into anxiety.

One problematic complication of panic attacks is that the individual may learn to avoid situations in which the attack occurred. In more extreme cases, a person might develop a fear of leaving the house. This avoidance pattern can cause a person’s world to shrink. Indeed, the fear of having a panic attack can actually precipitate an attack. Franklin Roosevelt might have been counseling a person with panic attacks when he said, the only thing to fear is fear itself.

The good news is that panic attacks readily can be addressed by many of the techniques described below. In addition, there are some strategies that pertain specifically to panic attacks.

## How can I Reduce & Overcome Anxiety?

Since some anxiety is natural and normal, the goal of any treatment is not to eliminate anxiety but to lessen it. Some strategies are very simple and easily learned. Other avenues are traversed gradually and entail a process of self-discovery, with or without a professional guide.

For those who have difficulty with anxiety, stress often has a cumulative effect. Therefore, if you're anticipating a source of stress rising, say as you head into exam week, it's advisable to try to lower other sources of stress whenever possible. For example

- Postpone a difficult conversation
- Be sure to get enough sleep & exercise
- Wait to move until exams are over

One way to overcome anxiety is to cultivate feelings and experiences that are incompatible with it. For instance, experiences that build up feelings of self-confidence, well-being, and relaxation offer an antidote to anxiety. Sometimes simple exposure to anxiety-provoking situations can eventually "extinguish" the anxiety response. For example, if you're anxious among large groups of people, you might seek out more large social situations. Or if public speaking is your bane, take a class that requires frequent class presentations. Nonetheless, sometimes exposure to what makes us anxious is insufficient or too overwhelming, and then other tools may be needed.

Perhaps the first step in addressing your anxiety is to ask: where is my anxiety coming from? By engaging in a process of reflection, sometimes we can figure out what the problem is and then strategize ways to resolve it.

## MIND-BODY RELAXATION STRATEGIES

Since anxiety rises with stress, ways that you can develop to lower and better manage your stress will also have a beneficial effect on your anxiety. Some well-established stress-reducing activities include physical exercise, going on a walk, talking to a friend, listening to or playing music, yoga, and other forms of creative expression. It's very helpful to end the day with at least 30 minutes of relaxing activity, which allows us to unwind and more easily fall asleep. If the world situation is getting you

down, you might consider going on a “media fast.” The world will stumble along just fine without you reading or watching the news for a while.

Like any skill, Mind-Body techniques for lowering stress and anxiety are more powerful the more often you practice them. This is especially true when you are first learning the technique. If you only make use of a strategy when you are feeling extremely distressed, its effectiveness may be reduced.

### *Deep Breathing*

When we are anxious, our breathing tends to be shallow and fast. In contrast, deep and slow breathing tends to relax us at a physiological level. Begin this practice by lying down or sitting in a comfortable chair. Place your hand on your stomach area. Now, as you slowly breathe in, draw the air all the way down into your diaphragm. Feel your hand rise as the breath comes in. You can gently count 1, 2, 3, and 4 as you breathe in. Breathe out to a count of 1, 2, 3, and 4 and hold on the out breath for another 4 seconds. Repeat this practice for 3 – 5 minutes.

### *Breath Meditation*

One simple and effective meditation is to choose a word or two that evoke qualities of experience that you would like to cultivate. For instance, words like courage, trust, peace, well-being, love, equanimity. Choose whatever words seem most appropriate at this time. Let’s say the words you select happen to be openness and trust, now as you slowly breathe in, imagine breathing in openness, opening up your mind and heart, opening to your feelings, opening to goodness, opening to love, etc. Then, as you breathe out, imagine yourself deeply trusting, letting the sense of trust wash through you, bathing your muscles and tendons, your bones and internal organs all the way down to the cellular level.

### *Body Scanning*

Find a quiet room and lie down on a sofa or bed. Take a few deep breaths, letting your attention withdraw from the outer world and to focus in on your body. Now bring your full attention down to your feet. First, allow your toes to relax, then the ball of your feet, then the soul and heel. Very gradually move your mind’s eye up through your body, allowing each part to relax completely, until you reach the top of your head. You can cultivate feelings of relaxation by gently saying to yourself, my

feet are relaxing . . . my knees are relaxing, and so on. It's very important to bring and keep as much of your attention as you can on what your body is actually experiencing. For instance, you may notice sensations of tingling, heaviness or warmth. Whatever sensations arise, just allow them to be as you continue to move up through your body. To the extent that you can relax your body in this way, then your mind also will become relaxed.

## COGNITIVE STRATEGIES

A woman we know has a cat who runs and hides every time the veterinarian drives up. Once a year the vet will come out to the ranch to give the cat Whiskers her shots and clean her teeth. If we could only sit down with Whiskers and tell her that the veterinarian means her no harm, perhaps she would calm down and stop acting like a "scaredy-cat." But for Whiskers even the sight of the vet's Dodge Ram portends an hour of pain and unspeakable terror.

