



# Wellness Playbook Strategies for Personal Success



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# Adjusting to College

The beginning of college can be an exciting and fulfilling time. It can also be a period of great adjustment and stress. Students find themselves in a new environment and are expected to take on new, greater, or different responsibilities. Some of the many changes associated with this transition include:

- Leaving what is familiar
- Managing new freedoms as well as responsibilities
- Changing relationships with high school friends and family
- Increased academic demands, both quantity and quality
- Larger class sizes
- Less individualized attention
- Need for more efficient time management
- Balancing social life with academics, sport, and extracurricular obligations
- Managing money on one's own
- Self-care (from eating healthy to doing laundry to making doctors appointments)

For athletes, responsibilities may be even greater than for traditional incoming students. While being part of a team can bring “instant” support and friendships, such an affiliation can also bring greater stress. Athletes may have more to balance, between time consuming practices and out of town meets. Getting along with teammates is another issue that is important. Coaches, parents, and athletes themselves may have expectations about performance that may or may not be met. University of South Dakota's track and field coach, Lucky Huber, said that for most student-athletes, “It's a huge transition, from being best in school-best in state-to coming here. No matter how talented they are, they are not the best on the team.” (Quote taken from an article written by Christopher Vondracek from the University of South Dakota's student paper

VolanteOnline.com).

While “growing pains” associated with the transition to college are normal, some students find themselves overwhelmed. Large degrees of sadness, anxiety, or homesickness may be experienced during this time. If you encounter such feelings, the following campus and web resources may be helpful:

- Reach out to others in your dorm or on your sports team. Other students may be dealing with similar feelings and it may be helpful to talk to each other. Alternately, peers may be able to share helpful coping strategies.
- Seek advice from parents or siblings who have past experience. If you do not want advice and just want them to listen, let them know.
- Turn to your Residential Advisor. He or she can listen and also help lead you to other campus resources.
- Call the Psychological and Counseling Center. A therapist may be able to help with the transition issues.



## Campus, Internet, and Other Resources

### Vanderbilt Psychological and Counseling Center

615-322-2571

Baker Bldg.

<http://www.vanderbilt.edu/pcc/>

### Margaret Cuninggim Women's Center

615-331-1200

419 Welshwood Dr.

<http://www.vanderbilt.edu/WomensCenter/women.html>

(Continued on page 5)

**Wellness Resource Center**

615-343-6073

Student Rec Center

<http://www.vanderbilt.edu/wellnesscenter>

**Student Recreation Center**

615-343-6627

<http://www.vanderbilt.edu/CampusRecreation>

**Black Cultural Center**

615-322-2524

<http://www.vanderbilt.edu/bcc/>

**Schulman Center for Jewish Life**

2421 Vanderbilt Place

615-343-1953

<http://www.vanderbilt.edu/hillel/>

**University Chaplain**

615-322-2457

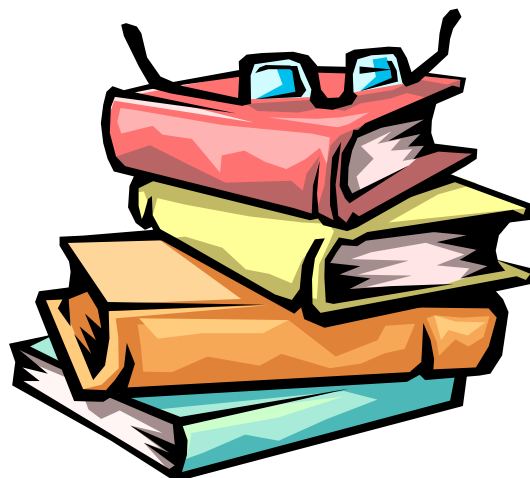
2417 West End Avenue

<http://www.vanderbilt.edu/religiouslife/>

[www.studentlife.villanova.edu/counselingcenter/psychtopics/adjustingcollege.html](http://www.studentlife.villanova.edu/counselingcenter/psychtopics/adjustingcollege.html)

[//usfweb2.usf.edu/counsel/adjust.htm](http://usfweb2.usf.edu/counsel/adjust.htm)

[www.stmarys-ca.edu/prospective/undergraduate\\_admissions/  
student\\_life\\_and\\_services.s](http://www.stmarys-ca.edu/prospective/undergraduate_admissions/student_life_and_services.s)



# Alcohol and Athletic Performance

Many top-level Division I teams have strict no drinking policies. Being on a college campus where social activities often involve alcohol it might be tempting to violate these policies. Ultimately, the choice to drink is up to you (a choice which is no doubt influenced by law makers for those 21 and under). This article is written to provide further education about alcohol and its effects on performance so that you can make an informed decision about drinking.

Most athletes at the university level of competition know that using alcohol the day of practice or of competition obviously hurts their performance. They also know to stay away from drinking the day of competition. But, do they know that alcohol can hurt their performance the next day?

## **Alcohol doesn't affect performance the next day, right? WRONG!**

During the course of an evening drinking (even one drink an hour), your body uses up the free glucose in your blood and then starts using up your stored glucose in your muscles. When alcohol is in the body, the liver focuses in on metabolizing the alcohol as its number one priority....it views alcohol as a poison that must be removed for the sake of the body! Since the liver is so busy on alcohol, it can't make glucose for the body to use, hence the depletion of the muscle glucose. For most sports, you need to have that muscle-stored glucose for the ability to endure the whole competition.

During drinking—and at the same time that glucose is dropping in the body—lactic acid is building up in the body. You know what lactic acid is? It's what tells the muscle that it is tired and needs to quit. That's one of the reasons you still feel tired the next day after drinking even though you've slept 10 or 12 hours.

Heart muscle cells will metabolize alcohol and produce a fatty acid ethyl, ester, which affects

the mitochondria, the cell's energy source, of heart muscle cells. As little as .08 BAC reduces cardio function 24% for 48-72 hours afterwards! Women are four times more vulnerable to this complication of the cardio-vascular system.

College students never really get enough sleep but when you add alcohol to the already sleep deprived, you are producing even more stress in the brain. To perform well on the court you need to be well rested.

## **Consuming 5 or more alcoholic drinks in one night can affect the brain and body functions for up to 3 days!**

After a big night out drinking, the central nervous system which has been depressed by alcohol, will try to get back to normal the best way it knows how.....pendulum swing into agitation back to suppression back to agitation, until it finally mellows out back to normal.....sometimes taking days to get back to normal!!! This is called the central nervous system rebound effect of alcohol.

For a real party weekend of drinking say a 6 pack on Friday night, waking up around noon and drinking a few while you're watching TV, then heading out that night to drink another 6 pack or so; waking up Sunday and a few beers that afternoon.....How long do you think it would take your CNS to get back to normal? 7-10 days! What happens during those 7-10 days???? Another weekend! So, you can start the cycle all over again!

Electrolytes .....are all messed up when you drink alcohol... alcohol dehydrates the body by suppressing the hormones which control urine output. You end up losing body fluid/minerals/vitamins/electrolytes not just the beer that you drink when you go to the can. You all know how important it is to keep hydrated, right? You can have cardiac arrest if you don't stay hydrated and replace electrolytes. The muscles, including the heart, need a certain balance of sodium and potassium electrolytes for the electrical impulses to proceed thru the muscle

*(Continued on page 7)*

smoothly and communicate to the next muscle cell. If that balance is out of balance, then the heart muscle cells will mis-fire, resulting in arrhythmia &/or cardiac arrest. (Being overheated adds to the potential for cardiac arrest). Have you ever had a muscle cramp? Dehydration certainly can cause that!

### **Injured?**

Alcohol interferes with build up of muscle strength and volume as well as bone repair! You want to get back to play as soon as possible, don't you?

### **But doesn't alcohol have a lot of carbs and aren't carbs good!?**

Alcohol is a poor source for carbs. A 12oz. beer has only 14 carbs as compared to 40 grams in a can of soda (not to advocate soda!) Plus, there are a lot of empty calories in alcohol. There are better ways to add carbs to your diet than by adding alcohol.

Alcohol also depletes the body of vital nutrients: impairs digestion of proteins and amino acids; interferes with absorption and utilization of essential vitamins/minerals.

### **Campus, Internet, and Other Resources**

#### **The Office of Alcohol, Tobacco & Other Drug Prevention**

615-343-4740

206 Sarratt

<http://www.vanderbilt.edu/alcohol/>

(Has specific links for student-athletes concerning NCAA rules and guidelines as well as other athletic performance issues.)

#### **Vanderbilt Psychological and Counseling Center**

615-322-2571

Baker Bldg.

<http://www.vanderbilt.edu/pcc/>

**Student Health Services** has a substance abuse therapist available to all students, free of charge.

615-343-0281

Zerfoss Building

#### **VU Emergency Room**

615-322-0160

#### **Vanderbilt Addiction Center**

1-800-365-2270

Psychiatric Hospital at Vanderbilt

601 23<sup>rd</sup> Ave South

<http://www.mc.vanderbilt.edu/addiction/>

#### **CHEERS**

615-343-4740

<http://vanderbilt.edu/alcohol/cheers>

More information and resources on alcohol's effect on athletic performance can be found on <http://www.vanderbilt.edu/alcohol/>, which links to other websites like NCAA and Gatorade. Just look on the left side "For Students" and select Student-athletes.

#### **Alcoholics Anonymous** -- referral services and treatment program

24-hour helpline

1-800-711-6375

#### **ALANON**

176 Thompson Lane

615-333-6066



# Attention-Deficit/Hyperactivity Disorder

Do you make careless mistakes? Do you fidget or easily become distracted? Is it hard for you to wait your turn? If so, you may have Attention-Deficit/Hyperactivity Disorder. There are 3 main types of ADHD:

- **Predominantly Hyperactive-Impulsive Type**
- **Predominantly Inattentive Type (Previously called ADD)**
- **Combined Type**

The symptoms of ADHD are categorized in three dimensions:

## Inattention

- Often fails to give close attention to details or makes careless mistakes in schoolwork, work or other activities.
- Often has difficulty sustaining attention in tasks or play activity.
- Often does not seem to listen when spoken to directly.
- Often does not follow through on instructions and fails to finish schoolwork, chores or duties in the workplace (not due to oppositional behavior or failure to understand instruction).
- Often has difficulty organizing tasks and activities.
- Often avoids, dislikes or is reluctant to engage in tasks that require sustained mental effort (such as schoolwork or homework).
- Often loses things necessary for tasks or activities (e.g., toys, school assignments, pencils, books or tools).
- Is often easily distracted by extraneous stimuli.
- Is often forgetful in daily activities.

## Hyperactivity

- Often fidgets with hands or feet or squirms in a seat.
- Often leaves seat in classroom or in other situations in which remaining seated is

expected.

- Often runs about or climbs excessively in situations in which it is inappropriate (in adolescents, may be limited to subjective feelings of restlessness).
- Often has difficulty playing or engaging in leisure activities quietly.
- Is often "on the go" or acts as if "driven by a motor."
- Often talks excessively.

## Impulsivity

- Often blurts out answers before questions have been completed.
- Often has difficulty waiting turn.
- Often interrupts or intrudes on others (e.g. butts into conversations or games).

If you have documented ADHD, you can register with the **Opportunity Development Center** on campus. They can help you receive appropriate accommodations in your classes that will help you perform to the best of your abilities. Accommodations can include such things as extended time on tests, a distraction reduced testing environment, note-taking assistance, preferential seating, etc.

Documented ADHD means that you have to have a **psychoeducational assessment** to determine whether you have ADHD. This assessment always consists of an interview exploring your personal and educational background, testing of your ability or IQ and specific examinations of attention-related cognitive abilities. The evaluation should also generally assess your psychological and emotional functioning to rule out other causes for academic difficulties.

Accommodations are what others can do for the person with ADHD to help them succeed in the classroom; Compensatory Strategies are what people can do for themselves. Compensatory Strategies can include using books on tape, re-writing notes, learning memory skills, learning

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study strategies, learning time management, etc.

### Campus, Internet, and Other Resources

If you suspect that you have ADHD, you should discuss this with your Academic Advisor in the Athletic Department.

You can also contact the **Psychological and Counseling Center (PCC)** at VU, which provides assessment, psychological and educational improvement services. An educational specialist can help you learn compensatory strategies.

615-322-2571

Baker Bldg.

<http://www.vanderbilt.edu/pcc/>

**The Opportunity Development Center (ODC)** at VU (V/TDD)) can help you acquire appropriate accommodations, should you have documented ADHD.

Baker Bldg.

615-322-4705

<http://www.vanderbilt.edu/odc/>

**Children and Adults with Attention-Deficit/Hyperactivity Disorder (CHADD)**

is a national non-profit organization founded in 1987 in response to the frustration and sense of isolation experienced by parents and their children with AD/HD.

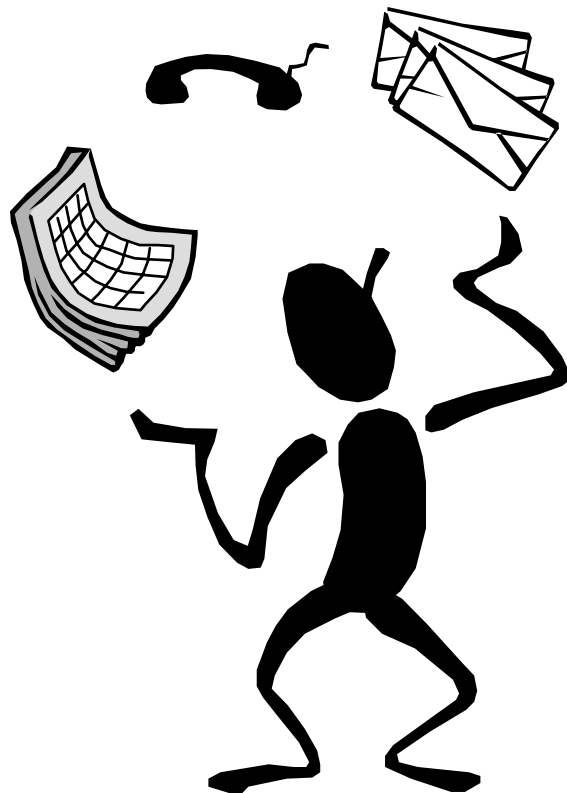
[www.CHADD.org](http://www.CHADD.org)

*Becoming A Master Student*, by Dave Ellis.

**This is a great book with compensatory skills.**

**Attention Deficit Disorder Association, ADDA**, provides information, resources and networking opportunities to help adults with Attention Deficit/Hyperactivity Disorder (AD/HD) lead better lives. Also provides hope, empowerment and connections worldwide (by bringing together science and the human experience for both adults with AD/HD and professionals who serve them.

[www.add.org](http://www.add.org)



## Body Image Concerns and Eating Disorders

The media is full of pictures of very thin women, in barely-there clothing, getting lots of attention from guys with “six pack” abs, gelled hair and larger-than-life muscles. It can be very difficult for anyone at a healthy weight to think of his/her body as being attractive.

**Disordered eating** can be a serious problem for athletes. Female athletes in sports that emphasize a thin body—such as gymnastics, swimming and distance running—and male athletes in body building and wrestling are especially at risk. Disordered eating can negatively impact performance, and contribute to osteoporosis and infertility. Factors that can contribute to eating disorders are dramatic increases in activity, perfectionism, and self-criticism of athletic performance.

### Signs and Symptoms of **Anorexia**

- Avoidance of food and eating
- Intense fear of becoming fat
- Obsession with weight and weighing oneself
- Making excuses to avoid eating
- Sudden avoidance of certain foods
- Rapid loss of weight
- Significantly underweight
- Perfectionistic and/or obsessive qualities

### Signs and Symptoms of **Bulimia**

- Red, puffy face (from vomiting)
- Marks on fingers from inducing vomiting
- Fear of becoming fat
- Going to the bathroom after meals, wanting to be alone after meals (usually within one hour after eating)
- Obsession with weight and body size

- Eating large quantities of food in a short time
- Usually of average body size, although can be overweight or even underweight
- Impulsive qualities
- Exercise in excess of recommended training and/or use of laxatives to control weight

### Signs and symptoms of **Binge-Eating Disorder**

- Eating large quantities of food in a short period of time
- Usually overweight, but may be of average weight
- Continuous eating
- Impulsive qualities

If you suspect that you may have a problem with disordered eating, talk to your athletic trainer, coach or physician. You can also talk with a counselor at the Vanderbilt University Psychological and Counseling Center (PCC). It's best if you call first for an appointment at 322-2571. There is a nutritionist available to all athletes through the Athletics Department. There are also physicians and a registered dietician at Student Health who work with students who have eating disorders. In addition, there are psychiatrists on staff who can prescribe medications that can help manage the problem. There is a Wellness Center at the Student Rec. Center, with materials on eating disorders. The Wellness Center is directed by Becky Spires, staff liaison to IM-AGE, an ED recovery/advocacy group on campus. With students' permission, staff from across disciplines often coordinate treatment to ensure provision of the best care possible.

One common occurrence in people struggling with eating concerns is fear of getting help. They often fear the consequences of alerting oth-

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ers to the issues. We emphasize that our concern is for you and we understand that there is a range in how ready students are to address eating issues.

### Campus, Internet, and Other Resources

Your **coaches, trainers, and team physicians** are available and ready to help you access important resources.

#### Vanderbilt Psychological and Counseling Center

615-322-2571

Baker Bldg.

<http://www.vanderbilt.edu/pcc/>

#### Molly Fruin, M.S., R.D., L.D.N.

Clinical Dietician

Vanderbilt University Medical Center

607 Medical Arts Building

1211 21<sup>st</sup> Avenue South

615-936-3952

Molly also has office hours at McGugin

**Student Health** (Has a registered nutritionist on staff in addition to medical staff)

615-322-2341

Zerfoss Bldg.

