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How Stress Can Kick the Health Out of You

A critical shift in medicine has been the recognition that many of the damaging diseases of slow accumulation can be either caused or made far worse by stress.

—Robert Sapolsky (1998)

LEARNING OBJECTIVES

- I will be able to recognize the potential impact on my health from long-term stressors.
- I will understand the powerful mind and body connection.
- I will know how to calm myself quickly whenever I am feeling stressed.
- I will be able to cite the specific stressors at school and in my life that affect me on a regular basis.
- I will understand the concept of *eustress* and how some stress actually helps me to be successful in life.

Debbie L. embarked on her new teaching career, thrilled to be in a profession she always dreamed of. She was assigned to a junior high school in a rough area of town, where she was soon assaulted by a student, had a knife pulled on her, was followed home by a strange-acting man after attending a late faculty meeting, and even had a petition circulated against her by several of her teaching colleagues. Before long, Debbie's regular routine began with signing in at school, getting nauseous, and running to the bathroom. When she came home after teaching each evening, she had to have a couple of glasses of wine to calm down from the day. Did Debbie's stress end her teaching career? You'll see the rest of Debbie's story at the end of the chapter.

On June 6, 1983, "Stress!" was on the cover of *Time* magazine, and it was referred to as the "epidemic of the eighties" and the nation's primary health problem (American Institute of Stress [AIS], n.d.). Job stress was listed as, by far, the leading source of stress among Americans.

Let's move on to the end of 2007. On December 12, 2007, results from the American Psychological Association's (APA) annual survey of stress among the general public in the United States was released (APA, 2007). This "Stress in America" survey listed results from close to 2000 Americans, 18 and older, and the survey was conducted in both English and Spanish.

Most of those surveyed (79%) said that they could not avoid stress in their lives. A total of 77% of those surveyed experienced stress-related physical symptoms, including headaches, gastrointestinal (GI) problems, and unexplained fatigue. Nearly half of those surveyed (43%) blamed problems with their families or personal time on their stress levels (APA, 2007).

The survey was repeated in September 2008, with data gathered between June and August 2008 (APA, 2008). Nearly half (47%) of respondents reported increases in their stress levels since 2007. In the report, Dr. Katherine Nadal, APA's executive director for professional practice, said, "People's emotional and physical health is more vulnerable, given the high levels of stress in our country right now" (APA, 2008).

Good News!

Just because you are presently suffering from stress-related physical symptoms does not mean you are doomed to continue to suffer those symptoms. See Table 1.1 for a checklist of symptoms and the location in this book where you will find easy-to-learn prescriptions for eliminating those symptoms.

You can see from the prescriptions side of Table 1.1 that this book is filled with plenty of easy-to-learn remedies and buffers to help you ward off stressors and eradicate them once they are in place.

Notice that your stress-related symptoms are broken down into five categories:

anxiety, depression, physical, behavior, and relationship symptoms. Most people have a combination of symptoms across all of these categories, and many studies show that folks with chronic anxiety or depressive symptoms, combined with hostility and cynicism, have double the risk of developing the diseases and symptoms listed under physical symptoms.

Table 1.1 Checklist of Potential Stress Symptoms and Self-Help Prescriptions That Really Work






Copy this table and check all of the symptoms that apply to you. Add any additional symptoms that you are experiencing. Note the chapters and resources where prescriptions to resolve those symptoms are discussed and visit Resource B to find additional prescriptions that also address these symptoms.

