

BodyMindSpirit—

Whole News

RNAO-CTNIG Newsletter



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Volume 4, Issue 1



Photograph by Debby Charlton

I would feel more optimistic about a bright future for man if he spent less time proving that he can outwit Nature and more time tasting her sweetness and respecting her seniority.

E.B. White

Keeping your body healthy is an expression of gratitude to the whole cosmos - the trees, the clouds, everything.

Thich Nahn Hanh

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EDITOR NOTES– Susan Keith

As we see and feel winter approaching, with its shorter days and far reaching nights, we tend to begin reflecting on the year just past and make plans for the one to follow. This can represent a challenge for many, so it is important to remember that although winter may not be everyone's favourite season, it can be a time of renewal. When I look at the front page picture submitted by Debby Charlton I am reminded that the light that lies within still shines as the garden sleeps. This is a time of subtle, internal growth that stems from reflection and mindfulness. Within the context of all complementary therapies and basic nursing practice, intentional, compassionate presence is essential.

Eckhart Tolle states in his book *The Power of Now*, "The moment your attention turns to the Now, you feel a presence, a stillness, a peace. When you act out of present moment awareness, whatever you do becomes imbued with a sense of quality, care and love – even the most simple action." From this perspective then, the very qualities that we are attempting to embrace are immediately available in the awareness of each existing moment.

It is common to feel blinded by, held separated by, the physical restrictions of the human condition. However, it is also through the human experience that we are awakened. Being in the moment, where there is no time, reawakens our connection to all that is in the universe. It is where creativity lives. Life is an ever evolving creative process and the human experience is made meaningful by that creativity. Awakening to that connection allows us to know that we are part of everything else. Ultimately, we are the colours that become the artistic masterpiece; we are the music that forms the composition; we are the movement that becomes the dance; we are of everything that has ever been brought to form because we are that energy. The human experience allows us to use our minds to bring that creative energy to ideas and thoughts and our physical bodies to bring ideas to form. The energy is in continual motion, shifting, forming, shaping, re-shaping and unforming again. We can use this time of reflection to direct our energies toward balance.

However, giving way to the presence of each moment requires a certain amount of surrender to the larger order, a letting go of the need to control, in order to allow for the natural balance of the universe. It requires a recognition of the fact that the only thing we have any kind of control over is our own response in any given situation.

A colleague of mine, in the hospice where I volunteer, has provided a description of this concept and how it has helped him, in a report on his experience during major surgery recently (John's Story, pg 4). In it you will see how embracing that element of surrender can enhance the healing process, not only physically, but holistically, even though there might not be a rational explanation for that inner acceptance. John's recovery was remarkably smooth and speedy. I want to thank John for his candidness and readiness to share his experience.

Human beings, by changing the inner attitudes of their minds, can change the outer aspects of their lives.

William James

A FEW WORDS - from the President - Darka Neill

Once again we are approaching Christmas and the New Year and the end of our 3rd year as the CTNIG. With this comes my usual look back at the previous year. It always amazes me how much the CTNIG membership has accomplished. Our presence and participation was felt in a number of arenas: education, networking, self care, policy development to name a few. I could review the past year's events here, but you can access that information in our newsletters. Instead, I wish to acknowledge the many executive and general members who organized, participated in, and supported all the events and activities through doing presentations; providing Complementary Therapy (CT) treatments; writing articles; meeting with nursing and CT related organizations; sharing ideas; volunteering as regional CTNIG liaisons; and donating food, muscle power, and time. **THANK YOU ALL. Your contributions have made it a successful and productive year for the CTNIG.**

This past year's activities have also brought another aspect of holistic nursing into focus: the value of aesthetics (beauty and art), as a important part of the human condition and in our healing work, not only in objects and environments but through experiences. This concept was presented in a novel way at our AGM with *Soul Bytes*, looking at how films, as an art form, capture the essence of our nursing practice- *the soul of healing*. The executive have also had discussions as to the design of our web page and the use of art to convey what the CTNIG represents, meaningfully. We continue to ask for submissions about your experiences reflecting the art of nursing through the use of CT. From a more personal perspective, I have experienced the aesthetic quality of the beauty in nature, inspirational writings, and meditation; all part of my self care practices, and I will begin a project in the new year to create a healing environment at work.

