

# EMPLOYEE ASSISTANCE REPORT

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## The Benefits of Technology Enhanced Aftercare & Monitoring

By Miles Murdaugh, M.A., CEAP and Jared Friedman, M.A.

Time and time again, employee assistance and substance abuse professionals have found it difficult to locate appropriate treatment resources for employees after they've come to us for help. There's no doubt that numerous challenges exist in order to increase the probability of continued recovery and reduce the risk of relapse.

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*“As our world becomes more and more technological, it is imperative that we examine this future landscape and see what it has to offer us as EAPs and SAPs.”*

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Many current systems of aftercare are cumbersome and difficult for employees to access and sometimes do not provide those employees with the care best suited for

their individual circumstances.

However, over the past 10 years there has been a great deal of technological advancement for EAPs and SAPs, which has created a more efficient, and effective means of observation and support. It is *not* our intent in this article to support a technology-based program as a stand-alone aftercare plan. Rather, the goal is simply to introduce a new concept – the integration of technology within aftercare and monitoring – and to demonstrate the potential benefits of this approach. Research on aftercare for substance abuse treatment is lacking, but that is not uncommon in cases of new technologies and methodologies.

Regardless, given the astronomical cost of substance abuse in the workplace, finding a structured, affordable, and easily accessible aftercare program is paramount.

### Case Management

Ensuring that employees are continuing to recover and making sure that their cases are properly managed is arguably the most difficult part of the aftercare process. Coordinating follow-up schedules

and having a comfortable and easily accessible place to meet are just some of the challenges that employees face during aftercare.

Technology, however, can enable us to rethink the way we view aftercare and alter our approaches to connecting employees and case

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- ▶ *Brown Bagger*: Management Consulting
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managers with the resources they need. Through the Internet, case managers can instantly communicate with clients from any location. Check-ins can be made as needed while both case managers and clients do not have to worry about the security of their meeting and scheduling a time and place to meet.

Additionally, communicating online allows case managers to obtain necessary resources for a client prior to, *during*, and *even after* their check-ins to further help the case management process. Whether over the phone, chat, or video conferencing, websites such as [www.telementalhealthcomparisons.com](http://www.telementalhealthcomparisons.com) offer technological comparisons across a number of criteria to meet provider needs.

### Social Connectivity

From sharing pictures and videos to posting our thoughts on a range of topics, social media has greatly changed the way people are connected. It's long been the practice of health care providers and EAPs to encourage, and sometimes even require, clients to remain connected through some form of social support. Whether it's attendance at Alcoholics Anonymous meetings or some type of community support, research has illustrated the importance of interpersonal relationships to *all individuals*, not just those in recovery.

### Education

Sometimes employees make real progress in treatment only to return to the workplace and either forget or have difficulty implementing the skills they learned. One of the ways around this problem is by providing employees with continued education *after* they've finished treatment and making sure that they follow-up

and understand the proficiencies they learned. Online tools can make the process of aftercare education not only accessible, but interactive and comfortable as well. Colleges, tutoring programs and many other educational programs have begun using these methods, and the same can be true for EAPs and SAPs. By using online programs, or integrating educational materials into an online aftercare program, EAPs can provide education from an easily accessible source that employees can utilize within the comfort and convenience of their own schedules.

### Resources

One of the hardest parts of managing the case of an employee in aftercare lies in finding, providing and coordinating the right resources for each and every employee. Each employee has his or her own different needs and finding the right resources is often difficult. However, with online search engines that are becoming more and more efficient, helping employees find resources is easier than ever. Finding and contacting resources online can be as simple as a click and an email, allowing employees to help tailor aftercare plans to their own personalities.

### Monitoring

EAPs and SAPs also find it difficult to monitor the activities of individuals in aftercare. Many employees who enter a treatment program acknowledge the extent to which addiction has affected their lives. Despite their efforts to achieve sobriety, most employees recognize that treatment, direction, and guidance is needed from medical and clinical professionals.

Since monitoring aims to assess impairment from substances either

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through face-to-face evaluation or by self-reporting, utilizing urinalysis as a form of monitoring and confirmation not only allows employees to hold themselves accountable, but it also provides testing reports to family, employers, courts, etc. as continued evidence of progress.

Research also supports the use of testing as a deterrent, in addition to it being commonly used by

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private and public institutions as a measure of continued recovery. Many insurance plans offer coverage for lab services ranging from 100% to low co-pay enabling those who need the added support to obtain this service.