[http://www.vanderbilt.edu/student\\_health/](http://www.vanderbilt.edu/student_health/)

#### Student Recreation Center

615-343-6627

[http://www.vanderbilt.edu/](http://www.vanderbilt.edu/CampusRecreation)

[CampusRecreation](http://www.vanderbilt.edu/CampusRecreation)

#### Wellness Resource Center

615-343-6073

Student Rec Center

<http://www.vanderbilt.edu/wellnesscenter>

#### The Dayani Center: Todd Wasilewski

(also provides Nutritional Services)

615-322-4751

<http://polproc.mc.vanderbilt.edu/policy/po16-40c.html>

#### Eating Disorders Awareness & Prevention (EDAP)

206-382-3587

<http://www.nationaleatingdisorders.org>

#### Anorexia Nervosa & Related Disorders (ANRED)

503-344-1144

<http://www.anred.com/>

#### National Center for Overcoming Overeating

212-875-0442

<http://overcomingovereating.com/>

#### National Eating Disorder Screening

617-239-0071

<http://mentalhealthscreening.org/eat>

#### National Eating Disorders Organization (NEDO)

918-481-4044

<http://www.kidsource.com/nedo>

#### National Assoc. of Anorexia Nervosa & Associated Disorders

847-831-3438

[http://www.anad.org/site/](http://www.anad.org/site/anadweb/)

[anadweb/](http://www.anad.org/site/anadweb/)

#### Internat'l Assoc. of Eating Disorder Professionals (IAEDP)

800-800-8126

<http://www.iaedp.com/>

#### National Assoc. to Advance Fat Acceptance (NAAFA)

800-442-1214

<http://www.naafa.org/>



# Communication

Do you sometimes communicate with others easily? Are your words, at other times, met with blank stares (or worse)? Different kinds of communication elicit varied reactions. There are three main categories of communication: **passive, aggressive, and assertive**. Passiveness can decrease the degree to which others listen to a message. Aggressiveness involves imposing a power differential in order to obtain a certain end result and is not based on respect for the other person(s) involved. Assertiveness is respectful of both parties and allows the direct and honest expression of one's personal rights and feelings. Assertiveness is thought to be the best mode of communication for most situations.

**Assertiveness** can help people to:

- Stand up for themselves
- Make requests
- Set boundaries
- Give feedback-both positive and negative
- Improve relationships

While assertiveness can be helpful and lead to improved relationships, it may at first be difficult to implement an assertive communication style. It may be hard to communicate a specific request to a roommate, teammate, or coach. For example, you may find a time when you need to ask a roommate to turn down his or her stereo so you can study, ask a teammate to vary his or her style of play, or tell a coach or trainer that you are not able to meet his or her request.

It is important to remember that all people have the right to make requests of others (e.g. a behavioral change) just as the respondent has the right to deny the request made.

- **Make "I" statements**
  - I think
  - I feel
- **Making requests**
  - I want
  - I need

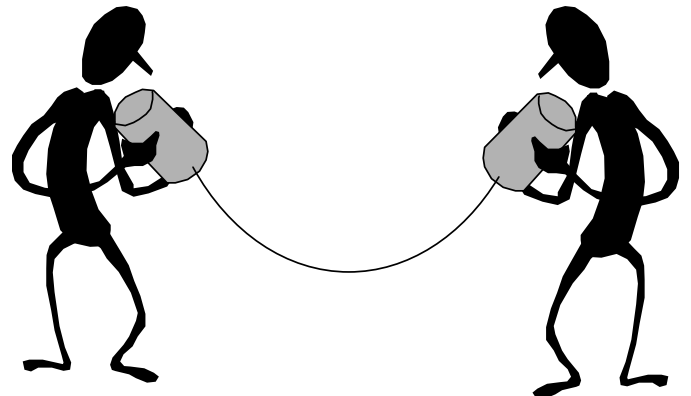
- **Self-reference**
  - In my opinion....
- **Negotiating**
  - What would you consider an acceptable compromise?
  - My preference is X...where do you stand on this?
- **Do not make assumptions. Instead, ask for clarification.**
  - I am not sure I am clear about what you said, would you mind clarifying what you said?

## Campus, Internet, and Other Resources

**Vanderbilt Psychological and Counseling Center**  
615-322-2571  
Baker Bldg.  
<http://www.vanderbilt.edu/pcc/>

**Margaret Cuninggim Women's Center**  
615-331-1200  
419 Welshwood Dr.  
<http://www.vanderbilt.edu/WomensCenter/women.html>

[www.counsel.ufl.edu/selfHelp/selfAssertion.asp](http://www.counsel.ufl.edu/selfHelp/selfAssertion.asp)  
[www.couns.msu.edu/self-help/assertive.htm](http://www.couns.msu.edu/self-help/assertive.htm)  
[www.couns.msu.edu/self-help/sk\\_behav.htm](http://www.couns.msu.edu/self-help/sk_behav.htm)  
[www.twu.edu/o-sl/counseling/SelfHelp026.html](http://www.twu.edu/o-sl/counseling/SelfHelp026.html)



# Concentration

A big test, or important game is coming up, but you just can't focus no matter how badly you berate yourself. What's up? The ability to give something our undivided attention to the exclusion of other attractions is something that requires good health, both physically and mentally. An emotional upset, or a physical illness, can impact your ability to concentrate. Becoming frustrated with or blaming yourself, only makes it more difficult to get back on track. Establish a regular routine of eating, sleeping and exercising. This increases your ability to concentrate. Bring interest and a sense of purpose to your task. It is much easier to concentrate when you're fully involved in what you're doing. Draw diagrams, use highlighters, talk to yourself, use interesting colors. It all helps keep you focused. Establish rewards for tasks accomplished. We work best with positive reinforcement. Creating a routine for activities that require concentration, such as studying, is most easily put into place when you're NOT stressed. Some simple strategies are:

- **Set aside a place that is for the designated activity only**
  - Don't use this space for social interactions, talking on the phone, emailing, daydreaming, etc.
  - Ensure that this place has good lighting, good ventilation, a comfortable chair (but not too comfortable) and a desk large enough to see all your materials easily
  - Avoid a clear view of distractions, your telephone, stereo or TV, friends who want to talk, and munchies
- **Divide your work into manageable, short-range goals**
  - Don't set vague or unreachable goals...you're setting yourself

up for failure and disappointment. It's highly unlikely that you can concentrate for more than 50 minutes without taking a break.

- Take the time block you've scheduled and set a reasonable goal (example: finish reading three sections of an assigned chapter, complete one math problem, write rough draft of paper, etc.)
  - Set your goal when you sit down to work, but before you begin to work
- **Set a REACHABLE goal.** If you accomplish more, great! But set a manageable goal even if it seems too easy beforehand.

## Campus, Internet, and Other Resources

### Vanderbilt Psychological and Counseling Center

615-322-2571  
Baker Bldg.  
<http://www.vanderbilt.edu/pcc/>

### Learning Resource Center

615-322-4855  
221 Garland Hall  
<http://vanderbilt.edu/AnS/LRC/lrc.htm>

### ACIS Help Desk

615-343-1631  
2200 West End Ave  
<http://www.vanderbilt.edu/acis/>

<http://www.vanderbilt.edu/pcc/reading.html>

### For self-help inventories:

<http://www.vanderbilt.edu/pcc/screening>



# Dealing with Injury

Each year, thousands of college student-athletes are injured during practice and competition. In addition to the physical toll that injuries take, student-athletes also can experience emotional pain when forced to “sit out” and undergo rehabilitation. In certain cases, an early retirement from sport is required and can feel devastating to the individual whose identity centers on being a student-athlete. While athletes vary in the amount of distress they experience due to injury, a number of common concerns can arise. These include worry about losing a competitive edge, discomfort related to watching teammates step into the open position, and fears about the possibility of re-injury. Those with strong support systems—comprised of coaches, trainers, strength coaches, fellow athletes, family, and friends—might be more equipped to handle such issues; however, even with an excellent support network, there are often added benefits of working with a counselor.

While injury clearly causes stress in athletes, general life stress may come first in the chain of events and actually increase the likelihood of injury. Stress can arise in or outside of the competitive arena. Sources might include relationships, family concerns, and academic problems. Regardless of where it comes from, its effect on the body is the same. Psychological tension leads to greater muscle tightness, which in turn interferes with coordination and technique. Add to this difficulty with concentration—another problem associated with stress—and the result can be physical injury. Therefore, student-athletes’ cannot afford to overlook the very important extra responsibility of effectively handling everyday concerns.

## Psychological Impact of Injury on the Student-Athlete

Athletes adjust to injuries in a variety of ways. Those with a sense of hopefulness, self-confidence, and motivation to get better often have the best prognosis for recovery. It may,

however, take time to attain an optimistic state of mind. More typically, athletes must first work through a number of other responses to injury such as denial, anger, sadness, guilt, loneliness, and feelings of loss. These emotions may be experienced with even the mildest of injuries. What determines the emotional impact of injury is the personal meaning that it takes for the individual. For example, a sprained ankle might cause one athlete to feel helpless and sad, whereas another might think, “What’s the big deal.”

Because adjustment following injury can be tough, here are some warning signs that suggest counseling could be of benefit (Petitpas & Danish, 1995):

- Evidence of anger, sadness, confusion, and/or apathy.
- Obsession with the question, “When will I be able to play again?”
- Denial demonstrated in remarks like, “Things are going great,” “The injury is no big deal,” or other comments that seem to minimize the likely psychological impact of the injury.
- A history of returning too quickly from injuries.
- Exaggerated storytelling or bragging about sport/non-sport related accomplishments.
- Dwelling on minor physical complaints.
- Guilt.
- Noticeable attempts to gain support from others—for example, “hanging around” the training room “too much.”
- Withdrawal from teammates, coaches, friends, family, or counselor.
- Mood swings.
- Statements that indicate feelings of helplessness.

*(Continued on page 15)*

### Suggestions for Handling Injury

Here are a number of tips for coping with injury (taken from Sugarman, 1999):

- Let yourself feel sad, mad, and/or upset. You might be able to hold in these feelings temporarily but sooner or later the emotions will have to come out.
- As soon as you are ready, focus on the situation at hand and try not to dwell on “if only.” While it is natural to have some regrets, you cannot change what has happened. Looking toward the future will help speed up recovery.
- Set new goals for yourself. Be patient and choose goals that are challenging yet attainable since these will help boost your confidence and morale.
- Try to maintain a positive dialogue with yourself. Positive self-talk will also help bolster your confidence and morale.



- Although you might need to take a break from participating in your sport, you can still practice your mental skills for performance. Use visualization strategies to keep your mind sharp. This will help you get back into the swing of things once you are able to resume practice.
- Use relaxation strategies (e.g., deep breathing) to promote healing. Relaxation

- Make sure to keep clear communication with your athletic trainer, coach, and teammates. This will help everyone (including yourself) develop accurate expectations and an understanding of your situation.
- Be patient. Rushing back into training can increase the risk of re-injury. It can also be detrimental to your confidence. That is, you might adopt a cautious style as a way to protect the injury. Consequently, you might find that your performance suffers. This can initiate a cycle of self-doubt and poor performance.

Some additional tips for handling injury include making sure you gather information about treatment. Your ability to be a knowledgeable consumer will help to promote a sense of personal control in the recovery process. Also remember, regardless of the injury’s severity, many student-athletes benefit from counseling as a part of their rehabilitation.

### Campus, Internet, and Other Resources

Consult with your **coaches, trainers, and team physicians.**

#### Vanderbilt Psychological and Counseling Center

615-322-2571

Baker Bldg.

<http://www.vanderbilt.edu/pcc/>

#### Wellness Resource Center

615-343-6073

Student Rec Center

<http://www.vanderbilt.edu/wellnesscenter>

(Continued on page 16)

**Student Recreation Center**

615-343-6627

<http://www.vanderbilt.edu/CampusRecreation>

**Student Health**

615-322-2341

Zerfoss Bldg.

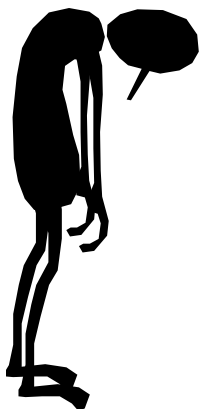
[http://www.vanderbilt.edu/student\\_health/](http://www.vanderbilt.edu/student_health/)

Petitpas and Danish (1995). **Caring for injured athletes**. In S. Murphy (Ed.), *Sport psychology interventions* (pp. 255-281). Champaign, IL: Human Kinetics

Karlene Sugarman (1999). **Winning the mental way**. Step Up Publishing. Burlingame, CA.



# Depression



At some point during the year—more likely in the dark months of winter than during the summer—most college students experience at least some of the symptoms of depression. For example, there may be feelings of discouragement about the future, dissatisfaction with life, or isolation from others. At other times, students may lack the energy to get things done, or be unable to concentrate, eat, or sleep normally.

While the line between life's normal ups and downs and depression can be difficult to define, depression can be an appropriate response to sad events.

Major depression occurs when the signs of depression (poor appetite, insomnia, lethargy, feelings of worthlessness, or loss of family, friends, and activities) last two weeks or more without any notable cause. Depression is widespread, affecting 10-25% of women and 5-12% of men at some point in their lives. The most common age for a first occurrence of depression is in the early to mid-twenties, putting college students in a high-risk category. It is often brought on by stressful life events (such as failing a class, being criticized or rejected by others, or surviving physical trauma). Anything that disrupts a person's sense of worthiness can cause depression.

Depression is often treated through a combination of counseling and medication. Counseling can help a person to cope with stressful life events and to examine patterns of thoughts and behavior that may contribute to the depression.

## Campus, Internet, and Other Resources

### Psychological and Counseling Center

615-322-2571

Baker Bldg.

<http://www.vanderbilt.edu/pcc/>

### Student Health

615-322-2341

Zerfoss Bldg.

[http://www.vanderbilt.edu/student\\_health/](http://www.vanderbilt.edu/student_health/)

### Office of the University Chaplain

615-322-2457

2417 West End Avenue

<http://www.vanderbilt.edu/religiouslife/>

### Margaret Cuninggim Women's Center

615-331-1200

419 Welshwood Dr.

<http://www.vanderbilt.edu/WomensCenter/women.html>

### Wellness Resource Center

615-343-6073

Student Rec Center

<http://www.vanderbilt.edu/wellnesscenter>

### Student Recreation Center

615-343-6627

<http://www.vanderbilt.edu/CampusRecreation>

# Diversity

*“It seems to me that a whole lot of life's problems would be solved much more quickly and effectively if people would stop to think about issues from the other side's point of view. The amount of conflict and problems would diminish significantly if people would stop and learn to respect other human beings as people with feelings and thoughts that are just as valid as their own. Debates and arguments over religion, homosexuality, race and gender seem to diminish in significance when you sit back and realize that we are each individuals and as such we are entitled to our own opinions.”*

-Quote by Sarah Thomas from her article in University of Connecticut's newspaper The Campus Daily

Our nation is more diverse than ever before. Consequently, the university population is also more diverse than in the past. While diversity varies in its visibility, campuses are often more heterogeneous than were students' prior places of residence. The college years can be a time to learn from people who are different from yourself. Being part of a diverse environment can be life enriching and allow you to gain knowledge that will no doubt continue to be of benefit in whatever you do. While not limited to the variables described below, differences among people may include the following:

- Race and Ethnicity
- Gender and Gender Identity
- Sexual Orientation
- Ability/Disability Status
- Religion and Spirituality
- Age
- Education
- Socio-economic Status
- Individual Experiential Background
- Lifestyle (Interests, Hobbies, Activities, Affiliations)

For many students, college may be the first time when they are in an environment that requires interaction with peers who are different from themselves. Unfortunately, a simple set of rules for thriving (or simply surviving) in such a community does not exist. However, the tips listed below might be helpful.

- Get to know yourself. Acknowledge your own biases and stereotypes.
- Challenge your own assumptions, values, and attitudes.
- Approach difference with interest versus fear.
- Be sensitive to how others perceive and react to your behavior. Be willing to acknowledge and discuss your own mistakes.
- Be aware of appropriate terminology in referring to diverse groups.
- Become aware of the history and culture of groups different from your own. Attend campus and community sponsored events.
- Become aware of issues that confront multicultural groups.
- Speak up with someone makes a disparaging comment/explain why it is insensitive or offensive.
- Get to know people as individuals rather than representatives of a certain group. Do not assume that a person identifying with a particular group is a spokesperson for his or her entire group.

*(Continued on page 19)*

## Campus, Internet, and Other Resources

### Psychological and Counseling Center

Baker Bldg.  
(615) 322-2571  
[www.vanderbilt.edu/pcc](http://www.vanderbilt.edu/pcc)

### Office of GLBT Life

Annex of the Community Partnership House  
(615) 322-3330  
[www.vanderbilt.edu/glbtlife](http://www.vanderbilt.edu/glbtlife)

### Margaret Cuningim Women's Center

615-331-1200  
419 Welshwood Dr.  
<http://www.vanderbilt.edu/WomensCenter/women.html>

### Lambda

(615) 322-0376  
East Wing of the 3rd floor of Sarratt  
Meetings at Office of GLBT Life  
<http://www.vanderbilt.edu/lambda/main/>

### Vanderbilt University International Students

<http://www.vanderbilt.edu/incoming/international.html>

### Owen Graduate School of Management International Students

<http://mba.vanderbilt.edu/vanderbilt/Community/international/>

### Black Cultural Center

615-322-2524  
<http://www.vanderbilt.edu/bcc/>

### Schulman Center for Jewish Life

2421 Vanderbilt Place  
615-343-1953  
<http://www.vanderbilt.edu/hillel/>

### Opportunity Development Center

Baker Bldg  
615-322-4705  
<http://www.vanderbilt.edu/odc/>

### Stepping Out Group

<http://www.vanderbilt.edu/glbtlife/>

### GABLE -- The Office of Lesbian, Gay, and Bisexual Concerns

Divinity School  
<http://divinity.lib.vanderbilt.edu/div/studentlife/gable.html>



# Family Issues

## What is a Dysfunctional Family?

The term “dysfunctional family” is often misused. Even the best parents can make mistakes that can leave children feeling pressured, ignored, or criticized. That does not make the family “dysfunctional.” It is likely that your parents have provided both positive and negative experiences throughout your development. Opportunities to talk about the negatives can help to decrease their effects on future relationships, self-esteem, and overall functioning.

However, some negative experiences have long-lasting effects. Those include, but are not limited to, the following:

- Ignoring, discounting, or criticizing feelings and thoughts.
- Excessively protective, over-involved, and intrusive behavior.
- Having rigid expectations for behavior and performance.
- Denial of affection for failing to meet expectations.
- Using physical violence to exert control or express anger or disappointment.
- Having family members with addictions to substances or compulsive behaviors (e.g., drugs, alcohol, gambling, overworking, promiscuity, or overeating).
- Criticizing physical appearance, masculinity/femininity, or sexuality.
- Using children to meet emotional needs. For example, being asked to or feeling like you have to protect or cheer up a depressed parent.
- Threatening to remove financial support based upon academic or athletic performance.
- Forcing children to take sides during adult conflicts.
- Excessive or insufficient structure.

