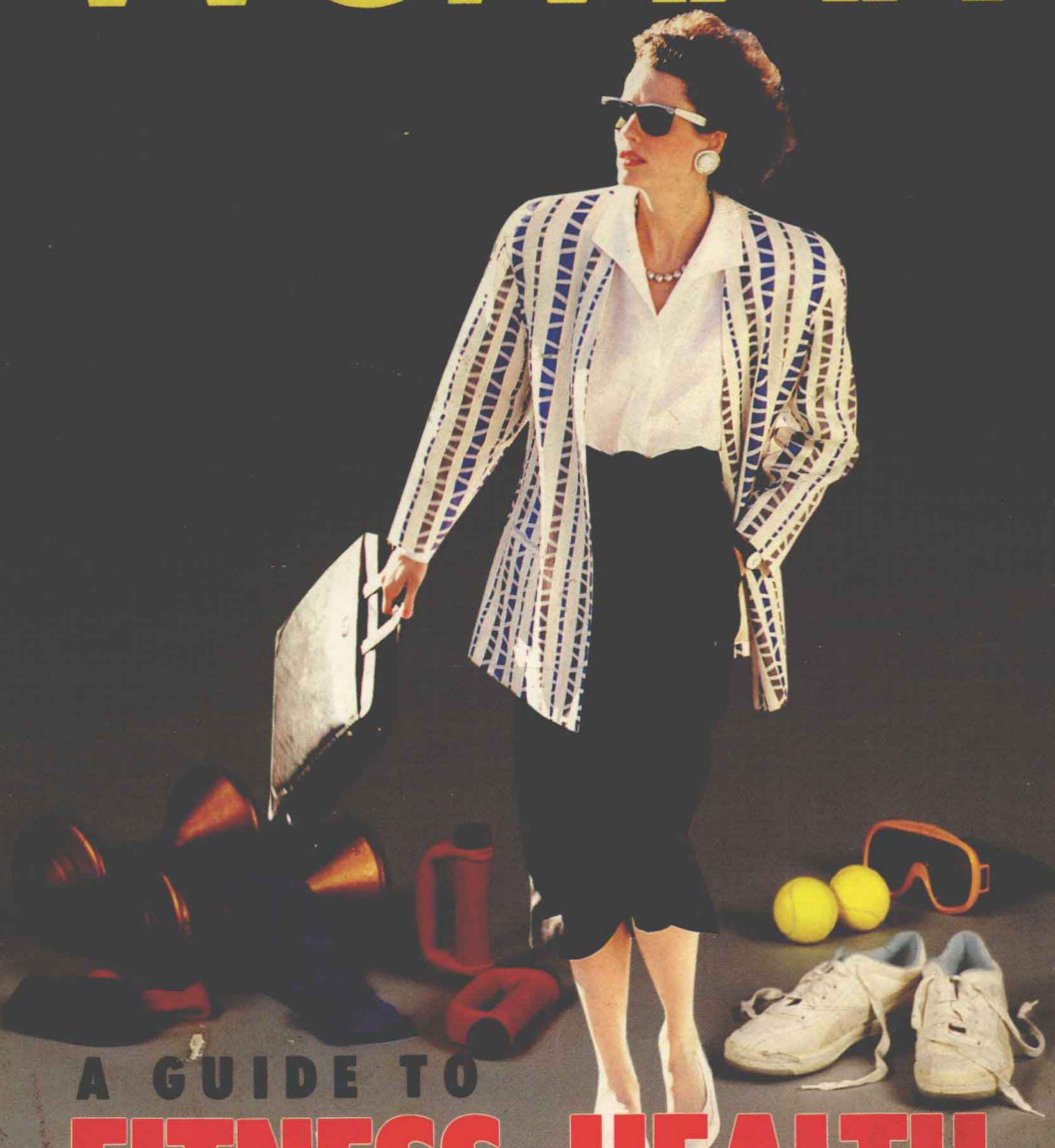


WORKING WOMAN



A GUIDE TO **FITNESS & HEALTH**

ANITA SHREVE • PATRICIA LONE

Working Woman Magazine's Guide
to Managing Your Body, Your Work, Your Life

WORKING WOMAN

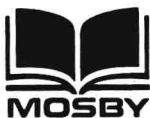
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Anita Shreve

