

FEATURES

AROUND CAMPUS

Discussion Day Special Issue Students Learn About Suicide Prevention



Discussion Day Keynote Speaker professor Lynn Sanford

Maddie Jo Shultz
Staff Writer

Individuals trained in CPR can save a life. Attendees at the suicide prevention seminar learned that a process known as QPR can save a life, as well.

Students who chose to attend this presentation were asked to imagine themselves in a situation where they might have to use the QPR method, which was created by Paul Quinnett, Ph.D. "You're driving across a bridge when you see someone standing at the railing, about to jump," a speaker told the audience. "You stop your car, get out, and go over to them. What do you say? What do you do?"

Speakers were Ted Westerhof, Public Relations and Marketing Manager for Bowen Center, and Shelly Snyder, director of the Huntington County branch. "Shelly and I have different functions but the same goal," noted Ted, who has worked for the Bowen Center for 23 years. Bowen is more than just a counseling center, he says. It is also a hospital, and a result of the community responding to a major issue in the area. Indiana is one of the highest rated states for teen suicides. According to the CDC, suicide is the second leading cause of death for those between the ages of 10 and 24, just under unintentional injury.

"Everyone carries secret struggles," Ted explained. "Don't



ask yourself what you do; ask why you do it."

Although some students attended the seminar merely to attain VIA credit, for others the suicide prevention topic had personal significance. Ethan Winter shared with the group that, in high school, his best friend committed suicide.

What Ted and Shelly emphasized the most was that suicide is to be taken seriously. "Something we hear a lot is that someone is 'doing it for attention.' Even if that's

just that, it's playing with fire," Ted said during the seminar. "We need to be trauma-informed: understanding not just what's wrong, but how it affects you."

As part of its community outreach program, the Bowen Center has also begun to train local school faculty in QPR – question, persuade, refer. Ask a question, save a life. Brochures given to attendees outlined the process of QPR. Question: ask the person about suicidal thoughts. Persuade: convince the

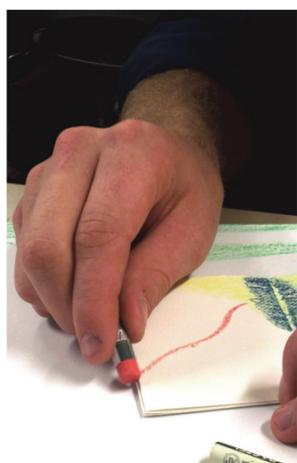
person to get help. Referral: refer the person to a professional who can help them. QPR is part of student orientation at the Tippecanoe Valley school corporation, and Ted hopes to eventually start training sessions at Manchester University.

"Manchester [University] has been recognizing the quality of life and supporting mental health," Ted added as a final thought. "The big question is, what can we do as a community to spread the word about getting help?"



Dr. Coulter-Kern Discusses ADHD

Page 2



Alumna Teaches Art Therapy as Form of Expression

Page 3



Death and Grief: There is No 'Normal'

Virginia Rendler
Staff Writer

What is the normal grieving period? How do 'healthy' people normally grieve? These were a few of the questions that Tim Polakowski aimed to answer in his Discussion Day session "Death and Grief."

The Death and Grief workshop for Discussion Day on February 22 looked at the process of grief and discussed its effects in an educational and fulfilling way. Polakowski started by reminding participants that the chance of them and everyone they know dying is 100%. There is no way around it, and the grieving process can be much easier once that fact is accepted, although there is no doubt it is difficult.

The five stages of grief as developed by Elizabeth Kübler-Ross are denial, anger, bargaining, depression and acceptance. Polakowski told the group to forget that and erase it from their minds. Grief is not linear; it does not progress the same way for everyone, and there is no formula that fits every person.

The group also learned that the two parts to understanding grief are attachment and identity. When someone dies, a relationship is lost, and a part of someone's identity is also lost. There are also many complicating factors to grief that make every experience with grief different for every person. Complications include abuse, dementia, suffering, money, age and many more. Grief can be more than loss from death, and there are many forms of loss.