## Effects of Family Problems

Growing up and/or being a part of a dysfunctional family can result in several problems. The following represents ways that family problems can affect you as a student-athlete:

- Problems with authority figures, such as coaches and trainers.
- Intense feelings of pressure to perform and to be “The Best.”
- Development of poor body image or eating disorders.
- Reduced trust in teammates and others.
- Belief that no one can perform a task except for you.
- Taking on too much responsibility for team losses or mistakes.
- Reduced motivation and performance.
- Increased frustration when unable to please authority figures.
- Taking constructive criticism too personally.
- Confusion around what “normal” really is.
- Difficulties with expressing anger and disappointment.
- Reduced sense of self-worth.

## Ways to Address Problems

The athletics staff can help you locate support and guidance in learning how to overcome limitations caused by family problems. The following is a list of things you may want to consider in making changes that address past or current family problems and how they are affecting you.

- Get help from people you trust.
- Let your coaches and trainers know if you need help finding professional support.
- Join support groups or participate in counseling.
- Learn to trust your perceptions and feelings.
- Identify and work through painful or difficult family experiences.

*(Continued on page 21)*

- Make a list of behaviors and beliefs that you would like to change.
- Replace those behaviors and beliefs with ones you would prefer to have.
- Practice changing one behavior or belief at a time.

### **Campus, Internet, and Other Resources**

#### **Vanderbilt Psychological and Counseling Center**

615-322-2571

Baker Bldg.

<http://www.vanderbilt.edu/pcc/>

#### **University Chaplain**

615-322-2457

2417 West End Avenue

<http://www.vanderbilt.edu/religiouslife/>

#### **Student Health**

615-322-2341

Zerfoss Bldg.

[http://www.vanderbilt.edu/student\\_health/](http://www.vanderbilt.edu/student_health/)

#### **Margaret Cuninggim Women's Center**

615-331-1200

419 Welshwood Dr.

<http://www.vanderbilt.edu/WomensCenter/women.html>

## Gambling: How Much Do You Want to Bet That You Have A Problem???

*"Sports wagering is a double-threat because it harms the well-being of student-athletes and the integrity of college sports."*

--NCAA President Myles Brand

Data from the NCAA's 2003 National Study on Collegiate Sports Wagering and Associated Health Risks showed that almost 35% of male student-athletes and 10% of female student-athletes engaged in some sort of sports wagering in the prior year. The study also showed that student-athletes with gambling problems are more likely to smoke cigarettes, use smokeless tobacco products, engage in binge drinking behavior, have multiple sex partners, and engage in unsafe sex.

7.1% of male student-athletes either bet with a bouquet or through the use of a parlay card (study done by University of Michigan Department of Athletics). The study also showed that over 5% of male student-athletes have wagered money on a game in which they participated, provided inside information for gaming purposes, or "fixed" a game in which they participated.

### Signs of Problems with Gambling

- A preoccupation with gambling (e.g., preoccupied with reliving past gambling experiences, planning the next venture, or thinking of ways to get money with which to gamble).
- Needs to gamble with increasing amounts of money in order to achieve the desired excitement.
- Has repeated unsuccessful efforts to control, cut back, or stop gambling.
- Is restless or irritable when attempting to cut down or stop gambling.
- Gambles as a way of escaping from problems or relieving a bad mood (e.g., feelings of helplessness, guilt, anxiety, and depression).
- After losing money through gambling,

often makes another bet in order to break even ("chasing" one's losses).

- Lies to family members, therapist, or others to conceal the extent of involvement with gambling.
- Has committed illegal acts, such as forgery, fraud, theft, or embezzlement in order to finance gambling.
- Has jeopardized or lost a significant relationship, job, or educational/career opportunity because of gambling.
- Has relied on others to provide money to relieve a desperate financial situation caused by gambling.

(APA: Diagnostic and Statistical Manual of Mental Disorders, Fourth Edition)

### 12 Rules of Responsible Gambling

1. The best way to avoid a problem is NOT TO GAMBLE.
2. If you do gamble, DO NOT GAMBLE ON YOUR OWN SPORT.
3. Also, if you choose to gamble, do so for entertainment purposes only.
4. Treat a money loss as the cost of your entertainment.
5. Set a dollar limit and stick to it.
6. Set a time limit and stick to it.
7. Expect to lose.
8. Make a private rule not to gamble on credit.
9. Create balance in your life (gambling should not interfere with or substitute for work, other worthwhile activities, relationships with friends, or family).
10. Avoid trying to recoup lost money.
11. Don't gamble as a way to cope with emotional or physical pain.
12. Become educated about the warning signs of a gambling problem.

## Campus, Internet, and Other Resources

### **Vanderbilt Psychological and Counseling Center**

615-322-2571

Baker Bldg.

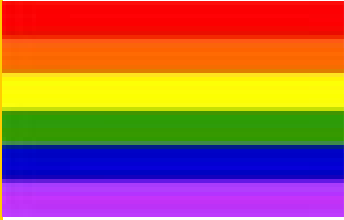
<http://www.vanderbilt.edu/pcc/>

### **Gamblers Anonymous**

615- 254-6454



# Gay, Lesbian, Bisexual, Transgender, and Questioning (GLBTQ) Issues



Sexual orientation generally refers to one's innate sexual attractions/feelings towards women and/or men.

While most individuals describe themselves as heterosexual, many identify their sexual orientation as being gay, lesbian, bisexual, transgendered, or questioning (GLBTQ). Gay and lesbian individuals are people with sexual, affectionate, and romantic feelings for individuals of the same sex, while people who identify as bisexual often have sexual, affectionate, or romantic feelings for both men and women. Transgendered refers to gender identity (rather than sexual orientation) and can be defined as persons whose internal gender identity differs from their external sex organs. "Questioning" refers to individuals exploring their sexual identity and who may be unsure of how to describe their sexual orientation. GLBTQ individuals are often grouped together as sexual minorities. However, it is important to recognize that people who identify as gay, lesbian, or bisexual face different issues than individuals who define themselves as transgendered.

GLBTQ issues are often controversial topics, provoking deep feelings and strong reactions on both sides of the issue. However, much like any minority group, GLBTQ people have been the victims of stereotyping and bias. For example, many hold the assumption that gay men are sexual predators and will sexually exploit male children if given the opportunity. This is a widely held belief despite evidence that most men arrested for the sexual abuse of a child are married and consider themselves heterosexual. Nonetheless, many GLBTQ people face rejection from their families after "coming out" (the process of disclosing their sexual orientation to others) and often risk losing their jobs or facing physical violence due to sexual orientation.

## GLBTQ Issues and Student-Athletes

Stereotypes regarding sexual orientation extend to the world of sports as well. For example, two common beliefs are that gay men are not athletic and do not succeed in college or professional sports and that lesbians are disproportionately represented in college athletics. Male student-athletes who identify as gay or bisexual may feel invisible in the world of college athletics, while female athletes may face the assumption that they are lesbian. Regardless of one's sexual orientation, student-athletes may find themselves confused about sexual identity issues and unaware of available resources to address these concerns.

## Assistance in Dealing with GLBTQ Issues

Counseling can serve as a valuable tool for individuals struggling with their sexual identity, as well as for heterosexuals who seek clarification about GLBTQ issues. Counseling offers an accepting, non-judgmental, confidential, and safe space to talk about personal concerns regarding GLBTQ issues. For example, counseling can provide much needed support for GLBTQ individuals who are coming out to their families. Counseling can also assist GLBTQ individuals with self-acceptance, and other related psychological issues such as depression or anxiety.

In addition, many large cities, including Nashville, have an extensive and active network of GLBTQ resources. Many of these resources are social, spiritual, and supportive, while others are more political and advocacy-based. For example, in the city of Nashville there are GLBTQ religious groups, amateur sports teams, support groups, AIDS advocacy organizations, and performing arts groups. Please see the resource section below for more information.



The following is a list of on-campus, Nashville, and Internet resources for more information or support. While this list is comprehensive, it is by no means complete:

### Campus, Internet, and Other Resources

#### Psychological and Counseling Center

Baker Bldg.

(615) 322-2571

[www.vanderbilt.edu/pcc](http://www.vanderbilt.edu/pcc)

This on-campus resource provides confidential individual and group counseling services.

GLBTQ-themed groups are also an option for students seeking a specific focus on these issues.

#### Office of GLBT Life

Annex of the Community Partnership House

(615) 322-3330

[www.vanderbilt.edu/glbtlife](http://www.vanderbilt.edu/glbtlife)

The purpose of the Office of GLBT Life is to provide the Vanderbilt community with education about GLBTQ issues, as well as support for those who identify as GLBTQ. The office holds an extensive library of books and films about the GLBTQ experience and can serve as an excellent research tool for those interested in more information.

#### Vanderbilt Lambda Association

322-0376

<http://www.vanderbilt.edu/lambda/>

#### Graduate and professional GLBT group

<http://www.vanderbilt.edu/gplbga/menupage.htm>

#### Stepping Out Group

<http://www.vanderbilt.edu/glbtlife/>

#### GABLE -- The Office of Lesbian, Gay, and Bisexual Concerns Divinity School

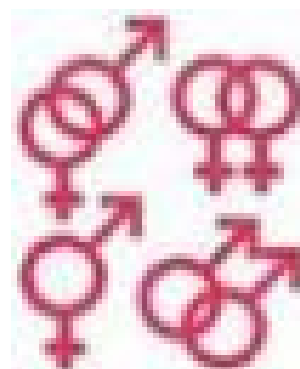
<http://divinity.lib.vanderbilt.edu/div/studentlife/gable.html>

#### The Counseling Village

<http://ccvillage.buffalo.edu>

This site is an extensive Internet resource with numerous virtual pamphlets that focus on GLBTQ-specific issues, such as coming-out, relationships, and safe sex.

National Consortium of LGBT Resources in Higher Education <http://www.lgbtcampus.org/>  
This website serves as an informational resource allowing the visitors to explore the climate of college campuses for GLBTQ students.



# Gender Issues in Sports

When hanging out with friends, how many times have you heard them talking about Tom Brady? Shaquille O’Neal? How about compared to conversation you hear about Annika Sorenstam? Lisa Leslie? Who knew much about Brandi Chastain before she graced the cover of *Sports Illustrated* sans shirt? And how many people knew—before the *SI* cover—that the Women’s National Soccer Team had been winning world championships for almost a decade?

According to the National Women’s Law Center, even though women comprise 50% of college students, women only make up 42% of college varsity athletes. In addition, women in Divisions I and II obtained approximately \$133 million less in scholarships than their male counterparts. In 2000, for every dollar spent on women’s athletics, roughly two dollars were spent on men’s Division I sports.

Women in college athletics have long been held back by myths about the talents and limitations of their sex. Support for women’s sports had been limited for years due to the belief that women were too “frail” to participate in sports and that only men could meet strenuous athletic demands. In addition, some women may have found their athletics careers limited by erroneous beliefs that women have needs for lighter training than men.

Despite a history of limited opportunities, college athletics appears to be improving for women. For example, the number of athletic scholarships available to



women has increased in recent years and professional sports teams for women have slowly been

building a large following among the public. It is likely that opportunities for women in athletics will continue to grow and evolve. Of course, you are in a perfect position to help advocate for such changes.



## Gender Issues and Women Student-Athletes

Despite improving conditions for women in sports, some women involved in a college athletic program may face issues similar to the ones described above—if even on a subtler level. For example, some female athletes may feel that their sport holds a second-class distinction when compared to popular men’s sports, such as football and baseball. Many women in college athletics may feel marginalized by the assumptions that women are not as strong as men and must be handled delicately. Some women may be frustrated by limited funding or limited access to scholarships. Any of these, or similar, experiences may lead to feelings of anger, frustration, and discouragement for female athletes and their supporters.

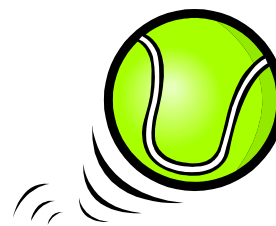
Athletes struggling with these concerns have options to address their worries. Seeking support is one of the most effective ways to do so. Athletes can seek support from friends, family, coaches, trainers, other athletes, and fellow students. Counseling is another effective way to learn to manage any feelings of frustration, disappointment, or anxiety associated with the above issues or any other issue. Other action-oriented approaches include getting involved in advocacy work or coaching youth (in your spare time!).

*(Continued on page 27)*

### What Does the Research Say About Gender Differences in Sport? Not a Whole Lot...

While gender disparity in opportunity for sports participation is declining, there may be some differences in behavior on men's and women's teams that are worthy of attention—particularly, when trying to understand problematic team dynamics. However, research on the influence of gender in sport is limited. A study conducted by Tuffy (1996) offered some areas for consideration.

The study involved interviewing 14 college coaches who had successfully coached both men and women athletes. These coaches described differences they observed in their interactions with athletes of each sex. Coaches believed that women required more supportive communications, while men seemed to prefer hearing things in a direct fashion. They also believed that women desired stronger relationships with their coaches than did men. They generally agreed that women seemed to want more from coaches than just “technical” advice.



Of course it is dangerous to accept these findings as broad generalizations. However, what the results do suggest is that teammates and coaches should be aware that there are individual differences in preferred communication and relationship styles. *The best advice at this point is to “check out” with others, how they prefer to hear feedback and respect these differences. You can also take control over ensuring you get helpful feedback from others by communicating your needs to others.*

### Campus, Internet, and Other Resources

#### Vanderbilt Psychological and Counseling Center

615-322-2571

Baker Bldg.

<http://www.vanderbilt.edu/pcc/>

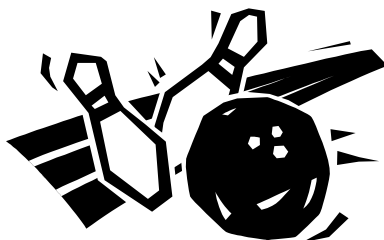
#### Margaret Cuninggim Women's Center

615-331-1200

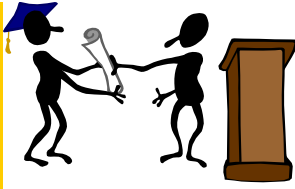
419 Welshwood Dr.

<http://www.vanderbilt.edu/WomensCenter/women.html>

Tuffy, S.L. (1995). *Coaching Athletes: Does (Should) gender make a difference?* Unpublished Manuscript.



# Graduating From College



The process of deciding on a major and choosing a career path can be a difficult one for any college student, and college student-athletes are no exception. In many ways, career preparation for student-athletes is no different than for non-athletes. Employers and graduate schools judge based on the same criteria: academic courses, grades, extra-curricular activities, work and volunteer experience, written and verbal communication skills, computer and foreign language skills, evidence of leadership, initiation and dedication.

Some possible myths about the Vanderbilt athlete are that intense time constraints, and NCAA prohibitions against scholarship students working for pay, mean that many student-athletes will not have as much work-related or community service experience as non-athletes. A fear of many student-athletes is that they will not look as qualified or appear as marketable “on paper.”

However, it is arguable that our student-athletes may amass an even greater number of community service hours than the average college student. VU athletes have frequent opportunities to participate in a variety of speaking engagements, campus service projects, and community service projects. Furthermore, employers and graduate school admissions committees are often struck by the amazing accomplishments of our student-athletes. Be proud of your demonstrated skill in handling a lot of extra responsibilities in addition to completing degree requirements.

Like many college students, it can be a challenge for the student-athlete to filter through interests and skills to identify a satisfying career direction. Please know, there are campus resources (the PCC and the Career Center) available to help you take on the challenge of highlighting skills acquired through sport and other areas on a resume. These resources can help you market yourself very effectively.

## Career Decision-Making

Career decisions are some of the most important choices anyone has to make. Because you likely will be devoting a good portion of the week to work, you want the work to be rewarding. Many people find it daunting to choose from among the career possibilities that seem appealing. When you are uncertain, professional career assessment and counseling can help you decide which types of work will best match your interests and values.

At the VU Psychological and Counseling Center, you begin by meeting with a qualified counselor for an in-depth interview that covers numerous career-relevant areas. You will complete some tests that highlight your personality traits and your occupational interests. Your counselor will incorporate the comprehensive data from the interview and the assessment instruments and meet with you to review all the results. You will learn which types of work settings best match your style, which personality traits work in your favor in your career quest (and which may hinder you), and how you compare with people in many different fields who are satisfied with their work.

The VU Career Center is another excellent resource. By providing information and related services, the Career Center fosters the planning and implementation of career goals and builds relationships between the University community and employers for the benefit of students and alumni.

## Campus, Internet, and Other Resources

**Vanderbilt Psychological and Counseling Center**  
615-322-2571

Baker Bldg.

<http://www.vanderbilt.edu/pcc/>

**Vanderbilt Career Center**

615-322-2750

Student Life Building

<http://www.vanderbilt.edu/career/>

Petitpas et al. (1997). **Athlete's Guide to Career Planning**. Human Kinetics. Champaign, IL.

# Grief and Loss

Grief is a natural reaction to a significant loss, whether it is expected or unexpected. It occurs in response to different types of loss including death, the end of a significant relationship, a terminal illness in a loved one, the loss of something important (such as financial security, the ability to continue competing in your sport, or a championship game), or a negative change in your own health/physical abilities. Individuals grieve in a variety of ways.

The goal of grieving is to learn to live with loss, which is an inevitable part of life. Expression of grief is not a sign of weakness and there is no time limit on the grieving process. We must recognize that grief is a healthy and fitting response to the loss of someone or something that has been significant in our lives. Also, letting out feelings can help us experience some relief from our emotional pain.

## The Impact of Grief on Student-Athletes

The pressures on student-athletes as campus leaders and role models can make the already tough grieving process even more difficult to navigate. That is, as an athlete, you may not be allowed the privacy you desire in coping with loss. Too often, you are in the spotlight. You might feel a need to “hold it together” while answering the many questions directed toward you at critical times.

## Feelings Associated with Grief

- Shock, denial, numbness, and disbelief.
- Confusion and disorganization.
- Anxiety, panic, and fear.
- Anger, resentment, jealousy, and blame.
- Guilt, remorse, regret, and sadness.
- Feeling lonely or like “nobody understands.”
- Physiological changes including difficulty sleeping, loss of appetite, and low energy.

