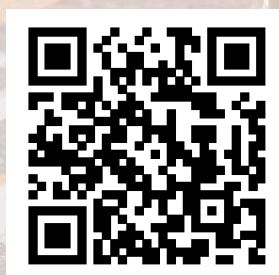


Health Newsletter

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Preface

August lingers with the heat of summer, yet the breeze already carries the call of a new school year. On the balcony, uniforms drip with water; in the corner, a backpack lies waiting to be filled with fresh textbooks, lunch boxes, and the unspoken anxieties of a child.

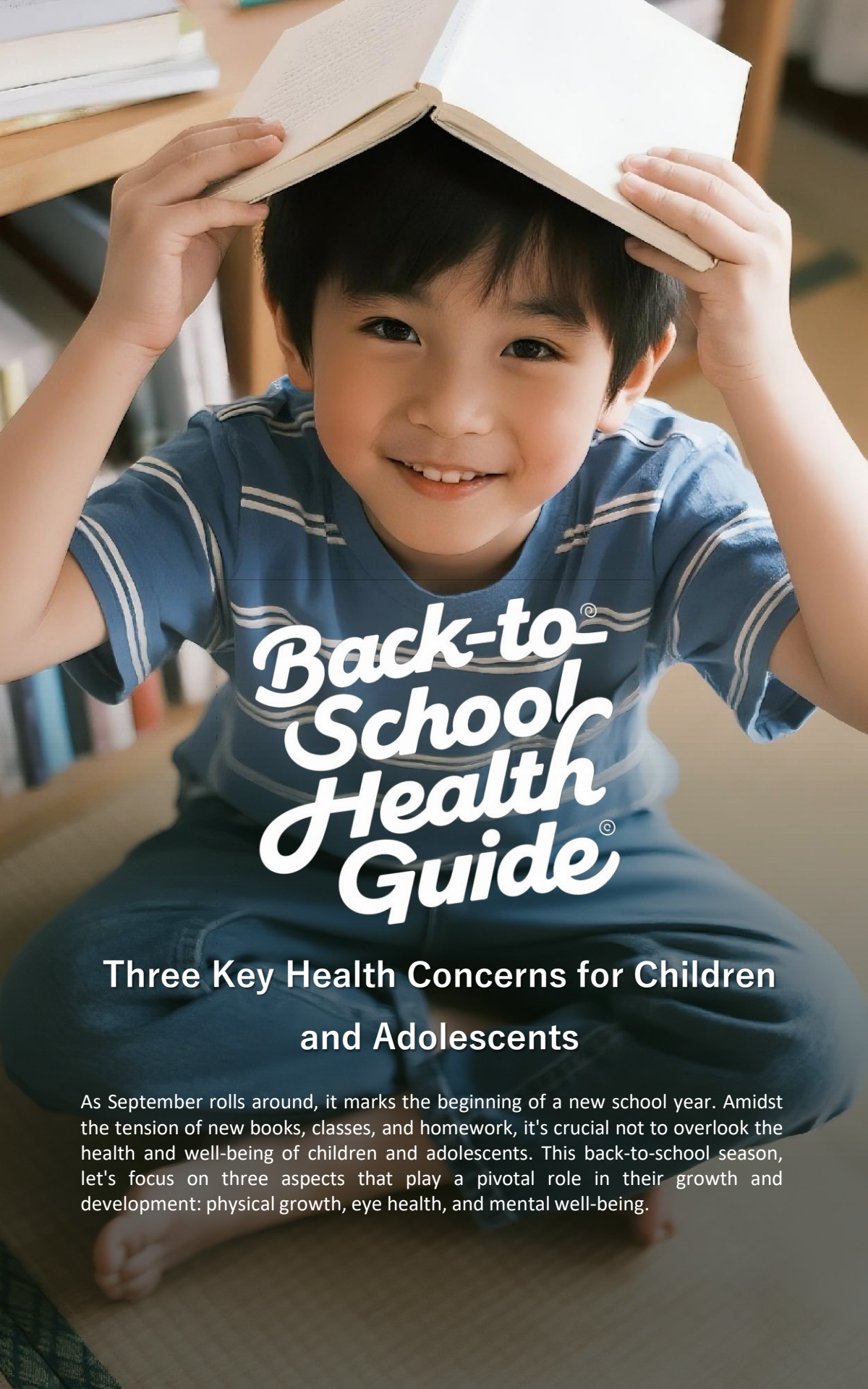
On nights like this, silence grows thick beneath the lamp. A parent watches their child fidget with an eraser, then catches their own reflection in the window—on that face is written, “*Have you finished your homework?*” but in the heart, other thoughts drift. They remember how, at some point, the sound of the door closing when the child comes home grew louder, and the time that door stayed shut grew longer.

Communication has always been clumsy. We raise the flag of love, but our words turn into measuring sticks. The child looks up at us with eyes holding unopened grievances. The phrases “*It’s for your own good*” fall to the ground like shattered glass, cutting more than they soothe. When two hearts draw closest, paradoxically, the expressions on each face are hardest to see.

On **August 22**, at the second session of the *Generali China Life Customer Service Festival Health Forum*, we invite Professor Wu Ke to share insights on parent-child communication, helping families accompany their children’s growth. If you too wish for smoother, less turbulent conversations at home, scan the QR code to follow *Generali China Life’s* video channel, and join us in safeguarding the path of every child’s growth.

Autumn is near. Children grow like sorghum in the fields—you can almost hear them stretching in the night. Don’t rush to trim every wandering branch. Instead, bend down, and look at the roots beneath the soil, firmly holding on to the earth.





Back-to-School[®] Health Guide[®]

Three Key Health Concerns for Children and Adolescents

As September rolls around, it marks the beginning of a new school year. Amidst the tension of new books, classes, and homework, it's crucial not to overlook the health and well-being of children and adolescents. This back-to-school season, let's focus on three aspects that play a pivotal role in their growth and development: physical growth, eye health, and mental well-being.

Spinal Health: Standing Tall for a Healthy Future

The spine is the body's central support structure, and maintaining its health during childhood and adolescence is essential for overall physical development.

Correct Posture is Key

Encourage children to sit and stand up straight. A proper sitting posture involves keeping the back straight, shoulders relaxed, and feet flat on the floor.

When writing or reading, the eyes should be at level with the top of the book or screen, and the desk should be at an appropriate height to prevent slouching.

Standing tall with the head held high, shoulders back, and the body's weight evenly distributed on both feet helps maintain the natural curvature of the spine.

The Right Backpack

The backpack should be no more than 10-15% of the child's body weight. Opt for backpacks with wide, padded shoulder straps and a waist belt to distribute the weight evenly across the shoulders and hips, reducing the strain on the spine.

Encourage children to organize their backpacks neatly, with heavier items closer to the back.

