



Quality Employee Assistance Programs.

## Balanced Living – November 2019

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### How to Lower Your Financial Stress



Money worries are among the most common sources of personal and family stress, according to Consumer Federation of America (CFA).

Living with too much of any kind of pressure on a daily basis can take an emotional and physical toll, contributing to sleepless nights, backaches or headaches or, over time, even life-threatening diseases, such as high blood pressure or heart disease.

Whether your credit card balances are soaring, or you and your partner are arguing constantly over nickels and dimes, there are things you can do to relieve financial stress.

### Take a breather

The CFA suggests taking these steps to ease money-related stress:

- Focus on what you have, not on how much you're lacking. List all your possessions, including material things, your health and your relationships.
- Eliminate clutter in your life. Tossing out what you don't need and organizing the rest also can tidy up your emotions. So can meditating or sharing your feelings with a nonjudgmental person.
- Take care of yourself physically. Exercise is one of the best stress reducers. Eat a balanced, healthy diet.

### Talk it out

If conflicts with your significant other over money matters are a primary source of stress, talk it over honestly and openly. Write down your short- and long-term financial goals to learn where the two of you can focus your discussions. Put your relationship first, while nurturing each other's needs. Compromise, if necessary.

### Take action

Exercise, positive thoughts and conversation may help in the short term, but if you aren't fixing the cause of your money worries, the stress will bounce right back into your life. You need to take action if the money coming in is less than the money going out; if you're able to make only minimum payments on your credit cards; or you're relying on plastic for essentials, such as food or rent.

To improve your financial health, the CFA suggests:

- Set up a budget. Write down where all your money is going -- mortgage and car payments, food, gas, telephone, clothing. Then, see what can be adjusted so you can live within your means. Create a new spending plan and stick with it. If there's nothing left to trim from your budget, you may need to think about new income sources.
- Stop taking on new debt, immediately. If this means not eating out, not indulging in expensive entertainment or giving up a second car and taking public transportation, then so be it. Learn if you qualify for public or private financial assistance. Use low-interest savings to pay down high-interest debt. Debt can be very expensive to carry; once it's paid off, your payments can go to savings instead.
- Get in touch with any creditors. If you can't pay what they want, explain your situation and ask about setting up an acceptable payment schedule. They may be willing to work with you. Stopping the nagging phone calls from creditors can significantly ease stress.
- Get help, if necessary. Be wary of for-profit or non-credentialed counseling organizations, especially if they ask for a large advance payment.

A safer bet is the National Foundation for Credit Counseling Service (NFCC). For little or no cost, an NFCC counselor can help you develop a budget and a plan for addressing your total financial situation. Visit the NFCC Web site and click on "getting help."

It is possible to get out of debt, though doing so may require new ways of thinking and acting. But as soon as you start taking decisive steps, you should feel the financial stress start to ease.

## Healthy Changes for Staying Young

Time takes its toll on a body, but you don't have to sit back and let the effects of aging take place without a fight.

"You have the power to control how much and how fast the aging process works on your body. You can even reverse some of the damage that has already been done," says Tom Monte, author of "Staying Young: How To Prevent, Slow or Reverse More than 60 Signs of Aging."

The aging process is caused by oxidation, the breakdown of cells and tissues as they mingle with oxygen. "It's just like the rust in a car," Mr. Monte says.

You can fight that process by adopting healthful lifestyle habits that:

- Help your immune system fight disease.
- Build up reserves of lean muscle mass.
- Prevent or slow degenerative changes.
- Rebuild damaged tissue and restore lost function.

### Help yourself

Anti-aging strategies can add to the quality of your life and health no matter how old you are, Mr. Monte says. Studies have found people in their 40s, 50s and 60s who start strength-training programs gain increased protection from injury.

Here are Mr. Monte's top 12 strategies for staying younger, longer:

Don't smoke. Each puff hastens aging's degenerative processes. Plus, smoking lowers your aerobic capacity, making it harder for you to do the things you enjoy and making you feel old before your time.

Eat foods rich in antioxidants. Vitamins A, C and E fight free-radical formation, the oxidation process that damages tissues. Eating 5 ½ cups of fruits and vegetables daily will help you get enough of these vitamins. Among the best sources are broccoli, cauliflower, red peppers and other red, yellow and green vegetables.

