



# IMPROVING YOUR HEALTH

## LOOKING AHEAD

After completing this chapter, you will be able to

- Understand a variety of health issues as they relate to wellness.
- Distinguish between good nutrition and poor eating habits.
- Define the use of stress relief in terms of your health.
- Define meditation and relaxation.
- Understand the use of anger management.

## Health

How do you define health? For many, being healthy means being free of disease, yet is that all there is to it? Think of **health** as a general feeling of physical and mental well-being. A realistic picture places health on a continuum from being very ill to very healthy.

Very healthy is synonymous with **wellness**, a high level of physical and mental well-being. Total wellness includes being the following (Bloomfield, 1978).

- Trim and physically fit
- Full of energy, vigorous, rarely tired
- Free of minor complaints (such as indigestion, constipation, headaches, insomnia)
- Alert, able to concentrate, clearheaded
- Radiant, with clear skin, glossy hair, and sparkling eyes
- Active and creative
- Able to relax easily, free of worry and anxiety
- Self-assured, confident, optimistic
- Satisfied with work and the direction of your life
- Able to assert yourself, stand up for your rights
- Satisfied with your sexual relationships
- Free of destructive health habits, particularly smoking, overeating, and excessive drinking
- Fulfilled and at peace with yourself

Even though few people possess every characteristic, wellness is possible; the closer you come to it, the greater your chance for a fulfilling life. Try thinking of the body as a machine. How well are you taking care of it? Machinery can be replaced; whole bodies cannot. Unfortunately, most people treat machinery better than they do their own bodies.

An important beginning for you is an understanding of your degree of wellness. This section will emphasize ways you can become an active participant in maintaining good health. The following “Tips to Wellness” are a few of the possible health-enhancing suggestions.

### Tips to Wellness

- *Increase physical activity.* For most, the easiest way to increase physical activity is to walk more. The key is to find activities that you enjoy and will do on a regular basis—then move your body!
- *Improve your nutrition.* Learn what is healthy and then put that knowledge into practice. Realizing that you will have only one body, care for it better than you do a vehicle or other material object.
- *Maintain a healthy body weight.* Set a realistic goal. People feel and look better when their weight is “right” for them. If you are obese, aim for 5 percent to 15 percent weight reduction and notice a dramatic difference.
- *Get adequate sleep.* Being well rested improves all areas of the self.
- *Effectively cope with stress.* You can’t escape stress; however, you can manage it and make it beneficial in your life.

Even though most people consider their health to be a high priority, a large number admit that they do not practice health-enhancing behaviors, and several even pursue unhealthy lifestyles, especially during high school and college years. Do you take your health for granted? Any disregard of your health in the present has ramifications for the future. Former governor of Colorado Richard D. Lamm stated:

The single most important factor determining our quality of life is our health and the single most important factor affecting our health is the degree to which we as individuals are willing to take responsibility for our own diets and exercise, no matter what age we are at the present time. (Carlson and Seiden, 1988)

In thinking about your health, which of the following three categories best describes you (Croze, 1997)?

**Health gamblers:** They take their health for granted and assume that there is little they can do about changing the way they are. “My dad died at a young age of lung cancer so I’m expecting that will happen to me, too,” said a 30-year-old man as he smoked another cigarette.

**Health mechanics:** They are willing to tend to their health when illness strikes, yet do little to promote wellness. “I figure if it isn’t broken, why do anything?” was how one woman described her attitude.

**Health gardeners:** They are mindful of their physical and mental health, take steps to prevent illness, and are active in promoting wellness. “I eat sensibly most of

the time, use supplements to elevate my health and protect my body, exercise regularly, and get sufficient rest. I feel absolutely great most of the time!” commented a woman.

Are you satisfied with your category? Later in this chapter you will read about several ways to become a “health gardener.”

### Taking Control of Your Health and Well-Being

Choosing wellness is the first step in getting rid of unhealthy behaviors and in preventing disease. Motivation comes from being informed on health issues. Then, if you truly value yourself, you can make wise choices. Ask yourself how healthy you want to be and then educate yourself about making healthy choices.

*Eliminate unhealthy behaviors and habits.* Choices that add to or detract from the quality of life are yours to make.

Let us explore why putting the wellness tips into practice will enhance your life and learn ways to accomplish each one.

### Physical Activity

Physical activity is positively related to:

- Living longer (Fozard, 1999)
- Lower risk of heart disease (Lee et al., 2001)
- Decreased risk of both colon cancer (Batty, 2000) and breast cancer (Verloop et al., 2000)
- Prevention and better management of diabetes (Folsom and Kushit, 2000)
- Lowered blood pressure (*Harvard Health Letter*, 1999)
- Relief of stress (Bartolomeo, 2000) and of depression (Mangum, 2000)
- Increased cognitive skills especially in older adults (Larkins, 1999)
- Protection against and better management of Alzheimer’s disease (Friedland, 1998)
- Fewer chronic medical problems, higher levels of functioning, and greater strength in older adults (Fozard, 1999)
- Lowered risk of osteoporosis (Adler and Raymond, 2001)
- Healthy weight maintenance (Anderson and Wadden, 1999)
- Smoking cessation (Aschwanden and Cederborg, 1999)

Becoming more active seems to benefit all areas of the self. How much activity is healthy? A U.S. study showed that the risk of death can be reduced 19 percent by adding just one mile to an ordinary daily walk (Hakim et al., 1998). Also the “10,000 Steps Program” is an easy-to-use, interactive way to get physically active. Taking 10,000 steps each day will help you:

- Boost your energy
- Reduce stress
- Manage your weight
- Feel great



**Figure 6-1 Enjoyable physical activity contributes to wellness.**

An important point is to be sensible about exercise, as intense, long-duration exercise can actually depress the immune system (Pedersen, Rohde, and Zacho, 1996).

Reasons for not becoming more physically active are often heard. “I cannot afford to join a health club right now” or “I do not have time” are among the most common. In Chapter 4 you read how excuses can block happiness. Be honest with yourself. If you sincerely want to add physical activity to your life, you can. Simple ways are to just walk farther and to climb stairs instead of using an elevator or escalator, walk during break time, park further away or walk with a friend on a regular basis. To motivate you, read what a well-known authority on wellness says:

Human beings are meant to walk. We are bipedal, upright organisms with bodies designed for locomotion. Walking exercises our brains as well as our muscular skeletal systems.

When you walk, the movement of your limbs is cross-patterned. This type of movement generates electrical activity in the brain that has a harmonizing influence on the whole central nervous system a special benefit of walking that you do not necessarily get from other kinds of exercise. (Weil, 1995b, p. 188)

Enthusiastic walkers enjoy the psychological benefits as much as they do the physical gains. Another benefit is a more pleasing appearance. When asked to identify the everyday hassles in life, middle-aged people listed weight as their main concern (Lazarus, 1981). Does it seem likely that exercise would do much to alleviate this problem, thus reducing stress? A medical examination before you begin any strenuous program is suggested. Realize that you can feel better, have more energy, and save money on medical bills. The time spent in physical activity could be the wisest investment you will ever make (Fig. 6-1).