With all this transpiring as a result of my work with the CTNIG, you can imagine what joy I felt when in the December 2005 issue of the Journal of Holistic Nursing, Lea Barbato Gaydos wrote about the new direction to include a section on aesthetics, art and holistic nursing. I would like to share a passage from that editorial that may give greater understanding and meaning to the value of aesthetics in nursing.

Aesthetics is a field of study in philosophy.... Although early efforts... focused on beauty and standards of taste (and these are still influential ideas), the field has evolved toward inquiry about what is artistically valid. There are three essential elements of artistic validity of either an object or an experience: meaning, emotional response, and coherence (Chinn & Kramer, 2004, p195).

Art is a process and a product. Art involves imagination and creativity and has as its aim the production of a work or experience that has an aesthetic quality. When something has been made special with aesthetic intention, it connects us to ourselves and to each other and, perhaps to something greater than ourselves. Watson (1999) stated that "art is a way of dealing with life and healing processes in a reverential way, with a sense of awe and respect for the larger picture of the universe" (p194)" (pp372 - 373).

Barbato Gaydos, H. L. (2005). Aesthetics, art, and holistic nursing. *Journal of Holistic Nursing*, 23(4):371-374.

The next time you experience a deep emotional response to an object or experience of beauty, (the result of insight, a deep understanding of its wholeness not only the effect of the object on you), consider the aesthetic quality; the meaning beyond that which is symbolized in the word, painting, or ritual. How has it touched your spirit? What significance does it have for you and for your nursing practice be it in the moving story you have read, the prayer for healing you have participated in with your client, or the piece of music you lovingly or sorrowfully listened to? Always listen with your heart and await the response.

Wishing you all peace and joy now and in the year to come.

With my warmest regards, Darka Neill, President, RAO-CTNIG

JOHN'S STORY

John Boyd is a retired teacher, philosopher, seeker of truth and a long time hospice volunteer at the Day Respite Centre of the Dorothy Ley Hospice. In March of 2001 he was diagnosed with prostate cancer, then bladder cancer, which eventually led to his surgery, a prostatectomy and urostomy in June 2005. He has generously given his permission to have his story printed so that we can benefit from his insights.

An Enigma Within A Quandry that Remains a Mystery—by John Boyd

What follows is my personal account of this experience, both prior to and following surgery. Of the actual surgery I have, of course, no recollection whatsoever, though I was told that it lasted about seven hours!

Central to my whole experience of being diagnosed with cancer in both my prostate and bladder, was the “whatever” factor in my life (see addendum). This had gradually become a deeply established element governing the way I have come to experience my life over the past 20 or 30 years. In essence, it represents a profound acceptance of this “whatever” factor in my life, that has played a central role in my evolving spiritual, philosophical, emotional and practical relationship to life as a whole. It represents a deeply comforting and natural acceptance of whatever life’s journey happens to put before me. Not for one moment to be misunderstood or confused to mean being indifferent to whatever the circumstances happen to be. Rather it is a liberating detachment from having to have control over the multitude of circumstances that we daily have to face. It represents a profound ability to let go of always needing to be in command, or to put it another way, of not being fearful of giving up command of whatever the situation is. Hence, it has everything to do with the art of surrendering, of not having fear and anxiety dominating the way I was experiencing my life. Most of all, I am convinced, it has to do with being able to transcend the almighty ego’s relentless dominion over our lives and how we come to understand reality. It can also be seen or experienced as our existential freedom to be fully authentic and having nothing to prove or defend. Further, it also embodies a deep sense of personal security emanating from knowing oneself to be part of the larger existential Whole where there is no split between self and other—where a non-dual reality prevails. Such feelings and understanding were, I believe, in place and well established within my sense of reality before I decided to put myself in the hands of all the various individuals involved in my surgical procedure—all virtual strangers yet professional in their respective roles.

These feelings were firmly in place during my pre-admission hospital briefing when I was subjected to a number of tests and a detailed explanation of exactly what having a urostomy would involve. Similarly, a few days later, when I reported at 6 am on the morning of my surgery, I was again treated most professionally by all concerned. All my personal belongings were placed in a large plastic bag to be dispatched to the room where I was to go after my surgery. This was followed by a brief period, together with several other people awaiting to have their operations, when I distinctively remember having what I took to be my last “normal pee”. A small but significant moment in my life!

