



Lionel's

# Listening Post™

Excerpts from articles by Lionel Hartley in the  
Australian Singles Magazine in 1986  
The Parents' Page of One-Jump-Ahead  
magazine in 1987  
and other magazines of that era.

Lionel Hartley, PhD

**L**ionel's Listening Post™ was a column (authored by Sociologist, Lionel Hartley) which appeared in several publications a number of years ago. The selected questions and answers in this resource are copyright and were first published in either the Australian Singles Magazine in 1986 or the Parents' Page of One-Jump-Ahead magazine in 1987. As the questions and their answers are timeless, they have been included in this resource in the form of hand-outs. ~~The Listening Post™ counselling service still operates by eMail with the mail cleared and replied to once weekly only.~~  
~~The address is listeningpost@telstra.casymail.com.au.~~

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(Email counselling service no longer functioning as  
Dr Hartley has now retired. Enq: [admin@lrhartley.com](mailto:admin@lrhartley.com))

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Dear Listening Post,  
I am worried that my daughter  
may be addicted to something.  
What are the signs of addiction  
and will addicts who repent go  
to heaven?

Mary, Wellington NZ

Dear Mary,

When St Paul was describing the sins of his age to members of the Corinthian church, he said, "And such were some of you... but ye are justified in the name of the Lord Jesus, and by the Spirit of our God" (1 Cor 6:11). God promises us "There hath no temptation taken you, but such is common to man: but God is faithful, who will not suffer you to be tempted above that ye are able; but will with the temptation also make a way of escape, that ye may be able to bear it" (1 Cor 10:11-13). Dr Archibald Hart, in his excellent book, "Healing Life's Addictions" notes six essential characteristics of addiction:

1. Addictions provide escape from our true feelings,
2. addictions totally control the addict, transcending logic and reason,
3. addictions always involve pleasure,
4. addictions are destructive and unhealthy,
5. addictive behaviour takes priority over all other life issues, and
6. addicts deny their addiction (pp123,4).

It may also be helpful to understand addiction triggers: "anxiety, isolation, boredom, depression, crises, sense of failure, un-met sexual needs, criticism and selfish needs" (ibid p69). If you perceive addictive behaviours, I encourage you so seek professional advice.

– Lionel



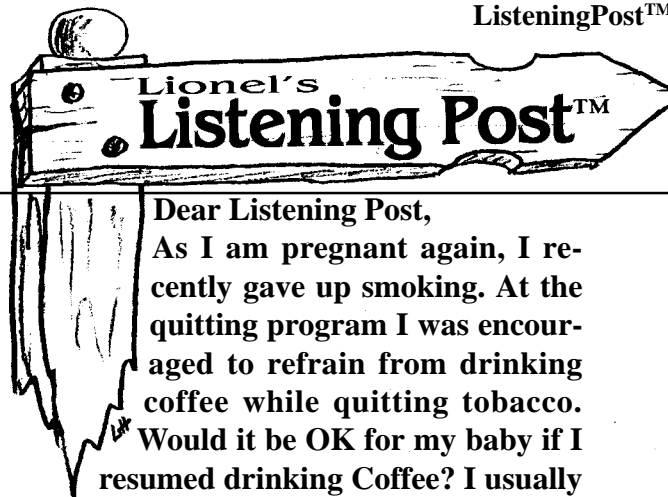
Dear Listening Post,  
I am a 22-year-old student and I have become very involved with a married man with a seven-year-old daughter. Even though we don't go "all the way", he makes me feel absolutely wonderful when I am with him.

He says his marriage is dead but he cannot leave his wife for reasons he has told me. Do you think he really cares for me (he says he does) or am I being taken for a ride?

Tanya, Melbourne.

Dear Tanya,  
I am sure that he does care for you and that you are not being taken for a ride. He seems to have been honest with you about his intentions, however, you are deluding yourself if you think that anything can ever come of this relationship or that there is any future in it. Without doubt he is hoping that you will continue to see him and that things will cruise along just as they are. It would be painful and risky to break the relationship, but you must. Too many women waste years clinging to some-one else's husband. It would be risky for him to continue as should your relationship become public he may be forced to leave his wife. Many men have eyes that wander between five and seven years into marriage, and even though this is not right, repentance and healing can usually only take place if the marriage relationship is kept intact. Make a break now, as you, he, his wife and daughter deserve better.

