

Maintaining Balance amidst Chaos

By Lindsey Patrick

Mindfulness and work/life balance are popular topics these days. Mindfulness can be difficult to achieve and balance is often elusive. I have personally experienced this balancing act as, over the past 1-1/2 years, I have had to balance working full-time, attending graduate school part time and maintaining a household. Here are some things I have learned in my quest to maintain balance.

❖ **Schedule your time and write it down.** Writing down your daily schedule will help you visualize how you parcel out your time. Blocking out space for your daily tasks will help ensure you don't pack too much into one day. Writing down your schedule will free up mental energy otherwise

spent on remembering your tasks. Don't forget to schedule time to organize your schedule!

❖ **Create routines within your busy schedule.** Wake up and go to bed at the same time every day. Exercise at the same time every day. Have a bedtime routine.

❖ **Focus on one task at a time.** This is a core concept of mindfulness. When you're at work, don't think about how you're going to make time for dinner. When you're at home, don't think about work. When you're exercising, focus only on muscle movements and breathing.

❖ **Prioritize tasks.** Know which must be completed and which can wait.

❖ **Listen to your body.** Busy schedules cause stress; stress can cause health issues. Know your limits and do not ignore the emergence of a cough, fever, etc. Your

body can serve as a signal for when you're overextending yourself.

❖ **Know when to cut back, say "no" or ask for help.** Know your limits and acknowledge when you have to cut back on workloads, course loads, etc. Your priority list will help you identify something you can put off or delegate to somebody else.

❖ **Prioritize "me" time.** You cannot take care of others or your tasks if you don't take care of yourself. Self-care will help build resilience and combat burnout.

Maintaining balance can help make you a better employee, student, partner, or friend. Maintaining balance will also help maintain your mental and physical health. ■

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Conversely, clients who use in-person counselling are constrained in terms of travel time and must operate in the same time zone as their counsellors. *But VC clients do not need to deal with the logistics of leaving work or home, parking, and balancing work and home life demands, making this modality very appealing.*

Summary

The past decade has seen a significant technological evolution; making the use of VC/TMH/TH increasingly feasible for and available to different providers and

populations. The expansion of this modality, possibilities for clients, and the growing amount of research are exciting developments.

EFAPs are in a unique position, offering multi-modal clinical services to thousands of clients a year across different demographics, locales, and presenting issues. Expanding your services with video counselling can only benefit you and your clients. ■

To read the full research report, visit: http://www.shepell.com/en-ca/knowledgeandmedia/news/research%20report/pdf/Shepellfgi%20Video%20Counselling%20Research%20Report_EN.pdf. For a list of

the references used in this article, email Kelly at kbeaudoin@shepellfgi.com.

Editor's note: *The Canadian-based Shepell:fgi, is the leading pioneer in delivering alternative EAP counseling modalities. This article is loosely based on Barb Veder and Stan Pope's 2014 World EAP Conference presentation, "Video Counselling: Digital Delivery of EAP Clinical Services."*

NEXT MONTH: Making EAP Relevant to the Facebook Generation.

EMPLOYEE ASSISTANCE REPORT

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Screen to Screen Counselling in today's Digital World

First in a Series on Technology & EAP

By Barb Veder, Kelly Beaudoin, and Stan Pope

In this highly digital world, users demand easy access to services and counselling, and EAP providers are no exception. Technology has made services such as video counselling, telehealth, and telemental health not only possible, but feasible support options. It is the expansion of these channels that have created opportunities for more research — to improve not only the method of delivery but also the counselling itself.

In May 2010, video counselling (VC) was added to the counselling services offered through the Employee and Family Assistance Program (EFAP) at Shepell as a pilot project with a full launch in September 2011. They anticipated that the majority of VC clients would come from remote areas (those located in areas at least an hour away from the nearest provider) or have mobility issues. Instead, of the over 3,000 cases opened in the past four years, only 12% percent of users were located more than four hours away from the nearest provider.

Easy to Use and Convenient

In addition to being easily accessible, video counselling is easy to use. Client and counsellor commu-

nicate using a webcam, landline, and encrypted custom Internet software through which both parties are able to see and hear each other and participants are able to share and create documents in real-time. Clients are able to use their own personal computers. Post-session feedback has shown that clients are satisfied with VC.

