Peer Support Team Newsletter

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Peer Support Teams are available 24 hours a day, 7 days a week



Serve – Protect – Support – Surpass

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Decision Making: Selecting from Imperfect Options

Most of us find it difficult to decide some things some of the time. This is normal and part of everyday life. However, some of us find it difficult to decide most things most of the time. For persons like this, every decision is a difficult challenge. Difficulty in making decisions is frequently correlated with anxiety - the greater the anxiety, the more difficult the decision making. As journalist Daniel Smith, a long-time sufferer of elevated anxiety put it, "(anxiety) is a petty monster able to work such humdrum tricks as paralyzing you over salad, convincing you that a choice between blue cheese and vinaigrette is as dire as that between life and death."

Even in cases where elevated anxiety is not an issue, some people have extraordinary difficulty making decisions. Reasons for this include: (1) the experience of *some* level of anxiety, (2) a desire to avoid responsibility for decision consequences, (3) some or all other options may be lost once a decision is made, and (4) the competing attractiveness of available options. The last of these has a flipside. The attractiveness of available options is frequently offset by some real or imagined undesirable component. For example, the attractiveness of an evening out with friends may be accompanied by an undesirable monetary expense. Most attractive options are like this. They come with the good and the not so good. This makes most attractive options imperfect, leaving us to *select from imperfect options*. Imperfect options, likely combined with other aforementioned factors, can make choosing from available options difficult, and for some persons, nearly impossible. This can result, either temporarily or lifetime, in being locked in indecision and the status quo.

The right decision: searching for the "right decision" is often frustrating and sometimes stifling. This is because in most cases, there is no one right decision. There are only decisions that lead to various outcomes; and the outcomes may include undesirable and unanticipated consequences.

In major life decisions, no matter what is decided, it is common to question the decision at some future time. Self-questioning a major decision does not always happen, but it should not be a surprise if it does. For example, a person who spends an entire career in an unsatisfying job, might, upon retirement, question the decision to remain in the job for so many years. Correspondingly, people that quit a job early in a career might wonder what life would have been like had they decided to stay. The same is true for marriages. Some persons that have stayed in unhappy or marginally satisfying marriages live with the idea that "I should have left years ago" while many divorced persons wonder if "maybe I should have tried harder to make my marriage work." Interestingly, the degree of self-questioning seems to be negatively correlated with the perceived desirability of the results of the decision; the more desirable the perceived outcome, the less degree of self-questioning. It is normal to wonder about the possible outcomes of the roads not taken. But be careful, such speculation frequently takes on a hue of fantasy - it is often imagined that the road not taken would have been much better than it likely would have been if actually chosen.

Fortunately, some decisions that produce undesired outcomes can be re-decided. In these cases, we get another opportunity; we can decide something different. Unfortunately, some decisions cannot be re-decided and we are compelled to deal with their consequences. As significant as our decisions are, we are commonly affected by the decisions of others; so much so that they can put our lives on an entirely different course (for example, an unwanted relationship break up). In any event, one thing is certain: making decisions, dealing with their outcomes, and managing the decisions of others is an unavoidable part of life. As the French say, *c'est la vie*. Best wishes for a happy and safe new year...JAD

Alcohol consumption: Drinking, Heavy Drinking, and Binge Drinking

Research on alcohol suggests a sobering conclusion: Drinking alcohol in any amount carries a health risk. While the risk is low for moderate intake, the risk goes up as the amount you drink goes up.

The definition of heavy drinking is based on a person's sex. For women, more than three drinks on any day or more than seven drinks a week is considered heavy drinking. For men, heavy drinking means more than four drinks on any day or more than 14 drinks a week.

Binge drinking is behavior that raises blood alcohol levels to 0.08%. That usually means four or more drinks within two hours for women and five or more drinks within two hours for men.

Heavy drinking has been linked to intentional injuries, such as suicide, as well as accidental injury and death. During pregnancy, drinking may cause the unborn baby to have brain damage and other problems. Heavy drinking also may result in alcohol withdrawal symptoms.

Examples of one drink include:

- 12 fluid ounces (355 milliliters) of regular beer
- 5 fluid ounces (148 milliliters) of wine
- 1.5 fluid ounces (44 milliliters) of hard liquor or distilled spirits

The bottom line is that alcohol is potentially addictive, can cause intoxication, and contributes to health problems and preventable deaths. If you already drink at low levels and continue to drink, risks for these issues appear to be low. But the risk is not zero. For example, any amount of drinking increases the risk of breast cancer and colorectal cancer. As consumption goes up, the risk goes up for these cancers. It is a tiny, but real, increased risk. Drinking also adds calories that can contribute to weight gain. And drinking raises the risk of problems in the digestive system.

In the past, moderate drinking was thought to be linked with a lower risk of dying from heart disease and possibly diabetes. After more analysis of the research, that doesn't seem to be the case. In general, a healthy diet and physical activity have much greater health benefits than alcohol and have been more extensively studied. (www.mayoclinic.org)

Chronological and Biological Age

Age is just a number, the old saying goes. Scientists studying human longevity are now giving credence to that common refrain. Chronological age does not accurately represent the age at which your body is functioning, known as your "biological age." Yale University Professor Morgan Levine has developed a simple method for determining biological age, using your chronological age and nine biomarkers from a blood test.

Though your chronological age keeps ticking onward, lifestyle changes can raise or lower your biological age. "Most people's biological age will be within plus or minus five years of their chronological age, but you can have outliers of up to 10 or more years," Levine said.

Thankfully, unlike chronological age, biological age doesn't irrevocably tick up. "We don't yet know exactly how to modify it to the greatest extent, but the clock can be made to tick slower, or even possibly go backwards, in response to our behaviors."

Chances are you probably already know how to impact your biological age: abstain from smoking, drink in moderation, exercise regularly, eat lots of fruits and vegetables, make sleep a priority, and avoid excess stress. (From: bigthink.com)

On the Science Scene

The Planets of Our Solar System

The planets in order of size - smallest to largest: Mercury, Mars, Venus, Earth, Neptune, Uranus, Saturn, Jupiter.

Average planet distance from Sun in Astronomical Units (AU) (AU = distance of earth from Sun) / light travel time from Sun to each planet / gravity of each planet and the moon compared to gravity of Earth:

Mercury- 0.38 / 3.2 minutes Venus- 0.72 / 6.1 minutes Earth- 1.00 / 8.3 minutes Mars- 1.52 / 12.6 minutes Jupiter- 5.20 / 43.2 minutes Saturn- 9.58 / 1.4 hours Uranus- 19.14 / 2.7 hours Neptune- 30.20 / 4.1 hours Earth's moon gravity 38% of Earth gravity 91% gravity 100% gravity 38% gravity 253% gravity 107% gravity 89% gravity 114% gravity 16% (phys.org)

New Drug for Schizophrenia

Cobenfy (xanomeline & trospium chloride) received FDA approval in late 2024. Cobenfy is an oral medication for adults diagnosed with schiziphrenia. It works differently than the traditional antipsychotic medications. It offers new hope for persons that have not respnded well to previous schizophrenia drug treatment or have experienced significant undesirable side effects from the use of older medications.