

HOW TO USE SOCIAL MEDIA WISELY AND MINDFULLY

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Congratulations to the Class of 2018 from your friends at Vista !!!

It's time to be clear about how social media affects our relationships and well-being—and what our intentions are each time we log on. It was no other than Facebook's former vice president for user growth, Chamath Palihapitiya who advised people to take a "hard break" from social media. "We have created tools that are ripping apart the social fabric of how society works," he said recently. His comments echoed those of Facebook founding president Sean Parker. Social media provides a "social validation feedback loop ('a little dopamine hit...because someone liked or commented on a photo or a post')," he said. "That's exactly the thing a hacker like myself would come up with because you're exploiting a vulnerability in human psychology." Are their fears overblown? What is social media doing to us as individuals and as a society? Since over 70 percent of American teens and adults are on Facebook and over 1.2 billion users

visit the site daily—with the average person spending over 90 minutes a day on all social media platforms combined—it's vital that we gain wisdom about the social media genie, because it's not going back into the bottle. Our wish to connect with others and express ourselves may indeed come with unwanted side effects. Social media is, of course, far from being all bad. There are often tangible benefits that follow from social media use. Many of us log on to social media for a sense of belonging, self-expression, curiosity, or a desire to connect. Apps like Facebook and Twitter allow us to stay in touch with geographically dispersed family and friends, communicate with like-minded others around our interests, and join with an online community to advocate for cause dear to our hearts. Honestly sharing about ourselves online can enhance our feelings of well-being and online social support, at least in the short term. Facebook communities can help

break down the stigma and negative stereotypes of illness, while social media, in general, can "serve as a spring board" for the "more reclusive...into greater social integration," one study suggested. But Parker and Palihapitiya are on to something when they talk about the addictive and socially corrosive qualities of social media. Facebook "addiction" (yes, there's a test for this) looks similar on an MRI scan in some ways to substance abuse and gambling addictions. Some users even go to extremes to chase the highs of likes and followers. Twenty-six-year-old Wu Yongning recently fell to his death in pursuit of selfies precariously taken atop skyscrapers. Facebook can also exacerbate envy. Envy is nothing if not corrosive of the social fabric, turning friendship into rivalry, hostility, and grudges. Social media tugs at us to view each other's "highlight reels," and all too often, we feel ourselves lacking by comparison. This can, fuel per-

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(continued from cover page) sonal growth, if we can turn envy into admiration, inspiration, and self-compassion; but instead, it often causes us to feel dissatisfied with ourselves and others. For example, a 2013 study by Ethan Kross and colleagues showed quite definitively that the more time young adults spent on Facebook, the worse off they felt. Participants were texted five times daily for two weeks to answer questions about their well-being, direct social contact, and Facebook use. The people who spent more time on Facebook felt significantly worse later on, even after controlling for other factors such as depression and loneliness. Interestingly, those spending significant time on Facebook, but also engaging in

moderate or high levels of direct social contact, still reported worsening well-being. The authors hypothesized that the comparisons and negative emotions triggered by Facebook were carried into real-world contact, perhaps damaging the healing power of in-person relationships. More recently, Holly Shakya and Nicholas Christakis studied 5,208 adult Facebook users over two years, measuring life satisfaction and mental and physical health over time. All these outcomes were worse with greater Facebook use, and the way people used Facebook (e.g., passive or active use, liking, clicking, or posting) didn't seem to matter. "Exposure to the carefully curated images from others' lives leads to negative self-comparison, and the sheer

quantity of social media interaction may detract from more meaningful real-life experiences," the researchers concluded. **Source: Rava Chandra, Greater Good Magazine, January 19, 2018. <https://greatergood.berkeley.edu>**



