



HELP'S Newsletter

June/July 2014



HELP

MENTAL HEALTH COUNSELING SERVICES
& PSYCHOLOGICAL TESTING

In-Home / In-Facility / In-Office

SINCE 1993

3636 Fourth Avenue, Suite 302
San Diego, CA 92103

O 858-481-8827 F 858-244-0990

Toll Free 1-855-760-HELP (4357)

Areas Served:

- San Diego • Temecula
- Palm Desert • Inland Empire
- No. California Bay Area



WHAT IS HELP?

HELP Services has been providing mental health counseling services and psychological evaluations throughout San Diego County since 1993. Currently HELP employs over 65 licensed Clinical Psychologists, Social Workers, Marriage and Family Therapists, Neuropsychologists, and bilingual therapists, all of whom provide their services in homes, facilities, and offices. Each therapist has his or her own specialty, and is referred to the client according to their expertise and geographical location. HELP serves individuals, couples, and families of all ages. **Self referrals welcome!**

Please visit our website for information on how to place a referral to HELP.

www.helptherapist.com

Follow us on Twitter and Facebook!

Recent Blogs Added!

HELP's Mission is to provide the highest quality of care while overcoming the issues of accessibility and stigma often associated with mental health services. We maintain the highest clinical and ethical standards evidenced by our sound professional reputation throughout California.

July 20th-26th is Healthcare Hospitality Week

HELP Mental Health Counseling Services would like to recognize Ronald McDonald House Charities®

Thousands of families & patients of all ages & walks of life have found a haven within warm, home-like environments. Homes that help & heal have become community assets that bring added value to the hospitals & medical centers whose thousands of patients & families are served annually. Ronald McDonald House Charities of San Diego, Inc.



Mission: Ronald McDonald House Charities® of San Diego provides a home-away-from-home for families with a hospitalized child being treated for a serious, often life-threatening illness or injury, at a local hospital. Their Family Care Center serves as a day resource for families with seriously-ill or injured children, providing necessities to make their lives easier as they go through a very challenging time. These resources include dining services, a computer lab, children's playground, game room, chapel, exercise room, TV room, nap room, laundry facilities, and a beauty salon. They count on the support of our community to help operate the San Diego Ronald McDonald House and secure its future.

Ronald McDonald House Charities of San Diego

2929 Children's Way San Diego, CA 92123

(858) 467-4750 Office * (858) 467-4757 Fax

General Email: rmhcsd@rmhcsd.org

Website: www.rmhcsd.org

MEN'S HEALTH FACTS Depression and Suicide¹

Depression in men is undiagnosed contributing to the fact that men are 4 x as likely to commit suicide.

- Among 15- to 19-year-olds, boys were 4 x as likely as girls to commit suicide
- Among 20- to 24-year-olds, males were 6 x as likely to commit suicide as females
- The suicide rate for persons age 65 and above: men...28.5 – women...3.9.

¹ Centers for Disease Control and Prevention and the National Center for Health Statistics 2011. Retrieved from <http://205.207.175.93/HDI/TableViewer/tableView.aspx?ReportId=166>

To learn more, contact:

Men's Health Network P.O. Box 75972 Washington D.C. 20013
202.543.MHN.1 (6461) x 101

info@menshealthnetwork.org • www.menshealthnetwork.org



HELP'S ANNOUNCEMENTS:

- New PTSD and Sand Therapy Support Group Coming Soon
- Telehealth Counseling Coming Soon
- HELP is now servicing Palm Desert
- Employment Opportunities! Please contact us if you are interested in employment opportunities with HELP. We are hiring licensed clinical psychologists, marriage and family therapists, and clinical social workers.
- New Kidney Group - Starts July 9th



WEEKLY KIDNEY SUPPORT GROUP STARTS JULY 9th

Every Wednesday from 11:30 am to 1:00pm.

Location: 3636 4th Ave Suite 302 San Diego Ca, 92103

Provided by: **HELP Counseling Service**

Facilitated by HELP Bi-lingual Provider Abel Fernandez, LCSW, LS11015
(Bio and photo available on our website)
If interested call 858-481-8827 or email info@helptherapist.com
Feel free to visit our website at: www.helptherapist.com



We welcome you in a warm, caring, and confidential setting

- ❖ Offering practical approaches and suggestions to help and support you in improving your quality of life
- ❖ Learn relaxation and self soothing ways to deal with stress and anxiety
- ❖ Cognitive Strategies: learn how to recognize and change negative thinking patterns to positive ways of thinking and behaving
- ❖ Share and learn from others useful tips that have been helpful in improving the quality of life
- ❖ Support in a small and confidential group setting
- ❖ We accept Medicare and Private Pay
- ❖ We offer in home counseling
- ❖ There is hope and strength in sharing with others !!!!!

