

# Conversations

*On Jesuit Higher Education*

Fall 2018  
Number 54



## Mental Well-Being and Illness

Our campuses show they care

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# Conversations

On Jesuit Higher Education

## Mental Well-Being and Illness



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# Mental Well-Being and Illness

The **Conversations seminar** meets three times a year to discuss issues, identify themes, and plan future issues, suggesting authors, specific topics, and places to write about. We rotate the schedule through the 28 AJCU schools. It is an upbeat time, especially meeting faculty and students for lunch and discussion.

When the seminar members made their way to Gonzaga in Spokane last April, they found the campus alive. It seems that the weather had been pretty cheerless in the days before the meeting, but when we got there the sun was shining and the air was warm and the students were all soaking it in. Smiles, excited conversations, lounging about, or strolling slowly gave the campus a feel of contentment.

When I arrived I had to look for the Jesuit community, which had been moved from where I knew it before. I went into an office to ask, and a bright young man told me, "Oh, it's just over across the yard." When I asked if he could point it out for me, he said, "Oh, no. I'll walk you over there. I want to get outside. It's great out!" I suggested he could give me a tour of the campus, but he thought that might be stretching things.

We know from the articles in this issue of *Conversations* that not everything on every campus is so bright and cheerful. As in any human society, issues arise. The intensity of campus life perhaps heightens those issues. But so too, there is a remarkable willingness and competence to confront issues, to provide support, to promote health and well-being.

The stories here study a wide array of issues from anxiety to discrimination, from the stress of the undocumented to sexual identity. Some of the stories explore issues from the personal experience of the writer. All of the stories show

important aspects of the issues involved. And they all show clearly that someone cares. Not someone, but rather many, many faculty members, administrators, and students themselves care a lot.

Three of the articles describe very specific programs at Georgetown, Rockhurst, and Regis. Others develop well-being resources and tie them in with the *cura personalis* that many describe as distinctive in Jesuit education. Young alumni share their personal journeys as encouragement to others: You can do it! We can do it!

We have regular features too. One is a two-page spread that in word and in picture shows the **history** of one of our 28 constituent schools; this time we feature Saint Joseph's University in Philadelphia. In **Teaching to Mission**, a seminar member reflects on teaching as a ministry; this time it is a biology teacher from the very same Saint Joseph's University who shares his reflections. And we have our **Ten Questions** to prompt conversations.

A rare entry is an advertisement for a new editor! I won't go into fond farewells until a future column, but after six years I am ready to hand over responsibilities to a new editor. Please consider this advertisement!

**Edward W. Schmidt, S.J., editor**

## Corrections:

In issue #53 the photo on the inside back cover was incorrectly identified as John Carroll University. It is in fact of the University of Scranton. Also, on page 24, in the story from the University of Detroit Mercy, *Live6* was established by the university and The Kresge Foundation, not "by major businesses," as stated. Also, Lauren Hood, the first Interim Director of *Live6*, is no longer with the organization.

## The National Seminar on Jesuit Higher Education

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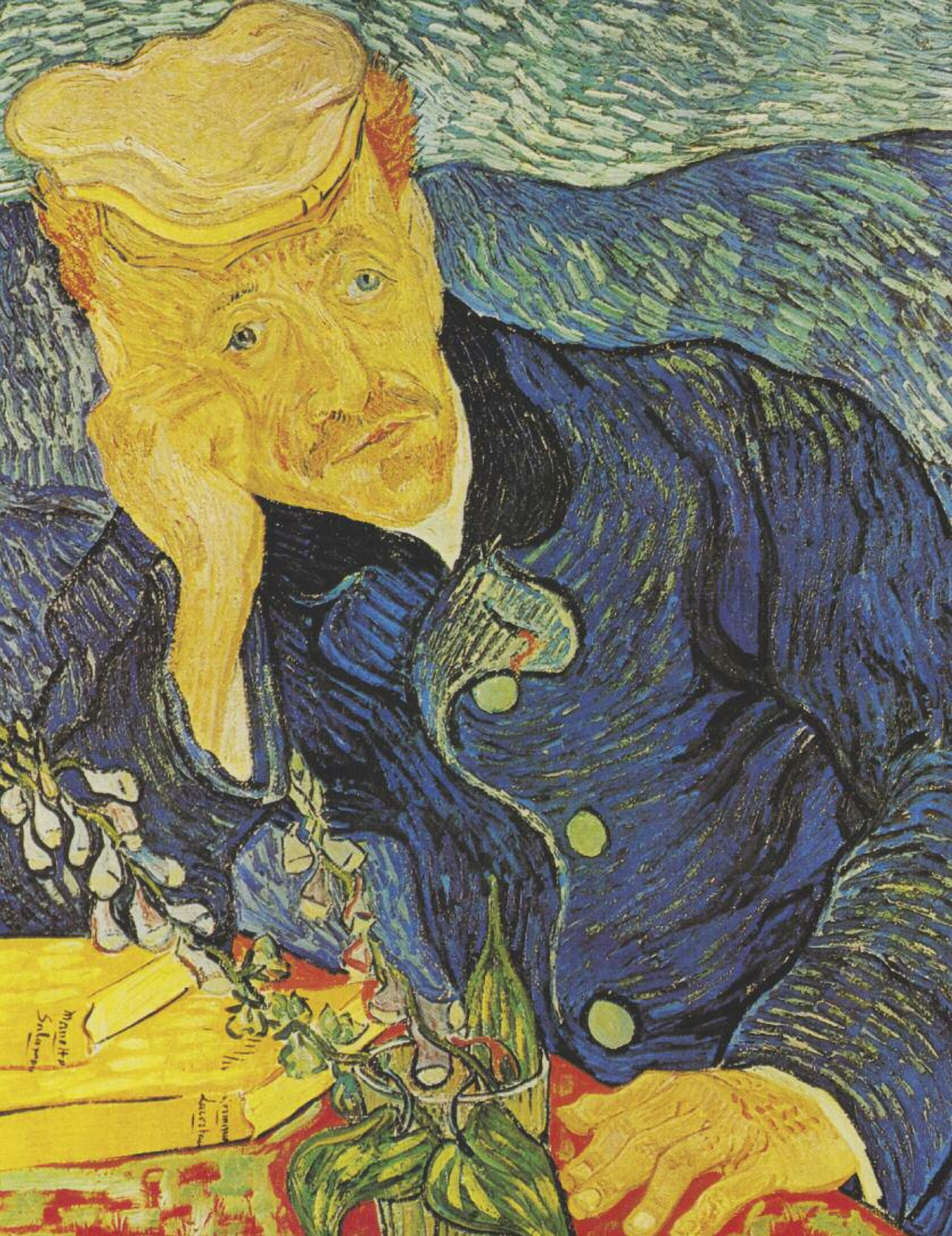
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**COMING UP** Issue #55 (Spring 2019)  
Mission Impossible? A Reality Check







# A Healthy Community Builds on Acceptance

By Patrick J. Howell, S.J.

**The increased prevalence** of mental illness on our college campuses offers us an opportunity to be advocates, even prophets, for a profound shift in society's attitudes towards mental illness. The Jesuit charism to "educate the whole person" offers a rich opportunity to examine how well we promote a healthy mental life, a vigorous and realistic spirituality, and an updating on the old adage of Jesuit educators: *mens sana in corpore sano* – a healthy mind in a healthy body.

As faculty and fellow students we journey with, know, and love those afflicted by mental challenges. And the situation allows us all to become better educated, more compassionate, and more supportive of students, as well as those in the wider arena of society who suffer from mental illness.

I myself had a severe, acute psychosis in 1975 while I was making an eight-day, guided retreat. By then I had been a high school administrator for three years. The times were volatile, the Viet Nam war protests and upheaval in college campuses had cascaded on down to the high schools. I felt the social, cultural pressures enormously stronger than when I had left the U.S.A. six years earlier to study theology in Rome, prior to my ordination. More important, I was 35, an age when biological, sexual, psychological, and spiritual concerns, left unintegrated at an earlier stage, can boil upward for reconsideration.

I was fortunate that Jesuit friends intervened early as I unraveled with an acute psychosis. They secured my admission to the Province Hospital psychiatric ward where I received first-rate care in a recently reconfigured treatment program, incorporating the best in contemporary psychiatric treatment, including not only psychotropic drugs but

consideration of social, psychosexual, and spiritual issues as well. It was a healthy secular version of *mens sana in corpore sano*.

A turning point for me, obvious only years later, was when the attending psychiatrist asked me, after I had been in the hospital for two weeks, whether I would be willing to share my experience of the psychotic breakdown with a group of police officers that he was working with in order to train them about how to recognize and intervene with people with mental illness. The police, we know, are often the first responders – most often when patients wander away and are disoriented, but also, in rare circumstances, when someone threatens violence. I agreed reluctantly. I don't recall what I said to the officers, but I tried to describe as best I could all the turmoil and bizarre thoughts that had coursed through my whole being. Later to help people understand the experience of a psychosis I said, "Recall one of your dreams. It doesn't matter whether it was a nightmare or pleasant. Then imagine that you moved into that dream, that you were living it out some way in your day-to-day life and becoming more and more confused each hour as the dreams both coincide and clash with what is going on around you." I had also had a few grandiose ideas. I knew if I passed this test I would be "called to the Vatican to straighten it out!" Another was that somehow I had died, and I was moving betwixt and between the living and the dead.

After that encounter with the police officers, I resolved that in the future, despite the stigma, I would not try to hide my breakdown, but, whenever it seemed helpful and informative, I would share my experience with others.

So I have done that. It has been a rich journey – most of all in solidarity with people with mental illness and their families, who may be living with or dreading chaos every day – for years.

My healing came slowly. I had intensive psychotherapy for 20 months from a wonderful, caring, intelligent psychiatrist. Fortunately, in those days before H.M.O.s, health insurance covered 50 percent of the costs. By today's standards, psychotropic drugs 40 years ago were still somewhat primitive. I was on Thorazine, the granddaddy of psychotropic drugs, discovered by the French in 1952 and widely used after 1953 in the United States. It shut down my rapid-fire thinking and emotions by inhibiting dopamine and serotonin. The side effects from extended use could be devastating – Parkinson-like shaking and tardive dyskinesia or distorted, uncontrollable motions of the mouth and tongue. When the psychiatrist explained what could happen, my anxiety levels doubled. Not long after, I read that one third of those who had a breakdown, such as mine, fully recover; one third recover but need ongoing treatment; and one third get worse. Not all that encouraging. The statistics are much more positive today for a well-managed recovery.

After six months, I was able to return to some light teaching, later some parish work, and eventually full time teaching, but that was after I had had a second and final hospitalization. Three years later I became a high school principal again, highly successful this time. Two years later, I made the second 30-day Ignatian retreat expected of all Jesuits. By then, I was fully aware of all the elements that I needed to sustain a healthy spiritual, mental, and physical lifestyle. The retreat was a time of profound inner healing, a quiet felt sense of God's gracious presence, akin to a sanctuary light quietly glowing in the dark.

Not long after that retreat, I began writing up my experience, which resulted in my first book, *Reducing the Storm to a Whisper: the Story of a Breakdown* – with the title taken from Psalm 107:28-29:

Then they cried out to the Lord in their trouble,  
and he brought them out of their distress.  
He stilled the storm to a whisper;  
the waves of the sea were hushed.

## Part Two

Because of my experience with mental illness, the members of the National Seminar board quickly singled me out to write this keynote, which I was happy to do. I will not go into a lot of specific recommendations. Other authors are covering these. Instead, I propose exploring our Jesuit charism of “educating the whole person.” What are we best at? I suggest that it's a unified, well-integrated exploration of the multiple resources needed for a healthy mental, spiritual, and physical life. Most of all, it's a respect for the dignity and gifts of every human being – realized in community.

A method of theological reflection helps us explore three dimensions:

### Incarnate Spirit

Jesus, the Son of God, became incarnate. He became human, embodied flesh and blood. So it's vital for us as brothers and sisters in Christ to attend to the body. St. Paul says, “You are temples of the Holy Spirit.” That's a sacred space. So we have a near-sacred obligation to care for our bodies – not in some idolatrous, glamorous sort of way, but with common-sense attention to the ordinary means of *mens sana in corpore sano*. One of the first questions I'll ask someone who comes to me in distress is, “How are you sleeping?” A good night's sleep is one of the best cures for what ails you. Another question is, “What kind of physical exercise do you regularly practice?” And so forth. Check the basics. Listen to your grandmother. “Eat up, sleep tight, say your prayers, help someone out each day.” Keep things in perspective. The trap of universities is that we view our bodies instrumentally. The “life of the mind” without a holistic lifestyle leads to craziness.

### Breaking Stigma

The biggest obstacle to caring or self-caring for people with mental illness is stigma, the subtle societal whispers, “You're not OK. You're not one of us. You're strange. You don't belong here.”

The one clear and consistent act of Jesus in his ministry was breaking stigma. He welcomes tax collectors, prostitutes, sinners – everyone – to the table.

His healing ministry was one of table fellowship. He welcomes lepers, the most stigmatized group in his society. Less apparent is how he welcomes and heals people with mental illness. The category didn't exist then. Those with paranoid schizophrenia, bipolar illness, or obsessive-compulsive behaviors were viewed as possessed by demons. Mary Magdalene, from whom Jesus cast out seven demons, could very well have been bipolar. Certainly the so-called demoniac portrayed in the Gospel of Mark 5: 1-20 likely had paranoid schizophrenia. His local village chained him to the tombstones in the cemetery. They considered him already dead. Jesus upsets the "normal" by casting "Legion" into the herd of swine that then spooks and plummets over a cliff to their deaths. The villagers ask him, "Please leave, you're totally upsetting our 'normal' lives and livelihood." Meanwhile, the man who is cured is peaceful, fully clothed, even radiant, not unlike the angel at the grave of Jesus announcing his Resurrection.

Of course, such stigmatized people could not worship in the Temple because they were unclean. So when Jesus heals the ten lepers, he tells them, "Go show yourselves to the priest." He restores them to community. In fact, biblical healing is always restoration to community. Jesus breaks the stigma that diminishes the humanity of people.

One third of the Gospel of Mark relates miracle stories and half of these deal with "demon possession," often enough the ancient code for people with mental illness. Yet how often do we hear sermons preached which highlight the social sins of stigma, of oppression, of diminishment of other people by shaming them? What a great opportunity for Jesuits and others to preach the Gospel!

Multiple ways exist to reduce stigma on our campuses. Fortunately, Jesuit campuses are already welcoming spaces for the LGBTQ students, for DACA students, and so forth. We have the pattern of hospitality and acceptance; let's extend it now to students with mental illness issues.

