FrontLine Leader

Employees — Your most valuable asset

1135 M Street, Suite 400, Lincoln, NE 68508 ● 402-476-0186 or 800-755-7636 ● 4continuum.com ● easpecialist@4continuum.com



January 2019

In this issue:

How to beef up your emotional intelligence

What does depression "look like"?

Imposter syndrome

How to address an employee who has relapsed

Continuum's featured blog

This information is provided by Continuum EAP. If you would like more information on these or other topics, please don't hesitate to contact us.

I know about emotional intelligence, and its importance in workplace communication and in maintaining productive relationships, but how do I know if I have issues or gaps in this soft skill? Is there a test? Can Continuum help improve my EI?

There are many resources online that discuss emotional intelligence, test it, and promote various resources for improving it. A simple quiz and discussion about emotional intelligence for supervisors can be accessed via the resource links below. Your desire to know more about your emotional intelligence shows your appreciation for self-awareness. Self-awareness is the most important skill to consider when examining emotional intelligence. If your El test results highlight areas where you think you need help, bring this information to the EAP for a discussion.

Online quiz: www.hbr.org/2015/06/quiz-yourself-do-you-lead-with-emotional-intelligence

Discussion on how supervisors can improve emotional intelligence: https://www.workforce.com/2018/12/07/leaders-improve-emotional-intelligence

In the 23 years that I have been a supervisor, I have never seen an employee with depression. Aren't they supposed to look sad, dejected and down in the dumps? I've read there are millions of adults with depression. So what am I missing?



You are describing symptoms of sadness or the blues, but not necessarily depression. Depressed employees can remain hidden because stereotypical views of depression don't match what most people see. Depressed persons are not always sad, weepy, slumped at a desk, or looking down in the dumps. More typically, those with major depression experience feelings of emptiness that don't go away.

They may exhibit extreme irritability over seemingly minor things, suffer with anxiety, restlessness or anger management issues, or may simply not want to participate in activities others leap to enjoy. They may focus on past unsettling events, things that have gone wrong, and their failures. About 17 million adults nationwide suffer with major depression. The good news is that major depression is highly treatable. The medical community has worked hard to help the public understand that depression is not something people can snap out of with encouragement from friends who tell them to cheer up. We all experience sadness, but major depression is a mood disorder, a true brain disease. *Source: Centers for Disease Control and Prevention.*

Q: I have rapidly moved up in my career and fear I am not prepared for so much responsibility so quickly. My biggest worry is being at a meeting and senior management suddenly realizing I am not qualified for this job! What should I do?

Q: My employee relapsed New Year's Eve. He had been abstinent from alcohol for eight years after almost getting fired. His work performance is outstanding. The word is that he is "back on his recovery program." Should I leave this alone or talk to him?

Your fears may be normal in the face of a rapid rise in your career. Many people with fears similar to yours have discovered nothing came of them despite the anxiety they often felt. The collection of symptoms you describe is sometimes called "impostor syndrome." Don't panic. Talk to the EAP, and allow the professionals there to guide you in gaining relief. Be prepared to share more about your concerns, career path, supervisor relationship, and specific fears. Impostor syndrome is an internal sense of fear, not based on reality. The impostor syndrome can be exacerbated by a difficult relationship with the boss or peers, or by a true shortage of skills, but rarely by the inability to perform the job or rapidly learn it.

Meet with your employee. It sounds like you may already have a history of referral to the EAP and post-treatment management of his performance. Of course, you will not be able to determine the accuracy of anything he says regarding re-establishing an effective recovery program, or even regarding his abstinence. Only a professional can do that. However, you can recommend strongly that he contact Continuum EAP as a self-referral so the program can help him reestablish such an effort. Relapses happen. They are nothing to panic about, but the sooner you have a discussion like the one you will hopefully have, the more compliant your employee will be in remaining an employee who is fully capable.

GIFT OF GRATITUDE

The holidays may be over, but anytime is a great time to share the gift of gratitude with your employees.

Interested in learning how? Read this entire Continuum EAP blog feature at 4continuum.com — Search: "Holidays are a great time for leaders to express gratitude."



FrontLine Leader is for general informational purposes only and is not intended to be specific guidance for any particular supervisor or human resource management concern. Articles with URLs are case-sensitive. For specific guidance on handling individual employee problems, consult with your EA professional. © 2019 DFA Publishing & Consulting, LLC