



A Healthy Outlook!

240-314-1040 • FAX 240-314-1049 • www.montgomeryschoolsmd.org/departments/EAP • Vol. 18 No. 1

APPS Offering Digital Counseling and Coaching

WHILE WE HERE at the EAP have a belief that face-to-face counseling is the best way to get assistance, it still needs to be acknowledged that



technology has evolved enough so that virtual assistance is more available than ever. While not endorsing any of the apps/sites below, it is important for you, as consumers, to know what options exist. Here are six such examples offering various degrees of assistance involving texts, biometrics, video conferencing, etc. Some are free and some have an ongoing fee.

Lantern—Lantern offers coaching instead of therapy. Users share problems via text message and receive highly structured strategies for feeling better in that moment. Fees start at \$49. <https://golantern.com/research/>

T2 Mood Tracker—This is a free app that lets users track their own mental health, helping to track patterns and triggers in order to better manage and

gain control over mood. This was developed by the Department of Defense to help war veterans, as there are not enough Veterans Affairs counselors to help. <https://www.realwarriors.net/active/treatment/moodtracker.php>

Ginger.io—This app combines smartphone fitness-based tracking with live human feedback—from a coach, therapist, or psychiatrist. It uses text messages and videoconferencing. Cost is \$139 per month. <https://ginger.io/>

7cups.com—This is a free, anonymous online text chat with trained listeners and counselors. <https://www.7cups.com/therapists/search.php?radius=25&location=&lastname=&ob=1>

betterhelp.com—Described as “convenient, affordable, private

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Ask the EAP:

Q. *If I come to the EAP to talk about problems I am having with my principal and the school system, will the EAP have to report it?*

A. No. The EAP is bound by state and federal regulations to maintain confidentiality, except when necessary to intervene with serious life and death issues such as homicide, suicide, child abuse, or dependent elder abuse. Otherwise, we will speak to someone only with your written authorization to do so.

Do you have a question for the Employee Assistance Program (EAP)?

Send your questions to Jeff Becker at Jeffrey_Becker@mcpsmd.org or via the Pony mail.

Apps Offering Digital Counseling and Coaching

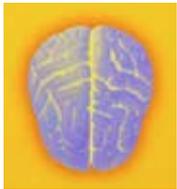
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counseling anywhere, anytime.” Costs range from \$35 to \$70 per week. <https://www.betterhelp.com/helpme>

Sam—This is an artificial intelligence app to help with losing weight. Powered by IBM’s Watson, it is advertised as “Talk to Sam, your digital therapist.” <http://talk2sam.com/>

Do you have similar apps that you like to use? Let us know.

Information adopted from the article “The Decline of In-Person Counseling,” by Marina London, in the *Journal of Employee Assistance*, 4th quarter 2017.



SIX Things to Know About the Teen Brain

- 1. Your brain does not keep getting bigger as you get older.** For girls, the brain reaches its largest physical size at around age 11; and for boys, the brain reaches its largest physical size at around age 14. Of course, this difference in age does not mean either boys or girls are smarter than one another!
- 2. BUT that does not mean your brain is done maturing.** For both boys and girls, although your brain may be as large as it will ever be, your brain does not finish developing and maturing until your mid- to late-20s. The front part of the brain, called the prefrontal cortex, is one of the last brain regions to mature. It is the area responsible for planning, prioritizing, and controlling impulses.
- 3. The teen brain is ready to learn and adapt.** In a digital world that is constantly changing, the adolescent brain is well prepared to adapt to new technology—and is shaped by experience.
- 4. Many mental disorders appear during adolescence.** All the big changes the brain is experiencing may explain why adolescence is the time when

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SOME HIGHLIGHTS from the 2017 NIH “Monitoring the Future” Survey



SINCE 1975 the Monitoring the Future (MTF) survey has measured drug, alcohol, and cigarette use and related attitudes among adolescent students nationwide. Survey participants report their drug use behaviors across three time periods: lifetime, past year, and past month. The survey is funded by the NIDA, a component of the National Institutes of Health (NIH), and conducted by the