❖ Clients appreciate the convenience of receiving services in their own home; some say that it helps them feel more at ease sharing information with counsellors. ❖ Clients also value that, because there aren't any geographic restrictions, they can connect with a counsellor from anywhere in the country. This feature of VC is especially significant to clients in small communities as it gives them a level of anonymity they could not otherwise experience.

Counsellors Report High Satisfaction

Counsellors also report a high level of satisfaction in providing services in this manner. *Counsellors find that clients can be more relaxed and expressive when they are in the comfort of*

their own home, and when they aren't pressed for time or feeling rushed because they had to leave work early or need to get home to their family. Client comfort and convenience as well as the satisfaction and progress that clients report make VC a positive experience for client and counsellor alike.

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Video Counselling Research

In addition to analyzing data from Shepell's EFAP clients, several other studies and literature reviews were analyzed to corroborate our findings. These studies — conducted on different mental health providers and professions and on a wide range of populations, ages, and various clinical/mental health issues — examine the clinical effectiveness, user satisfaction, and efficacy of a variety of clinical approaches.

“Counsellors find that clients can be more relaxed and expressive when they are in the comfort of their own home, and when they aren't pressed for time or feeling rushed because they had to leave work early or need to get home to their family.”

Recent research shows that video counselling, and televideo counselling, is taking in populations traditionally not seen as viable clients for this type of service. It has also found that individuals who used video counselling report high levels of satisfaction, and have similar satisfaction and clinical outcomes to individuals accessing in-person counselling.

Even larger reviews focusing on therapeutic interventions delivered by videoconferencing for long-term

and chronic mental and physical health note that videoconferencing interventions produced similar outcomes, patient satisfaction, and treatment results to patients who received in-person interventions.

Services also Help Veterans

Dealing with the mental health issues of the military is one of the biggest challenges today. A 2012 study representing the largest scale assessment of telemental health services looked at the clinical outcomes of 98,609 US Department of Veteran Affairs (VA) patients over four years (2006 to 2010).

Telemental health services, including video counselling, were provided to veterans at community-based outpatient clinics by a wide range of mental health practitioners, including psychiatrists, psychologists, social workers, and registered nurses. Patients receiving telemental health services had not only fewer *days* of hospitalization but an average of 25% fewer hospitalizations.

They also noted, “The overall VA population of mental health patients did *not* demonstrate similar decreases during this period.” This included VA patients receiving other forms of mental health services.

Promising, but...

Improving accessibility to populations living in remote and underserved areas was a key factor in the EFAP's decision to develop VC services. As stated, clients who might not be inclined to attend more traditional in-person counselling may view VC/TMH as a viable alternative. Likewise, convenience and availability factors can play an important role in modality preference.

However, none of the current research reflects video counselling in an EFAP/EAP context. Given

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that EFAP clients often access services with non-psychiatric presenting issues, it is important to compare video counselling's value in that context.

Shepell's Study Outcomes

This is one of the reasons Shepell chose to review its VC program one year after its launch. They wanted to evaluate the EFAP's VC clinical service, gain a

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Is Employer-Sponsored Health Care a Thing of the Past? – Part I

By Paul Zane Pilzer and Rick Lindquist

Both employers and employees alike have tried to make the most of a bad situation. Facing double-digit growth in health insurance premiums, companies have either eliminated health benefits or redesigned the plans to include higher deductibles, larger co-payments, and greater premium sharing by employees.

The Affordable Care Act has changed the game, and the solution is obvious: Rather than sticking with the “devil they know,” most companies should terminate their group health insurance in favor of defined contribution employer-funded healthcare and individual insurance policies purchased by employees. And the sooner, the better.

Making this switch will allow companies and employees to save up to \$12,000 per employee per year, while offering a better employee health benefit program for recruiting and retention purposes. This is a massive savings and it *will* happen nationwide — there's no arguing with that. The only question is when individual companies will make this leap.

Part one of this two-part article examines the steps that *employers* should take. Part two will address the steps that *employees* should take.

❖ Cancel group insurance.

Unless the company is large enough to have dedicated, full-time employees managing an employer-provided health insurance program, the money and time spent getting employees covered is one of the greatest threats to the employer's business. That's because every hour spent managing your employer-provided health insurance is another hour you are not spending managing and improving your product or service.