## Nutrition

Would it surprise you to learn that many people know little about this subject? Do you know what foods contain certain vitamins and minerals and how much of each is healthy? What about the foods that are definitely unhealthy and that make up a large portion of the typical American diet? Are you aware that:

- Food and supplements can be used to maximize brain power, boost memory, elevate mood, improve IQ and creativity, and prevent and reverse mental aging (Carper, 2000).
- Diet is related to the most common chronic diseases including coronary heart disease, hypertension, cancer, and osteoporosis (Shikany and White, 2000).
- Calcium deficiencies lead to osteoporosis (Cromer and Harel, 2000). Calcium saves bones, relieves premenstrual symptoms, helps prevent colon cancer, and fights fat (Carper, 2000). Yet, of those over 50, only

60 percent of men and less than 50 percent of women consumed the recommended daily allowance; for teens it was far worse with only 25 percent of boys and 10 percent of girls getting enough calcium. (Raloff, 2000). Do you consume enough calcium?

- Antioxidants in several foods are associated with a decreased risk of cardiovascular disease and cancer (Agarwall and Venketeshwer Rao, 2000).

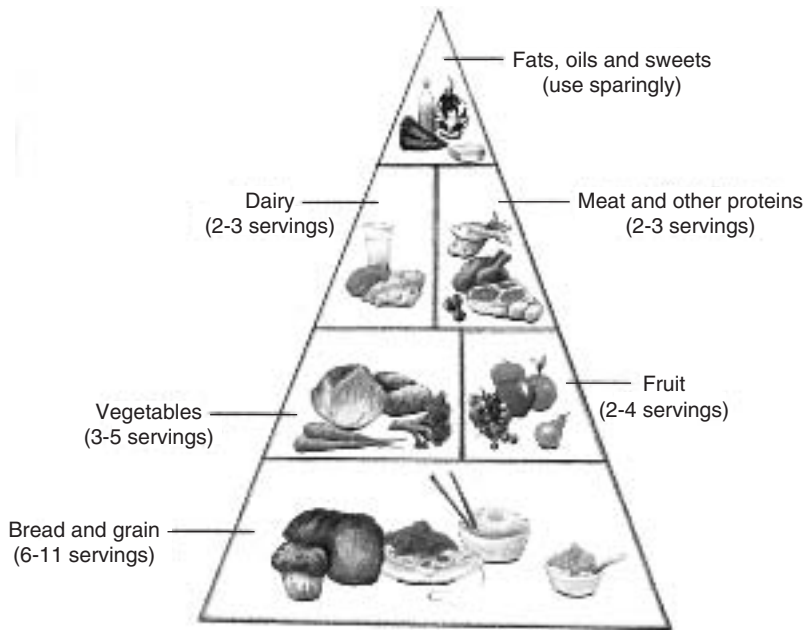
These facts will come as no surprise if you consider that your body uses what you put into it to build cells and strengthen your immune system. Unless you are certain that you are taking in the amount of nutrients not only to stay relatively healthy but also to serve as a potential preventive force, you will not achieve a high level of wellness. Even a small increase in fruit and vegetable intake has the potential to prevent disease (Khaw et al., 2001). Unfortunately, half of us do not get the minimum of three vegetable servings a day; three-fourths do not eat the suggested two servings of fruit. In fact, no fruit whatsoever passes the lips of half of American adults on any given day (Jaret, 1998).

Even government experts say that a good diet may not be enough. Scientists at the Institute of Medicine recommend supplements to get enough B vitamins, which appear to play an important role in the prevention of heart disease and birth defects (*Health*, 1998). Other recommended supplements are calcium and vitamins such as vitamin E if you are not getting enough from your diet. Even though a person can overdo with supplements, this is rare. Rather than being overly concerned about getting too much, you would benefit by getting the proper amounts of nutrients.

By learning about nutrition from reliable sources and then by practicing better eating habits most of the time, you can fuel your body in healthy ways. One reliable source is *Your Miracle Brain* (Carper, 2000). The author, a noted health journalist, recommends how to optimize your health with nutrition as well as what not to do. For example, she offers compelling evidence that eating breakfast can boost brain functioning whereas while starting the day on an empty stomach leaves the body short on fuel and more vulnerable to failure. Citing research at Harvard Medical School, elementary school students who ate breakfast had 40 percent higher math grades and were less likely to be absent or tardy from school than those who rarely ate breakfast. Much can be learned about the fascinating field of nutrition. Challenge yourself to be among those who are “in the know” and use the power of nutrition to enhance your health. Not only are healthy foods important, but also water is essential to balanced health (Fig. 6-2).

## Weight Maintenance

Practicing healthier eating habits and being physically active lead to the added bonus of weight maintenance, which is a health issue as well as one of attractiveness. What is a healthy weight? A simple answer is a weight at which a person’s health is not at risk and at a level that feels good. A measure that more accurately reflects healthy weight is body mass index (BMI). Values of 19.0 to 24.9 fall in the desirable range (Anderson and Wadden, 1999). A calculator comes in handy as you figure BMI. Multiply your weight in pounds by 703 and then divide by your height in inches squared.



**Figure 6-2 Healthy eating habits are important for life.**

Source: EMG Education Management Group

**Obesity**, defined as a BMI of 30 or greater, kills 300,000 Americans prematurely each year by contributing to heart attacks, high blood pressure, strokes, diabetes, and many other serious diseases. “The fatter you are, the sicker you will be and the earlier you will die” (Fumento, 1998, p. 36). Evidence suggests that obesity can increase the risk of dying from certain cancers by up to 50 percent (American Cancer Society, 2001). Of all behaviors leading to illness, only smoking takes more lives than obesity (Fumento, 1998). On the positive side, being at a healthy weight contributes to overall good health and lessens the risk of disease (Reflect and Apply).

How are we doing? Not well, at least not in the United States, according to many experts. In fact, U.S. society has the dubious honor of being the second fattest society in the world with first place going to a tribe in the South Pacific (Butler, 2001). A recent national survey found that 59 percent of adults are overweight, and 23 percent of those are obese (Sturm, 2000). Children are three times as likely to be overweight today as they were 30 years ago (Wingert, 2000). Eating too much high-calorie, fat-laden junk food and drinking sugar-filled beverages while sitting in front of a television screen or computer monitor have contributed to children being overweight. That is the bad news. The good news is that even modest weight losses (5 to 10 percent of initial weight) can result in substantial improvements.

How do you achieve and maintain a healthy weight? Wise choices regarding nutrition and physical activity are necessary. Going on a diet isn’t the answer. People who do this often end up in repeated cycles of weight loss and gain. Called **yo-yo dieting**, it is unhealthy and does not work. Yo-yo dieting is being on a weight loss roller coaster. A dieter may successfully lose 10, 50, or more pounds only to gain them back and begin another period of dieting. In addition to being

**REFLECT AND APPLY****Reflect**

- ◆ *What physical improvements would you like to make?*
- ◆ *Do you wear a seat belt when riding in a vehicle? If not, use critical thinking and find comparison figures regarding fatalities and serious injuries.*
- ◆ *In what ways has self-esteem affected your life?*
- ◆ *Recall one “message” that you have received about yourself.*

**Apply**

- ◆ *In the next week or so, improve your physical self.*
- ◆ *Demonstrate a positive attitude the next time you face an adverse situation.*
- ◆ *Use one word or phrase to describe yourself in each of the four developmental areas.*

frustrating, repeated cycles of weight loss and weight gain may also be harmful to health. Permanent weight loss is a lifetime commitment to lifestyle changes in diet and exercise. Instead, the key is to eat sensibly and healthfully most of the time and increase physical activity so that you increase metabolic rate and decrease body fat. Remember a simple bit of mathematics: Weight loss comes from burning off more calories than you take in. Walking, which is easy for most people, burns calories. Most experts recommend 45 minutes a day in order to lose and keep weight off (Bilyeau, 1998). The top fat-burning exercises are bicycling, jogging, and swimming (Napier, 1998). Enjoyable physical activity, along with better nutrition, does away with the idea of dieting and becomes a way of life.