Eat lots of fiber. Dietary fiber found in beans, broccoli, bran and other complex carbohydrates helps lower cholesterol, aids digestion and defends against some kinds of cancers.

Maintain healthful cholesterol levels. Keep your total cholesterol level low (under 200) and your percentage of protective HDL cholesterol high. Following a diet that limits your fat intake to 30 percent or less of your total calories will help. Maintaining a healthful weight also is beneficial.

Exercise regularly. Age robs you of aerobic capacity. Performing 30 minutes of moderate activity three to four times a week can help you retain your capacity.

Build strength. As you age, your body's ratio of lean muscle mass to fat decreases (as we age, we loose

muscle mass); this weighs you down and reduces your ability to burn calories efficiently. Regular strength training can help reverse this trend.

Be flexible. Tight muscles limit your range of motion and increase your injury risk. A daily stretching routine that works each of your major muscle groups will help you stay supple.

Get enough sleep. While you rest, your body uses the nutrients you've consumed that day to repair the damage done by the day's activities. Not getting enough sleep keeps your immune system from doing its job and keeps your body in a state of disrepair.

Take care of your back. Keep muscles that support the spine strong and supple with cardiovascular and flexibility exercises. Use good body mechanics while lifting, standing or sitting for long periods of time.

Deal with stress. Stress is linked to many diseases and degenerative conditions associated with aging. Learn to look at problems as challenges and accept situations you can't change.

Stay close to your friends and family. A circle of support helps you deal with problems better, feel healthier and live longer.

Be nice. There's a relationship between hostility, heart disease and other stress-related problems. Look for reasons to be pleasant and to forgive people who make you angry. You may live longer as a result, and you'll probably enjoy life more.

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## Holiday Depression and Stress

**Source: National Mental Health Association**

The holiday season is a time full of joy, cheer, parties, and family gatherings. However, for many people, it is a time of self-evaluation, loneliness, reflection on past failures, and anxiety about an uncertain future.

### What Causes Holiday Blues?

Many factors can cause the "holiday blues": stress, fatigue, unrealistic expectations, over-commercialization, financial constraints, and the inability to be with one's family and friends. The demands of shopping, parties, family reunions, and house guests also contribute to feelings of tension. People who do not become depressed may develop other stress responses, such as: headaches, excessive drinking, over-eating, and difficulty sleeping. Even more people experience post-holiday let down after January 1. This can result from disappointments during the preceding months compounded with the excess fatigue and stress.

## Coping with Stress and Depression During the Holidays

- **Keep expectations for the holiday season manageable.** Try to set realistic goals for yourself. Pace yourself. Organize your time. Make a list and prioritize the important activities. Be realistic about what you can and cannot do. Do not put entire focus on just one day (i.e., Thanksgiving Day) remember it is a season of holiday sentiment and activities can be spread out (time-wise) to lessen stress and increase enjoyment.
- **Remember the holiday season does not banish reasons for feeling sad** or lonely; there is room for these feelings to be present, even if the person chooses not to express them.
- **Leave “yesteryear” in the past and look toward the future.** Life brings changes. Each season is different and can be enjoyed in its own way. Don’t set yourself up in comparing today with the “good ol’ days.”
- **Do something for someone else.** Try volunteering some time to help others.
- **Enjoy activities that are free, such as driving around to look at holiday decorations;** going window shopping without buying; making a snowperson with children.
- **Be aware that excessive drinking will only increase your feelings of depression.**
- **Try something new.** Celebrate the holidays in a new way.
- **Spend time with supportive and caring people.** Reach out and make new friends or contact someone you have not heard from for awhile.
- **Save time for yourself!** Recharge your batteries! Let others share responsibility of activities.

## Can Environment Be a Factor?

Recent studies show that some people suffer from seasonal affective disorder (SAD) which results from fewer hours of sunlight as the days grow shorter during the winter months. Phototherapy, a treatment involving a few hours of exposure to intense light, is effective in relieving depressive symptoms in patients with SAD.

Other studies on the benefits of phototherapy found that exposure to early morning sunlight was effective in relieving seasonal depression. Recent findings, however, suggest that patients respond equally well to phototherapy whether it is scheduled in the early afternoon. This has practical applications for antidepressant treatment since it allows the use of phototherapy in the workplace as well as the home.

