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**NETNEWS**

*LOOKING FOR FARM FRESH FOOD?*

Do the warm days of summer make you yearn for sweet native tomatoes and juicy, fresh strawberries?

These delicious summer foods and other Connecticut-grown fruits and vegetables are available at more than one hundred Farmers’ Market throughout the state this summer and, in some locations, through the fall.


Many Connecticut Farmers’ Markets accept EBT/SNAP debit cards. EBT is the Electronic Benefit Transfer Project and SNAP is the Supplemental Nutrition Assistance Program which was formerly known as Food Stamps. Details online at [http://www.ct.gov/dss/cwp/view.asp?A=2345&Q=315396](http://www.ct.gov/dss/cwp/view.asp?A=2345&Q=315396)


The state of Connecticut supports a benefits program that offers vouchers to purchase fruits and vegetables at “authorized” Connecticut Farmers’ Markets to participants in the WIC (Women, Infants and Children) program, who are identified as “nutritionally at risk,” and to participants in the Senior Farmers’ Market Nutrition Program (SFMNP), a supplemental food program for low income seniors. A description of the program is online at [http://www.ct.gov/doag/cwp/view.asp?a=3260&q=399020](http://www.ct.gov/doag/cwp/view.asp?a=3260&q=399020)

The U. S. Department of Agriculture's online market search allows you to look for farmers markets throughout the country by location, products available, and payments accepted. This search feature is online at [http://search.ams.usda.gov/farmersmarkets/](http://search.ams.usda.gov/farmersmarkets/)
What Are the Effects of Post-Traumatic Stress Disorder?

When a sudden, violent tragedy occurs in Colorado or in a distant country, the news travels with remarkable speed. The individuals directly impacted and their family and friends experience distressing, painful emotions. Even experienced, trained first responders react with strong, upsetting emotions.

“The immediate impact is a sense of shock, disbelief, and confusion” and subsequent “heightened emotions such as fear, guilt, anger, or grief—or a ‘shut-down’ response of feeling nothing or numb, both of which are normal reactions in the first few hours and days,” said Dr. Julian Ford, professor of psychiatry at the University of Connecticut School of Medicine, on the University of Connecticut Health Center blog at http://today.uconn.edu/blog/2012/07/coping-with-tragedy/ Dr. Ford is an expert on post-traumatic stress disorder.

According to Dr. Ford, those who were at the site of the disaster may act “angrier, more withdrawn, more tense, less communicative” due to the effects of “persistent post-traumatic stress disorder (PTSD).”

“Crucial to emotional recovery is information, states Dr. Ford, to enable people to anticipate their normal reactions and recognize signs that they may need to talk to someone qualified to help them.”

Dr. Ford’s office publishes a brief, online brochure on “Managing Stress and Recovering from Trauma” at http://today.uconn.edu/wp-content/uploads/2012/07/Stress-Brochure-pp196197.pdf

Other PTSD Information Sources

Extensive information about the effects and treatment of post-traumatic stress disorder is offered on the website of the National Center for PTSD, a program of the United States Department of Veterans’ Affairs, at http://www.ptsd.va.gov/public/index.asp

The Disaster Distress Helpline at http://disasterdistress.samhsa.gov/ and via telephone at 1-800-985-5990, offers free, confidential “crisis counseling and support” to those experiencing signs of distress after a disaster. It is a national hotline available throughout the year 24/7. The website includes information about warning signs of distress, coping tips, and risk factors for distress for specific types of disasters such as tornadoes, hurricanes, and severe storms. It was created by the federal government’s Substance Abuse and Mental Health Services Administration. An online brochure at http://disasterdistress.samhsa.gov/media/745/ddh_brochure.pdf explains the Helpline service and conveys tips for coping with distress after a disaster.

Medlineplus, the National Library of Medicine’s website for health consumers, links to a wide range of resources about Post-Traumatic Stress Disorder at http://www.nlm.nih.gov/medlineplus/posttraumaticstressdisorder.html In addition to an overview of PTSD, there are resources about coping with PTSD, treatments, rehabilitation and recovery, research, clinical trials, and its effect on children.

SEARCHING FOR CANCER SUPPORT SERVICES?

The National Cancer Institute offers an online resource to help those seeking cancer support services.

