

# HEALING

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from **Dr. Marino E. Carbonell**

**Ed.D., LMHC, CAP, ICADC**

**www.marinocarbonell.com**

**Get Back to Being You**

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## **A General Understanding of Genetic Factors that Contribute to the Risk for Alcoholism and Drug Addiction**

by Marino E. Carbonell, Ed.D., LMHC, CAP, ICADC

The process of development and perpetuation of dependence on a substance is highly complex. Additional social factors mixed with biological factors contribute to dependence.

Addiction is a brain disease and risk of addiction can be inherited. Heredity accounts for about 40% of the risk. Additionally, because prolonged exposure to abused drugs results in long-lasting changes in the brain, addiction should be considered a chronic medical illness.

One of the ways to treat young adult drug abuse is to modify the cultural climate, focusing children to value and achieve independence, adventure, intimacy, consciousness, activity, and commitment to community among many other things.

However, addiction is a whole lifestyle issue and needs to be explored under the context of behavioral modification, not just genetics. There is an ongoing struggle to understand better the root of addiction whether biological or situational.

Some researchers note that problem drug use is a symptom, not a cause of personal and social maladjustment and that the meaning of drug use can best be understood in the context of an individual's personality structure and development history.

The American Academy of Pediatrics, Committee on Child Health Financing, and Committee on Substance Abuse identified that the numbers of children, young adults, and families affected by substance abuse have sharply increased since the 1990s.

The consequences of failing to intervene early and failing to provide age-appropriate substance abuse and mental health treatment are substantial

and long-term. Fortunately, there is growing evidence that successful early intervention and treatment carries a significant benefit for the individual and society.

Despite the fact that there is no single treatment approach that works for all patients, standard treatment has shown to produce significant decreases in drug use. Standard substance abuse treatment programs in the United States are rooted in the disease concept, consisting mostly of the spiritual 12-step Alcoholics Anonymous program.

Certain characteristics of the patient, not treatment, are crucial to the outcome of the addiction treatment.

People who succeed through treatment or on their own do so for similar reasons. Research supported that certain characteristics of the patient and not treatment itself is responsible for the outcome. Patients with stable family and work succeed at a higher rate.

A recent dramatic finding in neurobiological research may greatly increase the understanding of young adult decision making and the ability to help this age group choose wisely regarding drug abuse. This finding suggests that the young adult brain is still developing physically and further investigation can answer some of the cognitive issues affecting the appeal of and decision to use drugs. Most importantly, chronic drug abusers start experimenting with intoxication in adolescence or young adulthood and it is generally true that people who do not abuse drugs before age 25 are unlikely to develop a serious drug problem. Building on the recent findings in neurobiological research may greatly increase the understanding of young adult decision making. \*

## **10 Ways to Plan to Thrive During the Holidays**

*If you start now to look at what you want, you may be able to thrive during the holidays. Here are some suggestions:*

- 1. Plan ahead.** Don't be at the mercy of the season. Decide what YOU want your holiday experience to look like, and make necessary arrangements now.
- 2. Make gifts this year.** It'll help you not over-spend, and handmade gifts are almost always more appreciated.
- 3. Set a financial budget.** Start shopping sales now to get better prices—including for the supplies for your handmade gifts.
- 4. Set a time budget.** How much time will you need for shopping or making gifts? For holiday baking or family visits? Schedule more time than you think you need.
- 5. Get creative.** Think of new things to do while the kids are at home or different ways to arrange childcare (swap with friends?).
- 6. Build in self-care.** Whatever helps you, do it. Everything works better when you feel better.
- 7. Scratch off to-do items.** This isn't about completing tasks on your to-do list. Take tasks OFF your list! Prioritize.
- 8. Keep communications open with your loved ones.** Consider weekly meetings to talk things through.
- 9. Exercise.** Start now to develop a plan so that it's a habit when the holidays actually hit.
- 10. Consider alternatives.** If family gatherings cause anxiety, do something different! Make your plans well in advance. \*

## A Letter From

Marino E. Carbonell  
Ed.D., LMHC, CAP, ICADC



My expertise is in addiction therapy—specifically substance abuse, gambling, and other addictions. With over 15-years of experience, a founder and director of the South Miami Hospital adolescent addiction treatment program and now in private practice, my focus is helping adolescents and families deal with substance and alcohol abuse, parent/teen conflict resolution, stress, and anxiety. I also work with the adult population in dealing with all types of addiction disorders and treatment, family systems, and relationship dynamics.

Blending talk therapy with conventional and alternative approaches, I draw on a variety of styles and techniques to incorporate what will be most helpful for each client. I offer individual, family, and/or group therapy and work with each client to help them build on their strengths to identify and achieve life goals.

I am a Licensed Psychotherapist, National Certified Counselor (NCC) and Board Certified in Professional Counseling with a doctorate in Child and Youth Studies from Nova Southeastern University's Fischler Graduate School of Education and Human Services and a master's in Mental Health Counseling; a specialist in the field of addictions, I am certified in Addictions Counseling from the University of Miami and am a Certified Addictions Professional (CAP) since 1994. I am a Lifetime Member and Fellow of the American Psychotherapy Association and a member of the American Counseling Association.