❖ Parking, elevator and wheelchair access available

FEATURED THERAPIST MELISSA MARRS, LCSW

Melissa is a Licensed Clinical Social Worker with a strong clinical background. She graduated from the University of Texas at Arlington in 1996 and has worked consistently in the mental health field ever since.



She is bilingual in Spanish and enjoys working with multicultural issues. She has been using EMDR (Eye Movement Desensitization and Reprocessing) for over 14 years with great success and loves using techniques aimed at releasing

emotions at the body level such as Thought Field Therapy, Mindfulness Techniques, TAT, relaxation techniques, and visualizations. She also regularly uses Cognitive Behavioral Therapy, Cognitive Processing Therapy, and Psychodynamic theoretical frameworks. Beyond all techniques and certificates, she values the connection between therapist and client believing that most hurt stems from relationship damage and therefore is best healed through a positive restorative relationship. Melissa is committed to maintaining a high level of ethics and integrity as she moves you towards the health and happiness you deserve.



HELP would like to acknowledge National Cancer Survivors Day (June 1st) that is a celebration to honor cancer survivors and to show that there is life after a cancer diagnosis – and it's something to celebrate. Come together to honor everyone who is living with a history of cancer – including America's 14 million cancer survivors. "A 'survivor' is anyone living with a history of cancer – from the moment of diagnosis through the remainder of life," according to the National Cancer Survivors Day Foundation, administrator for the celebration.

NCSDF provides an opportunity for cancer survivors to connect with other survivors, celebrate milestones, and recognize the healthcare providers, family, and friends who have supported them along the way. It is a day for cancer survivors to stand together and show the world what life after cancer looks like.

"Sometimes people have very negative ideas of what life after cancer looks like," says Foundation spokesperson, Laura Shipp. "But the reality is that more people are living longer and better quality lives after cancer than ever before. These survivors are showing us that life after cancer can be meaningful, exciting, and filled with joy.

Cancer survivors may face physical, emotional, social, and financial challenges as a result of their cancer diagnosis and treatment. Many are confronted with limited access to specialists, a lack of information about promising new treatments, inadequate or no insurance, difficulty finding employment, and psychosocial struggles.

The National Cancer Survivors Day Foundation is encouraging a greater commitment to resolving quality of life issues for cancer survivors. "More resources, research, and increased public awareness are needed to improve the quality of life of cancer survivors," says Shipp. "Because of advances in modern medicine, cancer survivors are now living much longer after diagnosis. However, long-term survivorship poses its own unique challenges. We need to do a better job of addressing the hardships survivors face beyond treatment."

A service of the National Cancer Survivors Day Foundation, Inc., a nonprofit 501(c)(3) organization. Copyright © 2014, National Cancer Survivors Day Foundation, Inc. All rights reserved. P.O. Box 682285 • Franklin, TN 37068-2285 • 615.794.3006



FEATURED ARTICLES

H.E.A.D.A.C.H.E. PROJECT

Helping Educators Address the Development of Appropriate Curriculum For Headache Education

BACKGROUND

More than 45 million Americans suffer from chronic, recurrent headache. Of this number, 28 million Americans have migraine. Headache is one of the 20 most common diagnoses seen in primary care physician offices. Nevertheless, the average medical school devotes less than 4 hours of curriculum time to headache, primarily targeted to learning about catastrophic but uncommon causes of headache. The national **Helping Educators Address the Development of Appropriate Curriculum in Headache Education (HEADACHE)** Project was initiated in Spring 2003 to support the development of educationally sound curricula to enhance the knowledge, skills, and attitudes of medical students in the assessment, treatment, and support of headache patients.

METHODS

Phase I of the HEADACHE Project (2003) involved the selection of demonstration schools to develop, implement, and evaluate educational projects related to headache. Grants (\$15,000 each) were awarded to Case Western Reserve University; University of Virginia; University of Oklahoma-Tulsa; and University of Southern California. Phase II of the HEADACHE Project (2004-2005) involved implementation and evaluation of educational projects related to headache in the four demonstration schools.