The National Cancer Institute’s Support Services Locator at [http://supportorgs.cancer.gov/home.aspx?lang=1](http://supportorgs.cancer.gov/home.aspx?lang=1) is a searchable, online source of more than one hundred national organizations that provide help with general living expenses, medication costs, treatment expenses, counseling, lodging and travel, educational programs, medical supplies, advocacy, and patient/family support groups.

The National Cancer Institute, a component of the National Institutes of Health, is “the Federal Government's principal agency for cancer research and training.”

The Support Services Locator website is available in both Spanish and English.

The website is searchable by cancer type, organization name, or keyword. Results are divided by category in the left hand column.

Organizations may also be selected by type of service offered (e.g. advocacy, educational programs, scholarships and camps, medications, counseling, health insurance, etc.)

The organizations listed are national and nonprofit and “share common goals with the National Cancer Institute.” Organizations may request their inclusion in the Support Services Locator website. Organization requests are reviewed by the National Cancer Institute.

Each organization listing includes detailed contact information, a description of the organization and its services, and the categories of service it provides.

Selected results may be printed or emailed.

Additional opportunities to ask questions of the National Cancer Institute at [http://www.cancer.gov/global/contact](http://www.cancer.gov/global/contact) include an 800 phone number (1-800-4-CANCER / 1-800-422-6237) with Spanish and English speaking information specialists, email service, and LiveHelp Online Chat.

The American Cancer Society’s support services are described on their website at [http://www.cancer.org/Treatment/SupportProgramsServices/index](http://www.cancer.org/Treatment/SupportProgramsServices/index)

The organization’s website also offers a search page at [http://www.cancer.org/treatment/supportprogramsservices/app/resource-search](http://www.cancer.org/treatment/supportprogramsservices/app/resource-search) which allows searches by city, state, keyword, and support program type.
A NEW PARENTING WEBSITE FOR YOUNG FAMILIES

Where can parents locate research-focused information about how young children learn and grow? Where can they find suggestions for safe family activities to support their children’s development?

“NAEYC for Families” at http://families.naeyc.org/ is a new website especially for parents of children from birth to age 8.

Created by the National Association for the Education of Young Children (NAEYC), http://www.naeyc.org/ an accrediting organization for preschool programs with a Connecticut chapter, the website offers specific, practical suggestions for parent-child activities that encourage healthy child growth and development. Three categories of activities are offered: Child Development, Reading and Writing, Music and Math.

The website describes characteristics of quality preschool programs for infants, toddlers, and younger school-age children.

The website features specifics on the NAEYC standards used to evaluate preschool programs in areas such as encouraging positive child-adult relationships, implementing a curriculum that is appropriate for the child’s level of development, effective teaching patterns and styles, assuring children’s health and safety, collaborating with parents, utilizing community resources such as parks and libraries, having qualified teaching staff and supervisors, and retaining a safe and appropriate physical environment.

The website includes a searchable database, by location, of NAEYC accredited programs throughout the country.

Also featured is “Families Today,” a web page by pediatricians T. Barry Brazelton and Joshua Sparrow. On this webpage, Drs. Brazelton and Sparrow respond to questions submitted by parents such as effective parenting when the other parent is deployed overseas, maintaining good father-son relations when parents are divorced and not communicating, and advice about a baby who no longer sleeps through the night.

WHO PROVIDES MENTAL HEALTH SERVICES AT CONNECTICUT SCHOOLS?

How can parents access mental health services for their children at Connecticut schools? Who provides these services at schools in Connecticut? How does mental health relate to a child’s learning experience?

A new area of an authoritative website provides resources and information on these topics, especially for concerned Connecticut parents.

“Mental Health in Schools,” on the http://www.kidsmentalhealthinfo.com website has a resource library, answers frequently asked questions, and links to a range of Connecticut mental health resources.

According to http://www.kidsmentalhealthinfo.com, a publication of the Child Health and Development Institute of Connecticut, Inc., approximately 120,000 Connecticut children have been diagnosed with a mental health condition. A small percentage of these children, fewer than 20 per cent, are receiving assistance. Connecticut schools are an important source of guidance and services for these children.