## Things to Avoid when Grieving

- Ignoring your emotions.
- Engaging in physical activity to the point of exhaustion.
- Using drugs/alcohol to self-medicate.
- Acting resentful to those who try to help.
- Isolating yourself from friends/loved ones.
- Keeping yourself from engaging in enjoyable activities.

## Ways to Cope with Grief/Loss

- Discuss your feelings honestly and openly with friends/family.
- Maintain hope.
- If you are religious or spiritual, talk to a member of your religious/spiritual group about your beliefs and feelings.
- Join a support group.
- Take good care of yourself. Eat nutritious foods and get plenty of rest.
- Be patient with yourself. Some days will be easier than others.
- Exercise.
- Seek counseling.
- Be social. Spend time with people you care about.
- Take time to relax.

## Campus, Internet, and Other Resources

### Vanderbilt Psychological and Counseling Center

615-322-2571

Baker Bldg.

<http://www.vanderbilt.edu/pcc/>

### University Chaplain

615-322-2457

2417 West End Avenue

<http://www.vanderbilt.edu/religiouslife/>

# Handling the Media

Do you remember in December of 1997 when, Latrell Sprewell, guard for the Golden State Warriors, choked his basketball coach, P.J. Carlesimo? How about the all-out-free-for-all brawl that took place between the Indiana Pacers and the Detroit Pistons on November 19, 2004? These and other incidents have received vast amounts of media coverage. It seems whenever members of those teams are mentioned, so are the mistakes. Unfortunately, any positive aspects of those individuals' abilities are neutralized by unanticipated and unwelcomed media attention. However, all media interactions do not have to be negative experiences for athletes. As college athletes, not only are you learning to hone your craft and abilities, but you are also learning about how to manage your personal lives, the public and the media. You prepare your mind and body to win on the field. Preparing yourself to manage the media can also help you have a more positive experience on and off the field. Of course, if you are asked by the media to respond to a question, you can always provide them the name of a designated spokesman, provided your team has one. However, you may still be asked to comment on something that could end up in the news.

Here are some things you can expect from the media:

- They look for the story angle affecting the largest number of people.
- They may give a sensationalized report.
- They probe at a bad time.
- They offer fast, widespread coverage.
- They will engage in speculation.
- They will approach interviewees who do not know facts.
- They display dogged determination to get a story, no matter what.

When being interviewed, here are some essentials of effectively communicating your message through the media:

- Be alert and positive.
- Keep calm. Don't let reporters start an argument with you. Look and sound calm and controlled. It's important.
- Look the interviewer in the eye.
- Be cooperative, however, know what you should and should not say.
- Make your point in 20 seconds or less. Talk in complete sentences.

Here are some media pitfalls to avoid:

- Never say, "No comment." Say why you cannot give them the information.
- Do not let a reporter put words in your mouth; correct misstatements before you answer any questions.
- Do not say anything you do not want reported. There is no such thing as "off the record."
- Do not give unnecessary information that may be detrimental. Answer only the questions you are asked.
- Do not speculate or talk about anything outside your area of expertise or known facts. It's ok to say, "I do not know."
- Avoid answering "what if" questions. Instead, respond with something such as, "I would not want to speculate on that, however..." and state your positive message.
- Do not fill in silent pauses. Silence is a tactic sometimes used to get you to say something you do not mean to say in order to break the silence. Say what you have to say and stop!
- Do not keep talking as you are walking away. Stop talking before you walk so that your message is clearly communicated.

*(Continued on page 31)*

It is important to remember your image is your legacy. Of course, fans will remember what you did on the field, court, course, etc., but how you handle yourself personally breeds respect or disrespect. Keep your cool and maintain your focus when interacting with the media. If you are concerned that you came across to someone from the media in a negative way, or if you want advice about a media related question, ask your coach.

### Campus, Internet, and Other Resources

#### Individuals who are in charge of Vanderbilt media relations are:

Rod Williamson, Director of Sports Information  
Tammy Bocclair, Assistant, Media Relations  
Larry Leathers, Assistant, Media Relations  
Kerwin Lonzo, Assistant, Media Relations  
Skip Anderson, Editor, Commodore Nation  
Chris Weinman, Online Services Coordinator  
Garrett Gregory, Media Assistant



# Handling Winning and Losing in Sport

## Defining Success

William and Ed collapse to their knees following three of the most grueling sets they have ever played in their entire doubles' career. Excitement floods through their bodies as they see their coaches and teammates running towards them pointing their fingers in the air, yelling "Number One!" Amidst this celebration and between labored gasps for air, the two athletes manage to get through an interview with a sports writer for their college newspaper. They are asked, "How does it feel to have been so successful out here today?" William responds, "This is one of the most incredible days of my life! I've always dreamed about winning a championship like this and now it has finally happened." Ed answers, "Sure winning the championship is great, but I am more excited about the way we came together as a team. Our communication was solid and nothing could break our flow. This is such an incredible feeling!"

Such varied responses to the same event could suggest that both athletes hold different definitions of success. William equates success with winning the championship—that is, he focuses on the *outcome*. Ed, however, gauges success according to how the pair carried out the *processes* of communicating, concentrating, and gelling as a team.

You might be saying to yourself, "Who cares how they define success. They're both happy." This is true in the case described above. But, imagine the different scenario had the duo lost the match. William's focus on outcome would have led him to feel that he failed despite all of his accomplishments during the match. Ed, on the other hand, would have felt like a champion regardless of a win or loss. It is easy to imagine that Ed would be better equipped to rally from the inevitable losses that occur when facing other top-notch athletes.

Not surprisingly, most college athletes actually hold both process and outcome oriented definitions of success. However, it is easy to lose sight of process-related achievements when there are so

many rewards for being the best. There is incredible pressure to beat opponents. There are even demands to outperform teammates when competing for starting roles. A desire to win is healthy; however, when winning becomes too strong a motivator, losses can feel crushing. Moreover, there are so many factors over which you have little or no control that determine whether you win – skill level of the competition, a referee's call, the wind, and an awkward bounce of the ball are a few examples. It is easiest to sustain motivation when you focus on the things you can control like effort, technical skills, and communication. Furthermore, when you measure your success according to controllable factors, you will probably find that your self-confidence improves and your performance anxiety decreases.

## Tips for Finding Personal Success Regardless of Whether You Win or Lose

- Examine your goal-setting strategies. Make sure that the goals you set out to achieve center on controllable factors. Remember that there are many things you can do to increase the chances of a win, but ultimately whether you win is not solely based on your performance.
- Monitor your motivation. When it drops, ask yourself whether you are focusing too much on how you stack up against others. Determine whether you are giving yourself enough credit for your achievements.
- Take notice of those who have the most influence on you – coaches, trainers, teammates, family, friends, and counselors. See if anyone help you in your quest to pay more attention to controllable factors and less attention to outcome.
- Work with a counselor who can assist you in developing greater awareness of the factors that influence you and help you in devising strategies to maximize self-confidence and motivation.

(Continued on page 33)



## Campus, Internet, and Other Resources

Talk to **coaches and trainers** who can also help you access other helpful resources.

### Vanderbilt Psychological and Counseling Center

615-322-2571

Baker Bldg.

<http://www.vanderbilt.edu/pcc/>



## Helping a Friend or Family Member in Distress

Most of us have friends or family members who experience a variety of struggles ranging from substance use, to eating concerns, to depression or trauma. You may not only suffer strain in those relationships, but you might also have heightened levels of stress, anxiety and worry for your loved ones. You may find yourself preoccupied and distracted by these concerns during practice, class, or at night when you wish you were sleeping. You may also have taken on extra responsibilities in order to help keep this person safe. It might feel overwhelming and confusing as you try to figure out what to do.

Should you decide to approach your friend or family member for a discussion about the problem, there are several things to keep in mind:

- Choose a private, comfortable location and a time when neither of you will feel rushed.
- Before you meet, have resource information gathered. You may also choose to offer to accompany your friend or family member as they access these resources. For example, you could offer to walk with your friend to the counseling center.
- Share your concerns in a caring, non-judgmental, direct manner, focusing on what you have observed. State your observations using “I statements” instead of “you statements.” For example, you might say, “I feel concerned because I have noticed how much weight you have lost over the past semester,” instead of, “You’re not eating enough, you’re way too thin and everyone thinks you have an eating disorder.”
- Make a decision to stay calm and listen to what the person has to say, even if you do not agree with him or her.
- Understand that while the person may be receptive to your concerns and interested in seeking help, he or she may also deny the problem, become angry or refuse

help. Remind yourself that you are not responsible for his or her choices.

\*\*\*Note: If your friend or family member is reporting thoughts of suicide, do not promise to keep this a secret; let this person know that neither of you can deal with this alone and will need additional resources. Should you have reason to believe that your friend or family member is in immediate danger, take this seriously and get help right away.

### Campus, Internet, and Other Resources

#### Where to call in an emergency

- From on-campus: 1-911
- From off-campus: 911
- Vanderbilt University Police Department: 322-2745
- Nashville Crisis Line: 244-7444
- Take someone directly to the Vanderbilt Emergency Room

Talk with your **RA or AD** about your concerns and/or possible resources

#### Vanderbilt University Psychological & Counseling Center

Baker Building, 322-2571

<http://www.vanderbilt.edu/pcc/>

Confidential counseling services at no extra cost to students. Consultations are also available.

Anonymous online self-exploration questionnaires and resources for a wide variety of concerns at <http://www.vanderbilt.edu/pcc/screenings/index.html>.

*(Continued on page 35)*

**Vanderbilt University Student Health Center**

Zerfoss Building

322-2427

[http://www.vanderbilt.edu/student\\_health/](http://www.vanderbilt.edu/student_health/)

In addition to general medical services, the center offers alcohol and other drug counseling, psychiatry services and short-term therapy.

**Vanderbilt University Chaplain**

2417 West End Avenue

322-2457

<http://www.vanderbilt.edu/religiouslife/>

Staff of chaplains from a variety of faiths. Counseling services available.

**Al-Anon Family Services of Middle Tennessee**

385-4404

**Alcoholics Anonymous (A.A.)**

831-1050

**Cocaine Anonymous**

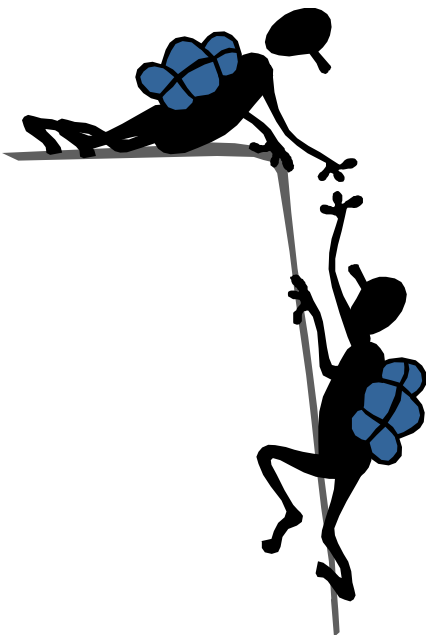
747-5483

**Gambler's Anonymous**

254-6454

**Narcotics Anonymous**

251-7462



**National Alliance for the Mentally Ill (NAMI)**

[www.nami.org](http://www.nami.org)

NAMI is a nonprofit, grassroots, self-help, support and advocacy organization of consumers, families, and friends of people with severe mental illnesses, such as schizophrenia, schizoaffective disorder, bipolar disorder, major depressive disorder, obsessive-compulsive disorder, panic and other severe anxiety disorders, autism and pervasive developmental disorders, attention deficit/hyperactivity disorder, and other severe and persistent mental illnesses that affect the brain.

# Home for the Holidays

## Holidays can be wonderful – but also stressful!

- Be realistic – no holiday is perfect. Fewer expectations mean fewer disappointments
- Exercise regularly – it’s a great stress reliever and will keep you in shape
- Enjoy all the wonderful holiday treats – but make smart choices. Eat Moderately
- You’ve been living on your own for awhile now – before you head home have a conversation with your parents about your needs and their expectations.
- You probably can’t wait to see your old friends – but your family can’t wait to see you too! Tell your family your plans – Negotiate differences.
- Take time for yourself. Go for a walk, swim, or take a bike ride.

## Enjoy the Holidays without putting on the weight!

- Continue with workouts to help burn calories.
- Drink water during the day (and one big glass before you eat to help decrease your appetite).
- Take smaller portions of food and eat slower.
- Have a small snack several hours before a big meal to help curb your appetite.
- Take a break after the meal and then eat dessert later.
- Remember alcohol has calories (and it can affect memory – keep track of all the calories you are consuming.

## Finances for the Holiday!

- Shop Around: The time to start shopping is now. Allow yourself enough time to shop to avoid impulse paying. When selection gifts for your family it pays to hunt for sales.
- Credit Cards: It is tempting to just say

“charge it” but remember, the interest charged to your unpaid balance is expensive, and is often easy to run up a substantial unpaid balance in a short period of time. Nothing ruins the Holidays like expensive credit card charges.

- Cash and ATM’s: Cash is the best way to go! You can’t spend the cash you don’t have! Debit cards are the same as cash without the repercussions of credit. Debit cards will allow you what your account can handle.
- Keeping Records: Keep all of your credit and cash receipts. You never know if you may have to return a particular purchase or you may have to dispute an item you did not purchase.
- Have a budget: Everyone has a different set of shopping needs and circumstances relative to the funding of their needs, during the Holiday Season. Regardless of how many you have to purchase for, the best way to prepare is by developing a budget. Stay within your means!

## Campus, Internet, and Other Resources

For Nutritional information see:  
**Molly Fruin, M.S., R.D., L.D.N.**  
 Clinical Dietitian  
 Vanderbilt University Medical Center  
 607 Medical Arts Building  
 615-936-3952

Molly also has office hours at McGugin

**CHAMPS/Life Skills Program**  
[www.vanderbilt.edu/champs](http://www.vanderbilt.edu/champs)

**Vanderbilt Psychological and Counseling Center**  
 615-322-2571  
 Baker Bldg.  
<http://www.vanderbilt.edu/pcc/>

# Homesickness

Be aware that experiencing homesickness can be a very natural part of the transition to college. This is a time of major adjustment when you may be experiencing different living environments, activities, coursework and even sleeping and eating patterns. Your proximity to friends and family, former coaches and teammates may also have changed considerably. Other factors can be how far you are from home, whether you wanted to come to Vanderbilt, and what expectations there are for your academic and athletic performance. You're leaving people, places and things behind and also introducing the possibility of many new relationships and experiences. Many of these changes can be welcome, exciting and greatly anticipated. At the same time, these changes can also be scary and unsettling.

While not everyone experiences homesickness, many students experience homesickness for the first few days, weeks or months that they are away. Others find that they do not experience homesickness at all until after the first trip home or a semester break, for example. For many, this kind of homesickness subsides as you become more involved and engaged at school, and some of the tips below can help. For some, the homesickness continues and may even worsen to include more long-lasting sadness or depression, anxiety, sleep difficulties, apathy, academic problems, substance use or an intense level of contact with people at home. If you find this to be the case, resources such as the Psychological & Counseling Center might be useful.

## Tips for dealing with homesickness

- It can be important to acknowledge the feeling of homesickness as part of your transition and allow yourself to experience it. You might find that keeping a journal during this time allows you to express some of what you are feeling.
- Having familiar items, such as photographs or a favorite pillow, may also help you feel connected to home. Staying in

contact with loved ones via phone calls, snail mail or e-mail can also help.

- Recognize that other new students may be homesick as well and create opportunities to talk with your peers about their experiences. It may also help to talk with other people you know who have been away from home to hear about their experiences and find out what helped them.
- Allow yourself time to get to know the Vanderbilt campus and the Nashville community, and invite other students to do some of the exploring with you.
- Investigate activities that might be of interest (for example, web sites below include a listing of over 300 student organizations on the Vanderbilt campus and a wide variety of community volunteer opportunities).
- If possible, schedule a visit home or with loved ones during the first semester.
- Take some time to reflect on what kinds of leisure activities you enjoy and what you find relaxing.
- Be sure to take care of yourself by eating well and getting enough sleep.
- Some people do discover that Vanderbilt is the wrong choice for them. If you are seriously considering leaving, talking to an academic advisor, dean and/or someone at the Psychological and Counseling Center could be useful.

## Campus, Internet, and Other Resources

### Vanderbilt University Psychological & Counseling Center

Confidential counseling services available to students free of charge. Time management, reading and study skills services also available.

615-322-2571

Baker Bldg.

<http://www.vanderbilt.edu/pcc/>

**Vanderbilt University Campus Map—Find Your Way Around!**

<http://www.vanderbilt.edu/map/map.cgi?mode=1>

**Vanderbilt University Student Organizations.**

Consider participating in any of the more than 300 student organizations on campus or starting something new.

<http://www.vanderbilt.edu/studentorganizations/>

**Vanderbilt University Office of Active Citizenship and Service**

Find information on volunteer opportunities. Vehicle loan service available for volunteering.

615-343-7878

<http://www.vanderbilt.edu/oacs/oacsstart.html>

**Vanderbilt University Calendar**

Comprehensive calendar of Vanderbilt and Nashville events.

<http://calendar.vanderbilt.edu/>

**The Margaret Cuninggim Women's Center**

Offers a variety of groups, including a book club and a creative writing group.

322-4843

<http://www.vanderbilt.edu/WomensCenter/getconnected.html>

**Vanderbilt University International Student and Scholar Services (ISSS)**

ISSS provides advice, counseling, and advocacy regarding immigration, cross-cultural, and personal matters. Also offers educational, social and cross-cultural programs.

322-2753

<http://www.vanderbilt.edu/iss/>

**Office of the University Chaplain**

A staff of chaplains from a variety of faiths provide services including worship opportunities, counseling, retreats, and fellowship.

615-322-2457

<http://www.vanderbilt.edu/religiouslife/>

**Vanderbilt University's Wellness Resource Center**

Services, programs, and resources in a variety of areas, including nutrition.

615-343-6073

<http://www.vanderbilt.edu/wellnesscenter/>

**Vanderbilt University Student Recreation Center**

A place to work out, learn about wellness, or relax.

615-343.6627

<http://www.vanderbilt.edu/CampusRecreation/index.html>

**Vanderbilt University Commodores**

Consider attending a game as a fan instead of a player!