– Lionel.



Dear Listening Post,  
As I am pregnant again, I recently gave up smoking. At the quitting program I was encouraged to refrain from drinking coffee while quitting tobacco. Would it be OK for my baby if I resumed drinking Coffee? I usually drink about four cups a day.

Worried, NSW

Dear worried,  
The effects of 'hidden' drugs such as caffeine are much debated despite well-documented harmful effects. Your four cups of coffee could well contain as much as 700mg of caffeine, which is a potentially harmful level for the developing infant (as well as your self). A report by Dr Carol Hogue from London has revealed that 'coffee consumption during pregnancy has been found to be associated with increased risk of congenital malformations, spontaneous abortion, still birth, premature delivery, and low birth rate'. If you have resumed coffee consumption, it is not too late to revert to a non-caffeine beverage. (Caffeine is also found in tea, cola drinks, chocolate and some medications.)

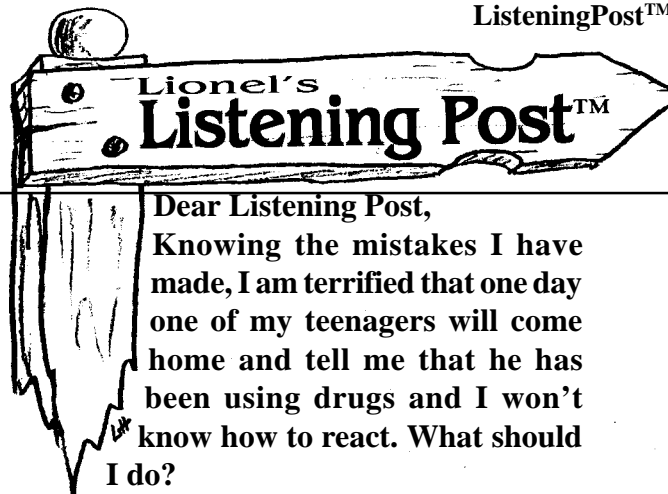
– Lionel



Dear Listening Post,  
I am a 36 year old mainline drug user. How can I know if I or my mates have the AIDS virus?  
Name withheld by request.

Most people actually carrying the virus don't look any different than anybody else, they look and feel well, but they can still spread the disease. Symptoms of AIDS may not show up for many years and some remain without symptoms even then. Acquired Immune Deficiency Syndrome (AIDS) is a serious condition that affects the body's ability to fight off infection. Diagnosis is made when a person develops some form of life-threatening illness not usually found in a person with a normal ability to fight infection. If you shoot drugs, you are in danger of catching AIDS. The best advice for protecting yourself and people that you love is to stop shooting drugs. Women who shoot drugs or who live with men who shoot drugs sometimes gives AIDS to their babies. Symptoms include fever and night sweats, weight loss, swollen lymph glands, fatigue, diarrhoea and white spots in the mouth. These symptoms also apply to other illnesses - just check with your GP. The AIDS virus is not spread through normal daily contact at work, school or home.

- Lionel.



Dear Listening Post,  
Knowing the mistakes I have made, I am terrified that one day one of my teenagers will come home and tell me that he has been using drugs and I won't know how to react. What should I do?

Parent, Qld.

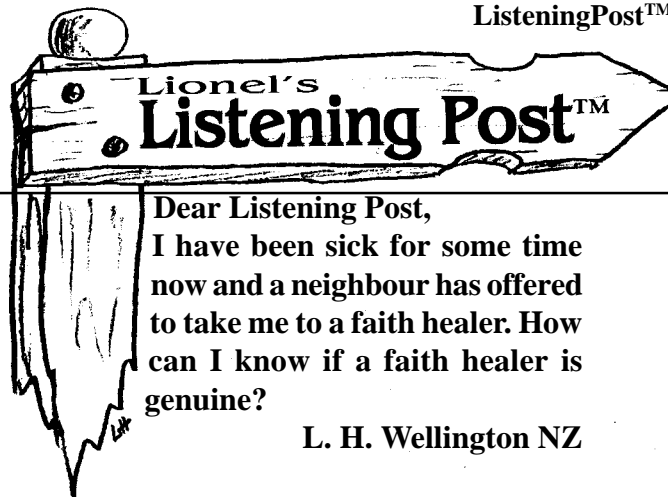
Thank-you for asking this question as this is a very common concern.