Polakowski graduated from Manchester University with a double major in social work and Spanish, and a minor in gerontology. He received a Fulbright Grant to teach in South Korea, and finished his Master's degree at the University of Michigan where he was awarded 'MSW Student of the Year'. He has worked in nursing homes and hospice, and is now the Social Work Hospice Educator for Hospice of Northwest Ohio.

Polakowski always enjoyed being around elderly adults, even when he was a child. He was



close with his grandmother, and loved volunteering in nursing homes. "Working in hospice is a calling," Polakowski said. "Death and goodbyes were always very hard for me as a little kid. Growing up, the authenticity of the dying process always intrigued me. I wanted to learn more about it myself, both the physical and emotional processes, and then be able to teach others about it as they are going through it. The neat stories about people saying goodbye, giving clues, or talking about seeing angels before they die has also inspired and continues to inspire me in this work." He said that Hospice work is meaningful for him because he gets to help people help make their final goodbyes, whatever that means to the person. He is able to take away so much fear just by providing answers, services and reassurance.

Senior Holly Beer said

that her main takeaway from the session was that there is no cookie-cutter method when it comes to dealing with death and grief. "There are many different factors involved in grieving, and it is important to allow everyone to grieve in their own way," Beer said. "One of the hardest, and obviously unavoidable, things people deal with is the death of loved ones. It is so important to know the process of grieving and how to help yourself and others to find their new normal after the loss of a loved one. I'm so very thankful to Manchester University for going above and beyond in hosting important sessions and workshops such as Discussion Day." Beer felt it was a great way for students, faculty and staff to become more informed and cultured.

Graduating from Manchester helped Polakowski find what he was meant to do. "Manchester provided me the foundation

and varied experienced that served as a spring board for who I am as a professional and as a person today," Polakowski said. "It gave me an opportunity to test out my interests and build further skills and leadership in the areas where I did find my interests. The social work program specifically prepared me in a similar way. It provided me the foundation knowledge and skills to go onto my Fulbright Scholarship, graduate school at the University of Michigan and helping the hundreds if not thousands of families that I have so far in my seven years of professional work."

Participants learned that in order to comfort someone grieving, it is best to respond right away, follow up after and most importantly to listen. Polakowski's ultimate message was that grief is normal, but there is no such thing as normal grief or a normal timeline for grief. It is not about saying the right thing, but about being present.

Peace in Prison

Film explores meditation's effect on inmates' lives

Kelleen Cullison
Staff Writer

The grand finale of Discussion Day, the film festival, took students to some unusual places exploring mental health. The 2008 film "The Dhamma Brothers" transported students in Flory Auditorium behind the bars of one of Alabama's most notorious prisons.

The film began in 2002, and followed several inmates with life without parole incarcerated in the Alabama Donaldson Correctional Facility as they discovered Vipassana Meditation. The film is a result of a 10-day retreat, isolated from the rest of the prison population in the facility's gym.

Students flocked to the film with varied expectations. "I chose to come to this film because I have a general interest in institutional reform," said junior Sean Sane. "I hadn't heard of the program before, and wanted to learn what I could from its success or failure." Sophomore Delaney McKesson was drawn to the practice. "I've always been fascinated with the effects of meditation and mindfulness," McKesson said.

The inmates: capital murderers, prison gang leaders, drug dealers and thieves, spent the first nine days in complete silence. There was no talking, no books and no television. It was just the men and their minds. The time and practice forced them to face their crimes and their deep seated issues with clarity for the first time. Certain inmates gave their testimony, giving detailed accounts of their crimes, and later on, of their personal battles. Many came to terms with their crime and with their punishment, and accredited their newfound peace to the Vipassana practice. It even helped one inmate cope with the death of his daughter, who was murdered after he'd been imprisoned. He found out about her death through the news, but maintained, "If I practice what I preach, then I have to love him (the murderer) as a fellow human being. I don't like