Even if your company *is* large enough to justify it, with health insurance costs today exceeding profits for many companies, it's rare that the CEO and CFO of a Fortune 500 company don't spend many hours managing their health benefits program. When you cancel your group insurance, not only do you set your employees up to receive coverage that is much less expensive for them (and you), but you also can keep your management focused on improving your products and services versus improving your employer-provided health insurance.

❖ Develop a defined contribution solution. When a company terminates employer-provided health insurance, it can save employees money, while offering a better employee health benefit program for recruiting and retention purposes in the form of a defined contribution solution. Basically, employees purchase their

own individual policies on the open market (a purchase frequently offset by government subsidies), and employers reimburse them.

There are three main approaches to defined contribution healthcare your company can consider:

❖ One, offer a monthly taxable stipend. With this approach, your company provides a taxable monthly stipend on employee paychecks.

❖ Two, establish a formal reimbursement program to reimburse employees for their substantiated individual health insurance costs on a post-tax basis — up to a healthcare allowance specified by the company.

❖ Three, utilize Section 105 of the Internal Revenue Code to establish a formal self-insured medical reimbursement plan to reimburse employees for their substantiated individual health insurance costs on a pretax basis.

Regardless of the defined contribution approach you decide to take, your company should utilize third-party administration software to ensure compliance. ■

Paul Zane Pilzer is a best-selling author, former professor at NYU, and an economist in two White House administrations. Rick Lindquist is president of Zane Benefits, Inc., a leader in individual health insurance reimbursement for small businesses. Editor's note: These views are of the authors of this article only, and do not reflect an endorsement on the part of the editor or that of "Employee Assistance Report."

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Legalizing Pot is a Bad Idea

By Cully Stimson

At first glance, it may appear that the fight to thwart marijuana legalization is a lost cause. Pot pushers want you to believe that legalization is inevitable. Then why did legalization fail in Florida, and why is support for legalization falling?

Perhaps the public is starting to pay attention to scientific data and the actual dangers of marijuana as well as the negative stories coming out of Colorado and Washington State since those states legalized marijuana.

Colorado Governor John Hickenlooper said that legalizing marijuana in his state was “reckless.” “Pot-positive” traffic fatalities have gone up 100% since voters’ legalized pot in Colorado. This is true despite



the fact that overall traffic fatalities in Colorado have gone down since 2007.

The science is clear and unambiguous – pot is a dangerous substance. It is not like alcohol at all. There is a reason it is classified as a Schedule I controlled dangerous substance, along with heroin, LSD and ecstasy. The American Medical Association,

the American Lung Association and other reputable doctors and scientists all reject legalization.

Furthermore, Dr. Kevin Sabet states in his book *Reefer Sanity: Seven Great Myths about Marijuana*, the average strength of today’s marijuana is five to six times what it was in the 1960s and 1970s.

Other reports have found that regular adolescent marijuana users are more likely to use other illegal drugs; use that produced intellectual impairment, doubled the risk of being diagnosed with schizophrenia and increased the risk of heart attacks when they aged into adulthood. ■

Charles “Cully” D. Stimson is a leading expert in criminal law, military law, military commissions and detention policy at The Heritage Foundation’s Center for Legal and Judicial Studies.

Quick Ideas

Signs of Discontent

Many disgruntled, overwhelmed or unhappy employees show signs of their discontent. Making managers aware of these signs and working with them sooner, rather than later, can help a great deal. Behaviors to be on the lookout for include:

- The employee does just enough work to get by.
- The employee complains a lot.
- The employee makes wistful references about other companies.
- The employee makes nostalgic references to employees who have left.
- The employee talks about being “burned out.” ■

- The employee comes in later than usual or leaves earlier than usual.
- The employee withdraws from extra projects.

Source: Harvard Business Review article, “Employee Retention: What Managers can do.”

Resources

📖 *Stopping Difficult People from Sucking the Life out of Your Organization*, \$99, PDF download, PBP Executive Reports, (800) 220-5000, www.pbpexecutivereports.com. Difficult employees can be turned into high-quality personnel. This report shows managers and EA professionals how to do just that.

📖 *The End of Employer-Provided Health Insurance*, by Rick Lindquist and Paul Zane Pilzer, \$25, Wiley, www.zanebenefits.com. According to the authors, choosing and signing up for a new policy can actually be efficient and relatively painless if you know what to expect and are prepared with the correct information. ■

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greater understanding of the client population, and to contribute to current VC literature.

