A branch of green leaves hangs from the top left corner, extending across the upper half of the frame. The leaves are a vibrant green, with some showing a yellowish tint. Below the branch, a dark, reflective surface shows a distorted, wavy reflection of the leaves. The background is a deep, dark green, creating a sense of depth and tranquility.

WHOLE PERSON CARING

AN INTERPROFESSIONAL MODEL
FOR HEALING AND WELLNESS

LUCIA THORNTON

Praise for Whole Person Caring

“Lucia Thornton’s book is a welcome addition to visions of what health care can be and should be. Thornton’s conceptual model of whole-person caring builds on Martha Rogers’s science of unitary human beings to give us a much-needed, practical framework for interprofessional collaboration and coordination of care with an emphasis on optimal wellness.”

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Past President, American Holistic Medical Association
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“Simple, as in ‘elegant,’ and forthright; deeply thought-provoking, but unpretentious—Lucia Thornton’s whole-person caring model presents an innovative challenge, cast within a holistic frame of reference, to future-conscious health care organizations, professional staff, and patients and their families. The WPC model itself is a gem of finely integrated, lucid, highly human thinking that ponders with sensitivity and compassion the health care team’s relational needs and expectations, birthed out of the special emotional and spiritual tensions of this contemporary Newer Age.”

–Dolores Krieger, PhD, RN
Professor Emerita of Nursing Science, New York University
Co-founder of Therapeutic Touch, a mode of Transpersonal Healing

“This visionary book is an excellent resource for anyone wanting to create a health care system that values body–mind–spirit healing, promotes nurturing environments, and integrates healing practices and whole systems approaches to care. Thornton’s holistic and interdisciplinary model for whole–person caring provides a sound framework for guiding such health care transformation. This timely book illustrates the potential for integrating holistic concepts and practice throughout the health care system and offers tools for energizing this process.”

–Peggy Burkhardt, PhD, RN, FNP, AHN-BC
President, American Holistic Nurses Association
Associate Professor Emerita, West Virginia University School of Nursing

“Having worked to improve physicians’ health, wellness, and work life and their therapeutic relationships with patients, I see this model of whole–person caring as a viable and sustainable solution for the core problems of current health care delivery. Whole–person caring integrates the therapeutic continuum of patients, nurses, doctors, health care workers, managers, and leaders, because it advances the health of human beings in relationship. This book is remarkable because the innovative model’s broad scope is grounded in clarity of concepts and detailed practices to benefit all.”

–Tom Janisse, MD, MBA
Editor in Chief, *The Permanente Journal*
Publisher, The Permanente Press

“With the full implementation of the Affordable Care Act on the horizon, Lucia Thornton’s new work, Whole Person Caring, offers a timely and illuminating primer on an emerging holistic approach to treatment of the individual in our new world of health care. The book is a thorough, inquisitive approach to reengineering the traditional biomedical care model to include a more holistic, multidimensional view of care and healing, including promotion of self-care and maintenance.”

–Amanda Stefancyk Oberlies, MSN, MBA, RN, CNML
Director, AONE’s Center for Care Innovation and Transformation

“Whole Person Caring is an outstanding resource for anyone interested in integrative holistic care. Here you will find conceptual models; suggestions for harmonizing conventional and complementary/alternative therapy approaches; examples of ways in which whole–person care is beneficial to staff, patients, management, and institutions as a whole; research evidence and cost effectiveness of benefits; and, most importantly, considerations of ways in which these approaches humanize health care. I very highly recommend this gem of a book to caregivers, care seekers, and management alike.”

–Daniel J. Benor, MD
Author of *Seven Minutes to Natural Pain Release* and
Healing Research, Volumes I–III



WHOLE PERSON CARING

An Interprofessional Model for
Healing and Wellness

Lucia Thornton, MSN, RN, AHN-BC



Sigma Theta Tau International
Honor Society of Nursing®

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Dedication

To my son David, whose light shone brightly for too short a time on this earth; to my daughter Christy, whose light continues to shine brightly; and to my husband Rod, whose wonderful support has enabled me to pursue this work.

Acknowledgments

I am ever grateful for those people who have directly and indirectly contributed to the ideas and concepts expressed in this book. I have had the opportunity to be influenced by and learn from pioneers in holistic medicine. The founders of the American Holistic Medical Association—Gladys McGarey, Evarts Loomis, and Norm Shealy—and a pioneer in biofeedback—Elmer Green—have been wonderful teachers and always met and continue to meet my inquiries with open hearts and open minds. They have inspired me and helped me understand some of the dynamics involved in healing and wellness. I am ever grateful for their insights, their wisdom, and their inspiration throughout the years. They have been wonderful friends, mentors, and teachers.