### Brain-Wellness

Employees who have suffered from substance abuse or mental health problems often find that when they return to work, they can't perform the way that they used to. While sometimes this is simply a reintegration issue, in other cases these difficulties are due to cognitive deficits that developed from substance abuse or mental health problems.

For a long time, many people felt that improving brain functioning had to be specially tailored or made very clinical, making this process difficult for an employee. However, recently many new and innovative programs have helped employees with cognition difficulties to keep up on their brain-wellness efforts. These programs, many of which are easily accessible online, can provide another means to foster and encourage growth and improvement in aftercare.

### Summary

It's evident that the methods reviewed in this article, used in conjunction with each other through the Internet, have extreme limitations and research is still in its infancy. As stated, by no means should EAPs and SAPs advocate that online programs serve as a stand-alone aftercare recovery plan.

The authors recognize that many individuals will be hesitant, or reject the idea of sharing the details of illness and disease through an online community. Meeting room doors may be closed, and treatment providers



### Editor's Notebook

As any *EAR* reader involved in addiction is aware, getting an employee with a substance use problem into treatment, while often not easy, is only part of the process. Continued recovery and monitoring – or “after-care” – is obviously also vital.

Still, barriers remain. In today's technological society, why not take advantage of online tools to increase the probability of continued recovery and reduce the risk of relapse? Miles Murdaugh and Jared Friedman explain some of the online resources that can be used to do just that.

The authors also emphasize that the goal of their article is simply to introduce a new concept – the integration of technology within aftercare – and to discuss its benefits; *not* to support technology as a stand-alone aftercare plan. Many thanks to Miles and Jared for sharing their time and talent.

may be experienced in establishing rapport with patients, but individuals still remain concerned that the information they share will be judged or used against them. However, examining these matters and openly and honestly sharing any concerns, is not only essential to effective aftercare, but it should also be available to *anyone* who seeks assistance toward a better a quality of life. Technology makes it possible to address age-old aftercare challenges such as time, cost, and location by providing individuals with a *single* location to focus their recovery efforts.

Continuing the structure of aftercare, its flow of education and ease of communication, as well as monitoring for signs of

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*EAR* staff is often so busy putting together the current newsletter you're reading, and its various inserts, that it's easy for us to overlook that some of the topics we covered 4-5 months ago might have more bearing on your specific practice right now than many of the articles in *this* issue of *EAR*. We'd like to see if we can help with an article in this newsletter titled **Recent Brown Baggers include...** Let us know what you think.

Of course, if *this* month's cover story (or inserts) HAS “tripped a trigger” with you – all the better! Let us know that, too. We hope your summer is off to a great start! Until next time.

*Mike Jacquart*

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difficulty and/or relapse, are essential to increase the probability of continued recovery and a reduction of relapses. As our world becomes more and more technological, it is imperative that we examine this future landscape and see what it has to offer us as EAPs and SAPs. ■

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# Face Time is Still Important – Part I

By Michael Houlihan & Bonnie Harvey

Technology has made many aspects of modern living more convenient and “connected,” but the pendulum has swung too far. Now, people are reluctant to do something as simple as pick up the phone, and face-to-face meetings — well, they’re almost unheard of.

This “technology takeover” is not without consequence. Misunderstandings abound. Relationships stagnate. Social media and technology do have their place, but they are not, and never will be, a substitute for in-person interaction. People don’t just buy your product or service; they buy *you*.

I worry that young people’s dependence on virtual communication has stunted the social skills they’ll need to attract customers. Through no fault of their own, they have inherited a world that provides a comfortable firewall insulating them from personal rejection — one in which they simply don’t have to communicate in real time. “*Could you learn to walk if you were handed a crutch at birth?*”

Of course, face-to-face meetings can be expensive. It’s not economically feasible to hop on a plane every time a meeting is needed. In these cases, Skype is the next best thing to being there. However, face to face is still the best whenever possible, and we’d like to share seven reasons why the personal touch will always be more effective than pixels on a screen. Two of them will appear

below – the remainder will appear in part II of this two-part article.

