Gamecock Health

Relaxing the Mind
plus

OVERCOMING ADDICTION

LET’S TALK ABOUT SEX
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ON THE COVER
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As the university designed the new Center for Health and Well-Being, goals included creating a calming space focused on student well-being that applies sustainable principles. For instance, to bring nature inside the space, the building features many windows throughout the facility, which bring in natural light and help to lower energy costs. To demonstrate the center’s commitment to sustainability, the center is pursuing Leadership in Energy and Environmental Design (LEED) Gold Certification, an internationally recognized green-building rating system. In addition, Student Health Services was also awarded USC’s Sustainable Carolina Green Office Certification in June 2017. Both sustainability certifications encourage, among other things, growing real plants, recycling, using green cleaning products, conserving energy and water and utilizing alternative transportation.

### Key LEED sustainability features at the Center for Health and Well-Being

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The University of South Carolina is the only college or university in South Carolina — and only one of seven in the nation — to win the Active Minds Healthy Campus Award. Recognizing the healthiest college campuses in the United States, the award celebrates institutions that demonstrate excellence in prioritizing and promoting the health and well-being of their students.

“At the University of South Carolina, we care about creating a culture of wellness where students, faculty and staff are able to live, learn, work and play,” said Harris Pastides, USC president. “This is only possible when the individual, environment and the community unite to create a culture and atmosphere that encourages healthy behaviors.”

Students enrolled at schools that focus on campus health often find that the programs and services offered there are life-changing. Terry Doan, a senior public health major, benefited from the university’s counseling services after being diagnosed with anxiety and depression.

“By working with this service and meeting my counselor, now turned mentor, I was able to continue at USC and thrive,” Doan said. “I honestly believe that utilizing USC’s counseling saved my life. The experience has made me more resilient, more self-confident and given me the necessary skills to take care of myself in times of duress.”

The Healthy Campus Award, now in its third year, involves an extensive application process as well as multiple endorsements and interviews. Each applicant is assessed across eight criteria, with winners chosen by a panel of prominent researchers and health and higher education experts.

USC joins six other colleges and universities in receiving the Healthy Campus Award: the University of South Florida, Arizona State University, Duke University, Jefferson Community College, Kent State University and the University of Oregon.

Before working as an undergraduate on the productions team at SGTV, USC’s student-run broadcasting network, Baker was narrowly focused on a career in television or movie production. Baker, originally from Roanoke, Va., initially worked with the network to write a satirical news segment and write and direct an original sitcom about college life.

But as station manager in fall 2016, his first major project was Student Health Services’ Be Real. Be There. Mental Health Matters campaign video, which ultimately helped the campaign win the 2017 NASPA Silver Excellence Award.

Working with SGTV on these more service-oriented videos “is definitely where I’ve found a passion working with other people, particularly Student Health Services and other clients and my peers in general,” he said. “Being able to come up with an idea or proposition, to see it from conception to finished project is satisfying. The collaborative process on the way is what I enjoy most.”

After graduating, Baker moved to Washington, D.C., and is currently producing freelance videos. He has continued to work on university projects, producing a spring 2018 video showcasing USC’s healthy campus culture, which contributed to the university’s Active Minds Healthy Campus Award.

“PSA videos are really important and have shown me that I can still get the creative process in anything, not necessarily just for entertainment,” he said. “My videos can make a difference for people.”
SHS re-affirms accreditation

In August 2017, Student Health Services received its re-affirmed accreditation as a Patient Centered Medical Home (PCMH). Three years earlier, SHS was one of the first college health centers in the country to be accredited as a Patient Centered Medical Home.

During the August 2017 site accreditation visit by the Accreditation Association for Ambulatory Health Care, surveyor Dr. Michael Huey said, “This is undoubtedly the best college student health center I’ve ever seen.”

On behalf of AAAHC, Huey and Col. Paul Bennett spent two days visiting Student Health Services to review medical records, interview staff and closely analyze all aspects of care delivery. Select comments from the site visit are as follows:

• “The USC SHS Medical Home does an excellent job of providing continuity of care, which can be challenging in a college health setting where many students value accessibility and urgent care over continuity. Creative approaches include the use of cellphone sticky pouches (for holding credit cards, etc.) that feature the name of the student’s assigned Medical Home team.”

