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 R E L A T I O N S H I P S B I

bullying care companionship confidence continuum depression effort faith inclusiveness lonely openness outcomes relationships transformation trust

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24-Hour Crisis Hotline
 877-800-1650

by Martha Adair
 Clinical Director,
 Oakland County



- Antisocial behavior
- Poor decision making
- Alcoholism and drug use
- Progression of Alzheimer's disease

Cacioppo's research recommends how to deal with it:

- Recognize that loneliness is a sign that something needs to change
- Understand the effects that loneliness has on your life, both physically and mentally
- Consider community service or activities you enjoy to cultivate new friendships and interactions
- Focus on developing quality relationships with people who share your attitudes, values and interests
- Expect the best, not the rejection lonely people expect by focusing on positive thoughts and attitudes in your social relationships

Loneliness is one of the most serious mental health challenges many people will face in life . . . and, like other health issues, it requires patience and forthrightness to manage successfully and overcome.



Loneliness is on the rise in the U.S. In a 1984 questionnaire, respondents most frequently reported having three close confidants. When the question was again asked in 2004, the most common response was zero!

The health consequences of loneliness are serious, including:

- Depression and suicide
- Cardiovascular disease and stroke
- Increased stress
- Decreased memory and learning

"Only the Lonely" . . . It's More Than a Song

Decades ago, the late and great Roy Orbison sang "Only the Lonely" about the pain of love lost. Since then, we've come to understand loneliness as much more than a temporary condition . . . and as a culture we rarely talk about it!

Loneliness is a symptom of mental health issues. For people 60 and over, it has become a health threat in its own right, in some ways more dangerous than smoking. But loneliness doesn't just affect the elderly. It is pervasive and damaging at every life stage.

A college freshman may find his or her peers everywhere, but can still feel inadequate, scared and alone. Paradoxically, the explosion of social media has replaced genuine in-person human interaction with the two-dimensional sharing of texts and files. No one has a thousand "friends."

John Cacioppo is a University of Chicago psychologist and author of *Loneliness: Human Nature and the Need for Social Connection*. "Loneliness is strongly connected to genetics" he writes. "Other contributing factors include situational variables, like moving, divorce and death. It can also result from psychological

disorders such as depression as well as from a lack of confidence, making one feel unworthy of the attention or regard of others."

NEW OAKLAND
 FAMILY CENTERS



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The New Oakland Continuum of Care: The Right Care at the Right Time

At New Oakland Family Centers, we often talk about our "continuum of care." But what does that really mean?

In essence, it means that our guiding philosophy and commitment is to provide the right care at the right time by matching and tailoring our mental health services to people's needs rather than force-fitting solutions that may be too much or too little.

Since our founding in 1991, one of New Oakland's primary goals — and the approach that makes us unique among mental health providers in Michigan — has been to develop new kinds of mental health alternatives for adults, children and teens.

The two most important of these New Oakland alternatives are the State of Michigan-licensed FACE to FACE program and New Oakland's team of Intensive Crisis Stabilization (ICS) therapists on call 24 hours/day to deploy in person and in real time.

Fully accredited by the Commission on Accreditation of Rehabilitation Facilities (CARF), New Oakland's continuum of care is an active, preventive and early intervention approach that works with the whole family.

Our intensive crisis stabilization (ICS) services provide a framework for New Oakland therapists to serve as on-site intermediaries to help connect people with the appropriate care at times where rapid intervention is essential.

The FACE to FACE program offers a structured environment with an intense focus on learning skills for recovery, but also the important advantage of allowing the individuals to continue living at home to develop and hone skills for recovery and practice them in their home environment.

Our goal is always to reach a person at his or her moment of need and continue to provide intervention and structure to assure the right care at the right time.

24-Hour Crisis Hotline
 877-800-1650



To learn more about New Oakland's state of Michigan-licensed FACE to FACE day program, visit us online at www.NewOakland.org

The Confidence Game: A Parent/Teen Challenge

I made my share of mistakes as a parent, but I do believe I did a good job in instilling confidence in my two daughters, who are now 28 and 31 and doing quite well.