Posture drills:

Perform 3-minute "wall angels" daily—heels, glutes and scapulae touch the wall while raising arms at 90°. Seek professional evaluation for uneven shoulders or kyphosis.



Eye Protection

In the digital age, children and adolescents are exposed to screens more than ever before. Protecting their eyesight is crucial for their academic success and long-term eye health.

Outdoor Activities

Spending time outdoors is beneficial for eye health. Natural light helps regulate the production of a hormone in the eye that is thought to be involved in eye growth and development.

Aim for at least two hours of outdoor activities per day. Whether it's playing sports, going for a walk, or simply sitting outside and reading, outdoor time can help reduce the risk of myopia and improve overall eye health.

The 20-20-20 Rule

The 20-20-20 rule is a simple yet effective way to prevent eye strain. Every 20 minutes of screen time or close work, take a 20-second break and look at an object 20 feet (about 6 meters) away.

This helps relax the eye muscles and reduces the risk of developing myopia. Encourage children to follow this rule during study time, while watching TV, or playing video games.

Develop Good Habits

Teach children the importance of maintaining a proper distance from screens. When using a computer, the screen should be at eye level, and the distance should be about an arm's length away.

For reading books or writing, ensure there is adequate lighting, and the eyes are about 30-35 cm away from the page. Encourage children to blink frequently to keep their eyes moist, especially when focusing on digital screens for extended periods.



Mental Adaptation

The transition back to school can be challenging for some children and adolescents, leading to feelings of anxiety or stress. Recognizing and addressing these emotions is important for their mental well-being.

Physical Symptoms of Back-to-School Anxiety

Anxiety can manifest in physical ways, such as headaches, stomachaches, difficulty sleeping, or loss of appetite.

If a child complains of these symptoms without any apparent physical cause as the school year approaches, it could be a sign of back-to-school anxiety. Pay attention to their behavior, such as changes in mood, increased irritability, or reluctance to talk about school.

Effective Communication with Parents

Parents play a crucial role in helping their children adjust to the new school year. Start by having an open and honest conversation about their feelings. Listen attentively to their concerns without judgment and validate their emotions.

Schedule 15-minute “special talk time” daily—listen first, judge later; use “I notice...I feel...” statements; set small, joint goals to shrink the fear of the unknown.

Help them prepare for school by shopping for school supplies together, visiting the school in advance if possible, and creating a regular study and bedtime routine before the school year starts.



In conclusion, as children and adolescents head back to school this September, let's prioritize their health in these three key areas. By taking proactive steps to ensure spinal health, protect eyesight, and support mental well-being, we can help them thrive in the new school year and lay the foundation for a healthy future.



Key Points of Health Screening During Physical Examination Season

As the second half of the year approaches, the annual physical examination season is around the corner. For most people, regular annual physical examinations are an important way to maintain health. Health checkup can help screen and identify common basic and chronic diseases. This article will sort out the key points of health screening for different groups of people, aiming to help everyone make scientific and reasonable arrangements for physical examinations.



Physical Examination Recommendations:

Screening Items for Different Genders and Age Groups

For people aged 20-39

Young adults generally have a lower risk of chronic diseases, but basic items such as height, weight, blood pressure, blood routine, and urine routine should not be ignored.

Women aged 21-39 should pay attention to cervical cancer screening, cervical cytology examination every 3 years after 3 consecutive normal annual screenings; HPV testing every 5 years after 3 consecutive normal annual screenings.

Men in this age group can focus on basic cardiovascular indicators with annual checks.

For people aged 40-59

The risk of various diseases increases significantly with age. In addition to the basic items, it is necessary to add screening for chronic diseases such as diabetes and hypertension.

For tumor screening, both men and women should start paying attention to lung cancer (low-dose spiral CT every 2 years), gastrointestinal cancer (gastroscopy every 5 years, colonoscopy every 5-10 years, fecal occult blood test annually), and liver cancer (serum alpha-fetoprotein and liver B-ultrasound every year).

Women should also pay attention to breast cancer screening (mammography or B-ultrasound every 1-2 years), and men can consider adding prostate-related examinations (serum PSA test every 2-4 years starting at 50).






For people over 60

The elderly are high-risk groups for various diseases. On the basis of the above items, more comprehensive examinations should be carried out, such as thyroid ultrasound, bone density detection, and neurological examinations.

Tumor screening should be more frequent, and for example, colonoscopy can be performed every 5 years and low-dose spiral CT annually can improve the early detection rate of lung cancer.

A medical ultrasound machine is visible in the foreground, with its control panel and a monitor displaying a grayscale image. The machine is white and black, with various buttons and a large circular track. A probe is connected to the machine. In the background, a larger monitor displays a similar grayscale image. The setting appears to be a clinical or hospital environment.

Tumor Screening for Special Groups

For people with a family history of tumors:

They belong to a high-risk group, and the screening age should be advanced. For example, if there is a family history of colorectal cancer, colonoscopy can start at the age of 40 or 10 years earlier than the age of the youngest patient in the family with follow-up every 1-2 years for those with hereditary colorectal cancer.

For those with a family history of breast cancer, breast cancer screening should be conducted annually, and genetic testing can be considered if necessary.

For people with bad living habits:

Long-term smokers should pay special attention to lung cancer screening, and low-dose spiral CT is recommended once a year.

Heavy drinkers need to strengthen liver cancer screening, such as liver function and liver B-ultrasound every 6 months.

People who like to eat high-fat and high-salt foods should increase gastrointestinal cancer screening, gastroscopy and colonoscopy every 3-5 years.

Interpretation of Common Lesion Descriptions in Imaging

In imaging reports, descriptions of lesions such as nodules, calcifications, high-density shadows, and hypoechoic masses are often seen. Here is the interpretation and corresponding suggestions:

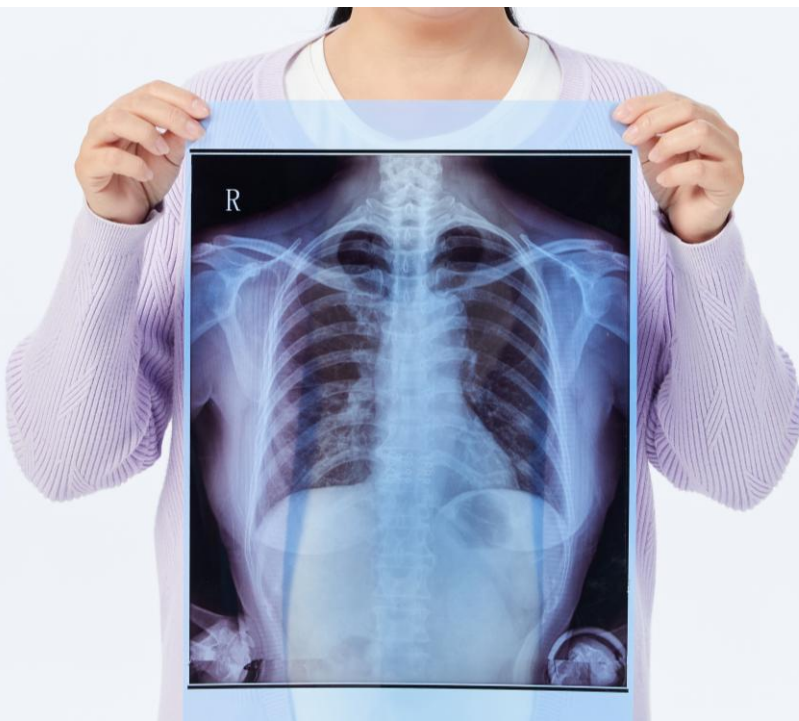
Nodules

Nodules refer to small localized masses, which can appear in organs such as the lungs, thyroid, and breasts. Most nodules are benign, but some may be malignant.