❖ **The time investment shows you really care.** Human beings want to be valued and appreciated. Spending time with someone else, especially face to face, is one of the best ways to convey these feelings. An investment of time says, “*While there are many other things I could be doing, I’m choosing to spend my time with you. That’s how important I think you are!*”

Plus, face to face can also provide valuable non-verbal clues to someone’s values and concerns. On any business trip there will probably be instances that cause stress and anxiety, which presents an opportunity for both of you to see how the other handles a variety of situations and to learn to work together more effectively.

❖ **You’re better able to give personalized attention.** It’s hard

to multi-task when someone is physically in front of you, demanding your attention. Unless you have no problem with blatant rudeness, you’re focusing on the other person, responding not only to what they say, but also to their mood, movements, and many other non-verbal signals. In my experience, when you use someone’s name along with eye contact and an attentive demeanor, they’re more likely to be agreeable and to give you the benefit of the doubt. People want to do business with people they know, and you can get to know them much better “off-screen.” ■

NEXT MONTH: The authors reveal more benefits to the personal way of doing business.

*Michael Houlihan and Bonnie Harvey are authors of “The Barefoot Spirit: How Hardship, Hustle, and Heart Built a Best-selling Wine” (Evolve Publishing, www.thebarefootspirit.com).*

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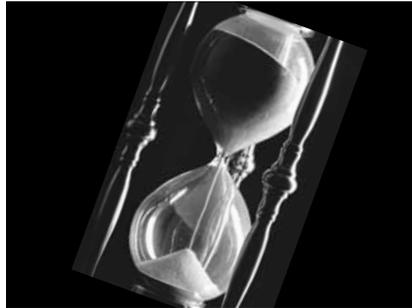
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## Recent Brown Baggers include ...

**E**mployee Assistance Report staff is often so busy putting together the current newsletter you're reading, that it's easy for us to overlook that some of the topics we covered months and months ago might have more bearing on your specific practice *right now* than numerous current articles. For example, let's assume that a LOT of employees at a particular corporate client are coping with aging parents, and so you're putting together a training on caregiving – but where could you find some relevant materials fairly quickly? Was there something about this topic in this newsletter? When? The following are the titles of some recent *Brown Baggers*, and the general category they covered:

- ❖ **Addiction and treatment** – “Drugs in the Workplace,” April 2013; “The Impact of Substance Abuse on the Workplace,” Feb. 2013
- ❖ **Workplace violence** – “Assessing Individuals for



Likelihood of Workplace Violence,” March 2013

- ❖ **Management consulting** – *Current issue*; and “Micromanaging Versus Coaching,” Jan. 2013
- ❖ **Health care reform** – “Wellness Efforts Curb Health Care Costs,” Dec. 2012
- ❖ **Adult caregiving** – “Caregiving Issues are an Increasing Concern,” Nov. 2012

*For additional Brown Bagger and other EAR topics, see the article archive inserts in the January 2013, February 2012, January 2011 and January 2010 issues of EAR, or contact the editor, mike.jacquart@impacttrainingcenter.net.*

## ... Recent Lifestyle Tips include

- ❖ **Workplace bullying** – “Protecting Against Workplace Bullying,” Vol. 8, No. 4
- ❖ **Stress** – “Physician Talks on Stress Surprisingly Rare,” Vol. 8, No. 2
- ❖ **Autism** – “DSM-V: The Future of Autism Diagnosis,” Vol. 8, No. 2
- ❖ **Weight loss** – “Jump Start Your Weight Loss,” Vol. 8, No. 1
- ❖ **Depression** – “Depression May Lead to Memory Problems,” Vol. 7, No. 12 ■

*For additional Lifestyle Tips and other EAR topics, see the same article archive inserts listed previously, or contact the editor since these topics represent just a small portion of those covered in EAR since its inception in 1998. Readers who email the editor will be entered into a drawing for one of three FREE books, “The skinny on Willpower,” Jim Randel, \$12.95; “Naked at Work (and Other Fears),” Paul Helman, \$13; and “Super Networking,” Michael Salmon, \$15.99. Be sure to include WHICH BOOK you're interested in receiving.*

### Quick ideas

## Survive the Loss of Baby Boomers

❖ **Know what you're up against.** Find out as soon as possible how retirement will affect the organization. How many Baby Boomers are currently working in the company, what are their positions, and what are their anticipated retirement dates?

❖ **Develop a knowledge transfer strategy.** While manuals are a good start, they're not enough –

you can only document so much of day-to-day activities. You need to go a step further and develop a strategy for transferring the knowledge and skills of older workers to younger successors.

