

UNIVERSITY OF PORT HARCOURT COUNSELLING CENTRE (UPCC)





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THE NATIONAL ANTHEM

Nigeria we hail thee Our own dear native land Though tribes and tongue may differ In brotherhood we stand Nigerians all, are proud to serve Our sovereign Motherland.

Our flag shall be a symbol That truth and justice reign In peace or battle honour'd, And this we count as gain, To hand on to our children A banner without stain.

O God of all creation Grant this our one request. Help us to build a nation Where no man is oppressed And so with peace and plenty Nigeria may be blessed.

THE NATIONAL PLEDGE

I pledge to Nigeria my country To be faithful loyal and honest To serve Nigeria with all my strength To defend her unity And uphold her honour and glory So help me God

THE UNIVERSITY OF PORT HARCOURT ANTHEM

On the green low lands and swampy plains of the New Calabar River stands, The University of Port Harcourt A citadel of learning and excellent education A home of academic enthusiasts Searching, searching for knowledge and wisdom.

Enlightenment and self-reliance, our mission,

Our hope in the future is rooted in God alone: The vision of our fathers shining in the stars, Opportunities unlimited and equal Our progenies citizens of the universe From far and near, the pride of Uniport echoes.

Refrain:

Unique, Unique, Unique, UniPort Unique, Unique, Unique, UniPort

MOTTO, VISION, MISSION AND PHILOSOPHY OF UNIPORT

ΜΟΤΤΟ

For enlightenment and self-reliance

VISION

The University of Port Harcourt aims to be ranked amongst the best universities in Africa, renowned for its teaching, research, creativity and innovation.

MISSION

The Mission of the University of Port Harcourt is the pursuit of academic excellence, advancement of knowledge and community service through quality teaching, life-long learning, social inclusion, strengthening civil society and policy-relevant research that addresses the challenges of contemporary society. To achieve this Mission, the University is guided by the spirit of enquiry, self-reliance, fairness and ethical and professional standards of the disciplines.

PHILOSOPHY

The Philosophy of the University of Port Harcourt is: commitment to academic freedom, tolerance, probity, equal opportunity and respect for cultural diversity.

PRINCIPAL OFFICERS OF THE UNIVERSITY



Professor Owunari A. Georgewill Vice-Chancellor



Professor Clifford O. Ofurum Deputy Vice-Chancellor (Admin)



Dr. Gloria O. Chindah Registrar & Secretary to Council



Professor Kingsley I. Owete Deputy Vice-Chancellor (Academic)



Dr. Godpower W. Obah Ag. Bursar



Professor Iyeopu M. Siminialayi Deputy Vice-Chancellor (R&D)



Professor Helen U. Emasealu University Librarian

MOTTO, VISION, MISSION AND GOALS OF UPCC

ΜΟΤΤΟ

Our strength in times of distress

VISION

To build a support service system that will impact on staff and students the ideals of career, academic, social and psychological behaviour geared towards becoming better equipped persons.

MISSION

The Mission of the University of Port Harcourt Counselling Centre is to develop the career initiatives that will help students and staff to obtain critical life skills, ability to make informed decisions for their future and also equip them with social responsibility initiatives that will eliminate current and potential social ills currently invading the Nigerian society. The Centre aims at facilitating emotional and intellectual well-being of students, staff and other clients in the University community for optimal performance of their duties and effective handling of life's challenges.

GOALS

- To promote campus community's awareness on the various UPCC's services through provision of professional information and education.
- To enhance the individual's ability to function optimally and maximise his or her potentials. The UPCC will also offer an array of individualised services by effectively dealing with client's bio-psychosocial needs.
- To develop and offer services designed to help students and staff so as to acquire skills, attitudes, and resources necessary to pursue productive and satisfying lives for success on campus and thereafter.
- To provide educational, personal and psychological boost for all categories of staff and students in the university community.
- To ensure that the already established system where students are allocated to academic advisers for academic guidance are up to date with students' academic challenges.
- To provide for counselling of students and staff, in liaison with the Dean, Student Affairs Department, and the Director, Personnel Affairs, respectively.
- To participate in Orientation Programmes for fresh students and newly recruited staff respectively.
- To organise counselling for students placed on probation.
- To organise counselling for staff who were not successful in the annual promotion appraisal exercise.

ABOUT UNIPORT COUNSELLING CENTRE (UPCC)

The University Counselling Unit was established in 1985. The unit was initially under the Department of Educational Psychology, Guidance and Counselling. To encourage its greater utilisation, the unit was transferred to the Student Affairs Department in 1988. At inception it was headed by Dr. Virginia Amadi, the then Acting Head, Department of Educational Psychology, Guidance and Counselling, and later by Mrs. Rose Ebeniro, a Chief Counselling Officer, both of blessed memory.

In 2017, the University of Port Harcourt Counselling Centre (UPCC) was created as a non-teaching Centre in the University. As one of the non-teaching resource Centres in the University, the UPCC was established essentially to provide counselling services to staff and students particularly, and generally the university community. This Centre incorporated the Counselling Unit domiciled in the Student Affairs Department. Mrs. Matilda Nnodim, a former Registrar, was appointed the Director of the Centre. She was the pioneer Director of the Centre, and she served in that capacity from 2017 to 2022. Dr. Celestina Johnson, then a Deputy Registrar was also posted to the Centre and later redeployed in 2020. In June 2021, Dr. Rosemary O. Ekechukwu (now Professor) was appointed Acting Director (Professional) of the Centre and served till November, 2021.

The UniPort Counselling Centre (UPCC) was formally commissioned in its present location at Ofirima Roundabout, University Park (Abuja Campus), on Friday, 10th September, 2021, by the 9th Vice-Chancellor, Professor Owunari Abraham Georgewill.

The UPCC was under the headship of Mrs. Matilda Nnodim until 5th September, 2022, when the immediate past Registrar, Dr. Dorcas D. Otto, was redeployed to the Centre to take over from her. Currently, the Centre has ten Counsellors and three support staff. The UPCC has three outstations, and the Counsellors are deployed as shown below:

- School of Basic Studies 2 Counsellors
 Student Affairs Department 2 Counsellors
 Faculty of Basic Medical Sciences 2 Counsellors
- 4. Counselling Centre 4 Counsellors

Services rendered in the Centre and its outstations include:

- Personal counselling services to staff and students and other individuals within the University community.
- Participating in orientation programmes for new and returning students, and newly recruited staff.
- Promotion of effective interpersonal relationship among staff and students.
- Assisting students with relevant job information and entrepreneurship skills.
- Career counselling to students, particularly of the School of Basic Studies and other pre-degree programmes, as well as students desiring change of degree programme.

Office location:

Counselling Centre

The University of Port Harcourt Counselling Centre (UPCC) is located at Ofirima Roundabout, in proximity to the old Convocation Arena, and opposite the University Stadium, in the University Park (Abuja Campus), which is the permanent site of the University.

Outstations

- Student Affairs Department (New Convocation Arena), University Park (Abuja Campus)
- School of Basic Studies, University Park (Abuja Campus)
- Faculty of Basic Medical Sciences, University Park (Abuja Campus)

See a professional Counsellor. We are available from 8.00 a.m. to 4.00 p.m., Monday to Friday, except public holidays. Our Counsellors are there to listen and help those in need of counselling services. Our services are free of charge.

+234(0)8135290164

+234(0)8135422681

+234(0)9039096693

+234(0)8064166023

+234(0)8037548957

Reach us @

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+234(0)8095012112

+234(0)8135781807

+234(0)8115173028

+234(0)7062144682

+234(0)8150756895 (Director)

Email: counsellingcentre@uniport.edu.ng

You can also reach us via the virtual platform of the Centre on the UniPort website: <u>www.uniport.edu.ng</u>

STAFF OF UNIPORT COUNSELLING CENTRE (UPCC)



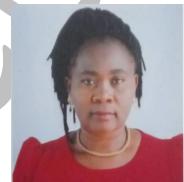
Dr. Dorcas D. Otto Director



Mrs. Loveth C. Jeremiah Counsellor



Mrs. Dawuta L. Tamunosimeariogbo *Counsellor*



Mrs. Patricia N. Amadi-Wali Counsellor



Mr. Zorte Ogozi Counsellor



Mr. Samuel I. Sekibo Counsellor



Mrs. Grace F. Oladipo Counsellor

STAFF OF UNIPORT COUNSELLING CENTRE (UPCC)



Mr. Emmanuel E. Nyenke Counsellor



Mrs. Flora O. Ohaju-Osimni Counsellor



Christiana C. Okiwelu Counsellor



Mrs. Oniro T. Oburoh Counsellor



Mr. Robinson Ogbuche Chief Superintendent Driver



Deborah N. Egbeka Secretary



Expensive Wohabiko Clerical Officer

1.INTRODUCTION: WHAT IS COUNSELLING?

1.1 Counselling/Counsellor

Counselling is a process of providing emotional support and guidance to individuals who are experiencing educational, vocational, or persona-social difficulties. The process involves a trained and qualified professional, known as a **Counsellor**, working with individuals or groups to help them explore and understand their feelings, thoughts, and behaviours. Counselling involves helping the client to identify and overcome personal obstacles, learn new coping strategies, and achieve a greater sense of well-being and self-awareness.

Counselling can take many forms, including individual counselling, couples counselling, family counselling and group counselling, as well as counselling online. The focus of counselling may vary depending on the client's needs and goals.

Counselling is typically conducted in a safe and confidential environment, where clients can feel comfortable sharing their thoughts and feelings without fear of judgment or criticism.

The ultimate goal of counselling is to help clients develop the skills they need to lead healthy and fulfilling lives, and to manage personal challenges and difficult life transitions with confidence and resilience.

The Counsellors you meet at the University of Port Harcourt Counselling Centre (UPCC), possess the following qualities:

- **Empathy**: ability to understand and share the feelings of their clients. Empathy helps Counsellors build a rapport with their clients and create a safe and supportive environment.
- Active listening: They listen attentively to their clients, ask relevant questions, and provide feedback that shows they have understood what their clients are saying.

- Non-judgmental attitude: Counsellors avoid being critical or judgmental of their clients. They are able to create a non-judgmental space where clients feel safe to discuss their concerns without fear of being judged.
- **Ethical:** Counsellors adhere to ethical guidelines and maintain confidentiality, trustworthy and act in the best interest of their clients.
- **Flexibility:** Every client is different, and Counsellors are able to adapt their approach to meet the unique needs of each client.
- **Boundaries**: Counsellors are able to establish appropriate boundaries with their clients and maintain a professional relationship at all times.