Anxiety Symptoms	<i>Prescriptions</i>
<input type="checkbox"/> Desperate <input type="checkbox"/> Feeling as if you are losing control <input type="checkbox"/> Frightened <input type="checkbox"/> Irritable and frustrated <input type="checkbox"/> Negative, self-defeating thinking <input type="checkbox"/> Nervous, on edge, uptight <input type="checkbox"/> Panicky <input type="checkbox"/> Racing thoughts <input type="checkbox"/> Sense of impending doom <input type="checkbox"/> Worrying <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <i>Recognize your Life Event Changes (see Chapter 2)</i> <input type="checkbox"/> <i>Take charge of future life events (see Chapter 2)</i> <input type="checkbox"/> <i>Relax your muscles (see Resource C)</i> <input type="checkbox"/> <i>Recognize your distorted thoughts (see Chapter 3)</i> <input type="checkbox"/> <i>Use the Thinking-Pattern Worksheet (TPW) (see Chapter 5)</i> <input type="checkbox"/> <i>Realize that these symptoms are temporary, and they will lift once you take charge of your thinking and planning for the future (see Chapter 8)</i>
Depression Symptoms	<i>Prescriptions</i>
<input type="checkbox"/> Appetite changes <input type="checkbox"/> Concentration difficulties <input type="checkbox"/> Helplessness <input type="checkbox"/> Hopelessness <input type="checkbox"/> Indecisiveness <input type="checkbox"/> Isolation and avoiding contacts <input type="checkbox"/> Loss of confidence <input type="checkbox"/> Loss of energy <input type="checkbox"/> Loss of interests <input type="checkbox"/> Loss of motivation <input type="checkbox"/> Loss of sex drive <input type="checkbox"/> Poor self-esteem	<input type="checkbox"/> <i>Recognize your distorted thoughts (see Chapter 3)</i> <input type="checkbox"/> <i>Use the TPW (see Chapter 5)</i> <input type="checkbox"/> <i>Use the Thought-Stopping Technique (see Chapter 5)</i> <input type="checkbox"/> <i>Practice relaxation techniques (see Resource C)</i> <input type="checkbox"/> <i>Be more assertive (see Chapter 4)</i> <input type="checkbox"/> <i>Laugh each day (see Chapter 7)</i>

(Continued)

Table 1.1 (Continued)

Depression Symptoms	<i>Prescriptions</i>
<input type="checkbox"/> Sadness <input type="checkbox"/> Sleeping changes <input type="checkbox"/> Suicidal thoughts <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	
Physical Symptoms	<i>Prescriptions</i>
<input type="checkbox"/> Agitation <input type="checkbox"/> Chest and/or muscle tightness <input type="checkbox"/> Diarrhea or constipation <input type="checkbox"/> Feeling dizzy or lightheaded <input type="checkbox"/> Feeling tired and weak <input type="checkbox"/> Headaches, migraine and tension <input type="checkbox"/> Muscle tightness, pain, and spasms <input type="checkbox"/> Racing heart <input type="checkbox"/> Restlessness or jumpiness Reduced disease immunity may lead to or inflame a host of diseases, including <input type="checkbox"/> Asthma <input type="checkbox"/> Back and neck pain <input type="checkbox"/> Cancer <input type="checkbox"/> Cardiovascular disorders, including high blood pressure and chest pain <input type="checkbox"/> Dermatological disorders <input type="checkbox"/> Diabetes <input type="checkbox"/> Gastrointestinal disorders	<input type="checkbox"/> <i>Practice relaxation techniques (see Resource C)</i> <input type="checkbox"/> <i>Practice assertiveness skills (see Chapter 4)</i> <input type="checkbox"/> <i>Practice stress hardiness (see Chapter 6)</i>

Physical Symptoms	Prescriptions
<ul style="list-style-type: none"> <input type="checkbox"/> Headaches <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 	
Behavior Symptoms	Prescriptions
<ul style="list-style-type: none"> <input type="checkbox"/> Anger and hostility <input type="checkbox"/> Harmful habits (overeating, use of substances, smoking, gambling, overspending) <input type="checkbox"/> Impatience <input type="checkbox"/> Impulsivity <input type="checkbox"/> Irritability <input type="checkbox"/> Rapid speech <input type="checkbox"/> Resentment <input type="checkbox"/> Procrastination <input type="checkbox"/> Withdrawal <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 	<ul style="list-style-type: none">  Practice relaxation techniques (see Resource C)  Practice assertiveness skills (see Chapter 4)  Practice stress hardiness skills (see Chapter 6)
Relationship Symptoms	Prescriptions
<ul style="list-style-type: none"> <input type="checkbox"/> Intimacy issues <input type="checkbox"/> Lack of assertiveness <input type="checkbox"/> Not listening to partner's needs <input type="checkbox"/> Short fuse with partner or friends <input type="checkbox"/> Parenting disagreements <input type="checkbox"/> Poor communications <input type="checkbox"/> Power struggles <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> 	<ul style="list-style-type: none">  Practice active-listening skills (see Chapter 4)  Practice assertiveness skills (see Chapter 4)



