

TRANSITIONS

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ACKNOWLEDGMENTS



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Acknowledgment

The first edition of Transitions: Student Reality Check was written and designed by Jacqueline Potvin-Boucher and edited by Marla Cranston, under the direction of Dr. Stan Kutcher, and reviewed by the Sun Life Financial Chair in Adolescent Mental Health Youth Advisory Council.

Special Thanks

Angela Marshall, Meghan McArther, Kristin Victoria Gray, Bonnie Warren, Tonya Grant, Nicholas Cardone and all of the expert reviewers from the IWK clinical care teams who assisted with the completion of this project!

Designed and Illustrated by



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INTRODUCTION

CONGRATULATIONS!

You've graduated high school and are moving on to higher education! The first few years after high school can be a time of rapid change and intense new experiences.

This book addresses some important things that aren't usually talked about, but are important to consider at this transition point in your life. We believe that not all lessons need to be learned the hard way. This book is a result of feedback from a large number of students who wished a resource

like this was available when they started their first year of post-secondary education. Issues like anxiety, roommate conflict, financial struggles, depression, or sexual assault are not something you have to address on your own. You might not need some of the content, and that's okay, but we hope that you'll keep it on hand, as there may be something in here that at some time you, or a close friend, might need to know more about.

FREE FALLING

This year is going to go by fast. By the time you get settled into your new routine, you'll be in the middle of midterm exams! Universities and colleges move in a rhythm all their own and this can be overwhelming in your first year. It can be a struggle to find the time to enjoy what you are studying. If you want to balance having fun with keeping your marks up, try to set out some goals for yourself at the end of September. After your first month, you'll have a better idea of what your year will look like.

Ask yourself:

- ➔ What are my academic, career and personal goals? What kind of grades do I want to get in my classes and what kind of work will that require? What career options sound interesting to me and what kind of classes/grades will I need to get there? What kind of social life do I want to have?
- ➔ How can I try new things without forgetting who I am and what is important to me? How can I get the most out of these next few years?

Reminding yourself of these questions, answering them honestly and making a plan will help you stay on track when your schedule gets hectic.



The background is a solid bright yellow color. It features several large, white, organic, and somewhat abstract shapes that overlap and cut into the yellow field. These shapes are reminiscent of liquid droplets or soft-edged geometric forms. One large shape is in the upper left, another is in the center, and a third is in the lower right. The word 'SCHOOL' is printed in a bold, sans-serif font. The letters 'S', 'C', 'H', 'O', and 'O' are white, while the final 'L' is yellow, matching the background. The text is positioned in the upper right area, partially overlapping the white shapes.

SCHOOL

HOW DO I KNOW WHICH CLASSES TO PICK?

There will be some degree requirements that you'll probably want to get out of the way in your first year. If you have the option to take electives, keep in mind that part of figuring out what you want to do is learning what you don't want to do. Many students have found their future career accidentally by loving an elective course they chose simply because it fit in their schedule.

If you can't decide, ask to sit in on a few classes so you can get a sense of the instructor, the course outline, and your instructor's expectations before you make your final decision. Remember, you usually don't have to

decide your major in the first year. In fact, many students change their major two or even three times before graduating.

Ask yourself what interests you most. What are your hobbies? What courses did you enjoy most in high school? These are important questions to keep in mind and may help you decide what courses to take. Talk to friends who have taken those courses and don't be afraid to get advice from your parents, teachers or other people you trust. There may be pressures from family to take a specific course or program, but ultimately your choices are up to you.

→ **Read the course calendar thoroughly.** Each course listing will provide some information on what will be involved in the specific course.

→ **How is the course graded?** Make note of whether or not the course is based on written assignments or exams. Some people do better in courses with just exams as opposed to those based on written assignments or vice versa. Usually you will have to take some courses that involve both but it's good to know this ahead of time to help you make your course selections. If it's not listed, feel free to contact the instructor to inquire.

→ **How big is the class?** You may have to contact the instructor or the registrar's office if this information is not listed in the calendar.

Sometimes it's helpful to have smaller classes. Smaller classes often allow for class discussions and give you more opportunity to get help and ask questions.

→ **Is the class a lab, a seminar, or a lecture?** Lectures tend to be large classes. In some schools, this may mean hundreds of students. Because they are so large, they usually do not allow much discussion or interaction with your professor. This means you may be on your own. Labs and seminars on the other hand are usually small classes and give you more opportunity for hands on work.

→ **What time is the course?** If you are not a morning person, try not to take more challenging courses in the morning.

If you still have questions and would like further help selecting your courses, most universities and colleges have academic advisors or counselors to help answer questions you may have.

Here are some thoughts from first-year students

→ "I always thought I wanted to be a nurse until I started studying nursing and realized how much it grossed me out."

→ "I am fascinated with history and computers – I'll probably be more likely to get a job in computers but just for fun I'm going to take history – who knows maybe I'll learn something new and change my career path".

→ "I wanted to have a job working outside. I tried horticulture and landscape and now I know what I want to do"

→ "I feel like I only do well learning something I can do hands on, I always daydream if I have to sit through a lecture. I'll have to visit a school advisor to help pick appropriate classes".

→ "I can't decide between radio and television production or interactive game design - so giving both a try makes sense"

→ "I'd rather do classes with all exams and less writing assignments. If I talk to the professors of each course I'm interested in, they will likely be able to tell me how the course is structured."

MAXIMIZE YOUR LEARNING

Understanding your personal learning style can help you reach your goals and be successful in school. There are four common learning types: **visual**, **auditory**, **reading/writing**, and **tactile**. You may be a combination of all four, but generally one learning style will be more effective for you than the others.

WHAT TYPE OF LEARNER ARE YOU?

Use the chart below to help you determine which type you are. For each item, identify the choice that best represents you and fill it in the boxes provided next to each statement. Then add one point for each of the letters based on your choices. The highest total is your strongest learning style.

(Adapted from Colin Rose (1987) Accelerated Learning.)

☐ When you contact people...

- A. Do you prefer to meet in person?
- B. Do you prefer to talk on the phone?
- C. Do you enjoy communication via letters or e-mail?
- D. Do you prefer to talk to them while engaging in an activity together?

☐ When you get together with friends...

- A. Do you enjoy going to a museum or an art gallery?
- B. Do you prefer chatting over coffee?
- C. Do you prefer going to poetry readings or book clubs?
- D. Do you prefer playing sports or other physical activity?

☐ When you are buying a new car...

- A. Do you consider how it looks to be the most important?
- B. Do you prefer what you hear on TV commercials and what the sales person says the best features are?
- C. Do you prefer to read up on the car's features and reviews?
- D. Do you prefer to drive it first and see how it feels?

☐ When you are deciding what to order off a menu...

- A. Do you prefer demonstrations or diagrams as explanation?
- B. Do you prefer verbal instructions?
- C. Do you prefer detailed written instructions you can follow?
- D. Do you prefer to jump right in and figure it out?

☐ When you are learning...

- A. Do you prefer a teacher who uses colourful charts and images?
- B. Do you prefer class discussions?
- C. Do you prefer when the teacher assigns readings and gives you handouts?
- D. Do you prefer demonstrations and hands on trial experiments?

☐ When you meet someone...

- A. Do you remember faces better than names?
- B. Do you remember what you talked about but forget what they looked like?
- C. Do you remember names better if they have name tags on or when they give you their business card?
- D. Do you remember what you did with the person and how you felt about them?

☐ When you talk...

- A. Do you often use phrases such as picture this, and imagine if...?
- B. Do you prefer to explain using words such as hear and think?
- C. Do you make notes for yourself as you talk on the phone to help you refer back to the conversation later on?
- D. Do you use gestures often while speaking and use words such as feel, touch and hold?

☐ When you try something new...

- A. Do you look for pictures on the menu or look at other people's food?
- B. Do you prefer to ask the server what they recommend and to describe the food?
- C. Do you prefer to read the menu including details on how the food is cooked and what is in it?
- D. Do you prefer to try something new or order something different from everyone else so you can taste test everyone else's food?

Add up the totals for your choices and find out what type of learner you are on the next page:

A___ B___ C___ D___

STUDY TIPS FOR YOUR LEARNING STYLE

(A) Visual Learners:

- The more pictures, charts and diagrams the better.
- Study alone and highlight the key points.
- Use different coloured highlighters.
- Doodle in your notebooks to emphasize important information. Find a way to make the information visually stand out.
- The more graphic images in your notes the better.
- Use sticky notes to mark off important phrases in your notebook.
- Watch instructional DVDs.

(B) Auditory Learners:

- Listen to speakers, record class sessions and listen to them again later.
- For some auditory learners, taking notes in class is distracting. If your memory is strong (or you are recording the class session), consider just listening instead of taking notes.
- Repeating information out loud can help you remember key points when studying.
- Discuss your ideas and understanding of the material with someone else, like a classmate.
- Summarize your material into a song, phrase, or story.

Auditory Learners

Visual Learners

Reading/Writing Learners

Tactile Learners

**(C) Reading/Writing Learners:**

- Write lists of important information/categories/headings/etc.
- Always take notes – whether in class or when you're reading your textbook. Writing the information down will help solidify it in your brain.
- Use your notes later to elaborate on the information, writing it out in whatever way is easiest for you to understand. Putting concepts into your own words is a great way to check if you understand the material.
- Read sentences over and over until the information "sticks". Just make sure that you're able to recall the information and what it means when you no longer have the sentences in front of you. Reading without understanding doesn't help anyone.
- Translate a diagram into a readable format. Turn the pictures into stories.

(D) Tactile Learners:

- Hands-on learning is the best. If you can find a way to try out the technique/concept you're studying, you'll remember it much better! Look for opportunities in your real life and in your community to explore the concepts you're learning. (e.g., Trying to understand the impact of exercise on mood? Go for a run and see how you feel.)
- Get on the stationary bike while studying. Walk around as you elaborate on your ideas for a paper or review your understanding of class materials. Keep it moving!
- If you can't move around when studying, take breaks often to get up and stretch. You'll be much fresher when you return to the material and be able to absorb more information!
- Jump right in! Trial and error is one of the ways you learn best.

PROCRASTINATION

Are you constantly putting things off and making excuses? Procrastination creates a lot of stress and anxiety. Some reasons for procrastination and tips to help:

- **Too challenging.** Sometimes we avoid a task because we know it will be difficult and it can be hard to figure out where to begin. Breaking the task down into smaller, easier steps makes it seem less overwhelming and gives you the satisfaction of checking things off your 'to do' list sooner!
- **Feeling unprepared.** Sometimes the task requires complex skills or knowledge. We may hold off starting the task, assuming it would be easier to wait until we have more knowledge and know exactly what to do to avoid failure. Think of failure as a learning opportunity. If you jump in, you may be surprised at what you learn simply by trying.
- **Not enough time.** The task seems overwhelming and may require a lot of time and energy. When you break the task down into smaller chunks, give each one a reasonable time frame. You can get a lot done in just 15 minutes if there are no interruptions.
- **Distractions.** Often we are unable to focus because we are in our comfortable everyday environment with all the distractions of daily living. Take control of the situation! Turn off the phone, Internet, and television and find a private study space.
- **Too many projects on the go.** Often we put off tasks because we are swamped. It's easy to get bogged down in little details and forget about the big picture. Try to focus on the most important assignments first. Remember not everything that feels urgent is important. At the same time, remember that doing something is better than doing nothing. If you feel totally overwhelmed by a big project, it is okay to work on the little things first (e.g., title page, bibliography), as long as you don't forget about the big picture.
- **Feeling guilty.** Often we put off tasks because we feel guilty for not spending enough time with friends or family, or not participating in an activity. Remember, taking time to study is just as important as time with your loved ones. That's not to say that you should neglect your family and friends; they will be a good support system for you while in school and it's essential you maintain contact with them. Just try to create a balance.

What some students are saying

- "Every time I put off doing an assignment it weighs more heavily on my mind and I eventually become too overwhelmed to do anything. My advice is to start assignments as soon as they're assigned."
- "People always say there's not enough time in the day – Personally I don't know why they say that because honestly if you're organized there's plenty of time in the day to do everything you need to."
- "If I feel I don't know enough about an assignment I leave it hoping eventually I'll somehow magically understand what the task is. I know it's silly and it never works."

FIRST EXAMS

Your first exams can be stressful since they are often very different from what you were used to in high school. Expectations are much higher and the environment is less supportive. This is why it is important to really pay attention in class and understand how you learn best. Taking notes in a way that makes sense to you and staying organized will help you fully grasp what is being taught. The best way to deal with exam stress is to know your material well and give yourself enough time to study. Starting the night before is never a good idea. Remember that constant studying can be mentally and emotionally exhausting. You don't want to burn yourself out before the exam! Try to get enough sleep, eat healthy meals, exercise and stay away from junk food when you can. You'll absorb information better and faster if you're feeling your best.

Prior to an exam, be sure to ask the instructor about the exam format (e.g., multiple choice, essay questions) and what is expected. This will help you better prepare and plan your review.

It is important to do more than memorize the information. Rephrasing the material so it's in your own words can help you better understand it. If you really want to know how well you understand something, try and reach out to a friend or have a friend quiz you.

Exams can also be a significant opportunity to learn. After you receive your results, it's a good idea to spend time reviewing to see where you went wrong so you can do better next time. Many professors and teaching assistants are willing to discuss your exam results with you afterwards. Just make sure that you have thoughtful questions to ask when you approach them and aren't just looking to vent. Venting is best saved for your friends, not your professors!

STUDY TIPS

- ➔ **Ask questions.** Ask your instructors which areas are most important to review.
- ➔ **Test yourself early.** Often, textbooks have review questions at the end of each chapter. Try answering those before you really get started studying. It's a good way to figure out which areas you need to study most.
- ➔ **Make a learning plan.** Give yourself time to review all material and more time for the areas you have identified as more difficult.
- ➔ **Organize yourself.** Put sticky notes on the pages you need to study more carefully and lay out the material so you can easily review.
- ➔ **Highlight key points.** This will help you to focus in on the most important information without getting distracted by less relevant details. It also allows for quick scanning of the material when you're doing your final exam review.
- ➔ **Don't rush.** Try not to move on to new topics until you feel confident with the material you just covered. That said, if you're having difficulty grasping one section and it's making you feel anxious, put it aside and try studying another section for awhile. Sometimes a break is all you need to see things differently.
- ➔ **Take scheduled breaks.** Go for a walk and get away for just 10 or 15 minutes every hour or two.
- ➔ **Sleep.** If you're tired, nothing is really going to sink in, so be sure to get a good night's sleep. Take a short nap if necessary. Don't study binge! You'll retain more by getting a good sleep and briefly reviewing in the morning.
- ➔ **No distractions.** Study where you know you won't be interrupted. Shut off the TV and avoid studying around other distractions.
- ➔ **Join a study group.** Joining a group can help you with difficult areas and challenge you to keep up with your classmates.
- ➔ **Find real-life applications.** When possible, think about how the different concepts you are learning might apply to real life. Real-life examples are great for helping you remember the information.
- ➔ **Avoid caffeine.** Coffee, colas and energy drinks should be taken in moderation. Sure, caffeine helps you stay awake, but too much caffeine can increase feelings of anxiety and restlessness. If you are getting tired, take a short nap and avoid the caffeine fix if you can.
- ➔ **Don't procrastinate.** If you feel overwhelmed with material you need to study, break it down into manageable steps. Start with the area you know best to help build confidence. Just don't spend too long studying information you already know well!
- ➔ **Create study sheets.** Write down the major concepts in point form for quick reference (like flash cards for reviewing).
- ➔ **Plan your answers.** Sometimes it helps to think of questions that might be on the exam and create an outline of the answer. End-of-chapter review questions can be helpful when formulating your own questions.
- ➔ **Remember that studying is more than reading.** To study you need to be active and requires more concentration and critical thinking.
- ➔ **Reduce your stress levels.** Studying can sometimes stress you out, especially when the material is difficult or you feel like you don't have enough time. If you start to feel overwhelmed, taking a few deep breaths can slow down your heart rate and help you relax. Try the Box Breathing exercise on the next page. You'll be a much more effective learner when you've had a chance to calm down.

BOX BREATHING

Box Breathing can help your heart rate return to normal, which helps you relax. Here's how you do it: If possible, sit and close your eyes. If not, just focus on your breathing.

1. Inhale (preferably through your nose) for 4 seconds.
2. Hold your breath for 4 more seconds. You're not trying to deprive yourself of air; you're just giving the air a few seconds to fill your lungs.
3. Exhale slowly through your mouth for 4 seconds.
4. Pause for 4 seconds (without speaking) before breathing in again.

Repeat this process as many times as you can. Even 30 seconds of deep breathing will help you feel more relaxed and in control.



EXAM DAY

- Hopefully you got a good night's sleep. This is more important than "pulling an all-nighter." If not, try to take a quick nap.
- Eat a good healthy breakfast. If you have difficulty eating in the morning or feel too anxious, try to eat something small (e.g., yogurt, an apple). You don't want to be distracted by hunger in the middle of the exam!
- Review your study sheets. Do not try to learn new material; it will only confuse you and stress you out. Do the best with what you've got.
- If you are feeling anxious, take a few deep breaths (see Box Breathing exercise above). This will slow your heart rate and help you calm down. If possible, go outside to get some fresh air or go for a brisk walk.
- If you don't know the answer to a question, don't struggle with it. Flag it, move on, and go back to it later. The answer may come to you as you read through the rest of the exam. Sometimes later questions can give you clues about earlier ones.
- Go to the bathroom before going into the exam.
- Before starting to answer questions, it is a good idea to scan through the entire exam and decide how much time you will need to spend on each section. This will help ensure that you don't run out of time before you're finished.
- Take your time and pace yourself. Read questions twice and beware of tricky wording. Underline key words like "don't" and "not" (e.g., "Which one of these options is not an example of...?").
- Answer the questions you know the answers to first. That way, if you're short on time, you've at least answered all of the questions you know.
- Don't second-guess yourself. Often your first idea is the right one.
- One helpful tip for writing multiple choice exams is to hide the answer choices as you read the question. Because multiple choice exams use something called recognition memory, you could get confused because you 'recognize' more than one of the answers from when you were studying (Sometimes professors use other concepts from class as possible answer choices. They're the right answer to something, just not the question you're currently reading!). If you cover up the possible responses, you'll be able to consider what you think the answer to the question might be, without the distraction of potentially wrong responses. Then, when you have an idea about the answer, check the possible response options and choose the one that fits best.

- ➔ For essay questions, try taking a few seconds to create a mini-outline of what you want to say before you get started. Even if it's just a few words, it can help you organize your thoughts. This makes it easier for you to answer the question adequately and helps ensure that the person marking your exam understands what you are trying to say.
- ➔ If you know that you have a history of extreme exam anxiety, get help before the exam period starts. Remember, counseling services can help you improve your exam writing ability and deal with exam anxiety. But don't wait till the week before exams to get the help you need!

For More Stress-busting techniques, check out page 48.



What some students are saying

- ➔ "I used to completely freeze before an exam and my mind would go blank. But I took a little course on taking exams that the counseling centre offered and now I know how to relax and do better."
- ➔ "Before exams I never pick up my notes and study – I figure if I don't know the materials now it's pointless. So instead I relax and go for a run beforehand."
- ➔ "I always study with friends the last day before an exam so we can test each other. It's fun and really helps. It also makes me feel competitive to study harder to keep up with my friends."
- ➔ "The worst feeling is sitting through an exam when the person sitting next to you is distracting you with a constant growling stomach. So my advice is eat before your exam – it's better for you and people around you!"
- ➔ "I never go into the exam room too early – if I do, then I just end up stressing about what will be on the exam and talking to other people who are nervous. I try to go just a few minutes before."
- ➔ "I used to try and cram all my study into the day before the exam, but that just stressed me out. Now when I get my exam schedule I plan my study time for all my exams and give myself more time on the subjects I feel most concerned about."
- ➔ "One 'tip' I learned from a friend was to review my subjects every week, so I now take 2 hours a week to do that. It has made it easier to study for exams."

OTHER ISSUES THAT AFFECT LEARNING

1. Students with learning disabilities

Having a learning disability is not about intelligence – many people with learning disabilities have average or above average IQ. Learning disabilities affect a person’s ability to process or apply information. If you have a learning disability, you’re probably well aware that school can be challenging. Don’t worry, every post secondary institution should have resources and programs in place to help you succeed.

Although, you don’t outgrow learning disabilities, the degree/severity of the problems may vary

over time. The key to managing your learning disability is learning what works best for you.

If you have a learning disability, make sure you check out what resources exist on campus to help you as soon as you register! Often you will need to register with the student support/disability services office and it is confidential. This office is responsible for making sure you receive the help and accommodations you may need. It’s also a good idea to talk to your instructors. It is against the law to discriminate against someone based on a medical condition.

I think I have a learning disability – now what?

Although learning disabilities may be diagnosed in primary school, sometimes they go undiagnosed and untreated for years. If you suspect you have a learning disability that is interfering with your ability to succeed at school or at work, you should seek help from a psychologist or medical doctor. There are many different strategies and options that might be helpful for you. Your school’s counseling services office or student health clinic may also be able to help.

If you have been prescribed medications, be careful not to overmedicate yourself in times of stress or exams. Also be aware that mixing medications can be dangerous. Discuss what you are taking with a medical doctor. If you have been taking medication at home and are moving to a new city, you will need to make arrangements for your medicine to be continued and your treatment monitored. Whenever possible, try to have your doctor at home help you arrange for this before you arrive.

2. Learning with ADHD (Attention-Deficit/Hyperactivity Disorder)

Attention-Deficit/Hyperactivity Disorder (ADHD) is a neurobiological disorder that affects learning and behaviour. People with ADHD have difficulty concentrating and can be hyperactive, easily distracted, disorganized and impulsive. It affects about 3-7% of the population. Approximately 30% of people diagnosed with ADHD also have a learning disability.

Symptoms of ADHD:

- | | |
|--|------------------------|
| → Difficulty with sustained attention or concentration | → Forgetful |
| → Starts projects but has difficulty finishing them | → Constantly on the go |
| → Acts/Speaks without thinking | → Overly talkative |
| → Easily distracted | → Disorganized |
| → Daydreamer | → Impatient |
| | → Restless |
| | → Fidgety |

There are a number of strategies people with ADHD can use to improve their learning. The learning resource center at your school should be able to help with specific techniques. Medications can also be helpful; however, they must be prescribed by a medical doctor. If you have previously been diagnosed with ADHD or if you think you might have ADHD, visit your health clinic to discuss what options are available with a health care professional. With the right combination of strategies and medication, most people with ADHD are able to succeed and thrive in postsecondary education.

