

## BHS ASSIST. E-NEWS

### Improve Communication by Tailoring Communication Style to Fit Personality

We all have different personal communication styles. The better you recognize and understand them, the more effective you will communicate. Below are four basic styles to look for:

- **Direct.** These people focus on results. They want other people to get to the point, and quickly. They grow impatient with too much chitchat or beating around the bush. Chances are they are very organized and their areas uncluttered.

*You will communicate most effectively by going straight to the basic message without delay.*



- **Relationship-oriented.** Some people are driven to connect with others on a personal level. They are always ready to talk about their family, friends, and activities, and ask you about yours. They know a lot of people and usually know what is going on around them.

*Take some time to get friendly with this personality type. Learn about their family and personal history.*

- **Analyzer.** Relying on facts and data to make their decisions, they will listen if you can provide detailed, logic-driven information supporting your point.

*A good strategy: Give them statistics and other data to look over on their own so they can convince themselves that your idea is workable.*

- **Enthusiastic.** Turned on by new ideas and interesting challenges, these people can get very involved in what they are talking about, using physical gestures and dramatic figures of speech.

*Talk about the big picture to get their energy up and avoid giving excessive details.*



On February 24, 2009, The Partnership for a Drug-Free America announced the findings from the 2008 Partnership Attitude Tracking Study, (PATs) which revealed the first major increase in the number of teens who reported “learning a lot” about the risks of drugs from their parents. The study shows that 37 percent of teens reported learning about the risks of drugs from

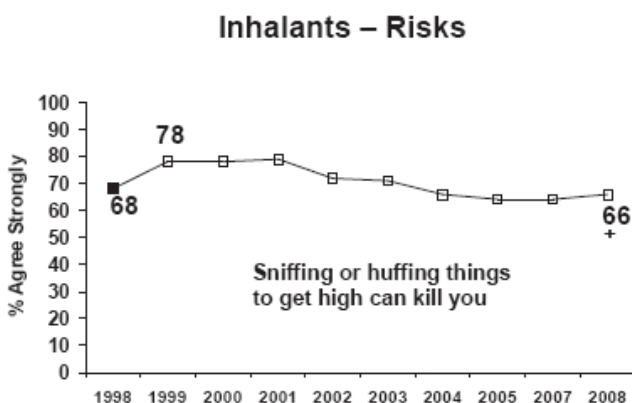
their parents, a significant 16 percent increase from the previous year and the first major increase since the inception of the study. This progress coincides with data showing remarkable, sustained declines in several drugs of abuse – notably [methamphetamine \(meth\)](#) and [marijuana](#) – over the past several years.

Research consistently shows that teens who learn a lot about the risks of drugs at home are up to 50 percent less likely to use, yet many parents have difficulty [talking with their kids about drugs and alcohol](#).

According to the study, teen meth use has experienced a steep three-year drop, with past-month use down to 3 percent of teens – a significant 25 percent decline from 2005. Teen attitudes about meth use corroborate this drop – 83 percent of teens see great risk in using meth regularly, about 85 percent see great risk in “getting hooked on meth” and more than half of teens, (54 percent) see trying meth once or twice as very risky.

While marijuana remains the most widely used illegal drug among teens, PATs indicates marijuana use has been declining for a decade, with past-year use down 24 percent since 1998, and past-month use down 30 percent (from 23 percent of teens down to 16 percent) over the same time period. Teen attitudes also reflect growing social disapproval of the drug, with 35 percent of teens agreeing strongly they “don’t want to hang around with anyone who uses marijuana,” up from 28 percent a decade ago.

### **Teens See Slightly Less Risk in Inhalant Use**



Pre-teen and teen inhalant use remains steady at 11 percent for past year use, yet only 66 percent of teens report that “sniffing or huffing things to get high can kill you.”

Nearly all abused products produce effects similar to anesthetics, which slow down the body's function. Varying upon level of dosage, the user can experience slight stimulation, feeling of less inhibition or loss of consciousness. The user can also suffer from

**Sudden Sniffing Death Syndrome.** *This means the user can die the 1st, 10th or 100th time he or she uses an inhalant.* Other effects include damage to the heart, kidney, brain, liver, bone marrow and other organs. Results similar to Fetal Alcohol Syndrome may also occur when inhalants are used during pregnancy. Inhalants are physically and psychologically addicting and users suffer withdrawal symptoms.

*Past year abuse of inhalants remained steady, but a third did not believe that inhalant abuse can result in death. This is dangerous because one-time use can be fatal.*

*Inhalants are not drugs. They are poisons and toxins and should be discussed as such.*

## NATIONAL INHALANTS AND POISONS AWARENESS WEEK March 15 - 21, 2009

Don't just say "not my kid." Parents often remain ignorant of inhalant use or do not educate their children until it is too late. Given that kids who learn a lot about the dangers of drugs from their parents are up to 50 percent less likely to ever use, parents are encouraged to have frequent ongoing conversations with their children. It is never too early to teach your children about the dangers of inhalants. Inhalant use starts as early as elementary school. By 8th grade, one in five will have used inhalants.



If someone you know is huffing, remain calm and seek help. Agitation may cause the huffer to become violent, experience hallucinations or suffer heart dysfunction, which can cause **Sudden Sniffing Death Syndrome**. Make sure the room is well ventilated and call EMS. If the person is not breathing, administer CPR. Once recovered, seek professional treatment and counseling.

[www.drugfree.org](http://www.drugfree.org)  
[www.inhalants.org](http://www.inhalants.org)

There are high spots in all of our lives  
and most of them  
have come about through encouragement  
from someone else.

George M. Adams

*“With 1.93 million people losing their jobs between August and December 2008, according to the Bureau of Labor Statistics, chances are you’ve felt the impact of a layoff, whether it’s the loss of your own job, witnessing layoffs at your company, or just knowing friends and colleagues who are on the unemployment line.”*

(Washington Business Journal, Jan. 23, 2009)

# Workplace Survivor Syndrome

“Workplace survivor syndrome,” is a term coined by organizational psychologists to describe the emotional, psychological and physical effects of employees who remain in the midst company downsizing. In today’s economy, with layoffs all around, it is hard to imagine an organization that is immune from the possibility, leaving many with workplace survivor guilt.

Is it real? Multiple studies suggest that job cuts are just as hard on the people left behind as they are on those who’ve been downsized. A 2003 study published by the Institute of Behavioral Science showed an increase in alcohol consumption, smoking, and workplace injury among layoff survivors. Other studies report depression, plummeting productivity and poor morale among surviving staff.

A 2008 study by Leadership IQ reported that “guilt” was one of the top three words used by layoff survivors to describe their feelings. The other two were “anger” and “anxiety.”

Here are some strategies to help you cope:

**Find opportunity within adversity.** Look for options that can lead to professional growth and personal fulfillment. Challenge yourself, your family, and friends to find creative ways of reducing expenses. Use your fears to set goals for improvement.

**Focus on being positive and productive.** Do your best each day. Remember that the current downturn is temporary and that brighter days are ahead.

**Use your company’s Employee Assistance Program (EAP).** Your EAP is a free and confidential program that offers a wide range of services that can help you get through a rough time. Be sure to ask about programs and materials geared specifically toward coping with layoffs.