## Soul, Psyche, and Society

For ten years a United Church of Christ minister and I hosted an annual symposium at Seattle University, entitled "Soul, Psyche, and Society." It addressed the crucial factors: excellent medical care,

addressing cultural, social dysfunctions, and exploring mental illness as a faith journey supported by a faith community.

It had these features: (a) someone witnessing by telling their own story of mental illness, its challenges, his or her spiritual life or religious community that enabled their journey through this dark night; (b) a scientific, medical lecture by a health professional explaining the dramatic chemical imbalances that occur in the brain; (c) a model of accompaniment that could be adopted by churches or schools to welcome those beset by mental illness; (d) and finally, a presentation of a few key community resources by NAMI, the National Alliance for Mental Illness, such as its family-to-family support groups, which could be adapted to a campus setting. The core belief of this symposium was the Jesuit vision of the whole person: *mens sana in corpore sano*.

Besides a symposium, it's time that the multiple resources on our Jesuit campuses come together in a concerted, unified effort to address mental illness in an academic, scholarly way – not just within one's own discipline but in a creative, interdisciplinary way.

For someone having a breakdown, early intervention and good medical treatment are vital. So wouldn't it make sense on our campuses to have a training module for staff and faculty members so that they would recognize early warning signs and make appropriate referrals, either to the campus counseling center or to more acute psychiatric care?

Someone has said that the best gauge of the health of a society is how well it cares for its children and for people with mental illness. It's a good measure. And we can propel ourselves forward on this journey together by believing "Whatever you did for the least of my brothers and sisters you did for me" (Matthew 25:20).

*Patrick J. Howell, S.J. has taught pastoral theology at Seattle University for three decades. He is the author of Reducing the Storm to a Whisper: the Story of a Breakdown and A Spiritguide through Times of Darkness. He has been on a leave of absence from the university to be Executive Director ad interim at the Loyola Institute for Spirituality, Orange, CA.*

# Linking the Collegiate Well-Being Movement and the Jesuit Tradition

By David Bryngil

**Wellness programs** began to formally emerge on college campuses in the 1980s. Most commonly rooted in areas of student affairs, such as campus recreation and health services, wellness initiatives were focused on the notion of promoting holistic physical and mental health to students and, in some cases, to faculty and staff as well. The “wellness wheel” became a familiar icon at universities. Professional organizations such as NIRSA: The Leaders in Campus Recreation (NIRSA – National Intramural-Recreational Sports Association) adopted and championed wellness. Over the next three decades collegiate wellness programs continued to expand.

In 2015, the collegiate world began to pivot from a wellness model to a well-being model, with the signing of The Okanagan Charter: An International Charter for Health Promoting Universities and Colleges. This charter, developed with input from 380 professionals from 45 nations, created a framework to guide the development of Health Promoting Universities and Colleges. The charter created two calls to action for institutions of higher education: to embed health into all aspects of campus culture, across the administration, and in operations and academic mandates, and to lead health-promotion action and collaboration locally and globally. The Okanagan Charter was the launching pad for higher education professionals to reimagine what healthy and well college campuses should look like. Soon the collegiate well-being movement was born.

Embraced widely by both NIRSA and NASPA (National Association of Student Personnel Administrators), well-being emerged as an aspirational outcome for higher education. While wellness promotes moving beyond just the absence of physical disease and ailments through the integration of social, men-

tal, emotional, spiritual, and physical aspects of health into a person’s life, well-being is derived from Aristotle’s notion of *eudaimonia*, translated as “happiness” or “human flourishing.” Aristotle believed that a human being must live well and do well in all aspects of life in order to experience true happiness, not just ephemeral pleasures. *Eudaimonia*, when achieved, would result in a person who is thriving in life. This concept is central to the collegiate well-being movement. This movement is also rooted in two other meaningful concepts: that it is the moral responsibility of universities to prepare students not just for better careers but for better lives and that university faculty and staff need to thrive in life just as much as students do. Universities need to have employees who can adequately role-model a pathway to well-being for their students. Saint Ignatius of Loyola stated, “The person who sets about making others better is wasting his or her time, unless he or she begins with himself or herself.”

Ignatius’ idea certainly reinforces the notion that the well-being of a faculty and staff is essential for them to be best positioned to serve students. Thus, the collegiate well-being movement strives to change university culture and mission on their journeys towards “thriving” or “flourishing.”

Inspired by the findings of *Great Jobs, Great Lives: The 2014 Gallup-Purdue Index Report*, the collegiate movement has widely adopted five areas of well-being: Purpose, Social, Financial, Community, and Physical. The report indicates that “the odds of thriving in all areas of well-being more than double for college graduates when they feel their college prepared them well for life outside of it.” As a result of this finding, along with the calls to action from The Okanagan Charter, the collegiate well-being move-



ment has started to blossom. Across North America the wellness model is shifting to a well-being model. In many instances, though, institutions are struggling to align well-being outcomes with their own university missions. Jesuit colleges and universities, however, are uniquely positioned to adopt the well-being model.

In essence, Jesuit education has been fostering well-being for hundreds of years simply by following the Ignatian principles that are the foundation of all of our colleges and universities. Jesuit education has always been rooted in the development of the whole person. Aristotle's philosophy of *Eudaimonia* also promotes the benefits of holistic growth. The classical basis of the collegiate well-being movement and the Jesuit ideal of developing the whole person share a natural synergy that can drive the establishment of well-being programs at Jesuit institutions. Students often choose to enroll at Jesuit schools because they seek the value of a liberal arts education and our commitment to *cura personalis*. Discernment most certainly is beneficial to helping one develop Purpose, and the idea of producing "men and women for others" supports Community and Social dimensions. The Jesuit history of promoting social justice links well to the areas of Purpose, Community, Social, and Financial. *Magis* as a concept is relevant to all of these areas as well.

Our students recognize the Jesuit track record for developing well-rounded, thoughtful individuals. The collegiate well-being movement has emerged with a similar desire to produce graduates who are prepared for life after college because they have had an opportunity to explore "the bigger picture." Well-being challenges colleges to make the long-term existence of their students better. Jesuit education has answered this challenge since its inception. Finally, Jesuit higher education has always

**"The person who sets about making others better is wasting his or her time, unless he or she begins with himself or herself."**

*—Saint Ignatius of Loyola*

strived to nurture faculty and staff who embrace Jesuit values and integrate them into their own lives. This application of *cura personalis* to university employees has long been a predecessor to the idea that well-being needs to be fostered in faculty and staff, not just students, in order to have a flourishing campus community.

With the foundation of Jesuit education in place, our colleges and universities should conduct an introspective examination in order to promote a well-being model that is contemporary, relevant, and inclusive of every community member. While campus professionals lead the well-being movement, only the entire institution can develop a truly successful well-being program. A "top down approach," bolstered by true collaboration across divisions and departments, is essential for launching a sustainable well-being initiative.

At Jesuit universities, Mission and Ministry plays a vital role in the support of well-being. Adequately linking our mission to these programs will continue to create a unique, caring environment on our campuses. Step one is building a well-being program with unified vision and institutional commitment. Step two is assessment that identifies areas of strength that already exist on campus, as well as gaps that need to be filled in order to support well-being. Step three is creating a collaborative strategic plan for the implementation and sustainability of well-being. In the end, the marriage of the collegiate well-being movement and Jesuit tradition can only result in a campus community that is better prepared to thrive and flourish.

*David Bryngil, the executive director of Wellness & Recreation, has served as a student affairs administrator and adjunct lecturer at Saint Peter's University since 1992.*



# The Practice of Yoga and *Cura Personalis*

By Rachel Wifall

Scientific studies have determined that we can enhance both our physical and mental well-being through the practice of yoga. People tend to associate yoga with “stretching,” which is helpful for releasing stress and avoiding injury; however, it is much more. Practicing yoga both lengthens and strengthens muscles and creates space and flexibility in the spine. It can also lower stress hormone levels and stimulate the lymphatic system, minimizing inflammation and removing toxins from the body. As a professor of English literature at Saint Peter’s University and a yoga instructor at the campus recreational center, I feel privileged to be able to provide forms of *cura personalis*, or care for the whole person, to my students, colleagues, and neighbors – from the classroom to the boardroom to the mat. My yoga classes have become





The Saint Peter's University Men's Baseball Team performing Virabhadrasana 2 (Warrior 2)

increasingly popular over the past few years, and this interest would seem to speak to a growing national need for holistic care of the self.

The Sanskrit word “yoga” means “union” or “connection,” and the practice of yoga connects the body and mind. It does not only incorporate physical *asanas* (poses), but it also includes mindfulness and meditation: a focus on deep breathing (*pranayama*) and looking inward, thereby calming the nervous system and aiding with focus and introspection. *Yama*, one of the “eight limbs” of yogic philosophy, is a set of ethical standards which includes *ahimsa* (nonviolence) and *satya* (truthfulness).

This issue of *Conversations* magazine was inspired by the fact that university students are increasingly seeking help for anxiety and depression, and many campus counseling centers are finding

themselves overextended and overwhelmed. I myself have been approached by students struggling with stress and lack of motivation; while I refer them to the Center for Counseling and Psychological Services, I am not hesitant to let them know that I too have suffered with anxiety and depression, and I also suggest that they come to my yoga class. If they take my advice, the results are always good. Student Elizabeth Demers ('20) gave yoga a try and now claims, “Yoga helps me quiet my mind and challenge my body. Although it’s a lot of stretching and physical effort, the end feels like a full body massage, mental peace, and an affirmation of my capabilities.”

Word has gotten around campus, and every week I see a growing number of both regulars and newcomers in class. I’m glad to see an equal interest from males and females, athletes and non-athletes, and people from a wide range of

ethnic backgrounds. Some colleagues and students have asked for the university to offer more yoga classes and have even come to classes which I teach off campus. Athletic coaches have been encouraging their team members to come to yoga class. Swim team member Daniel Betts ('19) claims, “Yoga increases flexibility in my shoulders and hips, which are crucial components to fast swimming. Also, breath control is a huge asset I take away from yoga, considering swimming is a sport where much of the time spent is holding one’s breath.” The men’s baseball coach has asked me to give his team private lessons, and the players have been surprised by the efficacy of yoga. Baseball player Nicholas Ciocco ('18) admits, “Taking yoga has been a much more meaningful experience than I anticipated. As a person who is not flexible in the slightest, I have realized

## Service Dog Program

Author Rachel Wifall speaks with great affection of the service dogs she has come to know, another factor in wellness. Dr. Wifall's colleague and friend at Saint Peter's University, chemistry professor Pat Redden, trains service dogs to help individuals with special needs. Her first trainee, Ella, did not finish the program but instead became Dr. Redden's pet. Ella (photo below) is a registered therapy dog who comforts students at the library during final exams. Dr. Redden is now leading Vincent (pictured here) through the 16- to 18-month course to become a service dog. Students and staff have begun raising aspiring service dogs through her agency.



Saint Peter's University community members in Balasana (Child's Pose)

that yoga is much more than just stretching and working your core. It has given me the opportunity to reflect upon myself and get relaxation which I never thought I needed."

Besides offering yoga classes as part of their recreational offerings, Jesuit universities might consider hosting the workshop or retreat with Ignatian Yoga, founded by Bobby Karle, S.J., and Alan Haras. Their mission statement reads: "Ignatian Yoga is a collaborative ministry of Jesuits and lay people that integrates the spirituality of St. Ignatius Loyola and the practices of yoga and meditation. Ignatian Yoga invites participants to reflect on God's presence in their life experiences, connecting mind, body and spirit with a diverse array of old and new practices." Ignatian Yoga combines the traditions of Ignatian spirituality (the examen, Ignatian discernment, Ignatian contemplation, communal prayer, and group sharing) with the practice of yoga *asanas*, breathing, and meditation. According to

Karle, it is becoming quite popular. In response, he would like to expand the practice and bring other instructors into the movement.

On YouTube, James Martin, S.J., notes that there has been some pushback from those who do not approve of linking yogic traditions with Christianity; however, he encourages everyone to try Ignatian Yoga, remembering that "we are embodied creatures" and that, as Thomas Merton would assert, we can learn from other spiritual traditions. Jesuit priest and Hindu scholar Francis X. Clooney finds commonality between Jesuit spiritual exercises and yogic traditions and claims that these practices can be "friendly partners." This has certainly been my experience.

*Rachel Wifall is an associate professor of English literature at Saint Peter's University, specializing in Shakespearean drama. A registered yoga teacher, she has been practicing yoga since 1999 and is also a member of the Conversations seminar.*



# It's OK to Talk About These Things

Regis University Faculty Members

## Introduction

Last year, a group of faculty members and the provost at Regis University shared their experiences with mental disorders with the Regis community. In the fall we had suffered through several suicides by members from our community, and much of the campus was reeling in pain. The suicides had several effects, including increasing awareness of mental health issues, increasing people's willingness to get professional help for their suffering, and for some people possibly triggered latent symptoms. This led to students increasing their use of counseling services and also confiding their troubles to faculty and staff more than they had previously. Regis responded with several education, training, and outreach efforts. Some faculty members and the provost have been personally impacted by mental illness, and we wanted to do our part to increase awareness and decrease stigma, as well as to be role models for willingness to be vulnerable in front of others and for seeking out help when needed. In the fall, Abigail Gosselin shared her own story with bipolar illness (manic depression) in an evening discussion; in the spring three faculty members and the provost shared their stories about anxiety, obsessive-compulsive disorder, attention-deficit/hyperactivity disorder, and major depression. In the following narratives, three of us describe the reasons why we share our stories with the Regis community.

## Decreasing Stigma of Mental Illness

In my first year at Regis, I had a student in one of my introductory philosophy classes who was noticeably struggling, not only academically but also behaviorally. He ended up having to leave midway through the semester, and I learned later that he had bipolar disorder, an illness I also have. After seeing him suffer and wanting desperately to be able to connect with him, I decided to be open about my illness from then on. If he had known I was bipolar probably nothing would have changed; yet I hoped that in being open I could give students with this illness a point of connection and a resource. I wanted to show them that one can suffer badly from a mental illness and yet still be a functional member of society and have both career and family.

Being open about my struggles has made me a better teacher and mentor. In connecting with students, I often draw upon my own vulnerability and my experiences with suffering, and I model being vulnerable in front of others and seeking help when I need it. Over the years, I have mentored many students with mental health and substance use issues, and I have told my story to many groups of students in an effort to increase understanding and decrease stigma. My personal experiences allow me to approach my integrative core classes on mental health and drugs and society in a distinctive way, and my students seem to



get more out of those classes as a result. Although my bipolar illness has made my job challenging, being open about my struggles has allowed me to connect with people in important ways and to carry out the Regis Jesuit mission more deeply.