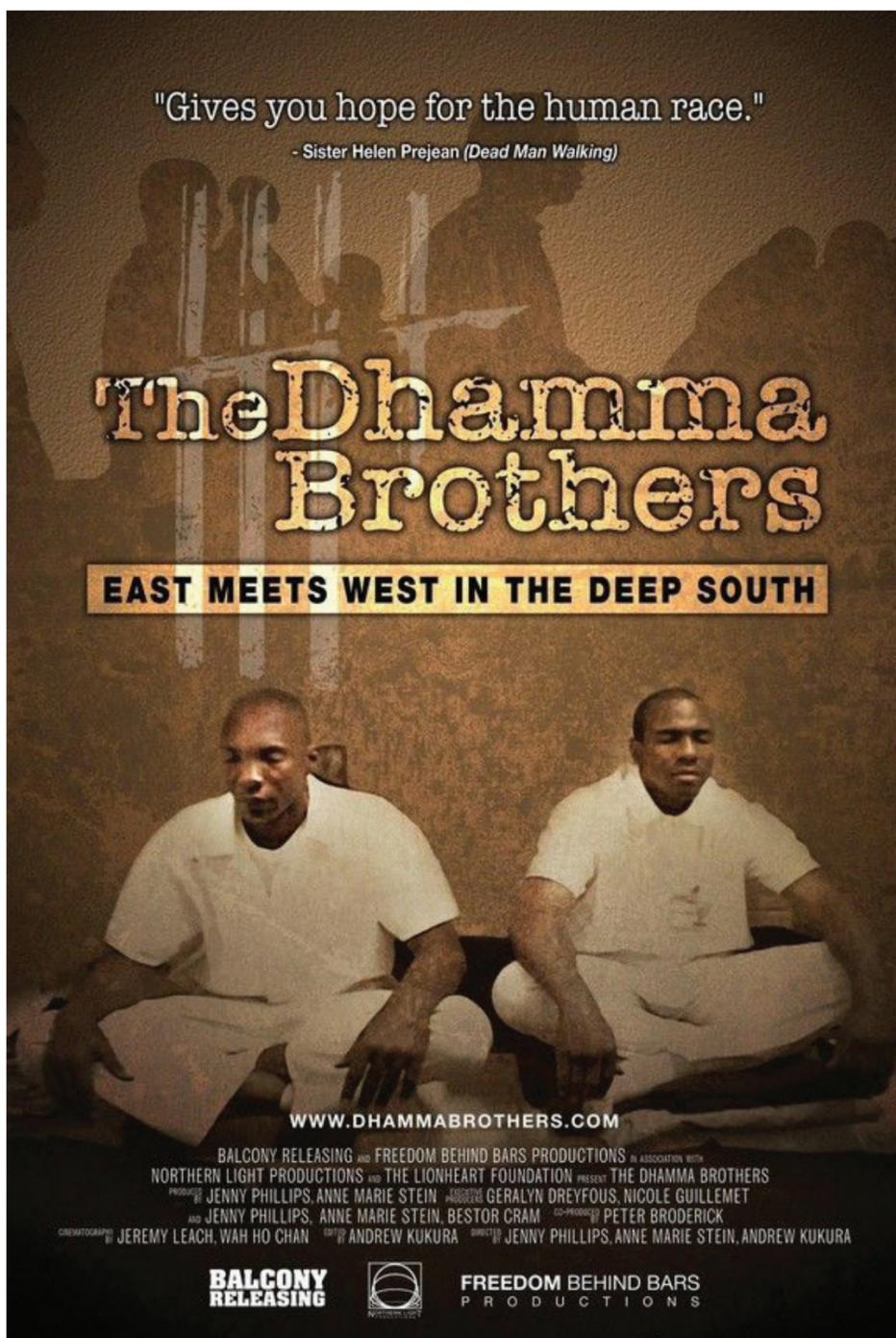
what he did, and hope he can never do it again, but I have to love him. And the me saying that is not the same me from before."

The film also showed the challenges of providing mental health services to those locked up, and introducing new methods in America's "Bible Belt." The point of the intensive program was to improve the mental health and quality of life for inmates living in the violent facility. The members of the Vipassana Meditation Center lived with the inmates for the duration of the retreat, who attested to their seemingly improved state of mind after beginning the practice. Despite its effectiveness, the program was shut down for four years at the vehemence of the prison Chaplain, who complained that, "the conversion of the inmates to Buddhism was stealing his practitioners," despite the vehemence of all involved that they practiced Vipassana as a mental practice as opposed to a religion. Still, the administration demanded the program be shutdown. It wasn't until four years later that the administration changed, and the practitioners were able to continue.