❖ **Mentor younger workers.** As part of a knowledge transfer strategy, younger employees need to work side-by-side with older workers for a period of time. You simply

can't transfer decades of experience and expertise overnight.

❖ **Retain older workers in some fashion.** Many older employees will still want to work in some capacity, and they can be a valued resource by working part time or as a consultant. ■

*Source: Anne Houlihan, founder of Elevated Leadership International. Visit [www.elevatedleadership.com](http://www.elevatedleadership.com).*

## Military Resources Now Include Apps

The Veterans Employment Toolkit ([www.va.gov/vetsinworkplace](http://www.va.gov/vetsinworkplace)) includes information, tools, resources and client handouts. Visit the site for a variety of resources. Additionally, the Department of Veterans Affairs has recently developed and launched several other resources including mobile apps. For an introduction, check out: [www.ptsd.va.gov/professional/pages/fslist\\_mobile\\_apps\\_pro.asp](http://www.ptsd.va.gov/professional/pages/fslist_mobile_apps_pro.asp)

More specifically:

❖ **PTSD Coach** – [www.ptsd.va.gov/public/pages/PTSDCoach.asp](http://www.ptsd.va.gov/public/pages/PTSDCoach.asp)

for iOS and Android, is an app for trauma survivors who may be experiencing PTSD symptoms. It offers relaxation and focusing exercises, educational materials, a self-assessment with progress graph, and crisis resources.

❖ **Stay Quit Coach** – [www.ptsd.va.gov/professional/pages/stayquit\\_coach\\_app\\_pro.asp](http://www.ptsd.va.gov/professional/pages/stayquit_coach_app_pro.asp) for iOS (and soon for Android) is designed to support smoking cessation therapy, but can be used as a stand-alone tool. It has tools for coping with

urges to smoke, personalized motivational prompts, and education about quitting smoking.

❖ **CBT-I Coach** (coming soon for iOS and Android) is an app to support insomnia therapy with several features that can be used for self-help with sleep problems, including a sleep diary, recommendations for improving sleep hygiene, and customized reminders for maintaining a bedtime routine. ■

### Workplace Survey

## Clothing Choices Affect Promotion Prospects

A word of advice for workers considering wearing pajamas, a chicken suit or parachute pants to the office – *don't*. In a survey from OfficeTeam, eight in 10 (80%) of executives interviewed said clothing choices affect an employee's chances of earning a promotion. Respondents also offered some hilarious examples of outfits that missed the mark.

The good news for the wardrobe-challenged is that proper attire may carry less weight than it did six years ago when 93% of executives surveyed in 2007 tied professional wear to advancement prospects.

Managers were asked to recount the strangest outfits they have heard of or seen someone wearing to work, not in observance of

Halloween. The following are some examples:

- “Pajamas”
- “Parachute pants”
- “A chicken suit”
- “Coveralls”
- “A space suit”
- “Studs and motorcycle gear”.

These professionals got creative with their clothing combinations:

- “A T-shirt, tie and flip-flops”
- “Short pants and a winter jacket”
- “One red sock and one white sock”
- “Tennis shoes and men's knicker pants”
- “Shorts and house slippers”
- “A red suit with sporty footwear”.

“Employees may be tempted to dress down in today's workplace, especially during warmer months, but clothing that's too casual or revealing can be frowned upon,” said OfficeTeam executive director Robert Hosking. “Although a polished appearance alone won't land you a promotion, it can help others envision you in a leadership role.” ■



## Traits of a Great Workplace

❖ **Reasonable, understandable, and uniformly enforced rules.** Great workplaces have rules and policies that are reasonable, understandable, and fairly and uniformly enforced. For instance, if smoking is prohibited in the work environment, *no one* smokes: not the president, and not the new dishwasher.

❖ **Open communication.** Great workplaces have regular, honest communication. Staff and customers are given adequate opportunity to convey their ideas and suggestions to company leadership.

❖ **Fiscal responsibility.** Great workplaces are fiscally prudent in the way they operate. They have detailed, multi-year business plans that feature (among other areas) realistic cash flow projections. Great businesses rigorously monitor and adjust their financial plans on a regular basis and as circumstances dictate.