*Abigail Gosselin is a professor of philosophy at Regis University in Denver. Her current work is on the intersections between mental illness, agency, and stigma.*

## Prevailing with the Struggle of Clinical Depression

In my first six months as provost, I attended seven funerals of members of the Regis community. Five were suicides. People didn't say the word out loud; I heard dozens of euphemistic phrases for killing oneself. This in-

ability to say the words out loud hampers our ability to deal with pain and reinforces the perceived stigma around mental health issues. I understand this hesitance. I come from the Midwest, where mental illness is often judged as a character flaw that a person can "get over" if one is just determined to be well.

I decided to come out, so to speak, with my own struggles with clinical depression as a counterweight to this perception. If a provost can struggle with mental health issues and prevail, then there is hope for others who may see their mental illness as an immovable barrier to a successful and happy life. I served on a panel and shared my own struggles with clinical depression, which first revealed itself during graduate school. For at least two decades, I tried to "tough it out," buying into the rhetoric that my frequent "despair with no name" was a choice that I could change.

At my lowest point, I tried to give my dogs to my next door neighbor so that I could gas myself with carbon monoxide knowing they would be cared for. To her credit, my neighbor refused and gave me the name of her brother-in-law, a psychiatrist. Fifteen years later, I credit him with both saving my life and giving me a future filled with accomplishment and joy.

Students, faculty, and staff need to feel comfortable saying the words, speaking the names, asking the questions. We are more powerful than we know in saving lives and giving back futures.

*Janet Houser is the provost and a professor at Regis. She has authored six books in research and statistics and was a member of ICP Cohort 2.*

## Shedding Light on Postpartum Obsessive-Compulsive Disorder

In 2013, I gave birth to my beautiful daughter, Ruby. I fell in love with her instantly. Yet, soon after giving birth, my love for Ruby mixed with fear, and I began having scary thoughts. What if I threw her down the spiral staircase? What if I stabbed her with a knife? What if I drowned her in the bathtub?

Terrified, I tried to control my thoughts by repeating certain phrases to myself. I also repeated musical patterns in my mind; I rearranged knives; I avoided the



spiral staircase; and I constantly checked the temperature of Ruby's room.

Soon I was diagnosed with postpartum obsessive-compulsive disorder (PPOCD), a condition that affects up to nine percent of postpartum mothers, and some fathers, too.

Pop culture depicts OCD as a preoccupation with tidiness, but OCD is actually a serious disease of panic brought on by intrusive thoughts. Admitting these thoughts is horrifying. At first, I kept my disease secret from anyone other than healthcare providers, close family members, and one friend. I felt like a monster, and I was ashamed.

In 2015, I decided to write a piece called "String Quartet OCD" about my suffering. In 2016 and 2017, through performances, lectures, and media interviews, I went public with my story.

My students attended some of these events, and I began to speak openly to them about my suffering. I wanted to spread awareness about PPOCD and to reduce the stigma of mental illness. It is wrenching to speak shameful thoughts aloud. There is great power in doing so, however, not only in the relief you feel about telling the truth, but also in empowering others to speak their truth about mental illness.

As educators, we often tell students that we must not avoid difficult conversations, but rather work through them to greater understanding. By sharing our own difficult stories, we model this in a personal and authentic way.

*Loretta K. Notareschi is a composer and an associate professor of music at Regis University. Her TEDx talk, "Understanding Mental Illness Through Music," is available online.*



## Conversations Seeks New Editor

**Conversations**, the national Jesuit magazine for the 28 universities and colleges, seeks a new editor. Fr. Ed Schmidt, S.J., will have completed six years in this role by April of next year. He has worked with our layout editor and the Seminar board to take the magazine a much higher degree of excellence and readability, including a shift to full color throughout the magazine. The National Seminar in Jesuit Higher Education, which publishes *Conversations*, is now looking for a new editor who can advance the magazine in a multitude of ways, which will include both printed and online capacities. For all past issues see [www.conversationsmagazine.org](http://www.conversationsmagazine.org) as well as <http://epublications.marquette.edu/conversations/> for the earliest issues. The growth area will be in social media and digital capacity.

### Qualifications

The successful candidate for editor will have experience in Jesuit higher education, capacity for organizing the directing a publication, a high degree of expertise in editing, and capacity to gauge the audience for the magazine. He/she should have a breadth of interests and sensitivities in order to ensure that multiple and diverse points of view on our campuses are represented.

### Compensation

A modest stipend goes with the position of editor. All expenses, including travel, are covered.

### Application

Please submit a letter of interest, along with a Curriculum Vitae, to

Patrick Howell, S.J., chair;  
National Seminar on Jesuit Higher Education  
Seattle University  
924 E Cherry St.  
Seattle WA 98122.

For further information, you may contact Father Howell ("Pat") directly at 206-296-6356 (o) or at [patrickh@seattleu.edu](mailto:patrickh@seattleu.edu).

# Active Minds Project Breaks Stigma

By Mia Zanaboni

The Rockhurst University community is continuously evolving as seniors graduate, freshmen arrive, and sophomores and juniors continue on. However, there is no doubt that some students, some faculty, and some organizations create a lasting change to this campus. Active Minds falls into this category.

In 2016, my sister, Tori Zanaboni, noticed a need on campus for more conversation about mental health. Instead of staying silent in the face of a challenge, she approached it head-on. Tori, along with Gracy Kubicki and Jack Reid, gifted the campus and students like me with a chapter of Active Minds. Active Minds is a national organization whose mission is to empower students to start conversations about mental health, break the stigmas surrounding mental illness, educate, and encourage help-seeking. A student from the University of Pennsylvania named Alison Malmon founded Active Minds when her older brother, Brian, died by suicide in 2000. Because of the stigmas surrounding mental illness, he hid his symptoms of psychosis and depression for years. Alison was determined to create an environment where students feel comfortable to share their struggles and find help. Soon afterward, the organization Active Minds Inc. was created.

The Rockhurst community has been supportive of the new Active Minds chapter since its origin.

What students find so intriguing is that the goal of Active Minds is not to gain anything, but rather to help create an environment of openness and conversation on our university's campus. It is the inherent values of inclusivity and hope, which Active Minds preaches, that draw people to it and make them want to get involved. In just a few years, Active Minds has encouraged faculty, students, and staff to talk more about mental health in their day-to-day lives. In fact, student Gretchen Boxdorfer ('19) suggests that "people are more comfortable asking for help when they need it now that Active Minds has started to de-stigmatize mental illness." People are now more accepting of these conversations than ever before.

The Rockhurst University chapter strikes up these conversations about mental health on campus by hosting a variety of speakers, chapter meetings, awareness weeks, and tabling activities on campus. One of the favorite and most impactful programs is "Be the Light," an event where four students give testimonies about their own mental health journeys. The speakers, ranging from a senior fraternity president to a brand new freshman, show all of those in attendance that mental health is no different than physical health and that it must be regarded in the same esteem. The acts of courage that these students display undoubtedly

break the silence that most people wield to protect themselves against the stigmas of mental illness.

I most notice the change that Active Minds has created in the small ways. It is much more likely for me now than it was before Active Minds to hear a casual conversation between two students asking one another about how they are coping with stress or sharing ideas on how to take "mental health breaks." The change is also noticeable in big ways, such as updating the student ID cards to include the national suicide prevention hotline and Rockhurst security and Rockhurst counseling center phone numbers. Because of these changes, Abby Mason ('20) believes that Active Minds "has helped normalize mental illness, creating a safe place full of respect, understanding, and acceptance." Our goal is that one day building this safe environment and continuing these positive conversations about mental health will be so natural that an organization such as Active Minds is no longer even needed.

*Mia Zanaboni graduated in May 2018 from Rockhurst University with a nursing degree. She served as president of the Rockhurst Active Minds chapter and was a member of the women's varsity soccer team and the sorority Alpha Sigma Alpha. She recently began her career as a pediatric nurse at St. Louis Children's Hospital.*





In her Synaptic Transmission course, Kathy Maguire-Zeiss (neuroscience) examines the effect of sleep deprivation on the brain, body, and resulting functioning.

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# Well-being in the Curriculum

## *What Faculty Can Do to Address the Mental Health of Our Students*

By Laura D. Valtin,  
Mindy McWilliams, and  
David Ebenbach

Today's college students are facing mental health challenges at an alarming rate. According to the American College Health Association's 2017 National College Health Assessment, over half of all college students reported feeling overwhelming anxiety in the past 12 months. Nearly 40 percent of college students reported feeling "so depressed it was difficult to function," over 60 percent reported feeling "very lonely," and 87 percent felt "overwhelmed." It's clear that our college students are struggling. What can educators do to help?

This question has particular relevance for instructors at Jesuit colleges and universi-

ties, where we strive for *cura personalis* in our interactions with students. However, the idea of translating this to the classroom – giving meaningful attention to the wide range of academic, social, physical, and mental health needs of our students – can be daunting. One way to do it is to bring college mental health and well-being topics into the classroom and make them part of the open and serious academic conversations we have with students. Another way is to design our courses so that they integrate the various strands of students' disparate lives – weaving together their social and emotional lives with their

academic and cognitive lives. And most important, we can help students to develop a sense of belonging on our campuses, foster meaningful relationships, and create connections to people within our campus community who can help them not only on their academic path but also on their life journey.

## The Engelhard Project: An Experiment in Curriculum Infusion

In 2005, a group of Georgetown faculty, teaching and learning center staff, and counseling and student services professionals began to experiment with these kinds of conversations in the classroom, with the aim of destigmatizing mental health and other stressors, engaging students more deeply in their learning, and nurturing feelings of belonging and meaningful connections. Initially supported by the Bringing Theory to Practice Project, this effort is known today as the Engelhard Project for Connecting Life and Learning. The project uses a “curriculum infusion” approach, in which faculty integrate topics of mental health and well-being into their courses.

As part of the project, faculty select a specific mental health topic as the focal point of their commitment to creating space in the classroom for the “real world.” A sampling of such topics from past courses includes anxiety, depression, eating disorders, flourishing, adjusting to college, and coping with stress. The opportunities to make connections between these topics and course content are endless and can be found in unexpected places. For example, over his years of involvement with the project, Jim Sandefur (mathematics) has used math models to illustrate the effects on the human body of drug, alcohol, and substance use in his Introduction to Math Modeling course. In her Synaptic Transmission course, Kathy Maguire-Zeiss (neuroscience) examines the effect of sleep deprivation on the brain, body, and resulting functioning. These illustrations teach students about the scientific effect of human behaviors and also stimulate conversations about healthy choices and how to live a flourishing life.



### The Engelhard Project: Curriculum Infusion Model

Faculty link academic course content to a selected well-being topic through the following elements:

- Readings & Discussions
- Campus Resource Professional Visit
- Student Written Reflections

After faculty determine a mental health or well-being topic for their course, they incorporate three engagement components into their teaching: relevant readings, discussion with a campus resource professional, and student written reflections.

Faculty select class readings that illustrate and support the connection between the chosen topic, the course’s academic content, and students’ own lives. Alan Mitchell (theology) teaches Introduction to Biblical Literature with a focus on friendship and health relationships and assigns relevant biblical texts from the New Testament (specifically from Luke and Acts of the Apostles) that demonstrate the richness of friendship traditions.

To enhance the discussion of the readings and to truly bring campus life, national data, and relevant college student issues into the classroom, the faculty partner with a campus resource professional for a classroom visit and discussion – for example, a staff member from Counseling & Psychiatric Services, Health Education Services, or Campus Ministry. This visit enables a conversation with a campus expert who shares anecdotes, data, and ideas on “what to do” for oneself and others. This takes some of the burden off of the faculty member and also exposes students to the available campus resources. Putting a face and a name to the people who make up campus resources – and the campus safety net for students – can make the challenging step of reaching



out for help a little bit easier. And sometimes that little bit is all that's needed for students to seek help for themselves or for friends.

The final component of the Engelhard curriculum infusion model is a written student reflection. An essential part of Ignatian pedagogy, reflection on one's observations, emotions, and experiences, helps to process learning by noting connections, giving voice to revelations, and imagining future selves. Semester after semester, students comment that their Engelhard course – and especially the required reflection – “made me stop to think” or “gave me needed space to reflect on my own well-being that I otherwise would not have had.”

## Impact on Students

A common sentiment among students where faculty have employed this curriculum infusion model is that “it was refreshing to take a class where I felt like the professor cared about my well-being.” The students' descriptions of the Engelhard classroom environments are inspiring. Says one student, “walking into class, I felt like I was entering a tight-knit community with a professor who cared about me and everyone else in the class, as an individual person.” Heidi Elmendorf (biology) offers her 250-person Foundations in Biology course as an Engelhard course and assigns students a project in which they investigate mental illness. Alongside this work, and only after a sense of community has been built in the class, Elmendorf shares her own personal experiences with depression. In her words, it is “endlessly surprising how much it matters to students and how much they want to take us up on the opportunity to connect on a personal level” – connections between the ideas and students' lives and between students and professor.

These emotional connections also develop among the students themselves. Discussing his Engelhard course, a student reflected, “I am a senior, and this is the first time that a professor has encouraged so much community that I have known the name of everyone in class.”

Another vivid student reflection:

I felt the ice melting between each person in the room, and I realized that this was actually

the first and only class where I really enjoyed seeing each face that was in the classroom. I felt happy when somebody had something fun or good to share, and I felt sad and sympathetic when somebody was going through a hard time. Until I experienced it this semester, I [never] realized how difficult it actually is to have these kinds of experiences in classrooms... I feel like the Engelhard Project really allowed me to see Georgetown in a new light. People who I thought I would never share my story with, let alone simply talk to, became people who cared for me.”

Our students bring their whole selves – with their problems and their struggles – to our campuses, and they carry their full humanity into our classrooms. Our students' feelings of overwhelming anxiety, loneliness, and depression cannot be ignored. Here at Georgetown, we have seen the benefits of an intentional shift in many classrooms to acknowledge and engage the student's whole self – including areas of mental health and well-being – and to broaden the academic conversation to include the whole person. This shift creates a tremendous opportunity for students to connect their lives with their academic learning and to establish truly meaningful relationships that can support them throughout their college experience and hopefully beyond. Relationships with fellow students, campus resource professionals, and faculty members all matter to strengthening one's sense of belonging, to supporting one's learning, and to nurturing one's mental health. Students – and faculty – are hungry for the opportunity to belong, to create community, to relate. With a little focused intention, we can satisfy this hunger.