<http://www.vucommodores.com/>

**Black Cultural Center**

615-322-2524

<http://www.vanderbilt.edu/bcc/>

**Schulman Center for Jewish Life**

2421 Vanderbilt Place

615-343-1953

<http://www.vanderbilt.edu/hillel/>

**CHAMPS/Life Skills Program**

[www.vanderbilt.edu/champs](http://www.vanderbilt.edu/champs)

# Learning Disorders

Many Vanderbilt students sailed through middle school and high school with ease. But college may be another experience entirely, and many students wonder if they may have a learning disorder. A Learning Disorder is when someone does not perform as well as expected in reading, math or written expression and the poor performance is not explained by or accounted for by lack of effort, sensory issues (i.e., poor eyesight or hearing), physical disabilities, emotional or other psychological issues, or lack of education or training. Signs that you may have a Learning Disorder may be:

## Reading

- Slow reading rate.
- Poor comprehension and retention.
- Difficulty identifying important points and themes.
- Poor mastery of phonics, confusing similar words, and/or hard time learning new words.

## Written Language Skills

- Difficulty with sentence structure.
- Frequent spelling errors.
- Inability to copy correctly from a book or blackboard.
- Slow writer.
- Poor penmanship.

## Mathematical Skills

- Incomplete mastery of basic facts (multiplication, addition, subtraction, etc...)
- Reversal of numbers (e.g., 123 to 321 or 231).
- Confuses operation symbols, especially + and x.
- Copies problems incorrectly from one line to another.
- Difficulty recalling the sequence of operations.
- Difficulty comprehending word problems.
- Reasoning Deficits.
- Inability to understand and retain abstract concepts.

If you have a documented Learning Disorder, you can register with the Opportunity Development Center on campus. They can help you receive appropriate accommodations in your classes that will help you perform to the best of your abilities. Accommodations can include such things as books on tape, extended time on tests, the use of an electronic speller, a note-taker, preferential seating, etc.

A documented learning disorder means that you have to have a psychoeducational assessment to determine whether a learning disorder exists. This assessment always consists of an interview exploring your personal and educational background, testing of your ability or IQ, and an examination of your academic ability. The evaluation should also generally assess your psychological and emotional functioning to rule out other causes for academic difficulties.

Accommodations are what others can do for the person with a Learning Disorder; Compensatory Strategies are what people can do for themselves. Compensatory Strategies can include using books on tape, re-writing notes, learning memory skills, learning study strategies, time management, etc.

## Campus, Internet, and Other Resources

If you suspect that you have an LD, you should discuss this with your Academic Advisor.

### Vanderbilt Psychological and Counseling Center

You can contact the Psychological and Counseling Center (PCC), which provides assessment, psychological and educational improvement services. An educational specialist can help you learn compensatory strategies.

615-322-2571

Baker Bldg.

<http://www.vanderbilt.edu/pcc/>

# Learning Disorders

**Opportunity Development Center (ODC)** at VU (V/TDD)), will help you acquire accommodations should you have a documented leaning disorder.

615-322-4705

Baker Bldg

<http://www.vanderbilt.edu/odc/>

***Becoming A Master Student***, by Dave Ellis. **This is a great book about compensatory skills.**



# Managing Emotion

## Anger

Is your roommate driving you up the wall? Are your teammates always asking for help but nowhere in sight when it's your turn? While anger is an appropriate response to certain situations, managing anger and expressing it productively can be difficult under the best of circumstances. Unresolved anger can contribute to depression, a higher incidence of accidents, broken relationships, and heart attacks and strokes in later life.

### So how do we manage anger? Consider these options:

- Expressions of anger do not have to be hostile or hurtful. Spend some time thinking about what you want to achieve by expressing your anger.
- There is evidence that there may be a genetic predisposition to anger. If you are prone to anger, rehearse appropriate and healthy responses that will ultimately achieve your end goal.
- Consider how much your anger is learned. Who did you learn it from? In what situations might it have worked in the past, but not in the present?
- Taking care of yourself can help you deal with anger. Eating nutritionally as well as getting appropriate exercise and enough sleep can allow you to consider a wider range of choices in how to express or resolve your anger.
- While drugs or alcohol may seem like a good way to forget your anger, the likelihood is that you may act without thinking, with consequences to you and others.
- Ultimately, you are responsible for the way you express and resolve your anger. Situations make you angry, not other people; blaming others rarely helps resolve anger.
- Remember, we feel anger, it is not who we are. When you can observe your feelings without identifying with them,

you recognize that you are bigger than the emotion.

- Anger can sometimes be a smokescreen behind which lie other emotions like fear, frustration, or sadness. Pay attention to the whole range of emotion that is actually present.

It can be helpful to talk with a counselor about your anger, both to learn new ways of dealing with it, and to gain insight into the underlying causes. Sometimes anti-depressant medication or a mood stabilizer can be helpful as a tool in learning to manage anger. Talk to a physician or counselor about this option if you feel it might be helpful for you.

## Anxiety and Stress

Students today, especially the student-athlete, are under tremendous pressure to perform well. It's very important to think preventatively, to eat properly, to get enough sleep, and to form meaningful connections with other people. When life throws us a curve, however, stress can mount. This calls for some form of relaxation, to counter the physiological effects of stress. One of the most important physical functions affected by stress is breathing. Techniques to bring our breathing back into line not only counter the physiological effects of stress—shallow breathing, over-oxygenation, and the build up of stress hormones in the body—but also address the psychological symptoms of worry, anxiety and depression.

### • Relaxed Breathing

- Lie down on a rug or blanket on the floor with your legs straight and slightly apart, your toes pointed and comfortably outwards, arms at your sides not touching your body, your palms up, and your eyes closed.

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- Inhale through your nose. Breathe deeply; you should feel your chest and your abdomen rise. As you exhale through your mouth, the abdomen comes back in. Continue this process comfortably and smoothly. Hear the sound and feel the texture of breathing as you become more relaxed.
- When you first begin this exercise, do it for about five minutes, gradually working up to 20 minutes.
- When ending a session, stay still for a few minutes and try to keep the entire body relaxed.

- **The Relaxed Sigh.** Sighing or yawning during the day are signs that you're not getting enough oxygen. A sigh releases tension and can be practiced as a means of relaxing.
  - Sit or stand up straight
  - Sigh deeply, letting out a sound of deep relief as the air rushes out of your lungs.
  - Let new air come in naturally.
  - Repeat this process eight to twelve times whenever you feel the need for it, and experience the feeling of relaxation.

- **Muscle Relaxation**
  - Tighten the muscle that you want to relax. Focus on and feel the tension where you have tightened.
  - Now let the muscle become loose and limp.
  - Put your mind into the muscle and imagine and experience the muscle becoming heavy, relaxed and warm.

Remember, anxiety is normal. We all need a certain amount of it to motivate us to act or decide. It becomes a negative experience when it interferes with our ability to carry out our daily tasks. There is rarely one simple, right answer to any problem. If you find yourself becoming anxious about a life problem, imagine for yourself how someone you respect might solve it. Sometimes you have to make a decision and act on it. This will reduce anxiety and free up energy for other things. Even if the outcome is uncertain, knowing you have taken action can be gratifying. And remember, there are counselors at the Psychological and Counseling Center with whom you can talk confidentially to help resolve difficult situations.

**Campus, Internet, and Other Resources**

**Vanderbilt Psychological and Counseling Center**  
 Baker Bldg.  
 615-322-2571  
<http://www.vanderbilt.edu/pcc/>

**Student Health**  
 615-322-2341  
 Zerfoss Bldg.  
[http://www.vanderbilt.edu/student\\_health/](http://www.vanderbilt.edu/student_health/)

**Student Recreation Center**  
 615-343-6627  
<http://www.vanderbilt.edu/CampusRecreation>

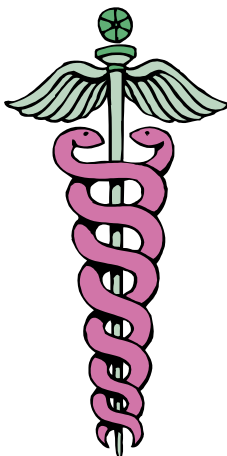
**Wellness Resource Center**  
 615-322-3414  
 Student Rec Center

<http://www.vanderbilt.edu/pcc/students.html>

<http://www.vanderbilt.edu/pcc/screenings/index.html>



# Men's Health Issues



Self-exams should be done monthly starting at the age of 15. The exam is best performed after a warm bath or shower; this allows the scrotum to relax, which makes it easier to detect abnormalities.

## To perform a self-exam, follow these steps

- Stand in front of a mirror and check for any swelling.
- Roll the testicle between the thumb and index and middle fingers, checking for lumps. The epididymis is the tube like structure found in the back of the testicle, which collects and carries sperm. This should not be mistaken for a lump.

## There are several warning signals, signs and symptoms for detecting testicular cancer

- Lump found on the testicle. Cancerous lumps are usually found on the side of the testicle but can be found on the front as well.
- Enlarged testicle (it is normal to have one slightly larger testicle).
- Significant loss of size in one of the testicles.
- A feeling of heaviness in the scrotum.
- Dull ache in the groin or lower stomach.
- Fluid collection in the scrotum.
- Pain or discomfort in the scrotum or testicle.
- Testicle enlargement or tenderness.
- Any abnormality in the scrotal region.

**Response Tools:** If any of the above signs and symptoms are detected, consult a physician (preferably a urologist) as soon as possible. Waiting to do so will only allow the cancer (if it is present) to spread rapidly.

## Campus, Internet, and Other Resources

For more information on testicular cancer and how to perform a testicular self exam, see your **student health center** or consult with your **trainer/team physician**. The above information was collected on [www.tcrc.acor.org](http://www.tcrc.acor.org).

## Student Health

615-322-2341

Zerfoss Bldg.

[http://www.vanderbilt.edu/student\\_health/](http://www.vanderbilt.edu/student_health/)

## Mental Performance Enhancement Skills for Sport



Sport success depends upon an athlete's ability to optimize competition strategy, motor skill, and physical conditioning. Yet, even competitors who excel in these areas may "choke" under pressure, fluctuate in motivation, and perform inconsistently. Mastery of the tactical, technical, and physical aspects of sport can only carry an athlete so far. It is the highly skilled competitor with a strong grasp on the psychological side of sport that will ultimately meet his/her true potential.

### Exercise

Take a moment to try this exercise. Draw a circle on a piece of paper. Now, divide that circle into segments that represent each element you believe contributes to your performance success. Jot down approximate percentages in each pie section. What percentage of those factors is psychological in nature? What percentage is physical?

Now write your answers to the following questions: How many hours per day do you devote to your sport? How many hours per day do you spend physically training? How many hours per day do you spend developing tactical strategies? How many hours per day do you spend engaging in mental training—for example, visualizing performance, practicing emotion-regulation, setting and examining progress toward goals, enhancing concentration, or increasing self-confidence through positive self-talk? Now compare these answers to the percentages you listed before. What do you think? Are you giving your mental game adequate attention?

If you are like the majority of college athletes who barely have time to do much of anything

apart from studying, going to practice, eating, and sleeping (sometimes not even this!), then chances are you could be short-changing your mental game. Because you have been so accomplished in your sport, you must already effectively use a variety of mental tools. You might see little need to devote additional time to psychological skill building. However, if you ever have trouble performing "in the clutch," you find that your motivation in practices and competitions can be inconsistent, or if you just want to work to gain a competitive edge, then mental performance enhancement training might be for you.

### Performance Enhancement Techniques

A key point to remember is that mental skill training is similar to physical training. Both require practice! Here are a few strategies that you can use to improve your mental game.

#### Goal-Setting

The acronym SMART can help guide you toward effective goal-setting. That is, goals should be specific, measurable, action-oriented, realistic, and time-bound. You should set a combination of long and short-term goals. It is also important to continue tracking your progress.

#### Imagery/Visualization

Imagery is a tool that can be used at any time—before, during, and after engaging in sport, at home, or when recovering from injury. There are a variety of benefits from using imagery that engages all of your senses (sight, touch, sound, taste, and smell). These include improved concentration, enhanced confidence, increased ability to control emotion, accelerated development of sport skills, better capacity to cope with pain and injury, and improved readiness for efficient problem-solving.

*(Continued on page 45)*

As you work on your visualization skills, try imagining yourself performing your sport from an internal perspective. This would look as if you were watching footage from a camera taped to your forehead. Also, try to picture your performance from an external perspective. This would be like watching yourself on a movie screen. Internal imagery may be more effective but you need to determine what works best for you. Try doing this in real time.

### Self-Confidence

Self-confidence development is a skill that you can also work on at any time. Some tips for improving self-confidence include:

- View mistakes as opportunities to learn.
- Make sure you feel well prepared to compete. This includes adhering to training schedules, nutrition plans, and sleep regimens.
- Be aware of both your strengths and growth edges. View growth edges as challenges to work through.
- Set goals and track your progress. Don't forget to reward yourself for achievements.
- Use positive self-talk to combat the negative voice in your head that often tells you what you did wrong.
- Focus on the controllable factors and screen out distracters.

### Pre-Performance Routines

Having pre-performance routines can help enhance your focus, block out negative thoughts, block out external distractions, develop a plan of action, feel more in control, regulate emotional state for optimal performance, and improve self-confidence. You can perform routines at different time points preceding competition. Routines might include practicing mental skills, visualizing, making positive self-statements, listening to music, or bouncing a

ball a certain number of times before shooting. The goal of a routine during competition should be to rest your mind so that your body can take control and do what it knows how to do so well.

### Getting Help in Developing Mental Skills for Performance Enhancement

In addition to strategies that you implement on your own, your coaches and trainers often have additional recommendations or can help you fine-tune your approaches. There are also counselors at the Psychological and Counseling Center (PCC) whose expertise is in the mental aspects of human performance. It is their job to help athletes develop the psychological skills necessary to succeed in sport as well as to lead balanced and fulfilling lives outside of the competitive arena.

### Exciting News!

The PCC also has some exciting news with regard to mental skills training for sport! Recently, the Center has acquired new equipment that allows for computer-based monitoring of physiological factors related to stress. With immediate feedback on variations in your heart rate, skin temperature, and perspiration—also known as biofeedback—you can work with a counselor to determine which mental strategies work best to either “pump you up” or to relax. Your counselor can then help you put these strategies to work on the sport terrain.

### Campus, Internet, and Other Resources

Consult with your **coaches** and **trainers** who can also help you locate other resources.

### Vanderbilt Psychological and Counseling Center

615-322-2571

Baker Bldg.

<http://www.vanderbilt.edu/pcc/>

# Nutrition

Fueling your body properly is important for both academic and athletic success. Skipping meals or following an erratic eating schedule can hinder your performance in these domains and can affect your ability to ward off illness and infection. There are resources available to you, as a student-athlete, to help you to choose foods/meal plans that can help you improve your academic and athletic functioning. Please note that you should consult your nutrition manual provided by VU Athletics for more detailed information. The following section is a brief overview of nutrition information.

## Weight Management

Calories in = Calories out. If you are taking in as many calories as you are expending, then your weight will stay the same. However, if you are consuming more calories than you are using up, this will result in weight gain. Although many people say that muscles weigh more than fat, this is actually incorrect. Remember, 5 lbs. of muscle is equal to 5 lbs. of fat. As you lift weights, you may notice an increase in weight, but a decrease in overall size/girth; this is because muscle is more compact than fat. Therefore, as you are lifting and building muscle through training, your weight might increase.

If you are interested in gaining weight or losing weight, it is important to talk to a professional about this, so the appropriate method can be used to help you gain or lose weight.

## Fatigue?

If you are taking in fewer calories than what your body needs, it can lead to fatigue. If you

are struggling with being able to maintain your stamina or if you have noticed a change in your sports performance, your nutrition is probably involved.

## Campus, Internet, and Other Resources

### Student Health

615-322-2341

Zerfoss Bldg.

[http://www.vanderbilt.edu/student\\_health/](http://www.vanderbilt.edu/student_health/)

Consult with a **dietitian, trainer, or physician**

### Molly Fruin, M.S., R.D., L.D.N.

Clinical Dietician

Vanderbilt University Medical Center

607 Medical Arts Building

1211 21<sup>st</sup> Avenue South

615-936-3952

Molly also has office hours at McGugin

[www.mypyramid.gov](http://www.mypyramid.gov)



# Overtraining and Burnout

## Definitions

- **Overtraining** is the point at which your body ceases to recover or make progress in training.
- **Burnout** (an emotional/psychological condition) is often caused by overtraining (a physical condition).

## Symptoms of Overtraining

- Increase in resting heart rate and/or blood pressure.
- Difficulty sleeping.
- Irritability and/or mood swings.
- Loss of appetite.
- Weight loss and/or negative body composition changes.
- Constant state of fatigue—even wake up feeling tired.
- Lack of motivation or enthusiasm.
- Unable to recover normally from hard training session.
- Depression.
- Loss of enjoyment in sport training and competition.

## Possible Stressors that can Cause Overtraining

- Year-round training.
- Failure to vary training routines.
- Too many competitions in a row.
- Significant increase in training load without added recovery time.
- Improper diet.
- Lack of sleep.
- Stressors outside of sport—school, work, relationships, etc.

## Suggestions to Prevent/Treat Overtraining and Burnout

- Play and compete for yourself!
- Set short-term goals for competition and practice. Vary these goals often.
- Cross train.
- Communicate your feelings and symptoms with coaches, trainers, strength coaches and fellow athletes.
- Program recovery in your training.
- Take relaxation breaks.
- Get adequate sleep and nutrition.
- Keep a positive outlook regarding your training.
- Practice skills in imagery, relaxation, and goal setting.
- Use recovery aides such as massage, ice baths, stretching, and yoga.
- Keep training log.

## Campus, Internet, and Other Resources

Consult with **coaches, trainers, and physicians**

### Vanderbilt Psychological and Counseling Center

615-322-2571

Baker Bldg.

<http://www.vanderbilt.edu/pcc/>

### Wellness Resource Center

615-343-6073

Student Rec Center

<http://www.vanderbilt.edu/wellnesscenter>

# Prevention of Cold and Flu

The common cold is an upper respiratory illness caused by over 200 different viruses. Most colds occur during the fall/winter and remain until March/April. The flu is a highly contagious respiratory illness caused by influenza viruses spread between people by contact with spit/snot or breathing in air droplets. The flu season typically lasts from November to March.