I am most grateful to Martha Rogers for her brilliant, innovative, and futuristic thinking. Her theory of unitary human beings has influenced many of the concepts of whole-person caring and has guided nursing into the 21st century. Martha was a wonderful advisor and mentor whose caring and compassionate way of being was ever-present. While she is missed, her presence continues to be felt in this work and the work of so many of her students.

Jean Watson has been an important influence in promoting a caring and healing paradigm. Jean's work in developing and promoting her caring science has helped restore caring and healing as a central focus and mission of nursing. Her work in promoting the role of spirituality in nursing and being the first to talk about the soul in nursing literature make Jean a trailblazer in bringing healing back into nursing. The concepts of caring and healing are foundational to the model of whole-person caring and much gratitude is extended to Jean for her undying efforts in developing and nurturing these concepts throughout her life.

While many theorists, practitioners, and scientists will be mentioned within the context of this book, there are many other people who have influenced my thinking and have been great teachers for me throughout the years. Their writings and teachings have opened my mind and expanded my view of the universe. While I have had the opportunity to study with and learn from many of these teachers in person, others I have learned from through the wisdom in their writings. I am particularly grateful to Pierre Teilhard de Chardin and Paramahansa Yogananda, whose teachings and wisdom have had a major influence in my life, my work, and my view of the universe.

I am also very grateful to those friends, past and present, who inspire me, fill my soul with joy, expand my horizons, and continually increase my understanding of healing. Much gratitude goes to Judith Lau, Anne Dupontavice, Nancy Hinds, Richard Moss, Harrison Madden, Harry Owens, Celia Coates, Jack and Judy Stucki, Bernice Hill, Bram Sheafor, Gilah Hirsch, Bob and Ann Nunley, Herb and Wanda Blumenthal, Bernie Williams, Jim Oschman, Leonard Wisneski, Dan Benor, Rebecca Good, Cay Randall-May, Scott Walker and all of my Council Grove family and Council for Healing friends and colleagues.

Two people were key in the direct development of the model of whole-person caring. Jeanie Gold and Darlene Pedersen contributed immensely to the development of the model. Jeanie Gold and I spent countless hours envisioning and imagining a system of health care that could facilitate healing and wellness. Jeanie's contributions to the model and the development of early educational programs were inspiring, essential, and foundational. Bringing the model to life and my befriending of technology could not have happened without Darlene Pedersen, whose computer expertise and knowledge of all things technological helped create some of the animated PowerPoint presentations and computer setups for our educational programs.

The model of whole-person caring was brought to life in the workplace through the efforts of a remarkable group of nurses. Marilyn Watkins, a nurse manager, and Diane Sheldon, a director of clinical services, understood the importance of integrating concepts of healing and wellness into the heart of their hospital. These two leaders sustained the vision and supported the efforts of a core group of nurses who helped implement the needed changes on the front lines of patient care. This core group of nurses became models of wellness and created a caring-healing presence that transformed their workplace. Kathy Mahannah, Laurie Wilson, Sherry Wildey, and Sue Young were nurses in the core group whose perseverance and commitment helped transform their hospital into a healing environment.

Much appreciation is extended to those who contributed to the content of this book. First, I must thank my daughter, Christy, who contributed her expertise in the area of nutrition and exercise in writing the major portion of Chapter 8. I so admire all that she manifests in this world and feel blessed to have her in my life. Special appreciation is also extended to my son, David, and to the “collective knowingness of this topic” for their contributions and information. David continues to be a source of inspiration in my life and a bridge to the infinite nature of existence.

I would like to thank those who gave their permission to reproduce some of their work in this book. Special thanks to Ka-Kit Hui, MD, medical director for the UCLA Center for East-West Medicine, for permission to reproduce the information in the “Five Essential Acupressure Points” brochure that he developed. Permission to use the Jin Shin Jyutsu charts and information for self-care practices was generously provided by David Burmeister, the director of Jin Shin Jyutsu, Inc., and the hand and foot reflexology charts were graciously provided by Melvin Powers Publishing.