Pulmonary nodules: According to the size, those less than 6mm are generally low-risk and can be reviewed regularly; those 6-8mm need close follow-up, and further examination (such as enhanced CT) may be required; those larger than 8mm should be paid high attention to, and biopsy may be needed to confirm the nature. (Guidelines for Management of Incidental Pulmonary Nodules Detected on CT Images: From the Fleischner Society 2017)

Thyroid nodules: Most are benign. If the nodule is accompanied by calcification, unclear boundary, or abnormal blood flow, further examination (such as fine-needle aspiration biopsy) is required to rule out malignancy. (Chinese Guidelines for Thyroid Nodules and Differentiated Thyroid Cancer 2022)

Breast nodules: Pay attention to the size, shape, and boundary of the nodule. If it is hard, has an irregular shape, and poor mobility, it may be malignant, and further examination is needed. (Chinese Anti-Cancer Association (CACA) Guidelines and Standards for the Diagnosis and Treatment of Breast Cancer)



Calcifications

Calcifications are deposits of calcium salts in tissues, which are mostly sequelae of inflammation or tissue degeneration and are generally benign.

Pulmonary calcifications: Often caused by old tuberculosis or inflammation, usually do not require special treatment, but need to be distinguished from calcifications in tumors.

Thyroid calcifications: Coarse calcifications are mostly benign, while microcalcifications may be a sign of malignancy and need further evaluation.

High-Density Shadows

High-density shadows refer to areas with higher density than surrounding tissues in imaging, which may be caused by calcifications, or tumors. For example, high-density shadows in the lungs may be stones, calcifications, or pulmonary nodules; high-density shadows in the kidneys may be kidney stones. Combine clinical symptoms and other examination results for comprehensive judgment.

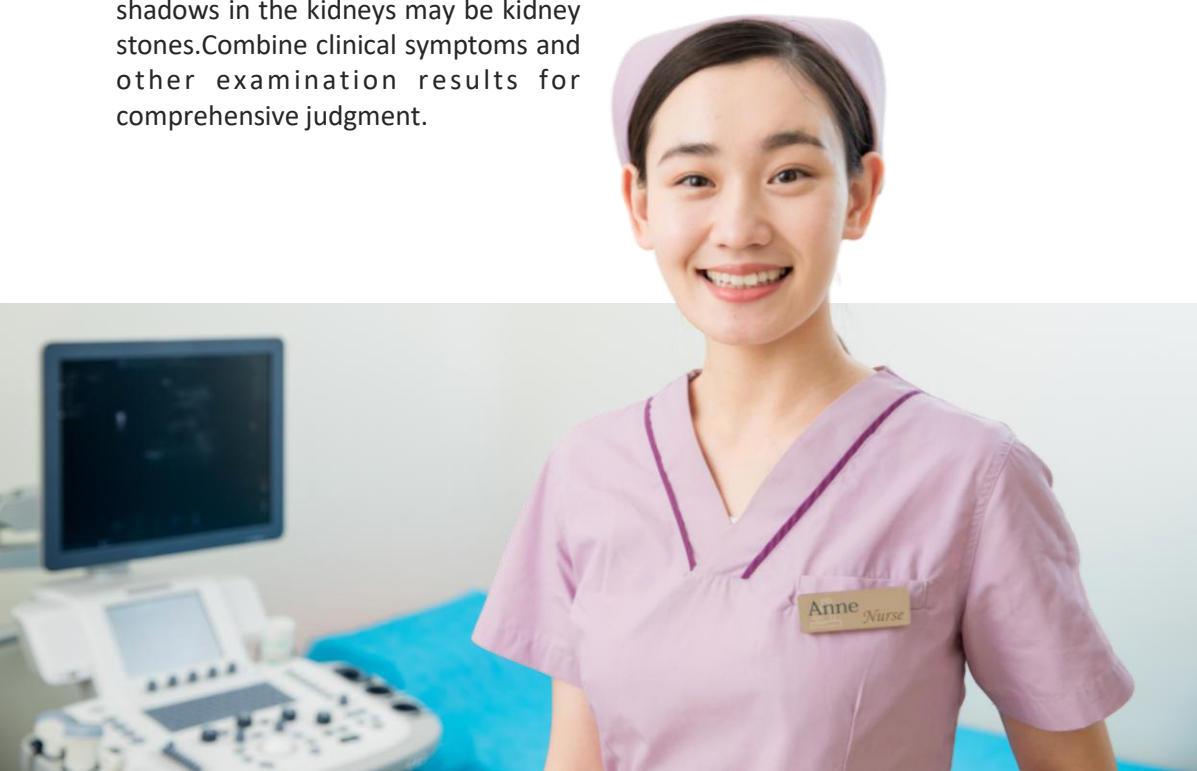
If it is a stone, follow the doctor's advice for treatment; if it is suspected of a tumor, further examination is needed.

Three steps after receiving your report

Recheck first for abnormal numbers: If blood pressure or blood sugar rises once, it needs to be remeasured on different days for confirmation.

Consult specialists for imaging abnormalities: Bring the original image report to the corresponding department to avoid repeated filming.

Establish an annual comparison file: File the reports of previous years in chronological order to observe dynamic changes.



Back-to-School Health Plan

A Comprehensive Guide to Healthy Weight Management for Adolescents

As the new school year begins, many students and parents face a common challenge—weight gained during the summer break. Recent monitoring data from the Hangzhou Center for Disease Control and Prevention revealed that 26.9% of local middle and primary school students are overweight or obese, meaning at least one in four children struggles with excess weight. Nationwide statistics echo this concern: nearly 20% of Chinese adolescents aged 6–17 are overweight or obese, and the numbers are still climbing (National Health Commission of the PRC, 2020). Even more worrying, over the past two decades, Chinese adolescents' average body weight has increased by 10–15%, while muscle strength has declined, highlighting an imbalance between body mass and physical fitness (Zong et al., 2019).