For more information on ADHD, check out the SNAP-IV Rating Scale at <http://www.myadhd.com/snap-iv-6160-18sampl.html>



Self-advocacy

If you have ADHD or a learning disability, here are a few things you may want to do:

- ➔ Register with the disabilities services office; they may be able to help you with learning strategies and set up helpful accommodations for your classes.
- ➔ Talk to a counselor if you are feeling overwhelmed or stressed.
- ➔ Take any medications as prescribed and make sure that a doctor is monitoring your usage.
- ➔ Tell your academic advisor about your disability so he/she can help make the best academic plan for you.
- ➔ Tell your instructors about your disability. You can always contact them via email or during their office hours if you feel uncomfortable approaching them after class.
- ➔ Keep important paperwork, like your course schedule, student loans, and scholarships in a folder and store it in a safe place.
- ➔ Find out about tutoring services available on campus.
- ➔ Educate yourself about your disability. Understand what it means for you and how it's likely to impact your life.
- ➔ Keep workload in mind when selecting courses. Be careful not to overload yourself with back-to-back classes requiring heavy reading and writing.
- ➔ Study difficult material when your energy level is at its peak and take frequent short breaks.
- ➔ Write assignments, exams, meetings, and 'to do' lists in an agenda, instead of trying to remember everything in your head.
- ➔ Sit at the front of the classroom to minimize distractions.
- ➔ Talk to your instructor if you are having difficulty or have any questions.
- ➔ Write flash cards; they can help you memorize key points.
- ➔ Remember that staying positive is an important part of being successful.

Can I succeed if I have ADHD or a learning disability?

Yes, of course you can! You may need to work extra hard in some areas or study a little differently, but with a plan, preparation and perseverance, you'll do great!

For more information on ADHD, visit:

<http://teenmentalhealth.org/for-families-and-teens/adhd-attention-deficit-hyperactivity-disorder/>

For more information on learning disabilities, visit: www.ldac-acta.ca

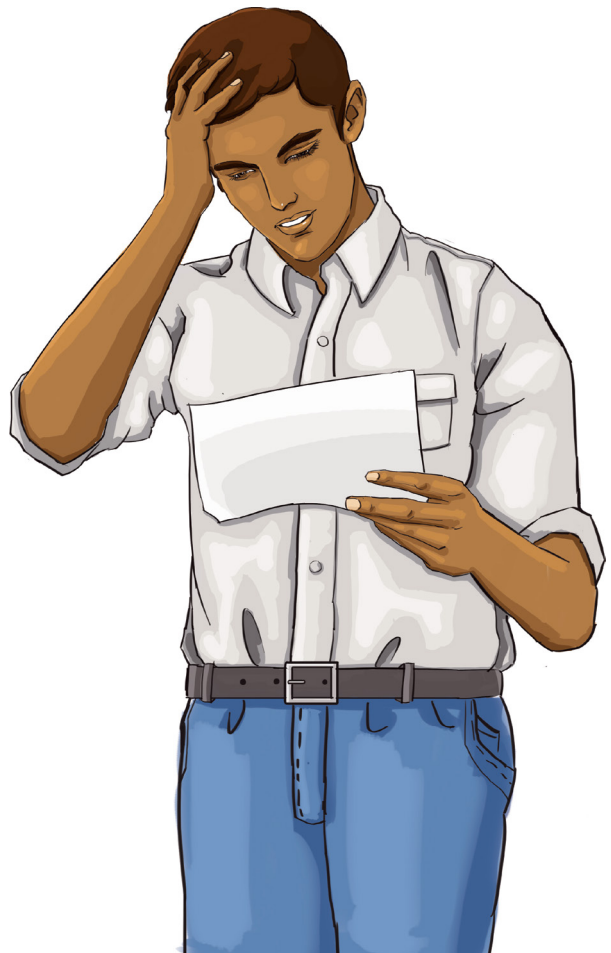
BUILDING RESILIENCE

Things in life don't always go your way. Nobody lives a life that's completely stress-free. Sometimes it's relatively minor – like not being able to find a parking space or spilling coffee on your new white shirt. Other times, it's much worse – you fail an important class, you go through a rough break-up, or worse still, someone you care about dies or is injured. Regardless of the intensity of the stressor, they all impact us in certain ways. And as much as it sucks to experience these stressors, they actually can make you a stronger

person. Sounds like a cliché, doesn't it? Research has shown that people who experience adversity and adapt to it are actually more resilient to it in the long-run! Experiencing set-backs teaches you how to recover from them; how to get back on your feet. Some people are better at this task than others but that doesn't mean you can't learn to be more resilient. This section will focus on resilience to academic failure, as it affects many college and university students.

RESILIENCE TO ACADEMIC FAILURE

It can be a bit of a shock when you get your first paper or exam back. The expectations in college or university level courses are often a lot higher than the expectations in high school and doing well can require a lot more effort than you're used to. Even people who were straight-A students in high school can be in for a surprise. It can take some time to transition yourself into a College/University mind set. Although you should use this opportunity as motivation for improvement, try not to take it personally. Doing poorly on a paper or exam doesn't mean you're a failure. Almost everyone has had a "wake-up call" at some point - use this experience as yours. Figure out what you did wrong and learn from it. You may not have understood the professor's expectations before – Now you do! Or maybe you actually didn't study enough/work hard enough – it happens. Now you have a better understanding of what's required to succeed in the course. Maybe your writing or study skills could use some improvement – visit the academic skills centre on your campus for additional help.



Tips to become a resilient student

- **Lessons to learn.** Think about your experience and what you got out of it. What do you think could have been done differently and how can this be applied to other situations?
 - **Humour helps.** A positive attitude helps you to see humour in stressful situations. Instead of getting angry or frustrated, laugh it off.
 - **Be accepting.** Know that you can't always change the world. Sometimes you need to change how you are dealing with it. Being more flexible and open to change makes it easier for you to adapt to stress.
 - **Be realistic.** Put things into perspective and don't stress the small stuff. Not every stressor is the end of the world.
 - **Put yourself first.** If you take care of yourself by doing things you enjoy, eating healthy, getting enough rest, and relaxing — you may be better prepared when stress happens.
 - **Be assertive and take action.** Instead of feeling helpless, get out there and solve problems. If something is wrong, speak up. Be polite about it, but speak up.
 - **Relationships matter.** Having a good support network provides a serious buffer for stress. Take time to nurture yours - friendships take time and effort, but are worth it.
 - **Trust yourself.** Know that you are capable of success, even if some areas may require more effort than others.
-



MOVING IN/OUT

HOW TO DEAL WITH ROOMMATES

Whether you decide to share a living space with an old friend or someone brand new, there may be conflict and strain on your roommate relationship. Someone who is fun to hang out with won't necessarily make a good roommate, but there are some steps you can take to ensure your new living situation is a more enjoyable experience.

"THE KEY TO A SUCCESSFUL LIVING ARRANGEMENT IS COMMUNICATION."

Prior to signing any lease, there are critical issues that should be addressed as part of the roommate selection process. If you cannot agree on these issues ahead of time, you may need to consider finding a different roommate.

QUESTIONS TO ASK POTENTIAL ROOMMATES

- How do they rate their level of household cleanliness and what are their expectations about household chores?
- Will you cook together or share groceries?
- How will you split utilities, phone and cable bills, along with other living costs?
- What are their schedules and habits for work, school, and sleep?
- Do they want to share kitchen duties (e.g., washing dishes)? Or do they want each roommate to look after their own mess?
- How do they feel about playing music or watching TV?
- Do they like to host parties? If so, guidelines about advanced notice, limits, and other party details should be discussed.
- Do they smoke? Will they be smoking in the apartment? Remember that even if someone only smokes outside, their clothes and belongings often still smell like smoke.
- How do their views on drug or alcohol consumption compare to your own?
- Are their religious and political views similar to your own? If not, is this likely to cause strain between you?
- Will they respect your privacy? What kind of boundaries do they have? (i.e., Are they likely to borrow things or come into your room without asking?)
- What type of relationship are they looking for in a roommate? (e.g., A friendship? A sibling? Someone they occasionally pass in the hallway?)
- Do they have jobs and what kind of work do they do?
- Are they responsible? Are you sure they're going to pay their portion of the rent/bills every month?
- Do they have boyfriends or girlfriends who are likely to spend a lot of time at your place? Discuss whether their significant others will contribute to resources they use frequently (i.e., hot water, food). Remember that choosing to live with one person may also mean you are choosing to live with his or her significant other a lot of the time.
- How quiet or loud are they?
- What friends, partners or family members will come visit and how often?
- If your potential roommates are your friends, have you considered the strain it may put on your friendship?
- Have they lived on their own before or had roommates before? If so, what was that experience like?
- Are they a morning person or a night owl? If you are a morning person, how do you feel about late-night TV watching in common rooms? How do you feel about the possibility that they might come home late at night and wake you up?

AVOID CONFLICT BY MAKING A WRITTEN AGREEMENT FIRST!

When you do find a suitable roommate, make a contract with some agreements prior to signing a lease. Doing this will make sure that all parties put their needs on the table. This may help prevent conflict and also ensure a healthy living situation for everyone. You can even make this process fun by having dinner together and spending the evening figuring out how the next few months together as roommates will work.

Your agreement should include:

- ➔ Who will be responsible for each bill. Usually one person's name is on the bill and that person will be held accountable. If it's your name on the Internet bill and your roommates don't pay you for it - you will be on the hook for the full amount.
- ➔ Standards around cleanliness and chores.
- ➔ Clarification around food: whether or not you will share groceries or buy your own.
- ➔ Cupboard and fridge space allotment.
- ➔ Restrictions on music, noise or party time, especially for exam periods.
- ➔ Plan for how you will handle potential overnight guests or partners - it's no fun to bump into an unexpected stranger in the hallway at night on your way to the bathroom.
- ➔ Information about allergies, religious observances or special needs that need to be respected by everyone in the home.



What some students are saying

"My first roommate turned out to be an extremely messy person and it drove me nuts. Next time I move in with someone I'm going to make sure they are just as tidy as me."

"I'd say it's critical not to move in with someone you haven't met first, or into an apartment you haven't been able to visit. Lots of apartments are available online but sometimes looks can be deceiving."

"Instead of moving into residence I decided to move out with some friends who choose to work rather than go to school. It started out great but then I found they always wanted to have people over but I had too much studying to do. I started to feel like they weren't respecting my workload and I often ended up leaving to go to the library. Next time I will definitely live with other students rather than friends with 9 to 5 jobs."

"I decided to get a house with some friends from high school. I know that one had a drinking problem but it never occurred to me that his problem would become a problem for me. Now I know better."

APPRECIATE DIVERSITY

One of the great parts about going to college or university is being exposed to new ideas and new beliefs. This helps you learn to think in different ways and as a result, gain a well-rounded education.

STARTING SCHOOL IN A NEW COUNTRY OR CULTURE?

As you start to settle into your new surroundings, you may find that things are very different than home and adapting may take time. Most campuses have an international student advisor who can assist you in the transition to life in a new country. They will be able to help you with any questions you may have about the laws and customs in your new country, and the rights to which you are entitled. They may also be able

to help you understand the culture and social environment, which may be quite different than you are used to. Many schools have international student organizations that organize social activities with people who are also new to this environment. Just don't get caught up spending all your time doing things you would do at home and forget to explore your new country/culture!

WHAT IS CULTURAL ADAPTATION?

Cultural adaptation is the process you go through when you experience a culture other than your own for a prolonged period of time. 4 stages of cultural adaptation are:



- **The Party.** You're having a blast! Everything seems so interesting. You're meeting new friends and everything is going smoothly.
- **Shock.** The novelty has worn off and some problems are arising. Suddenly, you're having trouble with school, food, dress, language, money. The daily tasks that used to be simple now seem complicated. Everything feels different than back home. You feel homesick and start to complain about this new place.
- **Negotiation.** You learn to deal with the unfamiliar ways of your new home. Your communication skills improve. The customs and beliefs of your new home become clearer. Things begin to look more optimistic as you settle in.
- **Stability.** You have adjusted well to living in this new environment. You have accepted and understand the way of life and no longer feel out of place and unhappy. You are comfortable with who you are in this situation.

Adapted from Lysgaard's U-Curve Model of Cultural Adaptation (1955).

Cultural adaptation Tips

There are several things you can do to help make adapting to a new culture a little easier, such as:

- **Keep active.** Get out in the community around you and interact with others. Not only will this help you better understand the way of life in your new environment, you may even find aspects that you like!
- **Read.** Pick up local magazines, newspapers, or local tourism information guides to find out what the locals like to do.
- **Be friendly.** Introduce yourself and ask questions. Many people find other cultures fascinating, so don't be afraid to share yours with others.
- **Contact your family.** Don't lose touch with your family back home. Display pictures of them and call, facebook, or e-mail them regularly.
- **Join a club or sports team.** This is the easiest way to get to know people and keep healthy. Exercise helps clear the mind of stress, is good for your physical health, and gives you an opportunity to meet people with similar interests.
- **Learn the language better.** Languages are full of unique phrases and slang. Listen to people talk and ask what something means if you don't understand it.
- **Maintain contact with your own social/cultural/religious group.** Introduce yourself to other students of similar background, or other international students. They may be going through the same confusion you are. Once people find out you're from the same place, it makes getting to know them much easier. Just make sure you don't only hang out with people who share your background, even if it might feel easier. Part of the fun of studying somewhere new is meeting people you wouldn't have the chance to meet at home!
- **Be patient and keep an open mind.** Although it's definitely an adjustment, studying abroad can be an amazing learning experience and can help you learn more about who you are as a person!



Learn from Gayesha's story

I'm from Sri Lanka and I decided one year to do a student exchange for a semester in Canada. I was curious to see what Canada was like and improve my English. Before I left Sri Lanka, I figured everything would work itself out and I was more excited than anything. After a few weeks, however, reality set in and I felt so alone and lost. I began to regret the exchange trip and considered going back to Sri Lanka.

What changed the situation?

I remembered why I wanted to come to Canada and I decided to force myself out there and try to appreciate this new culture. I visited the student services office and asked them if there were any other exchange students from Sri Lanka. They directed me to a multicultural group of students. I went to one of the meetings and quickly met 20 other international students going through the same thing as me. I no longer felt alone. I learned something about myself and Canadian culture, but I also had a new appreciation for all sorts of cultures and gained friends forever.

My advice to someone adapting to a new city:

Don't isolate. You have to get out in order to take advantage of this opportunity. There are so many students going through the same thing as you. Don't give up. Keep an open mind and you'll be glad you did.



MONEY

FINANCIAL RESPONSIBILITIES

Regardless of whether you're paying your own way, your parents are helping, or you've got scholarships, grants, or student loans; it is important that you understand what your expenses will be so that you can manage your money wisely.

STUDENT LOANS & SCHOLARSHIPS

If you are applying for a student loan in Canada, you will have to apply for funding through the province you resided in for the last 12 consecutive months, (not including time spent while in college or university). It is your responsibility to read and understand the terms and conditions of your student loan and to fulfill repayment obligations. You will not be charged interest on your loan while in school full time; payments begin six months after your studies are over. If you are studying on a part-time basis however, payments and interest will have to be made while still in school. Make sure you understand the terms and conditions of your loan!

You can apply for scholarships while in high school, so try to keep your grades up to increase your chances of getting a scholarship. Talk to your guidance counselor or contact the Registrar's Office or the Awards Office at your new school for a list of scholarships and bursaries along with any applications you can fill out.

If you drop a course or two, it may affect your student loan. Be sure to seek advice from the financial institution that holds your student loan on how many courses you are required to take to maintain full time student status. You should also talk to an academic advisor about the benefits and risks of dropping classes.



Learn from Tyler's story

Ever since I was about 10 years old I wanted to be a veterinarian. I loved animals and was always bringing home stray cats and birds with broken wings trying to save them. I got into veterinary medicine and knew I had several long hard years ahead of me, but was excited to have gotten into school. However, two years into my studies I started losing interest. My marks declined rapidly and the thought of operating on an animal made my skin crawl. Suddenly I felt like I was losing myself and everything I thought I knew. So I quit school and headed down south without notifying my student loan lender that I wasn't in school anymore.

What changed the situation?

I spent all my money! After spending a couple months in Costa Rica surfing and soaking up the sun I realized I was stuck with no cash. It was time to face reality so I called my parents to tell them the situation. They flew me home and that's when I found out my loan had gone into delinquency. I got a job as a waiter to start paying back my debt.

My advice to someone on a student loan who wants to drop classes:

If you have doubts about what you are studying, it doesn't mean you are a failure. The credits from classes you have already taken can probably be applied to another degree. Go see a career counselor before you make your decision.

OTHER KINDS OF LOANS

You may find that a number of lending institutions are competing for your business. Banks often offer credit cards to post-secondary students. If you decide to get one, make a plan for how and when you will use it. If you pay your bill in full each month (by the payment deadline), you will build up good credit. If not, you can seriously harm your ability to receive credit in the future. Poor credit means you may not be approved for a mortgage, or that you will be charged high interest rates on future credit cards or loans. Budgeting groceries and other monthly expenses will help to stretch your dollars and ensure that you are not going too far into debt on day to day expenses. Banks also offer student lines of credit, which can be helpful if you need a financial cushion. Some banks may require a co-signer - usually a parent with excellent credit and a steady income.

BUDGETING

Preparing a budget is always a good idea. When the only income you have is your student loan or what you have earned in the summer, you will have to spend wisely to ensure you have enough money to live on until the end of the school year. Here is a sample budget that may help you get started:

EXPENSE	ESTIMATED COST
Tuition and fees	() +
Books and supplies	() +
Transportation	() +
Food	() +
Entertainment	() +
Rent	() +
Utilities	() +
Cell phone, cable...	() +
Clothes	() +
TOTAL	()

TIPS TO HELP YOU STAY ON TRACK

- ➔ Do not carry your debit card with you. Use CASH!
- ➔ Take out a budgeted amount of money and then do not touch your bank account.
- ➔ Determine your needs versus your wants.
- ➔ Get a part-time job if you have the time, but ensure that your grades are not affected. If your grades start declining you may need to consider working less and re-evaluating your budget.
- ➔ Take the bus and avoid buying a car. Insurance, gas, and parking add up quickly.
- ➔ Live with roommates. Sharing rent and utilities is a big help financially.
- ➔ Make your own coffee and lunch before you leave in the morning.
- ➔ Keep a list of what you spend and you'll be able to determine which expenses are necessary. It's easy to lose track of what you're spending if you're not careful.
- ➔ Take advantage of all student discounts.
- ➔ Save coupons and keep an eye out for sales.
- ➔ Cook big meals on weekends and freeze single portions to eat as leftovers throughout the week.
- ➔ Hang your clothes out to dry instead of spending money at the laundromat.
- ➔ Apply for every grant and scholarship you find. Some provinces will reimburse you a portion of your textbook costs – make sure you look into financial aid options!

The important thing is to keep your expectations and your shopping habits in check. If you buy an expensive jacket with your student loan money, you may end up eating very poorly for the next few months and not having the cash to go out with your friends on weekends.

The background is a solid red color with large, white, organic, and flowing shapes that create a sense of movement and depth. These shapes are reminiscent of liquid or smoke, with some areas being more solid white and others more translucent or layered.

RELATIONSHIPS

BUILDING RELATIONSHIPS

In a new setting, you may have the opportunity to make friends with people from different backgrounds. Not knowing many people may seem scary at first but don't worry, you are not alone. Most first-year students are just like you, hoping to make new friends too.

TIPS ON MAKING FRIENDS

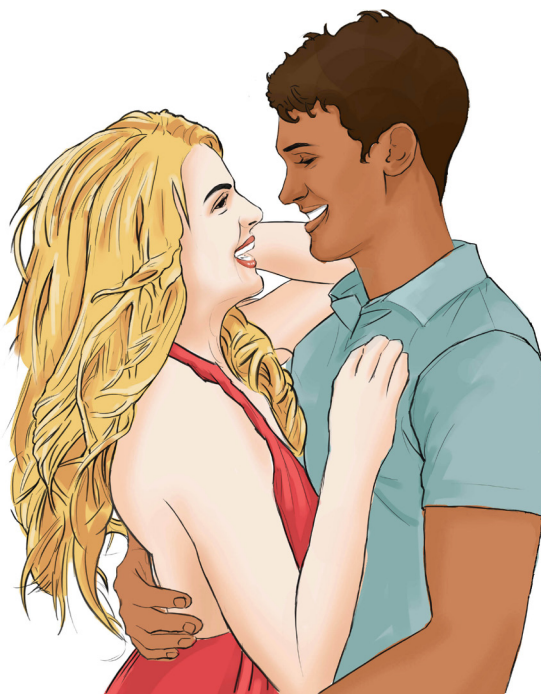
- ➔ **Introduce yourself.** Don't wait for people to come talk to you; get out there and introduce yourself to other people in your residence and classes.
- ➔ **Party.** Most people in first year university don't know anyone - so don't feel nervous going to parties. Everyone is in the same boat and looking to meet new people!
- ➔ **Get out.** Consider going to a common area like your residence lounge, the library, or a local park to do your homework. You might run into a classmate or someone interested in what you're studying.
- ➔ **Leave your residence room door open.** This makes you appear more approachable and open to being involved with whatever is going on around you. Just remember to use your judgment.
- ➔ **Be chatty.** Participate in class discussions or ask your classmates about homework.
- ➔ **Make eye contact.** Making eye contact shows you want to be involved.
- ➔ **Get a job.** If you have a bit of spare time, a job will allow you to build connections and earn extra spending money!
- ➔ **Show up early to class.** It's easier to break the ice when there are just a few people waiting for class to start.
- ➔ **Invite someone to go for coffee with you.** A lot of classes allow breaks, so go with the crowd or ask someone who seems friendly to go with you for a coffee or snack.
- ➔ **Smile and laugh.** It shows you're friendly and people are naturally drawn to happy people.
- ➔ **Listen to other people talk.** If you hear someone is in need of something, offer to help out if you can.
- ➔ **Be open-minded.** Try not to judge people. You will be exposed to new cultures and values that may be quite different from your hometown and high school friends. Different doesn't mean bad and you may even learn something new!
- ➔ **Open up your posture and keep your head up.** Even if it's not true, crossing your arms and legs sends signals to other people that you're closed off and unfriendly. Keeping your head up and arms uncrossed makes you seem more relaxed and sociable.
- ➔ **Go online.** The Internet is an excellent resource for making friends and chatting. Join Facebook groups associated with your new community/College/University or do a Google search for other chat sites. Again, just remember to use your judgment when deciding to meet up with people you meet online. Always meet in a public place and bring another friend with you, if you can.
- ➔ **Be interested in people and ask about them.** Don't just talk about yourself; make sure the conversation is balanced.
- ➔ **Join a sports team or a club.** This is the easiest way to meet people with similar interests to you. Most colleges and universities have noncompetitive intramural leagues if you just want to have fun.