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About the Author

Lucia Thornton, MSN, RN, AHN-BC

Lucia Thornton has been involved in nursing, holistic healing, and health care for more than 35 years. She has held clinical, managerial, and administrative positions in various organizations and settings including emergency and trauma, intensive care, education, and research and development. She helped develop one of the first in-patient hospice homes in the country. She was instrumental in creating the process of board certification for holistic nursing in the United States and served as the first executive director of the American Holistic Nurses Certification Corporation. She established and directed The Visions in Healthcare Council and The Institute of Health and Well-Being to foster an awareness of health and healing in her community. Her teaching experience includes teaching undergraduate and graduate nursing students at California State University in Fresno and offering programs on holistic nursing across the country.

For the past 10 years, she has been involved with developing seminars for hospitals and communities that focus on staff development and creating healing environments. She uses the model of whole-person caring, a holistic, spiritually based, interprofessional framework that articulates and operationalizes healing concepts to facilitate individual and organizational transformation. Her work in transforming hospitals into healing environments has received local, state, and national recognition.

She serves on the faculty of Energy Medicine University and is a past president of the American Holistic Nurses Association.

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Preface

One sunny summer morning, a few years ago, I was pushing my grocery cart in a Safeway grocery store in Scottsdale, AZ, when I heard an announcement over the PA system. The hardware store down the street was announcing itself as a “holistic” hardware store. I stopped pushing my cart and said to myself, “Well there you have it. We have done it. Holistic is now a household word.” Of course, “they” don’t know what holistic means, but it is no longer a bad word.

When we started the American Holistic Medical Association in 1978, it took us another two years to decide how to spell holistic. Spelling it with a W meant something that we were *trying* to say, but spelling it with an H enabled us to share the *real* concept we were hoping to convey. This had to do with the root words associated with holy, healing, and health. In other words, we had to bring the spirit back into the work we were doing. Body, mind, and spirit had to be expressed as one if we were to reclaim the true nature of the healing we knew as our real work.

In some strange way, having the hardware store proclaim itself as “holistic” validated me. I was no longer a “quack,” a “witch doctor,” a “snake oil salesperson,” or something even worse. Rather, I was a holistic doctor. Finally, it could be said publicly—but it took 35 years to get this far. That’s okay, though. This is the way life works. You plant a seed and take care of it, and, finally, a little shoot comes up. Now the hard work of cultivating it goes on.

In this book, Lucia Thornton gives us ways by which we can transform the field of health care, which is sick and dying, into a healthy, global garden where healing at all levels can take place and where the caregivers are joyful and healthy and in tune with nature.

When I was in medical school, we were told never to give the patient false hope. When I began working with patients, however, it didn't take long to realize that was wrong. I don't think there is such a thing as false hope. There can be false information and false expectations but not false hope. The Indian poet Tagore said, "Hope is the bird that sings before the dawn." Those of us who work in this field have all seen patients who, against all odds, when given a small ray of hope, improve—and others who were doing well but got worse when that ray of hope was removed.

When qualities of the spirit such as hope, compassion, tenderness, and love are what nurses and other health care providers bring to the field of medicine, healing at all levels becomes a reality. This happens when the patient realizes that the power to heal lies within his or her own being. Our job is to awaken and nurture that healing power within them. We have all watched as a patient who has undergone a beautiful surgery doesn't heal, while another with a botched surgery heals very well. The question is, who does the healing? We need each other.

In my experience, we can deal with many aspects of life, including pain, but we don't deal well with abandonment. No procedure or medication can take the place of another human being. We need each other. As we deal with our own fears, we help others to deal with theirs. We can help others when we know ourselves so that we do not project our fears and pain onto them. None of us are perfect; we are all works in progress. We can share what we have learned.

Just as the hardware store shared with our community its awareness of being holistic, each community shares what it learns. Communities share each others' pain, but they can also share their healing. This book will help us all so that we can become the healing community that helps us to age into health.

—Gladys Taylor McGarey, MD, MD(H)

Foreword

For many years I worked diligently to educate my patients about stress reduction, good nutrition, smoking cessation, and physical fitness. I gradually learned that this approach was, all too frequently, not very successful. Something was missing. Professor Lucia Thornton's brilliant book, *Whole-Person Caring: An Interprofessional Model for Healing and Wellness*, reveals that missing piece. Her book expounds on how the most important ingredient for better health is to better understand and embrace who we are as human beings. I agree with Professor Thornton.

Integrative physicians and nurses have recommended for years that a mind, body, and spirit approach is needed for true healing. Unfortunately, in retrospect, it is easy to see that most of the time healers have neglected the spirit part of that equation. This book gives spirit the significance it deserves, while not avoiding the importance of the body and mind. Thornton understands that there is a divine intelligence in all humans that continually seeks wholeness. When we connect with our higher self, we have a much better chance of finding the inner light that helps us to heal.