Because most people will consider weight loss at some time in their lives, education is a practical idea. A misconception is that not eating is the way to lose weight. When the body is deprived of food, energy level is low and metabolism slows down so you don't burn off fat nearly as efficiently. Breakfast wakes up your metabolism. According to a Mayo Clinic study, people who chronically skip breakfast burn an average of 150 fewer calories a day than those who eat breakfast even when both groups consume the same amount of daily calories (Thornton, 2000). Eliminating most junk foods and those high in fat (remembering that we need some fat in our diets) and, instead, eating fruits, vegetables, and foods that contain fiber, controlling portion sizes, and eating at regular intervals are highly recommended. Because extreme overweight is likely related to genetics as well as environment and is such a serious health challenge, obese people are advised to seek the help of a professional in developing a successful weight management plan. Being realistic about your weight, learning all you can about weight loss, and making it part of a total wellness program are the answers to a challenge faced by many Americans.

**Adequate Rest**

How much rest do you get? Seven to eight hours of sleep in a 24-hour period is recommended. Teenagers require approximately  $9\frac{1}{4}$  hours of sleep to maintain optimal alertness, and most are sleep deprived (Black, 2000). Sleep serves many



functions so it seems obvious that not getting enough would affect health. Think of how you feel when you are very tired. Even more serious are the other consequences of sleep deprivation.

- Impaired cognitive and motor performance equivalent to alcohol intoxication (Williamson and Feyer, 2001)
- Decrease in learning abilities (Segall, 2001)
- Heightened risk of accidents (Libbon, 2000)
- Reduced memory abilities (Butcher, 2000)
- Negative effects on health especially metabolism and hormone production (*Current Health 2*, 2000)

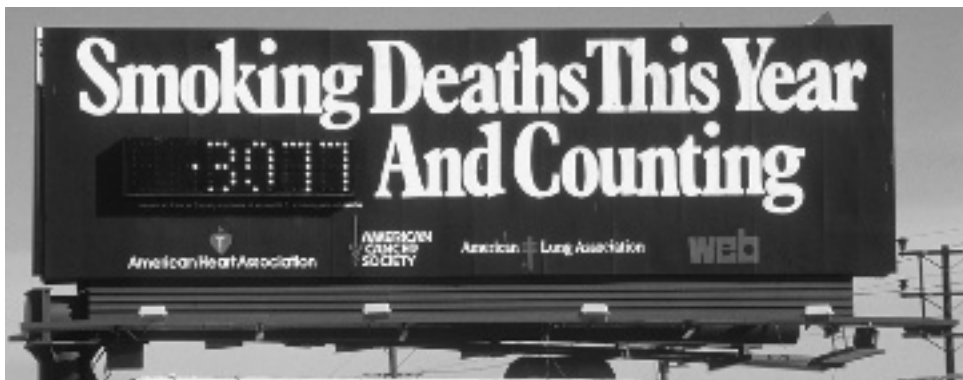
College students were studied to see what accounted for grade-point average differences. Sleep habits headed the list (Trochel, Barnes, and Eggert, 2000). As is obvious, sleep rejuvenates the body. Making a choice to get enough sleep is undoubtedly in your best interest.

### Smoking Cigarettes

If you smoke, you inhale several potentially dangerous substances, including the most potent cancer-causing substances known as **carcinogens**. A number of substances in tobacco smoke cause cancer in human beings (Centers for Disease Control and Prevention, 2001a). The high risks have been apparent for years, and the future for a smoker is bleak. Nearly 5 million children living today will die prematurely because of a decision they will eventually make—to smoke cigarettes (Centers for Disease Control and Prevention, 2001a). Tobacco use worldwide, which causes nearly 4 million people to die each year, is the leading preventable cause of death (Satcher, 2001) (Fig. 6-3).

### Overall Mortality

Tobacco use is the leading preventable cause of death in the United States. Cigarette smoking causes an estimated 440,000 deaths, or about one of every five deaths, each year.



**Figure 6-3**  
Source: Bill Aron



- This estimate includes 35,000 deaths from secondhand smoke exposure.
- Cigarette smoking is related to erectile dysfunction in men and general sexual fitness (Wuh and Fox, 2001).
- Cigarette smoking kills an estimated 264,000 men and 178,000 women in the United States each year.
- More deaths are caused each year by tobacco use than by all deaths from human immunodeficiency virus (HIV), illegal drug use, alcohol use, motor vehicle injuries, suicides, and murders combined.
- On average, adults who smoke cigarettes die 13 to 14 years earlier than nonsmokers.
- Based on current cigarette smoking patterns, an estimated 25 million Americans who are alive today will die prematurely from smoking-related illnesses, including 5 million people younger than 18.

### Mortality from Specific Diseases

Lung cancer (124,000), heart disease (111,000), and the chronic lung diseases of emphysema, bronchitis, and chronic airway obstruction (82,000) are responsible for the largest number of smoking-related deaths. The risk of dying from lung cancer is more than 22 times higher among men who smoke cigarettes and about 12 times higher among women who smoke cigarettes compared with those who have never smoked. Since 1950, lung cancer deaths among women have increased by more than 600 percent. Since 1987, lung cancer has been the leading cause of cancer-related deaths in women. Cigarette smoking results in a two- to threefold increased risk of dying from chronic obstructive lung disease. About 90 percent of all deaths from chronic obstructive lung diseases are attributable to cigarette smoking.

Pipe smoking and cigar smoking increase the risk of dying from cancers of the lung, esophagus, larynx, and oral cavity. Smokeless tobacco use increases the risk for developing oral cancer. If health is not that important to smokers, other reasons may be. As employers become more aware of the relationship between health and cigarette smoking, smokers may find it difficult to get jobs. Typically, smokers average more sick days. Another reason is skin ageing. A student said, "I have heard it all, and nothing has jolted me to quit smoking until I heard about wrinkling. That did it!" She was referring to research that found that those who smoke have much more prominent wrinkling (Lauerma, 2001). Or perhaps a smoker will consider money. Jon figured how many dollars he would save in a year by not smoking and was motivated to quit. And cigarettes are not the total cost. Smokers spend more on cold remedies, health care, and life insurance. Tobacco addiction is a major economic handicap.

Knowing all this, the obvious question is "Why do people take up smoking?" Again, look at research-based facts.

- Approximately 80 percent of adult smokers started smoking before age 18 (Centers for Disease Control and Prevention, 2001a). Individuals at young ages are more suggestible and tend to conform.
- Many start because their peers and family members smoke (Williams and Covington, 1997).
- Smokers are significantly less knowledgeable about smoke-related diseases than ex-smokers or nonsmokers (Najem et al., 1997).