Firstly, it may be well to remember that drug experimentation may not be a serious problem, so your reaction at this crucial time is most important, so try not to panic. It is natural to be upset and to show it, but drug experimentation is often only a manifestation of a different problem, such as insecurity, feeling unloved, not fitting in at school, not knowing how to approach the opposite sex, etc.

Second, if you treat your child as an adult when you sit down and have a chat with him, you are more likely to be of help to him than if you simply lecture him on the evils of drugs. Many of us have had little experience with drugs and consequently may not really know what we are talking about.

Thirdly, if you are in difficulty or want information or confidential counselling, then assistance can be sought from the many service organisations listed in your telephone directory.

– Lionel.



Dear Listening Post,  
I have been sick for some time now and a neighbour has offered to take me to a faith healer. How can I know if a faith healer is genuine?

L. H. Wellington NZ

Dear L. H.,

Thank-you for asking this very important question. There are seven critiques for modern so-called "faith healing": 1. Selective healings - in which the applicants are screened before they are allowed into the service; 2. Chicanery - simple trickery on the part of the faith healers; 3. Undocumented, doubtful or demonstrably false claims; 4. Spontaneous remission of the disease - due to natural processes and not the power of the faith healer; 5. Remission due to medical or surgical intervention; 6. Miracles by Satan (See Revelation 16:4); and 7. Healing which comes as a result of faith in God and not in the faith healer. (James 5:15; Psalm 115:1)

– Lionel





**Dear Listening Post,  
How do we keep our children off  
drugs?**

**Parent, Qld.**

There is no instant recipe for keeping children off drugs, but the following observations may be helpful.

1. Set a good example – Parents who themselves smoke, drink alcohol, tea or coffee or habitually take aspirin for every supposed headache are not in a really good position to explain to their children the dangers of drugs.
2. Endeavour to create a happy and stable environment for your children.
3. Spend time with your children – be an approachable parent. Parents who are beyond approach rarely develop children who are beyond reproach.
4. Learn to communicate with your children – active, creative listening pays dividends. Give them opportunities for self-expression.
5. Develop in your children a sense of purpose, of destiny.
6. As Irish singer Val Doonican refrained, “Children Are People”. Children need to be valued and appreciated as people in their own right.
7. Help your children to be critically aware of the forces that may influence them such as peer pressure, advertising, etc..
8. Learn for yourself, and then impart frank, honest, age-appropriate answers to their questionings.
9. Develop in your children an appreciation of the sanctity of life and that their body is so precious that no thing should be allowed to abuse it.
10. Through your own involvement with them, help your children to develop a wide diversity of interests.

– Lionel.



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**Dear Listening Post,  
I read that experts believe that man is really build to last about 100 years and that medical advances and more healthful living habits could bring this about soon. What good is it to add years to life if the extra years will just be an additional burden? I am 70 and I am growing old.  
How can I learn to to grow old gracefully?  
J. M. NSW**

What good is it to add years to life if we do not also add life to years?

Aging, while adding life to our years, consists of molding the changes in our senses and mobility into the positive attitude we can have to life. You can keep your sense of humor in tune by surrounding yourself with pleasant and interesting people. Just act your age and you won't be afraid to laugh at yourself even when no else is around. Knowing the role that physical activity plays in our lives, remember to do something physical every day. And mental exercise is a great rejuvenator too - for example studying the Bible with friends will not only add life to your years it will bring you in touch with One who can give you life beyond these mortal years.

– Lionel.



Dear Listening Post

I am a 34 year old guy with a rather worrying problem. For many years now I have felt the need to constantly check and re-check things to make sure that they are in place. I seem to need to lock and unlock doors and windows before I leave a room or my house, to make sure they are locked.

I live alone and have constant fears about members of my family being struck down with cancer or something. I read about obsessive-compulsive disorder on a poster at the local hospital and wonder if I need to seek some mental help. I feel quite distressed by it all.

