The Personal Counseling Center supports the core values and academic mission of the University and enhancement of retention efforts based on student learning and providing the opportunity to develop knowledge through collaboration with the University and larger community.

To this end, the Personal Counseling Center aids in the emotional and psychological development of students. While attending to issues of diversity, we recognize the inherent dignity of each member of the University community by providing an enriching and welcoming environment.

The primary purpose of the Personal Counseling Center is to provide short-term professional counseling to students with mental health concerns.

In addition, we provide a wide range of consultation, education and training services to students and the campus community.

All services are provided under the direction of licensed, credentialed and experienced mental health professionals who are guided by the ethical standards of their profession and who are dedicated to excellence in service provision and the highest of quality outcomes.

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**Important Numbers, Etc.**
Welcome to this year’s issue of Shrink Rap. There have been a few changes here in the Personal Counseling Center (PCC) this year that we’re excited to share with you! First, we spent several months considering the mission of the PCC and ultimately revised the mission statement to more accurately reflect our beliefs as mental health professionals and our delivery of care within the academic environment of Ferris State University. I invite you to take a moment to read it on the cover of this issue.

A second important change in the PCC was that our dear colleague, Christopher Richmond, earned his full licensure as a Psychologist. A fully licensed psychologist on our staff allows us to provide supervision to other doctoral level interns who can provide counseling to the students in addition to many other benefits.

Due to becoming not only the Interim Director of the PCC, but also for Birkam Health Center, we were able to hire on PT contract, a wonderful clinician to help us out as I would not be able to see clients. Denise Tinkham is well-known in the community for her skills as a mental health provider as well as she is specially certified in addictions and substance abuse treatment. She has been a terrific addition.

Last but not least, our secretary, Nancy Sage, announced her plans to retire in July. While this is sad news for us and the University, it is a new and exciting chapter in her life. The next time you see her, please congratulate her on this milestone! (And ask her: “Why bother?” She’ll laugh!)

We know there are many more changes on the horizon so stay tuned! We hope you enjoy the rest of the issue and thanks for reading!

Sincerely,

Renee Douglas
Counseling IS Effective in Treating Mental Disorders  by Tom Liszewski, LPC

The world is becoming more and more research based. The world of counseling is no exception. The challenge is how to measure the effectiveness of treating depression, anxiety, and other mental disorders with counseling. There are several methods to research this with what are known as ‘Outcome Questionnaires.’ The one that the Personal Counseling Center has used for the last five years is called the “Outcome Questionnaire” (A.K.A. = ‘OQ®-45’).

The OQ-45 is a 45-item self-report outcome/tracking instrument designed for repeated measurement of client progress through the course of counseling. It’s a product of over two decades of research. The questionnaire asks 45 questions that assesses functional level and change over time: The OQ®-45 measures functioning in 3 domains: Symptom distress (heavily loaded for depression and anxiety), Interpersonal functioning, and Social Role. It enables the counselor to assess functional level and change over time. In the professional literature the OQ®-45 is mentioned as an excellent tool for giving good information about clients who might be at risk or experiencing an increase or decrease in symptom severity.

The Counseling Center started using the OQ-45 about five years ago when the department began using an electronic scheduling software program called Titanium. The department has kept track of several hundred students that have received counseling over this time in a database that does not identify the student other than the scores they recorded at their last appointment. The student needed to attend at least several counseling appointments to be included in the database. The OQ-45 has established four categories based on how the clients scored at their final appointment:

- Recovered (the symptoms reported have diminished enough to fall into this category)
- Improved (the symptoms reported have improved significantly)
- No change (the symptoms have not changed enough to meet statistical significance)
- Deteriorated (the symptoms reported at intake have worsened significantly)

Out of the 353 cases in the database there was only one student who fell into the “Deteriorated” category. Approximately half of students in the database (45%) fell into the category of “Recovered” (159 students). Nearly a third (32%) fell into the “Improved” category (112 students). While slightly less than a quarter (23%) were in the “No Change” category. The principle of “Primum non nocere”, the Latin phrase that means “do no harm”, has held true over the last five years in the Counseling Center.

The OQ-45 has provided empirically based evidence that the FSU Counseling Center is providing effective counseling services for the students at Ferris State University.
The Importance of Goal Setting

By: Mark VanLent, EdD, LPC

It is important to have goals in life. They give us something to strive and work toward, and can help to give our life meaning. Unfortunately, we often are not clear about our goals. As Yogi Berra once said, “If you don’t know where you are going, you’ll end up someplace else.” Goals can start as dreams, but don’t stop at just dreaming. Putting your goals in writing will make you much more likely to achieve them. Write down your goals and review them often. This will give you the motivation to make them a reality. Successful people reassess their lives and start living intentionally, in writing, on paper, and on purpose.

There are many different areas in your life where you could set goals. I will list only a few, but there could be others much more specific to your particular situation.

