

## **Kinder, Gentler Sex?**

Susan Pinker  
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Dear Susan,

A colleague on our administrative team just suffered a mild heart attack. While in hospital, he wants to remain involved in decision-making and to resolve problems within his domain. We would gladly protect him from workplace issues but he insists that he is more comfortable being engaged rather than removed from what's going on. Opinions at work are divided as to whether staying in touch with the office is stressful or therapeutic under these circumstances. What do you think?

Waiting In the Corridor

Dear Waiting:

It's come to this, has it? Since Greco-Roman times heart attacks have been treated with essence of foxglove, a milky diet, bloodletting, leeches, poking holes in the skin to drain out evil waters, and until a generation ago, periods of bed rest so complete that people lay in dark rooms for years. Now we think incessant work will do the trick. This makes sense economically but it sure doesn't make much psychological or medical sense, given how intricately the heart and brain are connected. Does someone hooked up to intravenous lines and monitors really need to know whose departmental budget is outrageous and who just quit before the client's big deadline? This knowledge could make his heart skip a beat, or provoke an arrhythmia, as the experts would say. And that's just what they're trying to prevent during already short hospital stays.

They used to just resuscitate patients and hope for the best, but now medical professionals actually try to prevent future heart attacks, efforts that have reduced by half the chance of dying in the days right after one (your colleague's chances of dying within the month are about 12.6 percent, by the way). They do this by keeping those coronary arteries open by whatever means necessary – mechanical, pharmacological and psychological, and for

most people they have about a week to work on the project. The average length of a hospital stay after a cardiac event is seven to eight days, according to the Canadian Institute of Health Research. “The most one can say is that if the person is still hospitalized there is a degree of instability. Psychological stresses can trigger cardiac events in an unstable patient so we try to discourage that,” said Dr. Stanley Nattel, a cardiologist at the Montreal Heart Institute and a professor of medicine at the University of Montreal, when asked about in-patients taking work-related calls. From his almost inaudible sigh it was clearly not the first time he’d been asked that question.

They may have been in the vanguard by 3000 years but the Greeks got it vaguely right. They thought that vital “spirits,” or circulatory fluids originated in the brain and that the heart just heated them and moved them around. If only your sick colleague gave his brain that much credit, he’d give it a rest.

Dear Susan:

I have a responsible position and people say I am quite good at it but I have a problem with procrastination. There are little jobs that I hate so I let them build up until I can’t see the top of my desk or filing cabinets anymore. This is all small stuff but it accumulates and sometimes the results are embarrassing.

I’ll Spare You the Details

Dear Details:

Despite its negative connotation procrastination comes in good and bad types, like cholesterol. If you never put off until tomorrow what you could do today, most major creative projects would bite the dust. “Flow,” that state of deep absorption in a task that alters the perception of time and gives us a sense of control and intense pleasure in work, would never happen if we allowed every obligation to intrude. Flow activities have rules, clear goals, the possibility of mastery and immediate feedback upon completion, according to Mihaly Csikszentmihalyi, the University of Chicago psychologist who coined the term after testing it in athletes, surgeons, composers and yes, even farmers who love their work.

I’ll bet the little jobs you avoid don’t have those qualities. Purposely putting them off to pursue “flow” activities makes you an active

procrastinator, you'll be pleased to know. Putting them off because you can't make a decision or feel powerless to act is passive procrastination -- obviously the bad kind.

In either case, the solution is to decrease your shame by confronting the dreaded minutiae head-on, at a time that you set aside for that purpose (not letting "flow" activities to distract you). This seems sensible but being an active procrastinator myself, surrounded by un-filed articles, post-it notes, index cards, invoices and boxes of unshelved books, I called the author of *Unclutter Your Life*, whom I met at a conference when I should have been confronting those piles. Katherine Gibson exudes the zen-like calm of someone who immediately puts her finger on whatever she's looking for in her office, glove compartment or closet. She suggests booking two hours once a week or 10 minutes at the end of every day when that's all you do, face the little jobs you hate. "Make an appointment with your procrastination," is how she put it. That's the first thing I'll do, just as soon as I finish this column and flip through that pile of papers and books so I can plan the next one.

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