Patricia Lone

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*To the continuing good health
of our families—
John, Katherine, Richard,
Bibiana, Janet, and Betsy;
Salim, Samir, and Saahir—
and our friends.*

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A WORKING WOMAN'S HEALTH: PREVENTION AND PRIORITIES

This is a book that is meant to be read. That may seem an odd statement—all books are meant to be read, aren't they?—but, in general, health books are not. They are looked at, picked at, queried, and consulted in a crisis, but they are seldom actually *read* in the same way we delve into a novel, a biography, or a crime story. Instead, we have come to think of health books as reference works—weighty tomes that sit on our shelves waiting for a symptom to prompt us to consult them.

Yet the story of good health cannot be read haphazardly, a paragraph at a time, in periods of crisis only. It is an ongoing tale with many chapters, picaresque perhaps, but nevertheless all one piece. It is a story that builds on preceding chapters, has moments of drama and surprise, and should leave the reader at the end with the satisfying sense of having been somewhere. More important, it should motivate the reader to *go* somewhere—that is, to make those changes that are necessary to insure continuing well-being. The story of good health is an important one—some might say it is the most important story you'll ever read. At the risk of sounding hyperbolic, the story of good health is a tale that might save your life.

The particular story in this book focuses on the health of working women in our time, and of your own personal health as a member of this group. Each chapter involves you, your relationship to your environment, and your special needs. Certain characteristics of working women of the 1980s—the environmental hazards of the office; the stress factors

inherent in the life of the workaholic, the perfectionist, and the harried working mother; the increased prevalence of smoking among women entering the work force; the inability of many women to take time to eat well and exercise regularly; and the special needs of the pregnant working woman — make our health profiles different in many ways from those of women who do not work outside the home. That we spend eight or more hours a day at our jobs and that the rest of our lives are often defined by the very fact that we are working women impinges on and ultimately shapes our health profile. For some of us, the way we live our lives as working women is markedly different from how we would live them if we were not working outside the home. This marked dissimilarity can make the difference between good health and poor health.

The majority of women in this country work outside the home. Some of us are single and some of us have families; many of us work in offices, but others of us work on the land, in factories, or in shops all across America. As a whole, women have lower self-rated health than do men and we miss more days of work per year due to illness than do our male colleagues. Yet these factors pale beside the single overriding characteristic of working women that makes us candidates for health problems: We do not take the *time* to care for ourselves.

"I know I should be eating better and exercising more," says a working woman from Boston, "but they're the first things I give up when I'm pressed. My health is compromised by the fact that I'm a workaholic. I went to a health club faithfully for awhile until it got in the way of my work. I started having meetings at seven o'clock at night, and I wasn't willing to say I couldn't make them because I had to go to my health club. That's the choice I made. Something's got to give. Part of why I let health go so quickly is a head-in-the-sand attitude: It can't happen to me. And when push comes to shove, health is the first thing I give up."

For generations, women have not made their own health a priority because they were expected to tend to the health needs of their children and husbands first. Today they still don't make health a priority because they don't have time. Finding time to eat *at all*, never mind well, in a particularly harried 10-hour day at the office can be frustrating. Finding even more time to exercise daily can be a nearly Herculean feat. And keeping to a recommended schedule of physical exams and checkups is often downright laughable.

Lack of time is the single most serious impediment to a working woman's maintenance of good health. Yet, paradoxically, without time spent on good health care, how can we hope to maintain our energy levels and our spirits both in the home and at work? How can we strive toward success in a chosen career while simultaneously making careless decisions about our health that may hinder our ability to enjoy that success? Why invest years in a career and a family and not one hour in the founda-

tion for their success? We now know more than ever before about how to live our lives in the healthiest way possible. Yet how many of us avail ourselves of this information and, more important, incorporate it into our daily routines?

