



From the Director's Desk



Dear Reader,

May is Mental Health Awareness month! I had grand plans to write about the importance of prioritizing mental health, about the efforts of my team in the fight against the stigma of mental health, and I planned on throwing a few metaphors out there to highlight the fact that we have a lot more work to do to increase the awareness of mental health issues.

However, I've decided to share something a bit more personal, more real, and more pressing about where we are in May 2021 when it comes to mental health access and availability of services. (this is where I take a slow.... deep..... breath....)

The timing of what I'm about to share could not be more appropriate, exciting, or frustrating (depending on its impact on you) as it relates to

our clinic. We are BACK OPEN.

Some of you know and some of you don't, but I made the impossible decision in late March to temporarily halt any requests for new services. Why? Our team was being overwhelmed with requests, burnout was a major concern, and we simply could not meet the demand that has surged in 2021. For the first time in 20 years, my current place of employment (in this case, the one I proudly run) closed their doors to new requests for services. This was one of the toughest professional decisions I've had to make since I opened up this practice in 2014, and I hope I never have to do it again.

My amazing practice manager, Jessica Kalin, who operates as the first point of contact for all new requests, and who is adored by our staff and clients, was more often the person who had to kindly say NO to people in need and, ultimately, did her best to offer the most credible referral possible. This was an unenviable responsibility put on her but I know she handled it with class and compassion. I hope any of you who interacted with her during the last 45 days experienced the same level of outstanding customer service, kindness and patience she unwaveringly operates with when we are in normal business mode. Jessica, THANK YOU for everything you did to support the families and adults who contacted us and for staying in communication with them.

As wonderful as I believe our clinic is, and as outstanding as our therapists are, this is not why we had so many requests in the first quarter of 2021. We are not at all alone when it comes to requests for mental health services exceeding the resources available. Every list serve I am on, and every clinical director I speak with, I learn of identical struggles to meet the mental needs of our communities. The trend of wait lists, clinics putting a freeze on new patients, limited appointment availability, and psychiatric hospitals having no bed availability is happening all around the country. Waitlist for psychiatrists have been well documented in the media and if you're looking for a pediatric psychiatrist, the wait is even longer.

It broke my heart to pull down our screening process on our website in late March, but my staff understood and supported my decision. I have no doubt that if I asked each of my clinicians to see one or two more people over the last 45 days, they would have, without question. But burn out is a real thing in any job, ours is no different.

As the owner, as a fellow therapist, but mostly as the clinical director, it is not just my job to make sure that the services we provide are the best, it's my mission to make sure that my staff are happy, supported and prepared to serve you in the healthiest ways possible. If the mental health of my staff was not as important as the mental health of the people we serve, then I'm failing at my job....and they will fail at theirs. Mental health awareness is for everyone, even our clinicians and support staff.

I couldn't be more proud of everyone who works in our clinic and the ways they take care of themselves year round. We have several 1st time moms on our staff with young children. They balance being the primary caregiver and also being an amazing therapist (or practice manager). I don't know how they do it but it's inspiring (Happy Mother's Day to you all). Our clinical family has had its share of family tragedies and medical scares. And yet, every Thursday, the entire team comes together to laugh, cry, and support each other, and learn from one another. That sense of team and professional community and what we offer each other is the epitome of mental health awareness.

As of May 5, 2021, we opened up our doors again for new patients, we just have added several more group therapies for this summer (see below and check out our EVENTS section of the website), we have several new clinicians joining us this summer, and we have some exciting news about a second location that I will reveal next month, along with our plan to offer in-person services this summer! We are grateful for how patient everyone has been with us for the last 45 days, we are grateful that so many of you continue to put your trust in

our team to care for you, a family member, or a neighbor. It's not something we take for granted, and we will continue to work hard every single day to earn your trust.

Every month is Mental Health Awareness month in our offices, so if we can provide support to you directly we will. If for someone reason we can't, Jessica and the rest of our staff will do our best to provide you the most appropriate and thoughtful referrals possible. If you or someone you know is in crisis, we hope that you get the help you need and deserve.

Face your fears. Live with uncertainty. Take Control of your life.

Dr. Josh Spitalnick, CEO/Clinical Director
Licensed Psychologist
Board Certified in Behavioral and Cognitive Psychology

I can always be reached at drspitalnick@anxietyatl.com if you have any questions, concerns, or positive news to share!

