

Skills to Build: **Demonstrating Confidence**



Demonstrating confidence communicates the certainty of your positions, decisions, and the reliability of outcomes you say will appear. Confidence is a leadership quality and a soft skill that can help you achieve goals. Showing confidence is not a sign of arrogance or the inability to accept feedback. The power of confidence means other key traits likely exist. These include high self-esteem, the willingness to take risks, the ability to achieve goals, resilience, and knowing how to meet challenges with a “can do” attitude. To build your confidence, seek to remove negative influences in your life that undermine it. These influences can be subtle like negative self-talk, unsupportive people, or even your immediate work environment (e.g., desk clutter, disorganization).

8 Keys to De-stressing

De-stressing is taking action to reduce the impact of stress following a period of continual tension, typically associated with being at work. There are many ways to de-stress, but combining different de-stressing goals together or in sequence may have a beneficial and compounding effect. See how many of these eight “de-stress dimensions” you can experience at the end of your day.

- 1) Get physical—participate in aerobic exercise.
- 2) Socialize with others who share the same stress.
- 3) Journal—write down your thoughts/successes for the day in a journal.
- 4) Enjoy humor—rent a funny movie.
- 5) Get fresh air.
- 6) Practice affirmations—stress is often accompanied by negative self-talk. Identify what these messages are and overpower them with the positive.
- 7) Meditate—meditation is a skill that promotes relaxation and builds internal energy.
- 8) Create physical change—rearrange a room, complete a chore, fix a doorknob, or make a small improvement in your immediate surroundings.

Valuing Employees with Special-Needs

“Disability inclusiveness” is a workplace responding fully to the needs of disabled workers, allowing them to maximize their capabilities. This includes removing employee attitude barriers associated with bias. Thinking a disabled worker won’t work as hard and will experience more absenteeism are examples of biases rooted in myths. To overcome bias:

- 1) Increase personal education and awareness about disabilities. YouTube has many videos on overcoming bias, with some highly impactful.
- 2) Avoid defining a coworker by the disability—see the person, not the disability.
- 3) Learn disability etiquette. You can begin by reviewing [UnitedSpinal.org- Disability Etiquette](http://UnitedSpinal.org-DisabilityEtiquette).



Spotting Symptoms of Postpartum Depression

Postpartum mood disorders are not uncommon after having a baby, affecting one in eight women. They generally fall into three groups: the blues, postpartum depression, and postpartum psychosis (which is rare). Know the symptoms and talk to your health care provider if you notice any of the following: crying more than usual, feelings of anger, feeling overwhelmed, sleep problems, wanting to isolate yourself from loved ones, feeling disconnected from your baby, worry that you will hurt your baby, feeling guilty, or doubting your ability to be a good mother. Learn more: Best list of symptoms at www.americanpregnancy.org

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Helping Victims of Domestic Violence



Stigma causes many people to hide their domestic violence victimization. It also causes others to remain silent in order to protect the victim, even if they are in the best position to help. Helping a domestic abuse victim starts with acknowledgement—saying that

you sense something is wrong, and what you believe it might be. Victims of domestic violence often struggle with other problems like parenting issues, money problems, anxiety, fear, job insecurity, and health concerns. A nonjudgmental, empathetic listening ear can have a powerful and healing impact that begins the process of allowing next steps to follow. These may be legal or community protection measures. Do you know someone who might be a victim of domestic abuse? You could be the first person she (or he) opens up to about it. Still unsure what to do? EAP's brochure "[Learn Ways to Help Stop Domestic Violence](#)", which offers tips/suggestions, phone numbers and other resources for those involved with domestic violence.

Helping an Alcoholic Family Member

Alcoholism has existed for thousands of years, as has advice for family members seeking help for an alcoholic in the home. This help has come from friends, coworkers, next-door neighbors, professionals, clergy, self-help groups, and books. Although much advice is misguided, there is a common dynamic for successful intervention—insisting the alcoholic accept responsibility for getting help, and not making him or her feel guilty for having the disease. The better approach emphasizes using every crisis as an opportunity to motivate the addict to accept help. In contrast, the “guilt or shame” approach concerns itself with controlling the addict, dispensing blame, and monitoring the time, amount, and place of drinking. The idea is to shame the alcoholic into exercising more willpower. The American Medical Association proclaimed alcoholism a chronic disease nearly 60 years ago. So did the World Health Organization. If you struggle with accepting the chronic disease model, you likewise will struggle to make this revolutionary shift from guilt to insistence on treatment. The guilt approach makes you a watcher, controller, and enabler. The accountability for treatment makes getting help non-negotiable. Helping an alcoholic requires the right mind-set—the one derived from understanding alcoholism as a disease without reservation.