

MENTORING MINUTES

Employee Assistance Program (EAP) Newsletter

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OPTIMISTS BEAT CORONARY ATTACK ODDS

Look on the bright side—optimists have a lower risk of death from cardiovascular disease than pessimists, according to a new study in the Archives of Internal Medicine. The study included 545 healthy men aged 64 to 84. Optimism was assessed at five yearly intervals from 1985 to 2000, by asking participants whether they agreed with the following statements: “I still expect much from my life”, “I do not look forward to

what lies ahead for me in the years to come”, “My days seem to be passing slowly” and “I am still full of plans”. The men were scored and grouped based on their levels of optimism. Over 15 years 68.4% of them died, with half of the deaths due to cardiovascular causes. Compared with the least optimistic men, those with the highest level of optimism had an almost 50% lower risk of cardiovascu-

lar death, even after considering risk factors such as self-rated health, depression and activity.

**WIN WITH ASSERTIVENESS**

Is a coworker's behaviour stressing you out? Have you told others around you about it, dropped hints to your coworker to stop, but are still hoping for change?

The problem may be that you haven't tried a truly assertive approach. Resistance to being assertive explains the existence of many coworkers conflicts and why they grow worse. The assertive approach frequently requires

that you be more vulnerable, which explains its lack of popularity. But the payoff is less stress, improved productivity and better morale.

Example: Imagine a coworker making “put-downs” about you in staff meetings on a regular basis. Would you try an assertive approach like this “I find it terribly embarrassing to be

criticized in front of others. If you feel I should be doing a better job, can you please discuss it with me in pri-

**IMPAIRMENTS OF MARIJUANA USE**

Marijuana use impairs memory, thinking speed and decision-making according to a new study published in Neurology this week. Researchers carried out a range of tests on 40 heavy marijuana users—those who smoked four or more joints per week—aged 17 to 49, taking part in a drug abuse treatment program. Half had used marijuana heavily for more

than 10 years (long term) and half had used for 5 to 10 years (short term). They were compared to 24 control subjects who had used marijuana at least once but not more than 10 times, and not in the past two years. Compared to non-users, heavy marijuana users performed worse on tests of divided attention and verbal

fluency. In a test where participants needed to memorise a list of 15 words, the non-users remembered an average of 12 words, the short-term users remembered nine words, and the long-term users recalled only seven words.

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FIND HAPPINESS WITH A LITTLE HELP FROM FRIENDS BY DR ROGER PETERS ~ HEAS DIRECTOR OF CLINICAL SERVICES

Martin Seligman is presently in Australia, he is the author of a standard text for many psychology students in the 70's and 80's 'Learned Helplessness'. It was his thesis in those days when behaviorism was still very much a strong influence in psychology that people learn to be helpless. They simply give up, and Robyn Mann in her excellent thesis on bullying in the workplace talks about this as the total act of compliance, i.e., when a bully causes a sense of learned helplessness in his or her target.

It is interesting that Seligman's journey in life, as well as his professional career took him away from focusing on learned helplessness to a state of wellbeing he called in his second book "learned optimism". It is especially important to recognise that this for him it was indeed a developmental journey, perhaps no better illustrated by his even more recent book "Authentic Happiness". Seligman's professional development is one that took him away from teaching people to avoid learned helplessness but instead to learn optimism as a means to resilience so to find ultimately authentic happiness. Surely what we all search for, and hope to find.

In fact, being in Australia at present he is hoping to teach people ways to become more resilient and how to be more optimistic in an effort to stave off what seems to be an epidemic of anxiety and depression. The popular media of course have picked up on this and have of course found some really high profile examples of depression to splash across newspapers, including John Brogden in New South Wales or Geoff Gallop in Western Australia, and of course more recently, the sad loss of Steve Rogers, a rugby league legend.

It is an interesting change when 20 to 30 years ago people either ignored or chose to ridicule anyone suffering from what was colloquially called "stress". Those days most seem to have turned a corner, although there remains any number of people who simply prefer to victim blame. Per-

haps Peter Debman, the NSW leader for the opposition, is representative of this mindset when he recently said that "if people don't like their jobs (believing that is what equates to depression or stress) they should just leave them". In respect to those claiming workers compensation, he said that recipients were just "rotting the system". This comment was both ill-timed and insensitive given the emotional problems his own party leader had battled for so long, finally almost becoming a statistic of suicide.

It must be understood that while there may be in all of this a permissioning process, i.e., "if you are suffering from depression you are in good company", care has to be taken that what use to be known as sadness doesn't become unnecessarily medicalised by words such as "endogenous" and "clinical depression". In all of this there needs to be a balance. The balance between what a person chooses to be and choices they are capable of making versus the profoundly difficult and challenging issues that so often are imposed by way of adverse mental ill-health.

One of the major concerns that I have is that many people who do suffer depression, especially those who have suicide ideation, may avoid help because of embarrassment, pride, or fear of rejection from an important other. For instance, a father trivializes mental health refers to psychologists as "lunatics", and the process of therapy as "psycho-babble" they may close off, perhaps even if unwittingly, a path that a son or daughter may need so as to talk through their problems instead believing that help it is in fact not just desirable but unattainable.

The important message that needs to be grasped here is that when people are in despair they not only need to know that there is a life line but actually see one. If their experience is one of rejection, ridicule and isolation, this can lead to increased chances of unchecked, untreated

depression, perhaps worse.

The key to so much of this is in families. It was Matt Rogers, Steve Roger's father, who made it clear during a recent media interview that his father had called him just prior to his suicide. Matt, for whatever reason (given his popularity and no doubt the multiplicity of calls that he may get) had his phone switched off. Matt of course should take no blame for his father's death, but I am certain that he feels, as perhaps we all would, a sense of grief particularly in relation to that.

Importantly, as a community we should look after each other. All communities are built on families; not necessarily of the typical nuclear types, but families of all kind. It is important that all families keep the lines of communication open, for undoubtedly they will be the best defence against suicide. Only when families recognise that this task is not only up to others, but everyone will the problem of mental health start to edge back in favour of the community rather than against it.



Contact HEAS your Employee Assistance Program (EAP) provider for confidential counselling for work-related and personal problems. The EAP is free to you and your immediate family. To find out more or to arrange an appointment free call HEAS on 1800261955.