The discussion following the film was led by Dr. Christer Watson, professor of physics and a practicing Buddhist. His take on the film was equally personal and fascinated. "The mind can quiet in was you never realized it could," Christer said. He expressed his sentiment that the inmates seemed to undergo a religious experience, a thought the audience shared.

He also noted the contrast between Discussion Day's opening ceremony and the film. While Lynn Sanford's keynote speech connected mental health with love and personal connections, the film portrayed it more as a solitary journey. "[It was] a dissolvent of the self," Christer said.

The audience expressed a general discontent at the prohibition of Vipassana, whether it was a religion or a way of life being practice. "It seems to me," said junior Ben Miller, "that one could strengthen their own religion by



"The Dhamma Brothers" film poster

practicing, or being open to another."

McKesson also shared her opinions on the topic. "The changes the inmates expressed make me believe that if a facility has the capacity and resources to

provide this program, they should," McKesson said.

Interest in meditation on campus was sparked. McKesson, said she'd been interested in meditation for years now. "If they offered a meditation program on campus, I'd

definitely go. I've always wanted to learn." For others exposed to meditation for the first time, the film made a lasting impression. "After watching this," said sophomore Jamie McBright, "I can definitely see the benefits of meditating."

Coulter-Kern Discusses ADHD Stigma

Tanner Edge
Staff Writer

Psychology professor Russel Coulter-Kern addressed the elements of Attention-Deficit/Hyperactivity Disorder in the upper Jo Young Switzer Center on Wednesday, Feb. 22.

"There are some things that are true, but there are still some things that we don't know about," Coulter-Kern said. It is a brain disorder marked by an ongoing pattern of inattention and/or hyperactivity.

Russel emphasized that there are three components to ADHD: the first being inattention, the second being hyperactivity and the third being impulsivity. During his presentation, Coulter-Kern tackled ways one might be able to combat these components positively.

Psychologically, getting students with ADHD to think differently about their circumstances can help control the problem. "We want our children to have a positive identity and sense of self," Coulter-Kern said. There is a strong genetic influence associated with ADHD. Children with this diagnosis are found to have a brain size 3-4 % smaller from the average child's brain who does not have it. "We can now identify certain genes that can help the evaluation process when diagnosing ADHD.

"Since 1800, people have been talking about symptoms that we classify as ADHD symptoms today," Coulter-Kern said. In today's



Dr. Russel Coulter-Kern, professor of psychology

society, there are more treatment and therapy options for ADHD. The most commonly used and stimulating medicines are Ritalin and Adderall, both used as treatments, in addition to the non-stimulate called Strattera.

People diagnosed with ADHD may have more options than they think. "Helping students identify their strengths and weaknesses, I think is an important

thing," Coulter-Kern said. He said that education and training had a lot to do with the success of students with ADHD. Parenting skills training as well as stress managing techniques are found to be helpful in some situations. The biggest thing is to simply turn ADHD away from being portrayed as a negative in the public eye and turn it into a positive by taking the necessary steps.