SIX REASONS DECLUTTERING FEELS SO GOOD

Decluttering creates a sense of confidence and self-efficacy, that is seeing yourself as competent. Decluttering utilizes your decision making and problem solving skills: You've got Y amount of space and X amount of stuff. To make everything fit, you need to make reasonably quick decisions about whether to keep or discard items, and where to put them. Doing this successfully can help you feel confident about your decision making skills. It makes you feel like your adulting! **Decluttering is energizing.** This point is related to the last one. When you make a series of quick decisions (and therefore solve a series of problems), you put yourself into getting things done mode. When you do this, you're likely to find that you feel energized enough to start ticking other things off your to do list. **Cleaning and organizing reduces anxiety.** We've evolved a preference for order and symmetry because presumably those things conferred an evolutionary advantage back in our ancestral

environment. When things feel out of order, it can (but not always) make us feel scattered and anxious. Creating order relieves that anxiety. You can observe this most clearly in people with OCD—Obsessive Compulsive Disorder. In people who obsessively clean, organize or count things, those behaviors make sufferers feel calmer (temporarily). This is an extreme example. However, many clinical conditions involve what are generally helpful psychological mechanisms gone awry. **Decluttering allows mind wandering and (sometimes) involves physical activity.** If you've been concentrating on doing hard cognitive work (for example, at your job), giving your mind a chance to wander can help you generate further insights into whatever it was you were working on. Physical activity can help supercharge this. Therefore, organizing that involves some physical component (like moving heavy items around) can create ideal conditions for having lightbulb moments and other leaps of insight.

Decluttering can reduce relationship and family tension. Clutter can create family stress. You might argue about mess with your spouse, or find yourself snapping at your children if you've spent 10 minutes looking for something and are now running late. Decluttering can reduce stress. **When you declutter, you often find lost treasures.** When you declutter you often find items you'd forgotten you had. These types of finds can create a sense of serendipity and abundance that can boost your mood and increase your energy for tackling bigger issues. Note: Not everyone would benefit from working or existing in a perfectly clutter free and organized space. There's evidence that working amongst some degree of mess can be energizing and can have a positive impact on creativity in certain circumstances. Also, the act of occasionally cleaning up that space can also be energizing. **Source: Alice Boyes, Ph.D., Psychology Today, Blog Posted Feb. 12, 2018.**

WHAT I WISH I'D KNOWN BEFORE GETTING DIVORCED

1. You will find yourself on your knees in the produce aisle. Grief happens where you least expect it. We had mutually agreed to divorce. I thought I was prepared, even liberated, by the time my ex moved out of our house. Yet the first time I was at Ralph's wheeling my cart into the produce section, my throat constricted. The sight of the fruit I didn't eat but bought for him felled me. Not one for public tears, I was leaking all over the place, wishing I'd taken my mother's "carry a hankie" advice I'd scoffed at. I had no idea how to shop for just me after more than a decade of buying for him. **2. You will go to Armageddon.** Nobody points to divorce that went nuclear and says that will be you. Or tells you that friends and family will be egging you on to fight like you're Mel Gibson in *Braveheart*. In my case, after going to Armageddon over the house, the only winners were the people who bought it in a short sale. Take it from me: The things you are fighting for aren't worth it. **3. Final doesn't mean final.** In the years after your divorce, you will find yourself a victim of the universe: Someone will get sick, have to move out of state, lose their job. Every new life decision can lead to court; "change of circumstance" pries open what was nailed down. Everything—again—will be subject to argu-

ment. An unanticipated event will hold you both in its maw, leaving you shaking your fist at the heavens. If you didn't learn the lesson the first time, you will learn it now: You have no control over your ex or the vagaries of the family court system. If I could have one thing back from my divorce process, it would be all the energy I spent thinking I could change anything other than my own reactions and expectations. **4. It may never be over, but you have to stop talking about it.** You may want to tell anyone within whispering distance, including the UPS guy, "Can you believe he did (blank)?" Go ahead...but know that you get a grace period of only about six months. If you continue to complain past that mark, you risk exhausting everyone around you. They'll nod their heads sympathetically but be thinking, "Actually, yes, I can believe he did that *because that's why you're not with him.*" A true friend will be honest enough to tell you it's too painful to hear again, or, as one of mine said to me, "It's BORING." **5. You will shed.** Like hair loss, some of the things you lose will be involuntary and painful. Friends and family take sides, and some will take his. Yet divorce gives you the opportunity to divorce some extra people too: those who don't show up for you now or, you realize, never did. The