Overall, a good Counsellor is someone who is compassionate, understanding, patient, and able to establish a supportive and trusting relationship with his or her clients and help them achieve their set goals

1.2 Goals of counselling

The goals of counselling is to assist individuals improve their mental health wellbeing, address and overcome personal challenges, and achieve their goals.

Some common goals of counselling include:

- **Improved emotional regulation**: Counselling can help individuals learn to manage their emotions more effectively and develop coping strategies for dealing with difficult feelings such as anxiety, depression, and stress.
- Increased self-awareness: Counselling can help individuals gain a better understanding of their thoughts, feelings, and behaviours, which can lead to greater self-awareness and self-acceptance.
- **Improved relationships**: Counselling can help individuals improve their communication and interpersonal skills, which can lead to healthier and more fulfilling relationships with others.

- Problem-solving and decision-making: Counselling can help individuals develop effective problem-solving and decision-making skills, which can help them overcome challenges and achieve their goals.
- Behaviour change: Counselling can help individuals identify and change problematic behaviours, such as substance abuse or unhealthy relationship patterns.
- Improved mental health: Counselling can help individuals manage and treat such mental health conditions as depression, anxiety, and Post Traumatic Stress Disorder (PTSD).
- **Improved quality of life**: Counselling can help individuals develop a sense of purpose and direction, and improve their overall quality of life.

The specific goals of counselling will depend on the individual's unique needs and concerns, as well as the type of counselling they are receiving.

1.3 Counselling services

There are many different types of counselling services available to individuals, each with their own unique focus and approach. Here are some of the most common types of counselling.

- Individual counselling: This type of counselling involves one-on-one sessions with a trained Counsellor. It is typically focused on helping individuals explore and understand their feelings, thoughts, and behaviours, and develop strategies for coping with personal challenges.
- Couples counselling: Couples' counselling involves working with a trained Counsellor to address relationship issues and improve communication and intimacy in a romantic relationship.
- Family counselling: Family counselling is designed to help families improve communication and resolve conflicts. It can be particularly helpful during times of major life transitions or crises, such as the loss of a loved one or divorce.

- Group counselling: Group counselling involves meeting with a trained Counsellor and other individuals who are experiencing similar issues or challenges. It can be particularly helpful for individuals who feel isolated or are looking for support from others who understand what they are going through.
- Career counselling: Career counselling is focused on helping individuals explore career alternatives and develop a plan for attaining their professional goals.
- Substance abuse counselling: Substance abuse counselling is designed to help individuals overcome addiction and develop strategies for maintaining sobriety.
- Online counselling: Online counselling involves using video conferencing, messaging, or phone calls to meet with a trained Counsellor remotely. This type of counselling can be particularly helpful for individuals who live in remote areas or have mobility issues.

Retirement, pre-retirement or post-retirement counselling

Essentially, counselling services are designed to aid individuals improve their well-being and mental health, and develop the skills and resources they need to lead happy and fulfilling lives.

1.4 Confidentiality in Counselling: In the context of Counselling, confidentiality refers to the Counsellor's duty to protect whatever information the client shares during the session and not share it with third parties without the client's permission.

There are, however, some situations in which a Counsellor may be required to break confidentiality. These include:

- When there is a threat of harm to the client or someone else.
- When the Counsellor is required by law to report certain information, such as child abuse or neglect.

• When a Court orders the Counsellor to disclose information.

In these situations, Counsellors must balance their obligation to maintain confidentiality with their ethical and legal responsibilities to protect the client and others.

1.5 Issues that can be brought to UPCC

Having known who a Counsellor is, and what a counselling process entails, here are some of the issues that can be brought to the University's Counselling Centre and her outposts:

- Anti-social behaviour
- Adjusting to university (campus) life
- Self-esteem and body image concerns
- Stress and anxiety
- Depression and suicidal ideation
- Trauma
- Eating disorders
- Relationship concerns
- Family concerns
- Substance abuse
- Vices of abuse: physical, social, and emotional
- Learning disability

The above issues as well as other relevant information are presented in the subsequent sections of this Handbook.



DIRECTOR WITH COUNSELLORS OF UNIPORT COUNSELLING CENTRE (UPCC)

2. ANTI-SOCIAL BEHAVIOUR

2.1 Anti-social behaviour

Anti-social behaviours, simply are those behaviours or mannerisms –not acceptable in the society. They are strictly against the norms and values of the society. The following among others are anti-social behaviours which every individual who desires excellence must frown at:

- Examination malpractice
- Prostitution
- Cultism
- Rape
- Substance abuse/addiction
- Robbery
- Murder
- Kidnapping

2.2 Consequences of anti-social behaviour

- Loss of man power
- Wastage of economic, political, social and human resources
- Destruction of family, institution and national image
- It can also result to social menace such as vandalism, abuses in different forms, abortion, etc.
- Suicide, murder, etc.

If you have any issues related to anti-social behaviour, see a professional Counsellor at the University Counselling Centre or any of the outstations for counselling and get help.

3. ADJUSTING TO UNIVERSITY (CAMPUS) LIFE

3.1 University (Campus) life

The word university can simply be defined as a 'citadel of higher learning'. It is a place where people are endowed with higher level of education. Every academic session in the university brings in fresh students with different culture, ideology, tribe, religion and family background. While to some, adjustment to the new system is very easy, and to significant others, it is a tussle. In view of this, the following tips might be helpful for people who are struggling for adjustment within the campus environment.

3.2 Know the reason(s) why you are in the university

- Learn how, who, where to ask questions to clear confusions and doubts.
- Know that it is good to associate but being mindful of your associate is paramount.
- Learn to be focused.
- Be mindful of your directions and be safety conscious.
- Learn to be responsible.

The University has provision for **Academic Advisers** for students. Each student is assigned to an Academic Adviser by the Head of his or her Department. An Academic Adviser is a member of the academic staff and is to advise the student on academic issues as well as follow the student's progress and provide counselling to him or her. More information on this and other related matters are contained in the *University of Port Harcourt General Regulations and Statement of Academic Policies* booklet (commonly referred to as the *Blue Book*). During their registration, all fresh students are expected to collect their individual copies from the Faculty Officer of their respective Faculties. Students are required to go through the document, be conversant with and guided by the stipulated regulations and academic policies of the University.

3.3 Dress Code in the University of Port Harcourt

It is important to note that indecent modes of dressing are not acceptable in the university environment. Staff and students are therefore expected to dress decently on campus.

3.4 Sexual Harassment Policy Document of the University of Port Harcourt

The University of Port Harcourt also has a Sexual Harassment Policy Document that outlines the rules of engagement between lecturers, administrators, and students including visitors to the university. The policy document clearly defines what constitutes sexual harassment and sanctions to be taken against offenders.

Students and staff are advised to access this Policy Document and be acquainted with its content.

3.5 Some key offices/units/centres for students and staff well-being in the university

The university is a system for the training of students. To this extent, all components (units, departments, schools, faculties, directorates, centres, etc.), are important to ensuring the well-being of students, from the point of admission to graduation. It is therefore necessary to briefly highlight just a few of such essential places for the benefit of fresh students in particular, to assist them in adjusting to university (campus) life.

- Admissions Office: The Admissions Office is the gateway into the university. The office provides information regarding admission matters, and handles online and physical clearance processes. The Admissions Office is located in the New Convocation Arena, University Park (Abuja Campus).
- Information and Communication Technology Centre (ICTC): Relevant information relating to the university including procedure for registration, payment of charges, etc. can be found on the university's

website: *www.uniport.edu.ng*. In addition, the ICTC has a *Help Desk*, to assist students to resolve online issues. The ICTC is in the University Park (Abuja Campus).

• Health Services Department: The Health Centre is managed by the Health Services Department. The Health Centre is known as O. B. Lulu-Briggs Health Centre, UniPort. New students and staff are required to complete their medical examinations and necessary documentations to enable them to obtain their registration card (for the students, popularly referred to as 'Green Card'), for subsequent visit(s), whenever they have health issues.

In the event of ill-health, it is advisable that you **do not come late** to the Health Centre. In other words, do not wait until you are too ill before you report at the Health Centre. This is applicable to both staff and students. The O. B. Lulu-Briggs Health Centre is in the University Park (Abuja Campus).

- College/Faculty Offices: For new students, Faculty registration (physical and online), are concluded at the College/Faculty Offices, with the acceptance of students' Files by the respective College Secretary/Faculty Officer. These offices are in the various College/Faculty buildings in the University Park (Abuja Campus).
- Student Affairs Department: This is the student's home away from home. The Department is in charge of hostel accommodation, other matters relating to students' welfare, and National Youth Service Corps (NYSC) mobilisation. The office is located in the New Convocation Arena, University Park (Abuja Campus).
- Academic Department: This is the basic academic unit in the university. Each Department is responsible for the academic programme/course of study and all academic matters of her students. Departmental Brochure/Handbook is available in the Department to guide students in

their respective academic programme/course of study. Most of the Departments have their offices within their respective Faculty buildings, in the University Park (Abuja Campus).

• Youth Friendly Centre (YFC): The Youth Friendly Centre (YFC) of the University of Port Harcourt enlightens the students on HIV/AIDS (Human Immunodeficiency Virus, Acquired Immunodeficiency Syndrome), in a friendly setting, to equip them with information necessary in the prevention of ill-health, including the spread of HIV, other Sexually Transmitted Infections (STIs), and related issues on campus.

To actualise its goals, the Youth Friendly Centre operates three programme components, which are: (a) Education and Communication; (b) Health and Life Style, and (c) Recreation.

The Youth Friendly Centre (YFC) is in the Delta Park of the University.

• UniPort Counselling Centre (UPCC): The UPCC offers counselling services to the university community. If you are finding it difficult adjusting to university (campus) life and other life's challenges, see a professional Counsellor at the UPCC or any of its outstations. We are available to offer counselling services to you.

The UniPort Counselling Centre is strategically located (by Ofirima Roundabout) in the University Park (Abuja Campus), which is the permanent site of the University. It is in proximity to the old Convocation Arena, and opposite the University Stadium. The outstations are at: Student Affairs Department (New Convocation Arena); School of Basic Studies, and Faculty of Basic Medical Sciences, all in the University Park (Abuja Campus).