## Common Symptoms and Treatment

### The Common Cold

- Runny/Stuffy nose
- Swelling of your sinuses
- Sneezing
- Sore throat
- Cough
- Headache

### The Flu

- High Fever
- Headaches
- Body aches
- Sore throat
- Dry Cough
- Runny/Stuffy nose
- Severe Tiredness
- Diarrhea and Vomiting

### Treatment for the common cold and flu:

Rest, fluids, take over-the-counter medication to relieve symptoms (make sure you clear any medication with your athletic trainer), and avoid using alcohol and tobacco products. An antiviral medication is available for shortening the duration of the flu (not colds) only if taken within the first 2 days of symptoms for the flu.

### Prevention

- Wash your hands often with soap and water or hand sanitizer
- Cover your nose/mouth with a tissue when you sneeze or cough
- Avoid close contact with people who are sick
- Avoid touching your eyes, nose, and mouth
- Get plenty of sleep, fluids, eat healthy, and manage your stress
- Get vaccinated or receive the Flu Mist for the flu (Oct-Dec)

## Campus, Internet, and Other Resources

### Student Health Center

Call or stop by in the mornings to request a flu vaccine (\$10) or the Flu Mist (\$18)  
322-2427  
Zerfoss Bldg.  
[www.vanderbilt.edu/student\\_health/information.html](http://www.vanderbilt.edu/student_health/information.html)

### Wellness Resource Center

615-343-6073  
Student Rec Center  
<http://www.vanderbilt.edu/wellnesscenter>

### Read more about the common cold and flu at:

[www.cdc.gov/flu](http://www.cdc.gov/flu)  
[www.health.nih.gov/](http://www.health.nih.gov/)  
[www.niaid.nih.gov/factsheets/flu.htm](http://www.niaid.nih.gov/factsheets/flu.htm)  
[www.niaid.nih.gov/factsheets/cold.htm](http://www.niaid.nih.gov/factsheets/cold.htm)





# Romantic Relationships



Being a student-athlete and participating in a committed relationship can present unique challenges. Relationships can offer support as you deal with the stress of classes, practices, and competition. However, relationships demand

time and energy that you just may not have available. Healthy communication, respect for personal boundaries, and consistent support can maximize connection while also optimizing energy for school and athletics.

## Practice Healthy Communication

- Express positive feelings, negative feelings, complaints, needs, and above all, affection. Don't hold it all in and expect him/her to know what is going on.
- Be sure your partner is available to listen by asking and respecting his/her answer.
- If unavailable, work out with your partner a good time to talk.
- Discuss the impact of decisions on each person.

## Create Boundaries

- Schedule regular and specific times to spend with your partner free of school and team responsibilities. For example, set a regular date night.
- Treat these scheduled times with the same respect you would a meeting time with a coach or an advisor.
- Buddies will want to hang out. Learn to say "no" if it interferes with scheduled couple time.
- Support each other in spending time

apart and with friends. Don't expect the other to be with you 24/7.

## Offer Support

- Communicate that your partner's needs and activities are important, too.
- Listen instead of thinking you have to solve his or her problems.
- Do small and unexpected things that make the person feel special.
- Remind each other why you got together in the first place.

## Campus, Internet, and Other Resources

### Vanderbilt Psychological and Counseling Center

615-322-2571

Baker Bldg.

<http://www.vanderbilt.edu/pcc/>

[http://www.uc.edu/psc/SH/SH\\_Healthy%20Relationships.htm](http://www.uc.edu/psc/SH/SH_Healthy%20Relationships.htm)

<http://www.utexas.edu/student/cmhc/booklets/romrelations/romrelations.html>

# Safe Spring Break



## Hit the Bricks Basic Checklist

Frequent travelers have a knack  
For knowing exactly what to pack.

It's not a case of 'everything goes' . . . rather  
Start at your head and work down to your  
toes!

- Shampoo, conditioner, brush/comb, hairdryer, styling implements
- Contact lens solutions, prescription glasses & sunglasses
- Toothbrush, toothpaste, floss, mouthwash
- Prescription medicines & refills, including birth control pills
- Over-the-counter medications . . . . aspirin, anti-motion sickness medications, anti-diarrheal medications, antacids, antihistamines, medication for premenstrual and menstrual symptoms, vitamins
- Sunscreen and sun-protective lip balm
- Shaving cream/razor, aftershave
- Deodorant, favorite soap, perfume
- Body moisture lotion, face cream & cosmetics
- Personal care items . . . . condoms, lubricant, contraceptives (for those who choose to be sexually active),

- tampons/pads
- Basic FIRST AID KIT

## Don't Forget

- Camera/film/batteries
- Hat or sun visor
- Sunglasses
- Bathing suit/towel
- Books/magazines
- Light colored, lightweight clothing
- Long sleeved T-shirt or other cover-up
- A comfortable pair of walking shoes
- Sweater or sweatshirt for cool evenings
- Alarm clock
- Sports-related equipment
- Flashlight
- Telephone credit card
- Personal Identification

## Have You Secured Your Dorm, Home or Car?

- Light timers set
- Windows & doors locked (don't leave a spare key hidden outside your room)
- Answering machine on, telephone ringer off (don't leave a message saying that you are gone)
- Let someone at home or a trusted neighbor know where you are staying and how to reach you
- If leaving your car, make sure you park it in a safe, legal spot.

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- If taking your car, check your car's belts, oil, hose, & tires.
- Make sure you have enough gas & money to arrive at your destination & return home.

## Protect Yourself from the Sun

### Buying Sunglasses???

The next time you buy sunglasses, check out the label before you make your purchase. The FDA has implemented a system to help you decide which type of lens is best to block out harmful UV rays A and B.

- **Cosmetic:** provides the least protection and is for those activities conducted in indirect light. Less than 60% of visible light, 70% of UVB rays and only 20% of UVA rays are blocked.
- **General Purpose:** adequate for most outdoor activities. 60-92% visible light, 99% UVB and 60% UVA rays are blocked.
- **Special Purpose:** especially useful on tropical beaches and ski slopes. 97% of visible light, 99% UVB and 60% UVA rays are blocked.

### 9 out of 10 women prefer sunblock over wrinkles!

This is spring break not spring bake! Avoid mid-day sun. The sun's UVB rays are most intense between the hours of 10am to 3pm. UVA rays that contribute to premature skin aging are present all day. Surfaces, such as water, sand, cement, or snow can reflect harmful radiation. Don't think you're ok in the shade!

So which sunblock? Depends on your skin type. If you burn easily, a high SPF is necessary (30 or higher). If you tan easily, you still need a sunblock. Oils, tan accelerators, and low SPF sunblocks do not protect your skin. Make sure you re-apply your sunblock, especially if you swim/sweat.

A sun hat, long sleeves and long pants can help protect you somewhat, but not completely.

Also, be careful at higher altitudes and lower altitudes: solar radiation increases 4-5% with every 1,000 feet above sea level.

### An Easy Pill to Swallow

Taking medications and heading to the beach or to the ski slopes? Some common medications and the sun don't mix. A phototoxic reaction may occur after just one dose of medication, when the skin is exposed to the sun. The reaction almost always appears as an exaggerated sunburn (rash, redness, swelling). The symptoms may appear anywhere from a few minutes to several hours after sun exposure but could be delayed for days.

If you are taking any of the following medications, watch out!! Birth Control pills, Sulfa drugs, penicillin, tetracyclines, antihistamines, non-steroid anti-inflammatories. There are other medications, so ask your pharmacist or health care provider for advice.

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## 8 Ways to Protect Yourself From the Sun

1. **AVOID MID-DAY SUN.** The sun's UVB rays are most intense between the hours of 10am to 3pm. However, the UVA rays that contribute to premature skin aging are present all day.
2. **BE CAREFUL AT HIGHER & LOWER ALTITUDES.** Solar radiation increases 4 to 5% with every 1000 feet above sea level.
3. **COVER UP.** Although clothing does not completely protect from the sun's rays, a sun hat, long sleeves, and long pants can help.
4. **BE AWARE OF REFLECTED LIGHT.** Many surfaces -- sand, cement, water, and snow -- can reflect harmful radiation. Be careful on cloudy days when up to 80% of the sun's radiation reaches the ground.
5. **DON'T MIX SUN AND CERTAIN MEDICATIONS.**
6. **BE SURE TO USE A SUNBLOCK AND REMEMBER TO REAPPLY IT.** Reapply it if you towel dry or if you have been in the water. Remember that a sunblock will only provide protection for the length of time indicated by the sun protection factor number.
7. **EXAMINE YOUR SKIN REGULARLY.** Be on the lookout for any new raised growths, itchy patches, non-healing sores, or changes in moles or new colored areas that might signify a form of cancer.
8. **KEEP HYDRATED.** Make sure you drink water, non-alcoholic and non-caffeinated beverages while on the beach or slopes. Alcohol dehydrates

your body, which is the main contributor to hangovers!

## Tips About Alcohol

Many top-level Division I teams have strict no drinking policies that continue to apply during holidays and vacations. When away on vacation, it might be tempting to violate these policies. Ultimately, the choice to drink is up to you (a choice which is no doubt influenced by law makers for those 21 and under). This section is written to provide further education about alcohol so that you can make an informed decision about drinking.



### Dehydration

Ahhh! To relax in the sun. You might think there's nothing like a cold one while you're lying out, catching rays. You may want to give that a second thought! Alcohol dehydrates the body; when you add the sun and salt on the skin, you've set your body up for dehydration. Make sure you drink non-alcoholic and non-caffeinated beverages to replace body fluid you're losing.

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Otherwise, you may show signs of dehydration: Dizziness (especially if consuming alcohol); an imbalance of potassium and sodium chlorides which leads to arrhythmia; weakness; muscle spasms; passing out; confusion. Warning signs of pending dehydration is dark urine or infrequent urination.

### Hangovers

The following are symptoms of a hangover: Headaches; vomiting or nausea; "cotton mouth"; fatigue. Many do not know that a hangover is a mild form of alcohol withdrawal! Some symptoms are a rebound effect of alcohol on the nervous system.

Other symptoms are due to a depletion of glucose and oxygen to the brain. Just remember, drinking too much too quickly on an empty stomach is a formula for a hangover.

To avoid a hangover: monitor your drinking, sip, don't gulp your drinks; have food in your stomach when you drink; pace your drinks—one drink per hour if you're a guy and 1.5 hours for girls; never mix alcohol with prescription drugs or illicit drugs (especially depressant drugs like GHB); alternate a non-alcoholic drink between alcoholic drinks; do not pressure yourself or others to drink more.

### Sooooo Hot!

"Wow! Look at that!" Ok, spring break is a time when you can meet new people. In addition, opportunities for socializing often involve alcohol. If you choose to be sexually active, realize that alcohol and sex make for an unsafe combination.

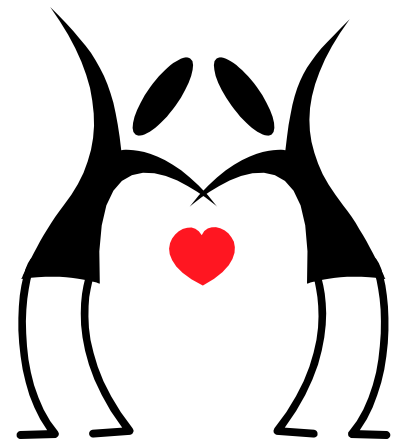
Too much alcohol contributes to miscommunication and misreading intent, which can lead to unwanted sex or rape. Of college women involved in acquaintance rape, 55% were using alcohol/drugs; of men involved, 75% were using at the time of the crime.

Here are some other statistics:

% of college women who were intoxicated at time of conception: 66%

% of college women who were intoxicated when contracted an STD: 60%

Be careful! Don't put your drink down and then drink it. Also, never accept a drink that you didn't see the bartender make. Alcohol is not a good mixer for sex.



In addition to personal safety risks here are some other factors to consider as you make a choice about whether to be sexually active while intoxicated. A small amount of alcohol acts as a "social lubricant"; however, more alcohol brings forth a drastic change in the physiology of the sexual response:

- In men, less intense orgasms, difficulty in obtaining and maintaining an erection, erectile impotence, ejaculatory impotence & painful ejaculation.
- In women, increased alcohol brings forth less intense orgasms, fewer or no



orgasms, lassitude and loss of

lubrication, which in turn produces painful intercourse.

### Tips About Sex

#### If You Choose to Be Sexually Active, Remember Condoms!

"But it's so embarrassing!" Get over it; if you're going to have sex with this person, you can talk about condoms! Besides STDs are more embarrassing than a condom!

"It really turned me on when she put the condom on me. I knew she cared about herself, and about me, too. When we have sex, our minds are on each other, not some disease or pregnancy."

"I'm always thinking I'll climax too soon. For me, a condom makes me feel less anxious and I last longer."

"Sometimes sex feels uncomfortable because I don't get wet enough, especially when I've had a drink or two. So I ask him to use a lubricated condom and we enjoy each other more."

"I was so relieved that he suggested a condom. He was really glad to see I had one, too. We had a great time."

### First Aid

**Ankle Injuries:** (RICE) Rest, Ice, Compression, Elevate. Ice should be applied 20 minutes on, 20 minutes off. Seek help if foot or toes are numb, tingling, or if weight bearing is not possible.

**Blisters:** The fluid under a blister is a good Band-Aid; do not pop unless the blister is on an area where it will rub open on its own. If draining is needed, wash the blister gently with soap and water, then use a sterile needle and put several small holes around the edges of the blister. Leave the skin on top, as it will protect the new skin forming underneath.

**Diarrhea:** Reduce diet to clear liquids and advance slowly to soft, complex carbohydrates (potatoes, pasta, rice), without fatty toppings. If diarrhea persists more than 4 days, avoid dairy products for two weeks. Sometimes excessive amounts of fruits or fruit juices can make it worse.

**Fainting:** Place person on the ground; elevate feet. Observe.

**Fever:** Acetaminophen (Tylenol) as directed. Drink at least 8 oz. of water with any medication taken by mouth.

**Heatstroke:** Prevention is the best medicine. Prepare for the heat by increasing fluids prior to heat exposure. Cool the skin with wet cloths, increase intake of fluids, and seek help if sweating decreases and disorientation occurs.

**Nose Bleeds:** Sit upright, lean slightly forward, and pinch the nostrils for 5-10 minutes. Do not clear the nose by blowing or by removing the clots. Seek help if the nose continues to bleed after 10-15 minutes.

**Poison Ivy:** "Leaves of three, let them be." If exposed to poison ivy, thoroughly wash the area with soap and water. Calamine lotion may decrease itching and help dry blisters. Remember that the oil from poison ivy can remain on clothes. Wash them separately from other clothing.

**Seizures:** Call 911; keep the person lying down; protect the head from injury; turn on the side if possible to provide an airway.

**Splinters:** Wash the area with soap and water (do not soak wood splinters because they will break into little pieces.) Attempt to remove with tweezers. If deeply embedded, medical help may be sought.

**Ticks:** Wash with soap and water and use tweezers to slowly tug on the ticks as close to the head as possible. If the head remains you should seek medical help.

### Campus, Internet, and Other Resources

#### Alcohol, Tobacco & Other Drug Prevention Programs

Station B 1508  
Nashville TN 37235  
(615) 343-4740  
FAX (615) 343-3702

#### Vanderbilt Psychological and Counseling Center

615-322-2571  
Baker Bldg.  
<http://www.vanderbilt.edu/pcc/>

#### Wellness Resource Center

615-343-6073  
Student Rec Center  
<http://www.vanderbilt.edu/wellnesscenter>

#### Student Health Center

322-2427  
Zerfoss Bldg.  
[www.vanderbilt.edu/student\\_health/information.html](http://www.vanderbilt.edu/student_health/information.html)

#### Margaret Cuninggim Women's Center

615-331-1200  
419 Welshwood Dr.  
<http://www.vanderbilt.edu/WomensCenter/women.html>

#### For Information on Sexually Transmitted Diseases

[www.cdc.gov/std](http://www.cdc.gov/std)  
[www.ashastd.org](http://www.ashastd.org)  
[www.i-std.com](http://www.i-std.com)  
[www.urologychannel.com/std](http://www.urologychannel.com/std)

# Sexual Behavior

At some point, most college students must make difficult decisions regarding sexual behavior, decisions with potential personal, physical, and psychological implications. In order to make these decisions, many factors are often considered including the potential for sexually transmitted diseases (STDs), unwanted pregnancy, whether it is possible to have a long-term relationship, and whether abstinence is a preferred personal choice.

The threat of STDs is often an overlooked aspect of the sexual decision-making process. Despite the risk of Sexually Transmitted Diseases (STDs), many college students continue to engage in risky sexual behaviors. However, basic education regarding safer sex can go a long way in reducing the risk of disease or other unforeseen consequences of sexual contact.

## **Sexual Behavior and Student-Athletes**

Like all college students, athletes must also navigate the process of making decisions regarding sexual contact. Student-athletes, due to their status on campus, may find themselves faced with multiple opportunities for sexual contact and would benefit from educating themselves about safer sex, abstinence, and the relative risks involved with a number of sexual practices.

Safer sex involves openly communicating with your partner each of your sexual histories and sexual health. Safer sex involves establishing limits with your partner and making conscious choices about how to protect yourself during sexual contact.

## **Improving Decision Making**

Education is a key resource in making decisions about sexual behavior. In general, sexual activity can be made much safer with the use of a latex condom to prevent the exchange of blood, semen, and vaginal secretions. While

many feel that the use of condoms reduce the pleasure of sex, water-based lubricants can be used to prevent the discomfort sometimes associated with condom use. Avoid using oil-based lubricants or body lotions because they can weaken the condom and make them break.

In addition to condom use, it is important to be aware of the risks involved in specific sexual activities. For example, dry kissing and massaging are considered to be safer forms of sex, while some forms of oral sex or any kind of intercourse without a condom are considered to be risky.

## **Campus, Internet, and Other Resources**

### **Student Health**

615-322-2341

Zerfoss Bldg.

[http://www.vanderbilt.edu/student\\_health/](http://www.vanderbilt.edu/student_health/)

### **Vanderbilt Psychological and Counseling Center**

615-322-2571

Baker Bldg.