If you want to send a kind message to Jessica Kalin, our Practice Manager, click here to visit her bio and contact information.

We See You

We believe that having discussions about inclusiveness, equity, and diversity makes us a stronger team and creates a work culture that is more validating and empowering for our staff, our clients, and the community we serve. Aligned with this value system, this section is dedicated to sharing important resources related to mental health disparities, clinical issues specific to diverse populations, and the impact of cultural issues in psychotherapy.

The Importance of Mental Health Awareness

Jen Powell, Licensed Professional Counselor
Anxiety, OCD, and Trauma Specialist

Mental Health Awareness Month has been observed every May since 1949, which reminds us that mental health is an important part of overall health and well-being. But what does the term “mental health” really mean? Mental health includes our emotional, psychological, and social well-being. It affects how we think, feel, and act. It also helps determine how we handle stress, relate to others, and make healthy choices. Mental health is important at every stage of life, from childhood and adolescence through adulthood.



One of the most rewarding aspects of my job as a mental health professional is to see the expression on the face of a client when they realize that they are not alone in what they are struggling with. This can be upon learning how common their diagnosis is from their therapist, or when talking to a support group member, or simply after a loved one shares that they too have had similar struggles. Safety in numbers, if you will.

Some of the most basic mental health statistics highlight just how "not alone" you are when you realize how many people struggle with mental health:

- mental health disorders account for several of the top causes of disability in established market economies
- an estimated 26% of Americans ages 18+ suffer from a diagnosable mental disorder in a given year
- women are nearly 2x as likely to suffer from major depression
- ~ 20% of adults have an anxiety disorder in a given year
- the average delay between the onset of mental illness symptoms and treatment is 11 years (yes, 11 years!)

It can be hard to “see” when someone is struggling with a mental health disorder. This is why people of all ages need to feel safe and supported in sharing that even though they may seem to be “okay” on the outside, they are, in fact, struggling on the inside. They need to know that it doesn’t make them weak, it makes them courageous to ask for help.

It can be incredibly difficult for an individual to acknowledge that they are in need of treatment for a mental health condition, and even more so to ask for help. I advocate that no matter the struggle, that we view each other through a lens of compassion, understanding, and acknowledgment that sometimes, it’s okay to not be “okay.”

[Click here to read the full article by Jen Powell, LPC](#)

Science Matters

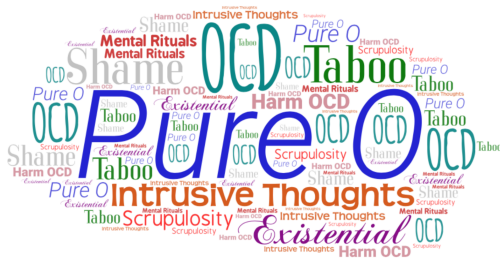
"Pure O" OCD: Why are there quotation marks around it?

by Dr. Josh Spitalnick, Licensed Psychologist
Anxiety, OCD, Exposure Therapy Specialist

*****This article is an abbreviated version of the one posted on our website. See below to access the complete article*****

The phrases “Pure O” or “purely obsessional” OCD have been used interchangeably over the last 10-15 years in prominent OCD books, in the scientific literature, online, in social media among those with lived experience, and among those who are providers and advocates who, themselves, have suffered with “Pure O” OCD.

“Pure O” is most commonly believed to consist of non-stop repetitive thoughts (obsessions) that are disturbing and overwhelming about topics that are existential, perverse, taboo, sexualized, or seemingly harm-focused. With non-stop obsessing, the assumption is that, collectively, everything in the mind is obsessional. This is one



explanation for the term “Pure O.” This, however, is not true, even if it all feels obsessional. There are almost always compulsions associated with obsessions, but they are not observable because they are of the mind. These actions of the mind are

called **mental rituals**.

"Pure O" is not an official clinical term, nor is it a formal diagnosis. Disagreement within the professional community continues as to whether the term is helpful or hurtful to OCD sufferers. Understanding the difference between obsessions (unwanted recurring “stuff”) and mental rituals remains a major challenge for so many, including novice therapists.

So what do we do with the term “Pure O” OCD if there is no such thing as OCD with only obsessions? Does it subtly or directly suggest there are no compulsions (which I’m NOT suggesting)? Kind of. Will it ever become a more formal recognized sub-theme of OCD? Unlikely. Then, why keep using the term?