DATING

If you are interested in dating, this may be the easiest time in your life to meet people your own age who have similar interests. Dating can be complicated, so you need to decide if you are prepared to add another person to your life. Consider how a relationship will impact your education and career goals, and decide where your priorities lie. It's a personal decision and will be different for everyone. Here are some things you may want to think about:

- ➔ **Be careful if you decide to date your roommate.** If you break up, you'll be stuck living with that person until the end of the lease and it may get awkward.
- ➔ **Be honest.** If you don't want to be exclusive, be open and tell the person that you want to see other people too. Just remember that it goes both ways and you'll have to be okay with them dating other people as well.
- ➔ **Avoid drama.** If the relationship is getting too complicated or stressful, decide whether it's worth the drama and negative effect it's having on the rest of your life. Drama and passion are not the same thing. If it's too stressful, it's probably not the right relationship for you.
- ➔ **Don't forget about friends.** It's easy to get swept away by a new romance, but remember that you need friends too! Make time for friendships in addition to your relationship. Not every relationship will last and you'll need friends to help you through the hard times.
- ➔ **Have fun.** Dating should be fun! Don't forget to enjoy the process. There's no need to rush into anything right away.



The break-up

Break ups can be painful and stressful, regardless of whether they're mutual, or one-sided. Either way they can really hurt! It is perfectly normal to feel:

- | | | | |
|---------------|-----------------------|----------------------|---------------|
| ➔ Empty | ➔ Low energy | ➔ Loss of appetite | ➔ Discouraged |
| ➔ Rejected | ➔ Numb | ➔ Awake and restless | ➔ Anxious |
| ➔ Confused | ➔ Emotionally fragile | ➔ Angry | |
| ➔ Down or sad | ➔ Unable to focus | ➔ Upset | |

For a while, it may be difficult to deal with your regular daily routine but with time, things will get better. If it doesn't, you may benefit from talking to a counselor about your feelings. Many colleges and universities have on-campus mental health services. Keep in touch with friends from home and reach out to new friends you've made. Sometimes it helps to talk about your feelings but sometimes it's more helpful to keep busy and distract yourself. Friends are good for both. Remember that breaking up can be an important part of figuring out who you are and what you need from your partner in a long-term relationship.

11 tips for getting over a break-up

- **Grieve.** It's okay to feel sad about what happened. Regardless of who initiated the break-up, you're still experiencing a loss. Grief is natural. Allow yourself to imagine life without that person and remember that you will get through it.
- **Cut off sex with your ex.** Break-up sex can be costly and emotionally exhausting. Think about whether it's good for YOU.
- **Try not to rebound.** It's really tempting to jump into another relationship right away to fill the void left by your ex. Unfortunately, this doesn't eliminate your feelings, it only hides them for a little while. Give yourself some time to move on. Feel free to date, but try to avoid anything serious until you're sure you're ready to handle a relationship.
- **Write down your feelings.** After a break-up, your feelings can change pretty rapidly. Writing them down can be a good way to make sense of what it is you're feeling. Keeping a journal can be a helpful way of exploring those feelings. You can even write a pretend letter to your ex, if you feel there are things you need to express to him/her and don't feel comfortable or are unable to express them directly to your ex.
- **Time to Think.** Sometimes break-ups are especially tough because we learn that the person we were dating is not who we thought he/she was. Learning that someone wasn't who you wanted them to be can be pretty upsetting, but it can also be liberating. Consider whether you actually miss your ex, or whether you miss who you wanted them to be. Having a realistic picture of your ex, flaws and all, makes moving on much easier.
- **Don't feel guilty.** Your priority right now should be you. Don't worry about how your ex is handling the break-up; focus on yourself and what you need. Everyone has his/her own way of coping with loss (e.g., talking to a friend, focusing on work, partying) and you and your ex may deal with the break-up differently.
- **Deal with the angry phase.** It's totally normal to feel angry but letting it fester inside will only make you feel worse. Let yourself feel the anger, express it, and then let yourself move on. Go to the gym; go for a run/walk; even scream into your pillow if you have to.
- **Talk to your friends.** It's good to have people around you who support you. Friends can offer good advice and help you get back out there having fun again.
- **Get out!** Don't hide in your lonely dark bedroom; that will only make you feel worse. You'll feel so much better if you get out of the house. Whether you're going for a walk, going out with friends, or playing a sport, the activity and social interaction will improve your mood.
- **Try not to use alcohol or drugs for support.** You might feel better in the short-term, but when you come back down, they will leave you feeling worse.
- **Spend time with yourself.** Take this time to get to know yourself better. It's easy to get caught up in being "we" and forget about "me." Figure out what you enjoy. A break-up is a great time to try something new. Launch yourself into a new hobby or sport that you've always wanted to try!



Learn from Josh's story

I've always been more of a relationship kind of guy. I like having a steady girlfriend I can count on. Anyway, I was with this girl from high school for two years before we both moved on to university. She got into UBC and I got into the U of A. I was really upset that we didn't get into the same school. It obviously meant that our plans to move out together were going down the crapper. But we decided to make it work through a long-distance relationship. We had planned to see each other on every long weekend and holidays. We talked online for hours every night, but it just wasn't the same. She decided that it wasn't working out and it was actually interfering with her grades, so she dumped me. I felt so helpless! I couldn't eat or sleep and didn't want to do anything.

What changed the situation?

My roommates were on an Ultimate Frisbee team and as they headed for practice one night, one of their team members called with a broken leg and had to pull out for the rest of the season. I really wasn't interested in playing at all but my roommates said if I covered for their missing team member they'd pay for groceries for the next week. Although I hadn't been eating much lately, I figured they must really need me to make an offer like that. So I went to practice with them that night. Surprisingly, I didn't even think of my ex-girlfriend for the entire evening. After the next practice I was really starting to have fun. We went to a pub after practices and I started to learn how much more fun it was hanging out with friends without needing a girlfriend by my side. In fact, girls were the furthest thing from my mind for awhile!

My advice to someone going through a break-up:

You can't force someone to want to be with you. We all have different priorities. If someone doesn't want to be with you, why would you want to waste your time wanting to be with them? There's more to life, so get out and have fun.

Is it time to break-up?

Ask yourself the following questions:

- Am I afraid of losing them, or am I just afraid of being alone?
- Am I physically attracted to them? If you are sexually active with your partner, ask yourself if you enjoy sex with them.
- Do I generally feel good around my partner? Am I happy more than upset or bored when with them?
- Do I feel good about myself around my partner? Am I constantly second-guessing myself? Does he or she make me question my life and my choices?
- Do we trust each other enough to be apart? If you are in an exclusive relationship, do you trust your partner to be faithful? Do you trust yourself?

Think carefully about how you would answer these questions and write down how you feel. Compare your answers to what you believe a good relationship should be. All relationships go through ups and downs, but if there are more downs than ups, you should think carefully about your feelings and your own needs. We often get stuck in relationships that aren't working because they're familiar. If things aren't going well, let yourself consider life without that person and see how you feel. If you decide that the relationship is worth saving, try to find a way to discuss the changes you need with your partner.

ABUSIVE RELATIONSHIPS

Abusive relationships occur when one partner controls the other partner with violence, intimidation, and/or threats. Although movies and television paint the picture that abuse only happens to meek submissive women at the hands of aggressive men, research indicates that abuse can happen to almost anyone. Although the most common form of abusive relationship is heterosexual, with the majority of violence directed at the woman, women can abuse men and lesbian and gay relationships can

also be violent or emotionally abusive. People in their late teens and early twenties are at the highest risk for partner aggression. Abuse can take many forms, and although physical abuse probably gets the most media attention, abusive relationships often involve financial, emotional, or sexual abuse. Abusive relationships don't happen overnight. At first, the signs may be subtle and you may hope it will get better but usually abusive relationships worsen and become more violent over time.

FORMS OF ABUSE

- ➔ **Emotional Abuse.** Emotional abuse includes the use of constant criticism, insults, threats, and intimidation to isolate the abused partner and make him or her afraid to leave the relationship or seek help.
- ➔ **Sexual Abuse.** Sexual abuse includes any kind of forced sexual act, ranging from sexual touching to forcible intercourse (rape). Some people believe that you can't be raped by someone you are in a relationship with; this is not true. If you don't agree to have sex, it's rape; no matter who the person is.
- ➔ **Physical Abuse.** Physical abuse includes any kind of assault with the body (e.g., punching, kicking) or with another object (e.g., gun, knife, baseball bat), intended to cause physical harm.
- ➔ **Financial Abuse.** Financial abuse includes limiting access to financial resources (e.g., cash, bank accounts, credit cards) so as to limit your ability to leave the relationship.

WARNING SIGNS OF ABUSE

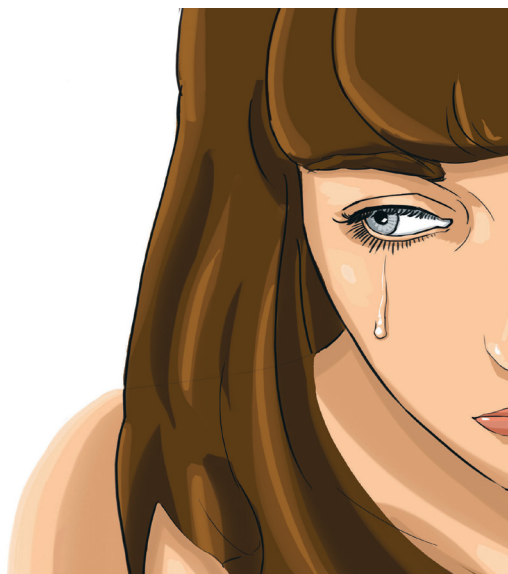
- ➔ Your partner is violent and may yell at you, push you, or hit you.
- ➔ Your partner isolates you, limiting your time with family and friends.
- ➔ Your partner is very jealous and accuses you of things you did not do.
- ➔ Your partner tries to control many or all aspects of your life (e.g., your decisions, your finances, your clothes, your friends, etc.)
- ➔ Your partner demands that you have sex, even if you say no.
- ➔ Your partner blames you for their actions.
- ➔ Your partner threatens to hurt themselves, you, or your friends/family if you do not do what they want.
- ➔ You feel you have to always act a certain way to please your partner (i.e., walking on eggshells).
- ➔ Your partner uses intimidation to make you feel afraid.
- ➔ Your partner criticizes you to make you feel ashamed.
- ➔ Your partner calls you names and ridicules you.
- ➔ Your partner makes jokes to demean or humiliate you in front of others.

If you experience any of these warning signs, it's really important that you speak to someone you trust. People often feel ashamed to admit that they are being abused. Know that this isn't your fault. No one deserves to be abused. It's tempting to make excuses for your partner when you care about them. Unfortunately, those excuses won't make the abuse stop. Leaving an abusive partner can be really frightening. It may also be risky for you, especially if you live together. Have someone (e.g., a friend or family member) with you and consult the police, a women's shelter, or campus women's centre, if you decide to leave.

If you realize that you have acted this way towards your partner, counseling is important. Resist the temptation to be ashamed and ignore the problem. There are completely confidential organizations that can help you work through your issues. Domestic violence is a criminal offence and conviction could leave you with a criminal record that could impact the rest of your life. It's never too late to get help and admitting that you have a problem is the first step to solving it.

WHY DO PEOPLE ABUSE?

A reason is not the same as an excuse. For example, a drunk driver may accidentally hit and kill a young child – but it doesn't make it okay just because the driver was drunk. It can be hard to understand how someone who claims to care about you can also abuse you. The most important thing to remember is that the abuse happens because of the abuser's issues, not because of something that the other person did. For example – if your partner hits you, breaks your things or spits on you, it is because of THEM and the way that they cope with their feelings. They would do it regardless of who they were in a relationship with. The causes of abuse are complex and may differ in different situations.



LEAVING AN ABUSIVE RELATIONSHIP

Making the decision to leave an abusive relationship can be really difficult. Your partner may apologize and promise you that it won't happen again. Unfortunately, research has found that it usually doesn't, and often the abuse gets worse over time. Although you may still love your partner, making your decision even harder, you don't deserve to be abused. If you stay in an abusive relationship, it's very unlikely that it will improve. Keep in mind that leaving an abusive relationship should never be done alone. It may be hard or embarrassing to tell friends or family what is happening, but the safest thing is to have someone with you, or move home while you transition out of the relationship.

Tips to get out of an abusive relationship if you are living together:

- Make sure you prepare a safety plan; know the best time to leave (when the abuser is not home).
- Contact a local domestic violence shelter. They will be able to help you prepare a plan to safely get out.
- Have a friend or family member with you and make sure someone knows where you are at all times.
- Store important documents in a safe place for you to grab them quickly when you need to leave.
- Prepare an emergency suitcase with everything you may need.
- Know exactly where you are going and how to get there.
- Call the police to help you if you are scared.
- Warn your friends and family not to give out information about you. The abuser may threaten them or harass them to try to find you.
- Be aware that the abuser might have access to your e-mail and banking information, so change all passwords and notify your bank. It may be a good idea to change your phone number as most cell phone companies are not able to block a single number.

If you break up with an abusive partner and are living in residence or on-campus, **it is very important to let residence security know if you fear for your safety**. It might be hard to tell people what has happened, but at the very least, the people in your life should know that the relationship has ended. That way, your friends or residence advisor will know not to tell your ex where you are or what you are doing. Provide campus security with their picture so they are prepared.

If you are living off campus, make sure that your ex cannot enter your apartment. If you don't feel comfortable telling your roommates what happened, **make sure they understand that your ex is absolutely not welcome in the apartment**, nor should he/she be invited to any social

events. Don't let anyone make you feel guilty for ending the relationship. If you feel like you cannot get away from your ex among your group of friends, consider taking a break, a vacation, or staying somewhere else for awhile. You can also consider a peace bond or restraining order, which can be obtained from the court house or by contacting local police services.

Once you are out safely, consider seeking counseling to deal with the emotional and physical fallout of the relationship. You do not want to fall back into an abusive relationship again, and the best way to make sure that doesn't happen is to educate yourself about the patterns of abuse and what it means to be in a healthy relationship.

For more information on dating violence, visit: <http://deal.org/the-knowzone/violence/dating-violence/>

Learn from Sarah's story

I was in love with this guy for three years. Then suddenly he was kicked out of school and everything changed. He got really mean. I felt that I had to do whatever he wanted. He started calling me names and pushing me around. I told myself that he was just going through a bad stage, and that things would improve. I didn't complain because I didn't want him to break-up with me.

What changed the situation?

He had this "thing" about me not answering the phone in our apartment. One day when my boyfriend was in the shower the phone rang and I answered it. He came running out of the shower and ripped the phone right out of the wall and gave me a fat lip. A couple days later I told my friend what had happened and her reaction was a real reality check! I realized my relationship was NOT normal! So I left. It was not easy. He bought me flowers and called me constantly. I actually felt sorry for him and almost took him back, but I knew in my heart that he needed help and it was his problem, not mine. So I cut him off completely, which was really hard. But I am glad I did it.

My advice to someone in an abusive relationship:

Get out! It will not get better and it may get worse. Don't make excuses or feel guilty about their behavior. It is in no way your fault. Know what you deserve and don't take less! Don't let anyone drag you down with them!

The background is a solid pink color. Overlaid on this are large, white, organic, and somewhat abstract shapes that resemble stylized, flowing forms or perhaps the negative space of a large letter. These shapes are positioned in the upper and middle portions of the frame, creating a dynamic and modern aesthetic.

SEXUALITY

SEX-A PERSONAL CHOICE!

Sexuality is complicated. Our sexual experiences and preferences play an important role in our sense of self and identity. Sexuality involves intimacy, and sharing your vulnerabilities and your body with another person. Whether it's a short-term fling or a long-term relationship, sex has the power to profoundly impact our emotions, our self esteem, and our physical health. On average, people in Canada lose

their virginity around age 15, but there are many who choose to wait longer, some until they're married. In many religious communities, sexuality before marriage is discouraged.

Sex can and should be a healthy and fun experience. If it's something you want to try, then you should think carefully about what kind of sex you are comfortable with, who you want to share it with, and what your boundaries are.

HOW DO SEX, GENDER IDENTITY, & SEXUAL ORIENTATION DIFFER?

The terms sex, gender identity and sexual orientation often get confused. Your sex is defined by your physical characteristics (i.e., what sex organs you have), whereas your gender identity is the gender you feel you are in your mind, regardless of your physical characteristics. Your sexual orientation (also called sexual identity) is defined by who you are sexually or romantically attracted to.

Having a gender identity that is different from your sex is not a mental illness. Neither is having a sexual orientation other than heterosexual (male-female). The following are terms approved by the GLAAD (Gay & Lesbian Alliance Against Defamation) organization to describe people with a range of sexual orientations and gender identities.

- ➔ **LGBTQI/GLBTQI.** Acronym for "lesbians, gay, bisexual, transgender, queer, and intersex." Used as an inclusive term for the entire community.
- ➔ **Bi-sexual.** Someone who is attracted to both men and women (physically, romantically, and/or emotionally). Having sexual experience with both sexes is not a requirement to consider yourself bisexual.
- ➔ **Gay.** Someone who is attracted to people of the same sex (physically, romantically, and/or emotionally). Lesbian is a term often used/preferred by women who are attracted to other women.
- ➔ **Heterosexual.** Someone who is usually attracted to someone of the opposite sex (physically, romantically, and/or emotionally). Also referred to as straight.
- ➔ **Cross-Dresser.** Someone who occasionally wears clothes traditionally associated with someone of the other sex. Cross-dressing is not the same as transgender, as cross-dressers are usually comfortable with the sex they were born

with. It is a form of gender expression and is not indicative of sexual orientation. (e.g., A man may wear women's clothes occasionally but still be attracted to women.)

- ➔ **Intersex.** Someone whose anatomical characteristics are ambiguous (not clearly male or female).
- ➔ **Transgender.** Someone whose gender identity is different than their anatomical sex (e.g., The person was born with male sex organs but has an internal sense of being a woman). Being transgender is not related to sexual orientation and does not mean that someone is gay or lesbian. Some transgender people take hormones or have surgery to alter their bodies to fit their gender identity, and some do not.
- ➔ **Queer.** A term used by some LGBTQI people to refer to themselves. Historically, this term was offensive and many LGBTQI people still consider it to be derogatory. It should be avoided unless someone identifies themselves as queer.

HOW DO I KNOW IF I'M GAY, LESBIAN, OR BISEXUAL?

Sexual orientation can be complex and multidimensional. Depending on where you may have grown up, or your cultural or religious background, you may have certain ideas about what it means to be gay. If you feel uncertain about your own sexuality, that's OK. Your sexual orientation will grow and develop over time and experience, and will eventually become clear to you. There is no reason to rush into labelling yourself! Some people experiment sexually during their College/University years, and that's OK; just practice safe sex. Always remember: no one should ever feel ashamed of their sexuality.

Coming out

Coming out is a process of self-acceptance. It is very personal and will be different for everyone. Coming out doesn't have to mean telling everyone you meet that you are gay, lesbian, bisexual, transgender, or however you identify. You can choose to be openly gay in one environment (e.g., with friends) and not in another (e.g., at work). It is entirely up to you and what makes you comfortable. Share your feelings with people you can trust. If you are not ready to talk to your friends or family, try joining a local support group or LGBTQI organization. Talking to people who have gone through a similar experience can be really helpful. Remember to be proud of who you are. Coming out can be a stressful process and takes courage. The most important thing to remember is that there is no right or wrong way to come out. Do what feels right for you.

For more information and support, visit: www.pflagcanada.ca

Tips to make coming out easier

- ➔ Tell the truth to yourself and others.
- ➔ Say aloud "I AM GAY!" and see how it feels.
- ➔ Avoid coming out to others when you are angry.
- ➔ Be sure to be in a private, comfortable environment.
- ➔ Join a GLBTQI support group; if there are none in the community, there are many online!
- ➔ Make sure you're sober when you tell your family and friends.
- ➔ Be prepared for loving acceptance even if you don't expect it; people can surprise you.
- ➔ Know that there are going to be people who won't accept you. Remember that it is their loss and not a reflection of you.
- ➔ Have resources to help them understand (brochures, books, etc.)
- ➔ Understand that not everyone will accept you immediately. That doesn't mean that they won't come around, given some time to adjust.
- ➔ Never doubt your own self-worth!



CHOOSING A CONTRACEPTIVE

There are many different types of birth control methods available. You should discuss your options with your doctor in order to make an informed decision on what will work best for you. Remember that birth control and protection from sexually transmitted infections (STIs) are two different things. If you are not using condoms, you will not be protected against STIs. Remember - even using a condom does not guarantee you 100% protection against STIs, so make a plan to keep yourself safe.

Birth Control Methods for Female

Birth Control Pills (Requires Prescription)

How it works:

1. Taken every day,
2. Affects hormone levels, prevents egg from being released & thickens cervical mucus so sperm can't pass as easily,

Advantages:

1. 92% effective with typical use,
2. Reversible,

Disadvantages:

1. Doesn't protect against STIs,
 2. Have to remember to take it every day,
 3. May experience spotting, nausea, tender breasts, moodiness, headaches and weight gain,
 4. Some medications may interfere with the pills' effectiveness.
-

Birth Control Patch (Ortho Evra) (Requires Prescription)

How it works:

1. Thin patch placed on skin,
2. Patch changed each week, with 1 week off after 3 weeks on,
3. Affects hormone levels, prevents egg from being released & thickens cervical mucus so sperm can't pass,

Advantages:

1. Same effectiveness as birth control pill,
2. Reversible,
3. Only need to remember to change once a week, rather than taking a pill every day,

Disadvantages:

1. Doesn't protect against STIs,
 2. May experience spotting, headaches or breast tenderness,
 3. Patch may irritate skin or detach from skin,
 4. Not as effective for women over 198 lbs.
-

The Ring (NuvaRing) (Requires Prescription)

How it works:

1. Flexible 2-inch ring inserted into the upper part of the vagina once a month for 3 weeks,
2. It releases hormones that prevent an egg from being released,

Advantages:

1. Same effectiveness as the pill,
2. Reversible,
3. Easy to use and you don't have to remember to take a pill every day,
4. Doesn't affect intercourse,

Disadvantages:

1. Doesn't protect against STIs,
2. May be uncomfortable to insert,
3. May cause vaginal discomfort or irritation,
4. May experience nausea, moodiness, headaches or weight gain/loss.