<http://www.vanderbilt.edu/pcc/>

### **Margaret Cuningham Women's Center**

615-331-1200

419 Welshwood Dr.

<http://www.vanderbilt.edu/WomensCenter/women.html>

### **Wellness Resource Center**

615-343-6073

Student Rec Center

<http://www.vanderbilt.edu/wellnesscenter>



# Sexual/Physical Assault

## What is Sexual Assault?

Sexual assault is physical contact of a sexual nature that occurs without the clear, voluntary, and knowing consent of an individual. Both men and women can be sexually assaulted, but the majority of those assaulted are women. In addition, many people typically know the person who assaulted them.

The key to knowing if a behavior is an assault or not is **consent**. Even without the presence of violence, any type of unwanted sexual contact is considered sexual assault. For example, having sex or touching sexual organs while a person is passed out or sleeping would be considered a sexual assault. Also, grabbing or touching body parts without consent would be an assault.

## What is Physical Assault?

Pushing, shoving, slapping, punching, kicking, strangling, tying down, or restraining are examples of physical assault. In relationships, physical assault is often used in order to intimidate the other partner or to establish power and control. Partners who are physically violent often use physical threats to keep relationships going. They also isolate their partners from others, blame others for their actions, and see jealousy as proof of their love.

Unfortunately, most cases of physically violent relationships get increasingly worse and more severe over time. Due to self-blame and feelings of shame, most victims of physically abusive partners do not seek help.

## What are the effects of physical and/or sexual assault?

Sexual and/or physical assault can result in many different problems. The following is a list of potential symptoms:

- Nightmares or flashbacks of the event or events

- Unexplained health problems, such as stomachaches and chronic pain
- Intense fears
- Social isolation
- Avoidance of situations or people
- Difficulty concentrating
- Depression
- Reduced trust in others
- Frequent angry outbursts or getting easily frustrated
- Worry or concern about everything around them, especially other people

## What do I do if I know of someone who has been physically or sexually assaulted?

- Encourage, but do not force, the victim to report his or her experience to the police
- Encourage him or her to have a medical evaluation
- Encourage him or her to seek support from family, friends, coaches, or other trusted individuals
- Support him or her in finding professional help
- Listen, but do not feel compelled to fix or solve the issue

## Campus, Internet, and Other Resources

### Vanderbilt Psychological and Counseling Center

615-322-2571

Baker Bldg.

<http://www.vanderbilt.edu/pcc/>

### Student Health

615-322-2341

Zerfoss Bldg.

[http://www.vanderbilt.edu/student\\_health/](http://www.vanderbilt.edu/student_health/)

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**Margaret Cuningim Women's Center**

615-331-1200

419 Welshwood Dr.

<http://www.vanderbilt.edu/WomensCenter/women.html>

**Wellness Resource Center**

615-343-6073

Student Rec Center

<http://www.vanderbilt.edu/wellnesscenter>

**Vanderbilt University Police Department**

2800 Vanderbilt Place

615-322-2745

<http://police.vanderbilt.edu/>

**University Chaplain**

615-322-2457

2417 West End Avenue

<http://www.vanderbilt.edu/religiouslife/>

# Sexually Transmitted Diseases

A sexually transmitted disease (STD) is a disease caused by a bacterial, viral, or parasitic organism (germ) that is spread through sexual contact. They may be spread through vaginal, anal, and/ or oral sex. Some STDs are chronic infections (long-term), but many can be cured with proper treatment (antibiotics). However, sometimes treatment can not undo the damage that is already done. Some STDs that produce few to no symptoms (Chlamydia) if left untreated may lead to severe complications such as pelvic inflammatory diseases, cervical cancer, inflammation of the urethra and prostate, and fertility/reproductive system problems in both males and females. If you experience any of the symptoms listed below, contact your health care provider or student health center to receive the appropriate testing and treatment as soon as possible. It is important that your sexual partner(s) is also notified and receives treatment for their own safety and because you can become re-infected. Discuss with your health care provider if you have any questions regarding prevention, diagnosis and treatment of any sexually transmitted disease.

## Prevention

The only 100% effective method for prevention of STDs is abstinence from sex. You can usually avoid becoming infected if you engage in “safe sex” (use of a latex condom) in a monogamous (single partner) relationship where both partners are uninfected. Please note that the use of condoms can reduce but not eliminate the risk of contracting STDs.

**Chlamydia:** a bacterial infection. Infection without symptoms is not uncommon. Symptoms include abnormal genital discharge 7-21 days after exposure and painful and/or frequent urination. Females may also experience lower abdominal pain or pain during intercourse and males may experience swelling or pain in the testicles. Treatment includes antibiotics for both partners and avoidance of in-

tercourse until infection is resolved. If infection is untreated, women may experience pelvic inflammatory disease which may result in infertility (inability to have children) and chronic pain where men may experience inflammation of the testicles which can also result in sterility.

**Gonorrhea:** “the clap,” a bacterial infection. Infection without symptoms may occur. Symptoms are often mild and usually appear 2-10 days after exposure. They include genital discharge and burning or itching during urination. Treatment and complications are the same as those for Chlamydia. Untreated gonorrhea can also infect the joints, heart valves and/or the brain.

**Syphilis:** a bacterial infection. It can be contracted through non-sexual contact if the sores or rashes come into contact with the broken skin of a non-infected individual. Symptoms include painless sores or chancres on the genitals in the initial stage (10-90 days). Treatment includes antibiotics for both partners should and intercourse avoided until infection is resolved. If untreated, syphilis progresses to other stages of infection including a rash, fever, sore throat, hair loss, swollen glands throughout the body, and heart, brain and/ or other organ damage.

**Human Papilloma Virus (HPV):** a viral infection, the causative agent for genital warts. Symptoms include painless fleshy, cauliflower-like warts that develop on and inside the genitals, anus and throat. There is no cure for HPV; however, the warts can be suppressed by chemicals, freezing, lasers, and surgery. HPV can result in cervical cancer. Condoms are not effective in providing protection against HPV. Vaccines are currently being tested.

*(Continued on page 60)*

**Genital Herpes (HSV-2):** a viral infection that is transmitted by direct sexual skin-to-skin contact with an infected site during sex. Initial symptoms are often mild and may include itching/burning, pain in genital area, vaginal discharge; flu-like symptoms and open sores/blister may appear in the genital areas and spread elsewhere. Stress and other factors may cause the sores to reappear.

There is no cure for genital herpes; however, there are anti-viral drugs that are effective in reducing the frequency and duration of outbreaks. Condoms may reduce the chances, but will not eliminate the risk, of contracting the disease during sex as it is still possible to contract genital herpes via sores in the genital area.

**Human Immunodeficiency Virus (HIV) and Acquired Immunodeficiency Syndrome (AIDS):** a viral infection that is transmitted through vaginal, oral, and anal sex. It is also transmitted through infected blood/blood products and sharing drug needles with an infected person. Symptoms include flu-like symptoms and enlarged lymph nodes. Symptoms usually appear within a week to a month, than the virus may remain dormant for years while it continues to weaken the individual's immune system making it unable to fight other infections (such as Kaposi's sarcoma and pneumonia). Some people have no symptoms when initially infected. There is no cure for HIV and many of the acquired infections from HIV are drug resistant. Antiviral drugs and other medications are available to slow the progression of the virus. Condoms may reduce the chances, but will not eliminate the risk, of contracting this disease during sex. The only 100% effective way to prevent the sexual transmission of HIV is abstaining from sex with an infected person. HIV testing requires a blood test that may need to be preformed on one or more occasions.

### Campus, Internet, and Other Resources

Consult with **trainers** and team **physicians**

#### Student Health

615-322-2341

Zerfoss Bldg.

[http://www.vanderbilt.edu/student\\_health/](http://www.vanderbilt.edu/student_health/)

[www.cdc.gov/std](http://www.cdc.gov/std)

[www.ashastd.org](http://www.ashastd.org)

[www.i-std.com](http://www.i-std.com)

[www.urologychannel.com/std](http://www.urologychannel.com/std)

# Sleep

For someone who lives an active life (sound like a student-athlete?), sleeping may seem like a waste of valuable time. But sleep is so important to your functioning that you'll spend over one-third of your life sleeping. Sounds like a lot, but a lack of sleep can be a contributing factor to injuries, accidents and a decrease in overall performance.

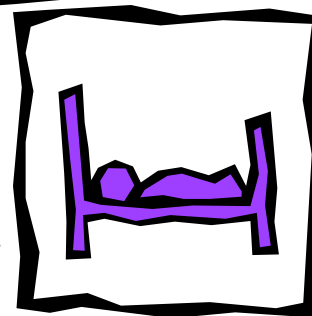
Sleep aids in a number of bodily functions. In deep sleep, growth hormone reaches its peak. Blood supply to the muscles increases and metabolic activity is at its lowest. All of these processes are optimal for tissue repair. Sleep also improves immune function so sleep deprivation makes you more susceptible to colds and infections. For example, you may notice that you always seem to get sick around finals, when you are probably sleeping significantly less. Finally, sleep is essential for memory storage and retention: it is during rapid eye movement (REM) sleep that the growth phase of specialized neural connections to physical memories takes place in the brain. If your sleep is disturbed, then you are less likely to preserve all that information you crammed into your brain last night in your long-term memory.

**How can sleep affect/impact the student-athlete?** Research indicates that young adults live in a constant state of chronic insufficient sleep. High school and college students are among the most sleep-deprived individuals in the United States. While experts agree that young adults should receive between 8 and 9 ½ hours of sleep per night, college students actually sleep an average of 6.1 hours per night. It has also been reported that athletes sleep less than non-athletes. There are significant consequences for sleep-deprived athletes:

- Mood changes
- Feeling overwhelmed and/or indecisive
- Feeling worthless and guilty about not being able to physically keep up, even

though your productivity may be only marginally compromised

- Loss of motivation.
- Reaction time is significantly slowed, and this means that athletes suffering from fatigue run the risk of underperforming
- Loss of memory function,
- Decrease in the ability to focus on a single or multiple tasks
- Decrease in logical reasoning.
- Increase in risk of physical accidents.



So, ok, we can see sleep is very important. However, how much sleep is enough sleep? One internationally renowned physical preparation coach suggests that athletes should get a minimum of 10 hours of uninterrupted sleep per night. Most suggest that a minimum of 7 ½ to 8 hours of uninterrupted sleep is sufficient, plus a nap if it does not disturb your nightly sleep patterns.

Well, then, how can you get and/or improve sleep quality? Here are some tips for improving sleep quality:

- **Keep a regular sleep schedule:** This means going to bed and waking up at the same time everyday, including weekends. Just pick a time to go to bed and wake up, allowing for 8-10 hours sleep, and work your social events around this time frame.
- **Develop a bedtime ritual:** What should your ritual consist of? Whatever you do, do it with consistency. Your ritual might include for example, stretching, yoga, deep breathing, reading (for leisure), or listening to relax-

*(Continued on page 62)*

ing music.

- **Avoid alcohol, caffeine and other stimulants, nicotine and heavy exercise before going to bed:** Consuming alcohol prior to bedtime will actually impair your ability to enter sleep stages 3 and 4, which are the most crucial to ensuring quality sleep. Caffeine and related stimulants are powerful enough to impair sleep quality, so avoid them 4-5 hours prior to bedtime. Cigarettes contain nicotine, which is a stimulant, so avoid them and other nicotine products before bedtime. Heavy exercise prior to bedtime will inhibit your ability to fall asleep, so do not exercise 4-5 hours before going to bed.
- **Eliminate non-sleep activities in bed** (such as reading for homework or doing other work) to strengthen the mental association between your bed and sleeping.
- **Keep your room temperature between 60 and 70 degrees.**
- **Do not try to make yourself sleep.** If you are unable to fall asleep after 20-30 minutes in bed, leave your bed, engage in some relaxing activity (like watching TV, sitting in a chair and listening to a relaxation tape or having a cup of hot herbal tea or warm milk).
- If you still cannot sleep, **do not get too upset; do not fight it or fear sleeplessness.** This will make it harder to fall asleep. Tell yourself that once your body gets accustomed to your sleep ritual etc., it will become easier for you to fall asleep. If the pattern continues, consult your trainer and team physician.

## Campus, Internet, and Other Resources

### Vanderbilt University Psychological and Counseling Center

11<sup>th</sup> floor, Baker Building

(615) 322-2571

<http://www.vanderbilt.edu/pcc/>

### Student Health Services

615-322-2341

Zerfoss Bldg.

[http://www.vanderbilt.edu/student\\_health/](http://www.vanderbilt.edu/student_health/)

### The Wellness Center

615-343-6073

Student Rec Center

<http://www.vanderbilt.edu/wellnesscenter/>

### Student Health

615-322-2341

Zerfoss Bldg.

[http://www.vanderbilt.edu/student\\_health/](http://www.vanderbilt.edu/student_health/)

Burke, E.R. (2003). **Optimal muscle performance and recovery.** Penguin Putnam, Inc.

Bourne, E.J. (2000). **The anxiety and phobia workbook (3<sup>rd</sup> ed.).** Oakland, CA: New Harbinger Publications.

### Sleep guidelines

[www.dietitian.or.jp/english/](http://www.dietitian.or.jp/english/)

[jp\\_health\\_nutrition/sleep\\_guidelines.html](http://jp_health_nutrition/sleep_guidelines.html)

### Sleep Hygiene: Basic Guidelines

[www.queendom.com/articles/mentalhealth/sleepguide.html](http://www.queendom.com/articles/mentalhealth/sleepguide.html)

[sleepguide.html](http://www.queendom.com/articles/mentalhealth/sleepguide.html)

# Sportspersonship

*“In the end, it’s extra effort that separates a winner from second place. But winning takes a lot more than that, too. It starts with complete command of the fundamentals. Then it takes desire, determination, discipline, and self-sacrifice. And finally, it takes a great deal of love, fairness and respect for your fellow man. Put all these together, and even if you don’t win, how can you lose?”*

-Jesse Owens, four-time gold medal-winner, 1936 Olympics

There is no universally accepted definition of sportspersonship, though most of us recognize it when we witness its absence. Professional basketball player David Robinson defines sportspersonship as playing with all your heart and intensity, yet still showing respect for your opponents. Sportspersonship has been found to consist of five factors: full commitment toward participation (e.g., showing up and working hard during all practices and games), respect and concern for rules and officials, respect and concern for social appropriateness (e.g., shaking hands after the contest concludes), respect and concern for the opponent (e.g., refusing to take advantage of or cause additional harm to injured opponents), and the avoidance of poor attitudes toward participation (e.g., controlling temper after a mistake) (Weinberg & Gould, 2003).

## Here are five rules to remember for practicing good sportspersonship:

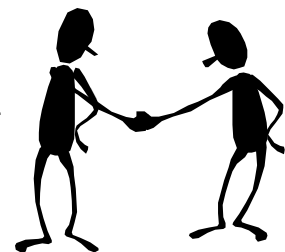
- Show respect for the opponent at all times. The opponents should be treated as a guest, greeted cordially upon arriving, given the best accommodations and accorded the respect, honesty and generosity that all people deserve.
- Show respect for the officials. The officials should be recognized as impartial arbitrators who are trained to do

their job and can be expected to do it to the best of their ability. This does not suggest that they are perfect. However, sportspersonship implies the willingness to accept and abide by the judgments of the officials—no matter how you may feel about some of those decisions.

- Know, understand and appreciate the rules of the contest. Familiarity with the current rules of the game is essential. So is recognizing necessity of rules for a fair contest. Good sportspersonship involves conforming to the spirit, as well as the letter, of the rules.
- Maintain self-control at all times. A prerequisite of sportspersonship requires you to understand your own biases or prejudices. You must also have the ability to prevent your desire to win from causing you to transgress reasonable behavior. A balanced perspective will allow you to maximize the educational values of athletic competition.
- Recognize and appreciate skill in performance regardless of players’ affiliations. Applause for an opponent’s good performance is a demonstration of generosity and good will. Recognizing and acknowledging quality performance without regard to team membership is a highly commendable gesture.

## Examples of what *not* to do:

- Do not yell during the opponent’s free-throw attempt, in a disrespectful manner, or antagonize opponents.



(Continued on page 64)

- Do not boo or heckle an official, coach, player or cheerleader.
- Do not refuse to shake hands or withhold recognition for good performances.
- Do not blame the loss of a game on officials, coaches or participants.

Sportspersonship reflects morality in sport and reveals a lot about your character. Sports participation also has the potential to build your character in very positive ways. It is important to remember that others are watching you, and are likely going to attempt to model the behaviors you display. Your audience will likely include young children for whom you can set a good example. Remember, displaying sportspersonship is not only ethical, but it is necessary for the future integrity of sport.

### Campus, Internet, and Other Resources

#### **CHAMPS Life Skills**

[www.vanderbilt.edu/champs](http://www.vanderbilt.edu/champs)

#### **Vanderbilt Psychological and Counseling Center**

615-322-2571

Baker Bldg.

<http://www.vanderbilt.edu/pcc/>

Weinberg and Gould (2003). **Foundations of Sport & Exercise Psychology**. Human Kinetics. Champaign, IL.



# Stalking

Stalking can happen to any of us. **Stalking is a pattern of any unwanted or intrusive actions that generate fear.** While stalking can take many forms, some examples of behaviors that might comprise the stalking pattern include:

- Someone insisting on speaking with you by phone, via e-mail or in person when you do not wish to speak with them
- Someone observing your daily activities and appearing, unannounced and unwelcome, outside McGugin or a class or breaking into your dorm room
- Someone giving you unwanted gifts,
- Someone damaging your belongings,
- Someone having unwanted physical contact with you
- Someone making threats

If you or someone you know is currently being stalked, you might be investing a significant amount of time and energy in altering your routines and patterns—changing your class schedule, taking a different route to practice or asking to be moved to a different dorm, for example. Some of these changes might also mean isolation from some of your supports. You may find yourself in a constant state of fear or hypervigilance because you simply never feel safe. Experiencing depression, anxiety, anger and feelings of powerlessness or confusion are also common experiences. It is also not uncommon to try to figure out what you could be doing to cause these behaviors in the other person and feel responsible. Some people also experience the impact of stalking in physical reactions, such as headaches, stomach problems or sleep disturbances. You might also notice changes in energy level and realize that you're having a harder time than usual in practices, for example.