One reason I so enjoyed and appreciated this book is because its primary message resonates closely with what routinely occurs by the end of a one-month, fourth-year medical student elective that I teach each year. The elective, which began 12 years ago as a way to develop physician leaders in integrative medicine, teaches students about complementary and alternative medical practices. We soon realized that in addition to learning about such things as nutrition, Chinese and Ayurvedic medicine, and herbs, the students were engaged in a much deeper, more transformative process. These future physicians were experiencing self-reflection, compassion, self-love, the importance of community, and the interconnectedness of all living things.

Year after year, when asked to state the most valuable thing they had learned during the course, these medical students describe how they have primarily

learned compassion, how to quiet their minds, and how better to love themselves. They write statements such as, “I learned to be my own person,” “I learned to trust my intuition,” “I want to dance more,” and “I love myself more now.”

Thornton, past president of the American Holistic Nurses Association, defines the core problem regarding the U.S. health care system and offers realistic solutions. As stated previously, she believes that we must redefine who we are as human beings, which we do by embracing our energetic and infinite nature. We must reconnect with our spiritual essence. Life is sacred, and the shift to true healing will occur when we see ourselves and each other in that light. Thornton stresses that it is imperative that we bring not just our brains but also our hearts and souls into our lives and our work.

But it is not enough to make just individual changes. A cultural change must also occur in our clinics, hospitals, schools, and lives. Thornton’s award-winning whole-person caring model calls forth the highest potential in people and promotes health and healing in individuals and organizations. This multidisciplinary model brings together practitioners from a wide range of healing professions to create a common vision.

Whole-person caring is a powerful reminder that the most important thing we can do to improve health and healing is to remember the spiritual and energetic essence of who we truly are as human beings, to love and trust ourselves, and to remember that we are all connected. There is a divine intelligence in us that continually seeks wholeness. Our job is to remain open to that intelligence and to follow its infinitely wise and loving guidance.

–Bill Manahan, MD
Assistant Professor Emeritus, Department of Family Medicine
University of Minnesota Academic Health Center, Minneapolis, MN
Past President, American Holistic Medical Association
Author of *Eat for Health: Fast and Simple Ways of Eliminating Diseases Without Medical Assistance*

Introduction

“Be the change you wish to see in this world.”

–Mahatma Gandhi

How do we reconstruct a health care system that is primarily concerned with disease and illness to include a major focus on health promotion and well-ness? How can we integrate healing and caring practices into our hospitals and communities? What are some of the steps that can be taken, and what is the role of nurses and other professionals in this process?

The aim of this book is to present a new way of looking at who we are and what we do. It is about seeing ourselves and our work in a greater light. It is about recognizing our wholeness and recapturing those parts of ourselves that we have left behind. It is about bringing heart and soul back into our lives and work and advocating for a health care system that does the same.

Several years ago, I taught workshops around the United States for nurses interested in holistic nursing. The workshops were transformational in nature. Nurses who attended learned how important it was to care for themselves. They learned that to provide compassionate care and be a healing presence, they must value and care deeply for themselves. The lives of the nurses who attended often changed dramatically. They began to eat more healthfully, get more rest, take breaks at work, exercise, and set aside time for themselves. They began to value who they were, and this made all the difference in the world.

The program involved a mentorship, so I had the opportunity to work and correspond with participants for several months. As I did, I noticed an interesting phenomenon. In the beginning, the nurses were very enthused about their new perspective and excited to bring change and healing to their workplace. They returned to work with wonderful ideas about teamwork, supporting each other, being a healing presence for their patients, and creating a healthy and healing environment. After a month or so, however, their enthusiasm

diminished. There simply was no support in their workplaces for such change to occur. Then, two things usually happened: Either they quit nursing because they could no longer tolerate the unhealthy environment, or they reverted to their old ways, settling back into the unhealthy workplace culture.

During this same time period, I worked with several hospitals, offering programs of renewal for their staff. For one hospital, I had the opportunity to offer several “day of renewal” workshops in a row, so that approximately 20% of the medical-surgical staff was able to attend. A month after delivering the program, I received a call from the nurse manager saying that the whole environment in the workplace had changed. She said that doctors who normally came into her office to complain about the nurses were now coming in to compliment the work of her staff. Moreover, she said patient satisfaction had improved dramatically. While I clearly understood the relationship between a healthy and vital workforce and organizational performance, I was skeptical that a 1-day program could create such dramatic changes. I asked the manager if there were other variables that might account for the remarkable shift. Did she hire more staff? Were employees’ salaries increased? Was patient acuity down? She replied, “I’ve been working here for 18 years. I know the staff, and I know the unit. Your day of renewal is the only variable that affected the entire group. *It* has made the difference.”