3.6 Study hints

The following are some study hints that could be beneficial to students:

- (i) Be mindful of who is your friend or reading partner.
- (ii) Make sure you do not miss classes.
- (iii) Listen to the lectures with rapt attention.
- (iv) If possible, record the lectures
- (v) Jot down essential points
- (vi) Do well to listen to the taped lectures and go through the jotted notes at your convenient time.
- (vii) Make a time-table for reading; leisure and siesta should be reflected.
- (viii) Observe good feeding habit.
- (ix) Group reading should be encouraged and must be stopped when it generates noise.
- (x) After the day's studies, as you lie on your bed, try to think about and remember all what you have read in each subject/course before you sleep. If you cannot, revisit the notes immediately or early in the morning.

Remember that you can always talk to a Counsellor at the UPCC or any of the outstations, if you are having issues adjusting to campus life or with your studies or career. We care.

4. STRESS

4.1 Stress

Stress is a normal body response to daily pressure but it can be described as unhealthy when it disorganises one's daily activities. Goldstein (2010) defined stress as the body's non-specific reaction to situations. This means that individuals response to stress in unique ways. With this, he attributed two divides or stressors, that is, the internal and external stressors. The internal sources are those individual's reactions one imposes on self by aggression, ambition or competition.

The external sources of stress are those stressors that result from an individual's external environment such as friends and relatives. These stressors can manifest physically, mentally or emotionally. If this is not addressed, it may result to a state of moodiness or an extended bad feelings of depression. Today, the level of stress among youths and students especially has become unbearable. Both positive and negative experiences can lead to stress.

> Positive stress

Positive or good stress can motivate people to do their best and perform well compared to when they were under no pressure. The characteristics of positive stress include:

- It provides excitement
- It improves performance
- It has coping ability

> Negative stress

Negative or bad stress is the opposite of the positive stress. This is experienced when a person goes through stress continuously without relief, it ceases to be positive and degenerates to distress. When it lasts for a longer time, it could lead to depression and panic attacks.

- It can cause anxiety
- It makes an individual feel unpleasant
- It decreases endurance and performance

4.2 Types of stress

- Eustress: Is the helpful kind of stress. It supplies us with extra energy when we engage in physical challenges or activities such as sports, working in the farm, writing examinations, etc.
- Distress: Is usually the outcome of a shattered event. It is harmful and painful in nature. Most of the major symptoms of stress such as headaches, lack of concentration, lack of appetite, depression and poor memory functioning are the consequences of distress.

4.3 Stress indicators and symptoms

Physical symptoms

- Change in appetite
- Back pain
- Chest pain (Difficulty in breathing)
- Dizziness
- High blood pressure
- Panic attacks
- Blurred eyesight or sore eyes
- Sleep difficulties
- Fatigue
- Headaches and muscle pains
- Indigestion or heartburn

Sehavioural symptoms

- Arguing and quarrelling
- Lack of needed energy
- Avoiding tasks and responsibilities
- Being late to work
- Crying easily
- Withdrawing from people

* Emotional symptoms

- Anger
- Anxiety
- Depression
- Sad mood
- Loneliness
- Being easily upset

When these stress indicators are not attended to, they serve as distraction that interfere with one's behaviour. This calls for prompt management to minimize the stressful condition and avoid depression and suicide ideation among students.

4.4 Stress management tips

- Adequate feeding: Individuals are expected to eat a well-balanced diet.
- Regular exercise: Daily moderate physical exercise is recommended to make one active
- Sleep: Sleep is a natural antidote to stress. As an individual, you need to sleep well for about six to nine hours every night.
- Relaxation: Individuals are advised to take adequate relaxation every day.
- Self-talk: Statement people make to themselves have been found to be very efficacious in helping them gain recovery from their stress.
 You do not need to struggle in silence, see a professional Counsellor at the

UPCC or any of its outstation, and get help to recover from distress.

5. ANXIETY

5.1 Anxiety

Frustration has become the order of the day due to daily challenges of life. This has been reported to be incredibly high among the youths to the extent that their mental health stands a risk. This compilation therefore considers some mental health issues such as anxiety, stress, depression and suicide ideation. Although the prevalence of these behaviours is overlooked most young adults especially students who are being confronted with these behaviours get frustrated about life. However, a few seek for help or medication. Therefore, a look at these behaviours would save many of these students and also enhance several educational institutions' management of mental health disorders among students.

Anxiety is an emotion characterized by feelings of worry or anticipated danger, tension and fear. This condition of sadness or happiness is characterised by feelings that some unfavourable happenings are about to occur (Nwankwo, 2018). This concept therefore is an integral part of the lives and daily activities of every human being, and should be expected in all productive activities. However, when it interferes with behaviour or performance of a person, it becomes a disorder. Students with anxiety disorder might see their lecturers as threats. Based on this, they become worried unnecessarily as they may feel inadequate to attend lectures, carry out their assignments and prepare for examinations.

5.2 Signs and symptoms of anxiety disorder

- Feeling inadequate and anxious under challenging situations.
- Feeling guilty and unhappy about one's behaviour.
- Blinking of the eyes too frequently
- Stuttering and talking fast
- Clamping of hands
- Profuse sweating
- Frequent urination

5.3 Types of anxiety disorder

- Generalised anxiety disorder: Refers to feelings of excessive worry about a number of events like, muscle tension, trouble in concentrating and sleep disturbances.
- **Compulsive disorder**: Unwanted recurrent thought and repetitive behaviours.
- Post-traumatic stress disorder: Experiencing of extreme anxiety and distress symptoms due to exposure to a traumatic event. For example, hyper vigilance, flashback and intrusive memories of the trauma.
- Social anxiety disorder: Feeling of extreme anxiety in social situations.
 People with this type of condition often try to limit social setting.

5.4 Management techniques of anxiety disorder

A particular type of anxiety or combination of some types can result in suicide ideation if not checked. Therefore, there is need for prompt management to prevent unfortunate situations that could lead to suicide ideation. This management demands time and careful planning. Two major treatments are psychotherapy and medications.

- **Psychotherapy**: This involves a therapist using psychological counselling to reduce anxiety symptoms. See a professional Counsellor at the University Counselling Centre (UPCC) or any of its outstations. Help is here.
- **Medications**: Medications depend on type of anxiety disorder. The doctors' attention and prescription are utmost in medications.
- Other tips include:
- Learning about anxiety
- Relation techniques

- Correct breathing techniques
- Dietary adjustments
- Mindfulness
- Self-talk/Affirmations

You are not alone, see a professional Counsellor at the UPCC or any of its outstations for counselling services.

6. DEPRESSION

6.1 Depression

Depression is a prevalent mental disorder with a longstanding root in history. Etymologically, the term depression originally emanates from the Latin word 'deprimere' which implies "to press down". This indicates a feeling of being down, sad or low in spirit. This disorder has an adverse effect on anxiety symptoms as well as how you feel, think, and behave.

6.2 Symptoms of depression

Among the common symptoms are:

- Becoming easily irritable or discouraged
- Feeling extremely sad, hopeless or worried
- Not finding delight in things that formerly brought joy
- Trouble sleeping or sleeping a lot
- Having thought of self-harm or suicide
- Reclusiveness

In addition, Wisner, Parry and Piontek, (2002) stated other symptoms such as:

- Despondency
- Tearfulness
- Emotional liability
- Feelings of guilt
- Loss of appetite
- Sleep disturbance
- Feelings of inadequacy
- Poor concentration and memory loss
- Fatigue
- Irritability

- Non-response to infant need
- Poor attachment

6.3 Categories of depression

Depression is of three types namely: simple depression, acute depression and depressive stupor (Nwankwo, 2018).

- Simple depression: This is the mildest form of depression. It sets in by normal sadness and gradually graduates further due to constant preoccupation with those unpleasant occurrences. This finally leads to loss of enthusiasm for life and general slowdown of mental and physical activities. An individual in this state does not show loss of consciousness.
- Acute depression: This is a more severe state of depression than the simple depression. It leaves the individual with feelings of hopelessness and worthlessness. There is small degree of loss of consciousness of the environment. In this state, death is considered as an option.
- Depressive stupor: This is the most intense of the three types. It leaves a victim in a total unconsciousness of the present environment. The symptoms seen in the simple and acute types are seen here in much higher degree. It can result to total mental condition that leads to loss of control over proper elimination of wastes. It can make individuals especially young under graduates go into drug use and suicide ideation.

6.4 Causes of depression

There are many possible causes of depression which could be traced to complex interactions between social, psychological and biological factors. These could be:

- Stressful life situations, such as a loved one's death, divorce, trauma, loneliness, and lack of support.
- Medical conditions such as chronic pains, diabetes, etc.

6.5 How is depression treated?

Medications and Psychotherapy are most common treatment for depression.

• Medications

The Psychiatrists can prescribe medications to relieve the symptoms identified on a victim especially in cases of severe depression. However, there is need to be aware of the major side effects with the help of a Doctor or Pharmacist.

Notably, it is always risky for a patient to abruptly stop prescribed medications without the advice of a Doctor.

• Psychotherapy

This method or type of treatment is a general term used by a therapist or other mental health professionals to talk about one's condition and other related issues. Using this approach, the therapist assists the client to recognise and change negative feelings, ideas, and actions. This psychotherapy is also referred to as talk therapy or psychological therapy. Its different forms especially the cognitive behavioural therapy can be effective for depression.

Psychotherapy can help victims to

- Adjust to a difficult condition
- Identify their irrational beliefs and behaviours and try to replace them with rational ones.
- Develop positive interactions with others
- Devise better ways to tackle problem
- Find out what causes their depression and change to a better behaviour
- Regain their sense of satisfaction and self-control
- Be able to set goals that are realistic
- Develop the ability to accept their distress behaviours

• Other intervention strategies or home remedy

There are other intervention strategies or home remedy that can help improve depressive symptoms. They are as follows:

- Getting regular exercise
- Getting good sleep
- Having a healthy diet
- Spending time with people you care about
- Avoiding alcohol

In all, it is advised that you see a professional Counsellor. Help is at the University of Port Harcourt Counselling Centre (UPCC) and its outstations.