Why is confidence so critical? According to Carl Pickhardt, PhD, lack of confidence “can lead to undue influence of peers; it can slow development by limiting experience; it can lower self-esteem by raising self-doubt; it can lessen motivation by reducing the willingness to try; it can foreclose on progress by resisting goal setting and it can foster failure by justifying giving up.”

Pickhardt writes in *Psychology Today* that the critical years are from 9 – 13 when the young person is separating from childhood to early adolescence and from 18 – 23, which he refers to as “trial Independence,” leaving home to operate on one’s own terms.

This is why a confident child doesn’t automatically become a confident adolescent and why a confident high school student can suffer a hit to his or her confidence when starting college.

In these stages, the challenges of growth become more complex and people feel less secure. They must deal with more unknowns and feel more ignorant. As they must make more risky decisions and incur more costly mistakes, they feel relatively less experienced. And as they must rely more on themselves and less on parents, they feel relatively more anxious.

Let’s be careful not to confuse confidence with arrogance, because

excessive self-confidence has a downside. It can be hard to get along with someone who believes he or she always knows best, is never wrong and expects people to defer to that.

So, how do parents create confident offspring? 1) by presenting a confident



demeanor and outlook as a model to emulate and 2) by using the right words to strategically build a foundation for their child’s sense of self-confidence.

There are 3 key areas:

Faith: You want your child to think: “I believe I can.” You instill that we learn from mistakes — nothing ventured, nothing gained — and there’s no end to examples of great ones failing many times before getting it right. We don’t motivate by saying, “You’ll never succeed.” Criticism saps confidence. We say, “I know you have what it takes.”

Effort: You want your child to think: “I will keep trying.” When the adolescent

by Eli Zaret
New Oakland
Community Liaison



complains that nothing he or she does builds confidence, you insist that all it takes is effort.

Suggest things like practice a skill; volunteer; collaborate on a project; finish what you start; fix something that’s broken; stand up for yourself.

Instill a belief that effort is the engine that makes self-confidence run.

Outcome: Truth is, lots of frustrations and failures are beyond one’s control. Recovery depends on his or her will to sustain faith and effort.

A parent gives an example of how when he failed, he or she accepted the factors, processed the sadness, figured out the next best thing he or she wanted and went after it.

As a sportscaster, I never lost my amazement at how athletes were able to keep believing in themselves in the face of lengthy slumps and crushing defeats. I came to realize that the great ones were able to still visualize themselves succeeding, having **FAITH** that their ability to play was and remained legitimate and retrievable; knowing that greater **EFFORT** would enable them to rise again; and secure that previous successful **OUTCOMES** were genuine and deserved and remained in their power to make happen again.

Talk to your kids about the critical importance of confidence and nurture them in building it.

It’s hard to imagine any greater gift you can give them.

Meet Lisa Kalinski: Clinical Director, Wayne County

Lisa Kalinski currently serves as the Clinical Director for New Oakland — Wayne County.

Her primary responsibilities include managing the day to day operations of the outpatient and FACE to FACE programs at New Oakland’s Livonia Center.

Over the past several years, Lisa has also served as a primary FACE to FACE therapist at the Livonia Center.

Additionally, Ms. Kalinski provides full clinical support and supervision overseeing all outpatient clinicians at the Livonia Center. Lisa received her Master of Arts in Professional Counseling from Oakland University.

Prior to joining New Oakland, Lisa worked nearly a decade in the mental health field serving as a clinician in various outpatient treatment settings.

In her nine years with New Oakland, Lisa has seen tremendous opportunity and change . . . and has contributed in so many ways to making it happen.

“We are fortunate to be able to make a difference in the lives of the people we serve and I’m proud to be a part of that every day,” Lisa says. “Needless to say, I’m also really looking forward to what’s next!”