RESULTS

The HEADACHE Project has resulted in a variety of models and methods for instruction on the topic of headache in medical education. The four demonstration schools have developed projects which impact the four-year continuum of medical education. Curriculum hours devoted to the topic of headache were increased by at least 13.5 hours across the schools (some schools have additional optional on-line activities).

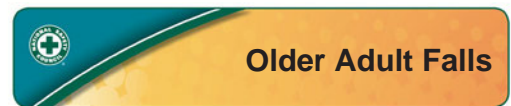
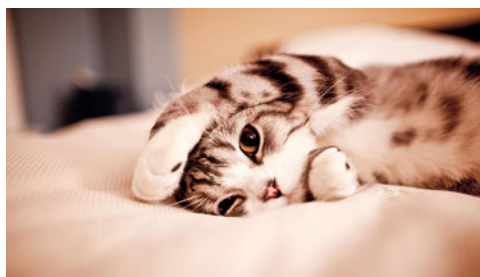
CONCLUSION

The HEADACHE Project achieved the goals of planning, developing, and implementing innovative approaches to teaching medical students how to assess and manage patients with headache.

Contact: ardisd7283@aol.com; (425) 423-0922

The HEADACHE Project is sponsored by the National Headache Foundation in cooperation with the Society of Teachers of Family Medicine and is funded through an unrestricted educational grant to the NHF from GlaxoSmithKline.

Robert Baldor, MD (University of Massachusetts; Worcester, MA), Katie Margo, MD (University of Pennsylvania; Philadelphia, PA), Alkesh Patel, MD (University Care at Shipley's Choice; Millersville, MD), Anne Walling, MD (University of Kansas-Wichita; Wichita, KS) and Ardis Davis, MSW (HEADACHE Project Manager; AKD Consulting; Mukilteo, WA)



Older Adult Falls

Each year, one in every three adults age 65 and older falls. Falls can lead to moderate to severe injuries, such as hip fractures and head traumas, and are the leading cause of injury death among those age 65 and older. As a caregiver for an older adult, it is necessary to understand the leading risks for falls and take measures to help keep your loved ones safe.

ENVIRONMENT – Most falls happen in homes and are entirely preventable. Simple changes in lighting, housekeeping and furniture arrangement can make older adults less susceptible to falling in their homes.

- All rooms in older adults' homes should be well-lit. Put in brighter light bulbs, add lighting to dark areas and install night-lights in bedrooms, bathrooms and hallways.
- Clutter and tripping hazards can cause a person of any age to fall. Make sure all pathways are clear and clean.
- Arrange furniture to ensure that there is always a clear pathway to enter and exit a room.
- Many falls occur on stairs and steps. All stairwells should be well-lit, clear of all objects and have handrails on both sides.

HEALTH – Older adults with hip or bone weakness, arthritis, osteoporosis and blood pressure fluctuation are more prone for falls. Those suffering from neurological conditions, Parkinson's disease, multiple sclerosis and Alzheimer's disease are at an increased risk for falling as well.

- Have a doctor assess an older adult's risk of falling and suggest changes in an older adult's medications or lifestyle to reduce the risk of falling.
- Let doctors know about past falls. A fall can be a sign of a new medical problem that needs attention.

MEDICATION – Many medications have side effects that can affect an older adult's coordination and balance or cause dizziness, confusion or sleepiness.

- Ask a doctor or pharmacist to review all medications, including prescriptions, over-the-counter medicines, and vitamins and minerals.
- Have an up-to-date list of all medications and provide it to doctors during visits.
- Make sure medications are properly labeled and there are clear instructions for usage.

HABITS – Oftentimes, older adults fear that exercise may lead to a fall, but regular physical activity is the first line of defense against falls and fractures. Physical activity strengthens muscles and increases flexibility and balance.

- Many communities offer group exercise classes for older adults, such as water aerobics and tai chi, which uses slow, flowing movements to help relax and coordinate the mind and body. Contact your local community or senior center for classes.

- Mild weight-bearing exercise, like walking or climbing stairs, helps slow bone loss from osteoporosis and increases muscle strength.

FEAR – Many people who fall, even if they are not injured, develop a fear of falling. This fear may cause them to limit their activities, leading to reduced mobility and loss of physical fitness, which in turn increases their actual risk of falling.

- Encourage older adults to stay active and exercise regularly.
- Doctors can refer older adults to physical therapists to help improve walking confidence.