If cats are anything like human beings, we might surmise that what's most frightening for Whiskers is that she has little control or understanding of what the vet is doing to her. She can't say to herself, *now she's cleaning my teeth, now she's getting ready to give me my distemper shot, which will hurt just a few seconds and then the pain will subside.*

Human beings — and perhaps even cats — have inner monologues that shape and color our experience. These monologues have been likened to tapes (perhaps we should say, *digital streams*) that play automatically, often without our awareness. The case of Whiskers suggests that some running monologues engender anxiety, while others prevent or allay it. The eminent Roman philosopher Epictetus observed that while we can't always change external events, we can change how we perceive them. This is the basis of cognitive psychology.

The first step toward changing our inner "digital streams" is to become aware of them.

One tactic here is to write down everything you say to yourself before and during an anxiety episode. Pay especial attention to the parts of your inner monologue that increase your anxiety or lower your

self-esteem. The next step then would be to counter each anxiety-provoking statement with a more balanced, reassuring thought. For example, If before and during a party you say to yourself (perhaps subliminally), I'm such a dork, no one will want to talk to me, a more balanced thoughts might be: Most people here probably feel a little anxious . . . *Not everyone here has to like me for me to have a good time . . . Sometimes I'm not in the mood for a party . . . I'd like to get to know one other person, and if I can do that, I'll be satisfied.*

Affirmations sometimes can be another effective cognitive strategy. The idea here is to re-record our negative tapes with more affirming monologues. Affirmations can help immunize us against anxiety by building up our confidence and self-esteem. While the best affirmations are those you devise yourself, examples might be: I am a worthwhile, compassionate person. I radiate love and draw love toward me. I am a student of life, leaning as much from my mistakes as from my successes. While these may sound corny or artificial, are they any less grounded in reality than such statements, I am stupid . . . Everyone thinks I'm worthless . . . ? If we have a choice about our inner monologue, then why not construct a monologue that builds up our sense of self rather than tears it down?

Another cognitive strategy consists of giving ourselves simple reminders when our anxiety begins to build, such as:

- I can trust that things will turn work out.
- I can trust myself to able to handle whatever contingency arises.
- I will relax my expectations when reality has a different agenda – surprises make life more interesting.
- The future is as interesting and fulfilling as I make it.
- I can't please everyone. Other people are responsible for their own happiness as I am for mine.

## Should I take Medication to Lower my Anxiety?

Many factors enter into an intelligent decision about whether to take medication for anxiety. Some psychotherapists believe that mainstream society has been moving too far in the direction of viewing psychological problems as primarily biological, prescribing medication as a rote response to any psychological complaint. This problem has mushroomed in recent years as medications have been allowed to be advertised in the media.

If you're thinking about medication, it's important to consider both the risks and rewards. One potential benefit includes immediate symptom relief, which may be especially helpful when anxiety becomes crippling. Medication might also be useful when one's anxiety reaches a level where it is difficult to perform in school or in everyday life. Another benefit is that some people prefer medication to psychotherapy or mind-body practices. Some of the risks include drug side effects, treating the symptom rather than getting at the cause, addiction to tranquilizing drugs, and missing out on an opportunity to grow personally by relying on an external substance to change how you feel.

Medication and psychotherapy need not be mutually exclusive. If you have questions about anxiety medication, you might raise them with your therapist and your physician.

### WHAT ABOUT "SELF-MEDICATION"?

It's quite common for people to seek unhealthy ways to cope with anxiety. Needing to get to "get a buzz" in order function at a party is only one example. Substance, shopping, eating, sexual and other addictions often mask deeper discomforts and distress. Activities that in moderation can be quite pleasurable become problematic when they are compulsive and preclude other ways of finding release and comfort. If you think that you may be "self-medicating" in this way, it would be important to raise this with your counselor.

## How can I address the deeper roots of my anxiety?

Anxiety can originate from a variety of emotional sources. Sometimes we experience anxiety or even panic attacks when we are on the verge of a major life change. Changes and transformations often trigger feelings of loss and related fears, including the loss of identity, loss of support and comfort, and loss of meaning. By talking through such feelings with a supportive listener, they often diminish in intensity.

A related source of anxiety arises when we are warding off painful experiences or feelings. Often we are unconscious that we are doing this. By becoming aware of and working through the painful events and feelings that we carry, they tend to lose their energy and capacity to fuel anxiety and other problems.

Much anxiety arises from our relationship with ourselves. If we like ourselves and feel effective in the world and with other people, this helps to “immunize” us against problematic anxiety. If you are someone who struggles with self-esteem, you shouldn’t despair. The path to self-acceptance and self-love is a journey that has been taken by many before you – a path walked by many of the most admirable men and women in history. But this journey does involve time and effort. Sometimes life itself provides the tools we need to traverse this path. Often, a healing relationship with a therapist or another caring individual can help us unlearn and repair the harm that came to us and then became a part of us.