Take care of your emotional health by taking care of your physical health. Consider visiting a licensed naturopathic physician to learn about foods and natural supplements that have been proven to reduce and prevent stress. The following are examples of healthy habits that have been shown to directly impact moods and stress levels: keep your blood sugar low with frequent, smaller meals that include protein; eat light at night; get ample sleep; avoid alcohol, caffeine, and tobacco; load up on antioxidant-rich foods, and keep your weight in the normal range for your age and height.

There are also potential emotional warning signs of stress-related burnout that are specific for teachers, including the following:

- Difficulty sleeping well on Sunday evenings,
- Feeling like not going to work and calling in sick,
- Having difficulty concentrating on tasks,
- Feeling overwhelmed by the workload and/or having a sense of inadequacy to handle the tasks assigned,
- Withdrawing from colleagues or engaging in conflict-filled relationships with coworkers, and
- Having a general feeling of irritation regarding school.

TALES OF A SABER-TOOTHED TIGER

A large body of evidence suggests that stress-related disease emerges, predominantly, out of the fact that we so often activate a physiological system that has evolved for responding to acute physical emergencies, but we turn it on for months on end, worrying about mortgages, relationships and promotions.

—Robert Sapolsky (1998)

Hans Selye (1976), a Canadian physician and researcher, known as the “Father of Stress,” defined stress as “the nonspecific response of the body to any demand” (p. 1). So stress is the feeling we get in response to any *stressor* (Selye, 1976), whether it takes place at school or at home. Stressors throw your body out of balance, for example, an injury, illness, or pain. The stress response is part of your body’s automatic attempt to restore balance, referred to as *homeostasis*. But it is critical to understand that for humans stressors also include beliefs, fears, worries, anticipation of something bad happening, and anything in our thinking that provokes the stress response. As you will learn throughout this book, these stressors are strictly under our control, and we can eliminate them once we understand them.

Of course, our bodies have been hot-wired genetically to deal with stressors involved in physical danger as a matter of survival. Visualize a caveman (or woman) coming out of the cave one morning, stretching, and contemplating the day's tasks. As our friend looks around, he spots a hungry saber-toothed tiger 20 yards away. This recognition of a serious danger throws the brain into emergency mode through the *sympathetic nervous system* (SNS), genetically programmed to prepare him for the fight, flight, or freeze response to this stressor. The SNS is so named because it provides a *sympathy* link between our perceptions and thoughts and the feelings in our internal organs.

Once he sees the tiger and thinks about the danger, the caveman's SNS automatically turns on several systems in his body, which begin the process of adapting to and dealing with this potentially life-threatening stressor. The resultant stress response includes the following actions:

- *Blood* that would be completing the digestive process moves away from the GI system to the external muscles. During this emergency stress response, there is no time for the slow process of digestion; plus, this would require energy that would serve better in the muscles for reacting in the fight, flight, or freeze response to the stressor.
- *Perspiration* increases to cool the body, which helps it burn more energy for fight, flight, or freeze responses.
- *Muscles*, particularly in the arms, legs, back, and neck, tighten to be ready to act quickly.
- *Glucose* pours into the bloodstream to provide instant energy for the fight, flight, or freeze reaction to this stressor. But how does the caveman's body deliver the glucose to the critical muscles as quickly as possible?
- His *heart rate*, *blood pressure*, and *respiratory rate* all increase to transport nutrients and oxygen at greater rates to his brain to make decisions and to his muscles to prepare for action.
- *Adrenalin* from the adrenal glands pours into the bloodstream to keep him alert.
- *Cortisol*, known as the stress hormone, is released to increase energy and strengthen the body's defenses.
- *Blood clotting* chemicals spring to action in the bloodstream to prevent excess bleeding in case there is an injury that takes place during the fight, flight, or freeze response.
- The *immune system* is inhibited. This is fine for the short term, when you don't need your immune system to be making antibodies to protect you from viruses and diseases that may threaten your health or life months down the road. However, this is a critical reaction because the long-term inhibition of the immune system from continual exposure to stressors (and continually switching on the SNS) suppresses the immune function and strips the body of its natural protection from diseases.