• “The University of South Carolina health promotion program, the multi-disciplinary Healthy Campus Initiatives, is well-known across the country as a model health promotion program. The program has been a leader in the tobacco free colleges/universities movement and is consistently cited as a dedicated Healthy Campus 2020 college. Rather than sit on its laurels, the program continues to grow, improve and innovate and is a critical part of the USC SHS Medical Home.”

• “University of South Carolina Student Health Services has a beautiful new 68,000 square foot LEED-Gold (certification forthcoming) facility...The design is frankly stunning, with a ‘biophilia’ approach to bring the outside to the inside...It is a lovely and welcoming facility.”

• “University of South Carolina SHS has made significant strides since the 2014 survey and has become a fully-integrated, multi-disciplinary, highly functioning Medical Home.”

To promote patient health and reduce barriers to care access, the Patient Centered Medical Home model focuses on five key areas:

1. Patient-provider relationship
2. Continuity
3. Comprehensiveness
4. Quality
5. Accessibility
One of the most exciting additions to the new Center for Health and Well-Being is the Carolinians Actively Living Mindfully Oasis, a dedicated meditation space for students, faculty and staff.

With daily guided meditations and occasional yoga classes, the CALM Oasis staff help students, faculty and staff become more aware and mindful of their surroundings, reducing stress and encouraging introspection.

Having a physical space on campus allows students to experiment with meditation practices in a positive, welcoming environment, said Justina Siuba, Student Health Services’ stress management coordinator.

To begin thinking more mindfully, Siuba encourages students to focus on one small task.

“Take a more mindful shower,” she suggested. “Don’t have your phone out when you’re going for a walk. These kinds of things really help us shift from that constantly thinking, striving, planning, doing and analyzing mode to just observing.”

Observation is a key aspect of meditation because it builds self-awareness about how our bodies respond to stress that arises or the emotions we associate with certain activities, Siuba said.

The CALM Oasis caters to many different students and their specific mindfulness needs, offering meditations specifically for graduate students, meditations on social change and meditations for students in recovery.

For more information, visit sc.edu/healthservices and search for meditation.
Not alone
SHS OFFERS GROUP THERAPY

In addition to individual counseling, students can attend group counseling.

Beginning this year, many of the groups don’t require an initial visit with a counselor before students can participate. More than 100 students currently participate in Counseling & Psychiatry’s 28 active groups.

Group therapy benefits for students:

- Create a sense of community with other students
- Build skills to combat social anxiety or address other concerns
- Receive feedback from peers in similar situations

A PROACTIVE APPROACH TO DEPRESSION

Screening, group sessions help students boost mental health

BY EMILY SWAN

Rather than waiting for students to seek help during mental health crises, the Student Health Services team works to prevent them.

As part of the center’s Patient Centered Medical Home, providers focus on the overall or holistic patient, meaning that a patient’s mental health is emphasized as much as physical health.

All students who come in for primary care or women’s health appointments take the PHQ9 survey, a national depression screening provided during their first appointment and then again at random intervals.

Screening is important because many people who are depressed do not seek treatment, said Jennifer Gilmore, a behavioral health specialist housed within Student Health Services’ primary care clinic.

However, they typically share their depression symptoms with their primary care or gynecological provider.

Within Student Health Services, if a student scores high on the PHQ9, Gilmore can intervene almost immediately, discussing the student’s needs and how best to meet those needs on campus. Earlier identification allows for earlier treatment, which may help prevent students from having major mental health crises.

“I sit with them pretty casually,” Gilmore said. “We’re going to try to find a way to work with people on campus, to get them supports they need. They may not know where they are. Or they’ve thought about it, but when you’re depressed, it’s hard to take the next step.”

Gilmore emphasizes that there are many potential outlets for students struggling with depression.

“There are a million things we can do for stress and depression,” Gilmore said. “I tell people it’s my job to always come up with something else. If you’ve tried these things and they’re not working for you, this is what I’m trained in. I can come up with something else.”
Stephanie Riley knows first-hand the importance of maintaining mental health. The first-year American history Ph.D. candidate attempted suicide five years ago.