I was wheeled off to the operating room where numerous nurses and doctors quickly prepared me for my urostomy. The last thing I remember was sitting up having an epidural needle inserted (all quite painlessly) into my spine. **My state of mind was quite serene and relaxed with not the slightest sign of fear or apprehension or mistrust of those around me. I was aware of completely surrendering to the whatever-ness of that moment and those taking care of me. It was a good feeling as I lost consciousness.**

My two weeks in hospital were notable for my continued comfort, serenity, good nursing and general recovery. The sole negative component being given inappropriate food with which to get my digestive system going again. Once back home I gradually regained my energy and lost weight. I am also delighted to be completely free from my previous state of chronic “washroom anxiety”!

What I am at a loss to explain is the mystery that harbours the enigmas and quandaries that underlie my inner acceptance of the whatever factor, something that defies rational explanation. I firmly believe that in

transcending our ever present ontological fear of death and dying, coupled with being able to fully strip the almighty ego of its many pretentious masks and realize just how perverse it is, we may have a useful platform from which to jump into the great unknown of whateverness without apprehension.

Addendum: In 1984 at the Human Unity Conference in Boston, I had the good fortune of meeting a truly remarkable 77 year old person named Frances Horn, who had written a small book entitled “I Want One Thing”. She told me that she had wanted to call her book “Whatever”, as this was what it was all about, but her publisher would not accept this. Her book is all about the whatever factor in her life explored in a very candid and highly personal autobiographical way. I was fascinated by just how this whatever factor had played such a central role in her whole life and guided her to where she needed to be. Her story told in her wee book was a remarkable gift to me and it helped me to deepen my own appreciation for this mysterious element that could play such an important role in my own life. An element that had much to do with trusting life’s intuitive-going with the flow-and-gut feelings as much as possible in all kinds of circumstances. Since those days, the importance and depth of what she represented has become more and more potent in my own development of consciousness little did I realize then!!

REPORT ON AGM

by Jodi Cole

The Annual General Meeting for CTNIG was held November 2, 2005 at Toronto East General Hospital. A variety of different modalities were represented by those in attendance, an indication that nurses are becoming more and more diversified in their practice of Complementary Therapies.

We began with an opportunity for participants to network and get to know one another over coffee and munchies. The meeting was then officially opened with a formal welcome from President, Darka Neill and a meditation lead by Jodi Cole, Communications Officer. Darka provided us with an overview of the work and achievements of the past year. Highlights included:

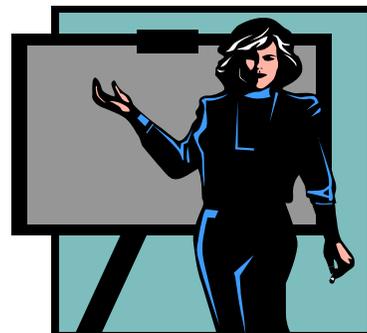
- membership of 186
- highly successful education day with F.A.C.T. called “Cancer & CT: The Facts”
- Marsh Insurance Plan revised to include all Complementary Therapies
- Presentations by CTNIG members to the Hospice Association of Ontario, CAM, TTNO, NPAO, RNAO: AGM, Ryerson, York, Centennial College, Film Presentation: F.A.C.T
- Publication by Susan Keith in “Hospital News”
- Website being designed
- Traveling Road show almost done.

Darka also reported that the Strategic Plan for the next year is to explore Scope of Practice issues regarding CT’s with the College of Nurses of Ontario, as well as to facilitate educational opportunities, such as a retreat or next year’s general meeting presentations.

It was also announced that the position of President-elect is open and Darka called for anyone interested to come forward. The business meeting concluded with a report from Claire Stark, Financial Officer.

Following the formal part of the meeting participants were invited to join in an educational opportunity, lead by Sheila Lewis, Jodi Cole & Connie Denomme, called “Soul Bytes”. Film clips from the movies “Patch Adams” & “What the Bleep Do We Know” were used to stimulate reflective discussion—see Sheila’s poem pg 12). And finally L. McGill closed the meeting with a healing circle.