The Shot (Depo-Provera) (Requires Prescription)

How it works:

1. Injection from healthcare professional 4 times a year,
2. Affects hormone levels, prevents egg from being released & thickens cervical mucus so sperm can't pass,

Advantages:

1. 97% effective with typical use,
2. No estrogen related side effects,
3. Injections only needed 4 times a year,
4. Improves endometriosis symptoms,

Disadvantages:

1. Doesn't protect against sexually transmitted infections,
 2. May cause irregular bleeding, decrease in bone mineral density (which return to normal after stopping shot), weight gain, and delays in getting pregnant.
-

"Morning after" pill (Available without prescription in Canada)

How it works:

1. Emergency use only,
2. Must be taken within 5 days of unprotected sex to prevent pregnancy. Sooner it is taken, better it works.

Advantages:

1. Does not affect future fertility and is easy to use,
2. Can prevent pregnancy after unprotected sex,

Disadvantages:

1. Doesn't protect against STIs,
 2. May experience nausea,
 3. Less effective than birth control pills (prevents 3 out of 4 pregnancies),
 4. Not for regular use.
-

Condoms (Available without prescription)

How it works:

1. Pre-lubricated pouch that lines the walls of the vagina,
2. Prevents direct genital contact and exchange of fluids by lining vagina,

Advantages:

1. 95% effective against pregnancy if taken correctly,
2. Can be used with latex allergies,
3. Reduces risk of some STIs,

Disadvantages:

1. Can be uncomfortable to insert & are pricier than male condoms,
 2. Not reusable,
 3. Makes noise during sex,
 4. Can slip or break.
-

Intrauterine Device (Requires Prescription)

How it works:

1. T-shaped device inserted in the uterus by a doctor (can remain for up to 5 years),
2. Made of copper or plastic with added progestin (Mirena),
3. Blocks sperm from fertilizing egg; causes changes in uterine lining and cervical mucus,

Advantages:

1. Can last up to 5 years,
2. Contains no estrogen,
3. Doesn't interfere with sex,

Disadvantages:

1. May increase menstrual bleeding and cramping,
2. Perforation of uterus is rare but possible at time of insertion,
3. Falls out in 2-10% of women,
4. Doesn't protect against STIs,
5. Must be inserted and removed by a doctor.

Birth Control Methods for Male

Condoms (Available without prescription)**How it works:**

1. Latex or polyurethane sheath fits over an erect penis,
2. Prevents direct genital contact and exchanging of fluids,

Advantages:

1. Over 90% effective against pregnancy if used correctly,
2. Best form of protection against STIs,
3. Easy to obtain and often free,
4. Available in a variety of sizes, shapes, thicknesses, colours, and flavours,

Disadvantages:

1. Sometimes may reduce the sensation for either partner,
2. Some people are allergic to latex but non-latex are available,
3. Not reusable,
4. Can slip or break.

Withdrawal (a.k.a. Coitus Interruptus)**How it works:**

1. When the man pulls his penis out of the vagina before he ejaculates,

Advantages:

1. No cost and easy,
2. Much less effective than other methods,
3. No hormones or barriers,

Disadvantages:

1. Significant risk of pregnancy,
2. Doesn't protect against STIs or pre-ejaculation, which contains some sperm,
3. Requires self control, experience and trust. Male must be absolutely certain of when going to ejaculate,
4. Not widely recommended.

*Cervical cap, diaphragm, and sponge are less commonly used methods of female-controlled contraception. For more information on these methods, speak to a physician.

Resources: Calgary Sexual Health Centre. (July 2007) www.cbca.ab.ca and www.sexualityandu.ca

For more information on birth control options, visit: www.sexualityandu.ca

SEX & UNEXPECTED CONSEQUENCES

UNEXPECTED PREGNANCY?

If you just found out you're pregnant, you could be on an emotional rollercoaster or you could be feeling numb. You have several options for how to proceed and it's important that you take the time to really think things through. Before you make any decision, you need to address your emotions and the realities of your situation. Talk to someone you trust, like your parents, boyfriend or girlfriend, doctor, or friend. Never let anyone force you into a decision. You are the one who has to live with the consequences of whatever you decide, so the decision must be your own.

If you have just found out that your partner is pregnant, remember that you can be supportive while also being honest about your own needs.



In Canada, you have three options (presented in alphabetical order):

- ➔ **Abortion.** Abortion is the ending of a pregnancy and can be done at a hospital or at an abortion clinic. Abortions are safe and legal in Canada. If you choose to have an abortion, it should be done as early in your pregnancy as possible. For more information on abortion, check out the Canadian Federation for Sexual Health: http://www.cfsh.ca/Your_Sexual_Health/Abortion/

- ➔ **Adoption.** Adoption is when another person steps in to raise the child as their own. The adoption can be public (arranged through a public or government agency), private (not arranged through a public agency), open (the birth parent(s) and adoptive parent(s) know/meet each other), or closed (when the birth parent(s) and adoptive parent(s) do not know/meet each other). For more information, visit: http://www.cfsh.ca/Your_Sexual_Health/Pregnancy/Pregnancy-Options/Adoption.aspx
- ➔ **Raising the child.** If you choose to raise and parent the child, it is important that you visit your doctor to receive prenatal care as soon as possible. For more information on things to consider when pregnant, visit: http://www.cfsh.ca/Your_Sexual_Health/Pregnancy/Pregnancy-Options/parenting.aspx

Here are some questions to consider when you make your decision:

- ➔ Are you involved with the other person or are you in a stable relationship? If not, does it matter?
- ➔ What are your responsibilities? (e.g., school, work, family, etc.)
- ➔ What are your goals in life?
- ➔ What kind of life will you be able to offer a child?
- ➔ What are the financial realities? Can you afford to have a child? Do you have the necessary qualifications/education to find a good job?
- ➔ What are your personal religious beliefs and values?
- ➔ Do you have the time to raise a child and study?
- ➔ Do you have the social support of family and friends? Is your family nearby and willing to help out?
- ➔ What are you willing to give up? (e.g., partying, living in a certain area, staying in school, etc.)

There are many aspects of your life that will have to be considered as you deal with this. Trying to sort out everything on your own is very difficult. You may want to contact your student health clinic and student counseling office to get unbiased help and support. Although avoiding the situation can be tempting, remember that some options are only possible in the early stages of your pregnancy possibly leading to decisions you may not be comfortable with. For more information on unplanned pregnancy, visit: www.cfsh.ca

INTERNET PORNOGRAPHY AND RELATIONSHIPS

The rise of the Internet in the past few decades has led to a boom in the popularity of commercial sexuality. Commercial sexuality is a term for the sexual products, services, or images that include an economic transaction. Even free pornography on the Internet is an economic transaction as income is generated through advertisements on the website. Widespread consumption of Internet pornography is a relatively new social phenomenon and there is much that we don't know yet about how this will impact the sexual experiences of your generation. Some research has shown that

frequent use of Internet pornography can become addictive and create difficulties in achieving intimacy with real human partners.

Ask yourself what your thoughts and feelings are about pornography and what role it should play (if any) in your intimate relationships. If you are in an exclusive relationship, discuss where you stand with your partner and trust your gut instincts. If it makes you feel bad, then it's not okay. If it is something that you choose to use, make sure that it is balanced with healthy relationships and openness to real people.

SEXUALLY TRANSMITTED INFECTIONS (STIs)

Sexually transmitted infections, or STIs, can be uncomfortable to talk about, especially if you've just met someone. Even though it might be awkward, it's a good idea to discuss the risks with your partner and decide together how you can best protect each other. You're at higher risk for STIs over the next four to five years because they are so common among College/University students. Worrying about possible STIs while having sex can definitely ruin the moment.

Various types of STIs are:

Chlamydia	Syphilis
<p>Symptoms?</p> <ol style="list-style-type: none"> 1. Most people show no symptoms, however, if they do occur, they usually appear between 2 days and 2 weeks after infection. 2. Women – Vaginal discharge, painful intercourse and urination; as well as bleeding between periods. 3. Men – Painful urination and discharge/itching from the penis. Pain and swelling in the testicles may occur. <p>How is it transmitted?</p> <ol style="list-style-type: none"> 1. Spread through unprotected oral, anal, or vaginal sex. Chlamydia cannot be diagnosed from a blood test, but you should have a blood test done in 3 months to check for any other infections you may have contracted at the same time. <p>How is it treated?</p> <ol style="list-style-type: none"> 1. Antibiotics. 2. Both partners must be treated. 3. Avoid sexual intercourse (vaginal, anal, and oral) during treatment. <p>Long term?</p> <ol style="list-style-type: none"> 1. Women – Can lead to pelvic inflammatory disease (PID), which can cause permanent damage to the fallopian tubes, uterus, chronic pelvic pain, infertility, and potentially fatal ectopic pregnancy (pregnancy outside the uterus). It can also be transmitted to infants during childbirth and makes you more vulnerable to HIV, if exposed. 2. Men – Can become sterile. 	<p>Symptoms?</p> <ol style="list-style-type: none"> 1. Initial symptoms appear from 10-90 days after exposure on the genitals, anus, or throat. 2. 4 stages of symptoms. Primary and Secondary stages are most infectious. Latent and Tertiary stages are most harmful. 3. Primary stage symptoms: Painless sore (called a chancre) – may heal on its own but doesn't mean infection is gone. 4. Secondary stage symptoms: Flu-like symptoms, rash, swollen lymph nodes, muscle & joint pain. Usually lasts 3-12 weeks but infection is still present after symptoms disappear. 5. Latent stage symptoms: May last years, no obvious symptoms but bacteria are multiplying. 6. Tertiary Infection Symptoms: Causes major health complications that can lead to death. <p>How is it transmitted?</p> <ol style="list-style-type: none"> 1. Spread through unprotected anal, oral, or vaginal sex. 2. Caused by bacteria. <p>How is it treated?</p> <ol style="list-style-type: none"> 1. Antibiotics. 2. You can contract syphilis again, so avoid sexual intercourse until both partners have been fully treated. 3. Diagnosis is made using a blood test. <p>Long term?</p> <ol style="list-style-type: none"> 1. Even if symptoms disappear, the infection will remain until properly treated. May damage the brain, nerves, eyes, heart, blood vessels, liver, bones and joints. 2. Symptoms of the late stage of syphilis include poor muscle coordination, psychosis, paralysis, numbness, blindness, and may cause death.
Hepatitis B	Hepatitis C
<p>Symptoms?</p> <ol style="list-style-type: none"> 1. Not everyone shows symptoms such as nausea, tiredness, yellow skin or eyes (jaundice), loss of appetite, dark urine or light-coloured bowel. 2. Acute infection can last up to 6 months and most will recover and develop immunities. <p>How is it transmitted?</p> <ol style="list-style-type: none"> 1. Spread through unprotected anal, vaginal, or oral intercourse; through sharing needles, razors, or other personal products that may have come into contact with blood, or from infected mother to child during birth. <p>How is it treated?</p> <ol style="list-style-type: none"> 1. There is no treatment for acute Hepatitis B. 2. Chronic infection may be treated with an antiviral. 3. Hepatitis B vaccine is the best prevention. 4. Hepatitis B is diagnosed with a blood test. <p>Long term?</p> <ol style="list-style-type: none"> 1. Most people recover completely within one or two months. Others cannot be cured and may suffer from long term liver problems and death. 	<p>Symptoms?</p> <ol style="list-style-type: none"> 1. Chronic liver disease caused by virus. 2. Approximately 20% of people with Hepatitis C are unaware they have it. <p>How is it transmitted?</p> <ol style="list-style-type: none"> 1. Spread through unprotected anal, vaginal, or oral intercourse; or through sharing needles, razors, or other personal products that may have come into contact with blood. <p>How is it treated?</p> <ol style="list-style-type: none"> 1. Depending on how badly the liver is infected, Hepatitis C can be treated with medication. <p>Long term?</p> <ol style="list-style-type: none"> 1. In some cases, Hepatitis C may cause the liver to fail and a liver transplant may be necessary. 2. 1 in 5 people with Hepatitis C will die from the disorder due to severe liver damage.

Genital Herpes

Symptoms?

1. Painful pink bumps appear within 2-20 days of exposure and may itch and/or burn. May be mistaken for insect bites or another skin condition.
2. Other symptoms include: swollen glands, flu-like symptoms, fever, muscle aches, burning urination, vaginal discharge and pain during intercourse.

How is it transmitted?

1. Transmitted by coming into contact with sores or an infected area (incl. kissing someone with an active sore). Sexual contact is not necessary.
2. Transmission can also occur during oral, anal, or vaginal intercourse from an infected partner who does not have a visible sore or may not even know that he or she is infected.

How is it treated?

1. There is no cure but antiviral medication can be used to lessen the outbreaks or the pain associated with outbreaks.
2. Sexual intercourse (vaginal, anal and oral) should be avoided during an active outbreak.
3. Condoms should always be worn, including for oral sex, given that the Herpes virus can be transmitted even when not in an active outbreak.

Long term?

1. Rarely are there long-term worsening effects. Sometimes it is transmitted to an infant during childbirth and if it is, it may lead to severe brain damage or death of the infant.
2. Open sores associated with Herpes increase vulnerability to HIV.

Trichomoniasis (Trich)

Symptoms?

1. Half of women and most men will not have symptoms. If they do, symptoms will appear within a week (most common) to 6 months after infection.
2. Women – Redness, swelling and itching of the vulva. Painful urination and intercourse and/or pelvic discomfort. May have yellow-green vaginal discharge with a strong odor.
3. Men – may have an irritation inside the penis, mild discharge, slight burning after urination or ejaculation.

How is it transmitted?

1. Trich is caused by a tiny parasite that is usually transmitted through sexual intercourse (penis to vagina or vagina to vagina) or the genital area outside the vagina.
2. It may also be picked up from shared sex toys and underwear.
3. It is not common for trich to infect other areas of the body, like the mouth or the anus.

How is it treated?

1. Antibiotics.
2. Avoid sexual intercourse until both partners have been treated.
3. Although symptoms in a male may not be apparent or may disappear within a few weeks without treatment, men can continue to infect females until they are treated.

Long term?

1. If untreated, Trich may lead to pelvic inflammatory disease (PID), premature labor, low birth weight and increased risk for infection if exposed to HIV.

Crabs (a.k.a. Pubic Lice)

Symptoms?

1. Small insects that look like crabs, live off human blood, and lay their egg sacks at the base of pubic hair.
2. Symptoms include itchiness, insect bites that look like blue dots, and fine black particles in underwear.

How is it transmitted?

1. Spread through intimate contact with another person (even without intercourse), or through contact with bedding/towels/clothing of an infected person.

How is it treated?

1. Over-the-counter shampoo is available at pharmacies. Usually only one dose is necessary. All bedding/towel/clothes should be washed and other items vacuumed or bagged for a week.

Long term?

1. Without treatment, crabs will not go away.
2. Possible bacterial infection from constant scratching.

Scabies

Symptoms?

1. Parasitic mites that burrow holes under the skin and lay eggs, which spread the infection to different areas of the body after hatching.
2. Usually seen in warm areas of body, like inner elbow, buttocks, back of knee, breasts, penis, under nails, etc.

How is it transmitted?

1. Spread through close contact with person who is infected or clothes/bedding of someone who is infected.

How is it treated?

1. Prescription lotion applied all over body,
2. Wash all clothing/bedding/towels with hot water. Vacuum or bag (at least 3 days) anything that can't be washed.

Long term?

1. Possible bacterial infection from constant scratching.

Gonorrhea**Symptoms?**

1. Symptoms are similar to those of Chlamydia. They appear 1-14 days after exposure. The infection can happen in the rectum, penis, cervix, or throat.
2. Women – Mild symptoms. Painful or burning when urinating, vaginal or rectal discharge, bleeding between periods.
3. Men – Greenish/yellow discharge from penis, pain or burning with urination and sometimes painful or swollen testicles.

How is it transmitted?

1. Spread through unprotected oral, anal, or vaginal sex.
2. Ejaculation does not have to occur for male to female transmission to occur.
3. Even if one partner's symptoms are not visible, they can still pass the infection on to someone else.

How is it treated?

1. Antibiotics.
2. Avoid sexual intercourse (vaginal, anal and oral) during treatment.

Long term?

1. If left untreated, gonorrhea can leave both men and women infertile.
2. Women – Common cause of pelvic inflammatory disease (PID) which can cause permanent damage to the fallopian tubes, uterus, chronic pelvic pain, infertility, and potentially fatal ectopic pregnancy (pregnancy outside the uterus). It can also be transmitted to infants during childbirth and makes you more vulnerable to HIV, if exposed.

HIV/AIDS**Symptoms?**

1. It may take years after contracting HIV for symptoms to appear. Symptoms may begin 3-6 weeks after exposure including flu-like symptoms, fever, nausea, headache, fatigue, diarrhea, white spots in mouth, swollen lymph nodes. These symptoms usually disappear within 1-4 weeks and are often mistaken for the flu. It is important to get a blood test to determine if you have the virus. It may take up to 3 months (and occasionally up to 6 months) post exposure for tests to detect HIV.

How is it transmitted?

1. Spread through exposure to bodily fluids, including:
 - a. contact with semen or vaginal fluid via unprotected intercourse
 - b. contraction through oral sex is possible but risk is much lower.
 - c. sharing needles.
 - d. contact with infected blood or breast milk

How is it treated?

1. There is no cure for HIV or AIDS.
2. Medication can be taken that may slow the disease and the deteriorating immune system.

Long term?

1. HIV breaks down the immune system, which means it will eventually lead to AIDS and maybe death. However, progression of HIV into AIDS is different for everyone. Some people with AIDS live five years, while some remain HIV+ and AIDS free for 30 plus years with proper treatment!

Human Papilloma Virus (HPV) (Genital Warts and Cancers)**Symptoms?**

1. Most people infected don't know they are infected. Pap smears are helpful to diagnose HPV on the cervix.
2. Warts are caused by certain strains of HPV. They may appear anywhere in the genital area; once infected with the virus it takes 1-3 months to appear. They look like pink/white painless lumps or larger cauliflower shaped lumps.
3. Certain types of cervical, anal and penile cancers have been linked to other strains of HPV. Although there is a vaccine for these strains of the virus, there is much we still do not know.

How is it transmitted?

1. HPV is transmitted through skin-to-skin contact, usually through sexual intercourse.

How is it treated?

1. There is no treatment for HPV that causes cervical cell changes, but most HPV infections go away without treatment.
2. Antibiotics or other medicines do not treat HPV.
3. Topical cream, lasers, freezing, or burning can be used to treat warts but are often quite painful.
4. The HPV vaccine protects against some kinds of HPV and has been approved for use with female 9-26 year olds in Canada. Ask your doctor for more information.

Long term?

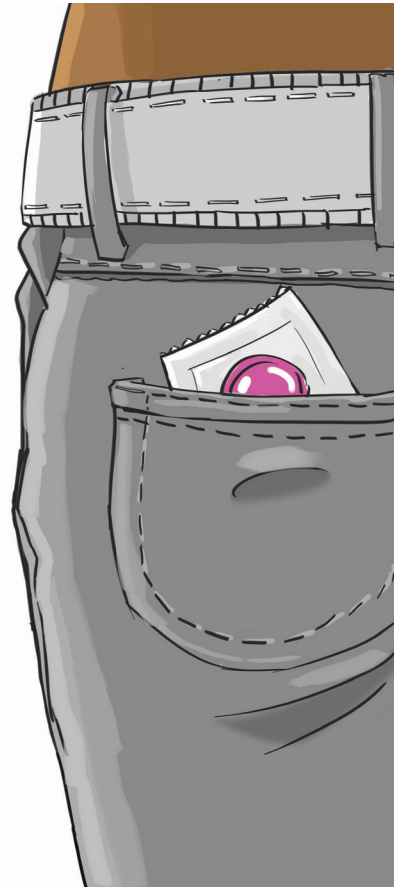
1. It is estimated that 75% of Canadians will have an HPV infection in their lifetime. The strains linked to cancers are not the same strains linked to the presence of genital warts.
2. It is important to remember that HPV is transmitted from skin-to-skin so if you are not engaging in intercourse, but still touching genitals, you can get it.
3. Any form of skin-to-skin contact with someone infected with HPV can transmit the virus, including anal sex.

Tips for keeping sex safer!

- Use condoms every time you have sex. Proper condom use is the best way to protect yourself from contracting a STI.
- Visit your doctor regularly for a STI test. Although a PAP smear can often detect HPV, it will not detect other STIs.
- A single committed partner decreases the risk. Multiple casual partners puts you at higher risk – if you increase the number of partners, increase your safety protocol!
- You can use flavoured condoms for oral sex and there are latex condoms specially designed for performing oral sex on women.
- Never touch a genital sore caused by a sexually transmitted disease. Infection can sometimes be carried on your hand to your partner's genitals. Mouth herpes can be transmitted to the genitals during oral sex or vice versa.
- If you use sex toys, don't share them unless you wash them first (as per instructions on the box) or use condoms on them.

If you do have a STI, you may find it difficult to discuss this with new partner. Even though it's difficult, you will feel better once you talk to them. Many STIs don't always show symptoms and yet, have serious consequences if untreated. You can also be reinfected by several STIs if your partner is not treated. Have a conversation with your doctor about future sexual activity. There is no cure for HIV/AIDS, genital warts, or herpes, but there are ways to ensure that you have a healthy sex life with minimal risk of infecting your partner.

For more information on sexually transmitted infections, visit: www.sexualityandu.ca



SEXUAL HARASSMENT OR ASSAULT

Sexual assault is not about sex. It is an act of violence and power over another person. 1 in 4 women in North America may be sexually assaulted in her lifetime. And about 1 in 6 men may be sexually assaulted before age 18. Statistics for sexual assault are believed to be an underestimate of how often sexual assault actually occurs, as many cases do not get reported.

Non-Physical forms of sexual harassment:

Threats, sexual suggestiveness, blackmail, intimidation, and exhibitionism.

Physical forms of sexual assault:

Any oral sex, fondling, or intercourse that occurs without consent. They may involve physical assault, such as hitting, choking, and/or being held down. Being spit on by a partner is also considered physical assault by law enforcement. If you are unable to consent to sex because you are passed out or highly intoxicated, it is sexual assault.

WHO ARE THE PERPETRATORS?

Although we are often taught to think that strangers pose the greatest threat of violence, it is more likely someone you know (a partner or family member). Roughly half of all sexual assaults against women occur on dates.

Although we most often hear about women being sexually assaulted by men, sexual assault can happen to men as well. Sexual assault can also occur in any relationship, including relationships of power, family relationships, and romantic relationships (including same-sex relationships and one-night stands).