• Career – Are you doing work which inspires you and others? Would you like to make changes?

• Financial – Is your financial situation strong? What steps could you make to live within your means, reduce debt, and increase saving, living, and giving?

• Spiritual – Is there anything you would like to do to improve your spiritual life?

• Family – In what ways could you improve your relationships with your family?

• Artistic - Do you want to achieve any artistic goals?

• Physical – Would you like to improve your physical health in any way? What steps are you going to take to achieve this?

• Social – Would you like to increase your social involvement? How do you want to enjoy yourself in your leisure activities?

• Public Service - Do you want to make the world a better place? If so, how?

Goals give you are starting point and a destination. It is the easiest way to give meaningful direction to your life, which releases you to effectively use your talents. Develop a plan and make it happen. While writing down your goals, keep these basic tips in mind.

1. Be specific.
2. Make your goals measurable.
3. Own your goals and make them about you and not others.
4. Set a time limit.
5. Put them in writing.

“I think there is something more important than believing: Action! The world is full of dreamers, there aren’t enough who will move ahead and begin to take concrete steps to actualize their vision.”

--W. Clement Stone

“If you aim at nothing, you will hit it every time.”

--Zig Ziglar
"He is a wise man who does not grieve for the things which he has not, but rejoices for those which he has." - Epictetus

According to Google Trends, searches for Gratitude have nearly doubled over the past six years. Interestingly, a search for “Gratitude” in Google results in 67,600,000 unique results.

What exactly is Gratitude?
Gratitude is one of those terms that are not easily defined. We may think we have a solid grasp on it but if we ask ten people to define gratitude chances are we will get ten (at least slightly) different responses. The experts have conceptualized gratitude as an emotion, attitude, a moral virtue, and as a personality trait among other things. Generally speaking, gratitude originates from the perception of a positive or desired event, not necessarily deserved or earned, that is a product of another person’s actions. Gratitude is an attribution dependent state that results from first recognizing that one has experienced a positive event and that there is an external source for this event or outcome.

Gratitude & Happiness
There are reasons to believe that experiences of gratitude might very well be associated with happiness. Current research suggests that gratitude is a pleasant and energizing emotion. Research has also shown that gratitude is linked to positive emotions which include contentment, happiness and hope. In a recent Gallup (1998) survey of teens and adults, over 90% of these participants indicated that expressing gratitude helped them to feel “extremely happy” or “somewhat happy.” Wow, what a difference a little gratitude can make!

Being Mindful of Life’s Positive Experiences
One popular term cited frequently in health psychology is “well-being.” Well-being, as we know it, can in part be a product of a person’s ability to notice, appreciate, and cherish certain positive elements of one’s life. For certain individuals expressing gratitude goes beyond an experience here and there, it is truly a way of life or more simply put a worldview. I have heard this particular worldview referred to as the “Gratitude Attitude.” At the risk of sounding overly simplistic, logic would seem to indicate that regular practice of expressing thankfulness or gratitude should lead to enhanced psychological functioning.

The Practice of Gratitude
Some of you may be aware of the recent trend of publicly documenting things that cause us to experience gratitude. I have a few friends who have made an effort to document daily at least one thing they are grateful for on their social networking websites. One simple journaling exercise I have run across instructs the participant to “Think back over the past day (or week) and write down at least one thing that you are grateful or thankful about.” I think this is both a simple and effective tool to begin exploring gratitude.

Benefits of Regularly Engaging in Gratitude Exercises
Benefits may include the following:
- Higher levels of positive emotions, such as happiness
- A reduction in negative emotions, such as depression
- Overall improved health, which may include increased amount and quality of sleep
- Increased health behaviors, such as spending more time engaged in exercise
Cutting and Self-Injury

By Denise Tinkham, MA, CAADC, LLPC

Self-injury is an action whereby physical injury is inflicted that is generally serious enough to cause tissue damage to the body. This can take several forms – cutting, burning, self-hitting, biting, interference with wound healing, head-banging, hair pulling, and the like. In my clinical experience, I have most commonly seen superficial cutting, bruising, head-banging, and burns or abrasions.

There are many misconceptions about the action of self-injury. One common myth is that it is simply a form of ritualized behavior that is purposeful to gain attention or to fit in. Another is that it is an unconventional behavior from which to derive sexual pleasure. Self-injury is not suicidal gesturing, nor is it an experiential exercise in which one seeks to expand self-enlightenment and self-awareness. These misconceptions are understandable (as there are loose similarities to these other behaviors) but they are not the norm.

Those who self-injure typically do not want to call attention to the activity or the after-effects of their behavior. The cutter, for instance, may be seen wearing long sleeves and pants during the hottest days of summer to hide the evidence of their wounds. Most who engage in self-injurious behavior carry a strong sense of guilt, shame, and not uncommonly self-loathing. This begs the chicken/egg question: is a compromised perception of self-worth the cause or effect of this behavior? The answer is yes – likely on both counts. It is believed that there is no single cause, and that comes as no surprise as this is consistent with what is seen with most of our human conditions.