The Mental Health in Schools section of the website incorporates information about school violence, at-risk students who may be expelled or suspended, and bullying.
There are frequently-asked questions...and answers...such as ones about warning signs that mental health issues may be the cause of a child’s school problems, about the process of requesting mental health services through a child’s school, screening and assessment, eligibility requirements for special education services, and the types of school-based mental health services and providers.

The website is published in Spanish and English. The needs of pre-schoolers through adolescents are addressed.

Another resource.....

The Connecticut Parent Advocacy Center at http://www.cpacinc.org/ is a “statewide nonprofit organization that offers information and support to families of children with any disability or chronic illness, ages birth to 26.”

The organization’s Parent Consultants, are themselves “parents of children with disabilities [who are] experienced and well-trained in special education law.” They offer guidance to parents of children with special needs. This is a free, confidential service.

CPAC also offers parent training workshops. Its website includes a newsletter and links to helpful resources.

CPAC’s toll-free phone number is 1-800-445-2722. The organization’s email address is cpac@cpacinc.org

FOR YOUR CONSIDERATION

The following titles are recommended to public libraries and other libraries providing consumer health information services. They are not part of the UCONN Health Center Library collection.


Substances such as alcohol and drugs can be addictive, but behaviors can be as well.

Gambling is a distinct problem when it becomes a priority in life above family, friends, and health. It may result in financial problems, family dissension, and conflicts with friends.

Despite its negative effects, gamblers may experience anger, doubt, and other strong emotions while contemplating quitting gambling. They may become irritable when trying to stop or cut down.

For those addicted to gambling, Dr. Shaffer’s self-help guide is a practical, readable, realistic resource.

At the outset, he provides three options to those in definite need of controlling their gambling behavior: Do nothing, Make changes independently using self-help techniques, or Seek support for changing gambling behavior.

He acknowledges that there is “no ‘right’ way to recover from addiction,” but offers specific self-help recommendations for those ready to change their behavior, including charts, guides to journaling, and written exercises for overcoming this challenging behavior. He helps gamblers identify triggers that led to their risky behavior and helps set realistic, time-focused goals.

He admits the difficulty of the recovery process and states that it may need to be attempted several times.
Since gambling addiction is often accompanied by other emotional, mental health problems, and substance abuse problems, Dr. Shaffer focuses on these as well. He explains anxiety, mood disorders, impulse control problems, and substance abuse.

Typical case histories outline the challenges, wrong turns, and successes of others who have succeeded in overcoming gambling addiction.

Despite the challenges, he assures readers that they can recover, even from patterns of serious, heavy gambling.


It’s pretty scary to read the newspaper, watch television, or receive tweets these days. Instant communication means instant notification of the dangers lurking nearby. We receive rapid warnings of approaching bacteria and diseases, environmental threats, discovery of medication side effects, as well as natural disasters.

We have a heightened awareness of disasters because of the rapid spread of news about them.

Since we cannot always remain on high alert, we need to evaluate and establish the relative urgency of these frequent messages.

Journalist, author, and Harvard University Continuing Education instructor David Ropeik guides readers in determining just how dangerous a widely publicized risk actually is. He helps readers to make personal health decisions when “fears don’t seem to match the facts” (p. xii) and “some risks feel scarier than others.”

In a readable, sometimes casual style, his book analyzes the pattern of human responses to fear, encompassing both rational reasoning and rapid gut reactions. He explains the physical responses in the human brain to perception of fear and its origin in the amygdala. He describes how mental shortcuts, sometimes when facts are lacking, help people make quick decisions.

This “Perception Gap” between fact and emotional reactions prevents health consumers from having an accurate analysis of health dangers we face.

Health decisions may be impeded by the fallacy of research based on small sample sizes and the difficulty of figuring statistical comparisons rapidly. Health consumers may base decisions on recent similar dangerous situations even when the current situation is not comparable.

Decisions made without necessary knowledge may have public health risks. Citizens may pressure legislators to support actions they believe to be worthwhile but may not be based on reason. These decisions may be subjective determinations, based on feelings, rather than rationality.

But rational decision making, involving further study and research, may be hampered by the need to make immediate decisions on many urgent occasions. Individuals’ definition of risk and willingness to experience risk varies. A situation perceived as dangerous by one person may not appear dangerous to another.

According to Mr. Ropeik, “bounded rationality” upon which decisions are made may be influenced by lack of knowledge, lack of time, and limited array of facts…and even facts are not convincing for many people.