Here is why: **it can save lives!** This is not my line but one shared by some of my friends, colleagues, and patients for whom learning about the concept saved their lives (so I now proudly use the term). How? By finding it online and then finding a credible OCD specialist. How else? By helping someone feel more understood, instilling hope, and encouraging “Pure O” sufferers to not give up, leading to them seek out effective treatment for their OCD. This will undeniably get someone one step closer to taking back their life.

This is why I am very comfortable talking about this challenging, misunderstood topic. This is why "Pure O" is all over our website. This is why many of my colleagues acknowledge the term (even if with reluctance). Dedication to science, commitment to compassionate care, and willingness to meet the person where they are is a recipe for effective treatment I can always support, and I don’t believe using the term “Pure O” undermines this one bit. In fact, it reinforces it (so says the behaviorist in me!)

[To read the full "Pure O" article by Dr. Spitalnick, click here](#)

Staff News and Events

In addition to our primary clinical roles, our team works hard to stay current with evidence-based trainings, while also providing support, education, and advocacy to our colleagues, the communities we serve, and the scientific field of OCD, anxiety, and mental health. Below are many of the recent engagements or contributions by the staff at Anxiety Specialists of Atlanta.

Lizzie Booher, APC virtually attended: "Fear and Flexibility: Integrating ACT with ERP to Shape Bravery-Based Behavior" training by Dr. Lisa Coyne through the OCD NJ Conference.

Lizzie Booher, APC participated in a Q&A session with current Agnes Scott College students studying psychology about careers in psychology, specifically mental health counseling.

Lizzie Booher, APC participated in a ABPP (American Board of Professional Psychology) candidate examination assisting candidate in evaluation of supervisory skills.

Dr. Katie Cullum presented "Mindfulness, Acceptance, and COVID-19: ACT via Telehealth in an Age of Uncertainty" at the Georgia Psychological Association annual conference.

Dr. Megan Faye virtually attended: "Fear and Flexibility: Integrating ACT with ERP to Shape Bravery-Based Behavior" training by Dr. Lisa Coyne through the OCD NJ Conference.

Dr. Josh Spitalnick presented to the NOCD therapist network on the "Ethics of becoming an OCD Therapist."

Dr. Josh Spitalnick attended a S.P.A.C.E. focused ARFID (avoidant restrictive food intake disorder) and FTL (failure to launch) day long conference led by Eli Leibowitz, PhD and Yale University..

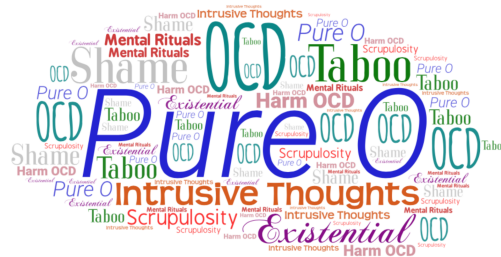
Dr. Josh Spitalnick conducted several ABPP (American Board

of Professional Psychology) oral examinations, including serving in the committee chair role.

Dr. Josh Spitalnick presented on the topic: Cognitive-Behavioral Supervision to 1st year residents in the Emory Department of Psychiatry.

Group Therapy Services

Our **Adult OCD Support/Skills Group**, led by Dr. Josh Spitalnick, finishes in May and registration for the next cycle is now open. The next group begins Wednesday, June 9, 2021.



[**CLICK HERE to get full details and Register**](#)

Our **Teen Girl Empowerment Group** (ages 13-16), led by Dr. Megan Faye is open for registration. The next group begins Wednesday, June 9, 2021.



[CLICK HERE to get full details and Register](#)

Our **Parenting Support and Skills Group: Managing Conflict at Home**, led by Dr. Cameron Mosley, begins June 16, 2021, and registration is now open.

Dr. Mosley is certified in Parent-Child Interaction Therapy (PCIT), a behavioral treatment for caregivers of children displaying problem behaviors. This course is designed to help caregivers modify their children's problematic behaviors, such as tantrums, lying, and not following directions. Caregivers will learn to confidently manage behaviors while maintaining a positive relationship with their child.



[CLICK HERE to get full details and Register](#)

Our **Adult Health Anxiety Support/Skills Group**, led by Dr. Josh Spitalnick finishes in May and registration for the next cycle is now open. The next group begins Wednesday, June 16, 2021.



[CLICK HERE to get full details and Register](#)

Check out our [EVENTS](#) section of our website for descriptions, full flyers, and registration details for these and all other upcoming groups and events.



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