The paradox inherent in a working woman's lack of time was at the forefront of our thoughts as we researched and wrote each chapter. As working women ourselves, this paradox is a fact of life with which we are all too familiar. To that end, we have tried to present the latest available information in a quickly digestible and easily comprehensible manner, with our readers as the focus of our reporting. When appropriate, we have included guidelines for living and working and suggestions for ways to overhaul an unhealthy lifestyle that won't take time away from other endeavors.

A prescription for good health needn't be inordinately time-consuming nor something about which you must become obsessed. Rather it should be well-informed and straightforward: Know the facts, make your choices, and get on with the business of your life.

To get on with this all-important business, it is necessary to prevent poor health and to set health priorities. These two themes are the underpinnings of our book. *Prevention* of debilitating illnesses or of serious life-threatening diseases, such as cancer or heart disease (the number one and two killers of women in this country) begins with diet, exercise, ridding oneself of addictive habits, controlling environmental factors, reducing stress overload, and becoming informed about the healthiest way to live your life. *Setting health priorities* is essential because we have so little time to spend on our health. But priorities can be set only once you are knowledgeable about prevention and have taken a good, hard look at your health profile.

A health profile is a portrait of all of the factors that influence your health. To chart your health profile, you will need to know what diseases run in your family, what health hazards you may be exposed to at work, how your daily diet compares to the recommended standards, how much time per week you spend exercising and what type of exercise you engage in, how stressful your work and family environments are, what kinds of illnesses you get regularly, and whether or not you have any one of a number of addictions—to cigarettes, alcohol, caffeine, or recreational drugs. To complete this portrait, you should have a checkup, complete with a blood work-up, to determine how your blood, heart, and lungs are functioning. This checkup will serve as a baseline, to which you can then compare later tests.

Once this profile is thoroughly drawn, you can begin to think about setting health priorities based on your particular portrait. For example, if you drink two martinis every evening, have a high-stress job, are overweight, smoke a pack of cigarettes a day, and use marijuana occasionally

on weekends, you will discover, that under normal circumstances, you should quit smoking first, followed by losing the excess weight, reducing the stress of your job, curtailing your marijuana habit, and then finally giving some thought to those two martinis if you want to prevent first cancer, and then heart disease. If, however, you are pregnant, you will find that your first priority is to give up the two martinis, followed by cigarettes and marijuana in that order. (Losing weight at this time would not be appropriate.) If your problem is high blood pressure, you may find that your physician recommends losing weight first, followed immediately by quitting smoking and reducing stress. If you are addicted to neither alcohol, tobacco, nor marijuana, but instead are a fast-food junkie, you may find that you must first cut down on your intake of high-fat, low-fiber foods in order to prevent colorectal cancer, heart disease, and digestive problems. If, however, both your mother and your sister had breast cancer and you are past menopause, your number one priority may become a stepped-up schedule of breast self-examination and low-dosage mammograms. Even for the youthful working woman who has never been sick a day in her life, who is in excellent health and physical shape, and who is not pregnant, a good, hard look at all health habits and at work and home environments may suggest changes that will reap benefits years hence.

No two working women are the same. Some factors influence us collectively, but individually we work in separate environments, have different tolerances to stress, and have vastly different eating habits, addictions, and ancestors. A thorough understanding of your own health profile, then, must take into consideration your medical history, your work environment, and your personal routines. Only then can you establish your health priorities. We hope that this book will help you perform that task.

This is a book about how to stay healthy, how to enjoy your life, and how to live that life to the fullest. It is also a book about how not to get sick and where to go for help if you do. Smart people consult experts when they don't know the answers. Although you can expect to learn a great deal about prevention and setting priorities, you simply don't have the time to become a health expert yourself. Doctors and researchers have spent years studying the questions and have many of the answers. Don't shy away from the medical establishment if you are sick and you need help.

This doesn't mean that you must be a passive consumer. A funny thing used to happen to women when they went to doctors, who were almost always male. Women became passive in the face of male authority, forgot the questions they intended to ask, and put up with a lot of condescending behavior. Happily, times have changed. Women are better consumers; in general, they won't stand for condescending behavior. Doctors pretty much know this and have changed their bedside manners accordingly.

Regardless of how good your doctor seems, however, you should be sure to get a second and even a third opinion if your illness is serious and if you are unclear about the best kind of treatment.