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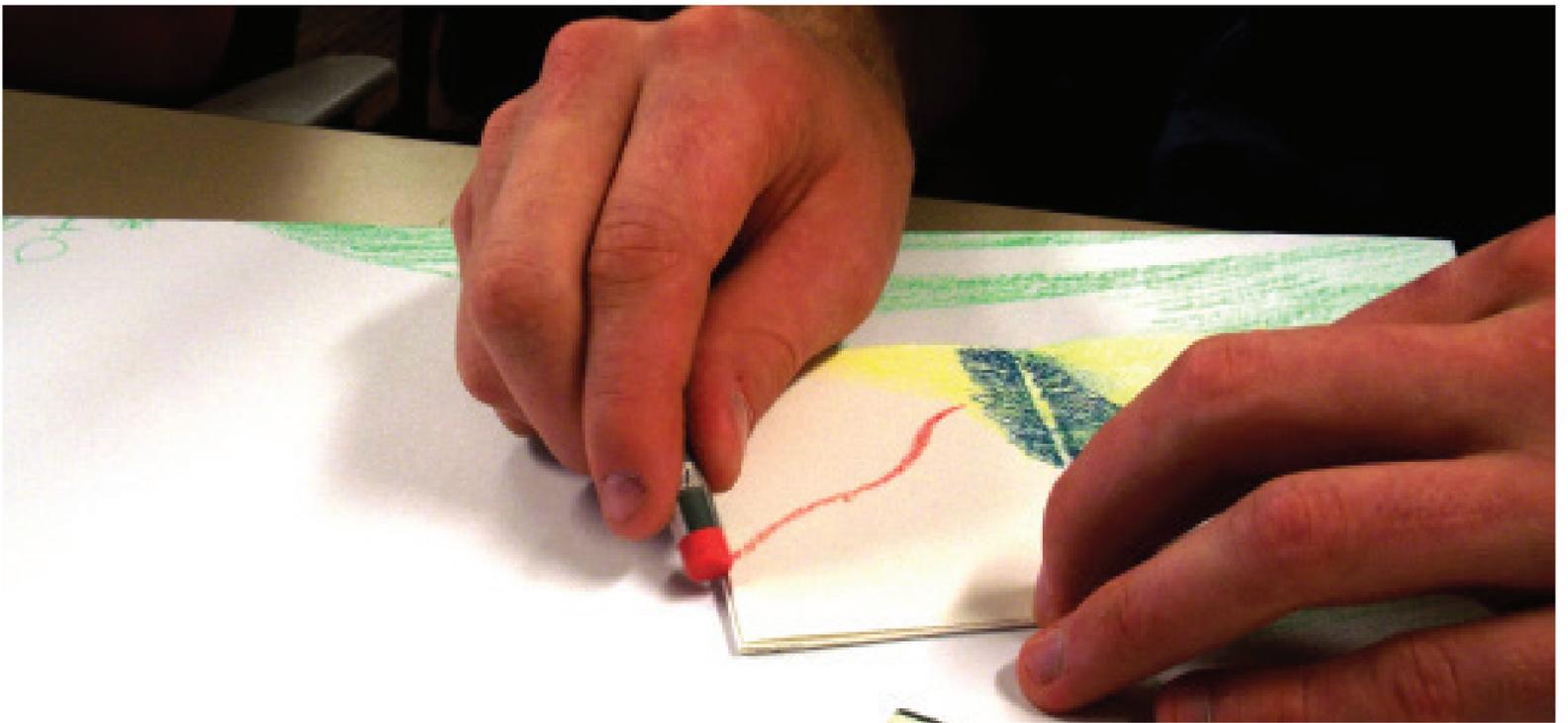
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Alumna Teaches Art Therapy as Form of Expression

Destinee Boutwell
Staff Writer

It is commonly said that a picture is worth a thousand words. The principle behind this quote can be used as a definition for art therapy and helps to express the goal art therapists hope to achieve. Art therapy can be used when words are not enough to express what a person is feeling. Statistics show that there are an increasing number of people visiting mental health professionals in the United States. Counselors are there to listen and talk people through life's tribulations and sort out specific life traumas. However, sometimes memories are too painful to share, or emotions cannot be put into words. This is where the art therapists step in; they encourage people to use vast varieties of art mediums to create an art piece that expresses their emotions or depict a specific thing.

Kay Guyer, a Manchester alumna, led a Discussion Day course that introduced what art therapy was, how it was used and why it worked. She lectured and provided a space that allowed those in attendance to experience the power of art therapy. As a Manchester student, she was heavily involved with art and can be credited with quite a few art pieces across campus. She is now in graduate school studying art therapy and working with kids in elementary schools by exploring how art ther-

apy can help them express their emotions and interpret the things they witness and experience.

As people walked in the door of the art therapy workshop, they were greeted by Guyer holding a box of oil pastels. She asked everyone to pick a pastel and directed them to a seat, where she laid a large white piece of paper in front of them. There was a large range of artistic talent in the room. Some people and never seen a pastel before, some had a little art experience in high school and others were art majors or art professors.

Guyer began the workshop by instructing everyone to use the paper and oil pastel she had handed out and to illustrate a story that she narrated, about a young boy who got a new bike and decided to take it for a trip down a hill. The story resulted in the young boy crashing and being comforted and carried home by his father. Before Guyer began the story, she instructed everyone to forget the rules of art that they have learned over the years. Instead of drawing a realistic child on a bicycle, she asked that focus should be applied to symbols, the length or thickness of lines and the movement of the piece.