*Laura D. Valtin is a graduate of Georgetown University and a former project coordinator at Georgetown's Center for New Designs in Learning and Scholarship (CNDLS). Mindy McWilliams is the associate director for assessment at CNDLS. David Ebenbach is a full professor of the practice at Georgetown's Center for Jewish Civilization and a project manager at CNDLS.*



# Shattering my OCD Prison

By Joseph Harrison

**“What if...”** These words have crossed my mind each day since the age of 14, crippling my world and coloring my development in shades of anxiety and shame. Growing up, I wasn’t accustomed to open discussions about mental health. So, under siege from Obsessive-Compulsive Disorder (OCD), I split my life in two: the exterior appearance of control and the interior chaos centered on rituals and intrusive thoughts. I kept up these defenses until the stress of medical education forced me to encounter myself as I really am. I believe my story could be very different today had I not been introduced to Jesuit higher education. My Ignatian education taught me how to be a witness to my internal fire, how to own and wel-

come the unwanted pieces of my mind into an integrated identity, and how to embrace a spirit of liberation in my personal and professional pursuits.

It's no coincidence that author and comedian Lily Bailey entitled her OCD memoir *Because We Are Bad*. From the age of 14, I was convinced that I was inherently *bad*. This stunted me and left me adrift at the end of high school. When I began my studies at Saint Joseph's University, I had no idea that Ignatian spirituality and the diverse intellectual curiosity of my peers would fundamentally transform how I view the world and loosen the grip OCD had on my mind. By the end of my freshman year I declared myself a pre-medical student. I was drawn to the



idea of the “wounded healer,” the self-sacrifice needed to perfect a craft to serve others in deference to taking care of oneself. More significantly, my interactions with Ignatian service programs and the inherent counseling nature that develops when a community engages in open dialogue about social and personal issues kindled a fire within me. Fueled by this passion for service, my successful academic performance only confirmed to my OCD that I would be negligent and evil to focus on anything else. However, I was able to co-habitate with my OCD because of the compassion and kinship I experienced at Saint Joseph’s. This Ignatian community shattered the first wall of my OCD prison: loneliness and my internal isolation.

This relief didn’t last, however, as I became a medical student at Creighton University. At Creighton, I decayed into a place of endless distress. My cognitive reserve was empty, and *I needed help*. I spent weeks in spiritual direction with a compassionate Jesuit who fought hard with me to focus on the distant call of future patients. But spiritual guidance was no substitute for evidence-based clinical care, and I had spent long enough convincing myself and others that I was a healthy medical student coping with the prototypical bout of imposter syndrome. As the stress and anxiety of failure paved the path for depression, solitary confinement, and further OCD ritualization, I surrendered to the awareness of my medical reality. And so, I lit my life on fire and dropped out of medical school. And thus Creighton broke the second wall of my OCD prison: the fear of accepting vulnerability.

Over the next several months, I began to dismantle the barriers that prevented me from seeking help. I started to diagnose the developmental challenges I had faced as a result of my OCD, and how this unwanted companion had influenced my personal life and professional work. I had to have the courage to lose control over the idea that I was in charge of my OCD. So, I underwent a formal psychiatric assessment, and for the first time a psychiatric professional held my truth and affirmed the diagnosis I had feared. I received enormous

consolation to be seen and heard in that moment. Cradled by the honesty of those initial therapeutic interactions, the third wall of my OCD prison fell: powerlessness against my secret illness.

After my depression lifted, I began a new position at the University of Pennsylvania in the department of psychiatry that gave me access to the Center for the Treatment and Study of Anxiety through excellent health insurance. I enrolled in a full-exposure-with-response prevention therapy course that undid the final wall inside my mind. The “what if” that defined my OCD was confronted, and the capacity to sit within the chaos of uncertainty became my strength. *Liberation through uncertainty*. I had never considered that accepting the doubt of everyday life would be the cure to my persistent anxiety. With the fourth wall of my OCD prison removed, I was free.

Liberation was the central theme of my Jesuit education as it unlocked every cognitive, emotional, and social dimension of my life. Jesuits, like Dean Brackley in El Salvador, inspired me by their courage to be witnesses to the world’s fires and become conduits of justice. I was taught to be insatiably curious and never ignore the inner rumblings our minds express when we are experiencing moments of desolation. The emphasis on reflection and personal excavation offered a blueprint for me to identify and cultivate vulnerability as a tool for growth. And the focus on communities of shared purpose propelled me to seek help. Each of these dimensions permitted me to dissect the pieces of myself I most feared. Thanks to my Jesuit education, I share my liberation in the hope that mental health be more intimately enmeshed as an outcome of Jesuit higher education in the future.

*Joseph Harrison, a graduate of St. Joseph’s University (2012), is currently a graduate student in the master of behavioral and decision science program at the University of Pennsylvania. He remains active in advocacy for mental health awareness and enjoys exploring the latest coffee roasts around town.*

# Up or Down—Both God’s Gifts

By Stephen C. Rowntree, S.J.

**Inspired by the stories** of several others in the current issue of *Conversations*, I was encouraged to share some of my own psychological/spiritual struggles in the effort to continue to break the bonds of stigma. I am bipolar. I cycle between feeling good about myself before God and man, energetic, productive, engaging enthusiastically with people – and the exact opposite. In the down cycle I am assailed by an endless stream of self-critical thoughts. I struggle to write and deliver a 7-minute homily. And I dread walking into a room filled with people.

My dead accurate indicator of which mood I am is the *New York Times*. I’m up if I enjoy reading it, and down if I have no interest in it whatever. I have been taking antidepressants for many years. Only recently did it become clear to my doctor that I regularly cycle between mild to moderate depression, and mild to moderate mania, and so I now take a generic form of Seroquel to moderate the up cycle.

I was up this past summer and had a delightful vacation visiting family and friends. Later I responded eagerly when prodded to write a brief statement on my understanding of priestly ministry for a supplement to the archdiocesan paper. I found this rather easy to do. I confessed in print for the first time that I was “mildly bipolar.”

My favorite piece of spiritual reading is and has been for many years Fr. Michael Buckley, S.J.’s 1974 “Letter to the Berkeley Ordinands.” (<http://www.womenpriests.org/classic/buckley.asp>) Fr. Buckley, the rector of the Jesuit School of Theology community writing to the Jesuit seminarians to be ordained that year, reminded them that, however well-educated and well-formed they might have thought themselves, “weakness” is necessary for a priest. The essential question was: “Are you weak enough to be a priest?” He referred to 1 Cor. 1:27: “God has chosen the weak to confound the strong,” 2 Cor. 4:7: “We hold this treasure in earthen vessels,” Heb. 5:1: “Every high

priest...is able to deal gently with the ignorant since he himself is subject to weakness.”

A couple of weeks after I had written of weakness as essential for a priest, I awoke after about nine hours of sleep feeling very groggy and yawning away. I was depressed from this day in early October, through Christmas, New Year’s, until mid-March. When I’m depressed, I pray what I have come to call “terror psalms” (I can list 26, including Jesus’ Ps. 22: “My God, why have you forsaken me?”). I cry out, “Jesus, Son of David have pity on me.” When my negative thoughts intensify, I think of the Gerasene demoniac. “Put down the stones and stop gashing yourself.” In these moments, I seem helpless to quiet the self put-downs in spite of what I learned from cognitive therapy: write down the negative thought, identify the distortion, that is, “overgeneralization,” “should statements,” and rephrase the initial thought without the distortion.

I find myself praying to accept God’s acceptance of me as I am, weak, inadequate, and fragile. I recall Ignatius’ words about discernment of spirits in the Second Week of the Exercises: If one is facing in the right direction, that is, facing toward God, moving however slowly, the good spirit’s action is like water falling on a sponge: very gentle, very encouraging. The “enemy of our human nature” is aptly named “the accuser.” I try to see the down mood as a grace and gift from God: that my eloquence and wit are gifts that I don’t control. Recalling “The Principle and Foundation,” I am reminded that moods are creatures and that I need to be indifferent to being down or to being up, realizing that the down mood can be and often is a gift which draws me closer to God. Also that the up moods, when they come, are also God’s gifts. God is in all things and, therefore, can be found in all things. It also seems good advice to recall when I am up, “at the top of my game,” what the down mood feels like. As well as the reverse: in the down mood





Medieval illumination of Jesus exorcizing the Gerasene demoniac from the Ottheinrich Folio

to recall the good times, and that they have always recurred/returned. Again Ignatius' advice.

I am thankful for the *cura personalis* of superiors, which made them sensitive to my mental condition even before I was. It was Fr. John Armstrong, superior of the first studies community while I was the director of academic formation, who after hearing my self-report in community faith sharing suggested I see a therapist. This was in the late 1980s and Prozac was achieving success in relieving depression with minimum side effects and minimal need for monitoring, such as the previous class of antidepressant had required. I was greatly helped by it. My therapist, hearing of my over dedication to work, and my general perfectionism, recommended that I needed to do "something completely useless." I had not realized the importance of my regular playing Free Cell until then. Sometimes when I am down about the only mental activity I can manage is to play Free Cell, a version of Solitaire in which every game can be won.

My current provincial, Fr. Ron Mercier, hearing, during my annual manifestation, of my depressed mood, insisted that when we finished I was immediately to call my doctor to see about changing my medications. It was after this that she increased my dose of the Seroquel generic. She also took me through an integrated program for coping with depression when it came. As noted, it had come big time. Essential features of the program were exercising regularly, engaging with people rather than withdrawing (simply listening with no need to speak), spiritual direction (which I had neglected for many years), and learning all I could about bipolar disease. Certainly a half-hour set of exercises I had learned when rehabbing my knee did relax me. I did try to sit and listen to people (compared to when I am up I had almost nothing to say in reply). I did finally begin spiritual direction, not that I have never tried. I haven't done much research on bipolar disease. I am thankful to my current superior for regularly inquiring about how I'm feeling, and for reminding me that bipolar disease, like diabetes, needs to be directly addressed. I am also the beneficiary of an increasing acceptance of mental illness as nothing to be ashamed of. And as a number of articles in this issue of *Conversations* show, more people are speaking out about their own mental illnesses. It seems a "me too" moment for mental illnesses. And thanks be to God for this gift.

*Fr. Rowntree taught philosophy for 29 years from 1976 to 2012, most of the time at Loyola University New Orleans, except for a seven-year period when he taught at Arrupe College in Harare, Zimbabwe. Since 2013 he has been parochial vicar at Holy Name of Jesus parish in New Orleans.*

# A Medium for Social Health

By Paola Pascual-Ferra

**I still remember** driving back from Miami on September 11, 2001, when I tuned into the radio and I heard that the Twin Towers in Manhattan had collapsed. Without a visual reference, I could not fathom the scale of the disaster. But later I remained paralyzed in front of the TV screen as the media replayed the images of the towers collapsing and people jumping from the top floors. Back before Facebook and Twitter, all these emotions were pent up inside of me, but I had no place to release them. I stayed up several nights, staring at the night sky, and for several days walked around in a constant state of anxiety and fear. I – we – needed some form of communal catharsis.

In my scholarship, I have studied the dark side of texting and other communication technologies and their impact on health. Indeed, the literature is extensive and shows evidence that excessive social media use can lead to negative health consequences. Communication scholars usually refer to these negative effects as the “dark side” of communication.

At the same time, many studies have focused on the health *benefits* that the Internet and social media can bring to individuals,

such as online support groups and mobile apps to change behavior for positive health outcomes. For example, the use of online support groups for quitting smoking and other forms of addiction, mobile apps for weight loss and medication treatment management, and even the use of online video conferencing in the patient-provider context are some examples of positive applications of the Internet and social media.

But there is a particular use of the Internet and social media that should matter to those of us working in Jesuit institutions. Pope Francis calls us to a culture of encounter and accompaniment, to reach out and walk with others in their pain and suffering. For him, the Internet has become an integral part of his ministry, as is clear in his different social media feeds. According to Pope Francis, we should not shy away from these new and emerging media platforms; on the contrary, we should embrace all the opportunities that they offer to connect and engage with “the other.”

Just consider how many people used the Internet and social media in connection with the Parkland, Fla., school shooting on February 14. The Internet,

through different news sources and social media, was used to notify others of what occurred. Updates, pictures, and videos alerted others close to the school to avoid the area and informed people not at the scene of what was going on.

Social media was used both by those who suffered directly from the tragedy to express their emotions as a form of catharsis as well as by those not connected to the event to show their solidarity with people suffering. In the specific case of Parkland, social media was also used to organize and mobilize communities across the United States around the issue of gun control.

The ability to feel that one can do something in the face of tragedy, that there are positive and constructive ways in which one can get involved – what scholars in psychology and communication may call self-efficacy and response efficacy – serves to keep hope alive in the midst of so much senselessness. For the alternative, “hopelessness,” as Bryan Stevenson, author of *Just Mercy*, recently reminded us in his keynote during Mission Week at Loyola University Maryland, “is the enemy of justice.”

Similarly, last September, my

native home of Puerto Rico was beaten by one of the most devastating hurricanes in recent history. In its immediate aftermath, Puerto Ricans living outside the island took to the Internet to vent their distress and find out what they could about family members and loved ones after losing almost all phone communication.

At Loyola, we reached out to our Puerto Rican students and invited them to come together and share their feelings over a meal. Many of them expressed feeling anxious and helpless being so far away from their families. They wanted to do something. They

took to social media to organize a drive for supplies to send to the island, joining other communities of Puerto Ricans across the United States. One of the students had the initiative of organizing a Facebook group to offer emotional support to those affected by the hurricane. The fact that these initiatives came from the students and that their first instinct was to use social media as a tool for good, to show solidarity and to be of service to others gives me great hope for this generation.

In the end, while social media and Internet use may pose some negative and unintended effects

to health, they also offer ample opportunities for communities to take care of each other and to support one another. One of the core values of our Jesuit institutions is the care of the whole person; in our work we are encouraged to “meet others where they are at.” If we are to honor these guiding principles, we must consider individuals’ offline *and online* selves, go to them and walk with them in those spaces as well.