SAFETY TIPS TO REDUCE THE RISK OF SEXUAL ASSAULT

- ➔ Rely on your instincts! Trust your gut! If you feel unsafe, get out of the situation as soon as possible.
- ➔ Know you always have the right to say NO to unwanted sexual advances.
- ➔ Keep a cell phone with you.
- ➔ Take a self-defence class.
- ➔ Tell someone if you are being harassed.
- ➔ If you are experimenting with drugs, do it in a safe space with people you trust.
- ➔ Avoid walking alone, especially at night. If you need to walk alone, stay in well-lit areas away from buildings.
- ➔ Do not leave open drinks unattended, especially at a bar or party. If someone offers to buy you a drink, make sure you see the bartender make it in front of you.
- ➔ Tell someone where you are going and who you are with.
- ➔ Be wary of “hooking up” with a stranger and if you do, make sure that someone knows who you are with and where you are going.
- ➔ Travel with others if you are going to unknown places or parties.

DATE RAPE DRUGS

Date rape drugs can be used to carry out sexual assault on men and women, so be aware. These drugs may leave you physically helpless and inhibit your memory of the event. The three most commonly-used drugs are Rohypnol, GHB, and Ketamine. Ketamine can take effect right away, GHB within 15 minutes of ingestion, and Rohypnol within 30 minutes. As the drugs are colourless and odourless, they are usually slipped into a victim's drink without his or her knowledge. The effect of the drugs can last for several hours. Excessive amounts of alcohol can also be used as a date rape drug.



How can I protect myself from date rape drugs?

- Don't get drunk around people you don't know and trust.
- Don't accept drinks from people you don't know and trust.
- Do not leave open drinks unattended.
- Don't share drinks.
- Plan to go home with friends in advance, never alone.

There is no campus, town or community too small for the use of date rape drugs. Don't make the mistake of thinking it could never happen to you.

If you think you have been drugged:

- Don't urinate — you don't want the drugs to leave your system completely until you get help.
- The drugs leave your system quickly so get a urine test as soon as possible.
- Don't take a shower or change clothes before getting help.
- Go to the police or hospital immediately.

WHAT TO DO IF YOU HAVE BEEN RAPED OR SEXUALLY ASSAULTED?

- Go to a safe place.
- Call someone you trust immediately.
- Do not wash or shower, as much as you may feel like you need to.
- Contact the police (**call 911**).
- Do not change your clothes.
- Go to the hospital emergency room.

COMMON AFTER-EFFECTS

Following a sexual assault, you may experience:

- Shock — feeling numb or in disbelief
- Embarrassment or guilt that it may have been your fault. Regardless of what you were wearing or doing at the time, it is never your fault that you were assaulted.
- Feeling confused or disoriented
- Nightmares or difficulty sleeping
- Fear of everything including pregnancy (for women), sexually transmitted infections, and being alone
- Anxiety and panic attacks
- Anger or wanting revenge
- Disgust and feelings of being dirty — wanting to shower frequently

- ➔ Change in eating habits
 - ➔ Withdrawal from usual activities, including sex
 - ➔ Feelings of depression
 - ➔ Emotional roller coaster — sudden crying
 - ➔ Feelings of loss, grief
 - ➔ Difficulty trusting other people
 - ➔ Flashbacks
 - ➔ For men attacked by men, fear about your sexual orientation
 - ➔ Feeling like “less of a man” because you were unable to fight off the attacker.
-

If you have just been assaulted, it is common to be confused and very upset. You may begin to doubt or blame yourself. Sometimes people block the images & try to forget it ever happened. For some people, however, certain smells, sounds, and sights may trigger intense feelings and memories of the assault.

HOW TO START FEELING BETTER

It is important to know that regardless of the situation, it is not your fault and the healing process is going to take a while. Talking about the assault with someone you trust may help you sort out your feelings. Sometimes you may need to talk to a counsellor or therapist. It's best to seek out someone who has experience in helping people who have experienced sexual assault. Many cities have sexual assault crisis centres/rape crisis centres that either have trained counsellors on hand or can refer you to another experienced counsellor.

Here are some more tips for getting on with your life and taking care of yourself:

- ➔ It is important to try and return to a normal routine – go to class, spend time with your friends, and exercise (try walking, running, or yoga to help you relax, and feel healthy).
 - ➔ Eat a well-balanced diet – avoid junk food and too much caffeine. Caffeine can make feelings of anxiety worse.
 - ➔ Try writing in a journal, poetry, or painting – give yourself time to reflect and express your thoughts/feelings.
 - ➔ Avoid using alcohol or drugs to help you with your emotions. They'll only make you feel worse in the long run.
 - ➔ Spend time with the important people in your life. Try not to shut out the people who care about you.
 - ➔ Seek support from a counsellor.
-

Sometimes a sexual assault can lead to Post-Traumatic Stress Disorder. If you are continuing to have symptoms that interfere with your daily activities (or if new symptoms start weeks or even months to years after the incident), visit your student health clinic or counselling services office to start healing.

For more information on sexual assault against women, contact your local rape crisis centre, such as www.avaloncentre.ca For more information on sexual assault against men, visit: www.1in6.org

MANAGING STRESS

The background of the slide is a solid purple color. A large, white, curved shape, resembling a thick, sweeping line or a stylized 'S', starts from the bottom left and curves upwards and to the right, ending near the top right corner. This shape creates a dynamic, abstract design that frames the title text.

DEALING WITH STRESS

Stress is part of life, but there are lots of steps you can take to make it easier to handle the stress you encounter! The good news is that every time you successfully overcome stress and obstacles, you develop better skills to handle stress in the future. Don't avoid stress - learn how to handle it in healthy ways!

HELPFUL STRATEGIES

- ➔ **Limit or avoid drugs and alcohol.** Drinking too much or doing drugs will not reduce stressors. They affect your ability to make good decisions and are only a temporary fix. When the substance wears off, your problems are still there and your stress may end up being much worse. Too much drinking or drug use can also lead to numerous physical and mental health problems.
- ➔ **Attitude.** A positive attitude does make a difference. It affects how you react to stressful situations and consequently, how much the stress will affect you.
- ➔ **Eat a healthy diet.** A well balanced diet makes you mentally and physically stronger. Avoid eating foods that are high in fat or sugar, or that are highly processed.
- ➔ **Be active.** One of the best ways to combat stress is to get active. Exercise is good for the brain and the body!
- ➔ **Sleep.** A good night's sleep is key to a sharp clear mind. It will also help restore your energy. You need about 9 hours of sleep a night.
- ➔ **Time management.** Learn how to schedule projects and other responsibilities – it will help you be more productive and keep you from feeling overwhelmed. When you know that you have time to do everything you need to do, it makes your day a lot less stressful.
- ➔ **Take time to chill.** Do something you find relaxing, like listening to music or watching a funny movie. After a good break, you'll feel ready to conquer it all.
- ➔ **Build healthy Relationships.** It's much easier to get through stress if you have good friends for support. Surround yourself with people you can talk to and have fun with.
- ➔ **Caffeine in moderation.** Too much caffeine increases your heart rate and may make you feel more stressed out. Try to drink something healthier, like water. Remember that some tea and soft-drinks also contain caffeine.
- ➔ **Be realistic.** Try to put things in perspective. Not every stressor is the end of the world. Consider whether you're really going to be concerned about this in a week's time, a month's time, or a year's time.
- ➔ **Accept what you can't change.** If you can't change something, try not to dwell on it and get frustrated. Try to accept it and move on.
- ➔ **Acknowledge your feelings.** It's OK to feel angry or upset once in a while. You don't have to bottle up your feelings. Admitting that something is really bugging you can often make you feel a lot better.
- ➔ **Use humour.** Humour can be found in just about anything - try to laugh more and enjoy the little things in life.
- ➔ **Don't forget to breathe.** If you're feeling overwhelmed, a few deep breaths can help slow your heart rate and give you some perspective. Try the Box Breathing exercise on page 9.



SELF-CONFIDENCE

Self-confidence is one of those terms that people always throw around. We know that having good self-confidence is a key component to living a happy and successful life, but what does it really mean?

Having good self-confidence means that you see yourself positively and realistically, AND that you feel like you have a sense of control over your life.

When people lack self-confidence, they tend to see themselves in a negative light and constantly doubt their actions. They often feel anxious, depressed, and inferior to everyone else. It's also common for people lacking self-confidence to feel like they don't have any control over what happens in their life.

HOW IS SELF-CONFIDENCE DEVELOPED?

When someone lacks self-confidence, it's not because they are actually inferior to other people. It has very little to do with someone's actual abilities. Instead, poor self-confidence usually results from having unrealistic expectations for ourselves. We form our view of the world based on our repeated experiences and for people who are picked on, teased, abused, ignored, or exposed to unrealistic demands and constant criticism, their repeated experiences are telling them that they are inferior, resulting in poor self-confidence. In order to develop good self-confidence, we need adequate praise, encouragement, and support for who we are. College/University is the perfect time for you to work on building your self-confidence.

TIPS TO BECOME MORE SELF-CONFIDENT

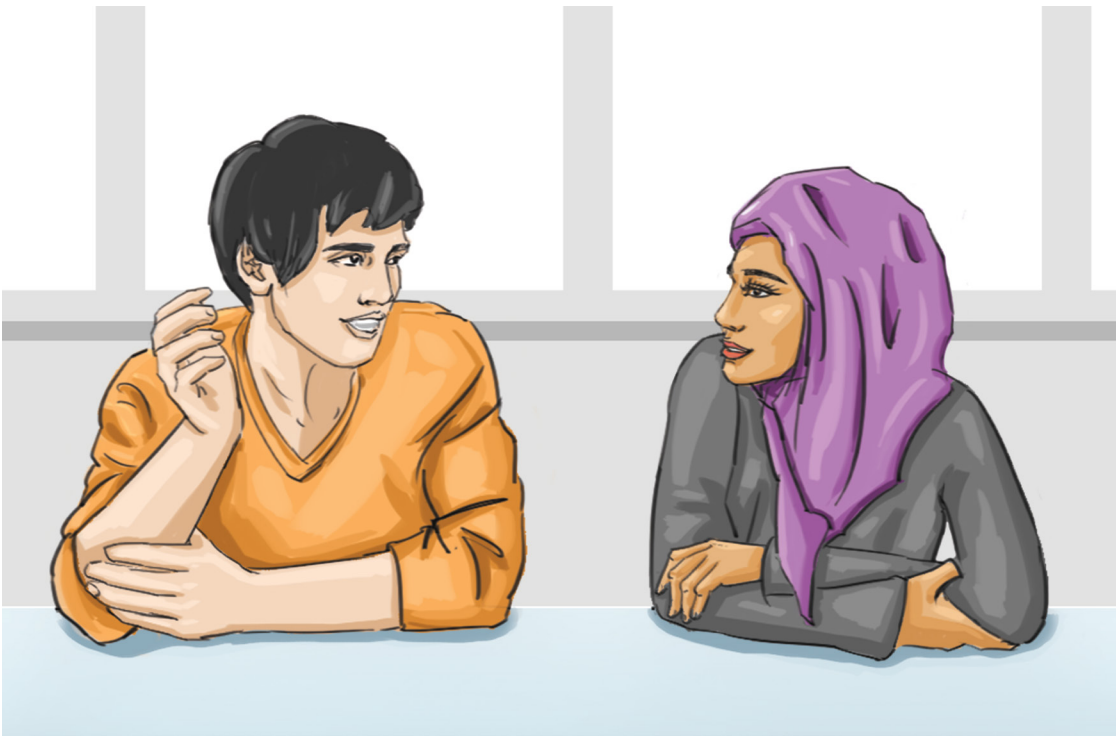
Stop comparing yourself to your ideal perfect person - that person does not exist! Don't constantly put yourself down! Here are some tips to becoming a more realistic and self-confident person:

- **Stop the inner critic.** One of the most important things to do is to tell the negative voice in your head to be quiet. If someone compliments you, DO NOT listen to that little voice in your head causing doubt. Thank them for the compliment and be proud of yourself.
- **Think realistically.** Listen to your internal dialogue. How realistic are your thoughts? Do you usually see the glass as half empty or half full? Can you change how you do that?
- **Practice self-care.** Put yourself first, eat a healthy diet, exercise, get enough sleep and take care of yourself. You are worth the effort.
- **Stick up for yourself.** Speak clearly and loudly, especially when you have something you want to say. Your opinions are important. It may be hard to do at first but once you do, you'll feel better about yourself and people will listen more closely when you speak.
- **Have fun.** Get out and do something you enjoy. The more fun you're having, the less it matters how good you are at it.
- **Be positive.** No matter what, look for something positive in every situation!
- **Take risks.** Don't be afraid to fail or embarrass yourself. Try new things and consider them opportunities to learn and grow. We all learn from failures. Failure helps us develop more realistic assessments of situations, new skills, and thicker skin.
- **Give yourself credit.** List things you like about yourself. Think about what you are good at and praise yourself.
- **Forgive yourself.** Sometimes you don't do as well as you had hoped. It happens to everyone. You can't win 'em all. Beating yourself up isn't productive and only hurts you. Instead, spend a couple of minutes thinking about what you could do differently next time, and then let it go and move on.
- **Get support.** Talk to your friends. It's OK to "vent" once in a while. Just make sure you're not spending all your time venting, rather than enjoying each other's company.

TIPS ON BEING HEARD

- ➔ Speak up when you have an opinion and express it with confidence.
Ex. I think _____. Or I feel _____. Or I believe _____.
- ➔ Be specific and clear about what you want, think, and feel.
Ex. I do not feel comfortable when you talk to me about other people.
- ➔ “Own” your message. Don’t say someone else said _____. Say whatever comes from YOU and own it.
Ex. I agree with _____.
Ex. I know _____ to be true.
- ➔ Ask for help if you need it.
Ex. Would you be able to help me with _____?
- ➔ Don’t be afraid to say “no.” If you are too busy or don’t have the resources, don’t pressure yourself. You have to say no sometimes to protect the important “yeses”.
Ex. I would like to do that but I’m too busy this weekend – maybe another time.
- ➔ Ask questions when things don’t seem fair.
Ex. “I don’t understand; what do you mean?” or “It doesn’t seem fair to me. Can you explain?”

Learning to be heard may take time, so don’t give up. Practice with your close friends and people who will support you. Always remember to respect yourself and know what you deserve.



HANDLING PEER PRESSURE

If someone is frequently pressuring you to do things that make you uncomfortable, here are a few things to consider:

- ➔ What are you getting out of this friendship?
- ➔ Do you respect them and their opinions?
- ➔ Do you trust this person?
- ➔ If you give in to the pressure, will you regret it later?
- ➔ Does it go against your morals or values?
- ➔ Does this person respect you and your opinion?
- ➔ Do you respect yourself?
- ➔ What will you lose if you don't do it?
- ➔ What benefit is there in doing it?
- ➔ Is this a relationship that you need? Or is it more trouble than it's worth?

In the end, try not to worry about being rejected by not following the crowd. If you give in, you're not being true to yourself, which is most important. Remember that a friend will respect you and your decision and won't try to force you to become someone you're not.



Learn from Kelly's story

In my first semester in university I met this girl named Rhonda. She seemed nice and we would hang out together between classes. We went shopping and got together to chat all the time. I found that Rhonda was too shy to come along with the rest of my friends when we went out, so just the two of us would hang out. One day after we were shopping we got home and laid our new clothes out on the couch to see what we bought. I only remembered Rhonda buying two shirts, but she pulled out five shirts, a pair of jeans and three skirts from her bag. I was surprised and said, "Where was I when you got all that?" She laughed and said "I didn't, they just followed me home." I was shocked at her sarcasm and knew she stole them. She admitted that she steals all the time and that I should do it too. I didn't approve of that sort of thing but I didn't want to lose my friend, so I just forced myself to laugh along with her.

What changed the situation?

The next weekend we went shopping again and she kept telling me to steal. I refused to! Then when I wasn't looking she dropped a shirt into my bag. When I went into the change room to try on something I noticed the shirt in my bag. Immediately, I knew she had put it there so I got pretty upset. What kind of friend would force me to steal after I said no!? I took the shirt out of my bag and stomped out of the store. I waited outside to cool off. When she finally came out of the store, so did the security guards, one on each side of her! That could have been me! I realized she wasn't a very good friend and I cut off ties with her.

My advice to someone under peer pressure:

Think for yourself. No worthy friend would try to bring you down with them. Listen to your gut, it often knows best! Besides, a real friend would never try to force you to do something that you don't believe in, especially after you say no!

An abstract graphic featuring large, overlapping circles in a vibrant green color against a white background. The circles are positioned in the upper right and lower right areas of the frame, creating a dynamic, organic shape. The text 'MENTAL HEALTH & DISORDERS' is overlaid on the lower left portion of the image, with the word 'HEALTH' partially overlapping the green circles.

MENTAL HEALTH & DISORDERS

YOUR FAMILY

BUILDING TRUST WITH YOUR PARENTS

As you get older, the way you relate to your parents changes. You're no longer fully dependent on them for food, shelter, safety, or guidance. These changes can be hard on your parents and hard on you. It's easy to get frustrated and feel like your parents are trying to be too involved in your new life. Your increased independence means that you don't need your parents as much as you used to and it's not always easy for them to let go. You growing up can feel like a loss to them. Here are some ways you can make the process easier for both of you:

Respect. If you want them to respect you, then you have to respect them.

Talk. If you have something you need to talk about, tell them. Trust is built on open communication.

Be friends. Including your parents in something social lets them into your life so they can start to see you as an adult and a friend.

Follow through. If you agree to do something, do it and do it well. This builds trust and means your parents are less likely to hassle you about doing whatever it is in the future.



For more information on dealing with your parents, check out:

<http://teenmentalhealth.org/resources/entries/teening-your-parent1/>

DEALING WITH A "DYSFUNCTIONAL" FAMILY

Most people don't have the picture-perfect TV family. When your family doesn't understand you, moving out after high school can seem like the light at the end of the tunnel. Unfortunately, some aspects of our "dysfunctional" families stay with us, even when we're no longer under the same roof. Being aware of the continued impact of our families makes it easier to avoid falling into the same traps over and over again. This is especially true when family members have addictions or mental health problems.

DEALING WITH FAMILY SUBSTANCE USE PROBLEMS

It's easy to get frustrated when someone you care about has a drug or alcohol problem. A lot of people believe that alcoholics choose to drink and drug users choose to get high. As a result, it can be very frustrating when it seems like someone is "choosing" not to quit. Unfortunately, with addiction, quitting is a lot harder than it seems. Often, the best thing you can do for a substance-addicted family member is to take care of yourself in healthy ways.

Why doesn't he/she just quit?

Addiction is incredibly complicated. It's not easy to admit you have a problem, nor is quitting easy. Sometimes a person's body goes through withdrawal when they try to stop, which causes painful flu-like symptoms like nausea and shakes. It's often easier for them to justify why they shouldn't quit and blame others for their problems rather than taking responsibility themselves. People trying to quit drinking or drugs need considerable support, usually more than you're able to provide without burning yourself out. Someone with a serious alcohol addiction cannot quit without medical help.

Encourage your family member to get help. Be supportive and respectfully let them know how their illness is affecting you. But understand that addiction is an illness, and don't take it on as your own. Remember that you alone won't be able to "fix" your family member. They have to want to change and be willing to put in the work. Consider meeting with a counsellor or joining a support group for families affected by substance use so you can express your feelings with people who understand what you are going through.

Why do I feel so bad?

It's natural to feel a rollercoaster of emotions when someone you love is hurting themselves. It is normal to feel:

- ➔ **Guilty** for not being able to help change things.
- ➔ **Angry** with your family member for not being there for you, for making your life difficult, or because people don't understand how substance abuse is affecting your family.
- ➔ **Sad or Hopeless** if it feels like things will never change or get better. Remember that although you can't control anyone else's behaviour, you can control your own reactions. You can choose how you will live your own life.
- ➔ **Numb** because you have been forced into silence and blocked out the pain for so long.
- ➔ **Anxious** because you are used to walking on eggshells around your family member or because you are afraid of what other people might think if they knew.
- ➔ **Confused** because you don't understand why your family member is choosing alcohol/drugs over you.
- ➔ **Ashamed** because you feel other people won't understand.

DEALING WITH FAMILY MENTAL HEALTH PROBLEMS

When someone you care about has mental health problems or a mental illness, it can be really frightening. Here are some ways you can deal with it:

- ➔ **Educate yourself.** Understanding what your family member is going through will help you better support them. It will also help alleviate frustrations that you may have about their behavior. See the list on page 86 for places you can go for help.
- ➔ **Be supportive.** Encourage your family member when they are having a tough time and be empathetic to what they are going through. Be respectful but do not support problematic behaviour.
- ➔ **Don't try to change them.** Modify your expectations of how you want your family member to be and accept them for who they are.
- ➔ **Communicate.** Be sure to listen with a nonjudgmental attitude. Help them find treatment. Sometimes it's hard for them to take the first step alone. Be a good support and encourage them to get help.
- ➔ **Be fun.** Sure it's good to have someone to talk to, but everyone needs to laugh and relax. Sharing the positive times makes the harder times more manageable.

In the next section, different mental illnesses are described in more detail. For more information, see: www.teenmentalhealth.org for the Family Resource Series of booklets, which can be download for free online: <http://teenmentalhealth.org/for-families-and-teens/family-resource-series-1/>.

MENTAL ILLNESSES

Mental illnesses are medical illnesses of the brain. Mental illnesses (a.k.a. mental disorders) affect 10 to 20 percent of Canadian youth; 70% of adults with mental disorders report that they began in childhood or adolescence. Although stress is common, and everyone sometimes feels overwhelmed, mental illness is more than your average emotional problems.

In the diagram below you will see the terms: mental distress, mental health problem, and mental illness. They mean different things and one does not necessarily lead to the other (although it is possible). Mental distress is normal, expected, and happens to everyone – sometimes daily! It is a signal that you need to adapt, by changing yourself or your surroundings. For example: you are late for your morning class so you take a bus instead of walking and next time you get up a half hour earlier. A mental health problem is a substantial emotional, thought, or behavioural difficulty (or all three) that causes you significant impairment and that often requires you to get

help from friends, family or people you trust. An example is the grief that you experience if someone close to you dies, or the period of adjustment following moving to an unfamiliar place. A mental illness is a medical diagnosis that occurs when a person is unable to adequately function in their everyday life due to how their brain is controlling their thoughts, emotions and behaviours. A person can experience any combination of mental distress, mental health problems, or mental illness. It is important to know the difference because a mental illness will require treatment from a properly trained health care provider.