After she read the story and the illustrations were complete, Guyer paired everyone up, encouraging that they explain what the lines meant and what emotions were represented by symbols, depictions, or lines. Two people in the room shared that they had drawn roughly the same picture, but the

homes were depicted differently for each of them. One depicted the home as a physical house and the other depicted the home with a heart.

Guyer stressed the importance of reflection and analysis by the artist, rather than interpretation by the person viewing the artwork. She explained that art therapy is often an expression of emotion or a depiction of a memory, and as a counselor, it is important to not make assumptions about the art work because it can sometimes be an offensive or demeaning interpretation.

As she moved into the lecture portion, Guyer taught the history of art therapy and explained that the goal was to give people a voice where they might not be able to express words. It can also be used as a way to destress and work through daily life struggles. She explained at the end of her lecture that people don't have to search out an art therapist to benefit from art therapy; it can be done in the comforts of one's house or residence hall.

To illustrate this point, Guyer assigned another project. She demonstrated a way to create a small book, folded like an accordion, where people could artistically express a problem that plagued their life. "Give your problem a beginning, a middle and an end," Guyer said. She provided many art mediums including watercolors, string, construction paper, markers and pastels. Around the room there was



Kay Guyer leads art therapy session

Photo by Tyler Roebuck

a wide range of colors being used. Some pictures had muted tones and hues, and others were vibrant and full of life and energy. Holly Granfield, a first-year in attendance, had a mixer of vibrant colors that flowed along the storyline. In the middle there was a space that was predominately black, but on the bottom there was a string of color that stretched along the whole length of the storyline. "My use of colors expressed the joy, happiness and thrill of curiosity and discovery that I have in my everyday life. This [black] area," said Granfield, "is

representing those rough patches that I go through where I get really stressed, disorganized and worn out. This string of color that runs along the bottom represents the hope that I continue to carry with me, even when life seems hopeless."

As the workshop drew to an end, Guyer received unanimously positive feedback from the room. "I loved it so much," said Granfield with a smile. "I am not that good at art, I can't draw realistic things, but I had fun in this workshop. I felt less stressed and more relaxed about the problems I drew.

Professors Help Students Understand Mental Health

Ciara Knisely
Staff Writer

Manchester University Professors Dr. Cheri Krueckenberg, Dr. Brad Yoder, Dr. Rusty Coulter-Kern and Dr. David Johnson organized this year's Discussion Day in order to present information to students on mental health.

They began organizing the event last spring, at which point they needed to select this year's topic. Dr. Cheri Krueckenberg, Associate Professor of Social Work, acted as Committee Chair to bring the event together, and mental health is clearly a subject about which she is passionate.

After working for 25 years in social services, Krueckenberg states that she's convinced that society doesn't work hard enough to alleviate suffering in the world. "If we can put people on the moon, we can do more for mental health issues," she says.

The stigmas surrounding mental health issues are fading, but Krueckenberg believes there is still more work to be done. She expresses that recovery is a long road, but that it's important to find ways to improve and cope.

Understanding mental illness also involves a lot of compassion, says Krueckenberg. She hopes that this year's topic will

help participants gain the wisdom, knowledge, and tools to deal with and respond to suffering—but compassion is also necessary to reach a place of healing.

Dr. Rusty Coulter-Kern, Professor of Psychology, reiterates the importance of this topic, as it affects a great number of people. "Chances are we all know somebody affected by mental illness," Coulter-Kern says.

Because mental illnesses have become such common afflictions, it's important to focus on causes, but also solutions. "Regardless of challenges people face, there are strategies and ways we can change to live happier, healthier lives," Coulter-Kern communicates.

"If your life is affected by it, try to find what ways are out there to improve your condition or others," Krueckenberg says. She suggests that, even in the most difficult of situations, there are always solutions and that no one should be excluded.

Dr. Brad Yoder, Professor of Sociology, Social Work, and Criminal Justice, says that people are gradually becoming more open-minded when talking about mental illnesses. He looks back in history to when these illnesses were correlated with the moon and evil spirits, and acknowledges that we've come a long way to now, where mental illnesses are understood

more scientifically.