*Every tomorrow has two handles. We can take hold of it with the handle of anxiety or the handle of faith. --Henry Ward Beecher*

Sources: [www.mayoclinic.com](http://www.mayoclinic.com) and [www.webmed.com](http://www.webmed.com)

## TEST ANXIETY

### Do you feel like you experience test anxiety?

Most students experience some type of test anxiety during their college career. Some people find taking multiple choice tests to be most difficult, while others view essay tests as more difficult. Many students long for the take home final or research paper while others feel much more anxiety in writing their personal thoughts or constructing a cogent research report. Whatever your area of difficulty or high anxiety, research has shown that there are things you can do to alleviate your stress.

The most common misconception about anxiety is that it is bad and you have to get rid of it. Take a deep breath, because I am about to tell you that the goal of changing test anxiety is not to get rid of it but to understand it and feel more in control. Anxiety's best friend is avoidance, so the more you try to avoid your anxiety, the bigger it will get. The more you begin to understand your anxiety and get a perspective on it, the less it will be in the way of your functioning. Breathe.

### Anxiety has four different, but related, components

1. Cognitive
2. Emotional
3. Behavioral
4. Physiological

#### COGNITIVE ASPECTS

Cognitive aspects include all of the thoughts that run through your mind before, during, and after the dreaded event (e.g., I have to get an "A" on this test; I am a failure, I don't even know who I am trying to fool).

#### EMOTIONAL ASPECTS

Emotional aspects of anxiety include the feelings that you experience related to the anxious event (e.g., feeling embarrassed, disappointed, happy, relieved, or angry).

## BEHAVIORAL

Behaviorally, your body often moves differently, or you do things differently when stressed or anxious (walking quickly, fidgeting, drumming your fingers on the desk).

## PHYSIOLOGICAL

Finally, your body responds to stress and anxiety physiologically (increased sweating, dry mouth, diarrhea, increased urination, increased heart rate, feeling like you're having a heart attack).

*Breathe in slowly, deeply....and now, release slowly.* Anxiety has its roots in biology. It can be functional. Anxiety prompts animals to get out of harmful situations and move toward safety. Anxiety is not such a strange phenomenon, but it is what we make of it. A common scenario may be as follows: reading for a test-drinking a soda-fidgeting-difficulty concentrating-more fidgeting-thoughts: I don't know who I'm trying to fool, I just don't get this, I am so stupid--go to the test: while taking the test body fidgets, increased perspiration, maybe some difficulties remembering what you know you know--after the test-I hate myself, why didn't I study, I don't deserve to be on this planet, no wonder people don't take me seriously. Write out your own scenario, think of a time you truly felt anxious, let yourself be there, and write it out. Relax.

The scenario I wrote does not include any feelings. Typically, people leave out one of the four components as they write their scenario. Go back through and fill in the missing components. How did you feel when you were fidgeting and drinking that soda? How did you feel when you said "I hate myself"? The more you understand the cycle of behaviors, thoughts, and feelings involved in your anxiety, the easier you will be able to intervene and do something more adaptive and conducive to success.

## SOME BASIC TIPS

- If you have problems with anxiety, do NOT drink caffeine. Caffeine mimics and escalates the symptoms of anxiety.

- Map out your anxiety cycle including thoughts, behaviors, physiological responses and emotions and when they occur in the sequence.
- Talk to people about your stress.
- Know that mental health professionals can help you with your anxiety; there is no reason to suffer.
- Remember to breathe.

Sources: [www.studygs.net](http://www.studygs.net) and [www.adaa.org](http://www.adaa.org)

## SUBSTANCE ABUSE

At times you may wonder if you have a problem with alcohol and or drugs. The following questions are intended to help you determine whether your use pattern should be of concern. Some referral sources will follow.

### Questions to explore:

What are the affects you hope to get from 'using'? e.g. to be more sociable, to be liked and 'fit in' with your friends, to relax, to forget about painful experiences, feelings or thoughts, to be more creative, express what is on your mind, etc.

- Are you 'using ' by yourself?
- Has your pattern of substance use changed since you first started?
- Has your tolerance changed? e.g., does it take more alcohol now to feel a buzz?
- Do you have trouble with your memory?
- Do you use on a regular basis:
  - During every party/ social gathering?
  - Every weekend?
  - Several times a week?
  - Daily?
- If you are using alcohol, is it difficult to stop after two or three drinks?
- When you attend a social gathering, is it the availability of alcohol and/or drugs that "makes the party"?
- Did you use to have personal and or academic goals that are now hard to get motivated for?

- When under the influence, do have great plans to write, compose or do something special, but somehow never follow through?
- Have your leisure activities become more limited? e.g. you no longer play tennis, hike as much, read for leisure, etc.....
- Have you changed your circle of friends based on their 'using' habits?
- Do you feel annoyed when others remark on your 'using' habits?
- Do you put yourself at ease by thinking your substance use is no different from that of your friends; that using is part of partying which is part of being a student....etc....
- Do you at times think about 'cutting' back, but never get around to it.
- Did you previously enjoy your studies and now have trouble attending your classes?
- Do you try to find external reasons for why you are no longer doing as well academically? e.g. the classes are not interesting, the professor is boring, etc....
- Do you participate in risk-taking behaviors, at times even after experiencing negative consequences? e.g. having unprotected sex, driving under the influence etc...
- Do you have financial difficulties as a result of your substance use?
- Do you ever feel guilty/ ashamed about your behavior when under the influence?
- Do you have alcoholism or addiction in your family history?