*Paola Pascual-Ferra is an assistant professor of communication at Loyola University Maryland.*

## Catch Conversations Online

In India - Prophets of Our Own Time by Marie Therese Kane

Just one of the stories that is featured exclusively on our website. **Go to [www.conversationsmagazine.org](http://www.conversationsmagazine.org)**





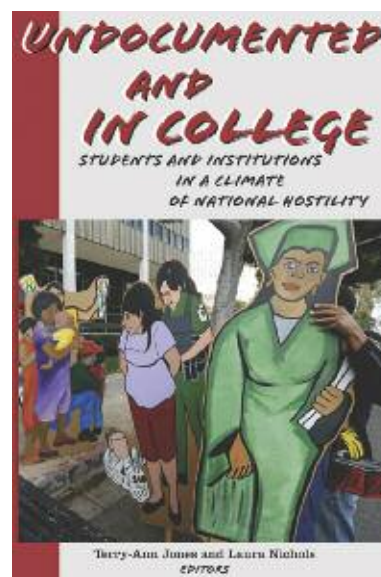
# Undocumented: The Stress of Status

By Terry-Ann Jones and Laura Nichols

*I go through certain stages, phases; every now and then, I become extremely depressed because of this. I block out everything and everyone because I don't want to tell them... I can't explain it to my friends because I don't want them knowing, I can't talk to my family because I don't want them to get upset with me, for me, and I just keep it to myself and keep everything bottled up inside. And this thing just happened to me, actually, when the Dream Act wasn't passed... I had my plans, I had dreams, again, and that was crushed, and I think every time it gets crushed, I get crushed with it, I just don't know what to do anymore.*

These are the reflections of "Sam," a first-year college bio-chem major who came to the United States when he was nine. At that time he did not understand the terms "undocumented" and "status." He excelled at school and was very involved in outside activities. Not until he tried to get his driver's license did he fully understand "my situation." Then the moderation of his dreams, the uncertainty, and fear became constants in his life.

From 2010 to 2012 researchers from Fairfield University, Loyola University Chicago, and Santa Clara University talked to students who were undocumented and attending Jesuit colleges. The project culminated in a book, *Undocumented and in College: Students and Institutions in a Climate of National Hostility* (Fordham University Press, 2017). At that time, there was no Deferred Action for Childhood Arrivals (DACA) program, and managing fear was a part of the students' daily lives: fear of being stopped by police, fear of their own or their family members' deportation, fear that the wrong people would find out their status and report them, and a heavy heart about the future. Most of the students lived in mixed-status families with younger siblings who were born in the U.S.,



and they contrasted the freedoms of their siblings to their own but also worried about who would take care of them if their parents were deported. Many students also struggled financially, unable to work legally.

Students who are undocumented are, of course, prone to experiencing the various forms of challenges to mental well-being of any college student. Further, at age 18, students who do not have legal status in the United States suddenly face additional stressors and daily realities that they must balance along with everything else they experience as college students.

The political climate of our campuses is an additional stressor. Many students said they

were shocked and dismayed at the conversations they would overhear in the dorms, in classroom discussions, and in the dining halls, “things you would never hear in our home communities,” which revealed ignorance about immigration. And there was the tacit assumption that no one was undocumented *here*. But the sheer number of undocumented persons graduating from U.S. high schools means that likely all of our colleges have students in similar situations.

Students found support from having at least one knowledgeable person on campus who could point them to trusted people and resources. They also benefited from legal assistance and

connection to graduate and professional schools where they could continue their schooling as they awaited an always hoped-for pathway to citizenship.

DACA, although temporary, reduced stress by offering students who were eligible (and able to afford it) a temporary reprieve through the ability to work legally, travel more freely, take internships, and imagine a future where they would be able to actualize their learning and successes in their chosen majors and professions. With the revocation of DACA, students are back to dealing with old fears with the added worry that by having revealed their status and provided information about themselves to apply

for DACA they have put other family members at risk of being identified and deported. Compassionate, humane federal policy has the ability to reduce unnecessary stress and contribute to the well being of our students and alumni so they can thrive.

*Terry-Ann Jones is an associate professor of sociology and the director of the International Studies Program at Fairfield University. Laura Nichols is an associate professor of sociology at Santa Clara University. Together they co-edited Undocumented and in College: Students and Institutions in a Climate of National Hostility. (Fordham University Press, 2017).*







## *Jesuit Education since 1851*

By Katie Smith

### **Becoming the University on the Hill**

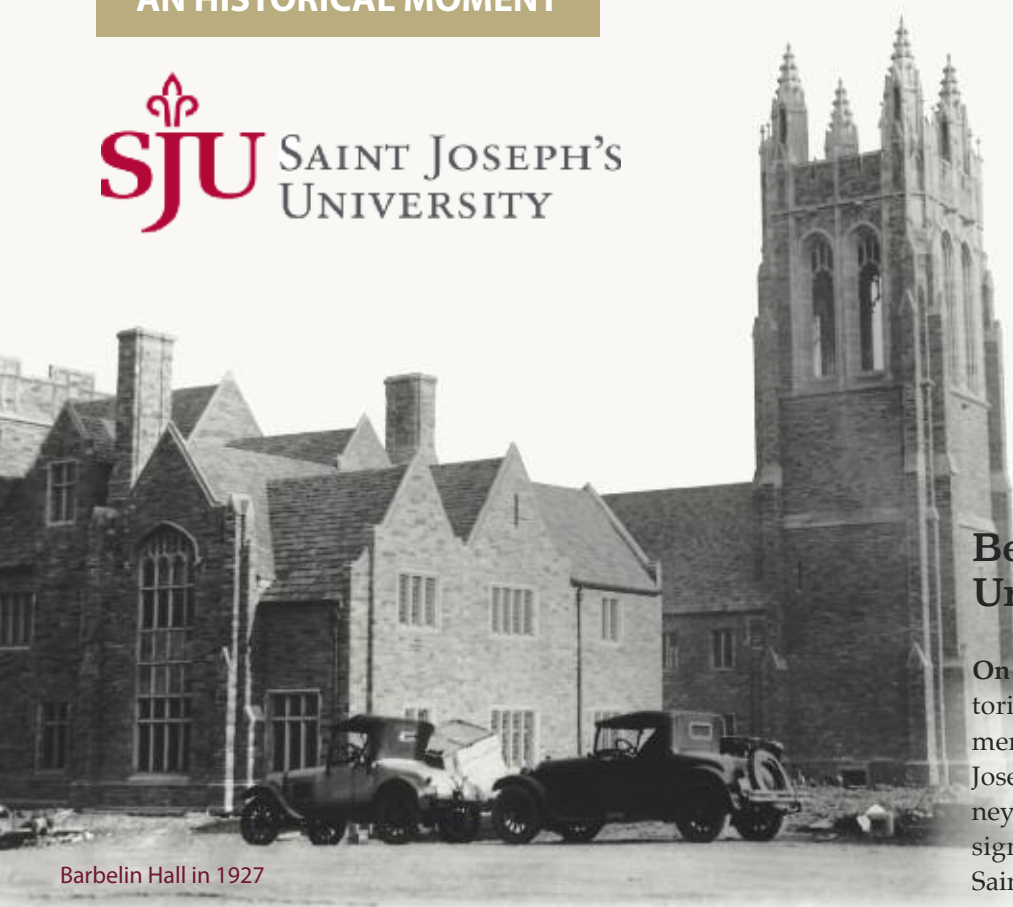
On September 15, 1851 – just steps from historic Independence Hall – nearly 30 young men gathered in the courtyard of Saint Joseph's Church and began their college journeys. Complete with High Mass and class assignments, the morning marked the birth of Saint Joseph's University.

That humble first campus, home of Philadelphia's first Catholic church and now affectionately dubbed Old Saint Joseph's, would welcome hundreds of undergraduates in search of a Jesuit education under the leadership of founder and president, Fr. Felix Barbelin, S.J. As enrollment at the college grew, so did its needs. The college moved to Stiiles Street, now the campus of Saint Joseph's Preparatory School, in 1861, before finally landing in its current location on City Avenue – "Hawk Hill" – in 1927.

### **An Eye Toward the Future**

Since the establishment of the original 23-acre campus, Barbelin Tower, its original building, has borne witness to decades of growth and expansion. In 1943, Saint Joseph's founded its evening college, welcoming professionals and people with families to pursue degrees. To continue to increase access to Jesuit education, the college welcomed its first full-time female undergraduates in fall 1970.

Pennsylvania's secretary of education recognized Saint Joseph's as a university in 1978,



Barbelin Hall in 1927



Above: Founder and president, Fr. Felix Barbelin, S.J.

Left: Students reenact the 1851 opening of Saint Joseph's College at its original campus during the 1951 centennial celebration.



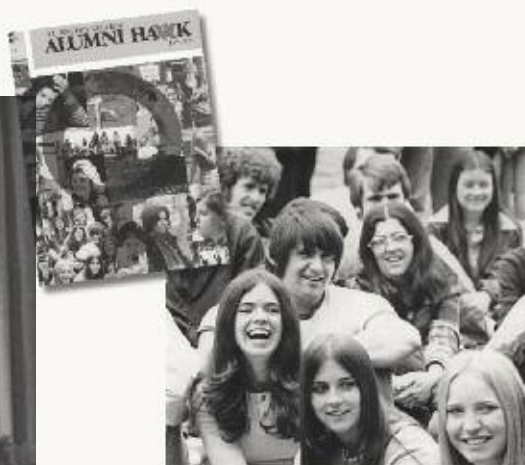




ushering in a period of strong growth. The university founded a college of business administration, now the Erivan K. Haub School of Business, to complement the existing College of Arts and Sciences. SJU's expansion dramatically shifted its student body from primarily local commuters to undergraduates from outside of Pennsylvania.

All of these bright young minds needed on-campus housing. So in the 1940s, Saint Joseph's acquired several homes adjacent to the campus and converted them into its first student residences. Over the next 70 years, SJU would grow to comprise 88 dormitories, class buildings, libraries, and recreation spaces and nearly 5,000 undergraduates annually. With the 2008 acquisition of the 38-acre Episcopal Academy campus, named for James J. Maguire ('58), the university further expanded its footprint along the region's historic Main Line.

Most recently, Saint Joseph's acquired the former Cardinal's Residence from the Archdiocese of Philadelphia in 2012. Renamed the Marcy Dugan Wolf-



ington Campus, the 8.9-acre property, housing enrollment, admissions, and career development, highlights the university's Philadelphia Catholic roots to prospective students and their families.

## Jesuit Values in Action

Justice has always been at the core of Saint Joseph's mission. Pope Francis, the world's first Jesuit pontiff, visited SJU on September 7, 2015, during the World Meeting of Families in Philadelphia. His Holiness blessed the campus's interfaith statue "*Synagoga and Ecclesia in Our Time*" in commemoration of *Nostra Aetate*, the Vatican II document on interfaith relationships.

On April 16, 2018, Congressman John Lewis (D-Ga) addressed the cam-

pus and surrounding community, drawing on his experience as a civil rights crusader and champion of social justice. His visit marked the 50th anniversary of another historic visit in 1967 by Lewis's friend and mentor, Dr. Martin Luther King Jr. As support for the civil rights movement waned in parts of the United States, Saint Joseph's welcomed Doctor King, who presented "The Future of Integration" to an audience of faculty, students, and community leaders.

As the Jesuit university in Philadelphia, the nation's birthplace of independence, Saint Joseph's continues to answer the call to justice offered by such distinguished leaders.

*Katie Smith is an alumna of and staff writer for Saint Joseph's University. She is also a former Jesuit Volunteer (Austin 2015-16).*



Saint Joseph's University today



Above: Dr. Martin Luther King, Jr. during his 1967 address at Saint Joseph's University.

Above center: Students celebrate the first women to complete four years as undergraduate day students in 1974.

Right: Pope Francis shakes hands with University President Mark C. Reed, Ed.D., during his visit on September 27, 2015.





are real in their consequences (see *The Child in America: Behavior Problems and Programs*. W.I. Thomas and D.S. Thomas. New York: Knopf, 1928).

So what is happening to our students today? Anxiety has replaced depression as the number one reason that students seek mental health services. Are we equipped to deal with this in our classes and on our campuses generally? What happens when we try to fix with very limited campus resources rather than understand and accommodate? We can start by understanding our students' social, cultural, and economic conditions and the social pressures they face.

For example, my daughter texted me recently that her high school was on "lockdown," which caused all kinds of anxiety for me as a parent. But for the 2,500 students, teachers, and administrators on "lockdown" it must have been awful. Later, she told me that she was scared and did not want to return to school after spending an hour in a dark classroom and huddled in the corner. I did not blame her. This was not the first time this has happened to her. Three days later another school shooting occurred (in Florida, Texas, Maryland ... pick a week, any week).

The long-term effects of violence or the threat

of violence on our students are horrendous, and are long lasting: They endure and can recur over a psychological lifetime. When I was my daughter's age, we were engaged in duck-and-cover drills in case the Soviets decided to drop nuclear bombs on us. But this was the occasional Cold War anxiety and didn't interfere to great lengths with my daily life: We weren't worried that another student was going to shoot us. I grew up in Texas, where guns were omnipresent, but I never thought to have a daily worry about being shot by another student. Today, I teach in classrooms where the computers are configured with panic buttons; instructions on the walls alert us about what to do in case of an active shooter; and special door jams prevent entry. I am anxious, too, as a professor.

Traditional-aged students today are the post-Columbine generation. Think about it. The date of the Columbine tragedy was April 20, 1999, the year college freshmen were born. There have been over 200 school shootings since then. This is also the social media generation, or iGEN. Social media platforms such as Facebook (2004), the iPhone (2007), Instagram (2010), and Snapchat (2012) were developed when our current students were preteens or

teens. Our nontraditional students may have been some of the first users. Creating a social media persona, making sure that the others see you having a good time, and the pressure to keep up your "streaks" daily all contribute to an anxious generation for everyone to see.

Finally, students are anxious about the high costs of Jesuit higher education. I would like to address the costs of higher education today, especially in Jesuit higher education. At Loyola





University Chicago, undergraduates without financial aid see a total bill of over \$60,000 a year. Many students with merit and aid are still working year round in addition to attending school. Without the job, they cannot attend school. Without attending school, they may not get the lifestyle they aspire to or grew up with. Students are coming to us tired, anxious, and depressed, and that is a place to start for all of us. Throw in students of color, nonbinary or cisgendered, and students who have been sexually assaulted and of course you will continue to see high rates of self-harm, hospitalizations, anxiety, and depression.

So what can we do? Recently, *The Chronicle of Higher Education* published a series of articles and videos on the rise of anxiety among students using data from the Health Minds Study of college students. In addition to *The Chronicle's* suggestions, my students have stated that knowing that someone at the university cares is important. It can be little things for you such as a simple email following up with that student who has not shown up for a week to classes. This may be the lifeline that they need. Trusting that you as a caring faculty member won't yell at them, they may tell you that they need help. This is hard. You were not trained for this. But fol-

lowing up and being understanding go a long way. I have even walked students over to the Wellness Center. I am not a therapist, but I can be understanding. When a student had a panic attack in one of my classes over giving an oral presentation, I adjusted my expectations to help them achieve the pedagogical goals of communicating their survey results.