## How Well Do You Handle Anxiety?



Anxiety is different than fear but is related to it. Fear is a feeling of tension that is associated with a known source of danger. Anxiety is also a feeling of tension, but in this case, the danger or the threat of danger is unknown. Anxiety is often anticipatory—worrying about the future. Without apparent reason, a person may worry about the success of their business or fret over the health and well-being of a child or feel apprehensive about their own health.

Physical symptoms can include trembling or shakiness, clammy hands, dry mouth, sweating, shortness of breath, nightmares, night terrors and

insomnia, frequent urination and heart palpitations.

Mild anxiety is normal in our daily lives and can be eased with some basic tools. Answer the following questions to find out how well you use some of these tools.

### True False

- 1. When I feel anxious, I take deep breaths to ground myself and calm myself down.
- 2. To ease some of the tension, I relax my body and physically release the tightness in my shoulders, neck, arms and chest.
- 3. I vent my feelings of anxiety by writing or talking to someone. This helps get the strong emotions off my chest and out of my body.
- 4. I channel the tension into some kind of physical activity like walking or sweeping the floor, doing the dishes or watering the yard.
- 5. I get a reality check by talking to someone I trust about my reasoning or thinking or the conclusions I've come to.
- 6. If I know I'm going to be in an anxiety-producing situation, I plan through how I will handle it; I get myself ready.
- 7. I watch how others get through stressful situations and model them; I ask questions about the best way to handle situations or events or people.
- 8. When the same anxiety comes up over and over, I log and assess possible causes and solutions.
- 9. When it doesn't interfere with my normal life, I generally try to avoid people, places and events that I know will produce anxiety.
- 10. Sometimes, when I have to face a situation that I know will cause anxiety, I take someone with me.
- 11. I face and take responsibility for problems and commit to a plan of action, rather than avoiding, denying, minimizing or blaming.
- 12. I nurture a positive attitude.
- 13. I seek support from friends, counselors, self-help groups, etc.

Anxiety is a normal emotion that most people experience during the course of their daily lives. Some of it is healthy and can motivate us to get the hard things done. However, more intense feelings of anxiety are emotionally painful and can interfere with a person's daily functioning. If you answered false to several of these and/or if you're concerned about your feelings of fear and anxiety, please don't hesitate to call. ✧

# Letting Go. Great Idea. How Do I Do It?

*Hot shot kid in a too-fast car cut you off this morning; it's noon and you're still seething?*

*Clerk at the grocery store wouldn't let you in his express line because the guy behind you ratted on your 11th item?*

*Husband had an affair 15 years ago and even though you've been divorced for seven, your stomach still knots up when you think about it?*

*You moved to a new city for a great career opportunity but long so for your old home and friends that you can't find anything to like about the new place?*

*Your son stays home to care for the kids while your daughter-in-law works at her law practice and this just doesn't seem right to you?*

*You know you should let it all go and you try, but there it is, that same old stuff still getting rent-free space in your head.*

Just exactly how does one let go so that the residue of the past is put away, forgotten or transformed into memories that can be called upon at will rather than those that show up like telephone solicitors at dinnertime and demand attention?

Letting go has to do with living in the present moment rather than the past. It happens when the past isn't projected into the future, but is left behind where it belongs. It is about making amends when called for, taking care of that which needs attending to, forgiving rather than re-living.

- Try this: next time a thought about something that happened in the past floats into your mind let it pass through without jumping aboard and going along for the ride. If you focus on it, like a weed that gets watered, it will grow. But if you acknowledge it and then disregard it, it will go away.

- However, if the thought that comes along is about something that's left undone, you may need to take some action before you can let go. Make amends to someone, clear up some misunderstanding, write a letter or make a phone call. Maybe you need to make a list and set some goals. Begin with some small, manageable step of a larger problem or situation.

Whatever you must do, begin it. Taking action sometimes precedes letting go.

- Stay in the now and be where you are. Create a supportive environment with what you have. Make a gratitude list of what you like about wherever you are, not just your living arrangements, but other parts of your life, too. Get rid of what doesn't fit and give yourself space to be.

- Write letters that you may or may not send to people you need to let go of. (Caution: if you have any doubts about the appropriateness of the letter, always wait a few days and check with someone you trust.) Write unsent letters to places, events, and situations or to people who have passed away. Write what you feel, say what you need, and say goodbye.