Over all the meeting was a great success. Dee Lewis has since come forward with her interest in the President-Elect position and the board is looking forward to another productive year.



Complementary Therapies for the Health Care Provider Loyalist College, Belleville, ON

By Janet Riley, RN

I began teaching CT's to nurses and PSW's 5 years ago when the college asked me to present three hours of education on CT's as part of a 33 hour palliative care course. This was offered in various locations around the Belleville area 1-2 times per year. More recently I have started an all day seminar offered to health care providers after receiving feedback that there was not time enough in the three hours to cover all the material.

The full day course includes a number of therapies that I felt were easy to incorporate into their existing practice. Some are more well-known than others but I have had classes where none of the content was familiar to any of the nurses taking the course. Even the most commonly known CT in the area; Therapeutic Touch™ (TT), was unheard of in many cases. On occasion, a few out of the group of twenty would have had some experience with TT and in some cases Reflexology. The material was brand new to them. I found this to be an exciting position to be in as a teacher and as a long time promoter of CT's.

I began using these techniques myself in 1980 when I began a meditation practice that after one year extended into 2 hours/day. I practiced this every day for 15 years. I still do meditate but (in conjunction with several body/mind therapies that I have studied), more on an "as needed" basis. I currently have a practice working with a Naturopathic Doctor in Belleville offering Reiki and Bowen to clients as well as teaching Reiki classes.

The course I currently offer begins with a general introduction to CT's including client choice, appropriateness of therapy for the client, accountability, certification requirements for each modality and incorporating the therapy into the plan of care.

Therapies I cover during the seminar include Bowen therapy, Therapeutic Touch, Reiki, meditation, Aromatherapy, Emotional Freedom Technique, Prayer, Reflexology and Policy Development. For each therapy I give a history of the technique, description, certification requirements where appropriate and a demonstration of the technique using someone from the class. I try to include as many interactive opportunities as possible i.e. helping the students to feel the energy in their own hands - even if they have never done any form of energy work! A demonstration of Therapeutic Touch and Reiki on a volunteer gives a visual experience of what it looks like to do this work. In the meditation segment, I cover various types of meditation and invite anyone interested to participate in a guided meditation. I have found it important to give students the option of not participating if they feel they prefer not to.

Aromatherapy includes the experience of enjoying the scent of essential oils combined with knowledge of their properties and use. I always ask if there is anyone pregnant or sensitive to scents before encouraging students to smell the essential oils. Some essential oils are contraindicated in pregnancy. The reflexology component includes a self-reflexology treatment on the hands that stimulates the immune system and can be used in the beginning stages of a cold or flu. Emotional Freedom Technique can be used to reduce anxiety in a matter of minutes and it is easy enough to find someone who gets anxious speaking in front of a class. If the student is willing I will ask them to rate their anxiety on a scale of 1 to 10, apply the EFT program and then ask them to reassess. Phobias can also be addressed easily as a demonstration if the phobia is strong enough to evoke the emotion just by thinking about the situation. This is a fairly dramatic way of illustrating the effectiveness of this technique in the class.

Policy development is the next step to open the doors to practicing these therapies in the health care setting and that is the topic that rounds out this day of CT knowledge and experience. My hope is that nurses will find the experience intriguing enough to further their own education and become certified in their modality of choice and then work towards the development of policies in their health care setting.

REACHING OUT—AREA LIAISONS

If you are in an outlying area, you can become involved in CTNIG. Call your area liaison and start networking with CT nurses close to you. Report back to us and share your experiences in education days, health fairs and other related events. Become a true advocate for CT's in health care. Your board is here to help you.



Your area reps are:

Kelly Peterkin, London
kelly@willowgreen.ca

Kim Watson, Essex County
kwats@netrover.com

Janet Riley, Belleville area
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Charlene Schiffer, Thunder Bay
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Charlene is also Provincial rep for the Canadian Holistic Nurses' Association

NOTE THE CHANGES

Many thanks to all of our representatives! Your willingness to help your professional association is what helps to keep us strong.