As journalists and the co-authors of this book, we are working women like you. Between us we have more than 40 years of experience in the workplace and a fundamental interest in staying healthy. Like many women of our generation—that generation of women responsible for the working woman boom—we are more health conscious than we used to be, somewhat better health consumers than in years past, and are still struggling against the impediments of time, family responsibilities, and deadlines to take care of ourselves. We do this not only so we can enjoy our daily lives, but also as a kind of insurance policy against the future. The health matters that concern us, we have discovered in our research, are the same health matters that concern most of the working women of our generation. It has been our task to report the latest findings on these concerns and to convey them to you.

As journalists, we are not experts; we are merely information-gatherers and information-conveyers. In order to present you with as complete and detailed a book as possible about the broad health picture of working women, we went to doctors, researchers, hospitals, clinics, medical associations, other health books, medical journals, magazine articles, and working women. We put all the information gathered from these sources together and organized it in a way we feel is relevant to you. It is our hope that this focus will contribute to a better quality of life for working women.

STRESS: THE WORKING WOMAN'S NEMESIS

Alison awoke for the second time that morning at 6:30. Incredibly, she was already late. She had suffered badly from insomnia the night before and was in a deep sleep when the alarm went off at 6. Bounding from the bed, she raced to the bathroom, where she plugged in her electric curlers and hopped into the shower. Katya, her 3-year-old daughter, and her husband Sam were still asleep. They would wake after she had gone, when Sam would get Katya ready for the day care center.

Alison and her family lived 30 miles north of Manhattan in a suburban high-ranch house. Each morning Alison would leave before Sam, a freelance photographer who had an office in the city, and would arrive home before him, too, in time to pick up Katya from the day care center at 6 p.m. Because of heavy construction on the highway leading into the city from their suburb, Alison had to allow more than an hour to get to work.

Alison had forgotten to pick out her clothes the night before, and found herself growing more agitated as she riffled through her closet, acutely conscious of the minutes ticking away. There really wasn't time to apply her make-up properly, Alison thought to herself, but she felt she had to try because today she would chair her first big meeting since being promoted. A banker at a large international institution in the city, Alison knew that her boss would be watching her closely to see how she handled herself. This was not a day to be late.

As she sat stalled in traffic on the George Washington Bridge, Alison's tension became nearly unbearable. In her hurry, she had forgotten the

bag of clothes to go to the cleaners, and she wasn't sure there was enough milk for her family's breakfast. After she picked up Katya at 6, she would have to make a trip to the supermarket for food for supper. She dreaded the long lines at the supper hour, and the fact that Katya tended not to behave well during these shopping trips. Most of all, Alison hated wasting precious hours with Katya performing a time-consuming chore which neither of them enjoyed.

Having skipped breakfast because she was late, Alison drank two cups of black coffee at her desk to get her going, and set out to prepare for her big meeting. Just before 11, however, her boss sent around a memo, announcing that "something had come up" and that he was postponing the meeting from 1 p.m. until 4. The news made Alison panic. In order to get to the day care center by 6, when it closed, Alison knew she would have to leave the office at 4:30. Ordinarily this was not a problem, since she usually got to work by 8:30, but today she would have to leave right in the middle of the meeting—an unthinkable catastrophe. All past efforts to do her job properly and to acquit herself well as a working mother would be lost in that one moment when she announced that she had to leave to go pick up her child. Her boss, she felt, would be very irritated, if not furious.

Frantically, she tried to reach Sam, who was out on assignment that day and could not be contacted. Alison's assistant announced that several important facts needed for the meeting would not be available until tomorrow. The copy machine broke, and her secretary confessed that she had finished copying only half the report for the afternoon meeting. Alison's head began to throb. She took three headache tablets, hoping the medicine would do the job. She skipped lunch, munching on a stale Danish that her secretary had bought but had not wanted. Alison's stomach hurt, and she discovered she had diarrhea. Nerves, she told herself.