After a habit is established, nicotine, the stimulant in cigarettes, creates an **addiction**, a physiological dependence (Kessler, 1995). If you have not started smoking, the obvious wise choice is to never start. If you have, are you willing to risk years of life or experience a low-quality existence? Having emphysema and depending on an external breathing device that you may have to drag around is a difficult way to live. Hopefully, you will place more value on health and quality of life and want to quit. The two current strategies are just quitting immediately or gradually or using pharmacologic agents (Mocharnuk, 2001). Medications can double your chances of quitting (Centers for Disease Control and Prevention, 2001a). Help is readily available. One easy source is the Web site of the Centers for Disease Control and Prevention (see Resources at end of chapter). The following guidelines are offered.

### You Can Quit!

The following tips come from the Centers for Disease Control and Prevention (2001):

- Prepare by setting a quit date. Get rid of all cigarettes and ashtrays. Stay away from others who smoke in your presence.
- Announce your intentions and get support.
- Replace smoking with other activities such as taking a walk. Refrain from environments and activities associated with smoking.
- Get medication and use it correctly.
- Be prepared for a relapse usually within the first three months. If you smoke again, set a new goal and be even more determined. Keep your “eye on the prize.”

Because environmental tobacco smoke (ETS) is a critical factor in health, a person might decide to quit out of love. Passive smoking, as ETS is called, kills more Americans than either auto accidents or AIDS (*The Futurist*, 1999). An alarming study concluded that environmental smoke has all the cancer-causing substances contained in tobacco smoke (Anderson et al., 2001). ETS, which is completely preventable, is a significant predictor of increased disease and ill health among children, including sudden infant death syndrome (SIDS), asthma attacks, chronic ear infections, and lower respiratory tract infections (Centers for Disease Control and Prevention, 2001a).

Environmental tobacco smoke is a serious health risk to children. (Ferrence and Ashley, 2000)

Children are not the only potential victims. Research reveals higher risks in nonsmoking spouses and fellow employees for lung cancer (World Health Organization, 1998), heart disease (Wells, 1998), and atherosclerosis (Howard et al., 1998).

Nonsmokers have choices. Opting not to breathe someone else's smoke may require assertiveness; however, if you value health, the choice is clear. If you are a smoker, you can show consideration by checking with nonsmokers about smoking and then understanding and accepting their wishes. Your choice to quit

smoking may well be the best health decision you will ever make. Thousands have quit; you can, too!

### Drinking Alcohol

Alcohol, the most widely used and abused drug in many societies, has wreaked havoc on health and personal lives. About 14 million people in the United States are alcoholics or abuse alcohol (Brink, 2001). Alcohol abuse is frequently at the root of domestic violence, child abuse and neglect, crime, lost productivity, chemical dependency, and fatal accidents and injuries. In excess, alcohol and other drugs are “truly the crutch that cripples” (Eliot and Breo, 1984, p. 200). Alcohol is linked to violence and aggression (White, 1997) and to risky sexual behavior (Poulson et al., 1998). The innocent suffer, too. Centers for Disease Control and Prevention studies show rates of fetal alcohol syndrome at 1.5 per 1,000 live births in different areas of the United States. Other prenatal alcohol-related conditions, such as alcohol-related neurodevelopment disorder (ARND), and alcohol-related birth defects (ARBD), are believed to occur approximately three times as often (Centers for Disease Control and Prevention, 2005).

Without a doubt, alcohol affects all developmental areas of the self and overall health. Heavy drinking and alcoholism can seriously affect the functioning of the entire nervous system, especially the brain. Impairments in perception, learning, and memory are likely. Studies have found alcohol use to be associated with a heightened risk of large-bowel cancer (Baron et al., 1998), cirrhosis of the liver, and cancers of the mouth, esophagus, pharynx, larynx, and liver (Thun et al., 1997). Studies in four countries involving over 300,000 women associated alcohol consumption with breast cancer in women (Smith-Warner et al., 1998). Intensity of drinking is a higher risk factor than the number of years a woman consumes alcohol (Bowlin et al., 1997).

Underage drinking is described as epidemic (Fig. 6-4). At least once a month, over 5 million high school students engage in **binge drinking**, defined as four consecutive drinks for a female and five for a male. Consider that those who begin to drink before age 15 are four times more likely to become alcohol dependent than those who begin after 21, and a tragic road to addiction becomes apparent. Besides the damage to health, alcohol is the major factor in the three leading causes of teen death—accidents, homicide, and suicide (Center on Addiction and Substance Abuse, 2002). Wiser choices are definitely needed.



**Figure 6-4** Young people are often unaware of the consequences of their behavior.

Source: www.indexopen.com

Although health definitely suffers from heavy consumption, a few benefits are associated with light to moderate use, and panels of experts even advocate moderate alcohol consumption at meals (de Gaetano and Simini, 2001). A study found that moderate wine consumption was associated with decreased odds of developing age-related macular degeneration, a serious threat to vision (Obisesan et al.,

1998). Because alcohol is a depressant, it can also relieve stress. It is important to know how much alcohol changes the balance from benefits to risks. Based on results from the Physicians Health Study, that amount is quite small—one drink a day for men and a little less for women (Brink, 2000).

### **Myths and Facts about Drinking Alcohol**

(Kowalksi, 2001)

*Myth:* I can think clearly when drinking.

*Fact:* Alcohol targets the brain and interferes with judgment and motor functions.

*Myth:* I can handle alcohol.

*Fact:* When drinking heavily, a person can't judge the effects of alcohol.

*Myth:* Drinking will make me popular.

*Fact:* Alcohol use often causes problems in social interactions and relationships.

*Myth:* I'm not an alcoholic so I do not have a problem.

*Fact:* Any kind of alcohol use that leads to problems is a problem.

*Myth:* Underage drinking is "cool."

*Fact:* The earlier a person starts drinking, the greater the chance of becoming an alcoholic.

*Myth:* Everybody drinks.

*Fact:* Many people do not drink at all, and most do not drink excessively.

Most researchers agree that both environmental and genetic factors are involved in susceptibility to alcoholism (Anyanwu and Watson, 1997). Regardless of the cause, wise choices are more likely to be made by those who are informed and do not try to fool themselves into thinking that no harm can come from drinking alcohol. All of us know that irresponsible drinking has disquieting effects. A person may not be an actual alcoholic yet still have a problem. A definition of a "problem drinker" is anyone who causes problems because of drinking. If an individual becomes extremely obnoxious, abusive, or hurtful, it's time to modify habits.

The potentially devastating effects of drinking and driving are unquestionable. Every 30 minutes, someone in the United States dies in an alcohol-related crash. Even though alcohol-related fatalities have decreased by 3 percent in recent years, 40 percent of 18-, 19-, and 20-year-old crash fatalities are still tied to alcohol use (National Highway Traffic Safety Administration, 2003). If you have not been affected by someone's death from a drunk-driving incident, you are lucky. Keep in mind that you or someone you love could be.