Someone showing concern – simply listening – can make all the difference. You can't "fix" things, but you can ask, "What can I do to help?" Other pedagogical suggestions include finding alternatives or multiple measures of class participation, making smaller assignments instead of one big term paper or killer final, giving extensions on tests or papers without requiring the elaborate doctor's notes, and just being approachable or non-stigmatizing of mental health. None of these suggestions are rocket science, but all of these suggestions lead us to practicing the Jesuit value of *cura personalis*, care for the entire person, their bodies and their minds. We need to make that a practice and not just a marketing slogan.

*Anne Figert is a professor and chair of the department of sociology at Loyola University Chicago.*

## Available Resources:

### Education and Data:

The Health Minds Study is an annual web-based survey study examining mental health, service utilization, and related issues among undergraduate and graduate students. Since its national launch in 2007, HMS has been fielded at over 180 colleges and universities, with over 200,000 survey respondents. Consider enrolling your college or university in this to find out more about your students and their needs.

### Reducing Stigma:

Active Minds is a non-profit organization that works through student led chapters on over 400 college campuses to increase awareness and destigmatize mental health issues. If your college doesn't have a chapter, consider working with students to sponsor one.  
<http://www.activeminds.org/about>

Bring Change to Mind is a non-profit founded by the actress Glenn Close that is working with professors, scientists and students to reduce the stigma concerning mental health on high school and college campuses.  
<https://bringchange2mind.org>

### Where to get help:

In addition to your own campus wellness center, there is help for students online:  
<https://adaa.org/finding-help/helping-others/college-students/facts#>

National Suicide Prevention Lifeline Call 1-800-273-8255 Available 24 hours everyday

### Advocate for changes in higher education:

<http://www.apa.org/advocacy/higher-education/mental-health/index.aspx>

# The Prophetic Character of Jesuit Education

Christopher Pramuk

*His word was in my heart like a fire  
shut up in my bones.*

- Jer. 20:9

It is a strange time to be a Jesuit university professor, a Catholic theologian, and a parent. It is a difficult time, in the words of Thomas Merton, “to be human in this most inhuman of ages,” an era perhaps not unlike the 1960s, when, to cite my dissertation director, “the whole country was having a nervous breakdown.” In other words, *not* to be deeply unsettled by the divisive climate of our times would itself be a cause for deep concern. The question becomes, what to *do* with our anxiety? To paraphrase the prophet Jeremiah, how can we turn the “fire” in our bones, the sense that something is profoundly out of kilter in our world today, into a force for positive change?

## When Inhumanity Passes for Normal

In a remarkable essay published a few years after the Nuremberg trials, Thomas Merton observed that “One of most disturbing facts that came out in the Eichmann trial was that a psychiatrist examined him and found him *perfectly sane*.” Merton continues:

I do not doubt it at all, and this is precisely why I find it disturbing. If all the Nazis had been psychotics, as some of their leaders probably were, their appalling cruelty would have been in some sense easier to understand. It is much worse to consider this calm, “well-balanced,” unperturbed official, conscientiously going about his desk work, his administrative job in the great organization: which happened to be the supervision of mass murder.

Lest we be tempted to hold Eichmann and the horrors of Auschwitz at a safe historical distance, Merton then reverses our gaze, turning the mirror around to interrogate *our world*, the cultural milieu of “Western civilization” that could allow such a man as Eichmann and a whole nation to follow lock-step in carrying out Hitler’s Final Solution.

The sanity of Eichmann is disturbing. We equate sanity with a sense of justice, with humaneness, with prudence, with the capacity to love and understand other people. We are relying on the sane people of the world to preserve it from barbarism, madness, destruction. And now it begins to dawn on us that it is precisely the *sane* ones who are the most dangerous. It is the sane ones, the well-adapted ones, who can without qualms and without nausea aim the missiles and press the buttons that will initiate the great festival of destruction that they, *the sane ones*, have prepared.

Merton finally turns our gaze on the church, asking whether Christians are called “to be ‘sane’ like everybody else,” to assume “that we *belong* in our kind of society,” that “we must be ‘realistic’ about it. Certainly some of us are doing our best along those lines already. There are hopes! Even Christians can shake off their sentimental prejudices about charity, and become sane like Eichmann.”

The grim sarcasm of Merton’s voice here – adopting something of Eichmann’s own self-rationalizing “‘double-talk’ about himself” – is perhaps not so distant from the anguished dread that many thoughtful people of faith today feel when considering President Trump and his inner circle of advisers. The costs of adjusting ourselves to a “reality” void of empathy, of higher moral discernment, of democratic principles, of compassion – “I was only following orders,” was Eichmann’s trial defense – are very high indeed, warns Merton. He concludes: “I am beginning to think ‘that sanity’ is no longer a value or an end in itself... or perhaps we must say that in a society like ours the worst insanity is to be totally without anxiety, totally ‘sane.’”

Not so far from the terrifying Cold War climate of Merton's era, today it seems we are left to rely on "the sane ones" surrounding the president to stay his hand. But who are these sane ones? To sanction racist xenophobia and unthinkable acts of violence in the name of God and country – what President Trump has called the coming "storm" – needs to be identified for what it is: blasphemy, idolatry, and demagoguery, akin to Pharaoh giving orders for the slaughter of the Hebrew first-born. (Why do it? Well, because I can.) Who will have the courage to check this president's potentially catastrophic mental impulses?

From Moses and Jeremiah to Gandhi, King, and Merton, the prophets and saints raise certain fundamental questions that continue to haunt us with the gravity of our present situation from the divine perspective of the whole. Much like St. Ignatius, Merton urges us to pay attention to the inner movements of the spirit as we face critical choices about our nation, our planet, and our children's future. And also like Ignatius, Merton urges us to reclaim the tender and fiercest strength of the human heart: our "capacity to love and understand other people."

When the prophet Micah gave voice to his astonishing vision of a future in which the nations would "beat their swords into plowshares" (Mic. 4:3), he was painting a picture for his nation's despairing imagination, a people that had grown weary with burying their dead. No doubt many of his contemporaries considered him crazy. Jesus' own relatives thought he was "out of his mind" (Mark 3:21). Rabbi Abraham Heschel famously called the prophets "the most disturbing people who ever lived." Of himself, he said, "I am the most maladjusted person in society."

What about us? Can we dare to believe that the capacity for love and peacemaking lives alongside the capacity for fear and violence in every human heart? "We equate sanity with a sense of justice, with humaneness, with prudence, with the capacity to love and understand other people." But do we?

## To Be Prophetic in the Way of a University

In her book *The Public Dimensions of a Believer's Life*, the late Catholic theologian and Georgetown University professor Monika Hellwig explores the tensions

between "conformity and critical dissent" that young Christians inevitably face in their emerging relationship with civic life. While conformity with societal norms is generally a virtue to be cherished, she argues, history teaches us that there are exceptions, "and to miss the exceptions can be disastrous."

Like Merton, Hellwig lived through history's bloodiest century. As the German-born daughter of a Jewish mother who lost her father to the Nazis at age 9, and as a beloved Jesuit educator for over 30 years, she asks exactly the right question: What kind of Christian formation will "bring believers to a maturity that allows them to be loyally critical to the institutions to which they belong"? Hellwig concludes, "Unless the essentially prophetic, redemptive character of the Christian commitment is emphasized, most Christians will settle quietly into the routine of established observances and never realize that a critical dimension of the faith is missing."

As Jesuit educators it is crucial to remember that the vision of the prophets never ends in despair, but holds out God's promise that we are capable of building a more humane and peaceful world. "I have set before you life and death, blessings and curses. Now choose life, so that you and your children may live" (Deut. 30:19). Critical dissent in the face of corrupt power is central to the biblical summons to freedom. And so is Jesus' difficult command to love our enemies.

Before we dismiss the Sermon on the Mount as insanely naïve and self-defeating, perhaps our task is to consider, utilizing all the disciplinary tools of our universities, how the alternative is working out for the human family. Indeed a great many of our students sense the peril of the present historical moment and are drawn to Jesuit universities, I believe, if obscurely and inarticulately, precisely for this reason, yearning to make a difference. In their desire to resist and transform the way things are, they need our support. Above all, they need our witness in the sacred task of learning to love and understand other people, and of holding our leaders accountable.

*Christopher Pramuk is a theologian, author, scholar, and musician; in August 2017 he returned to Regis University after many years at Xavier University to direct the program Ignatian Thought and Imagination.*



# Navigating Class on Campus

By Steve Hess, S.J.

**Chris, a junior** studying at a Jesuit university, comes from a working-class family and works multiple jobs to help pay for his education. He recently told me about an impactful late-night conversation with his roommate. Chris's roommate was telling him about a high school student he met at his community service placement site. The student was working multiple jobs to save money for college. The roommate felt sorry for the student because he did not think he would make it in college due to his background. Then he told Chris how fortunate they were because their parents were paying their tuition to attend college. At that moment, Chris knew he had to tell his roommate that he was just like the high school student – that his parents were not able to pay for any of his education and he worked during high school to save up for college and was still working to pay for his education. "He almost didn't know that people like me were at the university," Chris said; "My past is like a mystery to him and other students, they just assume we all come from the same background."

Chris's story represents a reality faced by many working-class students in that their background and situations are invisible to their campus communities. Working-class undergraduates navigate campus cultures that lack awareness of social-class issues and exclude social class from diversity discussions. Based on my research and that of others, a student's social-class background influences how they experience college and their level of campus involvement. For example, most working-class undergraduates work one or more jobs to help pay for their education, and this does not afford them the time to participate in co-curricular activities such as retreats, student leadership roles, and other activities valued in Jesuit higher education.

There are also tensions related to living in different social-class worlds. On campus, working-class undergraduates live with others who possess differ-

ent social, cultural, and financial capital. However, when they visit home they re-enter the working-class world of their families. While their college education will provide them with additional cultural and social capital, their families remain in the working class. The paradox of this tension is that these students learn how to live and adapt to multiple social-class worlds.

They also are grounded in their social-class identity and possess characteristics such as determination, gratitude for the opportunity to attend college, and a strong sense of resilience. These students learn to utilize their money strategically and become independent. These are all characteristics that we hope students cultivate during their college years.

The experiences of working-class students pose challenges and opportunities for those involved with Jesuit higher education. We are challenged to ask ourselves questions such as: (1) How can we fully integrate working-class students into our campus cultures? (2) How can we redefine a "typical" college experience? (3) How can we expand diversity discussions to include social class? (4) Who are the students we consider for awards and leadership positions? Should we reconsider our criteria for awards and honors? Choosing to address these issues actively presents us with the opportunity to change structures and attitudes that perpetuate social-class inequality in higher education while also calling us to realization of our mission.

*Fr. Stephen Hess, S.J., is the alumni chaplain at Gonzaga University. He has a Ph.D. in higher education administration from Boston College and a Master of Divinity from Weston School of Theology. His dissertation focused on the peer culture and experiences of working-class undergraduates who attend private universities.*

# Counseling Centers The Nature of Our Work

By Jason A. Parcover

**In recent years**, demand for the services of college and university counseling centers has been higher than ever before, and with limited time and resources, many centers are struggling to meet students' increasingly complex needs. Data collected from 93 institutions between 2009 and 2015 showed that on average the growth in the number of students seeking mental health services was more than five times the growth rate of institutional enrollment (Center for Collegiate Mental Health, 2016). This is largely because more students are arriving on campus with preexisting, often chronic conditions. Additionally, a reduction in the stigma surrounding mental illness and its treatment has led to increased referrals and a greater student willingness to seek professional help.

Data from the 2016 National Survey of Counseling Center Directors reveal an increase in the number of students with depression and anxiety, as well as a steady, substantial increase in the rates of non-suicidal self-injury and serious suicidal ideation. There are many other concerns for which students may seek help, including interpersonal difficulties, family concerns, academic performance, social isolation, perfectionism, mood instability, body image and eating concerns, and grief and loss.

Another significant challenge counseling centers are facing is a rise in the number of students presenting in acute emotional crisis, such as self-injurious behavior, suicidal thoughts, panic or psychotic symptoms, or in the aftermath of a sexual assault. Often, students with such concerns walk in without an appointment and need to be seen immediately, requiring the attention of multiple staff members who

must work around existing appointments. These students may also require hospitalization.

On-campus counseling services affect not only students' mental and emotional health, but also their academic, personal, and professional success. A study conducted by Turner and Berry (2000) found that 20 percent of students at a single university were considering withdrawing from the university as a result of personal problems, and 70 percent reported that their personal problems were negatively affecting their academic performance. Research shows that students who receive counseling are more likely than their non-help-seeking peers to stay enrolled in school, to experience an increase in GPA, and to graduate (Schwitzer et al., 2018; Devi, Devaki, Madhavan, & Saikumar, 2013; Sharkin, 2011; Bishop, 2010). Accordingly, students across college campuses report that counseling services have helped them both to stay enrolled and to succeed in school (Florida Board of Governors, 2017; Loyola University Maryland, 2017; Turner & Berry, 2000; Bishop & Walker, 1990).

Counseling centers, like the colleges and universities within which they exist, are serving students with more diverse identities and more complex family lives than students of generations past. Today's student faces a wide array of stressors, from student loan debt and limited job prospects to the prevalence of social media and its impact on self-worth. According to data from a recent survey funded by the National Institute on Drug Abuse, the more time adolescents spend on screen activities, the more likely they are to be unhappy. Indeed, many experts point to the growth of technology use among teens as a contributing factor in the rising rates of depres-

sive symptoms, sleep difficulties, and feelings of loneliness. While social networks provide opportunity for a strong sense of affiliation with others, a feeling of disconnection often prevails for those without numerous close connections, as they witness the seemingly ideal lives of others being portrayed online. Watching others' lives unfold from a distance is no substitute for the deep connections that emerge within the context of interpersonal relationships and may hinder the development of social skills.

Relatedly, there is a widely held belief that today's college students are less autonomous, with fewer coping skills than students of previous generations. Students today certainly have a greater variety of means at their fingertips to stay in touch with their parents after leaving home; but as Russ Federman (2010) and others have pointed out, excessive parental involvement during adolescence and young adulthood can interfere with the development of resilience, autonomy, and self-reliance, all of which are critical to navigating life stresses effectively as young adults.