Ten minutes before the meeting, Alison experienced the typical bout of shortness of breath that seemed to her to be the ubiquitous companion to any public-speaking task. Her stomach was sour and sore, and she wished that she'd had a proper lunch. The anxiety of the meeting palled, however, beside the anxiety of having to announce that she was leaving in the middle of it. As 4:30 drew near, the questions were coming fast and furiously, and Alison knew she could not walk out. Unobtrusively, she positioned her wrist in such a manner that she could keep her eye on her watch. By 4:45, she told herself, she would have to bolt. But when 4:45 came, she was in the middle of defending a plan she had spent weeks working on. She could not allow all her efforts to go for nought. Finally, at 5, during a general discussion, Alison announced that she had to leave. Briskly, she asked her assistant to take over, and left the room, but not before she caught the annoyed expression on her boss's face.

She ran full speed from the building to the subway which would take her to the lot where her car was parked. In her black high heels, her coat flying behind her, she sprinted past the turnstyle and down a long flight of steps to her platform. A policeman, thinking she was either in trouble or a fleeing criminal, gave chase, calling out to her to stop. She waved him off and kept running, seeing her subway now, and not wanting to miss it, not wanting yet another delay in getting to the day care center. But the policeman was faster than she was in her high heels, and soon caught up to her.

"I'm not a criminal," she protested miserably, watching her subway move off slowly from the platform. "I'm just a working mother!"

To the policeman's astonishment and her own chagrin, Alison began to cry.

Like many of us, Alison is the victim of stress. From the moment she woke up until well after her daughter was fed and in her pajamas for the night, the overriding factor in Alison's life was stress—the stress of being late, of being thwarted in traffic, of forgetting things, of not having plans go according to schedule, of machines breaking down, of not being able to get help, of feeling ill, of having to make a public presentation, of being late to pick up her daughter, and of having to look forward only to more chores. To be sure, this was a particularly stressful day, due to the presentation Alison had to make, but much of the stress surrounding her life occurred daily. And although Alison had a 3-year-old daughter who added to the strain, her situation is not all that uncommon. More than 45 percent of the female workers in this country are mothers and that figure is expected to increase substantially over the next decade.

Stress is not confined to working mothers alone, of course. Like their male counterparts, working women of all ages—whether single, married, childless or mothers—report that they suffer from symptoms caused by stress. According to a recent survey conducted by *Working Woman* magazine and others, which sampled 40,000 women across the country—making it the largest study of women and stress ever conducted—95 percent said that their jobs were stressful. Sixty-two percent said their jobs were somewhat stressful, while 33 percent rated their jobs as "very stressful." The women also reported a variety of stress-related health ailments: eyestrain and sore eyes; insomnia; muscle strain or pain in the neck, back, arms, and shoulders; severe fatigue at day's end; stomach pains or digestive problems; tension, nausea, tightness, or pressure in the chest; periods of irritability or anger; depression; loss of time from work; and medical problems such as high blood pressure, gastritis, heart disease, ulcers, and colitis.

The stress on many of us takes its toll. Alison suffered from insomnia, headaches, shortness of breath, and digestive problems—four com-

mon symptoms of stress. What most of us don't see, however, is that stress reactions are responsible for a number of other seemingly unconnected symptoms and ailments: periodic outbreaks of hives or herpes, colds, lower back pain, exceptionally painful menstrual cramps, allergies, and flare-ups of psoriasis and asthma. Our entire physical systems may be in thrall to our stressful lives. Cardiovascular systems suffer; muscles become painfully tense; immune systems break down. Stress has been implicated as a risk factor in heart disease and hypertension, and some researchers believe it is also a factor in the development of cancer. Subjecting yourself to severe stress over a prolonged period of time is like taking a beautifully-made and finely-tuned Porsche and pounding it over a series of axle-snapping potholes—right into an automobile graveyard. Or, as Henry David Thoreau once wrote: "The cost of a thing is the amount of life required to be exchanged for it, immediately or in the long run."

By its simplest definition, stress is nothing more than the general wear and tear of life. It is the response an individual has to an event or a thought, which is called the *stressor*. As many of us know all too well, a traffic jam can be, at times, a *stressor*. The way in which this stressor is perceived by the individual is called *stress*.