In response to any stigmas surrounding mental illness, Dr. David Johnson, Assistant Professor of Psychology, says that more people are now willing to talk about their experiences. "It's no different than any physical illness," Johnson states.

Similarly, Yoder expresses that, as concerned citizens, we

should be educated about whatever needs individuals may have, and that this Discussion Day should help people learn more about who they are as a whole person. Yoder hopes that this day will encourage a more welcoming atmosphere when opening up about mental illnesses.

Johnson adds that education on mental health is especially important for younger adults,

"as most major illnesses emerge around adolescence." And, as no one is immune to mental illness, it is important for students to understand the warning signs and educate themselves on the topic.

"If it's an idea they haven't been exposed to, it may inspire them to explore, or understand themselves and others better," Johnson says.



Professors of psychology Dr. David Johnson and Dr. Rusty Coulter-Kern

Alumna ‘Reminds’ MU of Effects of Alzheimer’s Disease, Dementia

Jensen Lassiter
Staff Writer

Manchester alumna Tasha Williams, who now works at Fort Wayne’s Neurological Center, led the Alzheimer’s and Related Dementias: Considerations for Professionals and Family, which addressed the difficult topics of the care that patients need and their caregivers.

Williams began by first asking the audience why it was important to discuss dementia and Alzheimer’s disease. She explained that it is important because nearly one in every nine people over the age of 65 are affected and it is the sixth leading cause of death.

Many questions about dementia were asked, but one of the most profound was the difference between dementia and Alzheimer’s Disease. “Dementia has many categories, such as Alzheimer’s disease, Lewy Body Dementia, Vascular Dementia, Frontotemporal Dementia, and other related Dementias. It is essentially an umbrella,” Williams said. Williams also discussed how it is common to see two different forms of dementia grouped together in patients. The most common was Alzheimer’s and Vascular Dementia.

Alzheimer’s was later defined to include key features such as increasing memory loss, difficulties with complex tasks, judgement changes, dyspraxia, personality changes, disorientation and decreased initiative.

Williams broached many difficult topics, such as when to seek help, and several options for treatment. Williams used a PowerPoint presentation to assist her in teaching the stages of the brain affected by dementia. Brain atrophy was shown in three stages. The first stage had no atrophy, and was essentially a healthy brain, the second was moderate with slight brain atrophy and the third was severe with high volumes of brain atrophy. Many audience members shared stories of their loved ones and discussed how their memories had changed over time, essentially relating back



Tasha Williams

to brain atrophy.

“Short term memory is typically the first to leave. Memories that are stored long term will still be accessible, which is why you’ll see patients with Alzheimer’s and dementia repeating stories from twenty and thirty years ago with perfect clarity, often times down to the minute detail,” Williams said. “Those memories are still accessible because the brain has had a long time to store them. But it will go too, not at first, but it will go.” Williams encouraged the audience to just listen and enjoy the stories, even if they have been repeated

countless times. She challenged us not to give up and get frustrated, but to be calm and understanding.

Several participants shared personal stories related to the disease. “It’s extremely important for the family and caregivers to receive help, just as much as it’s important for the patients themselves,” Williams said. “Caregivers can care for themselves in a multitude of ways, but it’s important that they do so.” Of the many ways, it is important to seek help by joining support groups, maintain regular interaction with others other than the patient or family member and

to schedule regular physical and mental examinations. Williams also suggested that caregivers be realistic and to note changes in relationships with both family and the patient. She stressed that it was important for the caregiver to seek help when needed.

Naturally, education was brought up in specifics to prevent brain atrophy. “The more education, the more learning, the more you’re going to protect yourself and your brain,” Williams said. She said that students should be aware of Alzheimer’s and how it affects people. We should see the signs and

know their significance. “When people want to know what’s normal, it is like walking into a room to get something, but you forget what you’re looking for. So you walk back out. That’s normal,” Williams said. “Dementia does the same thing. However, when we go back, we remember that we were looking. They go back and forget they were ever looking. And they often times repeat that same step over and over again.”

While there are medications to help Alzheimer’s and dementia patients, research is still being conducted as there is no cure readily available.