It is, therefore, a primary goal of university and college counseling centers to help students build coping skills, while increasing their resilience. Counselors work to meet students where they are developmentally and challenge them to identify new ways of



**While social networks provide opportunity for a strong sense of affiliation with others, a feeling of disconnection often prevails for those without numerous close connections, as they witness the seemingly ideal lives of others being portrayed online.**

overcoming persistent barriers. Additionally, centers are tasked with implementing prevention efforts that engage the broader campus community and maintaining an array of readily available resources that increase help-seeking behavior and ensure support for students who may be struggling. Despite the many pressures contemporary students face in and outside the classroom, they have the potential to flourish, and Jesuit institutions can play a unique role in fostering their growth and development.

## **Ignatian Spirituality and the Counseling Process**

In the midst of rising rates of student distress, Ignatian spirituality can profoundly inform the therapeutic and wellness-based work of counseling centers. The early Jesuits thought of their distinctive spirituality as a three-part process: paying attention to experience, reflecting on its meaning, and deciding to act in loving ways. These humanistic values of reflection and intentional action are consistent with the services that counseling centers seek to provide.

Conscious learning and growth begins by *choosing to pay attention* to our experience. Within the counseling relationship, students are encouraged to



## MORE INFORMATION

Recommended Syllabus Statement: Stress is a normal part of a being a student. However, if personal or emotional concerns are interfering with your ability to live and learn at Loyola, please stop by the Counseling Center in Humanities 150 or call 410-617-CARE (2273). More information about the Counseling Center can be found at [www.loyola.edu/counselingcenter](http://www.loyola.edu/counselingcenter).

Common Warning Signs of Mental Health Difficulties: Talks or writes about committing suicide; Has trouble eating or sleeping; Exhibits drastic changes in behavior; Withdraws from friends or social activities; Loses interest in school, work, or hobbies; Takes unnecessary risks; Has recently experienced serious losses; Loses interest in personal appearance; Increases alcohol or drug use; Has difficulty with concentration; Exhibits excessive worry or fear; Has prolonged feelings of sadness

FERPA regulations make it clear that disclosure to appropriate officials is valid if the information contained in the education record is necessary to protect the health or safety of the student or other individuals (34 CFR § 99.36). Examples - Several institutions have implemented practices that exemplify the Jesuit tradition of becoming people for and with others. Each year, **Fairfield University's** Counseling and Psychological Services partners with Campus Ministry on three large-scale outreach events, focused upon the value and preciousness of each life, a community of care, and a time for prayer and reflection. At **John Carroll University**, many students, staff, and faculty complete the Kognito At-Risk online trainings to more effectively identify, support, and refer students experiencing distress. Finally, **Loyola University Maryland** uses its Let's Talk public health campaign to educate the entire campus community on issues such as stress, healthy relationships, body pride, and suicide prevention.

examine both their intrapersonal and their interpersonal experiences, bringing greater awareness to their thoughts and emotions and helping them better understand how each impacts their choices and behavior. Ignatius believed that God is found in every living thing and connects with us directly. Our thoughts and feelings are the outlets through which God creates and sustains a unique relationship with each of us.

To connect the varied parts of our experience into a coherent whole requires *reflection*, through which we can see the patterns in our lives and grasp their significance. An important goal of counseling is to gain the freedom that comes from knowing ourselves and finding the direction that God is disclosing for our lives. Thus, therapists seek to foster an environment that promotes opportunities for discovery of one's own gifts and the future toward which they point, while helping students identify the fears and obstacles that can prevent such growth.

Ignatius suggests that love shows itself more by deeds than by words. Equipped with greater self-understanding and freedom, students can decide to *act in more loving ways*, consistent with their new self-view. In building more authentic lives, Ignatius says we must consider our relationship to the world around us and what the world needs us to do. To be human is to find our place within rela-

tionships and institutions, to take responsibility for them, and to contribute to improving them: in other words, to be people for others.

The role of college and university counseling centers is becoming increasingly important as today's students are leading more complex lives. While there is a growing challenge to meet rising demands, Ignatian principles offer a strong foundation for the services centers seek to deliver. Through the application of Jesuit values, counseling centers can help students navigate their concerns with a greater sense of autonomy, self-understanding, and respect for the welfare of others.

*Jason Parcover is the director of the counseling center at Loyola University Maryland, with a Ph.D. in counseling psychology from Southern Illinois University Carbondale.*

*He wishes to thank Emily Barr for her assistance in preparing this article.*



# LGBTQ Mental Health

By Jodi O'Brien

**I recently attended** an event for LGBTQ student leaders. Gazing around the packed high-school auditorium at the rainbow of faces gathered to hear a keynote on leadership and intersectionality, I found myself tearing up. In my day, many of these young people would likely have been spending time in psychiatric facilities or similar programs designed to, if not “cure,” at least curb and closet their gender and sexual non-conforming expressions. Three decades later, here was this spirited group publically convened to discuss how best to lead an increasingly visible LGBTQ youth population.

After years of denial and erasure, popular media representations of LGBTQ lives now abound. Gender and sexually non-conforming youth can find reflections of themselves and their experiences across a vast range of social forums. While this might be cause for optimism among those of us who value diverse lives and wish to see an end to the exclusionary and injurious hatred that LGBTQ people suffer, mental health statistics suggest a more complicated story. In the past decade, suicide has replaced homicide as the second leading cause of death among youth aged 15-24 (accidents are the leading cause). LGBTQ youth are three to five times more likely to attempt suicide than their straight peers. Mental health experts note that

these alarming rates are only the tip of the iceberg: suicidal ideation is the surface expression of a submerged glacier of extreme fear, distress, anxiety, isolation, low self-worth, self-harm, substance abuse, body-image issues, and relationship violence. Despite popular culture and a political environment of heightened LGBTQ awareness – a *zeitgeist* of “it gets better” – for many LGBTQ youth everyday life is fraught with experiences that threaten their social, psychological, and physical well-being.

While LGBTQ youth are at greater risk than their straight peers in most areas of mental health trauma, as a group, they are disproportionately emerging as some of the most innovative, inclusive, and effective leaders in new social justice movements. As educators in Jesuit Catholic colleges and universities, how do we engage with the pain and suffering, as well as the promising potential, of LGBTQ students in ways that move beyond tolerance to a full expression of *cura personalis*? How do we avoid the tendency to victimize and pathologize these students and, instead, attend to enhancing their full personhood? A first step is recognizing the complexity of contemporary LGBTQ youth experience; a related step is cultivating an educational atmosphere of

thriving inclusion – an environment in which LGBTQ students (and I would extend this to staff and faculty) experience opportunities for genuine belonging. Such an environment reflects a deeply considered understanding of the perpetual prejudice that we face as gender and sexual minorities, as well as an appreciation for the unceasingly creative ways in which we forge ourselves in the liminalities of the spaces from which we have been historically erased, rejected, or caricatured.

Why are LGBTQ youth at such high risk? This group shares with other minoritized groups what psychologists call minority stress syndrome. Everyday circumstances in which a person is not only made to feel different, but must relentlessly gauge and navigate safety, the right to expression, and the necessity of making others comfortable in their presence is exhausting. The effects of this emotional labor on well-being are exacerbated in environments in which the minoritized person is isolated from others who share their perspectives and experiences. Depending on the socio-cultural demographics of a setting, many people and groups experience this (for example, persons of color in predominantly white spaces). In such situations, the healthy person calibrates a resilient sense of self by



psychologically referencing their place of belonging in the groups with which they identify. In other words, despite exclusion from dominant groups, they experience a sense of interior home through family and community.

Additional psychic distress occurs when the minoritized person is excluded from family and community. Family and faith communities are among the most significant sources of psychological resilience and/or trauma. Acceptance through family and faith establishes a sense of belonging that serves as the foundation for well-being and healing in the midst of external marginalization and violence. Rejection by family and faith casts the minoritized person adrift, leaving them at

much greater risk of injury and trauma. Rejection from family and faith is a typical experience for LGBTQ youth, especially those from religious backgrounds. When gender and sexually non-conforming religious youth are exiled from family and church – often the only home they know – and they must also wrestle with the implications of being spun off from their faith-based system of meaning. Parents and religious leaders are often the most significant source of self and social understanding for young people. The message that there is no place for them in this constellation of family and community – other than through self-erasure and/or a cloak of shame – is devastating for LGBTQ youth.

The anguish of this struggle for self-understanding may actually be complicated by heightened visibility in popular culture and social media. Enhanced representation of LGBTQ lives and experiences does not necessarily alleviate the confusion and distress of gender and sexually non-conforming youth; in the search for meaning and belonging, the gulf between the family and church that are rejecting you and the lifestyle offered in commercially driven media may seem impossible to navigate. As a result, LGBTQ youth are at considerable risk of intra- and inter-psychological drowning as they try to steer their way through these currents of exclusion.



The good news is that higher educational environments often serve as a raft of safety for LGBTQ youth as well as potential maps for reconciliation with family and faith. In the best of circumstances, college life offers an opportunity to develop a sense of self and community that mitigates some of the unsettling consequences of stigma and rejection. Supportive educational environments offer students opportunities to recover from trauma and to develop self-understanding and forms of communication that enable them to reach back effectively into the communities that have rejected them. Jesuit Catholic university education is especially well-suited to providing LGBTQ students with experiences of community-supported healing and, most importantly, the tools for forging bridges back to family and faith. Factors that contribute to this include opportunities to learn about LGBTQ histories, cultures, and experiences. Faculty and staff mentors with sufficient expertise, rather than just those who are well-intentioned, are key role models whose own experiences offer signposts of hope and maps of healthy lives. Through engagement with these mentors and participation in LGBTQ-centered courses, clubs, and co-curricular activities, students encounter knowledge and stories that help them to author their own sense of being and belonging along lines that offer hopeful possibilities for reconciliation with family and faith. Tools for self-discovery and self-determi-

nation that include compassionate reflections on family and faith are key components not only for robust mental health, but for establishing a bright moral compass by which to navigate the often overwhelming waves of popular culture.

Extensive evidence gathered through the Family Acceptance Project at San Francisco State indicates that family acceptance of LGBTQ members results in significantly higher happiness, resilience in the face of adversity and discrimination, healthy relationships, and robust engagement in family, community, career, and faith. Many LGBTQ youth reconcile family and faith through their college experiences. As they find their course through the tides of exile, stigma, and discrimination, many of these students are forging voices of leadership that promise new directions through some of the troubling concerns for their generation. For instance, the group of LGBTQ youth leaders gathered in the high-school auditorium were there to discuss ways to combat the “myth of hook up culture.” Popular culture has made much of the “hook up” culture of casual sex that young people are supposedly caught up in. Armed with solid research, these LGBTQ leaders were pointing out that sexual activity among youth has been declining steadily in recent years. Further, the so-called hook up culture appeals only to a very small segment of college students, with many students preferring to opt out. They wanted to get the word out to young peo-

ple who, with only popular culture as their guide, might be suffering in shame and silence thinking that they are abnormal in their desire not to engage in casual sex. For these student leaders, this message was especially important for gender and sexually non-conforming youth who already have enough misinformation to manage about themselves and their lives.

I was encouraged and moved by the compassionate and intelligent way in which these LGBTQ leaders were elevating the conversation about healthy sexual choices and relationships to new levels. In providing community and tools for family and faith reconciliation, Jesuit Catholic colleges and universities can contribute significantly to advancing the positive mental health and reducing the risk of injury and depression among LGBTQ youth. We also have much to learn from these LGBTQ youth leaders about finding our way through the pain, confusion, and anger of rejection and exclusion to a place of generous engagement and genuine inclusion.

*Jodi O'Brien is a professor of sociology at Seattle University; her academic interests include gender and sexuality, religion, and social inequalities and social psychology.*

## Resources:

<https://familyproject.sfsu.edu/>  
<https://www.thetrevorproject.org>  
 Wade, Lisa. 2018. *American Hookup: The New Culture of Sex on Campus*. Norton



## “Do Not Turn Away”

### *Responding to the Sexual Assault Epidemic on Campus*

By Emily Clark

Over the past few years, the veil of secrecy that has hidden the epidemic of sexual assault on college campuses has been lifted. Through documentaries like “The Hunting Ground,” political movements like It’s On Us, and social media campaigns including #metoo and #timesup, stories have been shared with a wider audience than ever before.

Now, just about everyone knows it’s an issue, but no one knows what to do.

As a trauma therapist, I sit across from women day after day who tell me about how their life has changed dramatically after sexual assault. They tell me about how they reached out and how people’s actions (or inaction) hurt them further. Their pain draws little black rivers down their cheeks and they feel isolated by a wall built of fear and unanswerable questions.

I know this suffering personally. As a sophomore, I was violently inducted into the sisterhood of survivors, a sisterhood none of us want to be in. As a therapist and survivor, I know all too well the aftermath of sexual violence.

Everyone knows it’s an issue, but no one knows what to do or what to say, so survivors slip into shame and the belief that they are bad, broken, unlovable, or worthless.

If you want to understand how sexual violence affects people, you have to understand how shame affects people. If you want to understand how to help people drowning in shame, you have to understand how to see the shadows around their downcast eyes and not turn away. Do not turn away. It is that simple.

Simply put, sexual violence changes lives. Everything a person once held as true is suddenly subpoenaed to the highest court in the mind...

*How can my God be all-knowing, all-loving, and all-powerful and yet let something so horrible happen to me?*

*What is safe? Is safety even real?*

*Who can I trust?*

*Why does this keep hurting?*

*Will the pain ever go away?*

These are some of the anxiety-ridden questions my clients bring to the therapy room. The world these women now have to accept is one where violence is real and questions are unanswerable. It's a world where pain swells and seems to go on and on. Some survivors avoid these new-found truths and appear fine...until they're not. Some use alcohol, drugs, food, busyness, and other things to distract them from their pain. Some collapse under the pressure of their confused emotions. Every survivor reacts in her own way but all reactions are rooted in pain, fear, shame, and confusion that holds her six feet under water, so she's constantly struggling to surface to breathe.

Sexual assault often leads to mental health challenges including PTSD, anxiety, and depression, which can directly affect a student's ability to succeed...or even show up. And this is precisely when survivors need their community to show up for them. But often, that is not what happens. Professors, mentors, bosses, and friends miss clues, react with anger or blame, or avoid the difficult conversations because it makes them feel uncomfortable.

In her 2018 article in *Psychotherapy Networker*, psychologist and author Harriet Lerner writes, "When people suffer...they often do so twice: first because they've lived through something painful, and second because a key per-

son in their lives doesn't want to hear about it or doesn't want to hear all of it."

