

VISTA PSYCHOLOGICAL & COUNSELING CENTRE, LLC

Why Dads Make a Difference



The bond between mother and child is one of the most important connections humans can make. But the bond between father and child is just as vital, and includes his support of the mother and the family unit. The impact of a father's presence— or absence— in his children's lives can have lifelong effects. Fortunately, today's culture encourages men to go beyond traditional roles and become involved, caring supporters of their children and their partners.

Studies show dad's influence.

In one study, premature babies showed improved weight gain in the hospital if their fathers visited often.

Research points to other contributions:

- Fathers help their children develop intellectually and socially through physical play. Mothers are more likely to talk and teach. Although this finding may appear to support stereotypical roles, the sharing of support for the child's development by both parents is key.
- Children whose fathers take part in their lives are more likely to have greater educational success and better economic status.
- Teens who feel close to their dads – even if he does not live with them – are far less likely to smoke.
- Having a father who exercises is the single biggest factor in whether or not teens are physically active.
- A healthy, in-

involved father can help ease the impact on children if their mother suffers from depression or other mental health issues, research shows.

Be a healthy role model.

Lydia Furman, MD, a pediatrician at University Hospitals Rainbow Babies & Children's Hospital, offers this advice to help fathers deepen their connection with the children in their lives:

Work with your child's mother to share care and parenting. Your respectful relationship with your partner is both a model for your child of how to treat the ones we love, and collaboration that benefits the child.

Model healthy habits. Exercise regularly, eat a healthy diet and don't smoke. "Actively encourage children to follow a healthy lifestyle. Play physical games with them, offer healthy foods and limit both

your and their TV and video-game time," explains Dr. Furman.

Support schooling.

"Know who your children's teachers are and attend parent-teacher conferences whenever you can" says Dr. Furman. "Volunteer for school activities. Talk with your children about what is going on at school. Help with homework, make sure your child has space and time for schoolwork, praise your child's efforts and help him/her set high but realistic expectations, which promotes self-esteem."

Be a positive parent. Establish clear limits so that children know your expectations and avoid physical punishment, which we now know can lead to aggressive behavior.

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“Encourage children to share their feelings and listen attentively,” Dr. Furman suggests. “Help them set achievable goals and celebrate their accomplishments, share their frustrations and

help them put these inevitable life experiences in perspective.”

Have fun. Dr. Furman shares, “Play games, go places, read together, tell jokes and share plenty of affection. Finally, we all know about ‘quality time,’ but

‘quantity time’ is important too.”

Lydia Furman, MD, *Pediatrician* UH Rainbow Babies & Children Hospital. *Associate Professor*, Case Western Reserve School of Medicine.

Are You Addicted to Food?



....”Those with high addiction scores had suppressed activity in self control regions, mirroring results seen in drug users.

Scientists have developed a food addiction scale based on criteria psychiatrists use to diagnose drug addiction. Scores on the scale correlate with brain activity indicative of addiction. In a study published in 2009 clinical psychologist Ashley Gearhardt, then at Yale University, and her colleagues scanned the brains of 24 women who scored high on the scale and 24 women who scored low while the women looked at images of a chocolate milk shake. Those with high scores had higher levels of activity in brain areas, such as the orbitofrontal cortex and caudate nucleus, known to be involved in craving and motivation. When the women drank the milk shake, those with high addiction scores had suppressed activity in self control regions, mirroring results seen in drug users.

Portions of the addiction scale are paraphrased

below. If you identify with some of these statements, you may be struggling with the addictive qualities of certain foods. Although not everyone agrees food can be truly addictive, many people who self-identify as food addicts benefit from talk therapy or 12 step programs such as Overeaters Anonymous.

- I find that when I start to eat certain foods, I end up eating much more than planned.
- I eat to the point where I feel physically ill.
- I find that when certain foods are unavailable, I go out of my way to obtain them.
- There have been times when I have consumed certain foods so often or in such large quantities that I spent time dealing with nega-

tive feelings from overeating instead of working, spending time with family and friends, or engaging in recreational activities that I enjoy.

- I have had withdrawal symptoms such as agitation, anxiety or other physical symptoms when I cut down or stopped eating certain foods.
- My behavior with respect to food and eating causes me significant distress.
- My food consumption has caused me significant physical problems or made a physical problem worse.
- I have tried to cut down or stop eating certain kinds of food.