You can appreciate the remarkable adaptation of the human body through evolution to deal with obvious life-threatening and dangerous emergencies, but because these emergencies were infrequent when man first existed, the system was designed to switch on *infrequently*. Grazing animals, for example, have to switch on this nervous system periodically when they are threatened by predators, but the encounter is usually relatively short-lived, and the animal then relaxes and goes about its business of grazing.

For humans, the SNS also responds to situations and events that we interpret and *think* about—typically not emergencies or threats. Unfortunately, our brain does not recognize the difference between a real threat and one that we anticipate by vividly imagining something awful or sad happening to us in the future.

For example, if I ask you to use all of your senses to visualize yourself biting into a juicy lemon right now, you will begin to salivate automatically and your glands secrete a base solution into your mouth (saliva) to counteract the acid from the lemon. So the brain takes its directions from your thoughts and images, even though what you are visualizing and thinking about is not actually occurring.

Think about what may be a typical day for you: You had a rough day at school, with several of your students displaying disruptive behavior as the rest of the class laughed in amusement. You got word from your non-supportive principal that because of budget cuts, your teaching assistant's position will be eliminated by the end of the week, and by the way, a disgruntled parent insisted on a conference with you after school today. You said to yourself,

I'm having enough trouble trying to explain their homework assignment without these disruptions. They'll never understand how to do their homework if I don't get this done before the bell rings. Once my assistant leaves, my workload will be unmanageable. I am in no mood to deal with this parent after school today. My principal never supports me. This isn't fair. I don't know what to do.

Each of these anxiety-producing thoughts, beliefs, and predictions represents a *psychological* stressor that has evolved relatively recently in our evolutionary development. Importantly, each is a potential upset to our internal system, switching on the SNS the same way that a real emergency does.

THE INCREDIBLE MIND-BODY CONNECTION

The evidence is growing stronger that states of mind can affect physical health.

—Goleman and Gurin (1993)

As I mentioned, our brains do not differentiate real dangers from those we craft in our minds when we worry about actual or anticipated disturbing

events in our lives. Each physiological response to life-threatening stressors serves a critical, life-preserving purpose, as noted in the nine examples earlier; but because our bodies were designed only to activate this SNS infrequently and when our lives are *actually* in danger, the daily switching on that so many of us experience because of our worrying puts tremendous strain on the system. The result is the potential for physiological damage. Therefore, as scientists Robert Sapolsky (1998) and Hans Selye (1976) describe, each adaptive response has a debilitating consequence for the human body when it is triggered frequently by worries and concerns:

- *Blood* continually leaving the GI tract to flow into the muscles of the legs and arms preparing for the fight, flight, or freeze reaction can lead to vomiting, energy loss, and chronic *digestive problems*, including gastritis and irritable bowel syndrome.
- People who are constantly under stress frequently have embarrassing *perspiration issues*, including dampness when shaking hands.
- *Muscles* continually tightening up can lead to muscle spasms, tension, and *pain*, particularly in the neck and back. In addition, chronic muscle tension contributes to migraine and tension headaches, jaw clenching, and fatigue.
- *Glucose* spilling into the bloodstream often contributes to *diabetes* and other endocrine disorders.
- If your *blood pressure* rises to 180/130 when you're facing someone who is threatening your life, your body is reacting appropriately, but if your pressure is 180/130 several mornings a week as you get ready to go to school, you are at great risk for chronic cardiovascular problems and *hypertension* (high blood pressure), causing potential consequences such as circulation problems or heart and kidney damage. Chronic hypertension also causes feelings of *nervousness and pressure*.
- The chronic worrier or anxious person triggers the brain to spill *adrenalin* continuously into the bloodstream. Because a function of adrenalin is to keep you alert, a side effect of having too much adrenalin residing in your bloodstream is *insomnia*. This is why so many highly stressed people have sleeping difficulties.
- Although cortisol is necessary to prepare the muscles for vigorous reactions in the face of danger, the continual release of cortisol into the bloodstream blocks the removal of certain acids and breaks down lean tissue to convert to sugar for energy in the survival scenario. This causes *ulcerations* in the lining of the stomach, which is why so many people diagnosed with ulcers are people suffering from chronic stress. Long-term, chronic release of stress hormones like cortisol damages the body in many ways and leads to many diseases.
- Frequent *blood clotting* puts a person at a great risk for *stroke or heart attack*.
- *Suppressing your immune functioning* because of the constant switching on of the SNS can lead to disastrous consequences in terms of fighting infections and protecting you from *immune system disorders*,

