

# COMING TO OUR EMOTIONAL RESCUE

by Staci Elder



## **OUHSC's Emotional Health Center is giving kids and adults the tools for healthier living and relating.**

**F**or the third and fourth graders at Shidler Elementary School in Oklahoma City, the 30-minute program of stories, lessons and exercises is just another part of their regular school day. Little do they know that this simple routine could affect profoundly their future as adults.

After 24 weeks, these students have received a valuable jump-start on life. They know how to identify their feelings, how to articulate and understand

them, and—most importantly—how to *think* before acting or reacting. They have been taught, literally, how to cope in a world that offers ever-escalating emotional anxiety and challenge. Rather than being told to “just say no,” they are getting the emotional strength and mentally healthy attitudes they need to take charge of their own lives.

In the words of one teacher, they have been given several ounces of emotional prevention, with the idea that

they then can avoid several pounds of “cure” later on, in the form of dysfunctional relationships, destructive behavior, depression and drug and alcohol abuse.

The notion of preventive care in all branches of medicine is just now gaining popularity in this country, but preventive *mental* health care remains a rare commodity. Not so at the year-old Emotional Health Center, which sponsors the Shidler program. Housed at



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*In addition to the “Enhancing Emotional Competence” programs for kindergartners and third and fourth graders, co-directors Eric Dlugokinski, left, and Sandra Allen supervise adult workshops on parenting, self esteem, co-dependency, emotional health and personal growth issues and are involved with the training of Health Sciences Center graduate students.*

the University of Oklahoma Health Sciences Center in Oklahoma City, the center was established around the principle that teaching children and adults positive ways to cope is the surest way to fight everything from high divorce and crime rates to chemical abuse problems to emotion-based physical illness and depression. Just as the problems themselves are widespread and highly individual, so are the programs that address them.

Co-directed by Eric Dlugokinski and Sandra Allen, the center is responsible for operating its “Enhancing Emotional Competence” programs with kindergartners and third and fourth graders in several Oklahoma City public schools. The center also conducts numerous adult workshops focused on parenting, self esteem, co-dependency,

emotional health and personal growth issues and is involved with extensive training of graduate students through the OU Health Sciences Center’s Department of Psychiatry & Behavioral Sciences.

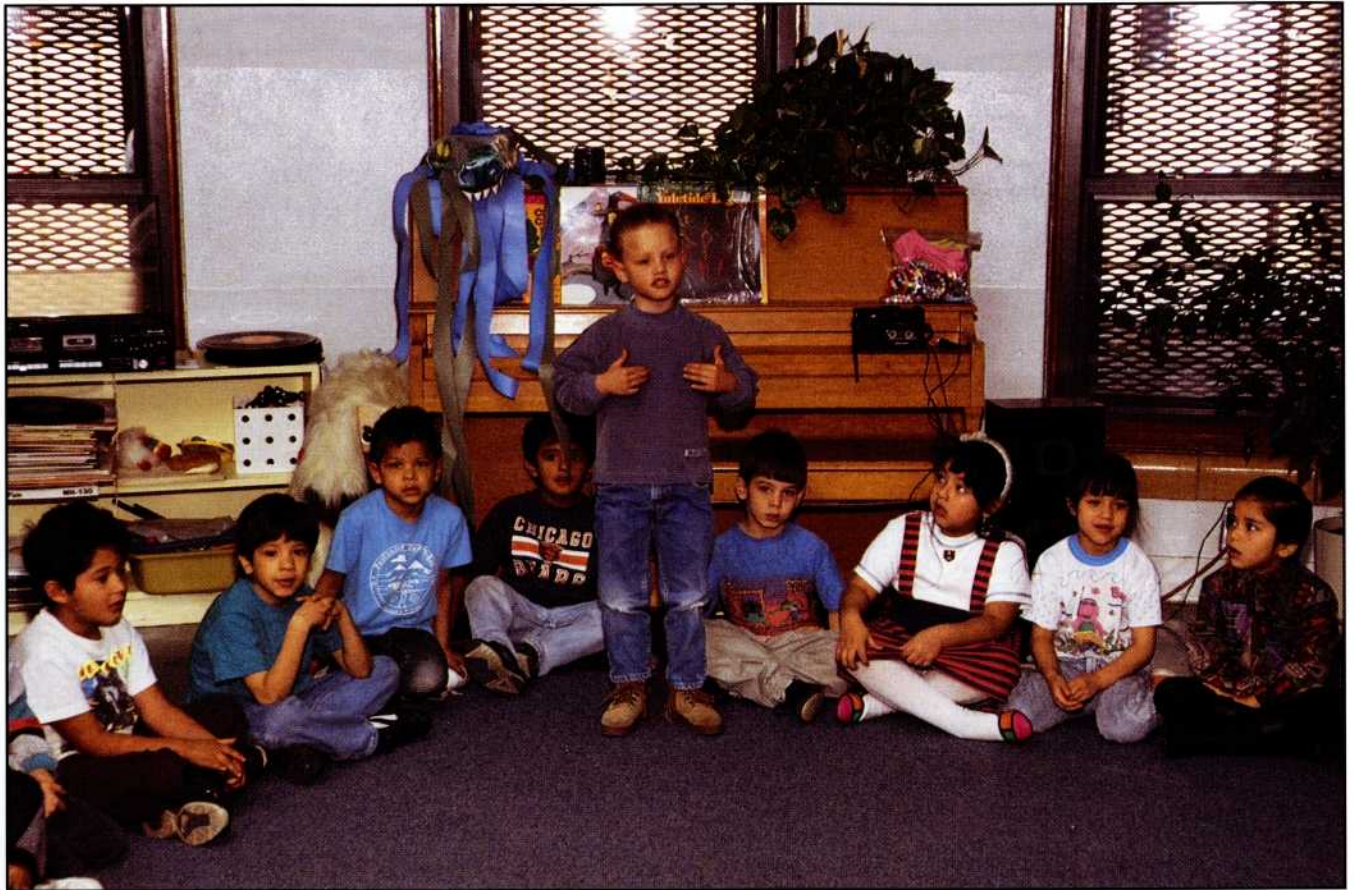
“Feelings are our personal arousal signals. They help us face changes we believe to be occurring in our lives,” psychiatry professor Dlugokinski explains. “As we mature through our childhood to our adult life, society expects us to manage those feelings ourselves and make the necessary changes to adapt successfully. In other words, we are expected to ‘cope.’”