7. SUICIDAL IDEATION

7.1 Suicidal ideation

Suicide ideation is when a person thinks about killing himself or herself. It is also referred to as suicidal ideation. This concept used to be seen as an uncommon or distant act. In recent times, it is unfortunate to say that suicidal thought among the youths and young people is no longer a distant experience but very common and close. In some cases, this has resulted to suicide. According to Klonsky et al. (2016), suicide ideation is defined as thinking about, considering or planning suicide. They further noted that the first step towards ideation is pain, regardless of the source of pain. The American Psychological Association (APA) Dictionary defines suicidal ideation to be "a thought or a preoccupation with killing oneself." Suicidal thoughts or ideas, which is a synonymous with suicide ideation, refers to a variety of desires, reflections, and obsessions with suicide and death. With this, there is no generally acceptable definition for this 'phrase or words' rather it refers to an individual's preoccupation with death.

In some definitions, the scholars include specific plans toward committing suicide to mean the suicide ideation, others described it to mean mere thoughts or desires without any tangible effort to carry out the action.

7.2 Categories of suicide ideation

The categories of suicide ideation are:

- Passive suicide ideation: This category deals with the ideation of one which is limited to mere wish to die but could not make further plan to kill or terminate one's life.
- Active suicide ideation: This type is marked with a level of indifference to any accidental death. In this situation, the individual does not bother to take steps to terminate his life nor take steps to protect himself from death. This

act can simply be explained to mean extension of thoughts of suicide which include different ways to carry out the act of killing oneself. This is what Mukherjee & Kumar (2017) described as forming a plan to die which goes beyond mere wishes to die.

7.3 Symptoms of suicide ideation

In order to identify a person with suicidal thought, the following symptoms should be considered. They are as follows:

- Withdrawal from friends and family
- Frequent usage of alcohol or drugs
- Involvement in taking dangerous risks
- Purchasing a gun
- Researching ways to die or being attracted to media about suicide
- Making a plan to kill one's self

With a knowledge of what suicide ideation is, when you see someone who appears to be at immediate risk of self-harm, suicide, or hurting someone else;

- Ask, are you thinking of ending your life as an option?
- Pay attention to the person without passing judgment.
- Speak with a professional crisis Counsellor.
- Remain with the person until a professional arrives.
- Take away any weapons, prescription drugs, or other potentially dangerous items.

7.4 Intervention strategies for management of suicide ideation

Suicide ideation in patients have varying levels and so require different types of interventions from primary care providers. They include:

- Evidence-based screening
- Structured clinical interviews

The University of Port Harcourt Counselling Centre (UPCC) is our strength in times of distress. See a professional Counsellor at the Centre or any of its outstations, if you are feeling like or thinking/having/entertaining thoughts of taking your life.

8. EATING DISORDERS

8.1 Eating disorder

Eating disorder is characterised by severe and persistent deviation in eating behaviours, associated with distressing thoughts and emotions. Eating disorder is evident by:

- Repeated episodes of binge eating accompanied by a feeling of lack of control.
- Recurrent episodes of induced purging or vomiting after meals.
- Not eating at all in a bid to prevent weight gain, sometimes despite having a typical weight, appropriate to one's height and age.

People of all ages are susceptible to this dangerous mental health condition. Eating disorders involve an unhealthy relationship with food and often involves excessive concern about body weight or shape.

8.2 Types of eating disorder

There are several types of eating disorders, but the most common ones are anorexia nervosa, bulimia nervosa, and binge-eating disorder.

- Anorexia nervosa: When a person is affected by this disorder, he/she attempts to maintain a low body weight by limiting their food intake because they have a severe fear of gaining weight. They could also try to lose weight by over exercising or by using other strategies.
- Bulimia nervosa: With bulimia nervosa, an individual consumes large quantities of food and then attempts to eliminate the extra calories by purging, laxatives or diuretics, or excessive exercise.
- Binge-eating disorder: A person with binge-eating disorder feels out of control of their binge episodes; such a person consumes excessive portions of food very quickly.

It is important to note that eating disorders are not merely about food, weight, or appearance. They are complex mental health conditions that can be a result of a number of factors.

8.3 Causes of eating disorder

Eating disorders are not caused by a single factor. Instead, they usually arise from a confluence of psychological, environmental, and genetic factors.

Some of the possible factors that may contribute to the development of an eating disorder include:

- **Genetics**: Research has suggested that certain genetic factors may predispose certain people to the development of eating disorders.
- Environmental factors: Environmental factors such as societal pressure to be thin, cultural attitudes towards body size and shape, and exposure to media images that promote unrealistic body ideals may also play a part in the development of eating disorders, as individuals may feel like they need to meet these standards to be accepted.
- **Psychological factors**: People with eating disorders often struggle with negative self-image, low self-esteem, anxiety, depression, and other emotional issues. Additionally, some individuals may use food and eating behaviours to coping mechanism for emotional difficulties or to gain a feeling of control.
- Life experiences: Traumatic or stressful life experiences, such as physical or sexual abuse, bullying, or family dysfunction, may also be attributed on the way to the development of an eating disorder.
- **Perfectionism**: People who struggle with perfectionism may be more likely to develop an eating disorder, as they may have unrealistic expectations for themselves and their bodies.

Each individual is unique, and what may trigger eating disorders vary from person to person. Seeking the help of a professional Counsellor can help address and manage causes or triggers in a healthy way. Eating disorders may be extremely dangerous and, if left untreated, can result in long-term health issues. With the right treatment and support, however, recovery is possible.

8.4 Seek help from a professional Counsellor

It is imperative to get professional counselling if you or someone you know is dealing with an eating disorder. Counsellors play an important role in helping with eating disorders. Here are some of the ways in which we can help:

- Providing emotional support: Counsellors can provide a safe and nonjudgmental space to talk about feelings and struggles with eating disorder.
 We offer emotional support and help to develop coping strategies to manage difficult emotions.
- **Identifying triggers**: Counsellors can help you identify the underlying triggers that contribute to your eating disorder. We work with clients to develop strategies to manage these triggers in a healthy way.
- **Developing a treatment plan**: Counsellors work with their clients to create a personalised treatment program that takes consideration of their particular needs and goals. This may include individual therapy, group therapy, family therapy, and/or medical interventions.
- **Providing education**: Counsellors can educate clients about the nature of eating disorders and help them understand how their thoughts and behaviours are contributing to their disorder. This can help clients develop a greater sense of self-awareness and a better understanding of this disorder.
- Collaborating with other professionals: Counsellors can work collaboratively with other healthcare professionals, such as doctors, nutritionists, and psychiatrists, to provide a comprehensive approach to treatment.

Ultimately, the goal of counselling for individuals with eating disorders is to help them develop a healthier relationship with food and their body, while also dealing with any underlying emotional problems that could be fuelling their disorder.

See a professional Counsellor at the UniPort Counselling Centre or any of the outstations.

9. TRAUMA

9.1 Trauma

Trauma is a persistent problem. It happens when a person is exposed to an extremely upsetting or potentially fatal event or sequence of events that have a long-lasting negative impact on their functioning and mental, emotional, physical, social, and/or spiritual well-being.

9.2 Types of trauma

There are three main types of trauma, namely:

- Acute trauma this results from a single incident.
- Chronic trauma is the outcome of recurrent, protracted events like abuse or domestic violence.
- Complex trauma is the result of being exposed to a variety of traumatic situations, most of which are usually intense and interpersonal in nature.

9.3 Causes of trauma

Intrusive memories- This is a recurring, unwelcome, painful recollections of the traumatic incident. Flashbacks, disturbing dreams or nightmares about the traumatic incident, emotional distress, or physically reacting to whatever reminds you of the terrible event are all examples of remembering the traumatic event as if it were occurring again.

Other causes include: bullying, community violence, disaster, medical illness, intimate/partner's incompatibility, childbirth and mortality, molestation, accidents and rape, kidnap, armed-robbery, query, suspension/stoppage of salary.

9.4 Effects of trauma

- Hyper-arousal: This is a situation where one is feeling very anxious, on edge and unable to relax.
- Sleeping problems: Having difficulties to fall or stay asleep.

- Vulnerable to developing mental health problems.
- Causes Post-Traumatic Stress Disorder (PTSD).
- Fatigue, confusion, feelings of sadness, nervousness, agitation, numbness, dissociation, physical arousal and decreased effect.

9.5 Recovery from trauma

While it is not always simple, recovery from trauma is achievable. Some of the strategies are:

- Cognitive Behaviour Therapy (CBT)
- Cognitive Processing Therapy (CPT)
- Prolonged Exposed (PE) Therapy

Visit the University of Port Harcourt Counselling Centre or any of its outstations, and see a Counsellor for counselling services/follow up.

10. SELF-ESTEEM

10.1 Self -esteem

To a lay man self-esteem is about appreciating and respecting who you are. Selfesteem is "the degree to which the qualities and characteristics contained in one's self-concept are perceived to be positive," according to the American Psychological Association (APA).

It is predicated on your self-perception and beliefs, which might be difficult to alter. How you feel about yourself as a person might have an impact on your selfesteem.

10.2 Types of self-esteem

We have four kinds of self-esteem:

- ✤ High self-esteem
- ✤ Low self-esteem
- ✤ Worthiness based self-esteem
- Competence based self-esteem

We will focus more on low and high self-esteem, which have negative or positive influences on an individual.

✤ High self-esteem

High self-esteem means that the individual believes in himself and knows that he is of a great impart to the world he recognises that he might be having some few weakness but also have a lots of strength and zeal to shape it up. High self-esteem generally means holding yourself in positive regard. This doesn't mean you have everything about yourself.

(i) Characteristics of person's with high self-esteem

- Rational
- Realistic
- Flexible
- Creative
- Independent
- Capable of handling change
- Willing to admit and correct mistakes
- Cooperative
- Expressive
- Seek challenges
- More honest in communication
- Better equipped to cope with situations
- Quicker to recover in situations
- Solves problems
- Takes risks
- Tolerates frustration well etc.

(ii) Benefits of high self-esteem

- ➢ Greater self-respect and easily influenced.
- Increased capacity to accomplish objectives.
- Eagerness to try new things and not easily discouraged.
- Improved sense of worth.

Low self-esteem

A person with low self-esteem is one who is insecure about their identity and abilities. They frequently feel inadequate, unloved. Self-worth refers to how we

think about ourselves and the value we place on ourselves, in a situation where we often think badly about ourselves and judge ourselves negatively it is regarded as low self-esteem.