Stress is not necessarily a bad thing. Without it, you could argue, life would be unbearably dull and drab which in itself, over a long period of time, might become stressful enough to cause health problems. ("Complete freedom from stress is death," wrote Dr. Hans Selye, the author of the definitive work on stress, *The Stress of Life*). Consider the example of the meeting Alison was asked to chair. For some of us, such an opportunity might be the highlight of the month, an event anticipated with pride and excitement. We might look forward to standing before the boss and our peers and putting forth a plan which we know is good and will be well received. Or we might thrive on the anticipation of being the center of attention, of being drawn into a feisty debate, or of meeting a new challenge. Such positive stress, called *eustress*, is the spice of life that makes living and working worthwhile. *It is not the stressor per se that causes the symptoms in a person—it is how that person reacts to the stressor.*

Stress is literally in the eye of the beholder. If you perceive a situation to be threatening, you will have to adapt to the threatening circumstances *via* a stress reaction. This stress reaction is caused by how your mind and body perceive an event—whether consciously or unconsciously—not by the event itself. And this is encouraging news. For perceptions are something over which we sometimes have control. By changing the way in which we perceive certain events, we may be able to reduce stress on the body, and in so doing live healthier and longer lives.

In the fast-paced, hurry-up society in which we live, everyone is a victim of a high-stress life, but we, as working women seem especially

vulnerable. For not only are many of us juggling the triple roles of wife, mother, and career woman (roles that men have traditionally not had to juggle; they had wives to facilitate the domestic side of life), we also have had to prove ourselves in the workplace. Striving to be better than our male counterparts in similar-level jobs, yet statistically receiving only 60 cents for every dollar men receive for equivalent work (and occasionally having to submit to sexual harassment and sexual stereotyping) we are beginning to recognize in ourselves the symptoms of stress.

Ironically, we have few outlets when it comes to relieving ourselves of this stress. For not only do we have too little time (as we struggle to complete all of our work tasks and domestic chores) to exercise, practice relaxation techniques, eat better, and otherwise take stock of our health, we also have been forced into the uncomfortable position where we can no longer employ traditional female modes of relief from tension, nor are we much appreciated if we try traditional male modes. Women in the business world may not cry, may not give vent to anger, and may not appear to be anything but extremely rational for fear of being condescendingly labeled “typical.” This is especially ironic when you consider all those male bosses with reputations for being tyrants, dressing-down underlings, ranting and raving when something goes wrong, and commencing with cocktails at lunch. More important, too few women—and far too few of our male colleagues—have learned to be comfortable with women being more assertive in the workplace. Thus the working woman is often caught in a bind: damned if she appears to be too feminine and damned if she doesn’t. Not only does this double standard allow no relief from stress, it can be, in some cases, a stressor itself.

The picture is by no means entirely bleak, however. Research has proven that we can reduce our own stress overloads, change our perceptions about stressors, and literally overhaul our bodies. If you’re genetically predisposed to diabetes, there’s not a whole lot you can do about it. But if you suffer from stomach aches because of stress, there *is* something you can do. By changing your perceptions of stressors, you can alter the way they affect your health. You can reduce the toll of daily life on your body, feel better, prevent serious illness, and perhaps live longer.

Good health is not a mystery.

WHAT EXACTLY IS STRESS?

The way in which we perceive a stressor may result in stress or in wear and tear on the body. More specifically, stress stimulates a biological reaction which researchers and physicians call the “flight-or-fight” response.

Under truly threatening conditions, this flight-or-fight response is desirable. If someone is threatening your life or the life of someone you love

(or even in less dramatic instances, your values or way of life), the flight-or-fight response will help you meet the challenge at hand. We are all familiar with the way our bodies react when we think we hear a robber in the house, for example. But if the stressor is merely a “paper tiger,” like a traffic jam, the body still creates a full-fledged stress response although none is needed. The generation of such responses day in and day out leads to excessive wear and tear on the body. A highly stressful life (or, to be more accurate, a life that is *perceived* as being highly stressful) will put the body into a state of permanent flight-or-fight readiness that can result in ceaseless tension, poor health, and perhaps even an early death.