At that time, she was a master’s student at the University of Illinois at Springfield where she ate 700-800 calories a day, slept four to five hours per night and worked out constantly while overextending herself with coursework, working as a teaching assistant and volunteering.

Because she has struggled with anxiety, depression and an eating disorder since she was a teenager, the Wheaton, Ill., native knew when she entered the doctoral program at USC that she’d need to immediately set up mental health resources to ensure success and avoid another mental health crisis.

Riley scheduled a psychiatry intake appointment during her first week on campus in fall 2017. Through a matching process, she found a counselor she felt understood her. And for the first time, she decided to tackle her eating disorder by seeking help from a Student Health Services registered dietitian recognizing that the disorder is holding her back from lowering her anxiety.

In addition to seeing Student Health Services providers, Riley received a referral to see an off-campus therapist once per week.

“My off-campus therapist is familiar with how (Student Health Services) works, and I’ve signed waivers so that (my therapist and Student Health Services) can talk with each other,” she said.

She said she likes that Student Health Services uses a team approach with the Patient Centered Medical Home model.

“I think it’s really important to have that holistic approach,” she said. “It’s something that I haven’t seen at other universities. It eases the burden of (students) having to re-explain everything” to other members of the student’s care team.

In spring 2018, Riley spoke at the Out of the Darkness Campus Walk and has worked with the American Foundation for Suicide Prevention on other projects.

After a student died by suicide on campus in fall 2017, Riley contacted the Graduate Student Association to promote mental health resources, and she spoke publicly for the first time about her battle with mental illness at a vigil for the student. Riley encourages anyone struggling with mental illness to not be afraid to reach out for help. “There’s more people struggling than care to admit,” she said. “No one’s going to judge you and the people that really love you are going to want to support and help you.”

To help her mental health, Riley has developed coping skills, like exercising regularly and eating healthy foods.

Riley also encourages people to fight the stigma associated with mental illness. “The more we can talk on campus about (mental illnesses) and the more awareness we can get out, the better,” she said.
The opioid crisis in America has reached epidemic proportions. USC’s campus is not immune to the problem, but Student Health Services’ pharmacists are hypervigilant about sparingly dispensing opioids and want to be part of the solution.

More than 90 Americans die each day after overdosing on opioids, including prescription painkillers, heroin and fentanyl, according to the National Institute on Drug Abuse.

The Centers for Disease Control and Prevention estimates that prescription opioid misuse in the U.S. costs $78.5 billion a year for treatment costs, lost productivity, health care and law enforcement involvement.

As acting secretary for the U.S. Department of Health and Human Services, Eric D. Hargan declared a public health emergency in October 2017 to address the national opioid crisis. This declaration could provide both specialized personnel and expanded access for certain groups of patients to telemedicine for treating addiction, among other resources.

In South Carolina, 550 deaths were attributed on death certificates to a prescription opioid drug overdose in 2016, according to the state Department of Health and Environmental Control.

“Even here in (the Midlands area), we have had a staggering number of deaths from opioid overdoses,” said Wendy Chiles, manager of Student Health Services’ pharmacy.

Although medical providers must ultimately prescribe alternatives to opioids for pain, pharmacists are in a “unique position to perform drug utilization review on a patient’s medication history and watch for patterns of abuse,” said Georgann Wilson, a Student Health Services pharmacist.

To oversee opioid use and prevent abuse, South Carolina pharmacists access the state’s prescription monitoring program, a database that shows if a patient has filled multiple prescriptions for the same medication.

Less than 2 percent of the prescriptions Student Health Services administers are opioids, Chiles said, but these drugs are becoming more of a concern on college campuses because of the national epidemic.

To promote the best patient outcomes and prevent abuse, when SHS providers prescribe opioids, they typically provide no more than three days’ worth and offer no refills. In addition, all SHS providers check the PMP before prescribing an opioid or other controlled substance.

If students are overdosing on an opioid, SHS staff can administer naloxone, the medication used to reverse opioid overdose.

South Carolina pharmacists can dispense naloxone without a prescription, and all SHS medical and pharmacy personnel have been trained to administer the drug. Student Health Services carries both the IV and intranasal forms of naloxone, more commonly known by the brand name Narcan.