Scientists have been studying the influence of the neurotransmitters serotonin, dopamine, and endorphins on this behavior. Thus far it appears that serotonergic deficits may play a key role, but this research is complex and it may be several years before there is consensus as to a best practice standardized treatment. That is not to suggest that there have not been significant strides as the research continues. Knowing now that serotonin abnormality factors in self-directed aggression, pharmacological interventions are more promising than they have been in the past.

When we as clinicians work with those who self-injure, it is not uncommon for them to consistently report a strong feeling of relief and calm once they engage in this behavior. It becomes an almost addictive-like cycle. When feelings and subsequently, physiology, gets stressed, these acts result in an uncanny relief from the tension from their interpersonal stressors almost instantaneously. It is known that the release of endorphins, described as “the body’s own narcotics”, serve to “fight anxiety, agitation, and depression” (Levenkron, 1998, pg. 105-107). Therefore, the release of the endorphins explains the calming effect – and the draw that makes this behavior a challenge to change. The behavior is not unlike the calming effect described by those who turn to a cigarette or an alcoholic beverage to cope when they experience stress.
Knowledge is power and it is exceedingly helpful in the treatment of those who self-injure for this information to be presented. It is part of the profile of self-empowerment that can lead to significant change and healthier coping adaptations. Many who self-injure are silent, are poorly understood, and are sometimes harshly criticized. Seeking help may seem overwhelming and just too risky. It is imperative to provide a safe, non-judgmental climate to allow the self-injurer the freedom to examine the factors fueling their behavior.

Superficial low-lethality self-injurious behavior is not uncommonly seen in counseling venues, and affects individuals of all ages and genders. Therapy and counseling can help the self-injurer understand the core dynamics at play in their behavior and assist them in targeting interventions that will ultimately interrupt their unhealthy pattern of self-injury.

References:


Introducing: Active Minds at FSU!
Current President: Bridget Brezezinski, Social Work Student
Faculty Advisor: Renee Douglas

Active Minds is the only organization working to utilize the student voice to change the conversation about mental health on college campuses. By developing and supporting chapters of a student-run mental health awareness, education, and advocacy group on campuses, the organization works to increase students’ awareness of mental health issues, provide information and resources regarding mental health and mental illness, encourage students to seek help as soon as it is needed, and serve as liaison between students and the mental health community.

Through campus-wide events and national programs, Active Minds aims to remove the stigma that surrounds mental health issues, and create a comfortable environment for an open conversation about mental health issues on campuses throughout North America.

Join the Active Minds team on the quad during exam week for fun-filled and stress-relieving activities! If you know of a student who might like to join Active Minds, be sure to have them check it out on OrgSync too.

To learn more:

http://www.activeminds.org/index.php
Important Phone Numbers

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<tr>
<th>Service</th>
<th>Phone Number</th>
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<tr>
<td>Big Rapids Public Safety</td>
<td>(231) 796-4811</td>
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<td>Birkam Health Center</td>
<td>(231) 591-2614</td>
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<tr>
<td>Ferris Counseling Center</td>
<td>(231) 591-5968</td>
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<td>Ferris Public Safety</td>
<td>(231) 591-5000</td>
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<td>Mecosta County Medical Center</td>
<td>(231) 796-8691</td>
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<td>Mecosta County Sheriff's Department</td>
<td>(231) 592-0150</td>
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<td>Community Mental Health Services</td>
<td>(231) 796-5825</td>
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<tr>
<td>Residential Life Director</td>
<td>(231) 591-3745</td>
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<tr>
<td>Office of Student Conduct</td>
<td>(231) 591-3619</td>
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<tr>
<td>W.I.S.E. (Women’s Information Services)</td>
<td>(231) 796-6600</td>
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Welcome to Encompass, LLC. Encompass provides focused support to employees and their family members for a variety of issues that may interfere with work or life satisfaction and productivity.

If you are an employee…

Please feel free to browse our site for Information and resources. Encompass offers comprehensive information, behavioral health articles and self help tools. Whether your concern is large or small, we can help!

Contact us in three key ways:

On-Line
www.encompass.us.com

On-Site
To schedule a consult simply call us:
Grand Rapids MI (616)459-9180
USA Toll FREE (800)788-8630

On-Call
To bounce a question or concern off of our professional team. Encompass is here to serve you 24/7.

Notes to Faculty and Staff

When referring students to the Counseling Center during the fall and spring semesters, please remember that same-day appointments (one available each day) are reserved for those students we assess and determine to be experiencing a high degree of distress. All other students are scheduled for the next available intake appointment.
Ferris State University
Counseling Center
Birkam Health Center, 2nd Floor

M-F 8:00am – 12:00pm and 1:00pm – 5:00pm
231-591-5968