He concludes the book with specific recommendations for analyzing news reports and “closing the Perception Gap.”

Other resources to help readers become informed health consumers appear on the Healthnet website at [http://library.uchc.edu/departm/hnet/](http://library.uchc.edu/departm/hnet/) The website includes online Resources Guides about Navigating the Health Care System, Patient Advocacy, Medical Information in Plain Language, and Medical Research: What You Need to Know.

Are you or a family member about to be hospitalized?

So many medical matters to explore…so many questions to ask. At a stressful time like this it’s hard to think of all the important details to consider.

When approaching an imminent hospital stay, there is no time for lengthy, wordy explanations of health care policies or patient rights. Quick, forthright action is needed.

Here is a book to help you and your family members through the unfamiliar maze of the health care system when facing hospitalization.

It is intended to help you function as “your own [or your family member’s] patient advocate.”

These are the questions you would remember to ask if you had lots of time to consider them and were not in the midst of an extremely stressful situation.

Since hospitals are especially vulnerable to medical errors during shift changes, when care changes from one physician to another, or during the discharge process, it is important to remain alert and actively involved, guard against miscommunication, and keep your own essential lists and medical records.

For this situation, Ms. Bailey provides an attractively designed, straightforward, spiral-bound book, with short, simple checklists, for patients and families to keep at hand.

Brief, clear, and succinct, and based on real life experiences, this book contains “10 Simple Hospital Checklists” to help families record essential information during a hospital stay, keep records of medications given, adverse reactions to them, procedures done, names of doctors who treat your family member, and discharge plans.

According to Ms. Bailey, the “checklists”…[are designed to] “help you collect, organize…understand the big picture and the routine daily details involved in your care.” (p. 4)

Inspired by a series of serious mishaps her father suffered while a hospital patient, Ms. Bailey’s systematic approach to being an alert hospital patient is based on her extremely organized way of managing the production of a multitude of music videos.

Her experience as a patient advocate and author of The Patient’s Checklist inspired her to study for a Masters in Health Advocacy at Sarah Lawrence College and work as a patient representative at a large teaching hospital.


Death may not be a sudden, shocking event. Because of advances in medicine, many families experience the death of a loved one as a long process rather than an unexpected event. This prolonged encounter becomes a very different experience than the quick, startling loss when a friend or family member dies suddenly.

“New grief” as this book’s authors describe it, in which “a loved one live[s] with a terminal diagnosis for an extended period of time,” has become more common. This “process” deeply affects the patient as well as the family. Death often becomes a protracted “family matter” that plays an important role in the lives of friends and relatives for a lengthy period.
Psychologists and authors Barbara Okun and Joseph Nowinski have counseled a great many families who have experienced a lengthy “new grief.” Dr. Okun is a professor of counseling psychology at Northeastern University and a clinical instructor at Harvard Medical School. Dr. Nowinski, also a practicing clinical psychologist, has held professorships at the University of California, San Francisco School of Medicine, and the University of Connecticut.

In a June 12, 2012 email to Healthnet librarians, Dr. Joseph Nowinski wrote:

“Barbara Okun and I decided to write the book as a result of both our professional and personal experiences. What we learned from these was that not only was modern medicine transforming the nature of death and dying, but that people were ill-prepared for what to expect and what to do.

What we call “the new grief” begins with a terminal diagnosis—but it only begins there.

Using interviews with both terminally ill patients and their families, we set out to create a guide or “road map” that would give families concrete advice as to what lay ahead and the steps that they can take to cope with what is likely to be a long and arduous process.”

The authors guide family members through five stages of extended grief: Crisis, Unity, Upheaval, Resolution, and Renewal. The authors’ recommendations for coping are practical, realistic ones, enhanced by real life stories of families’ experiences. They deal with: requesting support even when you would usually hesitate to do so, organizing medical reports, putting finances in order, coping with changing family roles, discussing end-of-life choices with the ill person, communicating effectively with friends and relatives, and finally celebrating the life of a deceased family member.

The “References and Recommended Reading” section that concludes the book cites and describes valuable, relevant books, such as The Anatomy of Hope (Jerome Groopman), The Last Lectures (Randy Pausch), and Loving and Leaving the Good Life (Helen Nearing).