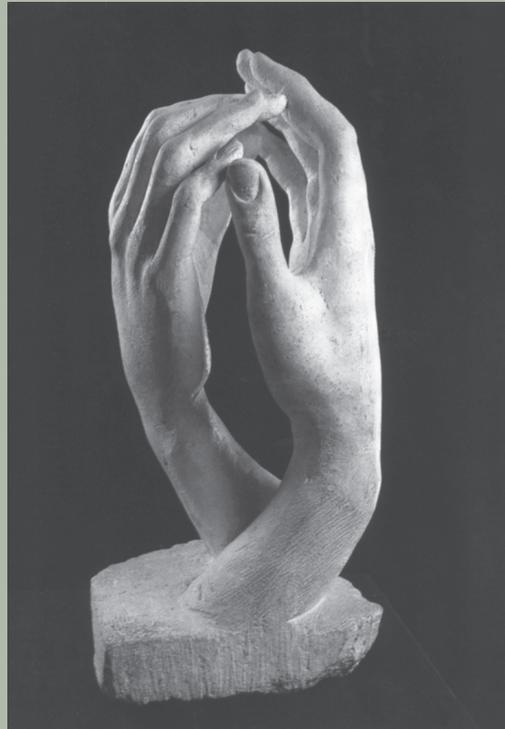
- Let go by putting away pictures, memorabilia, clothes, gifts and anything else that keeps you actively connected with someone who's no longer with you and whose presence you keep alive when it would be more beneficial to move on.

- Make a ceremony of letting go. Burn old letters or journals. Dig a hole and bury what needs to be buried. Or send it away on a receding tide or on a flowing stream. Write a letter or vow for the occasion, read it aloud. Light candles, sing songs, burn sage. Weep. Include others in your ceremony to witness or assist you.

- Let go of old ideas by getting information about what's new or different. People, lifestyles and cultures change. Talk to others, get other perspectives. Focus on what's good with change, find ways it benefits you and others. Holding on to how it used to be keeps you from participating in the present.

- Release thoughts and words that categorize people, that measure or evaluate or that judge or condemn or hold with expectations. Eliminate words like should, ought, can't, if only, however and impossible.

Gerald Jampolsky, M.D., author of *Love is Letting Go of Fear*, wrote, "When we cherish or hold onto grievances, we cannot let go. We become imprisoned." Perhaps the highest level of letting go is to practice forgiveness. \*



# When Depression is Mild

At some time, nearly every person experiences feelings of depression—sadness, discouragement, the blues. These are common, normal feelings that come and go—mild depressions that can be seasonal or event-related.

Depression becomes an illness when symptoms intensify and persist over an extended period of time.

Depression can be treated; however, nearly two-thirds of depressed people don't get appropriate treatment. Even with all we know, some still believe depression is a personal fault or weakness, and that the person who is suffering could just "snap out of it" if he or she wanted to.

Like with other illnesses, denial that anything is wrong may be one reason help is not sought. Other times people don't seek help because they don't recognize the symptoms.

Following are some common characteristics of depression and some dos and don'ts if you or someone you care about is experiencing mild depression.

## Some Symptoms of Depression

- **Persistent sad or "empty" feelings**, feeling discouraged, blue or down.
- **Negative feelings**—feeling guilty,

unworthy. Self-criticism, self-blame.

- **Loss of interest in ordinary activities.**
- **Decreased energy**, feeling fatigued, restless, irritable or lethargic.
- **Increase of sleep or insomnia.**
- **Loss of interest in sex.**
- **Changes in appetite**—eating more or less, gaining or losing weight.
- **Difficulty concentrating**, remembering, making decisions.

If symptoms persist and the following additional symptoms appear, then professional help is needed.

- Excessive weeping or crying.
- Thoughts of suicide or death.
- Persistent physical symptoms such as headaches, chronic pain, digestive disorders.

## When Depression Is Mild, What Should a Person Do?

Try to be with supportive, understanding people. Do those recreational activities that you have always liked. Participate in social activities or community gatherings. Exercise is helpful—go for walks, work in the yard, plant some flowers.

Also, break large tasks into smaller ones; set priorities. Only do what

you can and check your expectations of yourself. Talk about how you're feeling with friends, family and your therapist.

## What Should a Person with Depression *Not* Do?

- Don't isolate or hide out.
- Don't set difficult goals or take on too much responsibility.
- Don't expect too much of yourself.
- Don't set yourself up for disappointment or failure.
- Don't make major life decisions—changing jobs, getting married or divorced—without first consulting with others who know you well and have a more objective view of your situation.
- Don't expect to suddenly get over the depression. Most likely, feeling better will happen gradually.
- Don't accept negative thinking and feelings as reflecting your true situation.

If you're experiencing mild depression, keep hope. With time and treatment, if necessary, the symptoms will dissipate. You will come back to yourself. \*



Marino E. Carbonell is a licensed psychotherapist specializing in the field of addiction treatment for the adolescent and adult population. He maintains a private practice in Miami, Florida. Dr. Carbonell has vast community involvement and has served as consultant to several private schools in South Florida. He travels locally to public and private schools lecturing about the symptoms and consequences of substance and alcohol abuse to students and parents. He is a member of the advisory board of directors of Informed Families and recently received the Special Speakers Recognition Award. Additionally, he has written extensively about the subject of addiction and cognitive moral development in young adults.

www.marincarbonell.com

Miami, Florida 33155  
7344 SW 48 Street, Suite 104  
MARINO E. CARBONELL, ED.D., LMHC, CAP, ICADC