Karen Schrock Simring, *Contributing Editor* to *Scientific American Mind*, Nov/Dec 2013.

Help Clinicians Help You

Let's assume that, perhaps guided by your family, partner, a clinician, or someone else, you have made the decision to seek professional treatment for your depression. You've made the appointment with a clinician or have already started treatment. To make your visits most productive, there are three axioms to follow: prepare, monitor, share.

BE PREPARED. Many of us have difficulty recalling what we did or how we felt months, weeks, or even days ago. Factor in depression or anxiety, which conspire to distort memories, and it can be nearly impossible to provide a psychiatrist or therapist with an accurate assessment of how you've been doing when you're put on the spot.

That's why gathering information beforehand can be very helpful. Some things you may want to make note of to help you prepare for your first or subsequent visits:

- When did the problem first start? Did any stresses occur beforehand?
- Have there been variations in your sleep, mood, social activities or other symptoms? If so, can you graph the daily severity of your troubles over past weeks

and months?

- Are there any symptoms or signs you've found especially troubling, including unusual behaviors, physical symptoms, suicidal thoughts, tics, sleep patterns, or substance use? When did they appear?
- How have you tried to manage your symptoms and how has it worked?
- Have you had any problems adhering to prescribed treatments? If so, why? What would help make it easier to stay with the treatment?
- Are you getting the help that you need from family and others? Have they encouraged you or discouraged you? How have you responded?
- Do you still agree with your treatment plan?
- What questions or suggestions do you have for improving your treatment?

MONITOR YOUR MOOD.

Tracking your clinical progress may be among the most important things you can do to recover from depression. The National Network of Depression Centers prioritizes periodic, self-

rated assessments of depression, anxiety, sleep, suicide risk, and substance use, when indicated.

It doesn't have to be complicated. One good method is an old-fashioned, handwritten diary. Another is a simple daily numbering system, with "0" being no symptoms and "10" the worst ever.

The newest approaches involve responding to a brief prompt sent to your smartphone to graph progress for you and your doctor. A variety of apps are available, including Mood 24/7 from John Hopkins University and the Depression and Bipolar Support Alliance's (DBSA) Wellness Tracker.

Remember, too, that the people you are closest to you may offer some of the best insights about how you're doing and what's been working. Make them partners in your treatment.

OPEN UP. The saying in real estate is that only three things really matter: Location, location, location. In this case, it's openness, openness, openness. Being candid about your experiences, rather than trying to put on your "best face," will allow your psychiatrist or therapist to best help you.

And it should be a two-

way street. Keep asking until you understand why certain treatments are being recommended. Don't be reluctant to ask for handouts or articles to take home. Or take notes during your sessions. Knowledge heals!

Getting the most from your time with your psychiatrist or therapist requires coming to appointments prepared, adhering to the agreed-upon treatment between appointments and monitoring your progress, being honest with your practitioner, and continuing with what works once you have reached recovery.

John F. Greden, MD, Psychiatry. The Rachel Upjohn Professor of Psychiatry and Clinical Neurosciences of the Univ. of Michigan Medical School, he is also executive director of the UM Comprehensive Depression Center.



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Go Fish for a Better Mood

Supplementation with long-chain omega-3 fatty acids, commonly found in oil from cold-water fish, could be beneficial for people with bipolar disorder, a new research paper says.

American researchers said fatty acid deficiencies are common with bipolar. They said studies show supplementation with omega-3 fatty acids makes medications for bipolar more effective and reduces the risk of suicide. Omega-3 supplementation is also associated

with reduced heart disease.

Research suggests that the omega-3 fatty acids found in fish oil help protect heart health by blunting the body's "fight or flight" response to mental stress. That means the heart and sympathetic nervous system took less of a beating in study participants who took 9 grams of fish oil daily. Good sources of omega-3s include: salmon, bluefin tuna, sardines, flaxseed, walnuts, kidney beans, and soybeans (which you can find as a

crunchy snack food).

The study, which appeared in the journal of *Current Drug Discovery Technologies*, was entitled "Long-chain omega-3 fatty acid deficiency in mood disorders: Rationale for treatment and prevention."