(i) Causes of low self-esteem

- Unhappiness-when parents and other significant persons extremely criticize the person.
- Low academic achievement in school leading to insecurity.
- Tense life situations such as relational break down money problems.
- Guilt associated with religion.
- Bullying with no parent protection.
- Sexual, physical or emotional abuse.

(ii) Characteristics of persons with low self-esteem

- Poor risk taker
- Afraid of competition or challenges
- Non-Assertive (not self-assured, not confident)
- Lacks initiative
- Shyness
- Lacks self-acceptance
- Blames others for their short coming
- Low aspiration
- Indifferent to needs of others
- Indecisive

(iii) Tips to improve your self-esteem

- You should avoid those that are negative and pessimistic and surround oneself with pleasant and supporting people.

- It is important to have a clear vision of your life goals, establish objectives, and strive towards achieving them.
- Individuals who have poor self-esteem often try to make themselves feel more acceptable by trying to please everyone but themselves. However, this strategy frequently backfires since their attention is diverted from themselves to people around them.
- Give yourself some challenges and strive to achieve such challenges.
- Learn to be assertive.
- Build positive relationship with others around your set boundaries in your relationships.
- Stop comparing yourself to others. Forgive yourself for your past thoughts.
- Celebrate your wins when there is need.

It is important that you seek help in time of need from professional Counsellors in the University Counselling Centre (UPCC) or any of its outstations.

11. BODY IMAGE CONCERNS

Body image covers both your internalised conception of your physical appearance and your physical image as you see in the mirror. Body image and self-esteem have a direct impact on a person's feelings, thought patterns and behaviour. Once an individual has poor body image (that is, does not like any part of the person's body) that person would find it difficult to feel good about his or her whole self, or to have high self-esteem.

Body image is therefore a multifaceted issue that involves how someone perceives his or her own looks as well as associated ideas and feelings about him or her as a person. A number of factors, like media, social environments, families, and peer groups, define these perceptions.

If you have body image concerns see a professional Counsellor for counselling services at the University of Port Harcourt Counselling Centre or any of its outstations.

12. RELATIONSHIP CONCERNS

12.1 Relationship concerns

Being loved and cared for is one of the topmost needs of human beings. Individuals desire to find people who would care, understand and listen to them. Having a loving and respectful relationship makes us happy, healthy and can even prolong our lives. A healthy relationship consists of mutual respect, trust, honesty, support, fairness and equality.

One of the keys to fostering such loving relationships is conversation, which could be with family, friends and partners. Creating safe spaces where individuals can freely express themselves without being judged is of utmost importance in fostering relationships. We experience immense happiness, significance, a sense of completion, and a feeling of bonding when we maintain romantic and platonic connections with our dear ones.

However, there are times when struggles surface in relationships, this may range from arguments to intimacy problems and financial troubles. It is important to note that, in a relationship, some disagreement is acceptable and may even strengthen the connection. Relationship problems could interfere with our everyday life when they become serious or frequent.

The term 'relationship' is defined as "the way in which two people, groups or countries behave towards each other or deal with each other" (Oxford learner's dictionary).

APA dictionary of Psychology defines 'relationship' as "a continuing and often committed association between two or more people as in a family, friendship, marriage, partnership and other interpersonal link in which the participants have some degree of influence on each other's thoughts, feelings and actions".

12.2 Symptoms of relationship challenge

Relationship concerns differs for individuals and reactions to relational issues also vary widely from person to person. Some of the most common symptoms of relationship challenges include:

- Excessive anxiety or worry: the bodily symptoms of anxiety include a sense of dread and worry, heart palpitations, uneasiness, panic attacks, and dry mouth.
- Sadness or depression: Given the intensity of the issues, one is likely to experience a depressed mood. This is characterized by weariness, restlessness, altered appetite, negative thoughts, and loss of interest in routine tasks.
- **High stress level:** One may feel overburdened or suffer from physical signs of stress, such as headaches, tense muscles, trouble sleeping, and stomach issues.
- **Conflict with loved ones**: relationship problems might lead to further problems with friends, family, or loved ones.
- Low self-esteem: Relationship instability can result in low self-esteem and feelings of worthlessness.

12.3 Issues that can cause relationship concerns

Relationship concerns vary and are profoundly personal, among the most prevalent types of relationship issues include but are not limited to the following:

- **Communication issues**: This might happen if one partner or individual doesn't feel understood or heard. Most relationship issues stem from poor communication. For example, you cannot clearly communicate while you are scrolling through your iPhone, or have your eyes glued on Netflix or watching a football match/*Zee World* on television.
- **Finance**: money is one of the most common issues that cause conflict in a relationship. This could be as a result of having different financial

resources, different views about the importance of money, different spending habits and these are capable of causing tension in a family.

- **Conflict**: this often is a result of differing perspectives. Long and Young (2007) state that due to differences in values, dreams, desires and perceptions, conflict is bound to arise between individuals. Conflict can take many different forms including less serious disagreements, moderate disputes to more strongly heated debates. When someone has a strong need or want and the other person refuses to fulfil it, it can lead to resentment.
- **Traumatic past experiences:** family upbringing or past relationship can impact the present relationship of an individual significantly. Surviving a toxic relationship, childhood conflicts, broken families often leave mental scars that could lead to decreased emotional and physical intimacy, helplessness, arguments, feelings of frustration and anger, making things go bitter in an individual's present relationship.

See a professional Counsellor at the University of Port Harcourt Counselling Centre or any of its outstations if you have relationship concerns.

13. FAMILY CONFLICT

13.1 Family conflict

Family members who hold divergent opinions or ideas may come into conflict. Conflict can also arise when individuals misinterpret one another and jump into incorrect conclusions. Conflicts that are not settled amicably might give rise to disputes and animosity.

It is inevitable for people to periodically disagree with one another and for conflicts to arise within families. Nevertheless, relationships may be harmed by conflict and become unpleasant. This is because feelings that are not properly managed make people intentionally hurt, aggressive and violent.

Positive communication may lessen tension and facilitate the peaceful resolution of family issues. This often means that everyone is open to with a compromise or agrees to disagree.

Strong feelings or power imbalances in relationships can occasionally be difficult to work through and are best handled in a counselling setting.

A conflict is a disagreement among people. It could be verbal or physical or both, between friends, siblings and even husband and wife as well as family members. A family conflict is a struggle or disagreement over issues among two or more family members

13.2 Causes of family conflict

Lack of communication

Lack of open communication is one of the most typical things that sparks family disputes. Ineffective communication makes it difficult for family members to ensure their needs are met limits are upheld. A person may come to believe that their wants and wishes are not worthy of being shared if there is a lack of communication. Family members could therefore find themselves in a vicious cycle where old communication issues give rise to new ones.

Family responsibilities

Family conflicts are frequently caused by expected responsibilities. Misunderstandings may arise from the way family members divide household chores and other responsibilities. For instance, there might be arguments regarding who is supposed to take care of children or elderly family members. Although these are often small conflicts, they may last for a long time if left unresolved.

> Money

Disagreements related to financial issues can have a severely destructive impact on all kinds of relationships, including those between romantic partners and family members. Spouses and siblings often argue over money management. And the situation may get even more difficult if there are any inheritance issues in the family.

> Variations in values

This is one of the most frequent reasons why romantic couples, as well as parents and their children have issues. People may hold different opinions regarding politics, morals, culture, etc. There is often a greater risk of this as children shift into developmental stages, where strengthening their independence and identity take centre stage. As a result, partners or family members may lose the sense of unity, and the whole family dynamics may shift in a negative direction.

Blended families

When two families start to live together, they enter a risky area because the more people are involved, the more likely things may go wrong. Given that even people who have shared the same roof for years may have serious conflicts, it is no surprise that the situation might get more complicated when introducing new people – each with their unique needs, views, and habits. This can be further complicated if the children have multiple households where different expectations and rules are held.

13.3 Resolving family conflict

Regardless of the reason for a specific conflict, it is critical to understand how to stop it from getting worse and reduce the likelihood that it will happen again. Below are some useful tips:

> Understand the things you can and cannot influence

As much as you might try, you have no power over other people's actions. You do, however, have power over your reaction.

Just think carefully about your past conflicts, your response, and the results. If the outcomes fell short of your expectations, consider if your strategy appropriately conveyed your intended need or request while upholding your dignity and the dignity of the relationship. If not, attempt a new approach the next time, and maybe the outcome will be more favourable.

By altering your response, you become less predictable and more difficult to influence or provoke into confrontation. Assume you have communicated as well as possible, yet your message has not been well received. In that instance, there may be a need to rethink the boundaries and expectations of that relationship.

Allow anger to subside

To have a sensible and constructive talk, it is best to wait until things have calmed down before attempting to resolve a problem. When our emotions are high, the functioning part of our brains turns off, and impedes reasonable discussion with effective solutions. Try to speak in a calm voice and put your emotions aside. If you attempt to settle a problem while the other party is furious and lashing out, such attempts may fail or even worsen the situation further. Recall that finding a healthy mutually beneficial resolution is the main aim here, not winning an argument.

> Try to understand other family members' perspectives

It is vital to allow other family members to voice their opinions without interference. And you ought to ask for a chance to follow suit as well.

Actively listen to others, make an effort to see things from their point of view, and then consider what you may do differently to assist settle the conflict. Fairness and insightful understanding can be attained by listening to and empathising with people. It's not about giving in or yielding to pressure from other people.

Recognise the effects on the entire family

It is easy to become enmeshed in an issue without noticing the extent to which it is impacting others around you. For instance, even if parents attempt to disguise their tension and mood swings, kids can often pick up on them when they quarrel. On the other hand, family members are more likely to be receptive to compromise when they understand the harm their issue is causing to the rest of the family.

➢ In place of "you," use "I"

In the process of trying to settle a dispute, "you"-statements may sound like accusations, triggering a defensive reaction and makes it harder to connect. Instead, make "I" statements and discuss your feelings. You will be less likely to trigger other people's defences while highlighting your personal perspective, your emotions, and the critical issues you need to work through.

> Acknowledge that certain matters are not worth arguing about

Not all problems are worth arguing or fighting over. For instance, think about whether it would be worth it to argue with your spouse or children about a minor issue that irritated you, like forgetting to do the dishes.