Your personal support for and involvement in organizations such as Mothers Against Drunk Driving (MADD) and Students Against Drunk Driving (SADD) can show that you act on your values and will help decrease the number of tragedies. Candy Lightner started MADD in 1980 after her daughter was killed by a drunk driver. By 1985, that same driver had been arrested six times for drunk driving, and in one accident injured another young girl. Lightner says, “We have kicked a few pebbles, we will turn a few stones, and eventually we’ll start an avalanche” (Lee, 1985, p. 77). Most of the strides against drunk driving are the results of efforts by MADD and other activist groups.

For those who are addicted to alcohol or even have problems with its use, support groups such as Alcoholics Anonymous and treatment programs are available in most communities. Because individuals are unique, no one program works for all. People are advised to try a different one if there is no improvement. For many, personal counseling is necessary. The focus on alcohol is not intended to lessen the tremendous amount of damage suffered from other drugs. Learning about the long-term effects of all of them is the first step in taking control of your own use. Then, if you continue to have a problem, seek help for yourself and for all those who care about you.

## Drugs

### What is a Drug?

A drug is any chemical that produces a therapeutic or nontherapeutic effect in the body. Chemicals, in contrast, are a broad class of substances—including drugs—that may or may not produce noticeable effects in the body. Many chemicals (such as tin, lead, and gold) have harmful effects on the body, especially in high doses. Most foods are not drugs. Alcohol is a drug—not a food—in spite of the calories it provides. Nicotine is a chemical that is also a drug. The group of “illegal” drugs includes dangerous chemicals that have only toxic actions (e.g., inhalants) (Addiction Science Research and Education, 2004).

Teenagers may be involved with legal or illegal drugs in various ways. Experimentation with drugs during adolescence is common. Unfortunately, teenagers often do not see the link between their actions today and the consequences tomorrow. They also have a tendency to feel indestructible and immune to the problems that others experience.

Adolescence is a time for trying new things. Teens use drugs for many reasons, including curiosity, because it feels good, to reduce stress, to feel grown up, or to fit in. Using alcohol and tobacco at a young age increases the risk of using other drugs later. Some teens will experiment and stop or continue to use occasionally without significant problems. Others will develop a dependency, moving on to more dangerous drugs and causing significant harm to themselves and possibly others. It is difficult to know which teens will experiment and stop and which teens will develop serious problems.

Based on Substance Abuse and Mental Health Statistics Association’s (SAMHSA, 2005) National Survey on Drug Use and Health, 14.6 million persons aged 12 or older used marijuana daily. Daily marijuana users (63.3%) were more likely than less-than-daily users or nonusers to use other illicit drugs. Daily

marijuana users were also more likely to be current cigarette smokers and heavy drinkers. Results of the National Survey on Drug Use and Health (SAMHSA, 2003) indicate that as many as 19.5 million Americans aged 12 and older currently use an illicit drug. According to SAMSHA, emergency treatments related to drug abuse involving narcotic analgesics increased 153 percent in the nation between 1995 and 2002. The great increase during this period occurred for oxycodone (512%), methadone (176%), hydrocodone (159%), and morphine (116%). Amphetamines, including methamphetamine, were the primary substance of abuse reported in more than 98,000 substance abuse treatment admissions. The most common route of administration was smoking, (44%), injection (26%), and inhalation (19%). More than 2.6 million youths aged 12 to 17 reported using inhalants at least once in their lifetime.

The health risks involved in using drugs include rapid or irregular heart-beat, increase in blood pressure, cardiovascular problems, elevated body temperatures, convulsions, hallucinations, delusions, and paranoia. Of particular concern is the increase in the use of methamphetamines. Physical dependence occurs because meth changes the ways cells in the brain function. A single dose can damage nerve terminals in the brain and prolonged use can cause irreversible stroke-producing damage to blood vessels in the brain. Addicts are depressed, unable to concentrate, and anxious; relationships are damaged and death may occur.

For additional information go to <http://www.drugabuse.gov/infobox/HSYouthtrends.html>. This site has all the current data on teenage use of drugs, alcohol, and tobacco.

### Engaging in Risky Sexual Activities

Sexual behavior in today's society can pose a dire health risk. **Acquired immune deficiency syndrome (AIDS)**, is a fatal condition resulting from an extremely weakened immune system. First identified in 1981, it is caused by human immunodeficiency virus (HIV) that is transmitted by exposure to infected blood, semen, and vaginal secretions usually through sexual activities or the sharing of hypodermic needles and other drug paraphernalia by injection-drug users. Transmission from mother to her newborn is also possible (Jemmott and Jemmott, 1996). In 1981, fewer than 100 people in the United States had died from AIDS. Between then and the end of 2003, 524,060 deaths had been reported. Worldwide AIDS has killed more than 25 million people, infected 40 million others, and left a legacy of "unspeakable loss, hardship, fear and despair (*Omaha World Herald*, 2006, p. 1). The Centers for Disease Control and Prevention reports that 518,568 adults and adolescents and 5,492 children under 13 suffer from new HIV infections occurring in the United States every year (Centers for Disease Control and Prevention, 2005).

AIDS should be a household word; the good news is that 90.6 percent of students nationwide have been informed about AIDS and HIV infection (Centers for Disease Control and Prevention, 1999). This is fortunate because HIV-positive symptoms usually do not materialize for years, and teenagers would not otherwise know that they can be infected (Kassin, 1998). "It's the worst feeling to be 26 years old and hear a doctor say you have AIDS. Then I thought about all my sexual partners during the past 10 years," lamented a young man.



Accurate information is available, and anyone who values health will seek it. AIDS is not curable, but it is preventable. Recommendations are to become well informed, either abstain or practice only safe sex, and avoid multiple sexual partners. Continue to ask yourself about the value of your own life and use your mind to protect your life.

Other than abstinence, the best way to avoid getting HIV and other sexually transmitted diseases is to use a latex condom whenever you have sexual intercourse. Remember: Whenever you have sex with someone, you're also having sex with everyone your partner has ever been sexually active with (Altshul, 2001).

Education about AIDS can also help to change people's attitudes and feelings about victims of the disease. Fear of HIV victims and homophobia among college students lessened over an eight-year period; those with the least knowledge had the greatest fear of victims (McCormack, 1997). Blaming a certain group of people for a disease is ridiculous. For example, decades ago polio was a serious, often fatal disease. Polio, like AIDS, was caused by a virus. Who were its victims? For the most part, they were children. It would have been ridiculous to harbor and voice such thoughts as, "Those children caused polio," "We should get rid of all those kids, and that would take care of polio," and "They deserve what they're getting." Yet uneducated people blame the victims of AIDS who, initially, were at one time mostly gay males and intravenous drug users. Today, AIDS is every group's potential disease.

Risks related to sexual behavior are of special concern because of the activities of increasing numbers of younger people. Generally, teenagers lack complete, accurate information and following a developmental norm, believe that nothing bad will ever happen to them. Results from the Add Health survey show that teens' reports of ever having had sexual intercourse increase dramatically with grade level, from 16 percent among seventh and eighth graders to 60 percent among eleventh and twelfth graders. Additionally, the Add Health survey reaffirms the findings of a large body of existing research that teenagers who are black or from low-income or single-parent families are more likely to have had sexual intercourse than their peers.