The inter-relationship of mental health states:



Mental illnesses are treatable. If you suspect that you may have a mental illness, it's a really good idea to seek help as soon as possible in order to prevent it from getting worse and interfering with your new post-secondary life.

The following pages include information about a few common types of mental illnesses. If you have a better understanding of mental illnesses, it will help you recognize possible symptoms in yourself or in others. Seeking help early is a key part of getting better. Remember that mental disorders occur as a result of complex

interactions between a person's genetic makeup and the environments they have experienced since they were born.

It's important to understand that having a mental illness is not shameful. Your brain can get sick, just like your heart or your lungs. Try not to let the stigma about mental illness prevent you from getting the help you need. Stigma about mental illness has been decreasing over time and by educating yourself about mental illness, even if you never become ill yourself, you can help that stigma to decrease. Knowledge is power!

RESOURCES: www.teenmentalhealth.org, kellymentalhealth.ca

DEPRESSION

1. What is Depression?

Everyone has bad days. It's perfectly normal to feel low when something bad happens (e.g., you break up with your boyfriend / girlfriend or fail an exam). If your low mood persists over a long period of time however, and it starts affecting your ability to succeed in your daily life (or is making you feel that life is not worth living), you may be experiencing clinical depression. If you think you or someone you know may be clinically depressed, it's a good idea to make an appointment with your school counsellor or family doctor.

There can be a lot of confusion when people use the word depression. Sometimes the word is used to mean almost any type of negative feeling (e.g., lonely, unhappy, sad, despondent, demoralized, disgruntled). When a health provider uses the word depression, they don't mean a mood, they mean a mental disorder, and sometimes they use the phrase "clinical depression". In this booklet the word "Depression" means a clinical depression, not a negative feeling.

2. Are there different types of Depression?

Yes, there are multiple types of Depression. This booklet will focus on [Major Depressive Disorder](#), [Dysthymic Disorder](#), and [Seasonal Affective Disorder \(SAD\)](#), because they're the depressive disorders most likely to affect College/University students.

3. Facts

- ➔ About 5% of men and 10% of women will experience Major Depressive Disorder at some point in their life.
- ➔ At any given time, almost 3 million Canadians have Depression but less than 1/3 of those people seek help.
- ➔ Depression can be treated successfully with therapy and medication.



4. What are the symptoms of different types of Depression?

Major Depressive Disorder (MDD)

To be diagnosed with MDD, you must have either (a) an intense and persistent low (or irritable) mood or (b) a lack of interest or pleasure in the things you usually like, every day for at least 2 weeks. You also must have at least 5 of the symptoms listed below. These symptoms need to significantly interfere with your ability to live a normal life. Sometimes people with this kind of depression experience psychosis, which means their thinking is detached from reality. The symptoms are:

- ➔ Gaining or losing a significant amount of weight
- ➔ Sleeping much more or much less than usual
- ➔ Extreme restlessness or lack of movement noticed by others
- ➔ Feeling really tired or lacking energy
- ➔ Feeling worthless or inappropriately guilty (i.e., when you haven't done anything wrong)
- ➔ Extreme difficulty concentrating or making decisions
- ➔ Frequent thoughts of death or suicide, suicide plan, attempted suicide
- ➔ Feeling hopeless

Dysthymic Disorder

This is very similar to MDD except that it is less severe and may last years without being diagnosed. The person may be able to get through daily functioning (with some struggle) but still has problems with his or her mood. The symptoms are:

- ➔ Depressed mood most of the day, more days than not, for at least 2 years
- ➔ Many of the additional symptoms listed above

Seasonal Affective Disorder (SAD), a.k.a. MDD with Seasonal Pattern

This is a type of depression that usually occurs at certain times of the year, often in fall and winter when there is less sunlight. The symptoms are:

- ➔ Same symptoms as above, but person has periods without any symptoms at characteristic times of year (often spring and summer)
- ➔ Needs to happen for more than one year to be diagnosed (otherwise, it's not a pattern).

5. How is Depression treated?

Depression is very treatable, using psychological therapies and/or medication. Often psychotherapy and medication will be prescribed together. Treatments should be provided by a qualified health professional, using best evidence interventions (i.e., interventions that have been supported by good-quality research). For Depressive Disorders, Cognitive Behavior Therapy (CBT) and some medications called selective-serotonin reuptake inhibitors (SSRIs) are supported by research and have been found to be very effective. To help you with getting the treatment you need, check out this resource: http://teenmentalhealth.org/images/uploads/communicating_with_healthcare_providers_student_version.pdf

and <http://teenmentalhealth.org/for-families-and-teens/evidence-based-medicine/>

In addition to psychotherapy and medication, you can help yourself by doing activities that will help fight negative feelings. It can be hard to feel motivated to do things on your own, but trying the tips listed on the next page will really make a difference in how you feel. If you don't have Depression, these tips can also be really helpful if you're feeling stressed out, upset, or down.

6. Tips to fight negative feelings and to help with treatments for any mental illness

- **Go outside.** Staying inside all the time, especially in winter, can be really draining. Getting outside and enjoying the sun and fresh air can lift your spirits.
- **Exercise.** Try to get at least a half hour of vigorous physical activity (e.g., a brisk walk) each day.
- **Be social.** Get out there! Even if you're not in the mood, you may find that being out with people you like helps you to feel better.
- **Stop thinking so much.** Too much over analyzing and ruminating about things makes you feel worse. Turn off your brain, just for a little bit.
- **Talk.** Talk to people you can trust about your feelings and concerns. Sharing your feelings with someone else can feel like a weight is lifted off your chest.
- **Relax.** Take time for yourself everyday. Consider trying yoga, meditation or breathing exercises.
- **Eat healthy.** Eating a balanced diet gives your body the fuel it needs to combat stress. Try not to skip meals and go easy on the junk food. Check out this website for some good information on healthy eating – www.choosemyplate.gov. They even have a program called SuperTracker that helps you plan out what you should be eating each day.
- **Stay away from alcohol and drugs.** Alcohol and many drugs are depressants, which mean that they may actually worsen your depressive feelings.
- **Laugh.** Watch a funny movie or funny videos. Talk to someone who makes you laugh. Exposing yourself to things that make you happy is an important part of feeling better.
- **Problem solve.** Take control. Consider one problem at a time and plan out possible solutions. Ask someone you trust to help you brainstorm. Don't try to deal with everything all at once; that's the fastest way to feel overwhelmed.
- **Structure your day.** Give yourself something to do, even if you start small. Even activities like showering, walking the dog, or making lunch can make you feel better. Having some structure in your day, makes a big difference in how you feel. Keeping a daily diary or schedule can be a big help, especially if you're a visual person.
- **Get enough sleep.** You need about nine hours per night.



7. Tips for helping others:

If someone you care about has Depression, the best and most important thing you can do is support them. In order to support someone else, you also need to look after yourself. Here are a few pointers:

- **Educate yourself.** Understanding what Depression is and how it affects the person you care about will help you be less frustrated and more supportive.
- **Encourage your friend to seek help.** Having someone he/she can trust, like you, is so important. But someone trying to cope with a mental disorder also needs treatment. Encourage them to see a doctor or psychologist to get the help he/she needs. Even if the problems don't seem that bad yet, seeking help early can prevent problems from getting worse.
- **Listen.** When you listen to and acknowledge their feelings, it sends the message that you care. Knowing that you have people who care about you is an important part of recovering from a mental disorder.
- **Be positive.** Positive moods can be contagious! It's really easy for someone with a mental disorder to focus only on the negative aspects of his/her life. Sharing your positive mood may help them see things from a different perspective.
- **Be patient.** Sometimes it can be frustrating when they start acting differently and may not want to do anything they used to like. Take a deep breath and remember that Depression is making them feel this way. He/she can't just "snap out of it." Getting impatient will only make the situation worse. Stay positive and be patient. Encourage them to participate in social events. He/she may feel like it's too much work or effort, but will probably feel better afterwards.
- **Don't blame yourself.** It is not your fault that they have Depression. Many different factors, including his/her genetic background, environment, and life experiences are involved. No one can "make" another person have Depression.
- **Put yourself first.** On an airplane, they tell you to always put your oxygen mask on first in an emergency before you assist someone else. You'll be no help to anyone if you're passed out. With someone with a mental illness, if you burn yourself out by always putting him or her first, you won't be able to help anyone. It's absolutely okay (and important) to take time away to take care of yourself.
- **Don't try to change your friend.** You don't have to solve all of their problems or turn him/her into a different kind of person. Just be present and supportive.
- **Have fun together.** They need someone who can have fun, relax, and laugh with him/her. These are all important parts of their mental health (and yours!).
- **Be aware of suicide risk.** If they talk about death or suicide, don't ignore it or keep it a secret. Talk to a responsible adult who they also trust (e.g., residence assistant, counsellor, coach, professor). Let them know that you care about him/her and his/her life. If they are talking about suicide, it may be his or her way of indirectly asking for help.

For more information on Depression, visit:

<http://teenmentalhealth.org/for-families-and-teens/depression/>

For helpful hints and a daily diary to assist you with getting and staying well, visit:

<http://teenmentalhealth.org/resources/entries/taking-charge-of-your-health>

BIPOLAR DISORDER

1. What is Bipolar Disorder?

Bipolar Disorder is a mood disorder in which the person alternates between periods of really low mood (i.e., depression) and periods of really elevated or irritable mood (e.g., mania). These intense mood fluctuations interfere with the person's normal everyday functioning.

2. Are there different types of Bipolar Disorder?

There are several different types of Bipolar Disorder, with the main difference being the severity of the manic episode and the speed at which someone cycles between the highs and the lows. Some of the most common are:

- ➔ **Bipolar I Disorder.** This is when a person experiences one or more manic episodes. He or she likely will also experience depressive episodes over the course of his or her illness. Mood shifts from manic to normal or depressed mood can happen over the course of days, last for several weeks, or last even longer.
- ➔ **Bipolar II Disorder.** This is similar to Bipolar I, except that the person experiences Hypomanic episodes, instead of Manic Episodes, and at some point will suffer from a major depressive episode. Hypomania is a less severe form of Mania where the person experiences mood disturbances but does not require hospitalization or experience serious impairment to his or her ability to function.
- ➔ **Cyclothymic Disorder.** This is when a person chronically cycles between periods of hypomanic symptoms and periods of depressive symptoms. Although the person doesn't have enough symptoms (or severe enough symptoms) for a manic episode or for a depressive episode, the symptoms experienced cause significant distress or impairment. This cycling is ongoing for at least 2 years.

3. What are the symptoms of Mania & Depression?

MANIA

People experiencing a manic episode may not realize there is a problem, as they may enjoy the excitement and positive feelings that accompany mania. Unfortunately, mania can intensify to a level that impairs the person's thinking and judgment and they may act in ways that can lead to very negative consequences. Sometimes the mania can be so severe that the person becomes psychotic – losing touch with reality. The symptoms are:

- ➔ Extremely elevated, euphoric, or irritable mood lasting at least one week
- ➔ Other symptoms may include (3-4 are necessary to be diagnosed as having a manic episode):
 1. excessive confidence or a feeling that you can do anything (even if impossible)
 2. decreased need for sleep (e.g., feeling rested after only a couple of hours)
 3. feeling super talkative, like there's a buildup of words inside you that need to get out
 4. racing thoughts that jump from one idea to the next without a logical flow
 5. easily distracted by unimportant or irrelevant details
 6. increase in purposeful activity or psychomotor agitation
 7. excessive engaging in risky pleasurable activities (e.g., unprotected sex, shopping sprees, drug use, speeding, risky business investments)
- ➔ These symptoms are not due to substance use or a general medical condition.

DEPRESSION

Everyone feels sad or has a bad day occasionally but when someone has Depression, their sad feelings last for long periods of time, often to a point where the person feels hopeless and cannot function. The symptoms are:

- ➔ Overwhelmingly depressed/sad/low mood
- ➔ Loss of interest in usual activities
- ➔ Change of appetite and weight
- ➔ Irritable or short tempered
- ➔ Loss of energy, fatigue
- ➔ Difficulty concentrating
- ➔ Guilty feelings
- ➔ Sleeping too much or too little
- ➔ Low self-esteem
- ➔ Loss of pleasure
- ➔ Feelings of worthlessness
- ➔ Feeling of hopelessness
- ➔ Restlessness or lack of movement
- ➔ Thoughts of death or suicide
- ➔ Suicide attempts

4. Facts

- ➔ Bipolar Disorder affects approximately 1% of Canadians.
- ➔ It typically starts in late adolescence or early adulthood.
- ➔ It affects just as many men as women.
- ➔ People with bipolar disorder are at higher risk of suicide than the general population.
- ➔ It can take years for a person to receive the correct diagnosis of Bipolar Disorder. In Canada, the average is 4 years.

5. Bipolar Disorder and substance abuse

Some people with Bipolar Disorder have problems with drugs or alcohol, sometimes in an effort to control their symptoms and sometimes due to difficulties with judgment or self-control. When substance abuse and Bipolar Disorder happen at the same time, the person will experience even greater difficulties.

6. How is Bipolar Disorder treated?

Most people with bipolar disorder respond well to treatment. However, if treatment is stopped, the illness will return. Bipolar Disorder is treated primarily with medication and psychotherapy. People with Bipolar Disorder usually have to take medications continuously. A number of different medications can be used, including:

- ➔ **Mood stabilizers.** Improve and reduce mood swings and treat both depressive and manic symptoms. They also help prevent the illness from returning once the symptoms have lessened.
- ➔ **Antidepressants.** For certain people, antidepressants are used during depressive episodes, but they are not appropriate for everyone.
- ➔ **Anti-psychotic medications.** Help improve psychotic and mood symptoms. Also prevents the illness from returning once the symptoms are lessened.

Psychotherapy is helpful

In addition to medication, psychotherapy and psychoeducation can also be helpful and usually focus on dealing with the associated stressors that result from having Bipolar Disorder. Psychotherapy used in treatment of bipolar disorder may include:

- ➔ **Cognitive Behavioral Therapy (CBT).** CBT helps people learn to problem solve and change their negative thoughts and behaviours into more positive ones.
- ➔ **Family-focused therapy.** This therapy helps family members understand the illness and develop healthy coping strategies.
- ➔ **Psychoeducation.** This treatment may be done in a group or with family members and is helpful in teaching individuals how to better understand their illness and manage their symptoms.

How long does treatment last?

There is a good chance that someone with Bipolar Disorder will always have to be on medication in order to control their symptoms, but the type and amount of medication may change over time. Psychotherapy, however, is not likely to be needed long-term. It only has to last as long as it takes for the necessary skills, coping strategies, and knowledge to be gained. People with Bipolar Disorder may occasionally need to be hospitalized, if their medications need to be readjusted or they have stopped taking their medication. For people who do not respond well to medication, electroconvulsive therapy (ECT) may be recommended. After a severe manic or depressive episode, a person may need a period of rehabilitation in a day treatment program until they are feeling stronger.

7. Staying well!

Once an episode of mania or depression has ended (doctors call that “remission”), the next step is to keep another episode from happening again (if that happens it is called “relapse”). There are a number of things that a person with bipolar disorder can do to prevent relapse including:

- ➔ **Taking medications as prescribed.** Stopping medications is the strongest risk factor for relapse. Even though you might feel better, remember that it is the medication that is helping you feel that way.
- ➔ **Eating healthy.** Watching calories and eating healthy food, especially those rich in Omega-3 (found in fish) may be a good idea.
- ➔ **Avoiding drugs and alcohol.** Some people with Bipolar Disorder may be able to drink small amounts of alcohol, but only after consulting with their doctor.
- ➔ **Exercising.** 30 minutes of good exercise (such as going for a fast walk) at least five days a week is a good.
- ➔ **Having a regular sleep/wake cycle.** Going to bed and waking up around the same time every day is very important.

For more information on Bipolar Disorder and taking care of your health, visit:

<http://teenmentalhealth.org/for-families-and-teens/bipolar/>

<http://teenmentalhealth.org/resources/entries/taking-charge-of-your-health>



SCHIZOPHRENIA

1. What is Schizophrenia?

Schizophrenia is a brain disorder that makes it hard for someone to know what is real and what isn't. People with Schizophrenia experience delusions (belief in something that isn't true) and/or hallucinations (sensing something that isn't really there). In addition to delusions and hallucinations, people with schizophrenia might have other problems, including lack of speech,

lack of motivation, hard-to-understand speech, and strange behaviour. Many people with Schizophrenia lack insight into their illness, so they may not realize that anything is wrong. To them, their behaviour seems perfectly reasonable, but to everyone else, something is clearly very wrong.

2. Are there different types of Schizophrenia?

There are a number of different sub-types of Schizophrenia, depending on which symptoms are strongest. Although a common misconception, people with Schizophrenia do not have "split personalities". Other misconceptions are that people with schizophrenia are usually homeless or can't live on their own without assistance.

3. What are the symptoms of Schizophrenia?

Symptoms of Schizophrenia are broadly classified into two categories: positive and negative symptoms. Not everyone experiences all symptoms.

POSITIVE SYMPTOMS: An excess or distortion of normal behaviour (including when the brain is not able to distinguish between real and not real.)

Hallucinations: A hallucination is when the person senses something that isn't actually there. The most common are auditory hallucinations (e.g., hearing voices) but people can also see, feel, smell, or taste something that isn't actually there.

Delusions: Delusions are when the person has unrealistic mistaken beliefs that are not age-appropriate (e.g., tooth fairy) or culturally-expected (e.g., belief in ghosts or in a higher power). For example, they may think everyone on TV is talking just to them or they may think aliens are spying on them through their phone.

Disorganized Thought & Self-Monitoring: The way the person speaks or acts may not make much sense or may be hard to follow. They may behave inappropriately for the situation.

NEGATIVE SYMPTOMS: A loss or decrease of normal thoughts, feelings, or behaviour

- ➔ They may appear completely blank, with limited emotions, speech, reactions, motivations, and sometimes even no movement (called catatonia).
- ➔ They may withdraw completely from friends and family.
- ➔ They may have poor personal hygiene.

OTHER COMMON SYMPTOMS:

- ➔ feelings of sadness and hopelessness
- ➔ change in personality
- ➔ inability to concentrate

4. Facts

- Schizophrenia affects about 1% of the Canadian population.
- Schizophrenia is usually diagnosed when the patient is in their late teens or early twenties for men and late twenties or early thirties for women.
- Schizophrenia is treatable.
- Children who have two parents with schizophrenia have a 50% chance of developing schizophrenia.

5. How is Schizophrenia treated?

Early intervention is important

Often people do not seek help when the first signs of psychosis emerge. Why? People with Schizophrenia often don't realize that they are acting or thinking strangely. You may need to step in and suggest they see a doctor. The longer an individual waits to get treatment, the more problems they will have. Getting help early minimizes the risk of disruption in daily life and helps lead to a successful recovery.

What does treatment involve?

Treatment will vary for each person but will generally include the following:

Medications

Medications called antipsychotics are used to treat positive symptoms of schizophrenia. Medications such as antidepressants and mood stabilizers are also sometimes used alongside antipsychotic medications. Keep in mind, medications don't work immediately and it may take a while to find the one that works best.

Psychotherapy

Psychotherapy can help to improve the social impairments of patients, and provide some context and support for friends and family. Some treatments used in psychotherapy include:

- **Cognitive Behavioral Therapy (CBT).** CBT helps people learn to problem solve and change their negative thoughts and behaviours into more positive ones.
- **Family-focused Therapy.** This therapy helps family members understand the illness and learn coping strategies.
- **Psychoeducation.** This treatment is often done in a group and is helpful in enhancing people's understanding of the disorder.
- **Interpersonal Therapy.** Helps the person deal with social and relationship problems, and teaches the person how to establish strong social support.

Hospitalization

Sometimes if the person's symptoms are severe and are endangering themselves or someone else, a doctor will admit him or her to the hospital for treatment.

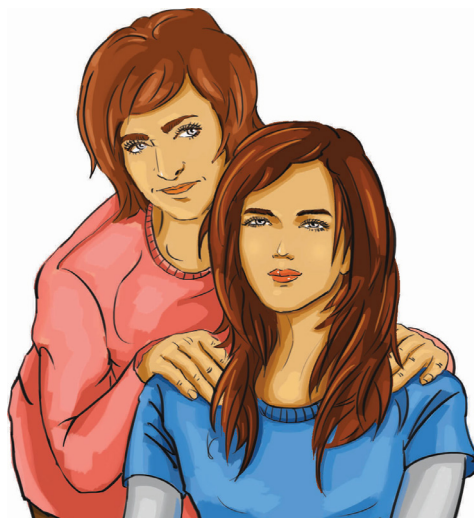
6. What can friends and family do?

If someone you know shows any of the signs of Schizophrenia, it is important they seek help. The first contact should be their family doctor; he or she will be able to conduct an initial assessment and refer them to a specialist. Having a loved one with psychosis is not going to be easy, there will be setbacks. Try to be patient, positive and never give up hope. Here are a few tips to keep in mind:

- ➔ Educate yourself as much as possible about the mental illness to fully understand what is going on.
- ➔ Be supportive; but do not support delusions and do not support stopping of medications without doctor's consent.
- ➔ Be open-minded and listen.
- ➔ Limit stress and keep a calm environment.
- ➔ Set limits about acceptable behaviour and be consistent.
- ➔ Put yourself first.
- ➔ Do not neglect other family and friends. Seek family assistance if needed.
- ➔ Help maintain and encourage treatment.

For more information on Schizophrenia, visit:

<http://teenmentalhealth.org/for-families-and-teens/schizophrenia/>



ANXIETY

1. What is anxiety?

It is perfectly normal to feel anxious sometimes. It's an important emotion to feel, because it lets us know how important the outcome of our activities is to us (i.e., if we don't care, we won't feel anxious) and it also lets us know when we're in danger. A little bit of anxiety is a good thing and can enhance your performance on tasks (i.e., a little bit of anxiety about an exam makes you study harder, and thus, you could perform better). Alternatively, too much anxiety can affect our judgment and our ability to make simple decisions. Although there are

occasions when high levels of anxiety are totally normal (e.g., dangling off the ledge of a 10-story building), some people's bodies send them mixed signals, making them think that they are in danger when they're not (e.g., looking out the window of a 10-story building). When this anxiety starts interfering with someone's ability to live a normal life, it's considered an Anxiety Disorder. Anxiety Disorders cause substantial emotional, cognitive, and behavioural difficulties, and are one of the most common and most treatable mental disorders.