mom you were only friends with because of your kids, and who makes digs because she's in a marriage as shaky as yours was. The naysayer who doesn't believe you'll ever finish the projects you've taken on. You can only afford to spend your time with supportive, loving people. There's never been a better time to re-evaluate friendships on your own terms. **6. Ashes don't go to ashes.** We all fall down. Patches of earth where your relationship resided will be uninhabitable. You can't imagine it now, but there will be a time when something will grow back—it might even be something that connected you in the first place. Last year, for the first time since our divorce, I had lunch with my ex-husband. Our daughter was about to go off to college, a vulnerable time for me. As I sat looking at his familiar yet now unfamiliar face I saw understanding, the kind that comes from knowing someone at their best and worst. "I know you like to be prepared," he said, "but some things you have to experience as they come, and trust." He'd always had the ability to provide the wider view, especially if it wasn't about our relationship. And there we were, two friends, walking out of the restaurant. **Source: Tracy Barone, author of *Happy Family*.**

SIMPLE AND INEXPENSIVE TECHNIQUES TO DETER OPIOID ABUSE

Pill counts and lock boxes are ways to deter abuse. In pill counting, a patient is prescribed a 28-day supply so that the prescription will always end on the same day of the week. At the appointment, timed to occur a day or two before the pills are

consumed the patient should show the prescriber an appropriate number of remaining pills. This strategy should decrease pill hoarding and diversion. Lock boxes are simple security measures to ensure the patient's controlled substances are not

taken by someone else—and to decrease the likelihood that the patient will employ this excuse to explain a missing pill or prescription. **Source: authored by R. Jason Yong, MD MBA, Mohammed A. Issa, MD, Chris Abrecht, MD, Ehren Nelson, MD**

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DEPRESSION IS NOT A NORMAL PART OF AGING

Depression is a true and treatable medical condition, not a normal part of aging. However, older adults are at an increased risk for experiencing depression. If you are concerned about a loved one, offer to go with him or her to see a health care provider to be diagnosed and treated. Depression is not just having "the blues" or the emotions we feel when grieving the loss of a loved one. It is a true medical condition that is treatable, like diabetes or hypertension. Someone who is depressed has feelings of sadness or anxiety that last for weeks at a time. he or she may also experience:

Feelings of hopelessness and/or pessimism

Feelings of guilt, worthlessness and/or helplessness

Irritability, restlessness

Loss of interest in activities or hobbies once pleasurable

Fatigue and decreased energy

Difficulty concentrating, remembering details and making decisions

Insomnia, early-morning wakefulness, or excessive sleeping

Overeating or appetite loss

Thoughts of suicide, suicide attempts

Persistent aches or pains, headaches, cramps, or digestive problems that do not get better, even with treatment

Older adults are at increased risk. We know that about 80% of older adults have at least one chronic health condition, and 50% have two or more. Depression is more common in people who also have other illnesses (such as heart disease or cancer) or whose function becomes limited. **Older adults are often misdiagnosed and undertreated.** Healthcare providers may mistake an older adult's symptoms of depression as just a natural reaction to illness or the life changes that may occur as we age, and therefore not see the

depression as something to be treated. Older adults themselves often share this belief and do not seek help because they don't understand that they could feel better with appropriate treatment. The good news is that the majority of older adults are *not* depressed. Some estimates of major depression in older people living in the community range from less than 1% to about 5% but rise to 13.5% in those who require home healthcare and to 11.5% in older hospital patients. Most older adults see an improvement in their symptoms when treated with antidepressant medication, psychotherapy, or a combination of both. If you are concerned about a loved one being depressed, offer to go with him or her to see a health care provider to be diagnosed and treated. If you or someone you care about is in crisis, please seek help immediately.

Source: Division of Population Health, National Center for Chronic Disease Prevention and Health Promotion, January 31, 2017.