UPCOMING EVENTS:

**OCTOBER 9TH**
Sleep & Relaxation  
12:15-1:00

**OCTOBER 29TH**
Mindfulness  
12:15-12:30  
M206

**NOVEMBER 5TH**
Art Therapy Night  
VTC Café  
5:30-7:30 PM

**NOVEMBER 12TH**
Mindfulness  
12:15-12:30  
M206

**DECEMBER 6TH**
Hokie Winter Extravaganza  
VTC Café  
1:00-5:00  
Puppies & Pizza  
5:00-7:00 PM

Wellness Weekly

Pressure Cooker Spaghetti Squash

**Implementation:***

- 1 2.5-3 lb spaghetti squash, halved lengthwise & seeded
- 1/4 pepper
- 1/4 tsp salt

**Directions:**

1. Pour 1 cup water into a multicooker.
2. Sprinkle squash with salt and pepper and place in the multicooker.
3. Close and lock the lid.
4. Cook at high pressure for 7 minutes.
5. Release the pressure and remove the squash from the cooker. Allow it to cool slightly.
6. When cool enough to handle, gently scrape out the squash flesh with a fork.
7. Enjoy.

http://www.eatingwell.com/recipe/266630/pressure-cooker-spaghetti-squash/
Elephants

by Ayesha Kar, Class of 2021

Let’s talk about the collective elephant in almost every room, mental health, specifically in medical school. I would love to sit here and throw mnemonics at you about the warning signs of depression or anxiety, with an engaging font and color scheme and a fun stock photo to top it off, but that’s the very issue at hand, isn’t it?

Making mental health issues digestible and seemingly more “comfortable” is where we lose their inherent quality. Some, if not most of us, may try to force our mental health into a pretty package, making it easier not only for others but also for our own selves to acknowledge and interact with. We may walk through Riverside 2 and CRMH laughing at our stress, making light of how overwhelmed we are, and sarcastically proclaiming, “I’m fine, everything is fine!” The truth is, mental health isn’t always pretty, and it especially isn’t pretty with the levels of stress we may all feel, academic or otherwise, through this journey. So why do we work so hard to achieve this unrealistic goal?

Research says that it’s because a majority of medical students are high achievers, high performers, and we are at higher risk for mental health fluctuations. What else does research say? That we’re less likely to 1) acknowledge it and 2) seek out help. Sometimes 1 and 2 are equally difficult, and that’s because once we may identify a problem, we may hold ourselves accountable to fix it. Remember the righting reflex? We like to practice that on ourselves, and from my own personal experience, it’s not always effective. Sometimes months to years of unresolved mental health issues are beyond our control and not even our undying desire to fix things and rectify the wrongs can undo that. Additionally, a lot of us think methodically, we will research and read and become frustrated when we don’t respond to our own treatment plan.

Then we finally get to #2. Admitting that you may need help of any form is jarring. Vulnerability has a stigma; you may not want to be seen as weak and even more alarmingly, you may think you are alone in this. You may think your problems are insignificant or that you may not gain anything from seeking out any form of help - a conversation with a friend or faculty, counseling, a therapeutic walk, or just puppies. You may think that everything is pointless, we will continue to get more and more stressed out, until one day you are inevitably and unfortunately burnt out.

Really I wrote this piece to lay out that although I cannot speak for all students at VTCSOM, I have felt and gone through all of the things I have described. And at the risk of sounding absurdly cliché, you are not alone. We do not have to follow the straight trajectory to burn out and no, even though it may feel inevitable, we (you personally and all of your support systems) do have the power to change our path.

Just to put this into perspective, I was diagnosed with depression, generalized anxiety, and PTSD at the age of 16. Even through my continued counseling and therapy, I have yet to reach full and total awareness or control of my symptoms, flares, and mental health fluctuations. There are moments that I am “over” my depression and my anxiety, that this will be my “last anxiety attack,” which unrelentingly, has turned out to be false on multiple occasions. But guess what? That is okay. Coming to terms with the fact that for some, including myself, depression and anxiety may be chronic, there may be no such thing as your “last depressive episode,” was a battle. I had to constantly battle myself, convince myself that I cannot just “cancel” my mental health. Did that mean that there is no end? Not necessarily. It means we manage the symptoms, the flares, and the fluctuations to the best of our abilities. That’s where I finally was able to reconcile with my chronic condition.

Just as a patient cannot control when they have flares of rheumatoid arthritis or any other disease, I have found that mental health sometimes has no pattern. It doesn’t fit the systematic flow charts that we secretly hope every disease process has. But knowing yourself, being honest with yourself, and being open to the idea that “yes, I may be experiencing a flare up of ______” is the true first step towards managing the condition. Awareness of your own signs and symptoms that signal the beginning of a mental health fluctuation can allow for early action-taking. Being secure in the idea that taking care of yourself is the first and top most priority and then, scheduling in time for alleviating factors may prevent a further, more serious progression of your mental health. The thing is that we cannot, and nor should we have the liberty to take care of the physical, mental, and emotional state of others, if we do not do the same for ourselves.

All in all, I want to say that if you have moments where you’re not feeling okay or even remotely functional, that it will get better. You are not alone and if you feel comfortable, seek out help in whatever form you respond to best. Don’t give up on the first resource (because just like studying, not every resource is going to work for you) and give your mental health the same kind of importance as you do to the rest of your responsibilities, because they are inherently intertwined. Take what you may out of this article and synthesize, internalize, and apply it to the best of your ability and most importantly, put you first.
Roanoke Valley

Out of the Darkness Walk

October 6, 2018

Sponsored by:
The American Foundation for Suicide Prevention

Held at:
Roanoke College 11:00-1:00

Team members need to register, but there is no registration fee.

If you’d like to join the team of VTC staff member, Pam Adams, please send her an email pamela59@vt.edu

For more information, follow this link.

On-Going VTC Wellness Activities

Walking Wednesdays

Every Wednesday at noon—group meets at the base of the Riverside 2 steps.

Mindfulness

- October 29th, November 12th, and December 3rd
- 12:15-12:30
- in M206
- with Laurie Seidel
PLEASE FEEL WELCOME TO SUBMIT ARTICLES OR IDEAS TO ANY MEMBER OF THE WELLNESS ADVOCACY COMMITTEE.

LINDSAY MAGUIRE - CLASS OF 2019
JEFF HENRY - CLASS OF 2020
AYESHA KAR - CLASS OF 2021
TBD - CLASS OF 2022
DR. JENNIFER SLUSHER, PhD, LPC
DR. ALLISON BOWERSOCK, PhD, CSCS, ACSM-EIM
LAURIE SEIDEL, MSN, RN
EMILY M. HOLT FOERST, COMMITTEE CHAIR

QUOTE OF THE WEEK:

“To conquer fear,
you have to go through it,
not around it.”
- Author Unknown

IF YOU WOULD LIKE TO CONTRIBUTE TO OR COMMENT ABOUT THE WELLNESS WEEKLY,
PLEASE EMAIL EMILY HOLT FOERST, OFFICE OF STUDENT AFFAIRS VTCSOM.
TO SEND A “WEEKLY SHOUT OUT” MESSAGE,
EMAIL EMILY HOLT FOERST AT EMILY_10@VT.EDU