Coping, however, cannot be fully achieved until an individual learns to recognize and accept his or her own personal feelings and express them in a non-destructive fashion. Unfortu-

nately, the majority of people today, Dlugokinski says, receive less-than-adequate training in how to do so. As a result, feelings may be buried in alcohol or drugs, or acted out through excessive violence. Many people, he says, cope to some extent but spend a lifetime filled with unnecessary anxiety, mood swings or bouts with depression.

It may seem like a cliché, but boosting self esteem is the first and most critical element of all the Emotional Health Center’s programs, whether aimed at children or adults. Self esteem is not just a buzzword for this group—it is a verb. It is something you learn to *do*, as well as something you have.

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Gil Jain

*Kindergartners at Shidler Elementary School are convincing when they declare, "I Am Special!" The youngsters are participants in a program of OUHSC's Emotional Health Center designed to dispel the anxieties of adapting to school and school-related routines. Clinician Teresa Collins, center staffer Bill Russner and teacher Phyllis Hall provide the tools.*

think that valuing the self is being self-ish," says Allen, a clinical assistant professor of psychiatry. "This is not the case. Boosting the self esteem simply means preserving the spiritual base of a person. It means learning to love yourself more and abuse yourself less. That can be a difficult task for many people."

"Self esteem naturally fluctuates in each person," Dlugokinski adds, "but what we do know is that people who have consistently higher self esteem have healthier relationships and healthier bodies and are more productive at school, at work and in their personal lives. Many of our clients come in with the initial misperception that self esteem is a consistent entity. The truth is that it is an extremely variable experience that is determined by how you connect with and value yourself in daily living."

Registered nurse Inga Johnson, a graduate of the center's first self esteem

workshops and the popular "Caring Connections Without Codependency" course, agrees, noting that the impact on her life has been significant.

"The material we were taught really opened my eyes," she says. "It gave me an insight into where I was coming from, emotionally speaking. You'd be surprised how difficult it is for many people to identify just what it is they are feeling."

Johnson's class involved weekly workbook assignments, plus group interaction and self-esteem-boosting techniques to practice at home and at work. "A lot of people are afraid to try to change themselves or really look at themselves," she says. "There can be frustrations; it's not an instantaneous process. But, it opened up a little window here and a little window there, and I feel it has had a very positive impact on me. It has definitely helped me change the way I feel about myself and the way I react to different situations."

"Our society focuses all its energy on solving problems after they appear," Dlugokinski insists. "Yet despite this energy devoted to treatment, it doesn't prevent new problems from occurring. That's why our center can make such a difference. With all the violence and chemical abuse and other mental problems we see in society today, obviously a new approach is called for, and I believe we have the strategies that will prove successful over time."

The idea for the center emerged from three main sources: (1) the skyrocketing cost of health care and the inability of families to get help before severe dysfunction sets in; (2) the realization of the limitations of treatment strategies; and (3) the need for a university-based center for training professionals in prevention strategies. Its philosophy, Dlugokinski and Allen say, can be summed up in the following story:

*Imagine a group of children who have fallen in a deep river. They are in*

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*serious danger of drowning.*

*Ten of us are downstream, rescuing the children as they float down the river.*

*All of us are very busy, but we just can't save all the children who have fallen in.*

*We decide instead to send two or three of us upstream. Their job is to look for ways to prevent children from falling in the river. Maybe we could build a fence around the cliff . . . or build new paths for children . . . or recruit families to teach children to swim . . . or find elders to teach children to stay away from the cliffs.*

"Our vision in establishing this center was and is to train professionals and volunteers to go upstream," Allen says. "We're not surprised to find national health panels and task forces supporting our philosophy. We have been reaching out to the children and families in the Oklahoma City community for several years now, and we are gathering evidence that our strategies can be effective tools for promoting health and preventing emotional disability."