Although the SHS team is prepared to intervene in overdose situations, staff members stress the importance of preventing opioid abuse by eliminating access to leftover prescription painkillers, which can open the door to opioid abuse.

Educating parents of teenagers and young adults about the risks of casually storing prescription opioids left over from previous surgeries, procedures or accidents is one step to prevent abuse, Chiles said.

“We need to make sure parents are aware that prescription drugs are abused just as much, if not more, than illegal drugs,” she said.
How does the Patient Centered Medical Home benefit students?

**JC:** It is set up around the patient. It’s accessible to the students. The students develop a partnership with their provider, and their provider directs the care team in taking care of their health care needs. Students have the ability to participate in decisions regarding health care. They can be assured that they’re receiving quality care.

**MM:** The team approach is a huge part because each department is aware of what other departments are doing. Each provider is aware of what other providers are doing. It helps give you a picture of the whole person. Rather than just someone with a sore throat, it might be someone with a sore throat who just lost a family member, or who’s dealing with anxiety or stress and is not doing well in school.

**JC:** I think the focus on technology, as well, benefits the students. Once patients have entered into a relationship with their provider, they can access their care team — and often their provider — through secure messaging. They can ask questions that didn’t come up or they didn’t think of during the visit. Sometimes these conversations can substitute as an actual face-to-face visit for follow up of certain conditions.

**JS:** From a specialty standpoint, there’s an ease of looking up the electronic health record by all the different providers across the spectrum. You can look at Counseling & Psychiatry, you can look at their medical notes, you can look at results of tests, you can look at scanned reports, you can look at outside reports. The electronic medical record helps us to keep that patient-centered aspect so that you know what’s going on even though I might be taking care of a separate problem.

**WM:** Particularly in a higher education context, the Patient Centered Medical Home supports our ability to not only serve students but educate them about their health care for their lifespan. It allows all the different providers to offer services to students that they might not necessarily think of.

Our traditional-aged students are navigating their health decisions for the first time, and being able to spend the time to educate them about all the other services that are provided within one entity is really helpful. Even for our transitional students, the convenience of being able to get all those services without having to make five different appointments in five different places and navigate that really supports their ability to meet their goals for the time that they’re here.

How does the Patient Centered Medical Home enhance patient care?

**JC:** Especially in primary care, we’re looking at their vitals, their social history, their family history and making sure that we’re pointing out to the patient things that the patient might not have thought of that could enhance their health and well-being.

**MM:** I just think it makes it more personal. It’s called a Patient Centered Medical Home for a reason.
How do you work with other Student Health Services departments through the Patient Centered Medical Home? How do you collaborate on care?

JS: We do the PHQ9 depression screening and when we know a student is struggling, we have instant resources. If you were in private practice, that would take maybe days or weeks to establish what the patients need. It would be short of going to the emergency room in an acute process.

JC: In primary care, the collaboration is frequently not just with the providers within Student Health but often with providers that are in the student’s hometown or specialists in Columbia outside of Student Health or the area emergency departments. Every time a patient presents in primary care here, they’re asked, ‘Have you received care elsewhere since the last time we saw you?’ We do that to make sure that we’re collaborating with others who are participating in that student’s care.

WM: I think a good example of collaboration includes things like our Eating Disorder Consultation Team. It’s a multidisciplinary team that allows people to actively collaborate around addressing not only eating concerns and body image concerns but also metabolic concerns and nutritional concerns and things that are going to really enhance a person’s well-being over time.

Even when we have a student coming in for what primarily seems to be an emotional disorder like depression or anxiety, our clinicians speak with them about nutritional and metabolic issues that could be underlying that condition. We’re not just diagnosing and treating depression but also saying, ‘It looks like you haven’t seen your primary care provider, and thyroid issues could be something that is concerning,’ and really helping to sensitize our students to the fact that they have to think about their wellness in a holistic way.

How does the Patient Centered Medical Home affect students’ academic success?

WM: There is a tremendous amount of data that supports that students who attend particularly to their mental and emotional health, but also their physical health, are much more likely to meet their academic goals, which makes them much more likely to increase their earning potential over their lifespan.