An Alarming Public Health Issue

The China Nutrition and Chronic Disease Status Report (2020) noted that more than half of Chinese adults are overweight or obese, while 11.1% of adolescents are overweight and 7.9% are obese (National Health Commission of the PRC, 2020). In Hangzhou, adolescent obesity rates have hovered at a high level of 25–27% for three consecutive years.

Research from Peking University further demonstrates that overweight and obesity rates among university students rose from 3.7% in 2000 to 14.0% in 2019. If no effective interventions are implemented, childhood obesity prevalence is projected to continue increasing through 2030, greatly expanding the population at high risk of metabolic disorders (Song et al., 2021).



Beyond Appearance: The Hidden Health Risks

Obesity in adolescents is not just a matter of appearance. Studies from Peking University revealed links between obesity and higher risks of hypertension, type 2 diabetes, and other metabolic complications (Song et al., 2021). Similarly, the Chinese CDC reported strong associations between excess weight and increased risks of cardiovascular disease, type 2 diabetes, and certain cancers (National Health Commission of the PRC, 2020).

Interestingly, a study published in the *European Journal of Pediatrics* highlighted the protective role of muscle strength. Among obese adolescents aged 7–17, each standard deviation increase in jump distance was associated with a 53% reduction in metabolic syndrome risk (Cimolin et al., 2022). Yet, data indicate that Chinese adolescents' standing long jump scores have declined significantly over the past two decades, pointing to a deterioration in muscle fitness (Zong et al., 2019).



Four Dimensions of Healthy Weight Management

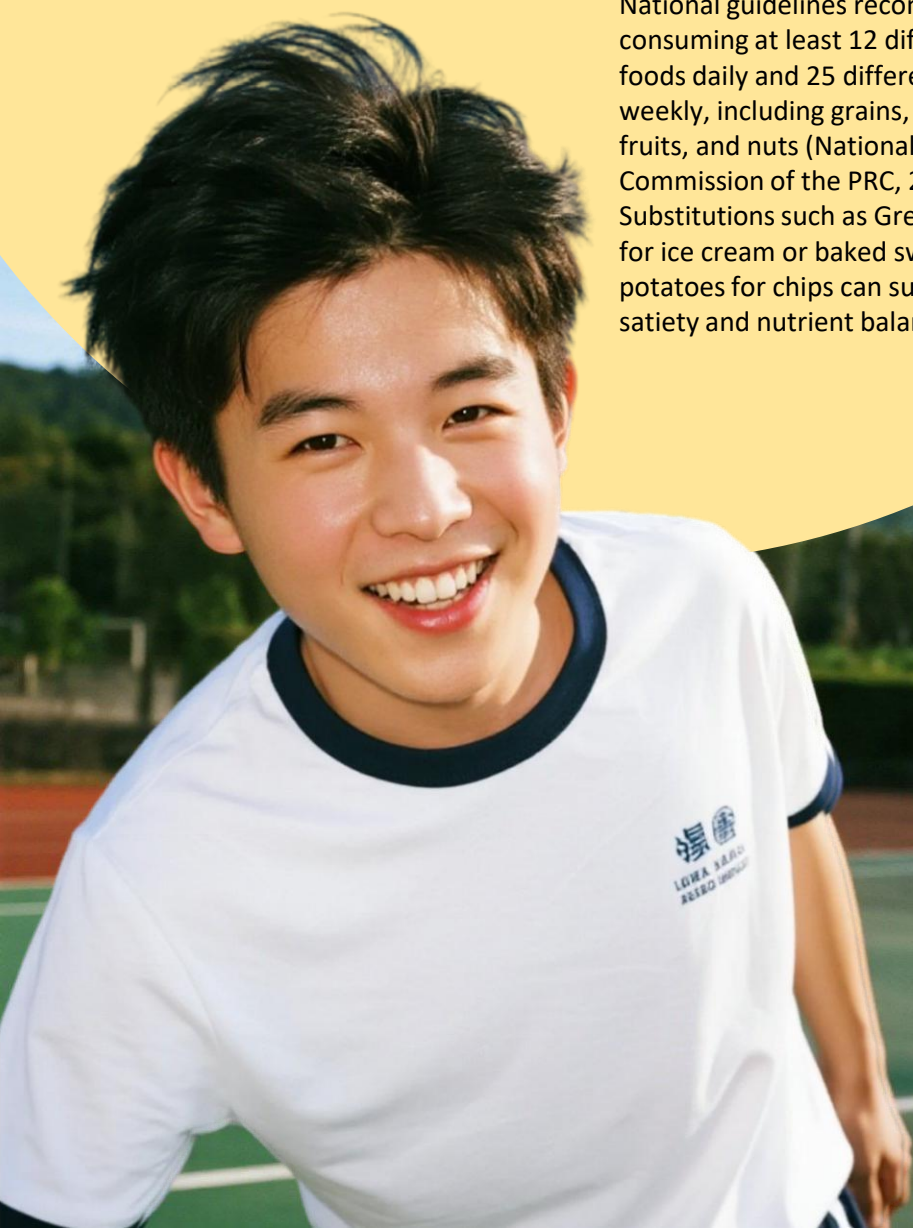
Balanced Exercise Prescription

Experts recommend adolescents engage in at least 60 minutes of moderate-intensity activity daily, such as cycling, swimming, or basketball. In addition, two sessions of light resistance training per week—such as bodyweight squats or light dumbbell exercises—can help build muscle without compromising bone development.

Enhancing lower limb strength, even with simple long jump practice, can yield significant metabolic benefits (Cimolin et al., 2022).

Smart Nutrition Choices

Rather than focusing only on calorie restriction, nutrition quality should be prioritized. Adolescents should eat three regular meals, reduce sugary drinks and snacks, and drink at least 1,500 ml of water per day. National guidelines recommend consuming at least 12 different foods daily and 25 different foods weekly, including grains, vegetables, fruits, and nuts (National Health Commission of the PRC, 2020). Substitutions such as Greek yogurt for ice cream or baked sweet potatoes for chips can support both satiety and nutrient balance.