Jerry Walker, child counselor with the Oklahoma City/County Health Department and consultant for the Oklahoma City School District, agrees. "I can honestly say that there is a major, observable difference in these classes. Over the course of the program, in the face of strong negative feelings such as anger, fear, embarrassment or frustration, these kids change from simply reacting without thinking to being able to learn to recognize the consequences of their actions."

Walker, along with other specially trained center staff, works with the elementary school teachers to weave the lessons into the fabric of the classroom. "I do a lot of language arts," he says. "For instance, in 'Step One' when

we are teaching the children the proper names for feelings and the importance of accepting their feelings, we also incorporate words such as 'synonym' and 'antonym,' and the teachers work our concepts into their lesson plans, spelling tests, etc. It's very much a cooperative effort."

The same peer pressure that can encourage kids to experiment with drugs or join gangs also can be brought to bear in healthy situations, adds Bill Russner, center staffer and graduate research fellow in psychiatry and behavioral sciences. "We had one particularly aggressive fourth grader who was always getting into fights on the

playground," he recalls. "First, we worked with him to identify his feelings and then to be able to state them clearly. This got us to the stage where we would say, 'What are you going to do when you get mad at someone on the playground?' and he responded, 'I'm going to beat the hell out of them!'"

"By the end of the program, however, we had him working out positive ways of coping with his feelings, and we had the other fourth graders suggesting alternatives as well. When he finally was able to stop hitting, the other kids were very congratulatory, and he came out of it feeling justifiably proud of himself." *continued*



Gil Jain

*Principal Eugene King, here congratulating the kindergarten classes on a program they have presented for their parents, cannot say enough good things about the "I Am Special" program and its effect on students at Shidler Elementary School.*

In addition to working with the elementary school children, Russner also conducts a 12-week course on parenting in which he works with both parents and children. There, too, the changes can be very dramatic.

"In one case, we worked with a child who was described by his own parents as 'a terrible, evil child—completely out of control,'" Russner recalls. "By the end of our 10-week parenting seminar, the parents had learned how to restructure their home life to encourage positive behavior in their child, while the child had learned some different ways to interact with his peers and his parents. The whole family was amazed at how big a change there was in just 10 weeks. It was really nice to see that happening."

So widespread are the Emotional Health Center's workshops and programs that they can be difficult to encapsulate, while new seminars continually are being developed. Many of the programs are offered both in extended 10- to 12-week seminars or condensed one- to two-day sessions. Some samples:

- \* "Living in Self Esteem," designed to build skills in loving and nurturing the self through reflection, planning and directed action.

- \* A sexual abuse prevention program, "Ben's Secret," taught through story book and discussion.

- \* A "Caring Connections Without Co-Dependency" workshop series for adults who are seeking healthier ways of working and relating.

- \* "Managing Life With Children," for children ages four to seven and their parents, who are interested in improving the quality of their relationships and decreasing conflict and tension within their homes.

- \* The "I Am Special" program that helps dispel the normal anxiety felt by kindergartners adapting to school and school-related routines.

- \* Programs for bilingual families, for families who have children with disabilities and a home visitation program for parents.

- \* A graduate course and training

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program, "Prevention Perspectives in the Community," for education and health professionals.

- \* A research study that is evaluating the success of the above-mentioned kindergartens, third- and fourth-grade programs.

The Emotional Health Center is funded primarily by the University but is seeking outside support in the form of both gifts and volunteers. More

information about any aspect of the programs is available by calling (405) 271-4219.

"As long as we have no coherent approach to mental health in the entire U.S. health care system, as is the case at this time, we will continue to lag behind," Dlugokinski says. "Mental health is no different from any other branch of health care—strong prevention strategies can save millions of dollars, as well as tremendous pain and suffering."

Dlugokinski's arguments are backed by a new survey from the University of Michigan at Ann Arbor indicating that almost half of Americans experience mental illness at some time in their lives, and almost one-third are afflicted in any one year. While many people successfully work through emotional problems, a significant percentage experience serious, multiple psychiatric problems as a result of emotional "pile-ups" that accumulate over time. For example, an anxious child may turn into an alcohol-abusing teenager and then into an adult with major depression.

The survey findings also indicate that these pileups are indeed likely to be offset by early psychiatric counseling and early learning of coping strategies, such as the type taught by Emotional Health Center-affiliated staff.

Traditional psychiatric therapy, meanwhile, reaches only one-to-two percent of the general population and, while helpful, is still an after-the-fact approach, say Dlugokinski and Allen. "Many people believe that therapy is something mystical that occurs behind a closed door," Dlugokinski explains. "We have to find ways to bring these discussions of emotions and mental health out into the open. It's no different than the recent discovery that changing one's diet in youth can help to prevent cancer as an adult. We should all be very invested in teaching coping skills to the young so that they can avoid more serious problems down the road. Why set yourself up to go through chemotherapy—or psychiatric therapy—if you don't have to?" ☐