Bear in mind that nobody is above making mistakes, accidents may occur, people could be forgetful and not all that you may encounter is done to deliberately hurt you. Nevertheless, this does not imply that you have to put up with harmful or abusive conduct. Furthermore, if you frequently restrain yourself out of fear of upsetting other family members, you have every right to express your concerns and worries.

> Endeavour to reach out instead of withdrawing

If you feel threatened by other family members, you could withdraw to protect yourself; though isolating one's self might extend the duration of the conflict and make it harder to resolve. Therefore, instead of withdrawing when you feel like it, try to be a stronger person and reach out. It may often pay off to take a chance and take the initiative, enabling you and other family members to talk things out and get back in touch.

> Work as a team

A healthy family is a solid unit, but consist of multiple people. Even couples without children may run into conflicts of interest. And the situation may not get any easier if people have children or live with other relatives.

To ensure mutual understanding and support, it's important to agree on common goals and everyone's individual contribution.

> If there is no improvement, minimise or end contact entirely

While reaching out is frequently more beneficial than withdrawing, there are some situations that are just not worth resolving, in which case you should reduce or avoid all contact. This is especially relevant in cases when abuse has already taken place and you anticipate it will happen again. The last resort, which most often is to end contact, is nevertheless something to think about if you or a loved one's health and wellbeing is in danger.

Even though family disputes can be extremely upsetting and worrisome, a healthy solution can be found. It is pertinent to wait for the situation to calm down and make an effort to take into account the views of other family members.

Get expert assistance and support

Families play a significant role in the lives of many individuals, and they believe that raising a family is something that is worthwhile. Thus, getting unbiased advice and professional assistance can help you and your family successfully overcome any challenges.

You don't have to struggle in silence, see a professional Counsellor at the UPCC or any of its outstation, and get help.

14. SUBSTANCE ABUSE

14.1 Substance abuse

This is the act of misuse or the act of using of drugs in an illegal way. Substance abuse is a serious issue that should not be taken lightly. It happens when you use prescription medicines, alcohol, and other legal and illicit substances.

Excessive use of psychoactive substances, such as illicit drugs, alcohol, or painkillers. It may result in emotional, social, and physical consequences.

Use of alcohol, prescription or over-the-counter medications, or illicit narcotics for purposes other than those for which they are intended, or in excess of recommended dosages.

Abuse of substances can result in issues with one's body, mind, and employment.

a. Types of substance abuse

The following are types of substance abuse:

- Prescription drug abuse: is using a drug for a purpose other than the one for which the doctor recommended it. This is the use of a prescription medicine in a way other than the intended purpose by the prescriber. It is also known as prescription medication abuse. This covers everything, from using a friend's prescription to other forms of improper use.
- □ **Illegal drug abuse**: Illegal drug abuse is not just about ingesting heroin, cocaine, or other illegal drugs. It also refers to possession, distribution, and the use of drugs that are unlawful/illegal.
- □ Alcohol abuse: in simple terms is drinking too much alcohol, especially habitually. Regularly drinking too much, which can disrupt your everyday life. If you find yourself frequently drinking too much at once or regularly during the week, you might be dealing with alcohol abuse. This kind of

addiction can harm your mental, physical, and emotional health and usually needs professional support to overcome.

- □ Solvent abuse: is the intentional inhaling of a volatile substance with the intention of becoming high or intoxicated. This can cause unconsciousness and death.
- □ 'Legal high' abuse: a legal is a drug that is taken because of it pleasant effects, but which is not illegal. An inebriating or mood-altering drug whose sale is not prohibited by law is considered to be legal high.

The continuous use of substances in the face of significant damage and unfavourable outcomes is known as substance use disorder.

14.3 Some examples of substances abuse

- Consuming or drinking more than intended or in larger quantities.
- Making unsuccessful attempts to reduce or regulate alcohol or drug consumption.
- Giving a significant amount of time to obtaining, using, or recuperating from substance abuse.
- A strong urge or a need to use drugs or alcohol
 - Marijuana abuse
 - Teen cough medicine abuse
 - Addiction recovery

14.4 Two major kinds of substance use disorders

- \Box Alcohol use disorder
- Drug use disorder

While some persons are hooked to one substance or the other, others misuse both.

14.5 Causes of substance abuse

Drug addiction has a higher prevalence in some families and may be associated with a genetic predisposition to addiction. Other causes of substance abuse include:

- Exposure to a highly addictive substance
- Early usage
- Lack of family participation
- Mental health disorders
- Peer pressure

Other kinds of substance abuse are:

- \Box Taking the medication at the wrong time or in the wrong dosage.
- □ Failing to take a dose of prescribed medication.
- □ Abruptly ceasing to use your medication.
- □ Using a medication for purposes different than those for which it was intended.
- □ Ingesting a medication that is not prescribed for you.

14.6 Effects of substance abuse

Drugs or alcohol abuse can cause dehydration-induced seizures and damages immune systems. In addition, it:

- increases the risk of infection and further problems.
- \Box causes psychotic behaviour.

□ causes major cardiovascular problems such as vein collapse and heart attacks.

14.7 What is emotional change?

This means lots of changes on how you think and feel about yourself and the world around you.

Depressive symptoms of loneliness, melancholy, and hopelessness can be brought on by or made worse by substance abuse.

Drugs have an impact on the limbic system, a region of the brain. This region is in charge of handling our feelings. Changes in this region brought on by drugs may be a factor in mood disorders, mood swings, emotional outbursts, and chronic irritability.

Adolescent drug use is associated with social risk factors such as peer pressure, popularity, relationships, deviant conduct, and gang affiliation.

See a professional Counsellor at the UPCC or any of its outstation, if you are struggling with substance abuse/addiction.

15. VICES OF ABUSE: PHYSICAL, SOCIAL AND EMOTIONAL

15.1 Vices of abuse: Social

Meaning of social abuse

Vice means the other way round, vice versa, opposite, in reverse.

Abuse means misuse, misapply, misemploy, etc.

A vice is a bad or undesirable character trait. A practice, behaviour or bad habit or generally considered immoral, sinful, criminal, rude, taboo, a fault, negative character traits, a bad or unhealthy habit.

Social vices are undesirable traits, unhealthy habits, and unfavourable actions that go against a society's moral standards and are frowned upon by its constituents. A vice is a behaviour that is immoral or unhealthy.

A social vice is an activity that deviates from the standards of morality. Prevalent vices among young people include prostitution, indecent dressing, robbery, cultism, pocket-picking, drug addiction, examination fraud, hooliganism, thuggery, gambling, smoking, premarital sexual activity, and rape. Two examples of social vices are: illicit sex and drug addiction.

Some of the common vices committed by some students in universities include drug misuse, cultism, cheating on exams, provocative dress, sexual harassment and **promiscuity**, targeted killings, armed robberies, destruction of electrical equipment, and cybercrimes.

* Causes of social vices

Peer pressure: One of the main causes of vices in society, particularly in educational settings, is peer pressure. Young people spend more time with friends at school and at home because, as impressionable as they are at this age, they are weak by nature and often swayed. In addition, there is a strong desire to learn,

have fun, and practise new skills, which leads to the smoking, drinking, prostitution, and commission of many other unforeseen vices. Certain secret societies gatherings, both on and off campus, are identifiable by their peculiar and distinctive attire. When non-members show up wearing their uniforms—which are typically black over black—they face abuse, humiliation, beatings, and even death. Members are frequently observed engaging in peculiar activities. Typically, they partake in gangster activities like as smoking marijuana (hemp), cocaine.

Lack of parental care: Parental carelessness or dysfunctional homes. The majority of teenagers that indulge in vices come from dysfunctional homes. A child may participate in social vices if they get inadequate parental care, supervision, or attention, among other things.

Social vices have an impact on both the individual and society at large. An individual's moral, intellectual, and physical well-being are adversely impacted. Instead of taking their academic work seriously, students spend their time engaging in these social vices; Time is wasted, which has a negative impact on academic achievement.

Fatal illnesses that can end one's life and career can be communicated. A pregnant woman will experience psychological and emotional trauma, which will cause her to lose concentration on her academics.

Consequences of social vices

- Failure as a result of poor academic performance
- Sexually transmitted diseases
- Deadly diseases
- Unwanted pregnancy
- Suspension or expulsion as a result of examination misconduct
- Having to drop out from school
- Being ignored by friends
- Emotional and psychological trauma

• Wastage of time

***** Solution to social vices

Social vices must be reined in. Qualified counsellors play a crucial role in providing assistance, guidance, and rehabilitation to young people who participate in risky behaviour.

Parent should be aware of their children's social circles, social standing, and schoolwork, they also need to be close to their children. Children must be taught moral principles.

Government should organise for that will teach the pupils about dangers connected to social vices.

High standards of discipline should be implemented in schools, and any child who poses a risk to others ought to be cautioned and given rehabilitation. To tackle the social threat that many students face, all hands must be on deck.

15.2 Physical abuse

Any purposeful physical contact that results in trauma, pain, or other physical suffering for a human or animal is considered physical abuse. For instance, physical aggression manifested by biting, kicking, shoving, choking, throwing things, and using weapons; moreover, improper use of medicines or physical restrictions. It is crucial to remember that, while it is not the only tool we use to abuse power and control, physical force is frequently not the initial one. The various categories of physical abuse are listed below.

• **Physical**: When most people hear the term "abuse," they picture this kind of mistreatment. It can involve physically detaining someone against their will or striking, slapping, kicking, strangling, or beating. Invading

someone's personal space, driving carelessly, and any other action that makes someone feel physically dangerous are examples of this as well.

- Sexual: Since it can involve both physical and nonphysical elements, we classify it separately even if it can take the form of physical abuse. Rape and other coerced sexual behaviours, as well as withholding or using sex as a weapon, may be involved. An abusive partner may also use sex as a tool to criticise or place a value on their partner, telling them that sex is their only attraction or that they are not good enough for other things. The sentiments around sex may be particularly used for dominance and control in a variety of ways because it can have so many emotional and cultural connotations.
- Verbal/Emotional: A survivor describes how her ex-husband used words as weapons, similar to glass shards, gradually taking away her life until almost nothing remained. "Since he didn't beat me, I didn't think I was being abused. Instead, I had started to accept his terrible lies about how unworthy, foolish, ugly, and undesirable I was, and that no one would ever want me". Other survivors have noted that although friends or family members may be able to see the tell-tale indications of physical abuse, it can be more difficult to identify and demonstrate the impact of verbal or emotional abuse. Additionally, emotional scars may take longer to heal.