The societal messages in the United States are confusing to young people. At the same time that they are being told to abstain, they are also being bombarded with thousands of sexual encounters from television alone. This has resulted in an attitude that is described as **nonchalance** and the presumption that relationships will inevitably lead to sexual intercourse. Some even see sex as an entitlement; this attitude breaks down respect for self and other (Stodghill, 1998). "I do not think it is as special for many of us as it was for our parents. Too much exposure takes away any sense of mystery and most anticipation," was how an 18-year-old expressed it.

Being sexually active and not using birth control often leads to teenage pregnancy. The United States has the highest teenage pregnancy rate of all developed countries. About 1 million teenagers become pregnant each year, and 95 percent of those pregnancies are unintended (Centers for Disease Control and Prevention, 2004). The costs in terms of health and well-being are high. Hardships for young mothers include dropping out of school and reduced employment opportunities leading to social service dependence, repeated childbirths, increased health and developmental risks to the children, and a greater likelihood that these "children

of children” will repeat the cycle. In a comparison of teen mothers who kept their babies compared to those who placed them for adoption, giving up the baby resulted in more favorable outcomes (Namerow, Kalmuss, & Cushman, 1997).

On a positive note, birthrates among American teenagers have reached a 60-year low due mainly to a decline in sexual activity and improved contraceptive use (Davis-Packard, 2000). As many as two-thirds of sexually active teenagers now use condoms, three times as many as in the 1970s (Stodghill, 1998). Parents can make a difference. Warm, supportive parent–adolescent relationships are essential for the sexual well-being of teenagers (Meschke, Bartholomae, and Zentall, 2000). Could it also help to teach young people how to make responsible decisions based on healthy values? All through life, decisions about sexual behavior will be required. Choosing wisely is essential to well-being and, perhaps, a matter of life or death.

### **Growing Older**

Even though you cannot escape growing older, you may have an unhealthy attitude about aging. Essential to your well-being is to recognize you also have many choices. Many have bought into the media messages that extol the virtues of staying young. Old age is not considered of value and, in fact, is actually looked down on and thought of as a dreary wasteland. Attacking what she calls the mystique of age, Betty Friedan (1993) contends that almost all images of older people are bleak. Consider the absurdity of such an attitude. As long as you live, you age. If you do not want to grow old, you will have to die young. If aging continues to be viewed as negative, anyone who remains alive is heading for depression and despair.

Getting rid of inaccurate stereotypes about old people would be beneficial to everyone. Common beliefs are that memory will be lost and that elderly people will become seriously impaired both physically and cognitively. One-half of Americans incorrectly believe that forgetfulness is by itself Alzheimer’s disease (*Geriatrics*, 2000) when, in fact, there can be many reasons. Interestingly, when young people are asked, “Do you ever forget things?” the answer is almost always yes. Yet, it carries no meaning of losing mental capacities. Even though, unfortunately, 4 million Americans suffer from Alzheimer’s, only half of people over the age of 85 are affected, according to the Alzheimer’s Association (2001).

A review of “normal” changes reveals a great deal of diversity among older adults with many individuals maintaining high levels of functioning into very advanced age (Carman, 1997). A final blow to the “woe-is-me” stereotype comes from a survey of 1,200 individuals 100 years of age and older. Reporting themselves to be in good to excellent health were 82 percent, 75 percent were fully mobile, and 30 percent were still doing some work. After we have broken the stereotypes of what older people cannot do, a floodgate of opportunity opens (Bortz, 1991). Having examples of positive aging helps. Can you think of any? I’m fortunate to have several, including both my parents whose mental states and physical levels of agility and energy were high until right before their deaths.

In addition to changing our picture of old age, we can realize that there are advantages to aging besides the obvious one of continuing to be alive! For most people, stress declines because of fewer daily hassles and upheavals, short-term

illnesses are not common, and frustrations are less because of added realism. Many report newfound sources of pleasure. Leisure time is usually more plentiful. The successful completion of Erikson's seven preceding stages leads to an old age of fulfillment and the achievement of integrity.

Do not think about how old you are; think of how you are old (Bortz, 1991).

Wise choices help to bring about a high quality of life throughout the life span, so taking care of yourself while still young is important. Analysis of a 60-year-long study showed that men younger than 50 who developed good health habits fared much better physically and mentally than those who did not (Bower, 2001). It is truly a case of use it or lose it, and this is a choice we can all make. Most of what contributes to healthy, positive aging is within a person's control. Experts identify the following as significant (Hensrud, 2001).

- Physical activity and fitness
- Mental activity such as reading, doing crossword puzzles, and playing cards
- Healthy nutrition
- Nonsmoking and no more than small amounts of alcohol
- Proper weight maintenance
- Active lifestyle with involvement in activities
- Optimistic attitude

Other identified factors in living a higher-quality life as an older person are engagement in activities with a meaningful purpose, continued curiosity and a desire to learn, a sense of humor, and close social ties. Love and intimacy tend to protect us from disease (Ornish, 1998). What is tragic is to stagnate, to pull away from activities, and to allow negative thoughts to prevail. If you continue to value yourself throughout life, you will value aging, because to age is to live.

Choices reflect how much you care about yourself and affect your present and future health. We will never be perfect; nonetheless, improvement in health and well-being is worth pursuing.

### Stress Management

How well do you handle stress? Stress management deserves special attention. **Stress** is what the body experiences when there is a perceived demand to adjust. Stress cannot be avoided; it is a by-product of life. **Stressors**, the conditions that cause stress, are numerous and never ending. Instead of life being a bowl of cherries, one could say that life is a bowl of stressors! You have an opportunity to rate your level of stress in Reflections and Applications.

**Effects of stress.** The "father of stress research" Hans Selye (1976) described the body's stress response as a sequence of three stages called the **general adaptation syndrome**. In the *alarm stage*, the body mobilizes itself for defense; if stress continues, the body draws on its resources during the *resistance stage*. If there is no relief, during the *exhaustion stage*, a person is susceptible to illness. Stress that is either not handled or mishandled is related to numerous problems, including poor health conditions. This has been recognized for several years.

“Stress may be the greatest single contributor to illness in the industrialized world” (Eliot and Breo, 1984, p. 14). Approximately 60 to 90 percent of doctor visits are for conditions related to stress (Benson, 2001).

Stress appears to be involved in cardiovascular disease and cancer (Senior, 2001) along with high blood pressure, pain, insomnia, allergies, and infertility (Benson, 2001). After being exposed to viruses, 47 percent of individuals under high stress came down with a cold compared to only 27 percent under little stress (Goleman, 1997). How can stress be involved in such diverse physical conditions? The common thread appears to be the immune response, which can be lowered by chronic stress (Senior, 2001).

Other areas of the self can also suffer. Mismanaged stress contributes to relationship or social problems, emotional distress, and severe mental challenges. When you consider how unmanaged stress affects your life, it is no surprise to know that stress is connected to mental concentration (Vernarec and Phillips, 2001), depression (Evans, 2000), and anger in the workplace (Calabrese, 2000).