## What You Can Do

It can be difficult and confusing to make sense of any of these behaviors, especially if they are coming from someone with whom you have

been in a relationship or are currently in a relationship. Be aware that regardless of your history with this individual, this person does not have the right to make intrusive, unwelcome contact or to threaten you physically, emotionally or sexually. The cause of the stalking behaviors is the person stalking you, not you.

If someone you care about is being stalked, it may be helpful to make her or him aware of some of the resources listed below. Your friend may choose not to take action for any number of reasons ranging from personal beliefs to fearing for their personal safety. Be prepared to remain supportive regardless of what she or he chooses. In cases where stalking victims choose to take legal action against their stalkers, it can be useful to keep a detailed record of each incident of unwanted or threatening contact. Ways to do this include keeping a journal of times when the person tries to contact you and how this makes you feel, saving voice mail messages left by this person, printing out e-mails, photographing any physical injuries or property damage and giving a support person copies of your records as a backup.

## Campus, Internet, and Other Resources

### In an emergency:

- From on campus: 1-911
- From off campus: 911
- Vanderbilt University Police Department: 322-2745
- Nashville Crisis Line: 244-7444
- Take someone directly to the Vanderbilt Emergency Room

### Project Safe

Women's Center, West Side Row,  
Crisis Line: 936-7273, Main Line: 322-1333,  
<http://www.vanderbilt.edu/ProjectSafe/index.html>

(Continued on page 66)

Services for students (male or female) affected by sexual assault, intimate partner abuse, and stalking. Project Safe offers crisis intervention, safety planning, support groups, individual advocacy and Hand in Hand training in sexual assault, intimate partner abuse and stalking.

Your **RA or AD or the Office of Housing and Residential Education**, 322-2591

**Vanderbilt Psychological and Counseling Center**

615-322-2571

Baker Bldg.

<http://www.vanderbilt.edu/pcc/>

**Office of the University Chaplain**

322-2457

<http://www.vanderbilt.edu/religiouslife/>

A staff of chaplains from a variety of faiths provide worship opportunities, counseling, study, action, retreats, and fellowship for his/her constituency.

**Vanderbilt University International Student and Scholar Services (ISSS)**322-2753

<http://www.vanderbilt.edu/issv/>

ISSS provides advice, counseling, and advocacy regarding immigration, cross-cultural, and personal matters

**Office of Student Conduct and Academic Integrity**

322-7868

**Vanderbilt University Police Department**

322-2745

# Study Skills

## Top 10 Study Tips

10. Start preparing for tests on the first day of class!
9. Ask questions before, while, and after you read.
8. Talk about what you are learning with your classmates.
7. Get to know your professor and teaching assistants. Don't avoid them!
6. Follow a daily study schedule as closely as possible.
5. Look for the structure in your text and lecture notes. Be able to determine the Central Theme, Main Points and Important Details. Be able to say them out loud.
4. Attend all help sessions offered, even if you think you know the material
3. AVOID PROCRASTINATION! Break up your assignments into manageable parts.
2. REVIEW: daily, weekly and prior to tests! Don't wait until the last minute to start reviewing your notes!
1. Have the intention to learn, the willingness to work, and the confidence to try!

## Campus, Internet, and Other Resources

Consult with your academic advisor

### Vanderbilt Psychological and Counseling Center

615-322-2571

Baker Bldg.

<http://www.vanderbilt.edu/pcc/>

**The Learning Center** provides academic support to Vanderbilt undergraduates. Students who want to improve general study skills or who need assistance in courses offered through the College of Arts and Science are encouraged to come to the Learning Center and meet with an academic counselor to explore options.

Located in one of the freshman residence halls, Branscomb Quadrangle, the Learning Center is open from 8 a.m. until 9 p.m. Monday through Thursday and until 4:30 p.m. on Friday. Drop by or call at 343-6829.



## Surviving and Thriving with Roommates

This may or may not be the first time you have had to share a room with someone. In either case, you came into this roommate situation with some expectations of how it would be. Maybe you were excited to have a buddy to live with. Perhaps you were concerned about someone being in your space. No matter what you were expecting, your relationship with your roommate will likely have a significant impact on each of your Vanderbilt experiences. Your roommate may challenge your confidence, encourage you to become more tolerant, and/or facilitate changes in your attitudes.

Roommates make a difference in each other's daily lives. They even affect each other's study habits. For example, if you come home and your roommate is studying, chances are 3 in 4 that you will also sit down and study. If he/she is not studying, chances are only 1 in 3 that you will sit and study. Roommate conflict and incompatibility are associated with academic difficulty and low achievement. So, you want to learn how to make this relationship as good as it can be, right? OK, so how do you do this?

### Some ways to start and keep a good roommate relationship (taken from Missouri Western State College):

- **Get to know each other.** You've got your first opportunity to make a new friend. Take the time to ask and answer questions -- about family, hobbies, academic interests, etc.
- **Talk it out.** Communication is key in building a successful relationship.
- **Be open and friendly.** You and your roommate may not have the same taste in clothing or music, but you likely share some of the same concerns and apprehensions. Be the first to step out of your comfort zone.
- **Be understanding.** Everyone has bad days. Remember that you may not always be aware of the issues your roommate is dealing with, but there's most

likely a good reason for his or her actions. A sympathetic ear might help a lot.

- **Give each other space.** Togetherness is great, but too much of a good thing is sometimes not so great. You and your roommate both need time alone. If that time doesn't pop up naturally, talk about it. This may be particularly important if both you and your roommate are athletes.
- **Ask before you borrow.** Suddenly you have twice the wardrobe! But everyone has a different comfort level when it comes to lending belongings. Asking first helps avoid misunderstandings.
- **Define "neat."** Whether you're a neat freak or a slob, you have someone else's feelings to consider. With a little give and take, you can each adjust accordingly and make your environment comfortable.
- **Discuss visitation hours.** Talk about when it's okay and when it's not okay to have visitors in the room.
- **Schedule study times.** Let your roommate know in advance when you have a big test or paper coming. He or she will know to give you some quiet time. A roomful of friends when you are stressed may lead to a bad scene!

Remember, as an athlete, you may have a more intense schedule than your roommate does, and you may need to work harder to manage your needs for time, quiet, sleep, and work. The pressure you may feel about performance in many arenas may sometimes make you more irritable and quick to get angry. Talking with your roommate about each other's experiences may make it easier to understand and accept when one of you gets irritable.

## Dealing with conflict

Roommates inevitably get upset with each other at some point, and since you still have to live together, here are some tips (from M. Lee Upcraft (Ed.) Pennsylvania State University 1976) for anticipating and getting through conflict:

- Predict problem areas and discuss the ground rules. **At the very beginning of your relationship - - think about your habits and preferences: smoking or non-smoking, tidy or casual, stay up late or get up early, alternative music or classical jazz, study alone or with others, etc.**
- Compromise. **Try to work out a plan that suits both of you.**
- Express your satisfaction or dissatisfaction to your roommate as close to the pleasing or offending event as possible. **When you are irritated or pleased with your roommate, express it directly and immediately. Don't store up resentments and explode when she/he commits a minor offense. Don't discuss your roommate problems with others when you haven't discussed them with your roommate.**
- Listen to his or her side. **Recognize that there are at least two sides to every story. Hear your roommate out. Try to see things from his/her perspective rather than jumping to conclusions.**
- Seek out the help of a neutral third party if you hit an impasse. **Most problems can be resolved or alleviated. If you can not work out the situation with your roommate - and you've actually tried doing so instead of assuming that it can not be done - ask assistance from someone who will be objective, such as a mutual friend, who is not directly affected by the situation, or a resident advisor. This person can meet with you and your roommate to help you resolve the problem.**

**When you need to confront your roommate about some issue that bothers you** (From St. Joseph's University Counseling & Personal Development Center):

- **Employ "I messages".** "I messages" are statements about the communicator's feelings, thoughts, observations, perceptions, and reactions. When confronting someone, talk in terms of yourself. For example, "I think," "I feel," "In my experience," "for myself," "I need," "I've observed."
- **State your request clearly.** Be honest and direct. Do not over explain or apologize.
- **Focus on the offending behavior, not the person.** Be specific in your description of the behavior and the effect it had on you.
- **Use appropriate non-verbal behaviors.** Show the intensity of your feelings. Look the other person in the eye. Speak clearly, without hesitation, leaning toward the listener

## Campus, Internet, and Other Resources

### Vanderbilt Psychological and Counseling Center

615-322-2571

Baker Bldg.

<http://www.vanderbilt.edu/pcc/>

**Getting to Know Your Roommate** [http://www.american.edu/ocl/counseling/selfhelp&weblinks/specialtopics/roommate\\_resource\\_stranger.html](http://www.american.edu/ocl/counseling/selfhelp&weblinks/specialtopics/roommate_resource_stranger.html)

### Roommate Agreements

<http://www.lmu.edu/pages/9788.asp>



# The Counseling Process: Why Seek Counseling?

People seek counseling for many reasons and utilize the counseling resources of the university in a variety of different ways. In seeking counseling, some students hope only to receive an objective consultation about a situation that they wish to resolve. In other cases, students hope to form an alliance with a counselor in order to work through serious issues over a long period of time. Both utilization styles are perfectly legitimate approaches to the counseling process.

## Counseling and Student-Athletes

Students seek counseling for a wide range of reasons, hoping to feel and function better. Common issues include: general anxiety, stress, difficult childhood and family experiences (past and present), relationship struggles, grief, depression, homesickness, eating and body image issues, study/test-taking problems, academic major or career indecision, or anything else you want to speak with someone about.

Students also seek counseling to work toward developing a better self-image, to explore existential themes (e.g. "What's my purpose?" or "Why am I here?"), and to achieve personal growth. Treatment varies from person-to-person. For some, it may include a good deal of work involving the client's past experiences. For others, current experiences may be emphasized. A good counseling relationship will help students identify and work toward their unique goals.

Like other students, student-athletes have a variety of personal, social, and academic concerns. However, additional concerns may surface that are particular to athletes. For example, student-athletes often face time pressure and have scheduling concerns that do not affect other students as strongly. Student-athletes are also confronted with pressure to be successful socially, as well as on the field and in the classroom. Often, this

combination of demands calls for extraordinary skill that a counseling relationship can help enhance.

## The Vanderbilt University Psychological and Counseling Center offers the following services for students, dependents, staff, and faculty:

- Individual Therapy
- Couples Therapy
- Group Therapy
- Shyness and Social Anxiety Workshop
- Body Image and Eating Concerns Workshop
- Personality Testing
- Career Testing and Counseling
- Testing for learning disorders and Attention-deficit/Hyperactivity Disorder
- Study Skills Training
- Time Management Training
- Presentations to campus groups available upon request with prior notice

## Campus, Internet, and Other Resources

### Vanderbilt Psychological and Counseling Center

615-322-2571

Baker Bldg.

<http://www.vanderbilt.edu/pcc/>

### Margaret Cuninggim Women's Center

615-331-1200

419 Welshwood Dr.

<http://www.vanderbilt.edu/WomensCenter/women.html>

### University Chaplain

615-322-2457

2417 West End Avenue

<http://www.vanderbilt.edu/religiouslife/>

# Time Management

## The Benefits of Time Management

Effective time management can lower your stress level, give you more control over your own life, and allow you to attain your goals. It can result in better grades and give you more time to spend with friends and family, or in guilt-free goofing off!

## Seven Principles of Time Management

- **You can do what you want, but you can't do everything you want.** Life--and time management--is about choices, and those choices are often based on your personality, your values, and your goals.
- **Know yourself.** Change what you can; accept what you cannot change. Not everyone is born an organizing whiz! There are many personality variables that influence a person's use of time, some of which are impossible to eradicate. However, you can adapt to your shortcomings and play on your strengths.
- **Know your values.** If gaining a solid education is a major personal value, you will make time-based decisions that will allow you the time to study.
- **Know your goals.** Having a firm idea of where you are heading and what you want to accomplish will make time planning much easier. Not only should you have some long-range goals for your life--and a plan for achieving them--but it is important to think in terms of weekly and daily goals.
- **Plan and prioritize.** Make it a habit to keep a calendar (or PDA) and take a few minutes each day to plan and to designate what is most important for you to accomplish (your "A" list, or "have to's"). Some things are of lesser importance (your "B" list, or "ought to's"). Finally, there are the "want to's", or your "C" list. It's okay to do a number of less important things, but make sure that the top priority items get taken care of so you don't have to try to do everything at the last minute.
- **Avoid procrastination!** It is often tempting to put off writing a paper, reading a book, or studying for a test because the job just seems too large. If you plan ahead, you will generally be able to break the task up into smaller, more manageable parts. Try to work steadily each day on the assignment--you'll find that you will end up with a better product, and you will suffer much less stress!
- **Reward yourself!** Getting things done is generally much more pleasant if you are working on a reward system, rather than punishment. Give yourself a 10-minute break for each 50 minutes that you spend studying. Allow yourself some "chill" time at the end of the day. (Of course, rewards should be appropriate to the task!)

## Campus, Internet, and Other Resources

References:

Lakein, A. **How to get control of your time and life.** Signal, 1973.

Lehmkuhl, Dorothy & Lamping, Dolores Cotter. **Organizing for the creative person.** Crown Publishers, 1993

Moskowitz, Robert. **How to organize your work and your life.** Doubleday & Co., 1981.

**Vanderbilt Psychological and Counseling Center**

615-322-2571

Baker Bldg.

<http://www.vanderbilt.edu/pcc/>



# Women's Health Issues

The American College of Obstetricians and Gynecologists (ACOG) recommends that all women have their first annual well woman health exam at the time they start having sex or at the age of 18, whichever comes first. This exam will help to detect any problems or abnormalities you may have so they can be treated early. The annual well woman health exam will consist of the following: basic history and physical, a breast exam, a pelvic exam with pap smear and contraceptive counseling.

**The Basic History and Physical:** The clinician will ask you questions about your medical, family and sexual history and will perform a basic physical exam. The exam consists of looking in your eyes, ears and mouth, listening to your heart and lung sounds and feeling your abdomen.

**The Breast Exam:** The purpose of the exam is to check your breast for lumps. The clinician will ask you to raise one arm over your head. Taking his/her hand and pressing in a gentle motion around your breast tissue and under your arm. They will squeeze the nipple to check for discharge and check under your arms for swollen lymph nodes. Then they will examine the other breast in the same manner. If you have any questions or concerns about performing breast self-examinations (BSE), please do not hesitate to ask them at this time. Note: it is best not to do the BSE during your period as it is normal to have some lumps during this time.

**The Pelvic Exam and Pap Smear:** The clinician will examine your reproductive organs including your ovaries, uterus, cervix, vagina, and vulva. To view the cervix, your clinician must insert a sterile instrument called a speculum into your vagina. The speculum is made either of plastic or metal. While the speculum is in place your clinician will perform a pap smear by gen-

tly scraping some of the cells from your cervix and will send the sample to be tested for precancerous or cancerous cells.

Your clinician also may take a sample of the mucus around your cervix so it can be tested for sexually transmitted diseases (STDs) such as gonorrhea, human papilloma virus, and chlamydia. It is possible to have all of these STDs without symptoms. If your clinician does not routinely take a specimen for these tests, you may ask that it be done -- especially if you have symptoms or concerns about your sexual partners. HIV testing will require a blood test, sometimes on more than one occasion.

Finally, your clinician will feel your uterus and ovaries. Wearing an examination glove, he/she will insert one or two lubricated fingers into your vagina and then press down on your lower abdomen with the other hand. Your clinician will notify you of the results of the test and discuss further treatment if a problem is found. You should call if you have not received any results within a few weeks of your exam.

**You should notify your health care provider immediately if you have any of the following signs or symptoms:**

- Abnormal or heavy vaginal discharge that itches, burns, has an odor, or causes you discomfort
- Breast pain, lump, or discharge from the nipple
- Heavy vaginal bleeding
- Bleeding between periods
- Missed periods or an irregular menstrual cycle
- Painful menstrual cramps
- Painful intercourse

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## The Breast Self-Exam

You should do breast self-exams at the same time every month. Usually after your menstrual period ends is the best time. Another great time to do an examination is the day after you have seen your health care provider for a check-up, and he or she has said that your breasts are healthy. Then you'll know that all the "lumps" you feel in your breasts are just normal glands.

### Lying down:



- First, place a pillow under your right shoulder.
- Next, put your right hand under your head.
- Check your entire right breast area with the pads of the fingers of your left hand.
- Use small circles to feel all around your breast, then feel up-and-down (see the diagram below):



- Use light, medium, and firm pressure over each area of your breast.
- Gently squeeze the nipple to check for any discharge.
- Switch arms and repeat these steps on your left breast.

### Before a Mirror:



- Check for any changes in the shape or look of your breasts.

- Note any skin or nipple changes such as dimpling or nipple discharge.
- Look at your breasts in four steps: arms at sides, arms overhead, hands on hips pressing firmly to flex chest muscles, and bending forward.

### In the Shower:



- With soapy hands and fingers flat, raise your right arm.
- Check your right breast.
- Use the same small circles and up-and-down pattern described above in the "Lying Down" position.
- Switch arms and repeat on your left breast.

Taken from [www.youngwomenshealth.org/breast\\_health.html#bse](http://www.youngwomenshealth.org/breast_health.html#bse)

## Campus, Internet, and Other Resources

Consult with your **trainer** or **team physician**.

### Student Health

615-322-2341

Zerfoss Bldg.

[http://www.vanderbilt.edu/student\\_health/](http://www.vanderbilt.edu/student_health/)

### Margaret Cuninggim Women's Center

615-331-1200

419 Welshwood Dr.

<http://www.vanderbilt.edu/WomensCenter/women.html>

**Wellness Resource Center**

615-343-6073

Student Rec Center

<http://www.vanderbilt.edu/wellnesscenter>

[www.mc.vanderbilt.edu/vicc/showcontent.php?id=174&noRandImg=true](http://www.mc.vanderbilt.edu/vicc/showcontent.php?id=174&noRandImg=true)

[www.breastcancer.org/dia detec exam 5step.html](http://www.breastcancer.org/dia_detec_exam_5step.html)

[www.komen.org/bse/](http://www.komen.org/bse/)

[www.healthywomen.org/](http://www.healthywomen.org/)

[www.youngwomenshealth.org/](http://www.youngwomenshealth.org/)

[www.youngwomenshealth.org/pelvicinfo.html](http://www.youngwomenshealth.org/pelvicinfo.html)