People's experiences with stress, depression, and other difficult emotions are quite normal. Negative emotions, however, can be detrimental to a person's physical and mental health if they lack effective coping strategies. Substance or alcohol abusers could suffer much worse consequences for their health. People might feel less stressed and have more control over their lives if they learn constructive coping mechanisms for life's obstacles.

15.3 Emotional vices or abuse

This involves the use of feelings to manipulate, embarrass, disgrace, criticise, or in some other way control someone else. Mental or emotional abuse can happen in any relationship, including those with friends, family, and co-workers, despite being more prevalent in dating and marital partnerships. Generally speaking, a relationship is considered emotionally abusive when there is a pattern of verbal abuse and bullying that lowers the self-esteem and mental health of the other party. Emotional abuse has the fundamental purpose of controlling the victim by defaming, stifling, and isolating them. Because it may be so subtle and sneaky, it is one of the most difficult types of abuse to identify. However, it may also be overtly deceptive. Emotions have the power to either double your vision and reality or erode your sense of self-worth. Ultimately, you could feel confined. People who experience emotional abuse are frequently both too hurt to stay in the relationship and too terrified to abandon it so that the cycle doesn't repeat itself unless something is done.

15.4 Counselling approach

Counselling is a supportive method that emphasises a client's mental and emotional experiences as well as their feelings and thoughts. Addiction counselling and treatment assist patients in comprehending the root causes of their addiction, identifying relapse risk factors, and creating coping mechanisms for high-stress scenarios. Dialectical behavioural therapy, motivational interviewing, and cognitive behavioural therapy are examples of common approaches. Addressing fundamental causes of this condition is the primary goal of addiction counselling and therapy in order to prevent relapses from happening. Cognitive Behavioural Therapy (CBT), will be discussed in this article as a helpful strategy for treating emotional, psychological, and physical abuse. Cognitive behavioural therapy is a type of psychological therapy that has shown promise in treating a variety of issues, such as dispersion anxiety, disorder, control and drug use issues, marital issues, eating disorders, and mental disease. It focuses on how a person's sentiments in a certain scenario are determined by their beliefs and behaviours.

Its significant improve in function and quality of life. It is more successful, compared to other types of psychological therapy or psychiatric drugs.

CBT treatment usually involves efforts to change thinking patterns these strategies might include:

- Acknowledging one's own distortion including that are arising problems, and then revaluate them in light of relating the strategies.
- Using role-playing to prepare for possible troublesome interactions might help overcome concerns.
- Developing mindfulness and relaxation skills. Focuses on changing the automatic negative thought that can contribute to and aggravate our emotional difficulties.
- That helps people learn how to identify and change the destructive disturbing thought pattern that have a negative influence on their behaviour and emotions.
- CBT helps identify and confront incorrect thinking, replacing them with more objective and realistic ones. Others include aversion therapy.

You don't have to suffer in silence, see a professional Counsellor at the UPCC or any of its outstation, and get help in times of distress.

16. LEARNING DISABILITY

16.1 Learning disability

Learning disability refers to a neurological condition that limits the brain's ability to send, receive, and absorb information. A child with a learning disability may struggle to read, write, communicate, listen and understand.

Learning difficulty does not mean that a child is academically weak or lazy. Even if they start off slowly, some children can ultimately pick up the skills necessary to succeed in school and other activities.

Learning difficulties in children are sometimes caused by intellectual disability, visual, hearing, or movement impairments, or environmental, cultural, or economic disadvantages are not included in the category of learning disorders.

16.2 What is not a learning disability?

Some children may not be interested in specific subjects like sports or a new language, a certain skill, or an academic topic. These characteristics do not point to a learning impairment; rather, they show the child's interests.

16.3 Types of learning disabilities

The following conditions are categorised as learning impairments:

- **Dyslexia** (Sensory integration disorder): Reading impairment that is not the result of poor Intelligence Quotient (IQ).
- **Dyspraxia**: A neurodevelopmental condition that inhibits a person's ability to plan and coordinate motions, impacting both fine and gross motor abilities. A person with this disorder might find it difficult to write, fasten buttons, ride a bike, participate in sports, or walk.
- **Dyscalculia**: Mathematical or arithmetic ability impairment often demonstrated as difficulty with mathematics.
- **Dysgraphia:** Unable to write accurately due to a neurological or other condition.

16.4 Causes of learning disabilities

Learning difficulties are not caused by a single, identifiable factor. Nonetheless, a number of issues may contribute to a learning disability, including the following:

- Stress in infancy: A stressful occurrence following delivery, including a high temperature, a head injury, or inadequate nourishment. Additional factors that may contribute include physical trauma, inadequate uterine development, low birth weight, and early or protracted labour.
- **Environment**: More contact with harmful substances like lead (found in ceramics, paints, toys, etc.).
- **Drug or alcohol consumption**: The intake of hard drugs as well as alcohol consumption during pregnancy can likely cause learning disability.
- **Illness both during and after childbirth:** Learning difficulties may result from an illness or injury that occurs during or after childbirth.
- **Heredity:** It has been noted that a child whose parents have a learning handicap is more likely to get that problem.

16.5 Signs of Learning Disabilities

During normal physiological growth, a child is supposed to learn a range of fundamental cognitive and motor abilities. Any major delay or gap in development may indicate a learning problem. Some of the delays or gaps may include the following:

> Nursery/Kindergarten

A child may experience a number of issues with:

- Having the ability to talk at an expected age (15–18 months), when children normally start speaking.
- ✤ Uttering basic words.
- ✤ Ability to identify letters and words.
- Getting familiar with numbers, rhymes, or sounds.

Focusing on assigned tasks.

> Primary school:

It may be difficult for the child in:

- Learning to distinguish letters of the alphabet.
- ✤ Linking sounds and letters.
- ✤ Reading, spelling and writing correctly.
- ✤ Recalling numbers or information.
- ✤ Remembering poems or responses.
- Comprehending the notion of time.

Junior Secondary School:

The child may encounter challenges with:

- Spelling of words that are similar like need/knead, bred/bread); and use of suffixes and prefixes.
- Retaining or memorising information.
- Handwriting

Senior Secondary School:

The child might face difficulties in:

- Adapting to unfamiliar environments.
- Responding to test questions or practical issues, summarising, and paraphrasing.
- Being able to comprehend abstract ideas.
- Poor memory, maintaining constant attention.

16.6 Identification of learning disabilities

Establishing a learning impairment is a difficult task. The starting point is to eliminate visual, hearing and developmental disabilities that may conceal the root cause of learning difficulty. Having accomplished this, a learning disability can be determined by psychoeducational evaluation, which involves academic success assessments as well as an indicator of intellectual capacity. This evaluation aims to identify whether there exists some substantial disparity in the potential of a child and actual capabilities (IQ) and the child's academic attainment.

Children with learning impairments may possess untapped qualities and skills that are frequently disregarded. Rather than merely focusing on the disorder, it is essential that these skills be acknowledged and supported by parents, educators, and counsellors.

16.7 Strategies and resources for intervention

Early intervention and support can help children with learning impairments to thrive in school, since parents and teachers are among the first to recognise their challenges with learning, reading or writing.

The child's capacity to manage the condition may be adversely affected if left without adequate attention. The following may be suggested for a child with a learning disability by their physician or school:

- A tutor may teach learning and organisation skills, while a reading expert or other qualified professional may enhance a child's academic performance.
- The school or a special educator may create an Individualised Education Programme (IEP) that outlines the child's learning goals.
- Therapy may be effective for certain children with learning difficulties, depending on the issue, such as:
- Speech therapy-language disabilities

- Occupational therapy- motors skills.
- Alternative and complimentary therapies like music, art and dance, have been shown to assist children with learning disabilities.

16.8 Professionals to consult when seeking therapy include:

- **Clinical Psychologist:** A clinical psychologist preferably with a specialty in education, uses intelligence tests like the Wechsler IQ scale for children to assess a child's normal intellectual functioning.
- **Counsellor:** A Counsellor may assist in identifying behavioural difficulties, including those caused by a bad home or school environment, as well as emotional concerns that may contribute to the child's low academic achievement.

See a professional Counsellor at the UPCC or any of its outstation.

17. ETIQUETTE

17.1 Etiquette

Etiquette means good behaviour which makes human beings unique from animals. The Oxford Dictionary defines etiquette as "the formal rules of correct or polite behaviour in society, among members of a particular profession or in a particular area of activity". It might also refer to the behaviour or process required by authority to be followed in social or official life. Etiquette is different from ethics because ethics is a set of moral principles while etiquette is a procedure required by authority.

Etiquette refers to the right conduct set by a community for various situations such as ceremonies, court, formal gatherings, and everyday life. Some of the examples include manners such as, please, thank you, chewing with our mouths closed, and dressing appropriately.

All these manners mentioned above are important to us due to the fact that they give us confidence, make us focus on our interactions to understand them, and know our expectations from others. Some synonyms of etiquette are: manner, attitude, politeness, practice and rules (<u>https://www.merron/webster</u>).

Etiquette is both mannerly and ethical. Good manners are not etiquette but behaviours that show a person's attitude.

17.2 Principles of etiquette

- **Respect**: Acknowledging someone else's worth and showing you care about another person.
- **Consideration**: Empathy for others and proper behaviour while communicating with them.
- Honesty: Being truthful and conducting one's self with integrity.

17.3 Types of etiquette and what they teach

- i. Social etiquette: Teaches one how to behave in society.
- ii. Corporate etiquette: How one behaves when at work.
- iii. Wedding etiquette: Behaving sensibly at special events (Never be late or drink uncontrollably)
- iv. Meeting etiquette: Ways individuals should speak on phone.
- v. Eating etiquette: Certain decorum to be followed while eating.
- vi. Business etiquette: Ways to conduct a certain business avoid cheating.

Etiquette makes a person into a gentleman or lady.

17.4 Need for etiquette

- i. It makes a person to be cultured
- ii. It teaches one how to behave in the society.
- iii. It ensures an everlasting impression.
- iv. It attracts respect and appreciation to a person in any society.
- v. It helps individuals to value relationship.