Because of the interpersonal nature of sexual assault, I believe a survivor's surest way to healing is through relationship. For some, this is a relationship with a therapist, but mental health bleeds far beyond the therapy room. In my case, there were four people who held my hand through my last two and a half years of college and led me toward healing, a best friend who would sleep beside me at night to remind me that I was safe, a professor who sat with me in a coffee shop until 11p.m. when she found me having a panic attack after it was triggered by an on-campus event, a mentor who looked at me with love even though he didn't (and still doesn't) know my story, and a running partner who reminded me that I am powerful and strong.

Again, if you want to understand how sexual violence affects people, you have to understand how shame affects people. If you want to understand how to help people drowning in shame, you have to understand how to see the shadows around their downcast eyes and not turn away. Do not turn away. It is that simple.

*Emily Clark, a graduate of St. Louis University ('13) and Boston College ('15), is a trauma therapist in Portland, OR.*

## Notes on AJCU presidents

On June 1, 2018, Dr. Michael D. Johnson became the 25th president of John Carroll University. Dr. Johnson comes to John Carroll from Babson College, where he was serving as



Michael D. Johnson

provost and was also a professor of marketing. He has also served at Cornell and at the University of Michigan.

On July 1, Fr. Scott Pilarz, S.J., began his second term as president of the University of Scranton. In the meantime, he was president of Marquette University and Georgetown Preparatory School.

Also in July, Mr. Mark Phillips, chief of staff in the office of the president, became acting president of Wheeling Jesuit University.

In August, Dr. Tania Tetlow, J.D., begins her tenure as the 17th president of Loyola University New Orleans. She comes to Loyola from neighboring Tulane University,



Tania Tetlow

where she has served as senior vice president and chief of staff and has also taught law.



*In the spirit of reflection, we pose these questions as an opportunity to extend the conversation. We hope that by offering these ideas, the discussion continues on your campus – with colleagues, with students, and with your community.*

## Ten Questions for Continuing the Conversation

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1. Where are the places/spaces on our campus that provide support for students on our campus? (counseling centers and beyond?)
2. What are ways that I let students know that I am supportive of mental health needs? (syllabus language, readings in class, etc.) Are my course policies (on attendance, late assignments) able to accommodate students struggling with mental illness?
3. Is our campus a place where students/faculty/staff feel comfortable talking about and addressing mental health needs? How do we address those needs?
4. Am I comfortable discussing mental health? How do issues of mental health impact my work on campus? What are some personal experiences with students/faculty/staff that have impacted this viewpoint?
5. How do we define *cura personalis* in the context of mental health on our campus?
6. How do I care for my own mental health? Prayer? Conversations with family and friends? Exercise? Therapy or counseling? Community? How do I know when I am NOT taking care of my mental health? What are those impacts on me?
7. Does my institution offer its students, faculty, and staff multiple avenues toward the wellness of the whole person (yoga, meditation, nutritional counseling, quality food)?
8. Do I have the phone numbers or contacts for mental health professionals should a crisis arise and I'm the only one available?
9. Does campus ministry or the university have spirituality resources available for students managing their mental illness?
10. Does someone preach on mental illness and spirituality at least once a year at the university chapel? (See Mark 5:1-20)

## *Insane: America's Criminal Treatment of Mental Illness,* by Alisa Roth

New York: Basic Books, 2018. 320 PAGES

Reviewed by Patrick Howell, S.J.

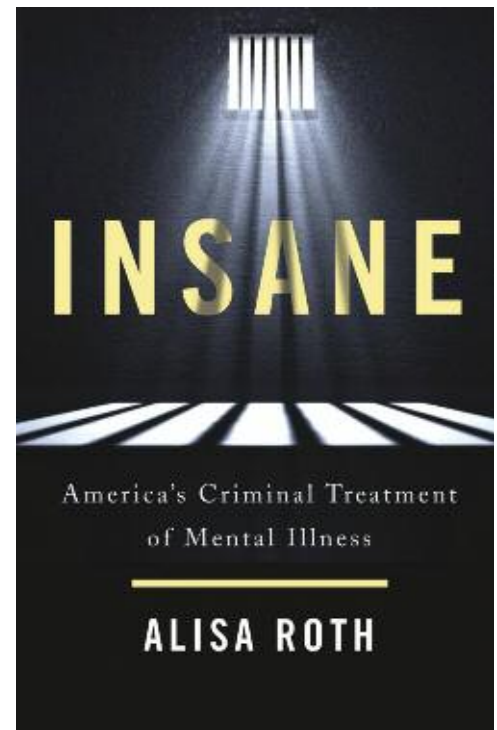
Roth has assiduously written a masterful treatise about how we are “shunting some of the most vulnerable people in America into jails and prisons” – and why they are so mistreated once they get there. Although the overall number of people behind bars has slightly decreased in recent years, the proportion of prisoners with mental illness continues to go up. Those frequently arrested in New York, Los Angeles, Seattle, Chicago, and elsewhere are far more likely than others to have mental illness and to require antipsychotic medications while incarcerated.

Along with race and poverty, mental illness has become the salient feature of mass incarceration. It's shocking enough that one of every three African-American men will be arrested in their lifetimes, but for Americans with serious mental illness, as many as one in two will be arrested at some point in their lives.

The great tragedy is that America has the resources to treat mental illness with care, compassion, and effectiveness. But as a society, we have chosen not to do so.

The turning point came in 1963 when President John Kennedy signed the Mental Retardation Facilities and Community Health Centers Construction Act

(90). The goal was an enlightened one to reduce institutionalization of people with disabilities and people with mental illness by building community health centers for outpatient treatment and to allow for integration of the individual within the natural bonds of affection and acceptance of one's own neighbors and families. But the result was a terrible vacuum because the community centers were never adequately funded or built. The states emptied out their “insane asylums,” but those with serious mental illness more often ended up on the streets and from there often enough in the local jail. Their illness was further compounded by incarceration. In a chapter entitled “Destined to Fail,” Roth explains the criminal justice system, “is not only receiving huge numbers of people with mental illness, it is also getting the sickest of the sick – those who most urgently need intensive treatment” (112). Patients do best when treatment is started early; an untreated illness almost always gets progressively worse. In addition, three-fourths of prisoners with mental illness also gave substance use problems, often the result of self-medicating with alcohol or street drugs. Roth further explains that jails are run by control and coercion, precisely



the opposite of what effective treatment might mean from those suffering from mental illness. Consequently, the psychological issues often worsen within a jail or prison environment.

Roth's research is prodigious. Her powerful narrative lays bare the true costs of incarcerating our nation's mentally ill citizens. She has visited the jails and the prisons; she has documented the poignant cases of those with mental illness repeatedly jailed and often abused by the prison systems. She has talked with reformers and mental health professionals who offer superb insights into what is actually needed, but for which the political will of the civic community is sorely lacking. This book is must reading for anyone concerned about the care and treatment of those with chronic mental illness and about how our incarceration systems have become the largest psychiatric facilities in the country.

*Patrick Howell, S.J., is chair of the National Seminar on Jesuit Higher Education.*

## Always at the Frontier

**Saint Louis University** is celebrating its bicentennial with a roster of events from religious services to lectures to exhibitions and music programs. It has also published a beautiful book that explores the history of the school, which has been a major part of the history of Saint Louis since the town was a small but bustling frontier riverboat center and before Missouri was a state. The school was founded in 1818, three years before the Missouri Compromise of 1821 made way for Missouri's admission to the union as a slave state. Saint Louis grew and the school grew with it, living through struggles and issues, leading, sometimes compromising, trying – though not always successfully – to keep Catholic principles active.

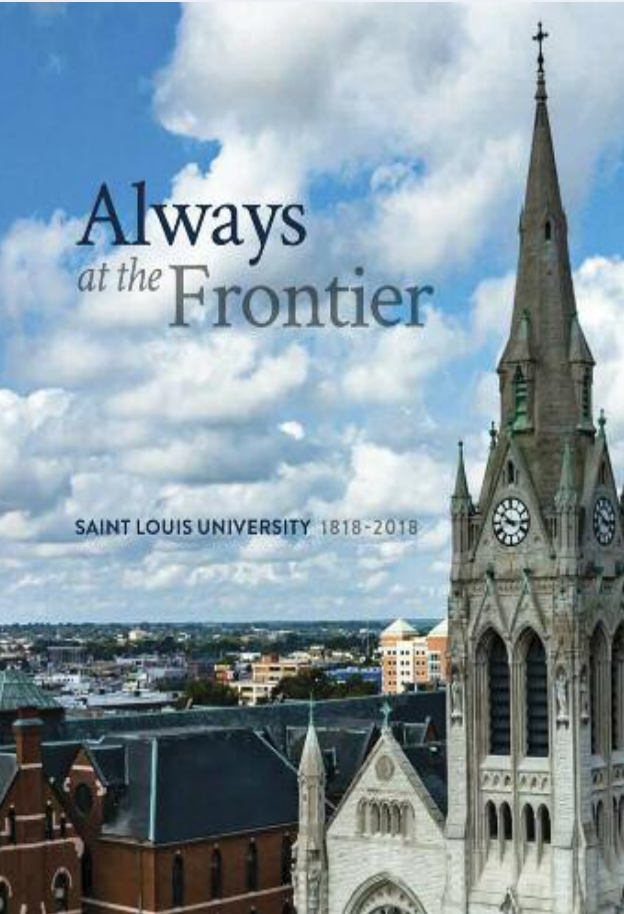
The book's title clearly states its perspective: *Always at the Frontier*. From early issues of racism, through the Civil War – Missouri had both Union and Confederate armies – and wars of the early 20th century, through economic boom and bust, Saint Louis University has been a leading partner in the civic discourse. Very re-

cently it was a leading voice for justice in the unrest arising from racial turmoil in suburban Ferguson.

The volume's text makes use of a very impressive array of background scholarship, drawing on over 160 sources. The author is Dolores M. Byrnes, a researcher, writer, and anthropologist from Northern Virginia. Helping her was Fr. John Padberg, S.J., who has taught and been an administrator at Saint Louis and elsewhere and has



published extensively in Jesuit history. And the second contributing author was John Waide, a SLU graduate who has served



changing times and fashions and issues. From the early photos of Jesuits in their birettas to nursing students in white dresses and caps and capes to modern students in

shorts and T-shirts, a visual history of changing trends and styles in American society moves through the pages of this beautiful book.

in the archives and library there for five decades.

The photos that illustrate the text are a fascinating witness to



# Addressing a Nature-Deficit Disorder

By Clint J. Springer

I was sitting by a small stream under a grove of Metasequoia trees. Suddenly, the sound of wings whooshing through the air caught my attention and a great blue heron landed on the stream's edge. After a few minutes of watching the bird fish for the catch of the day, it was time to rejoin my students. I was teaching after all.

Each spring I teach a course titled plant physiological ecology at Saint Joseph's University. The course's main focus is understanding the physiological and developmental responses of plants to their environment. In addition to lecture and lab activities, we spend a good deal of time talking about environmental problems to give context to the course material. One of the main focuses of this discussion is the human impacts on the environment, mainly global climate change. This course has always accomplished what I intended, teaching students about how plants grow and develop. However, after a few runs of the course, many of the comments I received from students asked for more focus on climate change and its consequences. I responded and adjusted the course material to feed this curiosity. After the first time running the course with the new material, I realized what the students were really asking for, a deeper connection to nature and the themes we were studying. Since many of our students come from urban and suburban environments, many of these biology students had not really had experienced nature in a deep and meaningful way. They had been awakened to their own "nature-deficit disorder," and it made them hungry for more.



In 2005, Richard Louv coined the phrase "nature-deficit disorder" in his award-winning book *The Last Child in the Woods: Saving Our Children from Nature-Deficit Disorder*. In the book, Louv postulates that exposure to nature is key to the healthy mental, emotional, and physical development of both children and adults. He also postulates that many of contemporary environmental problems are directly related to the disconnect that exists between humans and the natural environment. My personal observations of my own students confirmed that these postulates held weight. So I set off to find a remedy that I hoped would enhance the emotional and physical needs of my students while also increasing their consciousness of their own impact on the environment.

First, I asked each student to calculate and reflect on their own environmental impact. I also gave a series of lectures on the church's teachings on human relationships and the environment. Finally, I implemented an exercise to truly connect the students with

nature in a deep and, albeit short, meaningful way. This exercise, which I call "an eco-spiritual retreat," takes students to a local botanical park and instructs them to spend one hour immersed in the natural environment without the distraction of the modern world. I ask the students to turn in their cell phones to me. I then ask them not to interact with their peers. The students see this as a daunting task, but the reflections that I receive show that they enjoy the "time away" and many have reported back that they have continued this exercise.

Sometimes, teaching the mission can be abstract for science faculty, but through some creativity and non-traditional science curriculum we can make great strides to this end. And take an afternoon off for our own mental health.

*Clint Springer is an associate professor of biology and director of the Environmental Science Program at Saint Joseph's University.*



Spring Hill College

**Georgetown University**  
*Washington, DC, 1789*

**Saint Louis University**  
*Saint Louis, 1818*

**Spring Hill College**  
*Mobile, 1830*

**Xavier University**  
*Cincinnati, 1831*

**Fordham University**  
*New York, 1841*

**College of the Holy Cross**  
*Worcester, 1843*

**Saint Joseph's University**  
*Philadelphia, 1851*

**Santa Clara University**  
*Santa Clara, 1851*

**Loyola University Maryland**  
*Baltimore, 1852*

**University of San Francisco**  
*San Francisco, 1855*

**Boston College**  
*Boston, 1863*

**Canisius College**  
*Buffalo, 1870*

**Loyola University Chicago**  
*Chicago, 1870*

**Saint Peter's University**  
*Jersey City, 1872*

**University of Detroit Mercy**  
*Detroit, 1877*

**Regis University**  
*Denver, 1877*

**Creighton University**  
*Omaha, 1878*

**Marquette University**  
*Milwaukee, 1881*

**John Carroll University**  
*Cleveland, 1886*

**Gonzaga University**  
*Spokane, 1887*

**University of Scranton**  
*Scranton, 1888*

**Seattle University**  
*Seattle, 1891*

**Rockhurst University**  
*Kansas City, 1910*

**Loyola Marymount University**  
*Los Angeles, 1911*

**Loyola University New Orleans**  
*New Orleans, 1912*



**Fairfield University**  
*Fairfield, 1942*

**Le Moyne College**  
*Syracuse, 1946*

**Wheeling Jesuit University**  
*Wheeling, 1954*

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