After watching what was happening with the holistic nurses who were disenfranchised shortly after they returned to work, I began to wonder: What if we could get a critical mass of people from a hospital or organization to embrace some of these ideas? Could that create a shift in the culture? When the manager called, I began to think that might have been what happened on the medical-surgical unit.

We observed the patient-satisfaction data, and, after 3 months, the increased levels gradually declined to the previous baseline. Nonetheless, the positive

spike caught the attention of the director of clinical services. We began discussing strategies for a sustainable outcome. We realized that to create change in the organizational culture that was sustainable, it was important for the movement to be all-inclusive and all-pervasive. An interdisciplinary approach was imperative. A decision was made to develop a comprehensive program available not only to nurses, but also to other interested staff including respiratory therapists, dietitians, chaplains, administrators, and physicians.

The previous programs were based on nursing theory and designed for nurses. It was necessary to create a model of care to which every discipline could relate and to design an educational program that was interdisciplinary as well. The model of whole-person caring (WPC) was developed and became the foundation for subsequent programs and organizational transformation.

After the model was developed and the in-service programs were offered, nursing turnover significantly decreased and patient satisfaction significantly improved. The hospital saved more than \$1.5 million based on the decreased nursing turnover during that year. Additionally, the hospital received local, state, and national recognition for their accomplishments. On a national level, it received the Norman Cousins Award, given by the Fetzer Institute, which acknowledges one health care project each year that significantly focuses on relationships. The hospital received recognition from the state hospital association for excellence in health care leadership and received the regional Innovation in the Workplace Award. The local newspaper also featured many stories related to the healing environment and the compassionate care that the employees provided.

These were all external validations that a caring-healing transformation had taken place. This transformation was something that employees, patients, and the community could actually *feel*. The transformation was led by the nurse manager, the director of clinical services, and a core of staff who understood the concepts of the model of whole-person caring. The model was a guide,

but the people did the work. Their story is told in Chapter 4, “Integrating the Model of Whole-Person Caring.”

This book is about the model of whole-person caring. The model is an interprofessional and interdisciplinary framework for healing and wellness. It is holistic and spiritual in nature. It is a model that calls forth the highest potential in people and promotes health and healing in people and organizations. It is a model that works.

Several things about the model make it particularly useful in these times. First, it redefines who we are as human beings. It expands the definition of human being beyond the biomedical model to include recent discoveries in science. It acknowledges the infinite and sacred nature of our being. This expanded perspective enables us to look at who we are and what we do in different ways. It invites us to bring healing modalities and therapies into our practices.

Another important aspect of this model is its interdisciplinary and interprofessional orientation. The model was initially developed to serve as an interdisciplinary guide to unite the various disciplines within a hospital in a common framework. These disciplines included professionals (nurses, physicians, dietitians, respiratory therapists, etc.) and other health care employees (nursing assistants, volunteers, clerical staff, maintenance, etc.). The model is equally useful as an interprofessional guide in bringing together people from various health care and healing professions. Professionals from fields such as medicine, nursing, social work, psychology, chiropractics, naturopathy, traditional medical systems, and so on, can utilize the model as a common framework for practice and collaborative care.

This model provides a guide for those who are interested in bringing forth their greatest potential. It sets forth some very high ideals. It is a model that will appeal to people who social science calls *early adopters*. These are the leaders, the visionaries, and those who have already engaged a good portion of their time in personal growth and awakening. For early adopters, this model

can help you share with others the vision that you already carry in your heart. It is a model to promote healing and wellness for you, your coworkers, and your organization.

This book also contains practical and useful tools for helping people create healthier and more wholesome ways of being. This book is useful to managers and administrators, but it is equally useful for people wanting to create a healthier lifestyle and bring healing into their lives. The self-care, self-healing, and stress-reducing practices are for everyone, and can serve as a wonderful reference for students, patients, friends, and family. In addition, the descriptions of various complementary and alternative therapies and the various systems of medicine in Chapter 1, “Shifting Toward a Paradigm of Healing and Wellness,” can help acquaint those who are not familiar with these practices.