2. Are there different types of Anxiety Disorders?

- ➔ **Agoraphobia** is characterized by avoiding situations where escape might be difficult or embarrassing. The fear can be so intense that it leads some individuals to become completely housebound.
- ➔ **Panic Disorder** is characterized by intense feelings of fear or terror, which come on for no

apparent reason (i.e., panic attacks). Symptoms may include: dizziness, trembling, shortness of breath, heart racing, sweating, thoughts of death or dying, and chest pain. These attacks occur frequently and are associated with intense anxiety about getting another attack and avoidance of situations that may cause them.

- **Social Anxiety Disorder (a.k.a. Social Phobia)** is characterized by avoidance of certain social or performance situations due to fear of being judged by or embarrassed in front of other people. (e.g., fear of public speaking or eating in restaurants.)
- **Specific Phobia** is characterized by intense fear of a specific situation or object, often leading to avoidance. (e.g., fear of heights or spiders.)
- **Obsessive-Compulsive Disorder (OCD)** is characterized by recurring unwanted anxiety-producing thoughts (obsessions) and repetitive, behaviours designed to reduce the anxiety caused by the obsessions (compulsions). The excessive amount of time given to these obsessive thoughts and compulsive actions gets in the way of the person's ability to function normally. (e.g., Fear of contamination (obsession) and constant hand washing (compulsion).) Although the obsession and compulsion are clearly linked in this example, often the compulsion has no obvious connection to the obsession it's meant to alleviate.
- **Generalized Anxiety Disorder (GAD)** is characterized by excessive worrying about a number of events or activities. People with GAD often experience restlessness, difficulty concentrating, irritability, muscle tension, headache, fatigue, and sleep disturbance.
- **Post Traumatic Stress Disorder (PTSD)** is characterized by repeated re-experiencing of a severely traumatic event (e.g., war, natural disaster, rape, assault, witnessing a murder) accompanied by increased arousal and avoidance of places and situations that remind the person of the event. For a diagnosis of PTSD, these symptoms need to last for at least one month. Most people exposed to a traumatic event will not develop PTSD.

3. Facts

- Anxiety disorders are the most common mental illness in Canada.
- Approximately 12% of Canadians will experience an anxiety disorder in their lifetime, with the most common being Specific and Social Phobias.

4. Tips for coping with anxious feelings and/or an Anxiety Disorder

Although not a substitute for treatment, the following tips can be helpful for people with an anxiety disorder and people experiencing regular anxiety.

- **Exercise.** Exercise helps both physically and mentally.
- **Relax.** Learn deep breathing techniques (such as Box Breathing, on page 9); consider trying yoga or meditation.
- **Get enough Sleep.** Try to get 8 to 9 hours of sleep each night.
- **Learn to laugh.** Laughing decreases anxious feelings
- **Limit alcohol & drug consumption.** Be careful not to use alcohol, nicotine, or other drugs to “self-treat” anxiety.
- **Reduce caffeine intake.** Caffeine makes your heart race, which can make anxiety worse.
- **Eat a well-balanced diet.** Eating healthy, well-balanced meals and avoiding junk food when possible keeps you in your best form, so you're better able to cope with anxiety-provoking situations.
- **Create a support network.** Talk to friends you can trust.
- **Learn to manage your time.** Putting tasks off can become overwhelming. Get organized and review your daily tasks each morning. Break larger, more intimidating tasks down into smaller steps. Focus on one step at a time. Learn to do the most important things first.
- **Challenge your perfectionism.** Chill out, praise yourself for trying.

For more information on how to help yourself be well, visit:

<http://teenmentalhealth.org/resources/entries/taking-charge-of-your-health>

5. How are Anxiety Disorders treated?

Anxiety Disorders require professional treatment, including psychotherapy and/or medication.

Medications: Selective Serotonin Reuptake-Inhibitors (SSRIs)

For many people, mild to moderately severe Anxiety Disorders can be effectively treated with psychological interventions. Medications generally are considered for use if psychotherapy alone is not producing the hoped for results.

Cognitive Behaviour Therapy (CBT)

CBT is a form of talk therapy, which teaches specific thinking and behavioural skills. The goal of CBT is to help people to challenge their current way of thinking, so they can learn to change their anxious negative thoughts and gain control over their anxiety. CBT also teaches people to relax, problem-solve, and gradually face their fears. Gradual and supported exposure to the frightening situation/object is the most effective way to treat anxiety.

Avoidance of anxiety producing situations is also discouraged in CBT, as it only serves to make anxiety worse.

How long does treatment last?

Depending on the person's needs, therapy can last 6-8 weeks or longer, usually with weekly or twice-weekly meetings. Some people may be able to resolve their anxiety sooner, whereas others may need more time. Often, people benefit from "booster sessions" over time to help maintain their gains and prevent the anxiety disorder from returning. Medications can be used to help with specific situations (such as in a fear of getting on an airplane) or they can be used for longer periods of time (e.g., 3 – 6 months), in order to decrease anxiety to the point where the individual is able to actively work on their fears in therapy.

6. How to help a friend who has an anxiety disorder

Having supportive and understanding friends is an essential component to recovering from an anxiety disorder. How can you help?

- ➔ **Educate yourself.** Understanding what your friend is going through will help you better support them. It will also help alleviate frustrations that you may have about his or her behaviour.
- ➔ **Be supportive.** Encourage your friend when he or she is having a tough time and be empathetic to what he or she is going through. Be respectful but do not support avoidance of stressful situations.
- ➔ **Don't try to change your friend.** Modify your expectations of how you want your friend to be and accept your friend for who he or she is.
- ➔ **Communicate.** Be sure to listen with a nonjudgmental attitude. Help him or her find treatment. Sometimes it's hard to take the first step alone. Be a good support and encourage your friend to get help.
- ➔ **Encourage.** Encourage your friend to confront stressful situations and support them through the experience, rather than avoiding anxiety-provoking situations. Avoidance can actually make the Anxiety Disorder worse.
- ➔ **Be fun.** Sure it's good to have someone to talk to, but your friends need you to keep the fun going. Help make them laugh and relax.

For more information on Generalized Anxiety Disorder, visit:

<http://teenmentalhealth.org/for-families-and-teens/generalized-anxiety-disorder/>

For more information on Obsessive Compulsive Disorder, visit:

<http://teenmentalhealth.org/for-families-and-teens/obsessive-compulsive-disorder-ocd/>

For more information on Panic Disorder, visit:

<http://teenmentalhealth.org/for-families-and-teens/panic-disorder/>

EATING DISORDERS

1. What is an eating disorder?

Eating disorders are about much more than just dieting. Eating disorders occur when a person becomes so focused on their eating habits and weight that his or her emotions, thoughts, and behaviors are drastically impacted. Eating disorders can lead to a host of psychological, social, and physical health problems and often coexist with other mental illnesses, like Depression, Social Anxiety, Obsessive-Compulsive Disorder, and Substance Use.



There are three main categories of eating disorders:

- **Anorexia Nervosa (AN).** Characterized by severe intentional weight loss or refusal to gain weight. Anorexia is often accompanied by excessive exercising, obsession with body image, and a distorted body image. Some women lose their menstrual periods. Although not necessary for diagnosis, they also may appear very tired and lack energy; count calories constantly; exercise obsessively; use laxatives; avoid eating in public or in front of others; take diet pills, often in secret; act irritable and anxious at mealtime; skip meals; lie about how much food they have eaten; deny being hungry; faint or complain of dizziness; have fine hair growth all over their body; hide food; wear baggy clothes; and have difficulty concentrating
- **Bulimia Nervosa (BN).** Characterized by repeated episodes of binge eating (i.e., eating an excessively large amount of food in a short period of time) followed by purging behaviour to get rid of the food. This is most often accomplished through self-induced vomiting, but can also include abuse of laxatives and diet pills or excessive exercise. The main difference between AN and BN is that individuals with BN are often normal weight or overweight, whereas individuals with AN are always significantly underweight. Individuals with BN feel guilty or embarrassed about their binges and purges, and largely base their self-esteem on their weight and body shape
- **Eating Disorder Not Otherwise Specified (EDNOS).** Eating disorders that are not severe enough to be diagnosed as AN or BN, but are sufficiently concerning to warrant professional attention. Binge Eating Disorder (BED) is considered an EDNOS, and is characterized by episodes of compulsive overeating where the individual feels a lack of control over his or her behaviour and often feels embarrassed, disgusted, or depressed after the binge. BED differs from BN because there is no purging behaviour.

2. Eating Disorders Myths & Truths

<p>Myths: Only teenage girls get eating disorders.</p> <p>Truths: Although eating disorders are most common in girls in their teens and early twenties, males can also develop eating disorders. BED, in particular, is equally common among men and women and is seen more frequently in an adult population than AN or BN.</p>	<p>Myths: People with Anorexia Nervosa do not eat junk food.</p> <p>Truths: Even though people with AN eat very little, they sometimes will binge eat on junk food, or if they allow themselves to only have so many calories per day, they may count a piece of candy within those calories allowed.</p>
<p>Myths: People with Bulimia Nervosa always vomit after eating.</p> <p>Truths: Not all people who have BN vomit after eating. Many abuse laxatives or diuretics, exercise, or fast to keep their weight under control.</p>	<p>Myths: You cannot die from an eating disorder.</p> <p>Truths: AN has the highest mortality rate of all mental illnesses, (>10%). Causes of death include suicide, electrolyte imbalances, and starvation consequences like cardiovascular or respiratory problems.</p>
<p>Myths: Men with eating disorders are gay.</p> <p>Truths: Although gay men have been found to be at higher risk for eating disorders, both gay and straight men can develop an eating disorder.</p>	

3. How are Eating Disorders diagnosed?

Eating disorders are diagnosed by doctors and mental health professionals, who will ask the patient a number of questions based on their symptoms, eating habits, perception of body image, and dieting behaviours. The doctor will also do a physical exam to check the person’s weight, blood pressure, skin condition, bone density, etc. Blood work will also be done to check organ function and electrolyte balance, among other things, to determine the person’s overall health level. This will also help rule out any other medical conditions.

4. How are Eating Disorders treated?

Eating disorders can require a range of professional treatments, which may include:

- ➔ **Medical Treatment.** In some situations, medication may be prescribed to help reduce bingeing/purging behaviour or to help increase weight and decrease weight obsession. Unfortunately, current research hasn’t found that medication is effective at reducing eating disordered behaviour in the long-term, although it may help treat coexisting depression and anxiety symptoms.

➔ **Nutritional Counseling.** A dietician may be involved to teach better eating habits and how to select healthier foods.

➔ **Family Therapy.** Family therapy is one of the most effective treatments for adolescents with Anorexia Nervosa. It focuses on family dynamics and how they may be helping to maintain the eating disorder. It also helps family members understand the eating disorder better and learn how they can support each other.
- ➔ **Cognitive Behavior Therapy (CBT).** CBT appears to be one of the more effective treatments for Bulimia Nervosa and Binge Eating Disorder. It helps people learn to problem solve and change their negative thoughts and behaviours into more positive ones. When used in a family format, it may also be effective at treating Anorexia Nervosa.

➔ **Psychoeducation.** This treatment is usually done in a group and teaches individuals to recognize their symptoms so they can learn to seek treatment when needed and prevent relapse.

➔ **Hospitalization.** Sometimes if the person is physically unwell, refuses to eat, or has health problems, the doctor will send him or her to the hospital to gain weight, deal with underlying mental health issues, and improve his or her physical health.

How long does treatment last?

There is no set number of days for treatment. Treatment length depends on the individual's needs, and lifelong maintenance can be required to prevent relapse.

5. I think I have an eating disorder – what do I do?

If you are struggling with an eating disorder, you are not alone!

There's nothing shameful about asking for help. If you feel comfortable, consider telling a friend or someone else you trust first. Seeking professional help can be a huge step. Having someone you trust with you for support will make it easier. Your family doctor, psychologist, or school health/counselling centre are excellent resources. There, a trained professional will be able to help you take the next step toward recovery.

6. Facts

- ➔ According to a 2002 survey, 3% of women and 0.3% of men will have an eating disorder in their lifetime.
- ➔ At any given time, 70% of women and 35% of men are dieting.

7. How to help a friend who has an Eating Disorder

If you suspect your friend has an eating disorder, you should encourage him or her to seek professional help. Remember that people with eating disorders often don't realize the severity of their problem, so your friend may not be receptive to your help. He or she may even get angry with you. This doesn't mean he or she doesn't need your help. Try to get your friend to open up and talk about his or her feelings, but don't focus discussion around food or enable his or her behaviour. Let your friend know you are concerned without forcing anything on him or her or laying blame.

Here are a few other tips to consider before approaching your friend:

- ➔ Focus on feelings, not on weight and food.
- ➔ Use "I" statements (e.g., I feel worried about you because...) instead of "You" statements (e.g., You are not eating enough). "You" statements are more likely to make your friend feel blamed, causing him or her to act defensive and shut you out.
- ➔ Stay positive; the best influence is a positive one.
- ➔ Express your concerns; knowing that someone cares about him or her may make it easier for your friend to open up to you.
- ➔ Try not to comment on how he or she looks, as it will likely only reinforce his or her obsession with body image.
- ➔ Don't nag about his or her eating behaviour. This is likely to make your friend more defensive and likely to hide his or her eating behaviour from you.
- ➔ Be supportive and compassionate. Try not to judge.
- ➔ Remember the person has a disorder; but it does not define who he or she is.
- ➔ Encourage your friend to get help.
- ➔ Be patient; it takes time for someone to admit they need help and they cannot be rushed or forced.
- ➔ Educate yourself about the disorder to help understand it.

For more information on eating disorders, visit:

www.keltyeatingdisorders.ca

http://cmha.ca/mental_health/facts-about-eating-disorders/

DRUG AND ALCOHOL USE/ABUSE

We won't tell you not to use drugs or get drunk. You made it into college or university, you're smart. You know that the decision is yours and reading "don't do drugs" won't make a bit of difference. Our intention is to give you some knowledge. It's up to you what you do with it. The one thing we will say is that it's never "safe" to use hard drugs (e.g., cocaine, heroin, crack, crystal meth).

See the following pages for a list of common drugs and the risks involved in using these drugs.

Drug: Ecstasy (E, X, XTC, Adam, hug, beans, clarity & the love drug)

What is it? Tablet, capsule or powder form. They may be printed with cartoon-like images or logos.

What does it do? May cause you to feel friendly, confident, and full of energy.

Negative Effects: Sweating, increased blood pressure and heart rate, anxiety or panic attacks, blurred vision, nausea, vomiting and convulsions.

Aftereffects: Confusion, irritability, anxiety, paranoia, depression, memory impairment, difficulty sleeping. May last days to weeks. Long term: Chronic fatigue; damage to the brain cells affecting learning and memory.

Dangers: Death from dehydration & overheating. Increased blood pressure and heart rate, kidney or heart failure, strokes and seizures. Possible jaundice & liver damage. People with high blood pressure, heart or liver problems, diabetes, and epilepsy are at higher risk. If you're not aware of these medical conditions, ecstasy can trigger symptoms. Ingredients in Ecstasy are very inconsistent and in some cases may contain a combo of undesirable drugs and substances which have been associated with many deaths.

Addictive? The more you take ecstasy, the less effect it may have. This may lead to increasing dosage seeking that original "high."

Drug: Cocaine/Crack (snow, lines, crack, bump, flake, rock, coke, blow)

What is it? Powder, liquid, crystals. Snorted, injected, or smoked in a glass pipe.

What does it do? Makes you feel alert, hyper and confident.

Negative Effects: Psychosis, paranoia, anxiety, and seizures.

Aftereffects: Major low, depressed, maybe suicidal, tired & hungry.

Dangers: Easy to overdose when mixed with other drugs or alcohol. Loss of smell & nose bleeds. Can hurt your lungs; lead to heart attack, psychosis, malnutrition. Crack catches on fire easily.

Addictive? Very addictive drug and is one of the hardest drugs to quit. Crack is the most highly addictive form of cocaine.

Drug: Crystal Meth Methamphetamine (speed, fire, meth, chalk, ice, crystal)

What is it? White odorless powder or transparent flat crystals. Snorted, in pill form or injected.

What does it do? An intense rush of energy. Confident and talkative.

Negative Effects: Increased heart rate, chest pain, nausea, aches, vomiting, diarrhea, dry mouth, physical tension. Anxiety, impulsiveness, aggression, paranoia, hallucinations.

Aftereffects: Effects last 6-12 hours. Afterwards you may feel tired and depressed. Short and long-term psychosis including hallucinations, paranoia, delusions, and aggressive behaviour, damages brain cells affecting memory and movement.

Dangers: Increased heart rate and blood pressure. Possible seizures, high body temperature, irregular heartbeat, heart attack, stroke and death. Also, risk of infections from used needles.

Addictive? Tolerance builds up quickly, leading you to want more drugs to achieve that original "high." Highly addictive.

Drug: Marijuana (weed, pot, reefer, grass, dope, ganja, Mary Jane, hash, herb, Aunt Mary, skunk, boom, kif, gangster, chronic, blunt)

What is it? Product of hemp plant. Looks like leaves. Usually crushed or rolled into cigarettes or in a water pipe called a bong. Sometimes found in baked goods.

What does it do? Relaxed, mellow, and giddy.

Negative Effects: Slows reflexes, impaired concentration, forgetfulness, distorted perception, and anxiety or panic attacks.

Aftereffects: Burnout, slow, unaware, memory problems and inability to concentrate.

Dangers: Cancer-producing chemicals in the smoke cause lung or neck cancer and infections. Bronchitis. Low sperm count, disrupted menstrual cycle, and possible psychosis. Some people think they are better drivers when they use marijuana, but your reflexes are actually too slow to react in a fast moving car, making it very dangerous.

Addictive? Daily use of marijuana can lead to long-term negative cognitive, social, and intellectual outcomes. Some people who are genetically at risk for schizophrenia can increase their risk for the disorder by using marijuana regularly.

1. How to reduce your risks

- ➔ Avoid using drugs like cocaine, heroin, crystal meth, and LSD. They can all cause permanent brain damage.
- ➔ If you do use drugs like alcohol or marijuana, use them only in moderation and within the limits of the law.
- ➔ People who pressure you to use drugs/alcohol when you don't want to are not your friends. If you don't want to use drugs and alcohol, don't!
- ➔ Never drive after drinking or using drugs and don't get into a car with a driver who has been drinking or taking drugs.
- ➔ If you are using drugs/alcohol more days than not, or if you are having financial, personal or school problems while using drugs/alcohol, you may have a problem. Remember that using drugs/alcohol decreases your inhibitions, so be cautious about engaging in risky behaviour. Get help before things get out of hand.

If you're uncertain whether you have a problem, complete the CRAFT Screening Tool, available here: http://www.ceasar-boston.org/CRAFT/pdf/CRAFT_SA_English.pdf

If you respond 'yes' to 2 or more questions in Part B, you may be at risk for a substance problem and should see a trained health professional for further assessment.

2. Alcohol use

The effects of alcohol on your body vary, depending on your age, gender, weight, metabolism, tolerance, the type of alcohol consumed, and the number of drinks you've had. Alcohol is one of the most common drugs of addiction. Following the tips below and making an effort to drink responsibly can help prevent your drinking from becoming a problem. It is also important to know that addiction runs in families. If someone in your family has an addiction, you'll need to be more careful about your drinking and you may even want to consider avoiding alcohol altogether.



Tips to keep in mind

- ➔ **Eat before drinking.** Food slows down alcohol absorption.
- ➔ **Safe consumption.** You should generally have no more than two drinks a day.
- ➔ **Know when to stop.** If you are at a party and have had more than a few drinks and are starting to feel woozy, know when enough is enough and stop.
- ➔ **Stay safe.** If you feel you've had too much and are about to pass out, get somewhere safe. You don't want someone to take advantage of you.
- ➔ **If you're on medication, don't drink alcohol.** Some prescription drugs or even over-the-counter drugs can be harmful, or even deadly, when mixed with alcohol.
- ➔ **Don't drive.** 4 Canadians are killed every day due to impaired driving. Approximately 190 Canadians are injured each day due to impaired driving. Call a cab or grab a ride with someone who hasn't been drinking. (For more information visit: www.madd.ca.) In 2003, 50% of car accident fatalities among 20 - 25 year-olds were alcohol-related.

Binge Drinking

Binge drinking is incredibly common among college and university students. So common, in fact, that people are often unaware (or intentionally ignorant) of its potentially serious consequences. It's considered by many to be a 'rite of passage' and research has found that binge drinking is more common than smoking among teenagers and young adults today.

What is binge drinking?

According to the Canadian Medical Association, if men have 5+ drinks and women have 4+ drinks on one occasion, it's considered binge drinking. A 2008 Canadian survey found that 47% of 18-24 year old men and 29.3% of 18-24 year old women reported binge drinking.

Withdrawal

Alcohol withdrawal refers to symptoms someone may experience when they quit drinking after being a heavy drinker. Withdrawal symptoms may include:

- | | | |
|----------------------------|--------------------|------------------|
| ➔ Nervousness | ➔ Depression | ➔ Confusion |
| ➔ Shakiness | ➔ Headache | ➔ Agitation |
| ➔ Fatigue | ➔ Nausea | ➔ Fever |
| ➔ Inability to concentrate | ➔ Loss of appetite | ➔ Convulsions |
| ➔ Anxiety | ➔ Insomnia | ➔ Blackouts |
| ➔ Irritability | ➔ Rapid heart rate | ➔ Hallucinations |
| ➔ Rapid mood swings | ➔ Clammy skin | |

3. Treatment for drug/alcohol addiction

An effective treatment program will:

- ➔ Address all aspects of the individual's life, not just his or her drug addiction.
- ➔ Assess the individual often to meet the person's changing needs.
- ➔ Allow adequate time for effective recovery.
- ➔ Include family counselling and group support systems.
- ➔ Include counselling and other behavioural therapies to teach healthy life skills.
- ➔ Use motivational therapy emphasizing the individual's readiness to change.
- ➔ Include medications combined with therapy, if appropriate and necessary
- ➔ Follow up.

For more information on drug and alcohol addiction, visit: www.camh.ca

Learn from Richard's story

I don't have the words to describe how I felt back when my life revolved around drugs. I never thought I'd ever even try drugs, but one day when my friends were talking about it and saying how great it made them feel - I got curious. The thought of doing something risky excited me. So I snorted my first line of cocaine. Soon the thrill had us all snorting coke every time we got together. Then a friend stole needles from his mom, because she was diabetic and had a case of them, so we used them to try heroin. Time seemed to fly by so quickly and the next thing I knew, I was stealing jewelry from my mom and pawning it off for money to buy drugs. I even started selling my own possessions. I was actually more afraid of going through withdrawal - rather than seeking that ultimate high. I got fired from my job and dropped out of university. I was seriously out of control because of drugs.

What changed the situation?