### Summary

Great workplaces employ happy, productive, and talented people who perform meaningful work compatible with the mission and goals of the company. It takes

effort to be a great workplace, but the result is worth it. ■

*Source: Norm Spitzig, principal at Master Club Advisors.*



### Quick Ideas

## Re-igniting Work Passion

**H**igh stress levels, increased workloads, and long hours can impact morale and lead to decreased job satisfaction. Throw in a competitive co-worker or an overbearing boss and anyone might wonder if a work relationship is worth saving. But before looking elsewhere for employment, try the following suggestions to overcome these challenges and re-ignite enthusiasm for one's job:

❖ **Take charge of stress levels** – Simple things like a short lunch break, asking for help, exercising and taking deep

breaths can help manage stress and keep it from elevating.

❖ **No one should ever over-commit himself/herself** – Saying “yes” to extra work often is a good career move but if it's more than one can realistically handle, meet with a supervisor and look for ways to delegate some work or postpone non-priority projects.

❖ **Foster healthy co-worker relationships** – Learn to effectively communicate with challenging co-workers. It's not necessary to change one's behavior completely,

just remember that a different approach can often help an employee reach the same goal.

❖ **Build a bond with the boss** – A productive and harmonious relationship with the boss is mutually beneficial. Keep the lines of communication open, provide updates on projects and adjust to his or her work style.

In each of these areas, the employee assistance professional is in a perfect position to help. ■

*Additional source: Robert Half International (www.rhi.com).*

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# Feeling Owed Syndrome – Part II

By David & Rhonda Travland

**H**ow could a man take a gun into a crowded store and start shooting people? What does this have to do with caregiving? As explained last month, people who commit atrocious acts like these are feeling “put upon.” In their minds, they have done for others and in return have gotten the shaft. They have succumbed to Feeling Owed Syndrome (FOS).

As stated in Part I, if you opened a door for someone who didn’t make even the slightest acknowledgment of what you did for him or her, chances are you feel “owed,” which resulted in stress.

Multiply this situation by a thousand, as would be the case in caregiving, and you are likely to be facing an accumulation of stress a thousand times worse.

Behavioral scientists know that stress is cumulative, one stressor just piles on top of the next one, and it gets worse and worse.

As the relationship imbalance becomes more and more pronounced, we begin to feel that we are not getting nearly enough back from the person we are caring for to counter what we are putting into the relationship.

FOS is experienced not only by caregivers, but by anyone who feels they’ve been short-changed or denied an adequate return on their investment in others.

The more they feel they’re owed, the more extreme the reaction. This is true regardless of whether the stress is translated into illness, or in some type of acting-out behavior. How can FOS be avoided?

❖ **First and foremost, caregivers must admit they keep track like everyone else.** They need to admit caregiving is extremely demanding, that it is often a thankless job, and that they are carrying around some resentments.

❖ **Caregivers must find a way to reduce the amount of inequity.**

They must find a way to limit their “investment” because it’s unlikely they can successfully demand more back from the individual that needs caregiving.

❖ **Caregivers need to pay close attention to their own needs.**

Sacrificing too much for another person is dangerous, resulting in physical and emotional damage.

❖ **Caregivers need to treat their symptoms of stress seriously.** This includes anxiety, depression, loneliness, and anger. Create an action plan to correct the imbalance in the caregiving relationship.

❖ **Caregivers need someone to talk with who understands caregiving frustrations.** Normally another caregiver is the best choice; a mental health professional or EAP is another option.

❖ **Caregivers need periodic breaks from caregiving.** Finding a substitute caregiver is crucial, whether it’s a relative, friend, neighbor, or someone hired to sit with the individual.



❖ **Caregivers must distinguish between wants and needs.**

Caregivers have a tendency to treat wants and needs alike, but an individual’s “wants” can run caregivers ragged. Needs must be met, but not the wants, especially when they interfere with the caregiver’s needs and well-being.

❖ **Caregivers must get enough sleep.** Sleep deprivation amplifies FOS and may result in depression, anxiety and anger.

## Summary

Caregivers must take care of their own needs or they will not be effective as caregivers. If there is no relief in sight, symptoms of FOS can get out of hand. ■

*David A. Travland, Ph.D. is a clinical psychologist, former caregiver, and the author, along with Rhonda, of “The Tough & Tender Caregiver, a Manual for the Well Spouse.” Rhonda is a gerontologist, former nursing home administrator, and was a caregiver for more than 10 years. They are also co-founders of The Caregiver Survival Site, offering a variety of services to caregivers at <http://caregiversurvivalsite.com>.*