If any of your responses to the questions raise concerns, further exploration of your substance use would be helpful. Your concerns deserve your attention regardless of what the final assessment might be. Indeed, you might use a substance or substances in ways that are harmful.

You don't have to be an alcoholic or addict to experience negative effects from the use of alcohol and or drugs. You might have developed an abusive pattern as a way of adjusting to the pressures of

college life, and or you may actually experience a physiological as well as psychological addiction to the substance(s) of your choice. As a result, you might need to learn to use in a controlled, more responsible manner or you might benefit from becoming completely abstinent.

If you are a student, you may seek a consultation and/or counseling regarding substance abuse at the

EL PASO COMMUNITY COLLEGE COUNSELING CENTER

Valle Verde (915) 831-2642

Rio Grande (915) 831-4636

Transmountain (915) 831-5186

Northwest (915) 831-8807

Mission Del Paso (915) 831-7094

**Note:** *If you need an assessment for legal purposes other than for the student conduct office, you need to get in contact with a community based agency or psychologist in private practice.*

#### CONCERNED ABOUT SUBSTANCE USE OF A FAMILY MEMBER OR FRIEND?

In case you are concerned about substance use of a family member or friend, you are also welcome to seek a consultation at the Counseling Center. The following are some suggestions that might be helpful when sharing your concerns about them:

- Before addressing the person of concern, check how you are feeling about him or her. If you are angry, this may not be the optimal time to do so. To have a chance to be heard, you have to come from a caring, non-judgmental place.
- Also, you must remain non-defensive; be willing to hear feedback on your own behaviors etc., at a separate time.
- Think about what your 'goal' is by confronting the person.

- Remember that you cannot change anyone, that you are doing this for yourself and at best are providing an opportunity for awareness and change.
- Also, if your concerns are about substance abuse, remember that it is very important that the person is sober when you are about to share.
- You may want to begin the conversation by expressing your general feelings about the person; then, state that you have something to share and that you would like the person to 'just hear' you.
- State your observations about the person's behavior that is of concern to you as objectively as possible. (No value judgments!)
- Then, share your feelings about the behaviors observed.
- State your 'limitations' or 'bottom line', if you have one. However, remember if you do, you must follow through!!
- You may ask whether the person is open to talking with you more about this.
- Be ready to provide referral sources in case the person is interested.

### **Seeking Drug Abuse Treatment? Know What to Ask.**

Source: <http://www.drugabuse.gov/publications/seeking-drug-abuse-treatment>

## SUICIDE PREVENTION

### It Touches Us All

According to the Jed Foundation developed at Duke University, suicide is the second leading cause of death among college students. [Visit http://www.ulifeline.com](http://www.ulifeline.com) to browse The Jed Foundation's mental health library, take a self-evaluation and learn more about suicide prevention.

### The Truth About Suicide

If you're experiencing suicidal thoughts... you are not alone—even though it may feel that way

- In a year, nearly 40% of college students will report feeling so depressed that it's difficult to function.
- 5-10% will report thoughts of suicide.
- Most suicidal people don't want to die—they just want the pain to end.
- Suicide is a permanent solution to a temporary problem. But many suicidal people develop tunnel vision & can't see the alternatives that exist for them.

### Why suicide?

People have different reasons for thinking about suicide:

- Some see suicide as a way to escape problems.
- Others see suicide as a way to end insufferable pain.
- Some people hate themselves and think they deserve to die.
- Others see themselves as a burden to loved ones.
- Some see suicide as a way to test the love of others or get revenge.

- Suicidal feelings are often a sign that something about a person’s life needs to change. This change, however, need not require ending one’s life.

## You can help yourself

Whatever your motivation for thinking about suicide, you can help yourself if you:

- Reach out to a friend, family member, resident advisor, mentor or spiritual advisor.
- Avoid alcohol & other substances. Alcohol feeds depression and can increase the risk of impulsive behavior.
- Engage in activities that you enjoyed in the past, even if it takes some effort to do so.
- Keep in mind that no matter how dark it seems, there are other solutions and ways to get relief from your pain.

We want to help you find hope and a way to cope with your problems.

El Paso Counseling Center offers effective counseling that can help you create (or re-create) a life worth living. Counseling is confidential and free to EPCC students. While intense emotional stress can blind people to alternative solutions to suicide — other solutions are almost always available. We will work with you to find solutions that are meaningful to you.

Sources, Self-help websites & Other Suicide Information:

[ULifeLine.org](http://ULifeLine.org), [HalfOfUs.com](http://HalfOfUs.com) & [Suicide.org](http://Suicide.org)

*24-hour Community Crisis Resources Include:*

**National Suicide Prevention Lifeline** - 1-800-273-TALK (1-800-273-8255)

Help is available. All you have to do is take the first step. Talk to someone.