JC: I think accessibility is a major tenant of the Patient Centered Medical Home. And if a student has a medical issue that is hampering their ability to attend class, the fact that they can often get a same-day appointment can mean quicker care and a quicker return to normal lifestyle, as opposed to some of the more traditional medical practices where it might take three or four days or even a week to get an appointment for a new issue.

JS: In Women’s Health, our annual wellness examinations not only address specific gynecological needs but also general needs. Those can include things like exercise, substance abuse, lifestyle management, sleeping habits, eating habits. It’s more of a general wellness approach so that students can be at their top physical and mental condition and reach their academic goals.
Counseling director helps students cope

BY EMILY SWAN

Warrenetta Mann is passionate about working with college students.

Before becoming the director of Counseling & Psychiatry at USC in fall 2017, Mann served on college mental health teams for more than 15 years at four other universities.

“Thinking back to my own college experience and all the things that I was learning, the ways I was growing, a lot of my college experience happened outside of the classroom,” she said. “I just really enjoy working with students who are making that transition themselves.”

College can be an incredibly stressful experience, particularly for students who are not used to heavy workloads or living on their own, Mann said. She works with students every day to ensure they are taking care of their mental health needs.

“I want students to know that counseling isn’t just something for you to tap into when there’s something going wrong,” Mann said.

She was drawn to USC because of the university’s focus on wellness and well-being, which resonated with her background as a licensed psychologist and educator.

“There certainly is a lot of stress in our environment, and transition comes with its own kind of stressors,” she said. “Being able to focus on wellness and put that into practice was a big draw for me.”

Mann said that she advises students to explore counseling and learn how to navigate health care services while they are in the supportive college environment.

“Being able to understand how you utilize resources is a big part of the educational process,” Mann said. “Every (student), regardless of major or program, is going to be a consumer of health programs and services in the future.”

SHS counseling services

Up to 10 individual counseling sessions per academic year are included in the student health fee. Counseling & Psychiatry also offers group therapy, campus crisis response and individual crisis intervention at no extra cost to students. Psychiatric evaluations and medication management are also available for a nominal fee.
At age 20, William Benitez ’18 found himself in a jail cell and thought he’d never see the outside world, let alone earn his bachelor’s degree.

The former addict, one of the founding members of the on-campus Gamecock Recovery addiction program, was arrested at age 18 and convicted two years later for felony drug possession and distribution.

Sentenced to eight years’ probation, he ultimately served seven months in a county jail. Before his incarceration, he failed out of Volunteer College in Tennessee where he abused everything from stimulants and ecstasy to cocaine and alcohol.

“Parts of my transcript are full of zeroes,” Benitez explained. “I was too high to withdraw when I stopped going.”

During his addiction tailspin, the Nashville, Tenn. native alienated himself from his family — at one point, his parents kicked him out of the house and called the police on him.

“I remember calling my dad the last time I was locked up, and his response was, ‘You must like the Sumner County Jail.’”

After being released from prison, he got sober and immediately enrolled at Charleston’s Trident Technical College where in 2015 he finished his associate’s degree in human services. Later that year, Benitez enrolled in USC’s Bachelor of Social Work program because he wants to use his experience to help others who may be fighting addiction.

“I got involved in advocacy and social work so I can use my story in a way that’s powerful and meaningful,” he said.

Benitez said his first addiction was an eating disorder that began in middle school.

“I controlled what I ate, how I looked,” he said. “Drugs then made me feel comfortable and secure, and while it created so many problems, it felt like it was a solution of some kind from fear and insecurity.”

A fellow social work classmate who knew Benitez’s story told him about Gamecock Recovery, a small group of students who support one another in substance use disorder recovery.

“There is a need for people in recovery to have support,” Benitez said. “They can’t be in Greek life the way others can and have a similar college experience. I want to help in any way I can.”

Although a small number of students actively participate in Gamecock Recovery meetings and activities, about 500 students receive a monthly newsletter that markets events such as sober tailgates and tips on staying sober and clean in college, said Aimee Hourigan, the university’s substance abuse prevention and education director who oversees Gamecock Recovery.

“The group helps students connect to each other and identify with each other’s shared experiences,” Hourigan said. “It also helps them connect to the university so they can fully participate in everything USC has to offer. The goal is to help them have an authentic college experience while maintaining their recovery.”