Name Withheld, NSW

Dear reader,

The behaviour you mention is indeed typical of the obsessive-compulsive personality disorder. Don't be frightened by it though, as people with this malady – those with obsessive thoughts (often of death) and compulsive behaviours (often in regard to safety) are not alone in feeling this way. This is a very common disorder of the personality, but there is help available. I suggest you speak with the staff at the hospital where you saw the poster, or with your local GP for a referral to a specialist in matters affecting the psyche. All of us, at some time have problems, not just with our physical health, but also our mental health where we need help outside of ourselves.

–Lionel

# Looking at:

# Bipolar Disorder

**B**ipolar Disorder, formerly called *Manic Depression*, describes the exaggerated mood swings from one extreme to another that characterise this illness.

People with Bipolar Disorder suffer recurrent episodes of elevated mood (mania) and depression. Episodes may range from mild to severe. The less severe form of elevated mood (high) is called "*hypomania*". Severe hypomania is a serious rare condition. "Mania" is the word now used to describe only the most severe form of this disorder.

## Symptoms of Bipolar Disorder:

### Normal moods

Everyone experiences mood swings from time to time. When these moods become extreme and lead to a failure to cope with certain aspects of life, is medical intervention necessary. Most people who have episodes of mania and depression experience normal moods in between. They are often able to live normal lives. They may be able to hold down regular jobs and manage household, business and social commitments.

### Mania

Common symptoms of mania include:

- \* An elevation of mood - the person may feel "high", happy, invincible, "on top of the world" and full of energy.
- \* A perceived reduced need for sleep
- \* Increased energy and overactivity
- \* Irritability - people in a manic or hypomanic state may get angry and irritable with any who may disagree with or dismiss their sometimes unrealistic plans or ideas.
- \* Lack of inhibitions which may be the result of \* a reduced ability to foresee the consequences of their actions
- \* Rapid speech and/or thought patterns, jumping from one subject to another
- \* Lack of insight - other people's ideas or behaviour may be perceived as irrational, reckless or inappropriate, yet they lack the insight to see their own



ideas or behaviour in this light.

- \* Grandiose ideas, plans and/or beliefs - they may believe that they are unusually gifted or talented, or may believe they are kings, film stars, emperors, prime ministers.
- \* Increase in religiosity - religious people may become more religious and/or they may believe that they are a religious dignitary

### Depression

Not all people with Bipolar Disorder suffer depression as a part of the disorder. For those who do, they usually suffer a severe form called "endogenous depression". Endogenous depression most commonly occurs without any obvious cause, but may be triggered by a stressful or unhappy event. It tends to occur mostly in mid-life and is more common in women.

Common symptoms of depression include:

- \* Loss of interest or pleasure in previously enjoyed activities
- \* Withdrawal - from friends, social activities or tasks such as bathing, shopping, laundering, etc.
- \* Overwhelming deep sadness, loss of appetite, lack of concentration, feelings of guilt or hopelessness
- \* Weight loss
- \* Attempted suicide due to guilt or hopelessness
- \* May "lose touch" with reality, have delusions of persecution or guilt, or believe they are evil or wicked

## Causes of Bipolar Disorder

It is believed that Bipolar Disorder is caused by a complex combination of genetic, stress, biochemical, and seasonal factors. In Australia, less than 1% of the population is affected, equally affecting men and women, and most common in the "twenties" age group.

**Genetics** - Due to recent studies on identical twins, close relatives, and adopted children of "Bipolar" parents, it has been strongly suggested that Bipolar Disorder is genetically transmitted, with children of "Bipolar" parents at a greater risk.

**Stress** - This may be the cause or the consequence of the disorder. If the

disorder has caused a failure in a business or marriage, the stressful event may be blamed for the disorder. Stress may also be a trigger for the emergence of symptoms of the disorder.

**Biochemical** - This is associated more with the symptoms than the disorder, as appropriate medication may rectify chemical imbalances in the brain, lessening the symptoms of mania and endogenous depression.

**Seasonal** - Although the exact reason is not known, depression is more common in the early winter and mania is more common in the spring. This correlates with mild mood swings in the general population.