Regular Sleep

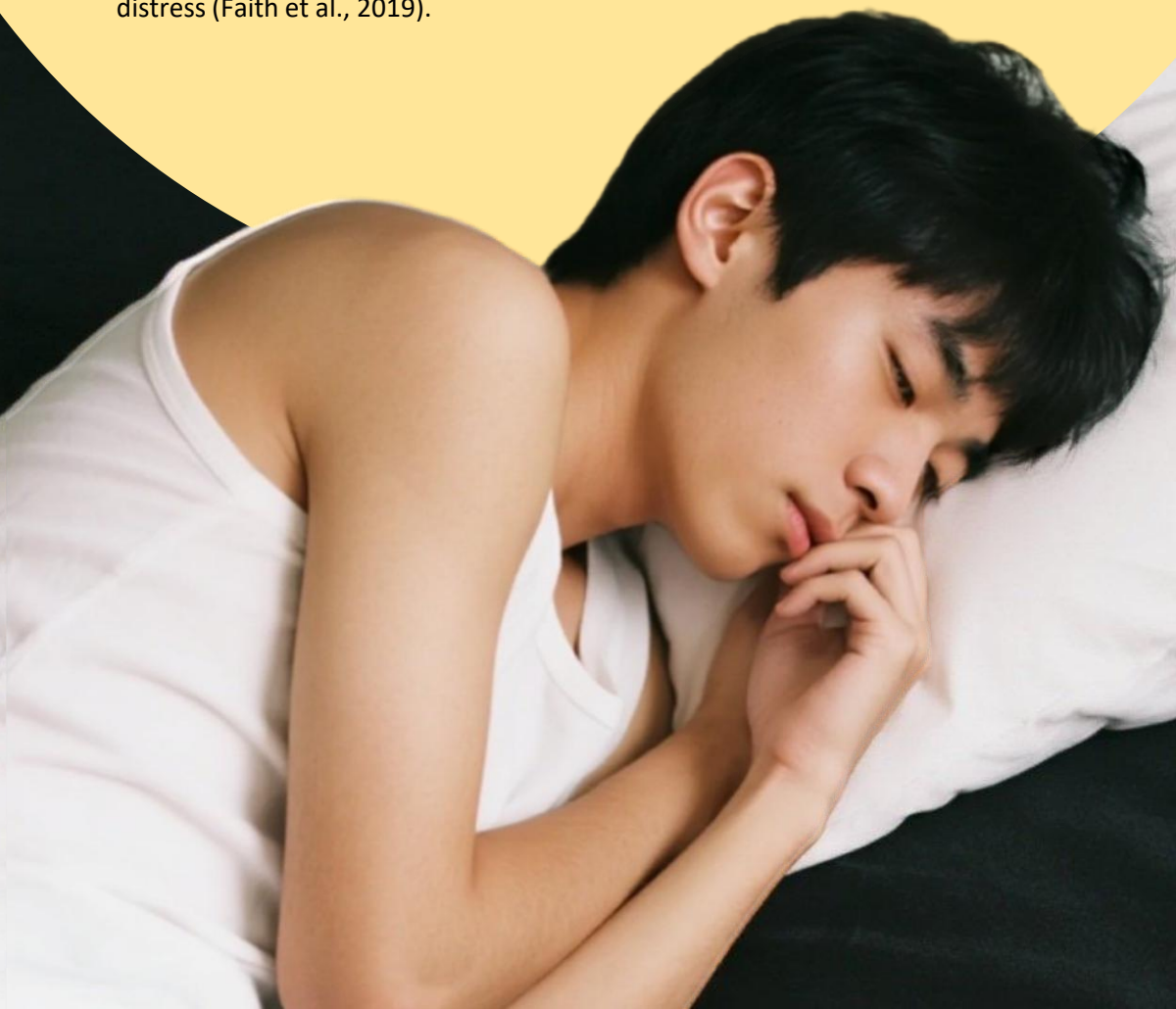
Adequate sleep—7–8 hours per night—is essential. Insufficient sleep disrupts metabolic processes and increases obesity risk. Limiting screen time before bed and maintaining a regular sleep schedule helps regulate hunger hormones and reduces late-night snacking (Zhu et al., 2019).

Psychological Support

Setting realistic goals is critical. Experts suggest aiming for no more than 0.5 kg of weight loss per week to prevent rebound weight gain and health risks. Parents should monitor children's mental well-being and provide emotional support, as stigma and anxiety can worsen unhealthy behaviors. Professional counseling may be needed in cases of persistent distress (Faith et al., 2019).

Lessons from Community-Based Programs

In August 2024, Hangzhou's Hubin District launched a "21-Day Adolescent Weight Management Camp," providing an integrated intervention model of diet, exercise, and psychological counseling. The camp offered structured daily routines, including morning aerobic sessions, nutrition workshops, and evening progress check-ins. Parents participated in family activity days, reinforcing the importance of collective lifestyle changes. Such initiatives highlight the effectiveness of community-based, multi-disciplinary support for sustainable weight management.





Practical Tips for the New School Year

Stick to a schedule: Ensure 7–8 hours of sleep, avoiding late-night study or phone use. Research indicates that over 55% of Chinese adolescents are sleep-deprived, significantly increasing obesity risk (Zhu et al., 2019).

Move more during breaks: Stand and stretch for five minutes each class break—this can add up to nearly an hour of extra activity daily.

• **Engage in school sports:** Participate in PE lessons, recess activities, or after-school teams to build endurance and teamwork.

Lead by example at home: Parents can prepare healthy lunchboxes and organize weekend family exercise. Studies consistently show that family support is a key factor in successful adolescent weight management (Faith et al., 2019).

Schools matter too: Schools should improve PE curriculum quality, integrating endurance and aerobic training, while also ensuring access to sports facilities.

Adolescent obesity is an urgent and growing public health challenge. Effective solutions require a multi-dimensional strategy combining exercise, nutrition, sleep, and psychological care, supported by families, schools, and communities. With sustainable interventions, adolescents can achieve healthy weight management and lay the foundation for long-term well-being.

Is It Really That Bad ed to Eat After 8 PM?

