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## Statewide/ Regional

### Got the holiday blues? This psychotherapist makes house calls

Marissa Yaremich, Register Staff 12/19/2004

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#### 'Tis the season to be jolly?

At first glance, the holiday adage's joyful meaning appears accurate as shoppers bustle among ho-ho-ho-ing Santas, jingling radio carols and smiling gift wrappers.

But caught within the cheerful cyclone, according to area psychotherapists, is a torrent of grieving, depressed and anxious individuals who wish the jolliness would just go away.

"Holidays can be a tough time of year for people," said New Haven psychotherapist Jeffrey P. Kerekes. "When you're supposed to be happy around the holidays and you don't (feel that way), it can make you feel worse."

While holiday blues are generally short-lived, he noted, it can lead to debilitating depression and even suicide.

Kerekes said he won't hesitate to grab his coat and notebook to make an old-fashioned house call to assess his clients' situations.

"Part of my philosophy is making people comfortable," he said, noting that he can't always determine the depth of the person's emotions during an office visit.

When a white Christmas turns blue, many times people brush off their symptoms to avoid the stigma of depression.

Don't, say mental health professionals.

"Recognizing that you don't have to be a certain way during the holidays ... there's a sense of empowerment in that," said Peter Lynch, associate executive director of ALSO/Cornerstone Inc., a New Haven agency that helps the mentally ill.

Lynch and Kerekes said understanding whether the blues are caused by psychological, financial or physical factors, or a combination, is the first step toward settling feelings.

Loss is usually the most menacing psychological factor, the psychotherapists said.

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The first of many holidays to come after the death of a loved one, whether it's a relative or friend, often unleashes unexplored emotions that can be overwhelming, Lynch noted.



Children of a recently divorced couple also may feel left out or abandoned as they watch their peers celebrate the holidays with both parents present.



Simply trying too hard not to disappoint anyone either financially or in terms of family traditions, Kerekes added, increases stress and anxiety.



"There are these basic fears of not having enough or giving enough food or gifts," said Kerekes, noting that anxiety disorders are the top mental health disorder in the nation, followed by depression.



People may also avoid celebrating with families in an effort to avoid similar emotional hassles or revisiting lingering fights.



All these pressures, Kerekes said, typically manifest themselves in ways similar to clinical depression, which does not subside after the holidays but can worsen during them.

Symptoms of holiday blues or depression include headaches, low self-esteem, sleepiness, insomnia, a lost or embellished appetite, low energy, nervous energy, poor concentration, isolation and agitation. Suicidal tendencies are an extreme case, Kerekes noted, which need immediate intervention.

Anxiety-related symptoms also include muscle tension, panic attacks and excessive worrying.

When a family lost their patriarch a couple of years ago, Lynch said the family dealt with his loss by continuing to hang the man's Christmas stocking.

One by one, the deceased man's surviving adult relatives and grandchildren would drop a note detailing a special memory of him or saying, or place a money envelope in the stocking as they arrived for Christmas.

As the family exchanged gifts, they read the notes and designated which charity the man would have liked them to donate each monetary gift.

"You don't have to do the holidays the same way you always do," said Lynch, who also teaches courses about death and bereavement at the University of Connecticut School of Social Work.

A parent experiencing the blues or depression after a spouse's death, however, should ensure that their sadness doesn't translate into a second loss for their children.

Enlist a family member or friend to take the kids for a day to bake cookies, shop or decorate their tree, if the thought of participating is too much for the grieving parent, he noted.

If you want to be engaged in the holidays, but have trouble speaking about it, Lynch said simply placing a centerpiece or a candle at the dinner table can honor the loved one without having to "erase" their memory.

"I never thought of it that way," was how Jessica Freibott of New Haven reacted to the candle suggestion.

Freibott and 11 others associated with ALSO/Cornerstone sat through a 45-minute session Friday with Lynch. Lynch encouraged the clients and staff members of the organization to talk about their deceased loved ones during gatherings with family and friends.

Freibott, 26, said that she's missing her grandmother this holiday season.

"This is the second Christmas without her ... knowing she's gone is hard," she said.



Gregory McDaniel, an assistant program director for a division of ALSO/Cornerstone, said that his family will remember a cousin, Sam, who died in a motorcycle accident.

"It's positive reinforcement to talk about a loved one whose passed. It opens doors and there's closure. To not talk about it, that's worse," he said.

During Kerekes' house calls, he said, he helps people deal with their situations by teaching them to "compartmentalize" their surroundings.

If they're feeling stressed for the holidays and a messy house heightens the anxiety, he suggests they manage mess by making piles that they can go through individually in the following days.

"Its not so overwhelming when you break down issues," he advised.

The house visits also are a means for Kerekes to evaluate whether he should recommend they visit a doctor for medical treatment, including medication.

"Some people take this as a weakness, but really it takes a lot of strength to get up and go talk to someone you don't know," Kerekes said.

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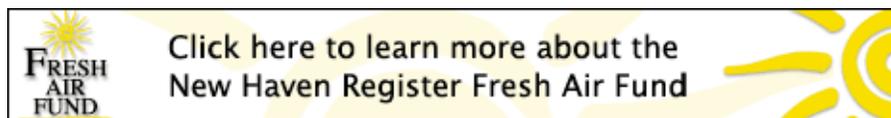
If you're not in crisis but need to hear a friendly voice this holiday season, call one of these "warm lines," operated by area mental health agencies:

- Connecticut Mental Health Center, New Haven, (800) 258-1528 (5 to 9 p.m.)
- Birmingham Group, Ansonia, 732-2004
- River Valley Services, Middletown, (800) 316-9145

For additional services offered by the state Department of Mental Health and Addiction Services in this area, go to [www.dmhas.state.ct.us/Region2.htm](http://www.dmhas.state.ct.us/Region2.htm).

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