## THE PSYCHOLOGY OF HATE CRIMES

Many issues impacted by hate crimes can be informed by psychological research. For example, are hate crimes more harmful than other kinds of crime? Why do people commit hate crimes? What can be done to prevent or lessen the impact of hate and bias-motivated crimes? This briefing paper is designed to inform the public policy debate on hate crime with knowledge gained from psychological research. Social scientific research is beginning to yield information on the nature of crimes committed because of real or perceived differences in race, religion, ethnicity or national origin, sexual orientation, disability, or gender.

### What is a hate crime?

Current federal law defines hate crimes as any felony or crime of violence that manifests prejudice based on “race, color, religion, or national origin” (18 U.S.C. §245). Hate crimes can be understood as criminal conduct motivated in whole or in part by a negative opinion or attitude toward a group of persons. Hate crimes involve a specific aspect of the victim’s identity (e.g., race). Hate crimes are not simply biases, they are dangerous actions motivated by biases (e.g., cross burnings, physical assault).

### Who is currently protected under federal hate crime law?

Presently, hate or bias-motivated crimes targeting victims because of race, color, religion, or national origin are punishable under federal law. Many states have laws which prohibit violent crimes against individuals based on these and/or other characteristics. In 1990, with the passage of the Hate Crimes Statistics Act, the federal government began to collect data about select categories of hate crimes. At present, no federal law exists that criminalizes bias-motivated crimes perpetrated against a person, property, or society that are motivated by the offender’s bias against a gender, disability, sexual orientation, or gender identity.

## Are hate crimes different from other violent crimes?

Yes. Hate crimes have an effect on both the immediate target and the communities of which the individuals are a member, which differentiate them from other crimes.

## What effects can hate crimes have on victims?

While violent crime victimization carries risk for psychological distress, victims of violent hate crimes may suffer from more psychological distress (e.g., depression, stress, anxiety, anger) than victims of other comparable violent crimes (Herek, Gillis, & Cogan, 1999; McDevitt, Balboni, Garcia, & Gu, 2001). Survivors of violent crimes, including hate crimes, are also at risk for developing a variety of mental health problems including depression, anxiety and posttraumatic stress disorder (PTSD). PTSD emerges in response to an event that involves death, injury, or a threat of harm to a person. Symptoms of PTSD may include intrusive thoughts or recurring dreams, refusal or inability to discuss the event, pulling away emotionally from others, irritability, difficulty concentrating, and disturbed sleep. Depression, anxiety, and PTSD may interfere with an individual's ability to work or to maintain healthy relationships, can lead to other problems such as substance abuse or violent behavior, and may be associated with other health problems such as severe headaches, gastrointestinal problems, and insomnia. Similar to other victims of traumatic stress, hate crime victims may enjoy better outcomes when appropriate support and resources are made available soon after the trauma.

## What effect can hate crimes have on communities?

Hate crimes are different from other crimes in that the offender—whether purposefully or not—is sending a message to members of a given group that they are unwelcome and unsafe in a particular neighborhood, community, school, workplace, or other environment. Thus, the crime simultaneously victimizes a specific individual and members of the group at large. Hate crimes are often intended to threaten entire communities and do so. For example, a hate crime that targeted children in a religious day care center and an ethnic minority postal worker was intended to instill fear in members of these minority communities (Sullaway, 2004). Being part of a community that is targeted because of immutable characteristics can decrease feelings of safety and security (Boeckmann & Turpin-Petrosino, 2002). Being a member of a victimized group may also lead to mental health problems. Research suggests that witnessing discrimination against one's group can lead to depressed emotion

and lower self-esteem (McCoy & Major, 2003). More research is necessary to document the impact of hate crimes on those who share the victim's identity.

## Who is at risk?

In 2007, law enforcement agencies in 49 states and the District of Columbia reported 7,624 bias-motivated incidents to the Federal Bureau of Investigation (FBI), the federal government agency mandated by Congress to gather these statistics. However, the FBI points out that these data must be approached with caution. Victims do not always report hate crimes committed against them to law enforcement. In fact, a victim of a hate crime is far less likely than a victim of a similar (but not bias-motivated) crime to report the crime to the police, even when the individual knows the perpetrator (Dunbar, 2006; Herek, Cogan, & Gillis, 2002). This reluctance often derives from trauma the victim experiences, a fear of retaliation, or belief that law enforcement is biased and will not support them. In addition to race, color, national origin, and religion, individuals are targeted because of other aspects of their identity as well; including, disability status, sexual orientation, gender, and gender identity. Hate crime laws are designed to protect all individuals. While minority group members may be at greater risk for hate crimes, anyone can become a victim of a hate crime. For example, in 2007, the FBI reported that 18.4 percent of hate crimes based on race stemmed from anti-white bias.