For Gamecock Recovery, Benitez facilitated a recovery mindfulness group every Thursday in the Center for Health and Well-Being’s CALM Oasis.

“The meditation class was a safe space for me every Thursday,” Benitez said. “With a wide-open schedule — life kind of coming at me with deadlines — it was a safe room for self-care time. I feel supported (by others in recovery who attend).”

Benitez plans to move to Santa Fe, N.M., with his girlfriend and find a job. He said he hopes eventually to earn his Master of Social Work degree.

“I do consider myself a success story because I got to the other side of it,” he said. “I really believed I was going to die in a jail cell. The life I’m living I never dreamed I would.”
Let’s talk about sex

It’s natural to be curious about sex. Student Health Services staff members Lawana Mark, a Women’s Health nurse practitioner, and Sarah Wright, a counselor and sex therapist, answer common student questions.

What do you do if it hurts when you have sex?

LM: First of all, stop. Sex shouldn’t be painful. Perhaps you and your partner need to try another position to see if that will help. Also, consider using additional water-based lubrication if dryness is an issue. If the pain persists despite your efforts with those two tips, consider testing for sexually transmitted infections, especially if pain with sex is a new problem.

SW: See a medical doctor! While many people report experiencing pain during sex, it can be a symptom of a medical concern. It’s good practice to get things checked out medically first. Some things that can cause pain during sex include fibroids (fibrous growths on the uterus), endometriosis (inflammation of the inner lining of the uterus), swelling of the vulvar tissue, sexually transmitted infections or a mismatch in size between things being inserted and the thing it’s being inserted into.

What questions should I ask before having sex with a new partner?

LM: There are a myriad of questions you may need to ask. Some important ones include asking about their sexual history. How many partners have they had? Do they use condoms or some other form of protection during sex? Ask to see a copy of their latest tests for gonorrhea and chlamydia. You might also consider getting tested at the same time so you both know you have a clean slate.

SW: “Do you want to have sex?” Consent is cornerstone to good sex! And don’t assume everyone has the same definition of “sex.” Be clear about what you’re asking. A yes to oral may be a no to intercourse, or vice versa. It’s also good to ask about health status. Asking someone when they were last tested (and the results) isn’t rude or disrespectful, it’s taking care of your health. If these questions are uncomfortable to ask, then I would encourage reconsidering the action.

Are you doing it right? Is there a right way to do it? How do you approach the topic with your partner(s)? SHS staff can answer your sex questions. You can talk to the sexperts featured in this article or the SHS sexual health coordinator. No questions are off limits. Make an appointment by calling 803-777-1835 or stop by the sexual health office in room 101 of the Center for Health and Well-Being.
My name is Ryan Geiser, an undergraduate student who graduated (in May 2017) from the University of South Carolina. I’m emailing you in regards to the fantastic care I have received the past four years from Dr. Mike McKenzie.

When I first met Dr. McKenzie my freshmen year after visiting a couple other physicians in the Student Health Center, his warmhearted, detail-oriented and overall fun personality brought me back to him the next three years! During this time, I received first-class treatment while Dr. McKenzie never once misdiagnosed me which, in my special circumstance, is hard to find in a physician. I suffer from PFAPA Syndrome, a childhood illness which only in the past few years has been reported to occasionally progress into adulthood and is only treatable with Prednisone; Dr. McKenzie was up-to-date on this current research and fully understood that I suffered from this syndrome.

Unfortunately, I find myself in many circumstances where I must “fight” physicians to get the necessary medication (even after showing the diagnosis from Cincinnati Children’s Hospital), as was the case with Stanford University physicians last year while I attended a weekend conference. Not only does this demonstrate the immense skillset Dr. McKenzie possesses in this field, but also showcases the trust he places in his patients that allows these patients to feel comfortable returning this trust with his health care expertise.

Additionally, I’m honored to call Dr. McKenzie a close friend! During Thanksgiving Break and Winter Break last year, I was unable to visit my family nine hours away and stayed in Columbia after my friends left for home. During a visit, Dr. McKenzie asked about my vacation plans (as he always expressed an interest in my life outside of just medical care), and I discussed this situation with him. Immediately, he invited me to spend Thanksgiving and Christmas Day with his family (as well as any other days I’d be interested), which I never had anyone offer before. During these visits, I had a tremendous amount of fun, and Dr. McKenzie is the only reason I did not get homesick during this time.

