Better Teaching Moments for Your Teen

It’s not easy to get a teenager to readily accept your point of view. The term that describes the window of opportunity for doing so is often referred to as a “teaching moment.” How do you recognize teaching moments so you can take advantage of them and add to the quality and happiness of your teen’s life? A teaching moment is an opportunity, usually of short duration, that is characterized by the need for understanding or insight in response to an event with an unanticipated outcome. When offering understanding or insight to a teen, do two things: 1) Avoid the “I told you so” approach. Instead, ask “what” and “how” questions to help guide the teen to the insight to be gained from an event. 2) Verbally praise the teen for discovering the answer and being open to accepting it.

Happiness Tips from Top Performers

Southwest Airlines has famous customer service, but management will tell you that it’s their employees who get most of the credit. Southwest Airlines hires only upbeat employees—those who are positive, compassionate, diplomatic, and empathetic. What behaviors do its employees practice that spur happiness and corporate success? Can you do the same things? Here are three: 1) Seek creative solutions to work problems. Ideas may not always be accepted, but continue to seek ways of doing things more effectively. 2) Establish a way to celebrate success among your peers. Peer recognition is the most reinforcing. 3) Reduce customer service stress by imagining your customer as a loved one—a child, mother, father, or person who energizes you. Applying this perspective can create a more positive attitude and reduce stress. Sound a bit crazy? Get this: The airline’s stock symbol is LUV. Something is obviously working.

Take Charge of Morale

Everyone wants high morale, but when morale suffers, help often arrives too late. Whose job is it to “improve morale”? Most people would shout “management!”, but this is frequently not the case. Instead, you may be the first line of defense. The danger signal is a deterioration of your or your group’s commitment to the mission of your employer, or a loss of faith in the importance of your work. If you detect these signals, it’s time to gather your group before rumors and backbiting begin. What can the group or its members do to intervene and improve morale? Poor morale increases absenteeism and turnover, lowers productivity, and contributes to the likelihood of inappropriate behavior, even violence. This meeting must not be a blame session, but a strategy session. Warning: Do not ask, “What’s wrong with us?” Ask instead, “What works to improve morale?” This strategic tip removes conflicts from your discussion. Assign a monitor to keep this rule and hold everyone to it. Now ask, “What works to 1) make communication between us more effective, 2) improve our ability to feel recognized for our contributions, 3) help us feel more control over what we do and how it is done, and 4) improve positive feelings we have toward each other?” You may generate suggestions for your supervisor, but don’t drift away from your primary goal of improving morale. Hold a follow-up meeting and repeat the process.
Recover Your Recovery Program

If you must manage a chronic disease prone to relapse, did you find support for your recovery program this past holiday season? Millions of people manage personal programs of recovery from relapse-prone illnesses such as substance addictions and disorders associated with eating, gambling, smoking, and other behavioral health issues. Don’t delay in reestablishing your program of recovery if you relapsed. You may be waiting for just the right opportunity, but get this one off your “to do” list and on to your “just do it now” list. Don’t kick yourself for relapsing. Doing so adds to your procrastination. Instead, put your energy into reestablishing your recovery program without delay. A relapse may have started with some destructive thoughts (“stinking thinking”), or rationalizations. Rebounding from a relapse is easier the more quickly it is begun, because in the early days or weeks you have not yet rekindled strong defenses that prevent you from accepting help. Talk with your sponsor or a counselor to gain insight from your relapse experience so that it becomes part of your armament to help prevent a future relapse. Recapture the promises of recovery in your life.

Self-Motivation: Struggling to Exercise

Structure and accountability are the keys when trying to establish an exercise routine. Structuring exercise is the how, what, when, and where of your exercise program. Accountability is answering to someone or something if you don’t follow through (mutual support from an exercise buddy is a good example). Accountability gets you past the “I-don’t-feel-like-doing-this” hump. Stick with it, however, and before long the next phase kicks in—emotional reasons to keep exercising. Acquire strong enough reasons, and almost anything is possible. Here is a tip: Read about the “16 desires of life” first formulated by professor of psychology and psychiatry Steven Reiss (easily found online). Reiss believes almost all these desires are inherent to humans, and that we are hardwired for them. They include independence, acceptance, idealism, social contact, and tranquility. How many can you link to your reasons for exercising? Write them down and feel a new desire to exercise.

Eating Disorders Awareness Month

What is an eating disorder?
Eating disorders involve serious disturbances in eating behavior, such as extreme and unhealthy reduction of food intake or severe overeating, as well as feelings of distress or extreme concern about body shape or weight. People with eating disorders often use food and the control of food in an attempt to compensate for feelings and emotions that may otherwise seem overwhelming.

Types of Eating Disorders:

1. Anorexia Nervosa
Resistance to maintaining body weight at or above a minimally normal weight for age and height. Intense fear of gaining weight or becoming fat, even though underweight.

2. Bulimia Nervosa
Recurrent inappropriate compulsive behavior in order to prevent weight gain, such as self-induced vomiting or misuse of laxatives, diuretics, enemas, or other medications (purging), fasting, or excessive exercise.

3. Compulsive Binge Eating
Recurrent episodes of binge eating, characterized by eating an excessive amount of food within a discrete period of time and by a sense of lack of control over eating during the episode.

If you think you or a loved one suffers from an eating disorder, you can call your Employee Assistance Program and talk to an EAP consultant.

For more information, go to www.nationaleatingdisorders.org or call the National Eating Disorders Association at 800-931-2237