Chapter 1, “Shifting Toward a Paradigm of Healing and Wellness,” looks at the current health care system and the need to shift from an illness-based system to a system that is focused on health and wellness. It examines the importance of integrating a holistic approach that values interdisciplinary collaboration and coordination of care. Shifting our resources and our consciousness toward promoting healing and wellness requires people from various service and business sectors to work together. An interdisciplinary framework creates a common vision and provides a common platform from which different disciplines can initiate actions.

Chapter 2, “Redefining Who We Are,” examines some of the basic assumptions of the biomedical model. The need to expand our current perspective is asserted. Some of the questions raised in this chapter include: Is the reductionist model that underpins health care practices outdated? Is there a more useful and expansive way of defining ourselves and our universe that creates an openness to healing and interdisciplinary collaboration? How can we see ourselves in a greater light? The chapter discusses recent thinking and research in the field of quantum mechanics, helping to expand our view of who we are. The

chapter also examines some of the concepts of nurse theorist Martha Rogers that underpin the definition of person in the model of whole-person caring.

Chapter 3, “The Model of Whole-Person Caring: An Overview,” provides a history and basic overview of the definitions and concepts of the model of whole-person caring. The key concepts of whole-person caring—infinite and sacred nature of being; self-compassion, self-care, and self-healing; optimal wellness; therapeutic partnering; transformational leadership; and caring as sacred practice—are discussed. The chapter also explores the importance of an interdisciplinary model that is visionary and sustainable.

Chapter 4, “Integrating the Model of Whole-Person Caring,” delineates the process of integrating the model into an organization. Steps include assessing the organization’s ideology and culture, eliciting the support of key people, involving everyone, customizing strategies for implementation, honoring and recognizing exemplary people, initiating programs for personal growth and transformation, and incorporating concepts into performance criteria. A manager’s case study is presented to show how the model was implemented. The compatibility of the WPC model with other models is also discussed.

Chapter 5, “The Infinite and Sacred Nature of Being,” begins the discussion of each of the model’s concepts. This chapter focuses on the infinite and sacred nature of being, which is the first concept of the model. It looks at spirituality in health care and at the difference between spirituality and religion. We begin to examine how viewing people as spiritual and infinite beings changes the way we deliver care. What possibilities exist in this framework? What is the potential for healing? We also examine the difference between healing and curing and how the two approaches change the manner in which we provide care. Some steps to integrating spirituality are suggested, including setting the intention, creating the vision, beginning the dialogue, creating reminders, creating healing spaces, developing policies to support a healing environment, and developing and mentoring staff.

Chapter 6, “Self-Compassion, Self-Care, and Self-Healing,” discusses the next concepts in the WPC model. Those who are familiar with the model will notice that self-compassion is a new addition. While writing this book, I began to understand the importance of self-compassion as a foundational concept to self-care and self-healing. So the concept of self-compassion has been included along with self-care and self-healing. These concepts are explored, along with practical exercises that you can use to develop compassion toward yourself.

Chapter 7, “Self-Care and Self-Healing Practices,” provides the reader with practices and approaches that can be used for self-care and self-healing. You can also share these techniques with family, friends, and coworkers. Some can be used in the clinical setting to help alleviate stress, and can also be taught to patients to help them with pain, sleeplessness, anxiety, and a variety of other problems. You will become acquainted with practices that can alter conscious and unconscious habits, quick and easy ways to de-stress, and breathing exercises to incorporate into your work and personal life. You will also be introduced to some subtle energy practices that will sensitize you to your own energy field and teach you to balance and harmonize the energies in your body.

Chapter 8, “Optimal Health Wellness,” explores how to manifest optimal well-being. Optimal wellness involves every aspect of our being. We have been so preoccupied in health care by the disease model that we take little time to imagine how optimal wellness manifests. How does optimal wellness manifest in our mental, emotional, physical, and social/relational life? Because of the rising incidence of obesity and the perpetuation of so many myths about diet and nutrition, special emphasis is given to the area of nutrition. You are provided with basic, up-to-date information to help guide your own nutritional choices and those of your patients. Information is also provided to help you design your own fitness program based on current research.

Chapter 9, “Therapeutic Partnering and Transformational Leadership,” explains how to relate to patients and coworkers from a spiritual-energetic base.

Cultivating therapeutic partnerships with our patients helps empower them to take control of their own health. It also creates a field of healing that supports the interaction. Cultivating therapeutic partnerships with our coworkers improves our work relationships and facilitates positive communication and interaction between disciplines in the hospital setting. The importance of developing equitable partnerships as we begin to create integrative models for health care is discussed. The chapter also explores transformational leadership and the healing field of management. The process of cultivating wise leadership is discussed, along with the meaning of spirituality in leadership.