including allergies, arthritis, AIDS, lupus, some cancers, the common cold, and the flu.

We can literally look at any major system in the body and find evidence of symptoms being caused in whole or in part by too much activation of the stress-response system, rather than by the invasion of disease-causing bacteria or cancers. As Sapolsky (1998) explains it, “If you repeatedly turn on the stress response, or if you cannot appropriately turn off the stress response at the end of a stressful event, the stress response can eventually become nearly as damaging as some stressors themselves” (p. 16).

As you would expect, much research has linked stress with many chronic diseases and with the many of the leading causes of death, including heart disease, cancer, stroke, lung diseases, and of course, suicide (Sapolsky, 1998).

Stress also impacts cholesterol levels, platelet activation (causing heart attacks), and often shortens life span. Mental stressors, such as loneliness, depression, and isolation, are also associated with serious illnesses and shortened life span. Sleep disorders negatively impact the immune system and life span, and because stress is one of the main causes of the inability to fall and stay asleep, you can see the tremendous impact of stress on our overall health and longevity!

Physiological Symptoms Associated With Stresses Inherent in Teaching

In their book, *Stress in Teachers*, Dunham and Varma (1998) cite many studies showing a clear relationship between the stressors inherent in teaching and physiological symptoms. The prevalence of stress-related symptoms for teachers is (in descending order):

- physical exhaustion/fatigue,
- skeleto-muscular tension/pains,
- heart symptoms and high blood pressure,
- headaches,
- digestive disorders,
- respiratory difficulties,
- sleep disturbances, and
- voice loss.

It is important to understand that the stressors we face are not actually provoked by the events that take place in our lives daily but *how we interpret* and think about those events—what we say to ourselves about those events. We can set off our emergency response by *simply thinking about* these events or anticipating potential problems befalling us in the future. Consider your stress when your administrator tells you that you’ll be taking a test next month to determine whether you will be retained in the school. Will you be worried about that test, even though it is weeks away? Simply *anticipating* a problem can trigger the SNS to switch on.

A variety of sources, including the AIS (n.d.), estimate that 75% to 90% of the patients who arrive at the family practice or internist’s office are suffering from stress-related physical symptoms.

This is no surprise. Just look at common phrases in our everyday language: *I am worried sick. My job is a pain in the neck. Sometimes I can’t stomach some of my students.*

Perhaps you are aware that every drug company uses placebos (fake pills) in their research on real drugs. The companies need to prove that their drug has major effects beyond those produced in the minds of the patients who believe they are being given a drug to treat their symptoms. Hundreds of studies have determined that the optimistic, positive attitudes that patients have when their doctor prescribes something that “should really help you” (even though it was a benign sugar pill), lead to symptom reduction (Sapolsky, 1998; Seligman, 1998). Examples of conditions treated effectively with placebos are allergies, depression, migraine headaches, and alcohol dependence.

Besides the diseases and disorders listed previously that are caused or made worse by the impact of chronic stress, people often get themselves into more trouble when they try to cope with their stress: Alcoholism, substance abuse, and chronic smoking are common coping methods people use to modify their stress. Psychotropic medications, such as antidepressants and tranquilizers, are being prescribed in record numbers. You have much more control over your physical health than you realize. Research shows that more than half of the people hospitalized in the United States could have prevented their symptoms by changing their lifestyles (Charlesworth & Nathan, 1984).