### RACE/ETHNICITY

Many reported hate crimes are motivated by racial bias. In 2007, more than half of the 7,621 single-bias crimes reported to the FBI (50.8 percent) were racially motivated. Of 1,256 hate crimes in 2007 motivated by bias based on ethnicity or national origin, the FBI found that 61.7 percent were anti-Hispanic.

### RELIGION

Bias and violence against Arab and Muslim Americans reached its height after the tragic events of September 11, 2001. It is estimated that there were more than 700 violent incidents targeting Arab and/or Muslim Americans or those perceived to be Arab or Muslim Americans in the first nine weeks

following September 11th. Due to a lack of understanding of religious differences, Sikhs have been mistakenly targeted as Muslims. Since hate crimes are defined as based on real or perceived group membership, these incidents are considered hate crimes. Most religiously motivated hate crimes are acts of vandalism, although personal attacks are also common. In 2007, the FBI reported that the great majority of these crimes were directed against Jews (68.4 percent), followed by anti-other religion (9.5 percent) and anti-Islamic (9.0 percent) hate crimes.

## DISABILITY

In 2007, 62 hate crimes against individuals with mental disabilities and 20 hate crimes that targeted those with physical disabilities were reported to the FBI. However, other research suggests that persons with disabilities are four to 10 times more likely to be a victim of a crime than persons without disabilities. There is also evidence that persons with disabilities are at risk of being abused by those whose job it is to serve or protect them. Studies have shown that in cases of sexual abuse of persons with disabilities, 48 percent of the perpetrators were employed in the disability services field and gained access to their victims through the work setting.

## SEXUAL ORIENTATION

In 2007, there were 1,460 hate crimes based upon sexual orientation reported to the FBI, of which 59.2 percent were classified as anti-male homosexual bias. In a study of lesbian, gay, and bisexual persons, researchers found that roughly one-fifth of the women and one-fourth of the men had been the victim of a hate crime since age 16 (Herek et al., 2007). One in eight women and one in six men had been victimized within the last five years.

## GENDER IDENTITY

Currently, the FBI does not track statistics of hate crimes committed against individuals because of real or perceived gender identity and expression. However, research suggests that transgender and gender-nonconforming individuals (people who dress or look differently than the normative presentation of their biological sex) are at high risk of victimization (D'Augelli, Pilkington, & Hershberger, 2002). It has been suggested that if the FBI did track hate crimes based on gender identity, it would represent the second-largest category of all hate crimes (Gender Public Advocacy Coalition, 2006).

## Who are the perpetrators of hate crime?

While hate groups can pose a serious threat to communities, research suggests that the vast majority of offenders are not members of organized hate groups. Additionally, recent data suggest that over 50 percent of perpetrators of hate crimes are under age 25. According to the U.S. Department of Justice (2001), 31 percent of hate-based violent offenders and 46 percent of hate-based property offenders from 1997-1999 were under age 18.

## What can be done to address hate crimes?

Law enforcement officials, community leaders, educators, researchers, clinicians, and policymakers must work together to stop hate crimes. The American Psychological Association strongly recommends the following:

- Support federal anti-discrimination laws, statutes, and regulations that ensure full legal protection from discrimination and bias-motivated crimes, including:
  1. The Local Law Enforcement Hate Crimes Prevention Act of 2009 (H.R. 1913, 111th Congress)
  2. The Matthew Shepard Hate Crimes Prevention Act (S. 909, 111th Congress)
- Support legislation on standardized procedures for identifying and collecting data related to hate crimes to ensure more accurate statistics, including:
  1. The Hate Crime Statistics Improvement Act of 2009 (H.R. 823, 111th Congress)
  2. The Hate Crimes Against the Homeless Statistics Act of 2007 (H.R. 2216, 110th Congress)
- Support research assessing the prevalence, incidence, predictors, and outcomes of hate crimes, as well as the psychological impact of hate crimes on victims, their families, and the community.
- Support interventions to address the mental health needs of survivors of hate crime.
- Support educational efforts aimed at dispelling stereotypes, reducing intergroup conflict, and encouraging broader understanding and appreciation of intercultural issues.

- Support development and dissemination of empirically based hate crime prevention and intervention programs.
- Support training of law enforcement, health care providers, and victim-assistance professionals regarding how they can assist individuals and communities that have been victimized by hate crime.
- Encourage collaborations between community members, local advocacy organizations, and law enforcement agencies to promote healthy and safe environments.

For sources and for more information on APA's work on hate crimes, please visit the following websites:

- Public Interest Government Relations Office <http://www.apa.org/about/gr/pi/index.aspx>
- APA Office of Ethnic Minority Affairs <http://www.apa.org/pi/oema/>
- APA Office on Lesbian, Gay, Bisexual, and Transgender Concerns <http://www.apa.org/pi/lgbt/>
- APA Division of Trauma Psychology: <http://www.apatraumadivision.org>

The American Psychological Association (APA) is the largest scientific and professional organization representing psychology in the United States and is the world's largest association of psychologists. APA's membership includes more than 150,000 researchers, educators, clinicians, consultants and students. Through its divisions in 54 subfields of psychology and affiliations with 60 state, territorial and Canadian provincial associations, APA works to advance psychology as a science, as a profession and as a means of promoting health, education and human welfare.