## Treatment

With access to appropriate treatment, monitoring and support, most people with Bipolar Disorder can lead full, productive lives. Treatment for depression may include anti-depressant medication for episodes of depression, with immediate adjustment at the onset of a hypomanic phase. Medications must be administered under strict medical supervision and severe depression may require temporary hospitalisation.



It is often difficult to persuade a person during a mania phase to accept treatment, and if symptoms are severe, then hospitalisation may be necessary. Treatment for acute or severe attacks of mania may include anti-psychotic drugs to calm the manic excitement and lithium carbonate to stabilise the moods. Lithium may also be prescribed as a general symptom preventative, as it not only controls the moods; it also reduces the frequency and severity of attacks of both mania and depression.

Counselling is also indicated as an adjunct to medication to help those with the disorder to understand the condition and its effect on their life, and to learn strategies for coping with the consequences of the disorder and associated symptoms.

- Mr Lionel Hartley



**Dear Listening Post**

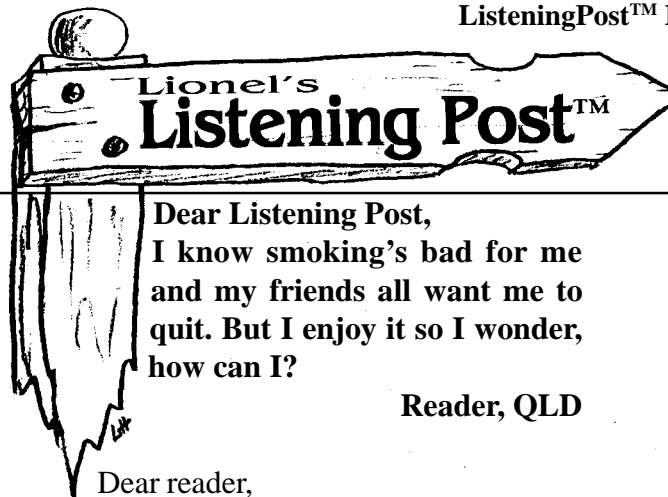
**I am 21 years old and I always seem to be left out of things. Whenever there is a party at work I am just not invited. I have tried to change my personality, but that doesn't seem to work either. I find it very hard to socialise and consequently I don't have many friends. I would really love to know what's wrong with me. It really gets me down at times. I tell myself to be happy and not to sulk, but that doesn't work. A friend told me to ask the person holding the party to invite me, but that doesn't seem right. Why am I always left out?**

**Worried, NSW**

Dear Worried,

To find out why you are generally being left out of social events, the simplest way is to look among your friends for someone you feel may be sympathetic and ask them to honestly tell you what they think you may be doing wrong. We all have times when we are unsure of how we come across to others and often some honest feedback, while it may hurt at first, can help us change our behaviour. Perhaps you could ask a friend to watch you while you are socialising so he or she could quietly tell you specific ways you could improve the impression you are making. Often quite simple things may be helpful, such as not staring at the ground or looking bored and uninteresting. Or not nervously talking too much. The way to have friends is to be a friend, so be an interesting friend and others will want befriend you. Think what you would like from a friendship and then give it away yourself.

– Lionel.



Dear Listening Post,  
I know smoking's bad for me  
and my friends all want me to  
quit. But I enjoy it so I wonder,  
how can I?

Reader, QLD

Dear reader,

The fact that you have taken the time to write to me suggests that, deep down, you want to quit. However, nobody can force you to quit. It's something you must choose for yourself. Ask yourself these questions: What kind of smoker am I? What do I get out of smoking? What does it do for me? It is important to identify what you use smoking for and what you feel that you are getting from smoking. Once a smoker understands his own smoking behaviour, he will be able to cope more successfully in selecting the best quitting approach for himself. Smoking is a form of addiction and over 80 percent of smoker who quit will experience some withdrawal symptoms. These may include headache, light-headedness, nausea, diarrhoea, and chest pains. Psychological symptoms, such as anxiety, short-term depression, the inability to concentrate and increased irritability may also appear. For this reason I suggest that you seek professional support during your quitting time, Eg Quit Now! or Quit-For-Life.

– Lionel.



Dear Listening Post,  
I have two boisterous and sometimes “trying” teenagers. What do you think is the most important thing I can do for them?