Here's What to Know

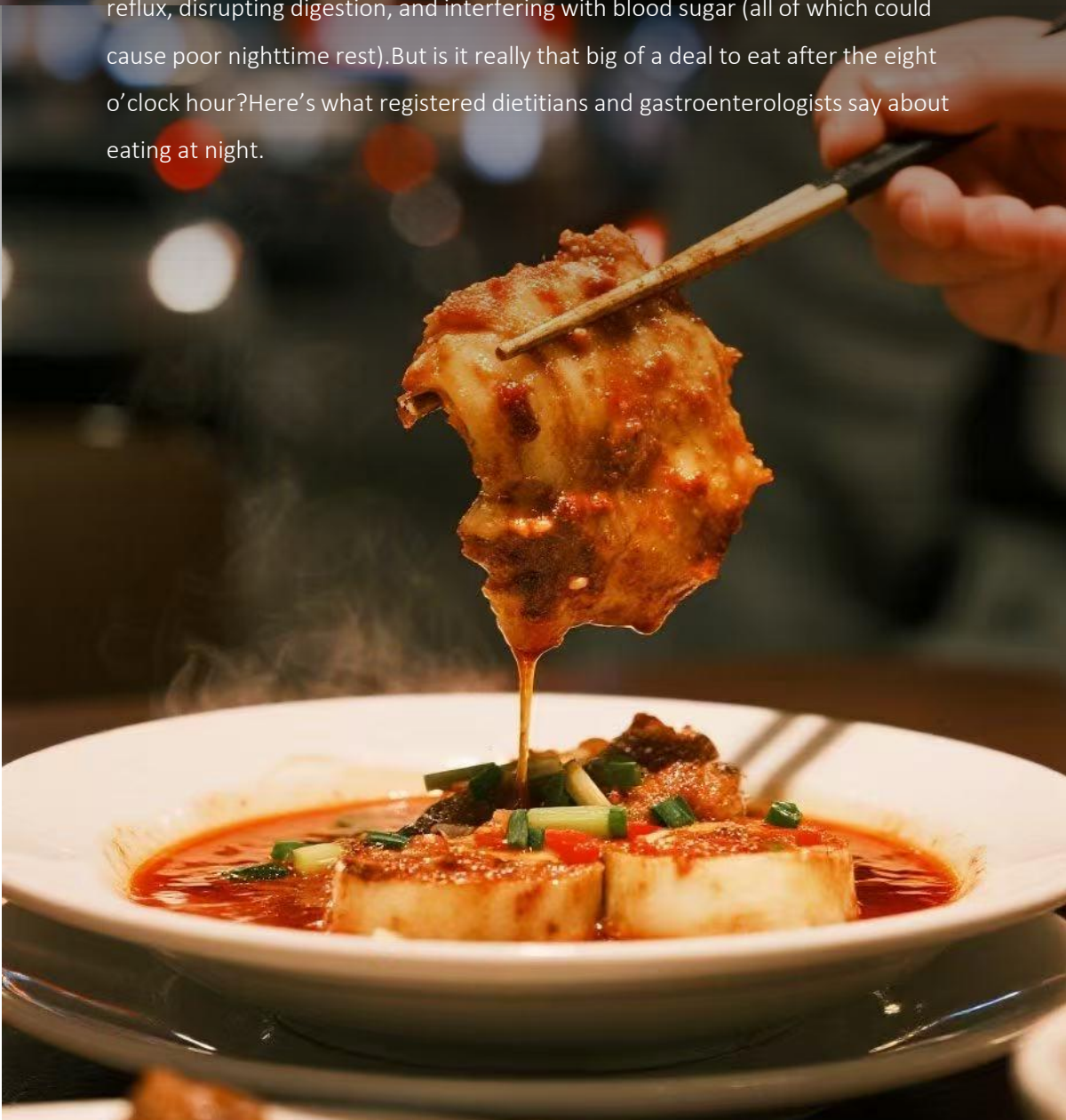
Eating later in the evening is often associated with weight gain.

While eating later into the evening can affect digestion, experts note that what you're eating is more important than when you're eating when it comes to healthy habits.

Experts recommend focusing on lean proteins, fruits and veggies, and healthy fats like tree nuts if you're looking for a late-night meal or snack.



Is the “no eating after 8 PM” rule actually good for your health? Even if you don’t practice a time-restricted diet like intermittent fasting, you may have imposed certain practices for your nighttime routine. The most common food cutoff time? 8 PM. Variations of “no eating after 8 PM” have floated in our cultural consciousness for years. Eating too close to bedtime has been associated with acid reflux, disrupting digestion, and interfering with blood sugar (all of which could cause poor nighttime rest). But is it really that big of a deal to eat after the eight o’clock hour? Here’s what registered dietitians and gastroenterologists say about eating at night.



There Are Downsides of Eating After 8 PM

Though there's not a lot of research regarding not eating specifically after 8 PM, there are established benefits to curbing nighttime eating in general.

"When individuals consume food during the nighttime, it tends to consist more often of processed foods high in carbohydrates and fats rather than carefully planned and balanced meals," Janese S. Laster, MD, a physician board-certified in internal medicine, obesity medicine, gastroenterology, and nutrition, told *Health*.

She explained that the timing of eating can affect your digestion, absorption, and metabolism—ultimately impacting weight.

A 2022 study supports this: Researchers found that eating later in the day increased participants' hunger, decreased the amount of calories they burned, and led to greater fat storage.

According to Laster, these effects may be unique to each person based on types of food, genetics, stress levels, and other factors.

Evening activity levels and even communal enjoyment of food could also play a significant role. If you've traveled to other cultures, for example, you may have noticed that in nations like Spain, where dinner is often served at 10 PM or later, obesity rates are lower than in the U.S.



Still, Laster noted that “it is generally accepted that eating earlier is associated with being weight stable.”

Beyond its effects on weight gain, eating at a later hour could also have drawbacks for digestion.

“Eating close to bedtime or before lying down significantly increases GERD or acid reflux, so for this reason I don’t recommend it,” gastroenterologist Caroline Soyka, DO, told *Health*.

If acid reflux tends to disrupt your sleep, it’s a good idea to stick to an eating cutoff hour on the earlier side.

“For individuals experiencing bloating or heartburn, it’s advisable to avoid eating within 90 minutes of bedtime to prevent the onset of gastrointestinal symptoms,” Laster said.



So, Is It Really That Bad to Eat After 8?

Life gets busy for all of us sometimes—so what if your schedule doesn't allow for earlier eating? Fortunately, eating after 8 PM probably isn't a total dealbreaker for your health.

“While there's evidence linking late-night eating to potential health concerns like poor digestion, weight gain, and other issues, it's not necessarily true for everyone,” Julie Pace, RDN, a registered dietitian and founder of Core Nutrition Health and Wellness, told *Health*.

According to a 2015 study, negative outcomes from nighttime eating may not be consistent when food choices are small, nutrient-dense, or low-calorie.

“If we eat leftover pizza, ice cream, or chips, regardless of the time of day, those aren't healthful choices,” Berger explained. “Instead, if we choose fruit, vegetables, lean protein, or nuts, regardless of the time of day, those are healthy choices, providing great energy and nutrients for you.”

If your work or school schedule doesn't give you time to eat until after 8 PM, that doesn't mean you should skip meals, either.

If you live with diabetes or other blood sugar issues, it's important to stick to a doctor's recommendations for timing your meals and snacks. Going too long without eating could be dangerous.



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If your work or school schedule doesn't give you time to eat until after 8 PM, that doesn't mean you should skip meals, either.

"If one works or has classes late, having a cutoff time to eat might not work," Berger said. "In addition, if one has a different schedule from day to day, having a cutoff time to eat might be complicated."

If you live with diabetes or other blood sugar issues, it's important to stick to a doctor's recommendations for timing your meals and snacks. Going too long without eating could be dangerous.



How to Choose a Nightly Cutoff Time for Eating

Though 8 PM may be the ideal time for some people to say goodnight to food, it's not a hard and fast rule for everyone.

