



HEALING

A JOURNAL OF WELL-BEING

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Get Back to Being You

January 2012, Volume 4, Issue 1

The Message to Our Children Must Be Non-Negotiable: Stay Away from Alcohol & Drugs

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I recently came across a statement made by the founding director of a social development group at a university in Washington.... It states, "It's a \$1000 bribe, but for me that's 365 days of not worrying about my son drinking..."

With all due respect to the director, the statement about negotiating with his 15-year-old, soon-to-be-driving son about refraining from drinking for a year in return for some pay-off, will, in the long run, back-fire. As a certified professional in the field of adolescent substance abuse, my experience in these matters suggest that once parents succumb to negotiating certain expected behaviors with their children, parental decision-making starts down a very slippery slope.

It is crucial for parents to begin the conversation about the consequences of drug and alcohol use early and often. But the message should not be "negotiable."

An adult's relaxed attitude toward under-age drinking and experimental drug-use may suggest to a young person that the benefits outweigh the risks. Studies have found that family engagement is a better predictor of successful treatment. Setting boundaries is a parenting technique not only critical during the adolescent years, but also needed from a teen's perspective. Interestingly, when asked by Roper Starch Worldwide in 1998 to rank major problems facing America

today, students aged 12 to 19 most frequently named as one of their top concerns "lack of parental discipline."

But most importantly, the message to a 15-year old about staying away from alcohol for a price does not address the real issue of abstaining from under-age drinking. What happens when the child turns 16, 17, 18...etc? Providing incentives, but at what cost? Again, studies support the opposite approach: set boundaries and stick to parental discipline.

Underage drinking accounts for 25 percent of all alcohol consumed in the U.S. according to a new report recently released by The National Center on Addiction and Substance Abuse at Columbia University (CASA).

Apart from the referenced disturbing statistics, what is most disconcerting as an addictions specialist dealing primarily with the adolescent population is what the CASA researchers have confirmed: teens have easy access to alcohol because parents are too often unwitting co-conspirators who see underage drinking as a rite of passage rather than a deadly round of Russian roulette.

The message to our children must be non-negotiable: stay away from alcohol and drugs. *

For additional articles and information on this subject please visit www.marinocarbonell.com.



10 Ways Anxiety Presents Itself

Common symptoms of anxiety include racing heartbeat and butterflies in your stomach. However, anxiety can present itself in numerous ways.

- 1. Constant worries/dread.** You feel anxious nearly all the time, although you may not know why. To help reduce anxiety and stress, aim for 30 minutes of aerobic exercise on most days.
- 2. Impaired thinking.** You have difficulty forming thoughts, concentrating or learning new things.
- 3. Fatigue.** Heightened stress hormones can leave you exhausted. Adequate nutrition, hydration and sleep can boost energy.
- 4. Irritability/anger.** Coping with anxiety can be overwhelming, so you may overreact to situations.
- 5. Fear/Terror.** You may have irrational fears or an impending sense of doom or danger.
- 6. Panic Attacks.** These spikes of terror can feel like a heart attack. A few deep breaths can calm you.
- 7. Controlling behavior.** You try to control situations and people to keep anxiety at bay.
- 8. Stomach/digestive upsets.** These may include nausea, vomiting, constipation, diarrhea, gas and Irritable Bowel Syndrome (IBS).
- 9. Sleep issues.** Insomnia, nightmares and night terrors can occur.
- 10. Phobia.** An exaggerated fear of an object or situation, such as heights, flying or spiders.

*If your anxiety interferes with normal life functions, it's important to seek professional help. **

A Letter From

Marino E. Carbonell
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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 Care for Yourself During Difficult Times?

We all go through challenging times at various points in life—whether it's a health crisis, the end of a relationship, job loss, financial difficulties or the death of a loved one. To cope with such difficult times, self-care is vital but, too often, we are hard on ourselves instead. Answer these true/false questions to discover how well you support yourself during difficult times.



True False

Set 1

- 1. Although it doesn't really help, when I'm facing something difficult, I often self-soothe by over-indulging in food and alcohol.
- 2. During tough times, I get caught up in "putting out fires," and self-care goes out the window.
- 3. It's easy for me to mentally spin out of control with worry and worst-case scenario thinking.
- 4. I can't face my friends and family when things aren't going well; I tend to isolate.
- 5. Shame and blame take over when I'm facing a difficult situation; I either feel it's my fault or someone else's.
- 6. During hard times, I get scared and feel immobilized and depressed.
- 7. I can't understand why bad things happen to good people; it's not fair.
- 8. In the midst of bad times, I lose perspective and have a hard time trusting that things will get better.

Set 2

- 1. No matter what's going on, I'm committed to staying on track with my self-care routines.
- 2. Caring for myself includes asking for and receiving support from people who love and care about me.
- 3. I share my feelings and what's going on with people I trust.
- 4. I have tools to help keep myself positively focused.
- 5. No matter how intense the situation, I take the time to do things that make me feel better, such as working out, getting a massage, spending time in nature.
- 6. I surround myself with supportive people and uplifting materials.
- 7. When times are tough, I look for any deeper or broader meaning behind the outer circumstances. That helps me keep the situation in perspective and even use it for my own psychological growth.
- 8. I trust myself to be able to handle whatever comes my way.

If you answered true more often in Set 1 and false more often in Set 2, you may wish to get more support around caring for yourself. Please call if you'd like assistance in exploring this further. ✿

OCD: Do your Quirks Rise to the Level of this Disorder?

Mary felt like a prisoner to her fear of burning her house down.