Even with its potentially high cost, stress is not necessarily negative. Certain types and degrees of stress can be motivating and healthful. Equate stress to the strings on a violin. If they are stretched tightly, the tone of the violin is sharp, too loose and the sound is flat and lifeless. Either way beautiful music is not possible. The key is to adjust the strings to a desirable degree of tightness. Similarly, individuals can benefit from knowing how much and what type of stress is good for them. Each person is different. For example, you may be one who feels quite relaxed sitting in a boat all day fishing. Another person would be bored and actually experience stress while engaging in the same activity.

Stress that is good for you is called **eustress**. In its positive form, stress is motivating and contributes to an interesting life. “Stress is the spice of life. Who would enjoy a life of no runs, no hits, no errors?” (Selye, 1974, p. 85). How do you know when your level of stress is unhealthy? There will be clues. Are you experiencing frequent headaches, stomach distress, minor aches and pains, muscle tension, or fatigue for no apparent reason? Do you feel uneasy, tense, or irritable? Are you having difficulty sleeping or concentrating? Even apathy may be a sign. Learning what is an optimal level of stress for you and how to handle it in a positive way is a “must” in terms of self and relationships.

**Sources of stress.** What are the stressors in your life? Most of us have long lists. Researchers have uncovered many sources of stress. In one of the first studies, participants identified major changes in their lives. Each event was then given a value based on its magnitude or effect. The top five stress-producing events then were (1) death of spouse, (2) divorce, (3) marital separation, (4) jail term, and (5) death of close family member (Holmes and Rahe, 1967). Both positive and negative events, if they prompted some type of coping or adaptive behavior, were stressful. The study indicated that when too many events happen in succession, the strain can produce unhealthy effects. Because change results in stress, you are advised to regulate your stress by not attempting too many changes at one time.

Another study (Lazarus, 1981) dealt with minor irritants, or the hassles of everyday life. Viewed as ongoing stressors, these are often left unattended because they occur so often and are seemingly routine. Lindsey was annoyed by a

tiny squeak every day as she drove to work. She kept telling herself that some day she would get it fixed. That day never seemed to come until she realized that her irritation at work and at home might be related to the annoyance she experienced each day. "The petty annoyances, frustrations, and unpleasant surprises that plague us every day may add up to more grief than life's major stressful events" (Lazarus, 1981, p. 58). College students were asked to identify stress sources. Overall, 81.1 percent of these were daily hassles. The top five stressors were a change in sleeping habits, vacations/breaks, change in eating habits, new responsibilities, and increased class workload (Ross, Niebling, and Heckert, 1999). Adult female community college students identified child care concerns as their greatest stressor (Johnson, Schwartz, and Bower, 2000). What everyday hassles bother you? What are you doing about them? If your answer is "nothing," the accumulative effects of stress may be harmful.

Stressors are either external or internal. **External stressors** are demands from outside of the self. Other people, events beyond our control, and the environment deliver daily doses of stress. Can you name some others? **Internal stressors** are those we create or magnify. One of the more common ones is worry, a process involving negative thoughts and uneasy feelings. How is worry different from concern? Concern stems from actual events whereas worry is rooted in relatively uncontrollable images and thoughts that are usually about future negative possibilities. Certain unrealistic myths such as "If I worry, the negative event will not happen," "Events and people make me worry," and "Worrying shows that I care" perpetuate worry (Goulding and Goulding, 1989). Worriers usually do nothing about their feelings, which contributes to a feeling of powerlessness.

The reality is that if you are a worrier, you manufacture stress and waste a great deal of time. Compared to nonworriers, chronic worriers spend up to 8 hours a day fretting, which significantly disrupts their lives (Kelly and Miller, 1999). A worrier also increases the risk of illness (Michaud, 2000). Sorting out real concerns from the mass of imaginative and insignificant worries is a worthy challenge. Ninety percent of what we worry about never happens. "Worry never robs tomorrow of its sorrow: it only saps today of its joy" (Buscaglia, 1992, p. 182).

The book *Worry: Controlling It and Using It Wisely* (Hallowell, 1997) suggests several ways to avoid turning minor problems into potential disasters. Other tips are to change "what if" to "so what if," set aside a short period each day to really worry and refuse to do so at other times, keep a worry journal so that the thoughts are put on paper and then check to see how many worries even materialized, use deep breathing, and definitely *act* on your worry. Exercise and a technique discussed later called *thought-stopping* can also help.

Also falling into the category of internal stressors are irrational thoughts, unrealistic expectations, an inability to express emotions in a healthy way, task overload, neglect of physical health, negative self-talk, and boredom. An awareness of the sources can enable you to analyze, possibly decrease the numbers, and reduce the impact of stressors.

**Coping with stress.** The subject of handling stress is well covered in a variety of books and articles, and the number of suggestions is mind-boggling. Yet

many people still do nothing about stress. You may be one who already copes well because of **psychological hardiness** (Kobasa, 1979). In a classic study of executives who experienced high stress, those who didn't get sick had personality characteristics of hardiness: strong commitment to self and various areas of life, a sense of meaningfulness or purpose, the attitude that change is challenging, and an internal locus of control. If these descriptors don't sound like you, consider what you can do to become hardier!

When faced with a stressor, you can either face the problem directly or avoid it. Withdrawing may involve getting out of a stressful relationship or getting rid of other people's problems and returning them to their rightful owners. Even if a stressor is not apparent, you are wise to employ regular stress management strategies that protect you from the effects of daily stressors. All of the wellness tips offered earlier are excellent strategies. Several other practical stress-reducing suggestions follow. The challenge is to put them into regular practice.

- Reduce or prioritize major life events. For example, don't begin college, start a job, get married, quit college, and get divorced all in the same year!
- Learn techniques to eliminate unnecessary worry and anxiety.
- Use cognitive techniques to change stress-producing thoughts.
- Develop a decision-making process.
- If you feel frustrated or worried, ask yourself what you can do about it. Be realistic about what is possible and realize that some things are beyond your control.
- If you truly don't want to do something, say no and stick with it.
- Learn to manage time and to schedule events so you aren't rushing through life.
- Express your feelings and begin to communicate more openly with others.
- Find a reliable support system.
- Write in a journal or diary. Studies confirm the value of expressing stressful thoughts to others or getting them down on paper (Stone et al., 2000).
- Have a relaxing massage.
- Laugh and enjoy life.
- Breathe deeply. Deep breathing is a full, deep expansion of the lungs followed by complete expiration. The rhythm of the breath is slow and quiet (Weil, 1995a). Proper breathing involves the diaphragm, the thin muscle that separates the lung and abdominal cavities. Breathing properly is not only relaxing; but also it facilitates health by increasing the amount of oxygen in the blood (Williams and Harris, 1998). See directions for deep breathing in *Reflections and Applications* (page 371).
- Use a deep relaxation technique and meditation. Consider the use of biofeedback.

**Deep relaxation** is a profoundly restful condition in which one feels physically relaxed, somewhat detached from the immediate environment and usually to some extent even from body sensations. It involves a feeling of voluntary and comfortable abandonment of one's conscious control and





Figure 6-5 Exercising with friends.

stewardship over major body functions—a distinctly passive attitude in which one simply turns over control of the body to its own built-in “autopilot” (Albrecht, 1979, p. 191).