If you'd like to choose a time to stop eating, Laster advised considering your family's schedule, as well as any health issues you may want to address with food timing.

If possible, just try to give yourself some space between eating dinner and heading to bed.

"Because everyone's schedules are different and 'internal clocks' can vary, I recommend a goal of finishing eating at least two to three hours before bedtime," said Soyka.

This should allow you to stay satiated throughout the evening and not go to bed hungry—according to Laster, the average time for gastric emptying is about four hours.

Remember, too, that a nightly cutoff isn't the only food-timing habit that can affect your well-being.

Pace explained that "consistent meal timing, avoiding large meals before bedtime, practicing mindful eating, maintaining balanced nutrition, staying hydrated, and listening to your body rather than watching the clock may be more impactful for your health."



A close-up, low-angle shot of a couple's hands clasped together. The person on the right is wearing light-colored trousers and a dark belt. The person on the left is wearing a dark top. The background is a bright, out-of-focus outdoor setting, likely a beach or park, with warm, golden light suggesting late afternoon or early morning. The overall mood is intimate and supportive.

Your Partner Feels Down? Here's What You Can Do

In intimate relationships, when a partner falls into an emotional low, many instinctively switch to **"problem-solving mode"**: either rushing to offer advice or trying to quickly soothe the other's feelings with phrases like "Don't be sad."

These seemingly caring approaches can often become hidden pitfalls in the relationship. American psychologist John Gottman, in his study of marital relationships, found that **65% of men choose to provide solutions when their partners are emotionally distressed**. However, **this behavior has a 73% chance of triggering a secondary emotional outburst in their partners**.

Behind this paradoxical phenomenon lie the three most common pitfalls in human emotional interaction.

First pitfall : Emotional Invalidation

When a partner expresses sadness, dismissing the emotional value with phrases like "There's nothing to cry about" activates the amygdala in the brain, provoking anger from feeling misunderstood.

Neuroscience experiments show that **individuals whose emotions are invalidated experience a 300% increase in cortisol levels.** This physiological stress response prolongs the duration of negative emotions.

Second pitfall : Solution-First Approach

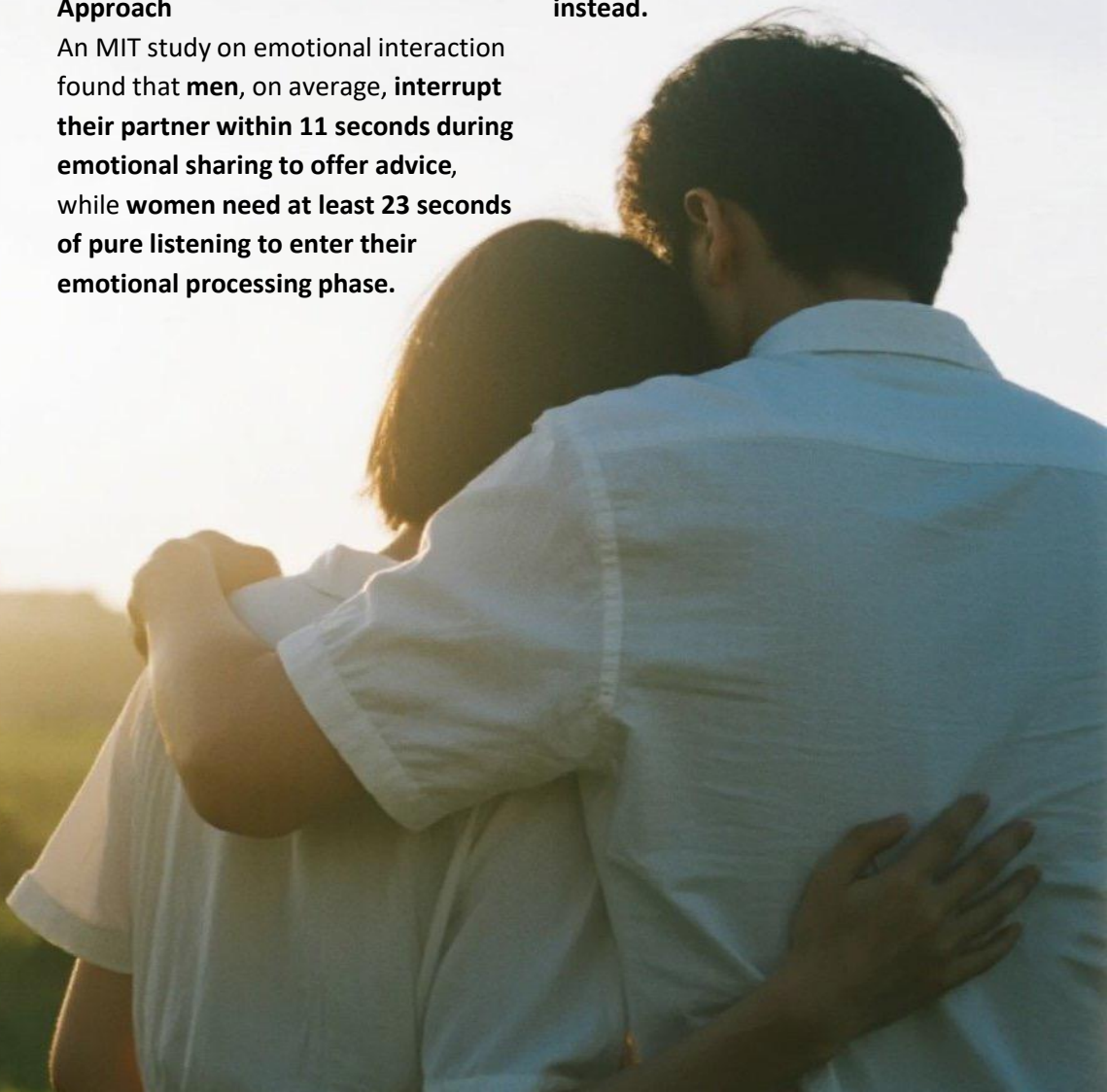
An MIT study on emotional interaction found that **men, on average, interrupt their partner within 11 seconds during emotional sharing to offer advice,** while **women need at least 23 seconds of pure listening to enter their emotional processing phase.**


This communication mismatch, driven by gender differences, often turns comfort into a new trigger for arguments.

Third pitfall : Emotional Comparison

Comparing the partner's pain to others' misfortunes, such as saying, "My colleague had it much worse after their breakup," triggers a sense of "relative deprivation" in the relationship.

This behavior **causes the person being comforted to feel devalued, deepening their negative emotions instead.**



A man and a woman are standing in front of a large window with sheer white curtains. They are both smiling and looking at each other. The man is on the left, wearing a white t-shirt and light-colored pants. The woman is on the right, wearing a light-colored long-sleeved top. The window looks out onto a bright, slightly blurred outdoor scene with buildings and greenery.