Please note that there are a few changes to the contact information. Denise Konopaskie has moved and is now the representative for the Keswick area and she has a new email address. This leaves the Sault Ste. Marie area open to a new representative if anyone is interested.

Kelly Peterkin also has a new email address.

We welcome Robert Gouldstone as our new representative in the Niagara/St. Catherines/Hamilton area. Robert sends this information for our members.

“I am currently launching a research project in Iris Analysis/Neuro-optic Diagnosis, with my employer and McMaster University Gastroenterology Departments, and am promoting the RNAO & CTNIG with this project as I have already discussed the matter with the media department. I would be honoured to represent CTNIG in the Niagara area as I live in Smithville which is between Hamilton and St.Catherines, I am also being interviewed by the local newspapers on Monday 28th. Nov. for an article promoting RN's as Complementary Health Practitioners. If you require a representative in this area I would be interested. Finally, I have just completed a Doctor of Complementary Medicine and am awaiting the award of the degree.”

Therapeutic Touch™ in Essex County Hospice



Flo Hartleib and Sharron Parrott provided this picture published by the Hospice of Windsor and Essex County. Flo and Sharron were instrumental in getting Therapeutic Touch introduced and implemented into the hospice policy and procedure. The hospice newsletter reported that “The benefits of Therapeutic Touch are available to patients and caregivers as they journey the road to wellness. This path can often be one of turmoil, but patients express a “sense of calmness and inner peace” after this experience. Volunteers (who are trained) to administer Therapeutic Touch eagerly point out the benefits they receive. According to one (practitioner), “It’s helped deepen my abilities to connect with others as well as reconfirm my own abilities.”

Combined with traditional approaches to medicine, the Hospice continues to expand its range of services to help families cope during these highly stressful times. Under the guidance and leadership of patient care volunteers, Flo Hartleib and Sharron Parrott, the program is offered in the Wellness Centre, patient/family homes, Long Term Care Facilities and hospitals.”

CONGRATULATIONS FLO AND SHARRON ON THIS SUCCESSFUL INITIATIVE.

*Everytime we say
“Let there be!”,
in any form,
something hap-
pens.
Stella Terrill
Mann, author*

*Desire
Ask
Believe
Receive
Stella Terrill
Mann, author*

*Maggie McGuire responded to an article in the Toronto Sun, Monday October 24, 2005 entitled **2-TIER CARE FOR THE RICH; ALTERNATIVE MEDICINE AMONG TEENS**, by Sharon Lem.*

*The article stated "Teens from wealthy, educated families are more likely to use alternative medicine, a new study finds. The study raises concerns that a two-tier system is developing for even the youngest in society. The study also reports that the location of a person's residence influences the use of complementary and alternative (CAM) treatments, such as massage therapy, acupuncture, homeopathy/naturopathy and chiropractic." **With permission, here is her reply.***

The Double Meaning of the phrase, "two-tiered medicine"!

It is concerning that Joe Public is easily seduced by articles flexing the muscle of "two-tiered healthcare". This phrasing has now become entrenched in the popular language used in the current debate to radically alter Medicare in Canada. As a result, any reference of "two-tier" to modalities of healthcare currently not covered by public insurance can easily be interpreted by the reader that once again, publicly funded healthcare is losing ground. This can be very misleading.

To illustrate this, I wish to refer to an article printed in the Toronto Sun on October 24, 2005 written by Sharon Lim (2-TIER CARE FOR THE RICH..). It quotes a study from Queen's University in which Dr. Mary Ann McColl focused on the more exclusive use of alternative medicine, also known as complementary alternative medicine or CAM, by teens of wealthy families. She concluded that it was clear that those who can afford to pay for such services do so more than those who can not afford it. She concluded, regrettably, that we Canadians must admit that there is a "two-tiered" system in place.

The article goes on to raise concern that a two-tier system is developing for even the young in our society. What it does not say is that CAM , which includes Reiki, Therapeutic Touch, Chiropractic, Cranio-sacral therapy, Massage, Acupuncture and many more, is not new. Its popularity is rising as an adjunct to conventional medicine, not necessarily to replace it.

Most annoying is the spin of the article in promoting a perceived preference for "two-tiered" medicine by using a reference to alternative medicine which offers a completely different range of services.