How does that happen? The flight-or-fight challenge produces in your body a hormonal state of arousal. This chemical reaction pervades the nervous system, heart, muscles, and other organs, gearing them up for action. Faced with a traffic jam or the prospect of a public-speaking event for which you are not prepared, this reaction translates into rapid heartbeat, high blood pressure, digestive problems, and perhaps insomnia and irritability. Such physical disturbances are clearly worth the trade-off if you are fleeing from a potential life-threatening enemy (particularly if the situation is temporary and the body has a chance to restore itself), but is a traffic jam worth such a physical upheaval? And for how long do you really want to keep your body in such a state of arousal?

Dr. Selye defined the stress response as a mobilization of the body's defenses. He referred specifically to “the general adaptation syndrome,” which consists of three states: alarm, resistance, and exhaustion. During the alarm reaction, biological systems gear up into a form of intense readiness. During resistance, the body's resources are called upon to enable the individual to resist or adapt to the stressor. Exhaustion suggests a period of depleted resources after such a “battle.” During prolonged stress, however, the body reverts to the alarm state, starting the process all over again, resulting in extreme wear and tear.

When you encounter a highly stressful situation—whether on the job, at home or in a traffic jam—a number of quick changes may take place in your body. According to Philip Goldberg, author of *Executive Health* (McGraw-Hill), the anatomy of an individual under stress looks something like this:

Stored sugar and fats pour into the bloodstream to provide fuel for quick energy; the breath rate shoots up, providing more oxygen; red blood cells flood the bloodstream, carrying more oxygen to the muscles of the limbs and brain; the heart speeds up and blood-pressure soars, insuring sufficient blood supply to needed areas; blood-clotting mechanisms are activated to protect against injury; muscles tense in preparation for strenuous action; digestion ceases so that blood may be diverted to muscles and brain; perspiration and saliva increase, triggered by the pituitary gland; the endocrine system steps up hormone production; bowel and bladder muscles loosen; adrenalin pours into the system,

as do the hormones epinephrin and norepinephrin; the pupils dilate, allowing more light to enter; and all senses are heightened.

Given this extensive list of physical phenomena that accompany the flight-or-fight response, it is easy to see how certain symptoms of stress develop. Alison suffered from shortness of breath (the breath rate shoots up), headaches (muscles tense in preparation for action), stomach upset (digestion ceases so that blood is diverted to muscles and brain), and insomnia (the body is in a state of arousal with all senses heightened).

Being stressed over a long period of time depletes the body's resources and puts excessive strain on the muscles and on the nervous, digestive, cardiovascular, and immune systems. Prolonged stress can result in disease. In fact, so pervasive are the effects of prolonged stress on the body, that it may be one of our most important health concerns.

What Causes Stress?

It is difficult to imagine living in the United States at this time and remaining immune to stress. The fast-paced, high-technology mode of modern life; the breakdown of the nuclear family; the soaring divorce rate; the emphasis on productivity, getting ahead, and consumerism; the tendency in our culture to value people for how successful they are and for how much money they make; the social factors of overcrowding, noise, and pollution; rapid-fire social change; and the worsening international political scene which impinges on our thoughts daily *via* the news all contribute to feelings of unease, unrest, and concern, which are, in turn, potential stressors. While numerous aspects of our lifestyles are enhancing and restorative, few would deny the destructive elements in many of the social stresses that surround us today. These social stresses provide a backdrop against which we then add the common everyday stresses of our personal lives.

Consider the stress of noise—the bane of many urban dwellers. Studies show that when decibel levels increase above 50, people become irritated and annoyed and blood pressure is elevated. Clearly, in our urban communities, the threshold is well above annoyance, and even into the pain levels, especially when you consider that something as innocuous as a blender is 93 decibels, and a vacuum cleaner, 81. What about that jack hammer outside your office window? Or the steady alarm of police sirens?

Of more importance to us than noise levels, however, may be the shock of *change*. Rapid change or a large number of life changes in a short period of time, can produce severe stress and even physical and emotional breakdown. The stress of rapid change appears to be especially applicable to working women. Many of us, whose own mothers worked inside and not