Shepell recognized the opportunity to compare video counseling with in-person (IP) counselling, and to research clinical outcomes from counsellors who delivered both video and in-person counselling to clients. Furthermore, both modalities use the same case management and case files.

Counsellors also shared positive feedback about their experience using video counselling with clients. Completed client satisfaction surveys indicated that users found the service convenient and clinically beneficial.

Shepell chose to examine data points from these surveys to determine if specific outcome measures supported the anecdotal feedback, comparing VC client clinical outcome measures with those of IP clients. The results showed that video and in-person counselling were similar in many respects:

❖ Clients were mostly younger females, which matches traditional EFAP demographics. However, within their age groups, clients over 40 chose VC over IP more than those under 39 and younger; and more couples chose video counselling than in-person.

❖ Sessions, which were comparable in length, received similar helpfulness ratings from clients.

❖ Goal attainment ratings were high for VC clients, and showed no statistical difference from those of in-person clients.

These results were expected given that a significant number of these cases consisted of couple/



Editor's Notebook

Many thanks to Kelly Beaudoin, Barb Veder, and Stan Pope for following up on my

request for an-depth article based on their “video counseling” presentation at last fall’s World EAP Conference in Orlando. (I mentioned in last month’s notebook that cover stories based on World EAP sessions were in the works for 2015).

With webcams, Skype, and other technological innovations, I believe video counseling offers immense, but yet unfulfilled potential. The authors’ Canadian company (Shepell) is considered the leader in delivering alternative EAP counseling modalities.

Like Shepell, I was surprised that people living in remote regions weren’t the primary users of video counseling. However, this made more sense when I learned the importance of *time* and *location*.

Indeed. My job as an editor does not NEARLY rely on appointments like counselors, but even I find myself having to take time zones into account when scheduling chats with prospective authors. Whether it’s in Canada or the U.S., it stands to reason that, with video counseling, “a shift-worker in the West could access a counsellor in the East during pre-local business hours.”

That, of course, is just ONE of the many benefits of VC discussed in this article. If you’re already using VC, we hope the authors have given you suggestions for additional uses. If you’re not, *EAR* hopes you’ll consider it this year. Until next time.

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conjoint cases, which historically have higher drop-out rates than individual cases, and that not all users access EFAP services for mental health concerns.

Of the four general counselling issues (addiction, couple/family, personal/emotional, and work-related) counsellors saw a similar distribution of cases across issues for both VC and IP, except video counselling had an almost even representation of couple/family cases and personal/emotional.

Getting a client to sign up for counselling is one thing; getting them to go through with it is another. Video counselling also had a lower no show/late cancellation rate than in-person counselling.

As stated previously, Shepell thought that people living in remote regions would be the predominant users of video counselling, but this wasn’t the case. *Rather than remoteness, time and location were much bigger factors in using VC.*

For instance, for users who live in an Eastern Time zone, there is greater availability for evening appointments with video counsellors in the West (e.g., a client from Toronto may have a 9 p.m. ET appointment with a BC counsellor who is working at 6 p.m. PT). Or a shift-worker in the West could access a counsellor in the East during pre-local business hours.

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How to Answer the Dreaded ‘Got a Minute?’

By Edward G. Brown

Got a minute? The fact is, unless you are a great rarity today, you not only don’t have a minute, you have a yawning deficit of minutes. There is unfinished work on your desk, and you have personal aspirations and obligations you barely find time for. You’re already stretched for time, so *no*, you don’t have a minute! Yet when almost anybody asks, “Got a minute?” you automatically answer, “Sure, how can I help?” How do you stop doing that?

❖ **Name the problem.** As they say in all the therapy circles, if you can’t name it, you can’t fix it. Here’s the name: It’s not a minute – it’s an *interruption*. A minute freely chosen and freely given is innocuous, but interruptions are thieving little intrusions. There’s the interruption that throws you off task. There’s loss of momentum due to the work stoppage. There’s also the time wasted reassembling your thoughts and resources.

❖ **Recognize the cause.** Why do you say yes when inside you’re thinking, “*God grant me patience, how will I get everything done?*” Because you’re afraid – not shaking in your boots afraid, but you have fears. If it’s your boss, you’re afraid he or she will think you’re not responsive to any needs but your own or you can’t handle your workload. If it’s a customer, you’re afraid they’ll take their business elsewhere. If it’s your colleagues, you’re afraid you won’t sound like a team player.