Chapter 10, “Caring as Sacred Practice,” examines the last concept of the model, transforming our attitude about caring to include the sacred. How does it change the way we deliver health care when we begin to view all life as sacred? The chapter explains reflective practices that we can use to cultivate our inner healer. Types and techniques of meditation are presented along with a discussion of its importance in cultivating our capacity to heal. Journaling and dream work are also examined. This chapter also teaches techniques that we can incorporate at work to create sacred space and a healing environment. These practices include creating intention, heart centering, and transcendent/transpersonal caring. Some of the research related to these concepts is reviewed, along with the physiological benefits that are associated with these practices.

To borrow from nurse theorist Margaret Newman’s terminology, we are at a “choice point” in the way we provide health care. A choice point is preceded by disequilibrium and chaos and creates a realization that our old patterns are ineffective and new ways of doing things must be adopted. While the concept is usually applied to individuals experiencing challenging health issues, this term is quite appropriate for the current state of our health care system. We must find better ways to care for people, promote wellness, and create a sustainable and healthy society.

Nursing is in a unique position to play a major role in the transformation of the health care system. Nurses represent the largest segment of the U.S. health care workforce with more than 3 million members. Nursing practice covers a broad continuum of health care from health promotion, to disease prevention, to coordination of care, to cure when possible, and to palliative care and hospice care when cure is not possible (Institute of Medicine, 2010). This places nurses in a position to play a significant role in the transformation of the health care system.

Nursing alone cannot change the health care paradigm. To create a cultural shift toward health and wellness, the movement must be all-inclusive and all-pervasive. Using an interdisciplinary model that incorporates concepts from nursing, sociology, exercise physiology, stress management, nutrition, psychology, traditional medical systems, and healing practices is a step toward creating a movement that is inclusive.

One of the most important things to remember in this endeavor is this:

If we are to transform our health care system, we must first transform ourselves.

In the new healing and wellness paradigm, professionals must be role models for healthy and wholesome behaviors. If we are to be advocates for healing and wellness, we ourselves must commit to healthy and wholesome ways of being. This book provides leaders and front-line practitioners in hospitals, schools, and communities with a model to guide their initiatives in creating healthier lives and healthier places to live and work. It is time that we join forces to bring “health” and “care” back into health care! It is time that we become the change we wish to see!

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1



Shifting Toward a Paradigm of Healing and Wellness

*“When you’re headed in the wrong direction,
more speed won’t help.”*

–Anonymous

Where are we headed in health care? The United States is among the wealthiest nations in the world, yet in nearly all indicators of mortality, survival, and life expectancy, it ranks at or near the bottom among high-income countries. Americans live shorter lives and experience more injuries and illnesses than people living in other high-income countries (National Research Council and Institute of Medicine, 2013). If we continue on the same trajectory, almost all trend lines indicate that the U.S. health disadvantages relative to other high-income countries will continue to worsen (ibid., 2013).

health and lifestyle, as well as particular symptoms on the physical, mental, and emotional levels. Homeopathic practitioners believe that illness is specific to an individual. For instance, two people with the same symptoms will often receive different remedies based on their constitution. A person's constitution includes qualities related to creativity, initiative, persistence, concentration, physical sensitivities, and stamina (Homeopathic medicine, n.d.; Ehrlich, 2011c).

Preliminary evidence shows that homeopathy may be helpful in treating childhood diarrhea, otitis media, asthma, fibromyalgia, chronic fatigue syndrome, symptoms of menopause (such as hot flashes), pain, allergies, upper respiratory tract infections, sore muscles, and colds and flu (Ehrlich, 2011c).

Summary

Health care in the United States has focused on treatment of disease and illness, with little emphasis on health promotion and disease prevention. National awareness and efforts to redirect health care toward illness prevention and health promotion have accelerated due to the increased incidence and high cost of chronic disease, which is largely preventable.

A holistic approach that considers all aspects of a person is important in changing behaviors and creating healthy lifestyles. Empowering people to take control of their lives and creating ongoing relationships based in trust and caring are essential. An interdisciplinary approach that is well coordinated is necessary to provide support in meeting the diverse needs of the chronically ill and for health promotion.

Integrating healing therapies into health care practices is useful and often provides cost-effective alternatives to Western medicine. Referred to as *complementary and alternative medicine (CAM)*, these therapies represent some of the oldest health care interventions used by people throughout the world.