Besides a wonderful feeling, deep relaxation allows the body to become balanced, or homeostatic, and, thus, work as it is intended to. One of the first to enlighten society about protection from “overstress” was Herbert Benson (1975), a physician and associate professor of medicine at Harvard Medical School, who taught and wrote about the relaxation response (Fig. 6-5).

**Meditation** can be thought of as a physical act of remaining quiet and focusing on one’s breath, a word, or a phrase. The actions quiet “inner chatter” and reduce stress (Barbor, 2001). Meditation and other relaxation techniques helped elementary school students score higher on standard achievement tests (Benson, 1987) and college students attain significantly higher grade-point averages (Hall, 1999). Other dramatic results from ongoing meditation programs include a 40 to 45 percent reduction in medical symptoms and psychological distress (Salzberg and Kabat-Zinn, 1997).

In addition to deep relaxation and meditation, methods that produce similar results are self-hypnosis, yoga, guided imagery, and autogenic training. Individuals remain awake and alert and remember all that occurs; the person is in control of himself or herself (Miller, 1978). Employing a technique for only 15 to 20 minutes on a regular basis can produce astonishing results, including increased energy, optimism, contentment, and reduction in pain. The effects of stress on the body seem remarkably diminished.

Relaxation exercises are used in **biofeedback training**, a series of steps by which a person learns to regulate physiological responses such as muscle tension, skin temperature, and heart rate. Through the use of monitoring equipment, an individual becomes aware of changes within the body and then discovers how to control them using relaxation. In addition to lowering stress reactions, there are biofeedback treatments for a variety of problems including anxiety disorders, depression, alcoholism and addiction, attention deficit hyperactivity disorder, migraines, hypertension, asthma, chronic pain, and rheumatoid arthritis (*Patient Education Management*, 2001). If an organic basis for an ailment has been ruled out, a strong recommendation is to see a stress management specialist.

Technology has ushered in EEG (electroencephalogram) biofeedback also known as **neurofeedback** or brainwave training. Neurofeedback is a specialized kind of biofeedback that involves operant conditioning of the brain’s electrical activity in order to improve brain function. This, in turn, impacts emotions and behavior (Othmer, Phillips, and Roost, 2001). According to Andrea Sime, a specialist in biofeedback training, “Research in neurofeedback has demonstrated positive results especially with epilepsy and attention deficit hyperactivity disorder. Neurofeedback has also been used successfully with anxiety and panic disorders, sleep disorders, chronic pain, posttraumatic

stress disorder, alcoholism, and numerous other conditions. Many athletes, performers, executives, and others are using neurofeedback to promote peak performance.”

Both biofeedback and neurofeedback are based on the mind–body connection that is so important in healing. Based on the idea that stress that leads to depression and despair can set the stage for cancer growth, a research team (Simonton, Matthews-Simonton, and Creighton, 1978) used psychological interventions with medically incurable patients and noted that a number of them improved and were living longer and better lives. Psychological intervention (relaxation, visualization techniques, and perception changing) reduced stress, decreased feelings of depression, and helped patients feel more hopeful. This made cancer regression possible.

Yoga is wonderful for nurturing a state of mental and physical well-being. It promotes a balanced and healthy lifestyle. Yoga techniques can also be applied to removing excess weight, thus bringing you an extra benefit, that is, if being overweight is a problem to you. Practicing yoga will increase your metabolism. An increased metabolism leads to an increase in the calorie-burning process, so combining yoga with a calorie-burning program may bring you excellent results. Of course, the use of yoga is no rapid weight-loss method. Used over a period of time, though, it can bring good results. If you keep to the rigors imposed by yoga discipline, you should gain a holistic, long-term solution to balance your lifestyle and help you reduce and prevent any surplus weight. In addition to losing weight, you will also experience an increased ability to concentrate and focus, higher resistance to stress factors, and overall a healthier way of life. (See again Figure 6-5.)

Several recommendations in this book are related to the mind–body connection and to stress reduction. Stress will be a part of your life; by learning about it and taking charge, you can make a positive difference in your health and well-being. Wellness choices reflect how much you care about yourself and affect your present and future health. We will never be perfect; nonetheless, improvement in physical and psychological well-being is worth pursuing.

## Anger Management

Remember the three components of emotion? Physiological arousal is usually a clear sign of anger. Typically, blood pressure rises, and the heart may seem to beat harder or faster. Cognitively, angry people believe that they are being mistreated and can experience frustration. Behaviorally, they have a tendency to lash out at others. A person can also cry, become very quiet, and even act in constructive ways.

Too often, anger leads to negative behaviors. In relationships, the emotion can erupt in violence. One of the risk factors for alcohol, tobacco, and other unhealthy drug use is **trait anger**, defined as a state of general hostility (Thomas, 1997). Rather than accept the idea that very little can be done about your angry expressions, decide to become an effective anger manager.

*Choices in expressing anger.* Beyond understanding the effects and determining the reasons for anger, what can help? The issue becomes one of

discovering constructive ways to express anger. Following is a partial list of possibilities.

Walk, jog, swim, and engage in any type of physical exercise.  
 Hit a pillow, punch a punching bag or stuffed object.  
 Talk to someone you trust.  
 Scream (in a private place), write angry thoughts, cry.  
 Clean house, pull weeds.

A physical act seems to be especially relieving. However, if you find that your actions serve to escalate anger, another method is advisable.

An excellent technique is to look at anger-provoking events from different perspectives and not personalize everything that happens. If you are angry with an individual, try to let him or her know. The key is to use assertiveness and positive communication techniques covered in this book rather than to engage in unbridled expressions of anger.

After awareness of the problems of suppression and the benefits of expressiveness, the next steps become obvious. Select behaviors that seem to fit you and even experiment with some that at first seem uncomfortable. Continue to practice your new expressive actions and monitor yourself to see how you are doing. Have you hugged anyone recently? When was the last time you really laughed? What did you do or not do the last time you felt angry? What could you have done? Are you allowing any tears? Keep in mind what most people do not realize: Suppressing any emotion will affect total expressiveness. Negate anger and you also negate love (Rubin, 1998). In an emotionally healthy

## REFLECT AND APPLY

### Reflect

- ◆ *Think of examples of people whose wellness level is lower because of a poor health habit.*
- ◆ *Pretend you are a parent of a young teenager. What information related to smoking, alcohol use, and sexuality would you give?*
- ◆ *Using a past or present decision, check yourself using the action steps in Figure 3-4.*
- ◆ *Think of recent situations in which better time management would have really helped. Which tips would have been useful?*

### Apply

- ◆ *If you can “see” yourself in terms of some unwise health choices, make at least one positive change.*
- ◆ *Look for examples of positive aging in the media or as demonstrated in people you know.*
- ◆ *Set a goal to become healthier. Ask the questions based on the criteria given in this book. Then use action steps and pinpointing.*

climate, feelings are not labeled good or bad, and all are given ample play and freedom.

It is all right to feel love, and it is all right to feel anger. It is all right to express love, and it is all right to express anger. Your feelings are welcome here, and we would like to know what they are. You are loved and accepted and safe with all your feelings. You need not stifle any of them to please us (Rubin, 1988, pp. 21–22) (Reflect and Apply).

## **LOOKING BACK**

- Health
- Tips to Wellness
- Categories (health gamblers, mechanics, gardeners)
- Mortality (diseases)
- Growing older