The current Medicare debate refers only to the tier that is concerned with the funding and delivery of essential services to basic good health as defined by the principles of the Canada Health Act. It is this tier that our politicians want to subdivide into two avenues of payment, thus the phrasing "two-tier" comes into play because of the inequity it applies to Joe Public, the one who has more and the one who has less. They have little concern about the other tiers that have always existed in our midst, that is, the second tier which includes alternative and complementary medicine, some of which is covered by private insurance plans and the third tier which is covered only out of pocket. The latter includes naturopaths, Chinese medicine and prescription drugs, many of which are not covered by any plan.

Herein lies the ruse, the deceptive double meaning of the qualifying phrase, "two-tiered medicine".

Importantly for this article, it could have qualified the value of CAM by the increasing numbers of people using it. If wealthy teens are using their allowances to invest in these modalities, they, like their poor cousin who apparently uses it less often, are embarking on a new attitude toward their own health. This includes taking ownership for their own wellness and managing it less co-dependently, an unfortunate by-product of the original promotion by doctors, hospitals and politicians of publicly funded conventional medicine.

MORE FROM OUR MEMBERS

An article written by Andre Picard in The Globe and Mail on November 9, 2005 stated that according to Health Canada, Canadians are unknowingly being polluted by hundreds of different environmental substances that are affecting the health of individuals, no matter how careful they are. It quotes Dr. Rick Smith, Director of Environmental Defence Canada, as saying "We are part of a huge uncontrolled experiment, the outcome of which is unpredictable."

One of our members, Judy Spence responded with the following:

One can be sure, given Andre Picard wrote this article, that it is well researched. Mr. Picard is the reporter who broke the Red Cross tainted blood scandal wide open. I interviewed him when his book on the subject came out. His information is very much consistent with research done in the US and patients suffering from Multiple Chemical Sensitivity, which affects over 4.5 million Canadians.

Judy Spence

Former President, Environmental Illness Society of Canada

FOOD FOR THOUGHT—from AHNA



Acupuncture Research

A recent issue of the Annals of Internal Medicine features an article "Meta Analysis: Acupuncture for Low back Pain" by Eric Manheimer, Brian Berman et al. The article assesses the effectiveness of acupuncture for low back pain and concludes that while the quantity and quality of the trials varied, acupuncture was found to be effective. To read the full text, go to: www.annals.org/cgi/reprint/142/8/651.pdf

Currently, a research study is being conducted at the University of North Carolina to measure acupuncture's ability to induce labor in overdue mothers. The ongoing study will provide women five treatments over the course of a few weeks.

What¹s NCCAM up to?

More CAM research centers will be popping up on the grid. The National Center for Complementary and Alternative Medicine (NCCAM) has recently awarded grants to three centers of excellence of research and two international centers for research in the study of complementary and alternative medicine (CAM). Research will cover therapies used in traditional Chinese medicine as well as African traditional medicine including energy medicine and botanical mixtures. For more info go to: <http://nccam.nih.gov/news/2005/101405.htm>

NCCAM has also developed the CAM Online Continuing Education Series for health care providers and the public. It is presented in six chapters available at: <http://nccam.nih.gov/videolectures/>

IN-CAM NEWS FLASH

Conference Announcement - 4th International Multidisciplinary Conference on Spirituality and Health

The 4th International Multidisciplinary Conference on Spirituality and Health - Interweaving Science, Wisdom, and Compassion will be held November 9-12, 2006 in Vancouver, Canada.

Abstract deadline: March 7, 2006

For more information, please visit:

<http://www.interprofessional.ubc.ca/Spirituality 2006 index.htm>

Call for Proposals - Massage Therapy Foundation

a) The Massage Therapy Foundation has announced the deadline of **March 1, 2006** for submission of research grant proposals.

b) The Massage Therapy Foundation has also announced the deadline of **April 3, 2006** for submission of proposals for Foundation community service grants.

In order to submit a proposal, applicants must follow the established guidelines and complete a grant application, which can both be found on the Foundation's website at

www.massagetherapyfoundation.org.