Parent, NSW

Love them! This may seem a little obvious, but not as obvious as you may imagine. Certainly it is not as obvious an answer as some teenagers would like to think, either. Research has shown that one of the main reasons given by teenagers for running away from home, attempting suicide, pre-marital unwanted pregnancy, and getting involved in drug abuse (eg. alcohol), is thinking that they are unloved. Experience has proven that in homes where a consistent deliberate effort is made to show love, young people are unlikely to take what many teenagers view as the “easy way out”.

A hug (yes, even teenagers need hugs), a smile, an encouraging word: these cost nothing yet are worth much. Around 1014 BC a wise man wrote, “Many waters cannot quench love; neither can the floods drown it” (Canticles of Solomon 8:7) Demonstrated love will ride our teenagers above the floods and trials of life more than all other memories.

– Lionel.



**Dear Listening Post**  
**Following a reply of yours in a recent Listening Post, I have given up drinking tea & coffee because of the drug caffeine. I used to drink about eight cups a day. Should I drink that amount of water instead? Is this just old fashioned advice?**

**W. J. NSW**

Dear W. J.,

Water is our body's vital fuel, a health drink from mother nature because it's calorie-free, relatively inexpensive and usually easily obtained. Yet most people only drink when they are thirsty and the beverage of choice tends to be some other drink besides water. Boosting intake of plain water makes good sense, many experts concur, because water eases digestion and regulates body temperature. Water can help us exercise longer and more efficiently (drinking water during exercise reduces cardiovascular stress and improves performance). Drinking water can ward off constipation and help keep skin healthy. Water can be especially helpful for people with a history of kidney stones because it dissolves calcium in the urine, reducing the risk of stone formation. Drinking water also helps prevent urinary tract infections, both for men and for women. If you are too busy to count how many glasses a day you drink you can calculate if your intake is sufficient because dark-coloured urine often suggests you aren't drinking enough water. The habit of drinking plenty of water may be old but it is by no means old-fashioned.

– Lionel.



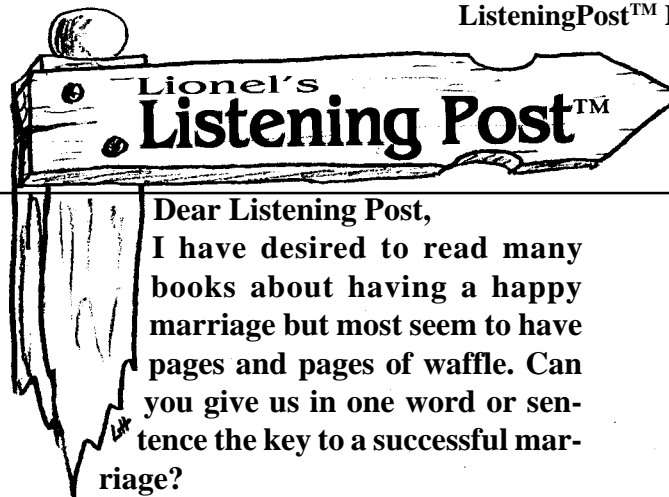


Dear Listening Post,  
I am an 18 year old New Zealander and I was going steady with my boyfriend in Australia for two years. A few days after we became engaged, he broke it off claiming that we fought too much and he didn't want to continue our relationship.

I returned to New Zealand leaving him feeling angry with us. I still love him and want to know if I should write to him.

Wendy K, Oamaru, NZ

Dear Wendy,  
When we are young, our feelings of love change as aspects which we once thought attractive become irritating. There are many young people who are prevented from opting out of an unsatisfactory relationship which is formalised by engagement because of a fear of losing face, of upsetting people or disrupting carefully made plans. Your fianc• showed good sense in acting upon his doubts when he did even though it hurt you both. Time heals the hurt in the wounds of breaking up, whereas time alone cannot heal a bad relationship. It is only natural you will miss him, but if you write, keep it on a purely friendship level, expecting nothing more, and from this experience you can learn to identify what caused your disagreements and this will help you in the future.



Dear Listening Post,  
I have desired to read many books about having a happy marriage but most seem to have pages and pages of waffle. Can you give us in one word or sentence the key to a successful marriage?