Phew! Let’s all take a deep breath here . . . literally—*Take a nice deep breath here*—That alone will begin to calm you. Yes, I know . . . the statistics you just reviewed are frightening, but whatever your stress level, you are *not* hopelessly destined to get sick or die from the stressors in your life.

Although exposure to chronic or repeated stressors can *potentially* make you ill or increase your *risk* of getting a disease, such exposure *does not* automatically lead to illness. Many teachers under the same stress as you do not get sick. How can that be? Can we learn how to increase the effectiveness of how we cope with the stressors that surround us? We will examine these questions as we go along.

What we do know is that suffering from stress does increase your *risk* of getting physically sick, and if you already have a disease, stress increases the probability of your defenses collapsing, thus setting off more symptoms. But *you* ultimately have control over how you will internalize your thoughts and beliefs about these stressors, and those thoughts and beliefs are the keys to mastering stress.

Good News!

Because we know from the placebo effect that your mind can visualize both positive and negative images and respond accordingly, you can learn to consistently visualize *positive, healthy images*, and as a result, you can avoid many of the physical and emotional consequences of the potential stressors in your life.



Practice breathing through your diaphragm. Put your hands on your stomach and breathe deeply so that your hands move out when you inhale and move back in when you exhale. If your hands are not moving and only your shoulders and chest move when you breathe deeply, you are engaging in shallow, less relaxing breathing. You can easily teach yourself to breathe through your diaphragm with practice.

SOME STRESS IS ACTUALLY GOOD FOR YOU

People are not disturbed by things, but by their perception of things.

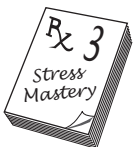
—Epictetus, Greek philosopher

We know that too much chronic stress can actually kill you, but did you know that too *little* stress is also bad for you? Hans Seyle (1976) differentiated two kinds of stress: *distress* and *eustress*. Distress is obviously the harmful, unpleasant stress, and eustress is good stress, from exciting events, job promotions, a new class to teach that you were bidding for, and so on.

Although the body reacts to eustress in exactly the same way as it does to distress, eustress causes much less damage. Why is that? *It's because it's never the stressor that's the problem*; rather, it's how you interpret it and what you say to yourself about that stressor that determines whether the resultant stress experience is good or bad.

Even if you have many eustress experiences in your life, such as purchasing a new home, getting married, the birth of a baby, and taking a vacation, if you worry that these events will change your life in a negative way, the resultant stress will be felt as distress. For example, you are excited about the upcoming birth of a child but incessantly worry about how you will balance taking care of a newborn in your already hectic life.

Too little stress leaves most people bored and tired. It takes a certain amount of stress to keep alert, stay motivated, think creatively, solve problems, and keep your self-confidence high. In addition, gross motor skills and reaction time work best with a manageable level of stress. Think about the times you were so relaxed that you just couldn't muster the energy to go to the gym or even do a crossword puzzle. *Too little stress* cuts into your motivation and productivity; but *too much stress* cuts into your motivation, productivity, *and* your health!



Recognize that you can live with a certain amount of stress in your life and that it may even be beneficial to you.

The best balance is achieved by managing the way you deal with each stressor that comes along, rather than trying to eliminate each from your life altogether—a feat you most likely cannot accomplish anyway. As an example, embracing the change that comes with a new curriculum is a

good thing, rather than finding reasons to debate the new curriculum because you fear change and are imagining how much more work is involved for you to adapt the curriculum changes.

Ask yourself what calm people do to maintain their stress levels. Examples of answers to that question are jogging or walking each morning before work, making time for lunch each day with a calm friend or colleague, and reading articles or the rest of this book on how to master the stresses in life.



Using Table 1.2, you can check off specific coping skills that you would like to learn using this book. Each of these skills is also directed at helping you to ward off stress and eradicate the stress you currently find yourself under. Make a copy of this table and check off the skills you learn as you go along.