So, how can we create emotional value when a partner experiences negative emotions?

Genuine Listening

The PERMA model, proposed by Martin Seligman, the father of positive psychology, emphasizes that Relationships are one of the five pillars of well-being.

Genuine listening requires following the "Three V

Principles": maintain **Visual** contact, use a gentle **Voice** tone, and **Verbally** accept the emotions

A UC Berkeley study on couple interactions found that partners who used "**reflective listening**" (repeating the last three words spoken and asking a question) **had relationship satisfaction 41% higher than the control group.**

For example, if the other says, "Work was awful today," responding with, "Work was awful? What happened?" significantly lowers defensive barriers.

Expressing Value

Dopamine, a key neurotransmitter for emotional connection, is secreted in amounts positively correlated with feeling valued.

Specifically, apply the "**Three-Dimensional Affirmation Method**":

- **Affirm the emotion** ("I understand you're feeling very upset right now"),
- **Affirm the value** ("The fact that you care so much about this project shows how responsible you are")
- **Affirm their existence** ("Just having you here makes me feel secure").

This triple affirmation simultaneously activates the prefrontal cortex (rational cognition) and the ventral striatum (reward system), creating a dual pathway for emotional repair.

Humor as Relief

Humor, as an advanced strategy for emotional regulation, **activates the brain's reward system, releasing dopamine and endorphins to boost positive feelings.**

However, its effectiveness depends on timing. The Emotional Curve Theory suggests that introducing humor is safest after the partner's emotional intensity has decreased by about 30%. Forcing humor when someone is in acute pain can backfire.

Generally, **self-deprecating humor or recalling shared positive experiences works well**, e.g., "Remember that time I bombed the proposal presentation, and we ate hotpot until midnight and got chased by that dog on the way home?" This type of humor, based on shared memories, activates the hippocampus and promotes positive emotional rebuilding.

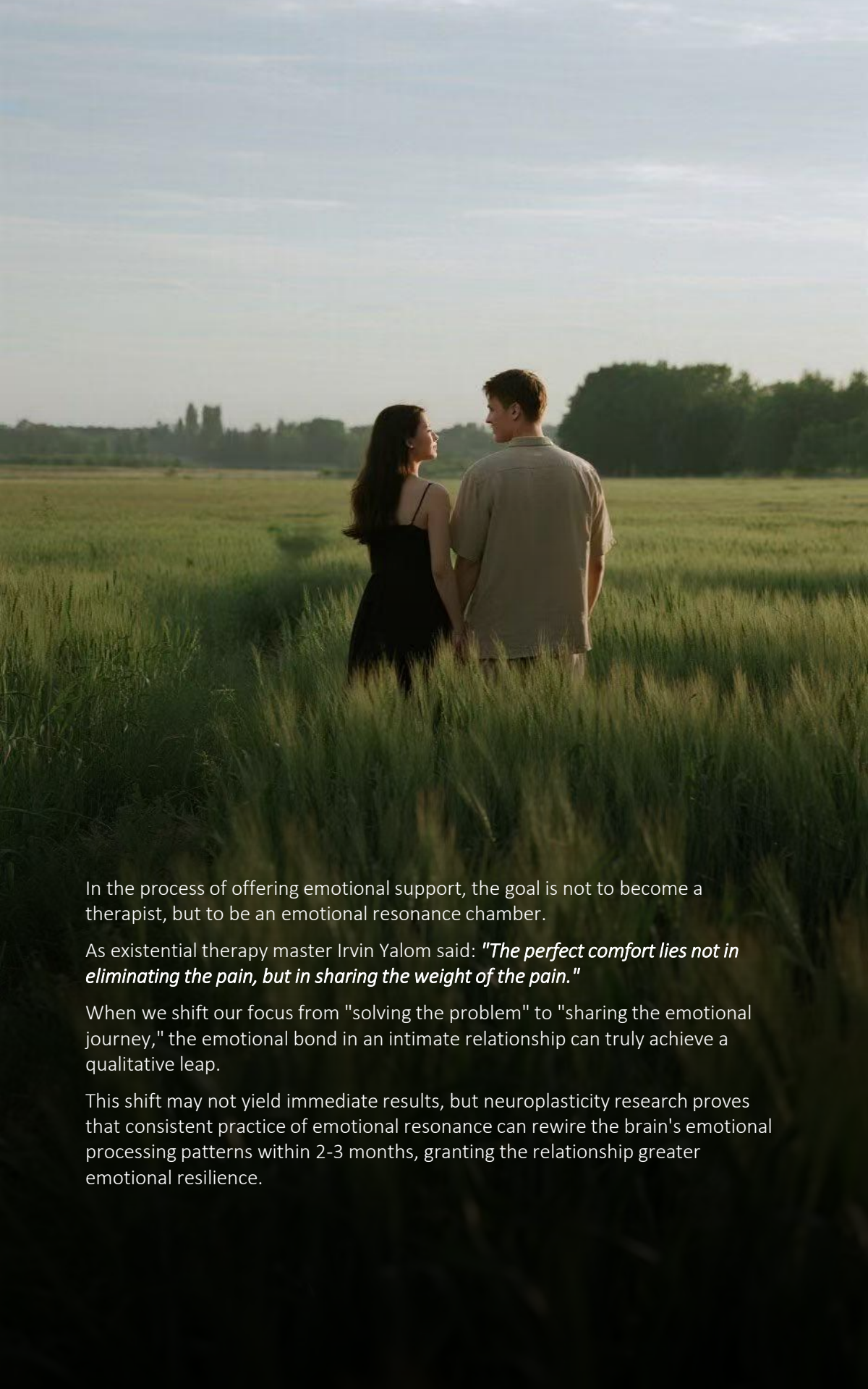
Emotional Resonance

True emotional support ultimately points to cultivating the **ability for emotional resonance.**

Research on the mirror neuron system found that **when a partner describes pain, synchronized micro-expressions** (muscle twitches within 0.5 seconds) **make the other feel understood.**

Achieving this neural synchrony requires long-term practice. Try "Emotional Mirroring Training": **spend 15 minutes daily recounting the other's emotional experiences of the day**, using feedback phrases like "I sense that you felt..."





In the process of offering emotional support, the goal is not to become a therapist, but to be an emotional resonance chamber.

As existential therapy master Irvin Yalom said: *"The perfect comfort lies not in eliminating the pain, but in sharing the weight of the pain."*

When we shift our focus from "solving the problem" to "sharing the emotional journey," the emotional bond in an intimate relationship can truly achieve a qualitative leap.

This shift may not yield immediate results, but neuroplasticity research proves that consistent practice of emotional resonance can rewire the brain's emotional processing patterns within 2-3 months, granting the relationship greater emotional resilience.



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