**R. S. Victoria**

Dear R. S.,  
In one word I would say, 'Communication'. That means honest open communication about functions, fellowship, family, friends, finance, friction, faith and the future.  
In a sentence I would say, 'The key to fulfillment in marriage consists of always gently speaking the truth in love, continually demonstrating affection to each other, purposefully fulfilling one another sexually and encouraging - allowing and helping each other to grow to each's full potential as the Creator designed for your marriage.'

– Lionel.



**Dear Listening Post**

**I am a 16-year-old. I have been going out with guys since I was 12. Could I be in love now at age 16? I've always been very dependent and I've never had anyone care for me as much as my boyfriend does. I know someone who met at 14 and is now happily married with a family.**

**M.J. Canberra**

Dear M. J.,

Yes, you could be 'in love' at age 16. Many young people are 'in love' at age 16. There is, however a difference between being 'in love' and being ready to love. (Which means, I guess, that being 'in love' at age 16 doesn't mean you ought to get married at 16). At 16 marriage is always a bad risk no matter how much you love somebody and no matter how much 'in love' you are. It's just too much of a responsibility for two people of 16 and every day there are teenagers in the divorce courts trying to undo teenage marriages. As marriage is a life-long commitment none should rush into. Marriage is rational decision for two mature independent people.

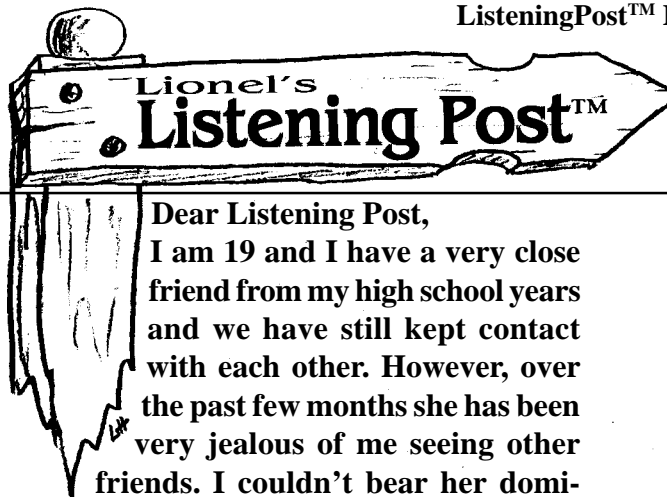
– Lionel.



Dear Listening Post,  
My son has told me that he is gay.  
How should a Christian regard  
a homosexual?  
Concerned Mum, Victoria

Dear Concerned Mum,  
Just as the Bible makes a distinction  
between the sinner and the sin, it also  
makes a distinction between the person with  
a homosexual orientation and homosexual  
behaviour, never-the-less the seriousness of  
the behaviour is not diminished (1 Cor  
6:9,10). The person with a homosexual ori-  
entation need not be eternally lost as verse  
11 explains. To the repentant person with a  
homosexual orientation, as with all of us,  
we are reassured, "There hath no temptation  
taken you, but such is common to man: but  
God is faithful, who will not suffer you to  
be tempted above that ye are able; but will  
with the temptation also make a way of es-  
cape, that ye may be able to bear it." 1 Cor  
10:13, 1 John 1:9

– Lionel.



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**Dear Listening Post,  
I am 19 and I have a very close friend from my high school years and we have still kept contact with each other. However, over the past few months she has been very jealous of me seeing other friends. I couldn't bear her dominant and possessive attitude and I haven't seen her for the last month. I have just heard that she is in a psychiatric hospital with a nervous breakdown. I am afraid to visit her because it may be my fault that she is there. What shall I do?**

**Wendy, Sydney**

Dear Wendy,  
It is very unlikely that the breakdown in your friendship had anything to do with her nervous breakdown, rather the jealousy and possessiveness may well have been manifestations of a psychological problem she was experiencing at the time. Now that she is receiving treatment, I am sure she would welcome a resumption of your friendship so do try to go and see her. She will be in need of friends at this time and maybe some day she will be grateful that you were there for her when she needed you. Why not talk to her case physician at the hospital to discuss ways you can help and the best way to approach her.

– Lionel.