Despite having never left the stove on, Mary was convinced that if she left the house without checking the stove three times, her house would catch fire. If she left the house and forgot to check, or couldn't remember if she had, she would turn the car around and come back.

One day, Mary had had enough. She just stopped going back, telling herself, "Well, I guess the house is going to burn down then. I'm not turning back."

At first she was terrified, convinced her house wouldn't survive, but after a couple of times of confronting her fear, she now feels free of it.

Is Mary quirky or does she have OCD?

Used in everything from creating eccentric TV characters to being the punch line on late night TV talk shows, Obsessive Compulsive Disorder (OCD) is often oversimplified and misused. But for those who suffer from OCD it's no joke.

What Is It?

Obsessive Compulsive Disorder (OCD) is an anxiety disorder where people experience obsessions and/or compulsions.

Obsessions are unwanted, persistent thoughts, such as about germs or intruders, or images of doing—or actual impulses to do—something destructive.

Compulsions are deliberate behaviors (washing, checking, organizing, hoarding) or mental rituals (praying, counting, repetitive statements) typically performed to reduce the anxiety triggered by the obsessions.

For instance, people with an obsessive fear of uncleanness and infection may wash their hands repeatedly or refuse to shake hands or touch things that they believe are "contaminated."

People who have an obsessive desire for exactness and need everything to be "just so" and "in its place" may be compelled to organize food cans by size and with the labels facing in the same direction.

How Does OCD Impact People's Lives?

Left unchecked, OCD can rule a person's life by taking up significant amounts of time and energy and leaving sufferers feeling anxious and exhausted. This can interfere with one's ability

at work, impeding professional development and advancement. It can also prevent some people from forming intimate relationships.

So how do you know if your quirk rises to the level of OCD?

The Thought/Behavior May Be OCD If It:

- Is constant, recurring and intrusive.
- Interferes with a person's ability to function in daily life.
- Is out of control.
- Is compulsive or highly ritualistic.
- Causes the person to feel anxious and nervous most of the time.

What Can You Do?

If you or someone you know has OCD there are ways to help.



- **Insight.** Educating oneself about the symptoms and treatment is a critical first step.
- **Redirect attention.** When obsessive thoughts or compulsive urges surface, try diverting your attention to other, healthier thoughts or activities. Do something you enjoy, such as walking, listening to music or visiting with a friend.
- **Self-care.** Eat healthfully, exercise, get enough sleep, and avoid alcohol, caffeine and nicotine. (The latter two are powerful stimulants.)
- **Find healthy outlets.** Focus your energies on hobbies, exercise and recreational activities.
- **Structure your time.** Daily time management helps you stay organized and can help reduce anxiety and stress.
- **Therapy.** A therapist can help you learn to respond to (or even curtail) obsessive thoughts without resorting to compulsive behavior.
- **Support groups.** Interacting with others who can relate can decrease feelings of isolation.
- **Medication.** This may be warranted for severe symptoms.

It's not unusual for people to repeat behaviors, such as checking to see if they turned off the stove or not, or to have thoughts that are upsetting or out of character. It doesn't mean a person has OCD.

But when these thoughts and behaviors impede daily functioning by becoming frequent, intrusive, time consuming, debilitating and out of control it may be time to consult a doctor or mental health provider. ❀

How to Cope with Challenging Kids

Joyce always expects the unexpected when it comes to her 8-year old son Milo. Within seconds, he can go from sweet-tempered and happy into a vicious tantrum. She's grown overwhelmed by phone calls from teachers, relaying how Milo hit another child in class or got into a fight on the playground.

After almost spanking her son when he threw a fit in a grocery store, Joyce realized she needed help.

She reached out to a friend who had dealt with similar challenging behaviors from her own child—yelling, punching and talking back—typical acting-out that didn't necessarily constitute a psychological disorder.

Joyce's friend recommended *The Difficult Child* by Dr. Stanley Turecki. According to Dr. Turecki, while some children suffer from psychological ailments that respond to medications like Ritalin, too many parents turn to drugs without examining the root causes of their child's behavior.



Those causes may be as simple as temperament. For instance, Joyce was making Milo play soccer because his brother did. When she asked him what he preferred to do, to her surprise, he said he wanted to visit the library. Once they started going a few days a week, his behavior at school began to improve.

The library seemed to allow Milo the downtime he needed to gather emotional resources.

In addition to allowing your child's temperament to guide activities, here are some other tips for coping with emotional and behavioral issues in children.

1. Set specific and clear expectations for your child. Parents who are disorganized or without clear boundaries tend to create more of a struggle for themselves. Be reliable and loving, while maintaining consistent rules and expectations.

2. Apply the "Positive Parenting" approach. Psychologist Georgia

DeGangi, author of *Effective Parenting for the Hard-to-Manage Child*, recommends that parents "catch" their kids being good, and then reward them through acknowledgement and actions. She advises against rewarding bad behavior with attention.

3. Recognize your stress signals and take care of your own well-being. Finding appropriate ways to cope with the behaviors of a challenging child is essential. Take time out to relax in healthy ways whenever possible. Be sure to process any feelings of guilt before they become toxic.

4. Seek professional help if needed. Do not be ashamed of reaching out for help if the behaviors continue to seem unmanageable, especially if they are having a negative effect on the family or on your child's successful development.

With a few other parenting "tweaks" (and a couple of "Mommy" spa afternoons), Joyce began to see a distinct difference in Milo's interactions with the world, and in her own ability to work with his more challenging behaviors. ✿

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.

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