New Publication Available - The Prince of Wales's Foundation

A Healthy Partnership: integrating complementary healthcare into primary care - This new publication explains how the new contractual and commissioning arrangements in the NHS can be utilized to help develop new integrated services.

For more information please visit: http://www.fihealth.org.uk/fs_publications.html

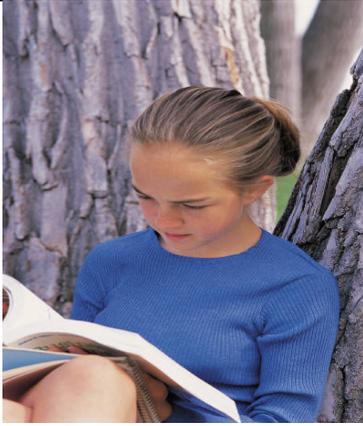
New journal to be launched - Chinese Medicine Journal

The Chinese Medicine Journal will be launched in 2006 and is now looking for submissions on Food and Materials that are related to Chinese Medicine. Please see [Instructions for Authors](#).

For more information please contact Siu-wai Leung at: siuwai.leung@gmail.com

BUSINESS WIRE

A September, 2005 report states that Physicians in the US are divided evenly on the impact of CAM on US health care. The report out of New York goes on to say that 36% feel it has a negative impact while 35% believe it has a positive effect and 20% feel it has no impact. Further, it was discovered that 64% of physicians said they have recommended complementary therapies to their patients and 36% have not. The survey indicated that 63% would be willing to recommend them under specific circumstances and 65% feel that the National Institutes of Health should fund research on CAM.



POETRY

During the AGM film clip event, Sheila Lewis recorded, in a poem, some of the participants' reflections that were shared. Thank you, Sheila for your creative insight.

WHAT WE KNOW

Light and space

Awareness, intentionality and consciousness

Creating our shared reality

Water, life giving

Water, blessing from my heart and your heart

The essence of love

Chi of love....bliss

Thoughts.....

Believe that I can

Yes, I can...we can

Opening possibility of consciousness

Creating our shared reality

Extending my image of myself...of you....of us

Remembering who I am and who you are

Awakening.....healing

Meeting me where I am

present with me

Spirit set free

Joy!

sheila xo

The same
stream of life
that runs through
my veins
runs through
the world
and dances in
rhythmic measure.

It is the same life
that shoots in joy
through the dust
of the earth
into numberless
blades of grass
and breaks into
tumultuous waves
of leaves and
flowers.

It is the same life
that is rocked in
the ocean cradle
of birth
and death
in ebb
and flow.

My limbs are
made glorious
by the touch
of this world
of life.

And my pride
is from
the life throb
of ages dancing
in my blood
at this moment.

Deepak Chopra

SURFING



Traditional Medicine Information Now Available on World Health Organization Website

The World Health Organization (WHO) has recently updated their website on Traditional Medicine. Resources include detailed reports on: Acupuncture : Acupuncture, Traditional Medicine in general, Guidelines and Standards, Herbal Medicine, National Policy, Primary Health Care and Research and Training.

For further information, please visit:

<http://hinfo198.tempdomainname.com/gsd12/cgi-bin/edmweb/library.fcgi?a=d&c=edmweb&cl=CL1.1.11>

AHNA Debuts GeroFocus

AHNA is pleased to announce their new web resource GeroFocus. This progressive website has been created in partnership with Nurse Competence in Aging (NCA)* in order to prepare holistic nurses with the knowledge and skills needed to care for the growing population of older adults.

The NCA Web Fellow for this project is Valerie Eschiti, RN, MSN, CHTP, AHN-BC. She will be assisted by former AHNA President Charlotte Eliopoulos RN, MPH, ND, PhD and current AHNA President Carla Mariano EdD, RN, AHN-BC, FAAIM to supply nurses with accurate information pertaining to holistic care of the older adult. You can put this one in your Internet favorites:

<http://www.ahna.org/new/GeroFocus.html>.

** NCA is a 5-year initiative awarded to the American Nurses Association (ANA) through the American Nurses Foundation (ANF), and represents a strategic alliance between ANA, the American Nurses Credentialing Center (ANCC) and the John A. Hartford Foundation Institute for Geriatric Nursing.*

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