University of Michigan. Results from the Survey are released each fall. Here are some results from the 2017 survey:

- ♦ Reported **heroin** and methamphetamine use remain very low among the nation’s teens, at less than 0.5 percent in past-year measures.
- ♦ **Cocaine** use remains low in teen students. For example, 12th graders report past-year use at 2.7 percent, after a peak of 6.2 percent in 1999.
- ♦ Past-year use of **anabolic steroids**, which peaked at 2.5 percent among the nation’s 12th graders in 2004, is now at 1.1 percent.
- ♦ Past-year use of **LSD** among 12th graders is at 3.3 percent, reflecting a modest but significant increase in the past five years. Use still remains lower compared to its peak in 1996, of 8.8 percent.
- ♦ Past-year use of K2/Spice, referred to as **“synthetic marijuana”** in the survey, was reported at 3.7 percent among 12th graders, down from 11.3 percent five years ago. There was a significant drop in past-year use among eighth graders, from 2.7 percent in 2016, to 2 percent this year.
- ♦ Reflecting a historic low, high school seniors reported past-year misuse of the prescription opioid **Oxycontin** at 2.7 percent, compared to 5.5 percent at its peak in 2005.
- ♦ Misuse of **prescription stimulants**, commonly prescribed for ADHD symptoms, is mostly stable compared to last year, with 5.5 percent of 12th graders reporting past-year misuse of Adderall. In fact, this represents a significant drop for this age group from five years ago, when misuse peaked at 7.6 percent.
- ♦ In 2017, 79.8 percent of eighth graders said they disapprove of regularly **vaping nicotine**, but that number dropped to 71.8 percent among 12th graders.
- ♦ Only 14.1 percent of 12th graders see “great risk” in **smoking marijuana** occasionally, down from 17.1 percent last year and a staggering drop from 40.6 percent in 1991, but similar to rates when the survey was started in 1975 (18.1 percent).

For a full summary of the survey, go to <https://www.drugabuse.gov/news-events/news-releases/2017/12/vaping-popular-among-teens-opioid-misuse-historic-lows>

SEXUAL Harassment

THERE HAS BEEN PLENTY OF BUZZ about sexual harassment recently. Several prominent men have been accused and some have lost high-level positions for behaviors ranging from inappropriate sexual conduct to sexual assault. With all of the publicity surrounding sexual harassment, this is a good time to explore what constitutes sexual harassment, and to review Montgomery County Public Schools' sexual harassment policies and procedures.

What Does Sexual Harassment Look Like?

According to the Equal Employment Opportunities Commission (EEOC), the following scenarios imply sexual harassment:

- ◆ The offending party's conduct is unwelcome.
- ◆ A person is harassed by someone of the same sex.
- ◆ The offender is the victim's supervisor, coworker, or a client of the employer.
- ◆ A person can be victimized without being the direct recipient of the harassment, if the offender's behavior creates a hostile and/or offensive work environment.
- ◆ Sexual harassment occurs in the absence of economic injury or termination of the victim.

MCPS Sexual Harassment Policy

MCPS adheres to the U.S. Department of Education Title IX policies regarding sexual harassment. The Title IX provision protects not only employees, but also students. MCPS policy states that sexual harassment occurs when—

- ◆ submission to such conduct is a condition of employment, instruction, or participation in school activities;
- ◆ submission to or rejection of such conduct is used as a basis for making personnel or academic decisions; or
- ◆ such conduct unreasonably interferes with an individual's work or academic performance or creates a hostile, intimidating, or offensive work or learning environment.

What to Do If You Are a Victim of Sexual Harassment

It is important to note that sexual harassment is unlawful. Any such behavior should be reported immediately to the Equal Employment Opportunity (EEO) officer or Title IX compliance officer, located in the Department of Human Relations. Sexual harassment investigations are conducted by the employee's supervisor/principal or the Department of Personnel Services, through the office of the EEO officer or the Title IX compliance officer.

Retaliation for reporting is strictly prohibited. The confidentiality of the complainant and the accused is mandated by law.

