



The
Solutions
Group

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Better Places to Work

Work & Well-being

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Supporting Employees Who Have Chronic Pain

Many employees experience chronic pain, but it is not uncommon for pain sufferers to minimize discussing their conditions for fear it could affect their job in some way. Some employees with fibromyalgia, lupus, and chronic fatigue syndrome may never tell anyone at work about it, not even their boss. Some employees have even reported avoiding the pain associated with getting dressed in the morning by sleeping in their clothes all night. How can coworkers help. Based on an online community survey of employees who experience chronic pain, the most requested need from coworkers was compassion and understanding. Pain sufferers want you to know that they are not lazy, unmotivated, or unwilling, and that the last thing they want is to feel like they let down the team.



Learn more at www.themighty.com (search content tab, and "chronic illness coworkers").

While Waiting for Your Therapy Appointment

You've decided to see a professional counselor, but your chosen psychotherapist isn't available for a couple weeks or more. It's difficult waiting, and you feel a burning need to start. Contact your EAP for short-term support. The EAP won't provide psychotherapy services, but there is a lot of "pre-therapy" work you might be able to achieve, like getting clarity on the problems and issues you face, thinking about goals, learning about how psychotherapy works, what to expect from therapy, and how to get the most out of it.



Work and Wellbeing is a monthly publication for employees and their family members

Call our toll-free number for 24 x 7 support 1-866-254-3555 or visit our website: www.solutionsbiz.com for more information and to use this free and confidential benefit

September: Suicide Prevention Month

Many myths are associated with suicide. Shining light on these myths can prompt more intervention sooner. Intervention starts with asking whether the potential victim is suicidal, planning suicide, or is thinking about "harming themselves in some way." One such myth is that suicidal people appear depressed, but this may be true for only 60% of victims. 80% of victims do display warning signs, but despondency is not at the top of the list. More important is what's expressed. Pay attention to utterances about personal uselessness, being trapped, being a burden on others, having no reason to live, being in too much pain, or having "the" solution to all one's troubles. Then ask about suicidal thinking or planning, and direct the person to help. You may save a life. If you are concerned about someone you may also call EAP to talk with a counselor.

Learn more: hhs.gov [search "depression increase risk of suicide"]



Activities and Risks of COVID-19 Infection

Which activity places you more at risk for contracting COVID-19—getting groceries or eating *outside* at a restaurant? What about traveling by airplane, attending a basketball game, or eating in a buffet line? Experts were asked to consider the risk associated with 36 different activities and then grade them on a scale of 1 to 10 (10 is the most risky). Although not scientific, the list and scores (find below) might help you protect yourself with a decision to participate in certain activities, or in some cases, avoid them altogether.



List and scores: www.kltv.com [search: "36 activities covid"]

Workaholic: Myths That Mess with Mental Health

Workaholics often have habits of thinking that can pose secondary consequences for their own health. “Not deserving a rest” until a certain amount of work is accomplished is one such behavior. Basing one’s personal worth on the amount of work that gets done is another. Paying more attention to work failures while minimizing the significance of successes, or defending their work practices with retorts like “no one ever died from working too hard” are some examples. Unfortunately, research shows that workaholics will have health problems and die sooner because of how work interferes with health, including results such as erratic sleep, poor nutrition, a lack of work-life balance, loneliness, substance abuse, depression, neglect of exercise (or not enough of the right kind of exercise), and neglecting important health decisions such as annual physicals, examinations, lab tests, and perhaps vaccines. Some workaholics may experience the inability to relax without feeling physically ill, anxious, and agitated if they aren’t working. This prevents them from taking vacations, and often induces them to come to work sick, which is a form of presenteeism. If you are aware of any of these behaviors, it’s time to learn more; and if making healthy changes is difficult, talk to a professional counselor, EAP, or life coach to help you discover a better work-life balance. Start with the 20 questions quiz offered by the 12-step program Workaholics Anonymous. The promise of stopping workaholic behavior is, ironically, increased productivity; improved relationships at work and home; stronger feelings of accomplishment in more aspects of your life; and possibly a longer life.



Source: Quiz for Workaholic at www.workaholics-anonymous.org [search “twenty questions”]

When You’re a First-Time Manager

If you’re a new first-time supervisor, you’ll discover an endless stream of advice, including do’s, don’ts, how-to’s, websites, and lots of books. Supervising others and developing leadership skills to get the work done will be your most measured job function. With experience, you’ll grow instincts, but there is no rushing becoming a great supervisor. Avoid novice mistakes, which include the following: 1) taking on more work, rather than managing the completion of work; 2) not communicating enough above, below, and around you; 3) becoming overwhelmed with to-dos that rob you of your work-life balance; 4) believing others will act quickly and blindly on your say-so; 5) not modeling the type of employee you want others to be; and 6) not getting to know those you supervise one-on-one.



Becoming a Resilient Employee

During the COVID-19 pandemic, have you coped with stress by thinking, “I am going to see this as a challenge” or “Is there opportunity to grow in this situation?” These responses to adversity represent resilience thinking. Many books about resiliency are authored by those who have faced difficult challenges—from disabled persons to the Navy Seals. Their commonality is a decision to not surrender. Develop resiliency by discovering what motivates you to get excited about the future. Fight negative self-talk regarding your ability to succeed. Practice work-life balance and self-nurturing behaviors for their powerful benefits. And when you face changes, focus physically and emotionally on what you can control. Resiliency skills aren’t pulled from a drawer when they are needed. They are everyday skills you use to solve problems correctly, take action on your goals, and develop reflexes to look for the opportunity in challenges you experience.



Learn more at www.ncsu.edu (search “resilience is a process”).

Brain-Challenging Activities May Delay Dementia

Alzheimer’s victims may slow the progression of their condition by participating in brain-challenging activities like puzzles, chess, letter writing, and more, according to new research. Brain tissues from active and nonactive older persons were compared and examined upon the individuals’ death. Those who participated in regular mentally stimulating activities had less of the chemical build-up known to be associated with Alzheimer’s disease. Findings: Active-brain individuals delayed symptoms by up to five years. To support an elderly loved one, encourage brain-challenging activities, but try co-participating with them in online games like checkers, which may reduce loneliness and enhance your relationship. Find online remote games for two with a simple web search.



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