17.4 Factors that influence etiquette

- i. Social power
- ii. Social distance
- iii. Imposition

17.6 Guidelines for etiquette

- i. Simply be yourself and accept the respect that others have for you.
- ii. Always express appreciation. The finest approach to acknowledge someone who has complimented you or done you a favour is to say "Thank you."
- iii. When meeting someone, provide genuine praises and show sincere interest.
- Always practise self control and good manners when in polite company.
 Avoid being arrogant, boisterous, or boastful. Elegance should be shown in your speech, actions, and even your attire. Don't boast about your

successes; a polite person doesn't need to promote themselves. Allow your actions to tell the story.

v. Before speaking, listen: Good manners necessitate respect for other people.One approach to be respectful of people is to listen to them.

18. CAREER COUNSELLING

18.1 Career counselling

Career counselling is a service that assists people in starting, changing, or advancing their professions. It can include one-on-one interactions between a Counsellor and a career seeker, as well as evaluations, activities, and projects that aid career seekers in leveraging on their abilities.

18.2 Factors influencing career growth

- Aspirations
- Values
- Abilities
- Personality
- Up bringing
- Circumstances

Developing a career entails more than simply selecting a Course of study and the profession one intends to pursue after graduation. It is essentially a lifetime process, which means you will have to make professional and life decisions all your life. As a result, the purpose of career counselling is not just to assist you in making current decisions, but also to provide you with the information and skills necessary to make future career and life decisions.

18.3 What can bring me to a Career Counsellor?

- I am unable to choose on a Course of study.
- I am experiencing difficulty deciding between several career alternatives.
- I know what I want to study, but I don't know where I will work after I graduate.
- I know what career I desire, but I don't know the Course to study for that career.
- I am searching for work opportunities related to my chosen field of study.

• I don't have enough knowledge about various vocations to determine my desired path.

18.4 Who needs career counselling?

Career counselling is for everyone. The earlier you start, the more equipped you will be. We urge that both fresh and old students, and staff come in and meet Career Counsellors at the University of Port Harcourt Counselling Centre; Student Affairs Department; School of Basic Studies; and Faculty of Basic Medical Sciences, College of Health Sciences.

19. WORK-LIFE BALANCE

19.1 Work-life balance

Work-life balance is the ability to balance personal and professional responsibilities. It refers to the balance between a person's work life and private life.

Work-life balance has a significant effect on work satisfaction, physical and mental health of a worker. It implies completing one's daily work without neglecting one's health, family and friends, culture and hobbies and vice versa.

19.2 Factors that affect work-life balance

Some factors that may impact work-life balance are as follows:

- Working environment
- People at work
- Job security
- Excessive obligations at work or at home
- Long hours at work
- Personal life changes, like starting a family or caring for ageing parents
- Growing expenses while maintaining the same income

19.3 Components of work-life balance

- Satisfaction balance: this means feeling equally satisfied with one's family and job responsibilities.
- Time balance: achieving time balance between job and family responsibilities.
- Involvement balance: This implies having equal involvement levels at work as well as in the family.

19.4 Indicators of a good work-life balance

- Clearly defining boundaries between personal and professional life. Being able to separate work related tasks from personal activities.
- Time management: being able to allocate enough time for work as well as personal pursuits.
- Stress management: being able to implement stress management strategies.
- Flexibility: being able to adapt and adjust one's schedule to accommodate unforeseen circumstances and personal needs without interfering with work commitments.

19.5 Signs of an unhealthy work-life balance

- Constant overworking
- Neglecting personal life
- Burnout
- Inadequate self-care
- Difficulty in maintaining healthy relationships with family, friends and loved ones as a result of work-related commitments.
- Failure to meet your deadlines
- Stress and anxiety
- Reduced productivity

19.6 Tips for improving work-life balance

- Plan ahead
- Set timing for different tasks
- Set a time to end work each day
- Practice time management
- Establish boundaries
- Take pleasure in what you do
- Pay attention to your finances

- Groom relationships
- Pay attention to your health
- Dedicate time to relax

19.7 Benefits of a healthy work-life balance

There are various advantages to having a healthy work-life balance for both employers and workers. These advantages include:

- Averts burnout at the place of work: If you are feeling pressured and overburdened at work, you are more likely to experience workplace burnout. As such, a healthy work-life balance helps you prevent professional burnout by encouraging you to set limits, prioritise your health, and schedule personal time.
- Enhances productivity: You may take care of your personal requirements, such as sleep, food, and social interaction, by achieving a better work-life balance. It can therefore increase your output and effectiveness.
- Increases staff participation: It has been shown that those who work for organisations that promote work-life balance and family-friendly policies are more invested in their work.
- Promotes mental, emotional, and physical health: Maintaining a healthy work-life balance enables you to prioritise your health, control your stress levels, and refrain from overworking.
- Attracting and keeping finest employees may be facilitated by providing a strong work-life balance, since most workers seek flexibility in their work environments.
- Enhances interpersonal and professional relationships: Work-life balance gives you the opportunity to socialise more with your friends, family, and colleagues, which helps you forge better bonds with them.
- **Increases staff retention:** A good work-life balance has the potential to boost employee satisfaction which in turn aids in employee retention.

For more guidance on maintaining a healthy work-life balance, see a professional Counsellor at the UPCC or any of its outstations.

20. RETIREMENT

20.1 Retirement

Retirement is an inevitable phenomenon and a very important stage in human development. Workers will have to retire from work at one time or the other. Retirement is a process involving the separation of an individual from a job role performed for pay. It involves a lot of changes in lifestyle, monetary involvement and social aspects of life.

20.2 Classification of retirement

Retirement can be classified in various ways, but the following are common and applicable in Nigeria:

- Voluntary retirement: the decision to retire lies with the employee
- **Compulsory retirement**: the decision to retire is mainly from the employer and this could be in form of retrenchment or dismissal.
- **Statutory/Mandatory retirement**: this occurs when an individual has attained the age of retirement or number of years of service (the latter is no longer applicable to staff of universities in Nigeria).

20.3 Benefits of pre-retirement preparation

Retirement, by its nature evokes fears and worries about the future of the individual, hence pre-retirement preparation is very necessary. Some benefits of preparing for retirement include:

- Being able to regulate one's life activity
- Good health in post-retirement life
- It brings companionship needed for survival
- It nurtures self-concept
- It stimulates interpersonal relationship with others.

- Provision of a vocation, thus eliminating the burden of inactivity in the years following retirement
- Reduced financial concerns

20.4 Factors to consider when planning for retirement

If taken as a priority, retirement planning will help retirees transition smoothly. One should consider the following aspects when preparing for retirement:

- Economic preparation
- Social preparation
- Accommodation (shelter)
- Emotional preparation
- Spiritual preparation
- Diversification of social network

Living a healthy life after retirement depends on one's habits and lifestyle, hence physical preparation is also very important in pre-retirement planning. Exercising frequently, eating nutritious foods, drinking enough of water, as well as occasional change of location will help to maintain a healthy body and mind during retirement.

20.5 Tips for successful retirement life

- i. Equip yourself with necessary information about your employer's pension plan
- ii. Start saving, keep saving and focus on your goals
- iii. Be fully aware of your retirement needs
- iv. Keep investing
- v. Get adequate rest
- vi. Identify with people who will bring you psychological, emotional and physical support
- vii. Eat healthy
- viii. Exercise

- ix. Work if you are strong enough
- x. Do not stop learning

See a professional Counsellor at the UPCC or any of the outstations, for further guidance on pre-retirement planning.

21. SELECTED WORLD/ INTERNATIONAL DAYS

S/N	WORLD/INTERNATIONAL	DATE
	DAYS	
1	Global Family Day (Also known as	1 st January
	World Peace Day)	
2	International Thank-You Day	4 th January
3	International Women's Day (IWD)	8 th March
4	International Day of Happiness	20 th March
	(Also called Happiness Day)	
5	World Down Syndrome Day	21 st March
	(WDSD)	
6	World Water Day	22 nd March
7	World Autism Day	2 nd April
8	International Day of Conscience	5 th April
9	United Nation's World Health Day	7 th April
10	United Nation World Day For Safety	28 th April
	And Health At Work	
11	International Day of Families	15 th May
12	International Day of Living Together	16 th May
	In Peace	
13	International Day of The Boy Child	16 th May
14	Global Day of Parents	1 st June
15	International Day of Innocent	4 th June
	Children Victims of Aggression	
16	Public Service Day	23 rd June
17	International Widows' Day	23 rd June

18	International Day Against Drug Abuse	26 th June
	And Illicit Trafficking	
19	International Day In Support of	26 th June
	Victims of Torture	
20	Nelson Mandela International Day	18 th July
21	International Day of Friendship	30 th July
22	World Day Against Trafficking In	30 th July
	Persons	
23	International Youth Day	12 th August
24	World Humanitarian Day	19 th August
25	International Day of Charity	5 th September
26	International Day of Peace	21 st September
27	International Day of Older Persons	1 st October
28	International Day of Non-Violence	2 nd October
29	World Teacher's Day	5 th October
30	World Mental Health Day	10 th October
31	International Day of The Girl Child	11 th October
32	International Men's Day	19 th November
33	World/Universal Children's Day	20 th November
34	International Day of Persons With	3 rd December
	Disabilities	
L		1



STAFF OF THE UNIVERSITY OF PORT HARCOURT COUNSELLING CENTRE (UPCC) COMMEMORATING WORLD MENTAL HEALTH DAY ON TUESDAY, 10TH OCTOBER, 2023

#MentalHealthIsAUniversalHumanRight

22. CONCLUSION

This Handbook has given you a basis for understanding some of the counselling services accessible at the UniPort Counselling Centre. Remember that asking for help is a demonstration of strength, not weakness. We implore you to use the information in this book to form corrective habits and create a support network that will help you manage struggles that you may have.

Endeavour to incorporate some of the following good habits to ensure mental wellbeing:

- Regular exercise and sporting activities
- Reading
- Journaling or writing
- Listening to music
- Cooking
- Gardening
- Making works of art
- Maintaining good company
- Having a balanced social life

If you have any questions or need counselling, please do not hesitate to call, chat and visit our professional Counsellors at the UniPort Counselling Centre or any of our outstations. We care and we are here for you.

Your wellbeing is our priority; confidentiality assured.

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