All information regarding MCPS's policies for sexual harassment can be found by clicking the following link: <http://www.montgomeryschoolsmd.org/info/sexualharassment/>

REPORTING SEXUAL HARASSMENT CAN BE SCARY. If you are unsure or feeling uneasy about reporting and procedures, please contact the EAP at 240-314-1040. *We are here to help.*

5 FACTS About Depression (PART 2)

continued from the Winter 2017 Newsletter



- 1. Self-medication is not going to get you better and will surely make you worse over time.** Alcohol is a depressant. So is marijuana and a host of other recreational or street drugs. Remember that most medications, including anti-depressants, have side effects.
- 2. People do not choose to be depressed, but they do make a choice about how to deal with it.** You can choose to do nothing, but denying that you have a problem will only make you feel worse. Choose to just make one step, just one; and if it feels okay, try it again. That's how many people get through it.
- 3. The origin of depression can be situational and/or bio-chemical.** If you are experiencing mild to moderate situational depression (resulting from the loss of a job, for example), counseling will help you. Most bio-chemical depressions that are moderate to severe are best treated with a combination of medicine and psychotherapy.
- 4. Depression can be as hard on your loved ones as it is on you.** Those closest to you may start to feel unloved, and may distance themselves so they are not pulled into your emotional pain. Remember that others are counting on you.
- 5. Exercise is the easiest and least expensive cure for depression.** Just walking 30 minutes a day will help you, and sometimes completely alleviate your symptoms. For this very reason, many therapists take walks with clients instead of doing "couch time."

Source: Dr. Barton Goldsmith, Ph.D., LMFT. For more information visit <http://bartongoldsmith.com/>.

TEEN BRAIN *continued from page 2*

many mental disorders—such as schizophrenia, anxiety, depression, bipolar disorder, and eating disorders—emerge.

5. **The teen brain is resilient.** Although adolescence is a vulnerable time for the brain, and for teenagers in general, most teens go on to become healthy adults. Some changes in the brain during this important phase of

development actually may help protect against long-term mental disorders.

6. **Teens need more sleep than children and adults.** Although it may seem like teens are lazy, science shows that melatonin levels (“sleep hormone” levels) in the blood naturally rise later at night and fall later in the morning than in most children and adults. This may explain why many teens stay up late and struggle with

getting up in the morning. Teens should get about 9-10 hours of sleep a night, but most teens do not get enough sleep. A lack of sleep makes paying attention hard, increases impulsivity, and also may increase irritability and depression.

Source: https://www.nimh.nih.gov/health/publications/the-teen-brain-6-things-to-know/om-16-4307_153233.pdf

“Find something you’re passionate about and keep tremendously interested in it” ~ JULIA CHILD

For more information about Julia Child, go to https://en.wikipedia.org/wiki/Julia_Child

“I have no special talent. I am only passionately curious.” ~ ALBERT EINSTEIN

For more information on Albert Einstein, go to https://en.wikipedia.org/wiki/Albert_Einstein

Upcoming Events:

• Caregiver Support Group

Monthly • 45 W. Gude Dr. • 4:15-5:15 p.m.

To support our caregivers, MCPS EAP offers a Caregiver Support Group designed to provide helpful resources and establish connections among the caregivers within our MCPS community. The meetings are held monthly on Wednesdays (subject to change), from 4:15-5:15 p.m. at 45 West Gude Drive. Guest speakers present on important topics related to caring for a loved one. All are welcome to attend.

• **FOR MORE INFORMATION** about the events or to register, please call the EAP at 240-314-1040.

A Healthy Outlook!

To help employees with troubling issues before they become overwhelming.



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Important Notice: Information in *A Healthy Outlook!* is for general information purposes only and is not intended to replace the counsel or advice of a qualified health professional. For further questions or help with specific problems or personal concerns, contact your employee assistance professional.

You may contact us or send your questions and comments to Jeffrey_Becker@mcpsmd.org

Please note that e-mail is not necessarily confidential.

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