Table 1.2 Checklist of Teacher Coping and Buffer Skills

Copy this and check off each skill as you accomplish it. These are discussed in detail throughout the book.
Coping and Buffer Skills I Need to Work On
<ul style="list-style-type: none"> <input type="checkbox"/> Develop a strong sense of self-esteem and feel good about myself in general <input type="checkbox"/> Be able to quickly determine when I am under stress (e.g., the symptoms may be hidden in frequent illnesses, vague pains, increased intake of alcohol or cigarettes, unusual weight gain or loss, or impulsive behaviors) <input type="checkbox"/> Understand when I need to delay making changes in my life <input type="checkbox"/> Recognize when my thinking is negative and/or distorted <input type="checkbox"/> Have a series of relaxation exercises built into my week <input type="checkbox"/> Take relaxing time for myself each week <input type="checkbox"/> Understand if I have personality traits that make me vulnerable to stress and practice modifying those traits <input type="checkbox"/> Remain optimistic regardless of circumstances <input type="checkbox"/> Develop psychological hardiness skills to ward off stress <input type="checkbox"/> Make sure I find funny things to laugh at each week <input type="checkbox"/> Assert myself and use good listening and communication skills <input type="checkbox"/> Set realistic goals for myself <input type="checkbox"/> Practice acts of forgiveness, volunteerism, and help a stranger in line or in traffic <input type="checkbox"/> Have exercise and healthy diet habits <input type="checkbox"/> Have a gratifying visit with someone who is special in my life

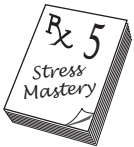
Remember Debbie, our junior high school teacher? She embarked on her career by being nauseated shortly after arriving at school and running to the bathroom. She had plenty of physical and emotional reasons to quit teaching, didn't she? But Debbie viewed this awful start to her teaching career as a challenge. She thought long and hard about how she could get both her students and her faculty colleagues to embrace her. In her own words,

I jumped in headfirst and took on all kinds of extra duties for the kids. I did the yearbook, took the kids on amazing field trips, entered them into all kinds of fun contests, which they won, and pretty much did everything I could for the students.

Debbie's students and colleagues began to give her positive feedback. Debbie began to enjoy coming to school each day. In fact, she was so successful that she won the Teacher-of-the-Year award for her school.

You see, Debbie decided to manage the way she interpreted and dealt with situations she could not change and focus on where she could have an impact. She couldn't please every student, and she couldn't put the school in a better neighborhood. But she could focus on helping her students have a much better school experience than they were having prior to her arrival.

In subsequent chapters, you will learn how to manage, interpret, and talk to yourself about the stressors in your life so that you can truly control your stress level.



Stay fit. Run, bike, swim, walk, or hike each week. Aerobic (heart rate increasing) exercise releases endorphins. Other ways to benefit from exercise are dancing, gardening, or raking leaves. You don't have to engage in vigorous activity to benefit.

As was noted in the Preface, each chapter in this book will conclude with an action plan, which will tie back to the learning objectives for stress mastery for that chapter. Having a checklist action plan will help you to keep you on track for practicing your new stress mastery skills.

ACTION PLAN FOR STRESS MASTERY

Table 1.3 My Action Plan for Stress Mastery

Check each one when you've accomplished it.	
New Behavior	<i>What I Did and the Date Accomplished</i>
<input type="checkbox"/> Whenever I am feeling stressed or overwhelmed, I will calm myself by taking a series of slow, deep breaths in through my nostrils and out through my mouth. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	What I did:
	Date accomplished:
<input type="checkbox"/> I will not get overwhelmed by worrying about stress. I will tell myself that I can live with some stress and actually use it to my benefit. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	What I did:
	Date accomplished:
<input type="checkbox"/> I will embrace change, rather than resist it, and look for ways that change will lead to positive outcomes. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	What I did:
	Date accomplished:
<input type="checkbox"/> I will list all of the stressors that are currently affecting me related to my job, and then I will find something positive to say about as many of these stressors as possible. <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	What I did:
	Date accomplished:
<input type="checkbox"/> I will list positive stressors in my life that actually help me (eustress). <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	What I did:
	Date accomplished:

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