“Defeat the Label” and the Anti-Bullying Movement

By Kimberly Smith
Clinical Director,
Macomb County



“In the end we will not remember the words of our enemies, but the silence of our friends.”

— Rev. Dr. Martin Luther King, Jr.

Matt Epling would be 26 now if he hadn’t taken his life in 2002. He was a 14-year-old middle school graduate when a group of high school boys lured him from his house, restrained him and hazed and tormented him for hours. They warned him that if he told anybody, it’d be worse the next time. Forty days later, Matt committed suicide, an act now sometimes referred to as “bullycide” — and the bullying epidemic has become part of the national conversation.

Matt’s dad, Kevin, could have wallowed in his misery. Instead, he made it his mission to spare others Matt’s fate. Nine years later, in 2011, Michigan Governor Rick Snyder signed into law “Matt’s Safe School Law.”

Echoing Dr. King’s words, Epling realized that the only way Matt could have been saved was if his classmates had reported what happened to him. Those who are bullied are often too ashamed or scared to tell anyone. Epling’s goal was to start a movement that would encourage and support bystanders to change their paradigm on bullying.

At New Oakland, we see the devastating effects of bullying. Statistics show more than 160,000 students reportedly skip school every day because they are bullied and 1 in 10 teens drops out of

school due to repeated bullying. In all, 83 percent of girls and 79 percent of boys report being bullied either in school or online.

One of Epling’s greatest allies is “Defeat the Label,” a Detroit-based movement started by Jeff Sakwa and Kevin Goldman and with Epling they created “Stand4Change.” At a single moment each May since 2012, more than 3 million school children, with many celebrities giving support, simultaneously stand and recite a pledge to become proactive in reporting school bullying.



Kevin Epling wants parents to see the signs he may have missed — signs like:

- Long-lasting sadness or irritability; outbursts of crying or anger
- Loss of interest in activities the person usually enjoys
- Withdrawal from others
- Sleep pattern changes, either sleeping too much or not at all
- Sudden changes in appetite or eating habits
- Always feeling tired or slow
- Being restless, anxious or worried
- Not being able to concentrate or think clearly
- Feeling worthless, guilty, helpless or hopeless
- Aches and pains with no obvious physical cause

Talk to your kids about the anti-bullying effort in their school. Discuss the difference between being proactive and “snitching.” Encourage them to be part of the solution. Tell them they may be able to save a kid like Matt Epling and just how wonderful and heroic that would be.

New Oakland locations to serve you

Livonia Center
31500 Schoolcraft Road
Livonia, MI 48150
734-422-9340

Clarkston Center
6549 Town Center Drive
Clarkston, MI 48346
248-620-6400

Clinton Township Center
42669 Garfield Road
Clinton Township, MI 48038
586-412-5321

Farmington Hills Center
32961 Middlebelt Road
Farmington Hills, MI 48334
248-855-1540

Center Line Center
26522 Van Dyke Avenue
Center Line, MI 48015
586-759-4400

Warren Center
8150 E. 13 Mile Road
Warren, MI 48093
586-825-9700

FACE to FACE Crisis Stabilization Services
877-800-1650
(24 hours/day)

Meet Dr. Orlena Merritt-Davis: New Oakland Team Psychiatrist



Dr. Orlena Merritt-Davis is a board-certified psychiatrist. She is a treating psychiatrist across all New Oakland facilities and primarily works providing outpatient services at New Oakland’s Clinton Township Center.

She has more than 20 years of experience in psychiatry and provides treatment to adolescent and adult populations.

Dr. Merritt-Davis is also affiliated with Henry Ford Macomb Hospital and is an Assistant Professor at Wayne State University School of Medicine.

She graduated from Wayne State University with her Doctorate in Medicine. She completed her post graduate training at Wayne State University as well.

Dr. Merritt-Davis is a Diplomate of the American Board of Psychiatry and Neurology and is also a member of numerous psychiatric associations.

In her free time, Dr. Merritt-Davis enjoys spending time with her family. She also enjoys watching movies, travelling, reading and attending concerts and plays.