*National Mental Health Association (NMHA) ©2019*

# The Frontline Supervisor



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**Q. How can the EAP help me as a supervisor cope with significant organizational change that is causing great stress among employees right now? We may be losing staff, and the change we are experiencing is taking everyone by surprise.**

A. Change isn't easy, especially if it takes you by surprise, but the EAP can help you take change in stride, stay positive, see the benefits of change, and preserve a sense of teamwork among your staff. Change typically involves stages of resolution similar to those of grief. These include denial, resistance, acceptance, and finally, commitment. Anticipate the EAP helping you answer the question "How do I keep a positive outlook in the face of change?" This can be tough, but your organization relies on you to accomplish this. In this regard, never condemn organizational change outright to your staff. Avoid being labeled a malcontent. Do solicit your staff's input and feelings, and make time for venting. Most organizational change is about cost savings and efficiency. This comes with pain for some, but the upside is security in the long run for the organization and positives that flow to employees generally.

**Q. If my employee exhibits persistent attendance and conduct issues at work, should I document my observations and then attempt a formal referral, or is it better to speak with the EAP to prep myself a little better?**

A. Although employee assistance programs educate supervisors to make formal referrals, phoning the EAP to consult prior to the constructive confrontation is a good idea. EAPs welcome phone calls or meetings to discuss management and referral of troubled employees. This can help ensure a more successful outcome. The EAP can consult with you on effective language for your documentation, role-play the meeting with your employee, help you avoid overlooking less-obvious but important performance issues, and assist the EAP in preparing for a more effective motivational interview when the employee arrives at the EAP. Remember, such meetings with you are confidential, just as they are with employees. Effective communication is always the key to EAP success and the increased likelihood of helping employees and reestablishing the value they original held in their position prior to their performance difficulties.

**Q. Why does focusing on persistent performance issues as the criteria for formal EAP referrals result in more employees with behavioral or medical problems being seen by the EAP versus supervisors focusing on the symptoms of personal problems? This seems backward.**

A. Consider the axiom “What causes a problem is one.” Typically, employees strive to keep personal problems invisible from employers. They do this in a variety of ways, including showing a positive disposition, covering for their symptoms, controlling the severity of those symptoms, blaming or externalizing, and denial. Although all of us have personal problems, many types of personal problems are chronic – they get worse over time. As they get worse, the employer may not notice obvious symptoms such as frequent hangovers; however, tardiness may be easily visible and frequent. Although the employee may blame traffic or weather for tardiness, referral for frequent tardiness will be readily spotted by the EAP as a symptom of addictive disease if it exists. This example is the classic one for explaining the focus on performance rather than on hangovers as a criterion for referral.

**Q. Which is the proper way to view an EAP from the *supervisor’s perspective*: (a) as a counseling program to help employees resolve personal problems or (b) as a performance improvement program?**

A. If you chose “b,” you are correct. Because supervisors do not, cannot, and should not diagnose personal problems, they remain focused on performance, attendance, work quality, and workplace behavior. Likewise, this view of the EAP will result in more employees being identified as having some personal problem needing care, counseling, support, or treatment in order to resolve a performance issue. This answer may seem counterintuitive or ironic; however, it is important to remember that EAPs are not designed as counseling or therapy programs in the generally accepted definition of these terms. Likewise, employee assistance professionals (properly written as “EA professionals”) are not “counselors” or “therapists” as these terms are generally defined, although the EA professional’s skills and abilities may be similar. From the employee’s perspective, of course, EAPs are usually viewed as programs to help resolve personal problems.

**Q. I am excited about my employee’s upbeat attitude, positive outlook, and engaging communication style since being referred to the EAP for addiction treatment. How will I know whether he or she has relapsed?**

A. Depending on the drug of abuse, relapse profiles can vary a great deal. For example, a heroin user may simply not show up to work or perhaps disappear for days at a time because of a relapse. An alcoholic employee may participate in behavior that leads to eventual relapse, which includes experimenting with controlled drinking for weeks or months. A sudden, out-of-control drinking bout then may precede phoning in sick. You may have no indication whatsoever that alcohol use is the cause of the absence. These behavioral patterns can be confusing to supervisors. To gain clarity, establish good communication with the EAP and expect regular reports on proper follow-through and EAP participation. This communication may not prevent relapse, but it typically prolongs the period of time after last use. This stretch increases the likelihood that relapse will not occur or, if it does, that it is brief and easily reestablished.

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