❖ **Know your facts.** Facts are mother’s milk to good decisions. If you have a budget with X dollars, there’s no agonizing over a decision. The dollars tell you yes or no; no argument, no drama. You need the same facts about your time. *You need to have a solid complete awareness of those tasks that are so important that leaving them undone will cause serious problems.* This means separating them from that long list of things that distract us from critical jobs and responsibilities.

❖ **Don’t say “no.”** The opposite of “yes” doesn’t have to be “no.” “*I would like to give you my full attention. May I let you know when I can do that?*” Some version of those words needs to be custom-tailored to every got-a-minute interrupter, or “Time Bandit” on your list. They let your interrupter know that his or her best interests aren’t served any better than yours by this interruption. Most of all, they keep you from sounding

like that selfish jerk you dread. Scripting your negotiation and rehearsing its delivery, tailored for each of your main “Time Bandits,” will banish any remaining fear.

❖ **Make time a gift.** In this day and age, when it seems like *everyone* is distracted, it’s no small thing to offer your would-be Time Bandit your full attention to his or her needs. When you say, “*I want to take care of that for you, and when I do, I want to be focused so that the outcome will have the quality both of us expect,*” the Time Bandit will not only be mollified about your current unavailability – he or she will be gratified, which is what you want. And you get to keep your “minute,” too. ■

Edward G. Brown is the author of “The Time Bandit Solution: Recovering Stolen Time You Never Knew You Had” and co-founder of the Cohen Brown Management Group. For more information, visit, www.timebanditsolution.com.

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EAPA Issues Fraud Alert

The Employee Assistance Professionals Association (EAPA) has become aware that some members have been contacted by a mailing list company purporting to be selling the attendee list from the 2014 World EAP Conference.

According to the claims, which evidently come from a firm called Event Tech House, the list includes “all the data you need to make your sale: company name, executive name, title, direct email

address, physical address, phone number and more.”

EAPA has been able to determine that this list is fake, and while we have no way of knowing whether any actual conference attendees have been placed on the list, it is NOT the conference attendee list and EAPA has no connection with the soliciting individual or group.

Sadly, frauds like this one are becoming more commonplace. Another example EAPA and other

associations have dealt with recently are the “room pirate” groups that contact prospective attendees or exhibitors at conferences purporting to have access to discounted rooms at conference hotels.

EAPA recommends that all members, exhibitors, and EA professionals remain alert for these scams, and let us know if you receive suspicious communications. ■

Source: EAPA (www.eapassn.org).

Legal Lines

‘Cupid Contracts’ are a Good Idea

Have you ever fallen for a co-worker? It’s fairly common; after all, you spend 40-plus hours a week with them. According to a survey by CareerBuilder, 4 out of 10 people have dated a co-worker at some point, and a majority of them ended up getting married.

But having a workplace romance can get employees into real trouble, especially a boss-subordinate relationship, because it can quickly turn into a sexually harassment lawsuit – with the “underling” claiming they were afraid they’d be fired if they didn’t date the boss.

If an employee client is headed toward a supervisor-worker relationship, employment attorney Kathleen McKenna suggests sign-

ing a “cupid contract” that spells out in writing that the relationship is consensual. Set a few ground rules in case the relationship ends, kind of like an office romance prenup, which of you will leave the department, or the company, if the relationship flames out, or if management decides you should no longer work together.

The employee must think long and hard about what it would be like to lose his or her job, because in most failed office romances, one person ends up leaving, voluntarily or not.

Actually, even co-workers *not* involved in the relationship sometimes end up suing the company because the employees who *are* in the relationship can make the workplace hostile for *everybody*. ■

Quick Ideas

Communication Tips

Like anything else, it takes practice to build communication skills. The following are some tips for EA professionals to share with their corporate clients:

- ❖ Repeat what you *thought* you heard. You may have heard it wrong.
- ❖ Provide examples of what you mean.
- ❖ Speak clearly and distinctly.
- ❖ Maintain a positive attitude. People will be more interested in what you say, and more likely to listen, when you display a positive attitude.
- ❖ Listen actively. Put down your smartphone and give the person your *undivided* attention.
- ❖ Share. Sharing ideas involves a personal effort to relate to others. ■

Source: City of Milwaukee EAP.