For more information, please contact Diane Elmore, Ph.D., MPH, in the APA Public Interest Government Relations Office at [delmore@apa.org](mailto:delmore@apa.org) or (202) 336-6104.

## INTERNATIONAL STUDENTS

On behalf of the Counseling Center staff at El Paso Community College, we would like to welcome you to our campuses. Studying abroad is an exciting adventure as well as a major life transition. For many of you this is the first time away from home. While you may be looking forward to all the opportunities that come with living in a foreign country, you may also feel apprehensive about the many unknowns.

Before you left your country, you may have wished to be more independent of your family. Now perhaps you find yourself left alone too much. You may encounter too many choices, too much freedom, too little direction and guidance. You may feel disoriented by the different sights, smells, sounds and tastes. American values, traditions and habits may be confusing. You may wonder how you will make friends and how to communicate with others; you may worry about your academic performance and you may feel uncertain about how to spend your free time especially on weekends.

Your parents, siblings and friends are not here. Your favorite foods and places to go are not available for your comfort. You might worry about your family at home and fear that you might become a disappointment to them. Your self-confidence may drop because you might compare yourself to American students. You might expect yourself to do as well academically as native speakers. Add to that the pressure of needing to study in a foreign language, possible misunderstandings with professors and roommates, and you have all the ingredients of stress.

When living at home you may have many helpful strategies to deal with difficult situations but these may not be available to you now. As a result you may feel that you are all alone with your problems and that there is no one to talk to. We would like to let you know that you can come to the Counseling Center anytime to talk with one of the Counselors. You don't need an appointment. No problem is too big or small.

In the past, international students have talked about

- wanting to clarify American customs
- being afraid that their English is not good enough
- worrying about being a failure or disappointment to their parents
- feeling homesick
- experiencing culture shock
- feeling upset over the break-up of a romantic relationship
- feeling conflict regarding their own needs versus those of their parents
- having difficulties getting up and going to classes because of feelings of depression
- having problems with eating, body image and self-esteem
- feeling afraid that others don't like them

When a person talks to a counselor (psychologist) in other countries, it may mean that a person has a "big" mental problem. It does not mean the same thing in the U.S. Here it is quite common that a person consults with a counselor. Most people actually believe it is a 'good thing' and that to discuss personal matters with a counselor reveals strength and courage rather than weakness. It is a way to take care of oneself and to prevent physical and mental health problems. Counseling is confidential and free to students. Always remember the counselors will be able to refer you to outside agencies for additional help.

In closure, our staff hopes this information is helpful and that we will have a chance to get to know many of you.

## THE TRANSITION FROM MILITARY TO CIVILIAN LIFE

### Issues Faced When Transitioning from Military to Civilian Life

The U.S. military spends enormous amounts of time and money preparing soldiers for war but correspondingly very little of these resources preparing them to return to civilian life. When military personnel finish their tour of duty and return home, among the transitions that they must negotiate include:

- Soldier to civilian
- Danger to safety
- Discomfort to comfort
- Camaraderie to solitude
- Mistrust to trust
- Chaos to order
- Lawlessness to law

As much as soldiers eagerly anticipate this transformation, negotiating the change is not always easy. The sheer number of transitions from war to peace makes the hope of quickly reassuming a normal lifestyle somewhat unrealistic, and for many, a successful change in role takes considerable effort and time.

#### SURVIVAL MODE

A particular challenge facing a returning war veteran is the need to put aside the 'survival mode' which was critical in the war zone and may have become a central feature of the soldier's identity. Among the perspectives, attitudes, and behaviors that are highly valued in combat are:

- Heightened arousal.
- Being on constant alert for danger.

- Narrowed attention and focus.
- A hostile appraisal of events.
- Not trusting people.
- Making quick, unilateral decisions.
- Expecting others to obey directives without question.
- Sticking to a "mission" no matter what.
- Reacting quickly and asking questions later.
- Keeping emotions sealed off.

While having obvious survival value in combat, this 'battle mind' style is typically highly maladaptive and self-defeating when applied to civilian life. For example, aggressive, split-second decision-making and action are vital in a firefight, but similar actions back home can easily fall under the categories of disorderly conduct, assault, and domestic abuse. At the same time, war veterans have a hard time letting go of these habits that once served to keep them alive and unharmed.

## SOURCES

United States Department of Veterans Affairs: The homepage for the VA is <http://www.va.gov/>. The following sites are parts of the Veterans Affairs main site that may be of special interest to returning veterans.