As I look back at these last four years, I will always remember the spectacular generosity that Dr. McKenzie provided me, and I will always view Dr. McKenzie as the best role model for all students at the University of South Carolina. I, as well as my fellow peers, could write an entire essay on the countless, thoughtful actions that Dr. McKenzie provided to make such a positive impact on this community of students.

Best wishes,
Ryan Geiser
Finding spiritual wellness

Spiritual wellness is one of the eight dimensions of wellness that contribute to your overall health. Spiritual wellness is the quest for meaning, value and purpose, resulting in hope, joy, courage and gratitude.

A study conducted by UCLA’s Higher Education Research Institute found that “college students with high levels of religious involvement and commitment report better emotional and mental health than those with little or no involvement.”

The study defined religious involvement as activities such as reading sacred texts, attending religious services and joining religious organizations on campus. This finding means that while joining a religious organization is a great way to get involved, you can also be spiritual on your own.

Tips to increase your spiritual health

• Talk about issues with a chaplain to help alleviate stress.

• Have a social network (church, groups on campus, online, etc.).

• Participate in a group yoga class or meditate. Consider a guided meditation session in the Center for Health and Well-Being’s CALM Oasis. Visit sc.edu/healthservices and search for mindfulness to learn more.

• Check out the different spiritual groups on campus via Garnet Gate and filtering the organizations by the “Faith-based and Spiritual” category.

• Learn more about the study of religion through the department of religious studies. For more information, visit artsandsciences.sc.edu/relg.
Health coach Michael Crowley explains the health coaching process at SHS.

What is Be Well Carolina Health Coaching?
It is a personalized approach to setting health and wellness goals. Specialized health educators will help you establish lasting healthy behaviors based on your needs. The health coaching sessions focus on either nutrition, physical activity, stress management, sexual health, tobacco cessation or a combination of the areas.

You will identify your priorities and create a realistic action plan that includes short-term goals and an ultimate goal. By creating in-depth short-term goals, you will be able to gain momentum toward your ultimate goal.

How do I schedule a session and what happens at the first session?
You can schedule a session online at sc.edu/myhealthspace or by calling 803-777-8283. Your first session could take up to an hour. You will meet with your health coach in a private room and discuss why you are there. Then you'll be asked pre-screening questions, talk about your focus area, identify your priorities and create your goals.

Your coach will talk to you about barriers that might affect your progress. You will also be asked to talk about who will help support you. Finally, your coach will refer you to resources (within Student Health Services and in other university departments) that will help you achieve your goals and schedule a follow-up appointment.

All of the sessions are patient-centered, meaning that your coach is there to guide you and help navigate the appointment, but you ultimately set your own goals.

USC senior biomedical engineering student Kimanh Vo discussed her health goals with health educator Michael Crowley in April 2018 for her first Be Well Carolina Health Coaching appointment.

Why did you schedule a health coaching appointment?
I wanted to meet with a Be Well Carolina health coach to have a better understanding of my fitness and nutrition levels and how to improve to better meet my personal goals.

What are some of the goals you discussed?
In the nutrition appointment, I fulfilled requirements. However, to best maximize my time in the gym, I intend to increase seafood and protein intake and incorporate more whole grain into my diet.
STUDENT HEALTH SERVICES

Primary Care .......... 803-777-3175
Women’s Health .... 803-777-8920
Counseling ............ 803-777-5223
Psychiatry ............. 803-777-1833
Sports Medicine & Physical Therapy
Allergy, Immunization & Travel
Financial Services ...... 803-777-3174
Pharmacy ............... 803-777-4890
Healthy Campus ........ 803-777-8283
Initiatives
Nutrition Services ...... 803-777-8283
Sexual Health ......... 803-777-1835
Sexual Assault ......... 803-777-8248
and Violence
Intervention & Prevention (after hours)

PRESCRIPTION REFILLS
PocketRx App on smartphone or sc.edu/myrxspace

ONLINE APPOINTMENTS
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FOR EMERGENCIES, call 911
USC Police Dispatch .... 803-777-4215

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