After I lost my job, I'd ask my parents for money to pay the bills. They'd give me the cash, but I would end up spending it on drugs. My parents started questioning my spending when my phone line got cut off for lack of payments. When I got kicked out of my apartment for not paying rent, my family freaked out on me. They knew I had been into drugs, so they insisted I move back home. I moved home and they sat me down and we all talked about my problem. Believe me - it was not easy to sit and open up, but I knew they were trying to help me. They sent me away to a drug rehab center. The thought of people knowing I was at rehab was humiliating, so I decided to cut off my friends and start fresh. It was incredibly difficult, but I knew it was the best thing for me. Rehab was awful and so boring sometimes, but I had the chance to learn guitar from my roomie - we spent 3 months together in rehab, creating a real friendship.

My advice to someone considering trying drugs:

If your friends are doing drugs, ask yourself if you really want to be "one of them". Ask yourself if you are willing to let your life be controlled by a substance. I'm sure your childhood dream was not to become a drug addict. So don't let yourself get carried away by the drug scene - You could lose everything! It's so hard starting over, so just don't go there. If you are already addicted, get help! You'll feel so much better about yourself. Life is short - don't waste it!

4. Know the signs of alcohol poisoning & drug overdose

- | | |
|------------------------------|----------------------------|
| → Inability to stand or walk | → Vomiting |
| → Chest pain | → Delusions/Hallucinations |
| → Heavy sweating | → Loss of consciousness |
| → Irregular heartbeat | → Seizure |
| → Cold, clammy skin | |
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Call 911

If you do not call 911, the victim may throw up and choke on his or her own vomit. It is not uncommon for someone with alcohol poisoning or a drug overdose to die or get brain damage.

GAMBLING ADDICTION

Many people are able to gamble without experiencing problems. However, an increasing number of students are going to casinos and gambling online in hopes of winning big and paying their way through school. This can lead to major debt. If you are gambling and have the warning signs listed below, you may have a gambling problem. Ask for help before it gets out of hand.

Warning signs

- Ongoing money problems associated with gambling
- Constantly borrowing from friends
- Acting secretive or deceitful about gambling
- Irregular sleeping patterns
- Emotional instability
- Social withdrawal due to gambling
- Nervousness or anxiousness – often associated with financial worries
- Avoiding friends who are owed money
- Constantly talking about gambling or money
- Relationship problems
- Missed commitments due to gambling

Guidelines for safer gambling

- How much money can you afford to lose? Set your limit, and always stop when you get close to (not over) that limit.
- Don't count on winning; get a job if you need to make money.
- Never gamble alone.
- Don't put your gambling ahead of your relationships.
- Take regular breaks when gambling and watch the clock or time yourself.
- Be wary of ads that guarantee big payoff or ads aimed at students to pay off tuition costs.

How to help a friend with a gambling problem

- **Talk to your friend somewhere comfortable and private.** You don't know how he or she will react so take his or her emotions into consideration.
- **Be sure you have the time to talk.** This may end up being a very long conversation and you don't want to rush through a big issue like this.
- **Be open.** Tell your friend you are concerned and why.
- **Be honest.** If they borrowed money from you and other friends, tell them you know that he/she spent it all gambling.
- **Listen.** Try not to judge or be critical of your friend. Remember that you're not looking for an argument; you just want your friend to be able to open up and share his/her feelings.
- **Be supportive.** Tell your friend you are here for him/her and suggest ways to get help.
- **Be positive.** A good influence is a positive one, so take your friend out to have fun. Just don't gamble.
- **Understand that he/she may be angry with you.** Try not to take it personally. Remember that you're doing the right thing by trying to help.



What some students are saying

"It's so easy to get carried away with gambling for me, especially when it's online and I use a visa."

"Gambling is very dangerous especially for students like me it's so easy to quickly gamble away an entire student loan."

"Gambling isn't worth the risk. Pay-off is very unlikely."

Tips to overcoming a gambling problem

Cognitive Behaviour Therapy (CBT) may help you identify the negative unreasonable beliefs you have about gambling that are helping to maintain your addiction. CBT can also help you focus on changing your gambling-related thoughts, emotions, and behaviours to ones that are more adaptive and healthy. Know that there is always a way out and winning money isn't everything!

For more information on gambling addiction, visit: www.problemgambling.ca

UNHEALTHY BEHAVIOURS

Although the following behaviours are not mental disorders, they can have negative consequences for your physical and mental health.

ANGER & VIOLENCE

Have you ever felt so angry you wanted to punch a wall?

Anger is a perfectly normal emotion. It can actually be really useful, because anger tells us that something is wrong. Rather than pretending not to feel angry, it's much healthier to focus on channeling your anger productively. If you're punching holes in the wall, you probably need to work on your coping skills...

Tips to manage your anger

- ➔ The first step to coping adaptively with anger is understanding why you're angry. Figure out what your anger triggers are. When you understand exactly what is making you angry, it's much easier to express that anger productively. Take a deep breath and calmly say, "That really bothers me because it makes me feel..." If the situation causing your anger isn't a necessary or important part of your life, there's no shame in avoiding it.
- ➔ Learn to recognize when you feel anger rising, before you explode.
- ➔ When you feel the anger starting, try the following ways to calm down:
 - ➔ Take a deep breath and concentrate on your breathing. Try the Box Breathing exercise on page 9. Think "Calm down, it's not worth it." Consider whether expressing your anger will help solve the problem.
 - ➔ Calm yourself by imagining something peaceful or relaxing. Focus on letting the anger seep out of your body, like water down a drain.
 - ➔ Take a walk or do some other physical activity.

People who are quickly angered have low tolerance for frustration and get agitated easily when circumstances change. However, there are many types of angry people. Some angry people don't get violent but are constantly grumpy, depressed, and socially isolated. If you are having trouble controlling your anger and the tips above are not helping, you should talk to a counsellor about enrolling in an anger management course.

Anger, however, shouldn't be confused with domestic violence. The difference between an anger management problem and domestic violence is people with anger management problems do not discriminate between their victims. They can blow up on anybody. In a domestic violence situation, abusers are often friendly, laid-back, and easy-going with others and only turn their violence and anger toward their partner. Domestic violence is never okay. See the section on abusive relationships on page 30 if you or someone you know is affected.

What if someone you know feels dangerous?

- ➔ If it makes you uncomfortable, don't spend time alone with the person.
- ➔ Try to remove the person from the anger-provoking situation before they get too angry.
- ➔ Talk to someone you trust and ask for help from a professional.
- ➔ If you are worried about being a victim, get protection from an authority figure.
- ➔ Take all threats seriously.

SELF-HARM/SELF-INJURY

What is it?

Non-suicidal self-injury (a.k.a. self-injury or self-harm) is the intentional infliction of physical harm to your own body (e.g., cutting, burning, bruising, scratching). Tattoos and piercings (i.e., body modifications) are not considered self-harm. Self-harm is also not the same thing as suicide. Many people think that people who self-injure are suicidal (i.e., they assume that by cutting, the individual is trying to die), which is not true. Not all self-harm is an attempt to die.

Who does it?

14-24% of youth and young adults report that they've self-injured at least once, and ¼ of them do it regularly. People can start to self-injure at any age, but most often begin as teenagers. In early adolescence, girls are more likely to report that they self-injure, but by late adolescence/early adulthood, self-injury is equally common among men and women. Research has also found that people who face social prejudice (e.g., LGBTQI youth) are more likely to self-injure.

What are the signs?

It can sometimes be hard to tell when someone is self-harming because many people try to hide the outward signs (e.g., by wearing clothing that covers the cuts/scratches/bruises/burns). Here are some signs to watch out for:

- ➔ Unexplained cuts, burns, bruises, or scratches, especially on the arms, legs, and stomach.
- ➔ Clothing that isn't appropriate for weather/situation but covers significant portions of their body.
- ➔ Hoarding razors/knives and other objects that may be used for self-injury.

How can I help?

If you notice the signs listed above, ask your friend about self-injury. Self-injury doesn't improve on its own. People need to learn more adaptive and effective coping strategies before they will be able to stop self-harming. Trying to force people to stop self-injuring without teaching them better coping strategies will leave them with no tools for handling their difficult emotions. Learning better coping takes time and patience. Be supportive of your friend's struggle. Respect his or her right to privacy but don't promise to keep it a secret. Be honest with him or her about your concerns; encourage him or her to seek help from a counsellor or psychologist; don't judge; and don't freak out. Your friend needs your support; let them know they're not alone.

For more information on self-injury, visit: www.sioutreach.org

SUICIDE – BE AWARE!

Suicide should always be taken seriously, as it is one of the leading causes of death among young people. If you hear someone talking about suicide, it may be a cry for help and it is important to take it seriously.

Why would someone want to die by suicide?

Suicide is complex and often misunderstood. In Canada, most people who die from suicide have a mental disorder. Suicide or suicidal thoughts is not a normal response to stress or sadness, nor is it part of being a 'normal teenager'. Some people think that suicidal behaviours are just a cry for attention but regardless of the complex reasons behind the behaviour it is important to get them professional help. Suicide is a very serious issue.

I think my friend is suicidal

If you think someone is suicidal, it is important that you listen and take him/her seriously. Your friend needs to know that you care and that it matters to you whether he or she lives or dies. Accept that your friend's feelings are very real, even if they don't make sense to you.

You should see a counsellor for information and advice on how to approach your friend. You can also try to get your friend to visit the counsellor with you there for support.

Suicide warning signs

Here are some warning signs that someone may be considering suicide:

- ➔ Talk about what it will be like for others after they're gone
- ➔ Suicidal thoughts
- ➔ Preoccupation with death
- ➔ Withdrawal from family and friends
- ➔ Intense hopelessness or sadness
- ➔ Giving away valued possessions

If you notice these signs in someone you care about, ask if he or she is thinking about committing suicide. Asking about suicide directly will not put the idea into his/her head. Be polite and respectful but don't beat around the bush. Be direct, keep an open mind, and try not to be judgmental. Remember that no matter how you feel about the situation, your friend's feelings are real and valid. Asking your friend about suicide shows that you care enough to have a potentially uncomfortable conversation. Your friend will likely be relieved that you asked, knowing that he or she is not alone.

Know the signs! **Call 911** or take your friend to the emergency room at the hospital if he or she needs immediate help. Do not wait! Take all threats of suicide very seriously!



Learn from Kevin's story

I used to be on an adventure racing team with a couple of best friends of mine named Tim and Andy. We could conquer anything together. It was exhilarating! While training for a big race, we all went mountain climbing up Mount Robson. We had planned on a specific route but Tim convinced us to take this shortcut. We were reluctant but we went for it. We got to this crevice and the walls started crumbling a bit. I was nervous and I climbed up and out fast. Tim was next, but then when it came to Andy's turn the rocks started falling overtop and one knocked him off the side of the wall and he fell to his death.

The next summer I thought Tim had gotten over it, but I discovered he had dropped out of school and wasn't doing anything with his life.

I approached him and asked him what the problem was and he admitted he still felt guilty for picking the shortcut that day that killed Andy. He broke down and said he didn't deserve to live.

What changed the situation?

I asked him if he was thinking of suicide and he said he was. He said he hadn't told anyone about his thoughts. A few days after breaking down telling me everything, you could just see the weight lifting off his shoulders. He was still really down so I went to my doctor to ask for advice. I would visit Tim often, even if he said he didn't want company, and I'd bring funny movies and just be with him. I encouraged Tim to go see a counsellor too, which he did. Eventually we even were able to talk about Andy and how much we both missed him. About a year later we got back out there and started our adventure racing again.

My advice to someone considering suicide:

Be there for them. If you have any suspicion that he/she might be thinking of suicide, talk to them. Get help! If I hadn't talked to Tim I would have lost my two best friends, as if one wasn't enough. Talking can save lives – don't be too embarrassed to open up.

For more information on youth suicide, visit: <http://teenmentalhealth.org/for-families-and-teens/suicide/>

GRIEF AND LOSS

At some point in your life, you are going to lose someone you love. Although grief can be very painful, it is a natural and normal part of life. Everyone grieves in their own way. For some people, the grieving process lasts a few weeks or months until they have time to adjust and adapt to the loss. For others, observable grief is almost non-existent – they seem to move on right away. And still, for others, grief can be long-lasting and cause the individual considerable psychological impairment. All of these paths are valid ways of grieving a loss; there is no right or wrong way to grieve.



TIPS TO HELP A GRIEVING FRIEND

- **Make contact.** Either in person, on the phone, or online. It's okay if you don't know what to say or it feels uncomfortable to reach out, but knowing he or she has someone to turn to during this hard time is likely to make the grieving process a little easier on your friend.
- **Talk.** It's okay to talk about the person who has died. Don't pretend as though he or she didn't exist.
- **Be patient.** Don't push your friend to move on and get over it. Let him/her grieve at their own pace. Remember grief looks different for everyone. Alternatively, remember that some people are resilient enough to move on from a loss very quickly. If your friend doesn't appear
- to be grieving, don't try to force him/her to talk about or re-experience the loss. Your friend is doing what is right for him or her.
- **Listen.** Don't try to fix your friend or imply that you know how he or she feels. Although you may be able to imagine what your friend is going through, everyone is different and grief is personal. Just listen with an open mind and be supportive of his/her experience.
- **Be positive.** It's important to take care of yourself. Sacrificing your own mental health at the expense of your friend won't be beneficial for anyone. If you feel overwhelmed, step back.
- **Be there.** For many people, just having someone around can be helpful.

For more information on coping with grief, visit: http://cmha.ca/mental_health/grieving

HELP FOR ALL ADDICTIONS & MENTAL ILLNESSES

If you, a friend, or a family member, have a mental illness or an addiction, there are many places you can look to find more information and get help, such as:

- **Family doctor.** Visit your family doctor to talk about your concerns. Your doctor may be able to provide you with contact information for a good counselor or psychologist. They may also be able to give you contact information for local support groups.
- **Internet.** The Internet has many websites focused on mental health and mental disorders. Be aware that not everything you read online is accurate but it is a good start to finding information. Check out the list of trusted websites below.
- **College/university counselor or nurse.** Visit your College/University counselor or health centre and talk to the nurse or counselor about your questions. In addition to providing counseling, they may be able to provide you with contacts for other local resources and/or give you books or pamphlets with helpful information. If there is a well-informed professor you can trust, try talking to him/her.
- **Library.** Check out your community library or your school library for books on mental illness. There may be a few great books to help you understand more about mental illness and how to cope.
- **Kids Help Phone.** The Kids Help Phone has counselors who answer calls and online questions 24 hours a day, 7 days a week. They are there to help you with any question or concern you have. (www.kidshelpphone.ca or 1-800-668-6868)
- **Health board.** Many communities have a health board where you can go to get help. Health boards often provide you with a list of local support groups and other helpful resources. Remember that information posted on a health board is not always checked for accuracy, so do your homework and make sure the information you're getting is from a trusted source.
- **Online Phone book.** Check out the yellowpages (www.yellowpages.ca in Canada) for local support groups, counselors, and youth health centres.

Check these reliable websites out: www.teenmentalhealth.org; www.keltymentalhealth.ca

HOW CAN A COUNSELOR OR FAMILY DOCTOR HELP?

These professionals have a lot of information on mental health and are trained to help you with any mental health problem or illness. They can offer factual and emotional support and may also be able to recommend a local support group or help you find more information.

Talking to a counselor or family doctor can help you:

- ➔ understand more about your own mental illness
- ➔ understand more about your parent's mental illness
- ➔ understand your own feelings
- ➔ learn to cope in healthy ways
- ➔ open up and express your emotions
- ➔ make changes in your own life
- ➔ build healthy relationships
- ➔ set limits and protect yourself
- ➔ adapt and be positive

Sometimes it helps to make a list of questions before visiting a counsellor or doctor. Remember, everything you say will remain confidential and you'll feel a lot better after opening up.



GETTING HELP

Sometimes things will not be going so well and sometimes it can be hard to differentiate between a difficult time that you will be able to slog through and a difficult time that you will likely need help during. For example, a situation in which you would benefit from speaking to a counselor can be really helpful and don't hesitate to ask for that help. If you are not sure about what to do calling Kids Help Phone (its not just for Kids) and speaking to a counselor there can help you make the decision. Their number is: [1-800-668-6868](tel:1-800-668-6868)

Sometimes, it can be difficult to differentiate if you are experiencing something more challenging; for instance, a mental health problem or a mental disorder. For something like that you may need to get help from a health professional such as a: doctor; nurse; psychologist. If you are thinking or feeling that your situation is overwhelming or if you are having thoughts about harming yourself or others, you should go to the nearest emergency room right away. If you have a friend who can go with you don't hesitate to ask them to do that. Their support may be a big help.

Should I go to my Student Health Services with my Concerns?

Questions To Ask Myself:

- Have I been feeling really out of sorts emotionally for over two weeks, most of the time each day? And I can't really get feeling better in spite of what I try to do.
- Have I begun to let my school work slip (missing classes, not doing my studying) because of how I have been feeling?
- Have my friends or family members been telling me that they are concerned about how I am doing?
- Have I cut down on my social life and my contacts with friends and family because of how I am feeling?
- Am I having problems with my emotions, behavior or thinking that I have had help for in the past but that are now re-emerging?
- Have I been using alcohol or drugs more than others are using them or have I begun using alcohol or drugs to "help" me with how I am feeling or to take my mind off my problems?
- Am I experiencing any of the following: thoughts of hopelessness or that life is not worth living; hearing voices when others are not hearing anything; thinking that people are wanting to harm me in some way, or are against me for some reason; feelings of despair; feelings of intense anxiety or panic for no reason; fatigue or numerous aches and pains (such as headaches) that seem to go along with my emotional difficulties?

If you answered **YES** to one or more of the questions above, please make an appointment to visit the Student Health Services or your family physician as soon as possible. Let the person you talk to know about what is concerning you. Remember, if you are concerned that you may harm yourself or someone else, please go immediately to your nearest hospital emergency room and let the staff there know what is happening.

If you have a friend you are concerned about, talk to them about your concerns and go with them to where you think they may be helped most. Feel free to share this information with them.

**IF IN DOUBT ABOUT NEEDING HELP, DON'T WAIT.
PICK UP THE PHONE AND CALL:**

1-800-668-6868

CONCLUSION

Although this is an exciting time in your life, it is normal to have some anxious feelings as you transition into more independence and responsibility. Know that many of your other classmates are also going through similar experiences and you are not alone. Sometimes it helps to talk to senior students who have been in your shoes and are familiar with College/University life. Also, remember that a good support network can help get you through even the toughest of times. Don't let your relationships take a backseat to your studies – keep in touch with family and friends, even if it's from a distance. Balance is key when it comes to your social life and academic responsibilities. Having a good support network, balance, and healthy habits (e.g., enough sleep, healthy meals, regular exercise) are essential components in achieving mental health.

Keep in mind that if you are having problems with anything, help is always available! Visit your counseling services office or student services office if you have any concerns. They are there to help.

Good luck & Happy Transition!

APPENDIX

RESOURCES

Need to speak to a counselor right now? Kids Help Phone is Canada's only bilingual, free telephone and online counselling service. They will not judge you and the service is completely confidential: Call toll-free: **1-800-668-6868** or visit: www.kidshelpphone.ca

Mental Health and Mental Disorders:

www.teenmentalhealth.org

Depression:

<http://teenmentalhealth.org/for-families-and-teens/depression/>

Bipolar Disorder:

<http://teenmentalhealth.org/for-families-and-teens/bipolar/>

Schizophrenia:

<http://teenmentalhealth.org/for-families-and-teens/schizophrenia/>

Generalized Anxiety Disorder:

<http://teenmentalhealth.org/for-families-and-teens/generalized-anxiety-disorder/>

Obsessive Compulsive Disorder:

<http://teenmentalhealth.org/for-families-and-teens/obsessive-compulsive-disorder-ocd/>

Panic Disorder:

<http://teenmentalhealth.org/for-families-and-teens/panic-disorder/>

Social Anxiety Disorder:

<http://teenmentalhealth.org/index.php/glossary/entry/social-phobia-also-known-as-social-anxiety-disorder/>

Suicide:

<http://teenmentalhealth.org/resources/entries/coping-with-suicidal-thoughts>

<http://teenmentalhealth.org/for-families-and-teens/suicide/>

General Health:

<http://teenmentalhealth.org/for-families-and-teens/evidence-based-medicine/>

<http://teenmentalhealth.org/resources/entries/communicating-with-your-health-care-provider-what-every-student-should-ask>

Communicating with your Parent:

<http://teenmentalhealth.org/resources/entries/teening-your-parent1/>

Family Resources:

<http://teenmentalhealth.org/for-families-and-teens/family-resource-series-1/>

Learning Disabilities:

www.ldac-acta.ca

Attention Deficit Disorder and Attention Deficit Hyperactivity Disorder:

<http://teenmentalhealth.org/for-families-and-teens/adhd-attention-deficit-hyperactivity-disorder/>

<http://www.myadhd.com/snap-iv-6160-18sampl.html>

Support for Lesbian, Gay, Bisexual, Trans or Queer Youth:

www.pflagcanada.ca

Sexual health:

www.sexualityandu.ca

Unplanned pregnancy:

www.cfsh.ca

Dating Violence:

<http://deal.org/the-knowzone/violence/dating-violence/>

Grief / Loss:

http://cmha.ca/mental_health/grieving

Sexual Violence:

www.1in6.org

Eating Disorders:

www.keltyeatingdisorders.ca/

Nutrition:

www.choosemyplate.gov

Addiction:

http://www.ceasar-boston.org/CRAFFT/pdf/CRAFFT_SA_English.pdf

Self Injury:

www.sioutreach.org

Student Loans:

<http://www.canlearn.ca/eng/index.shtml>

For more information and video resources, visit:

<http://www.youtube.com/teenmentalhealth1>

**iStore App**

Transitions by TeenMentalHealth.org

**iBook**

Transitions by TeenMentalHealth.org

A pocket version of Transitions is also available at:

TeenMentalHealth.org

Follow: [@TMentalHealth](https://twitter.com/TMentalHealth)

Surf: teenmentalhealth.org

Chat: info@teenmentalhealth.org

Like: facebook.com/teenmentalhealth.org

Watch: youtube.com/teenmentalhealth1

Transitions, is the first Canadian publication of its kind. The guide provides information on topics including time management, relationships, sexual activity, mental illness, suicide and addictions. It also includes mental health self-help information and contains recommendations where students can go to get help.

Transitions is available free of charge from our web site. This large resource book can also be purchased online & viewed as an iBook. The smaller version is available for download as an App.

95%
like the materials

40%
discussed them with a friend

16%
sought help for mental illnesses
because of what they learned