- Iraq War Clinician Guide: This guide was developed to provide mental health professionals with information about the war-zone experience of soldiers and the stresses and challenges associated with combat. <http://www.ptsd.va.gov/professional/manuals/iraq-war-clinician-guide.asp>
- A Guide for Counseling Veterans for College Counseling Staff: <http://www.mentalhealth.va.gov>
- Seamless Transition Home: <http://www.seamlesstransition.va.gov/>

- Transition Assistance Information for Enduring Freedom and Iraqi Freedom Veterans:  
<http://www.seamlesstransition.va.gov/transition.asp>
- Reintegration Guide from NCPTSD
- Readjustment Counseling Services: This Veterans Administration site provides tools to locate nearby veterans centers and service providers. <http://www.vetcenter.va.gov/>

**'Battlemind Training: Transitioning from Combat'** Discusses how attitudes and skills developed in combat can be altered to achieve success and happiness in civilian life.

<https://www.txca.org/images/Conference/CCC12/2Jackson.pdf>

**'The Road to Resilience.'** This article from the American Psychological Association describes resilience and some factors that affect how people deal with hardship. Much of the brochure focuses on developing and using a personal strategy for enhancing resilience. [APAHelpCenter.Org](http://www.apa.org/helpcenter)

#### POST-TRAUMATIC STRESS DISORDER (PTSD) RESOURCES:

- Post-Deployment Booklet from Rand
- National Institute of Mental Health: A discussion of PTSD symptoms, treatments, and resources.  
[National Institute of Mental Health: Post Traumatic Stress Disorder \(nimh.nih.gov\)](http://www.nimh.nih.gov/health/publications/post-traumatic-stress-disorder-ptsd/index.shtml)

#### BOOKS OF INTEREST:

- "Down Range: To Iraq and Back" by Bridget Cantrell, Ph.D. and Chuck Dean  
([www.heartstowardhome.com](http://www.heartstowardhome.com))
- "Courage After Fire" by Keith Armstrong, Suzanne Best, and Paula Domenici  
<http://www.courageafterfire.com/>

## Suggestions for a Successful Transition from Military to Civilian for Academic Life

There are a number of steps that veterans can take to ease their transition from military to civilian and academic life. Among the recommendations to facilitate a successful transition to civilian and academic lives are:

- Establish and maintain relationships with both fellow students and college faculty/ staff. Combat experiences often leave veterans feeling alienated from others, and they must make intentional, active efforts to connect with others on campus. Getting involved with clubs and organized activities can break down walls and connect the veteran with others having similar interests.
- Work to reestablish relationships and renegotiate roles with family members. Deployment causes a void within the family system that is typically filled by others adopting new roles and taking on new responsibilities. While both returning veterans and family members eagerly anticipate their reunion, changes in the family structure that have occurred during the deployment period often lead to unanticipated stresses and challenges. Veterans and family members must reexamine how responsibilities will now be divided and communicate openly about roles they want or do not want to play.
- Understand that emotional control requires both holding in and expressing emotions. Contrary to norms on the battlefield, articulating and showing emotions does not indicate weakness and is critical to sustaining meaningful personal relationships in civilian life.
- Reestablish or find a meaning and purpose in life apart from military service. The clear meaning and purpose that characterize a war zone is lost in civilian life. Make an effort to identify important values and passions and consider how they might guide daily choices and commitments. Seek spiritual fulfillment through prayer, meditation, religious practice, volunteer work, etc. Faith practices are often an important source of strength and resilience.

- Develop good academic habits. Start with a manageable course load and set reasonable goals. Go to class and take comprehensive notes to improve focus on course materials and lectures. Establish a daily schedule to maximize organization.
- Pay attention to physical well-being. Eat well-balanced meals, get plenty of rest, and build physical activity into daily life.
- Seek balance in life. The experience of combat can make veterans jaded and pessimistic. Balance that viewpoint by focusing on people and events which are meaningful, comforting, and encouraging.
- Limit use of alcohol and illegal substances. Use of these substances increases the likelihood of depression, insomnia, relationship problems, academic difficulties, legal troubles and a host of other negative issues.
- Appreciate a sense of humor in yourself and others. Humor relieves stress, produces body chemicals that improve mood, and helps us to gain a more balanced perspective. Do not postpone joy and laughter should they come your way.
- Limit exposure to war-related news reports (e.g., news channels, newspapers, Web sites, etc.). While keeping informed of developments is important, the 24/7 media machine typically ignores stories of heroism, resilience, and sacrifice and instead focuses on the most horrific images and troubling accounts.
- Prepare an answer to questions about your war experience. Most veterans have some difficulty sharing what happened in combat and the toll that those experiences had on them. Prepare a brief response for acquaintances and a lengthier answer for close family members and friends.
- Connect with other veterans. Veterans often report that the friendship and support of other veterans is critical to effectively transitioning to civilian life. Other veterans have an intuitive understanding of the experience and impact of being in combat and of the additional challenges that veteran students face on college campuses.

- Grieve for and honor those who did not make it back. It is important for veterans to grieve the loss of friends and to experience and work through the emotions that are understandably attached to these losses. Work to live a life worthy of the ultimate sacrifice made by fallen comrades.

Source: [www.regent.edu](http://www.regent.edu)