Mind-body-spirit therapies such as prayer, meditation, yoga, affirmations, imagery, and visualization have been useful in a variety of conditions because of their capability to encourage relaxation, improve coping skills, and reduce tension and pain. Massage and other body therapies are useful in reducing anxiety, depression, and musculoskeletal pain. Likewise, subtle energy therapies have been shown to be useful in reducing stress, pain, and anxiety; accelerating healing; and promoting a greater sense of well-being.

Medical systems—such as traditional Chinese medicine, Ayurvedic medicine, naturopathy, homeopathy, and osteopathy—that treat the whole person have valuable contributions to make to our health care system. They focus on prevention, patient empowerment, healthy lifestyles, and the rare utilization of high-cost interventions. This places these systems in a position to help shift health care toward a paradigm of health, healing, and wellness, and provide affordable and sustainable care.

A new vision for health care is emerging. It is a vision that brings health, healing, compassion, and wellness into the conversation. It is a vision that invites professionals to work together to create a healthy and sustainable society. It puts people, their needs, their dreams, and their lives at the core of its efforts. It holds promise and sets us on a course toward a vital and healthy society.

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2



Redefining Who We Are

*“We are all elements of spirit, indestructible
and eternal, and multiplexed in the divine.”*

*–William A. Tiller, PhD, Professor
Emeritus Stanford University*

Defining who we are is the first step in establishing a model of care. The way we perceive ourselves as human beings guides our practice, our research, and ultimately our body of knowledge. The way we define ourselves is one of the deepest underlying assumptions in a culture. Assumptions at this level are often taken for granted and are not usually articulated. However, deeply rooted assumptions are what affect why things happen or fail to happen in a culture (Carroll & Quijada, 2004).

Unitary human beings are specified to be irreducible wholes. A whole cannot be understood when it is reduced to its particulars. The use of the term unitary human beings is not to be confused with the current popular usage of the term holistic, generally signifying a summation of parts, whether few or many. The unitary nature of environment is equally irreducible. The concept of field provides a means of perceiving people and their respective environment as irreducible wholes. (p. 29)

Rogers changed the word multidimensional to pandimensional to describe energy field. She defines pandimensional as “a non-linear domain without spatial or temporal attributes” (Rogers, 1992, p. 29). This signifies a domain that is beyond the time/space continuum and is congruent with the thinking of many physicists who maintain that the past, present, and future exist simultaneously. This supports the phenomena of interdimensional beings and energies. This also creates a theoretical platform for afterlife discussions and can help explain many paranormal happenings.

Rogers’s definitions provide a foundation for an interdisciplinary model that recognizes the energetic essence of the whole person. Her vision can help guide us as we move toward embracing a paradigm of health, healing, and wellness.

Summary

Defining who we are is the first step in developing a model of care. The current biomedical model cannot explain, predict, or help us understand many of the phenomena associated with healing or healing therapies. Perceiving ourselves as simply biological beings is not congruent with concepts in physics that have emerged over the past century. In addition, the current biomedical model, with

its reductionist perspective, is not effective in dealing with the complexities and interrelated issues involved in chronic disease and health promotion.

This is not to say, however, that the biomedical model is not useful. The biomedical model is useful when studying and intervening in various phenomena occurring within a certain energetic resonance, or the *uncoupled state* of reality (as referred to by Tiller). The present biomedical model is not useful when studying many of the healing therapies and interventions that occur in a more coherent energetic state that Tiller refers to as the *coupled state* of reality. Physics tells us that we are 99.9999% empty space, and that what occupies that space seems to be a dynamic energy. Developing a perspective that acknowledges the energetic and information essence of who we are is important if we are to advance our knowledge and our practices.

Martha Rogers's science of unitary human beings provides definitions and concepts that are expansive and visionary and that can be understood by professionals across disciplines. Her framework has guided much research and knowledge in nursing and can now provide a foundation for an interdisciplinary journey toward health, healing, and wellness.

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3



The Model of Whole-Person Caring: An Overview

*“The work is not to introduce a few new ideas,
but to change a world view.”*

—Margaret Wheatley

The model of whole-person caring (WPC) is a framework designed to guide individuals and organizations toward health and wellness. The model operationalizes concepts inherent to healing at both a personal and organizational level. It is an interdisciplinary and holistic model that is derived from theorists in the fields of nursing, physics, and systems theory. It was originally developed to assist health care organizations in creating a healing and nurturing environment for consumers and health care personnel. However, it is equally useful for business, educational, community, and governmental organizations.

Summary

The model of whole-person caring is an interdisciplinary model that provides a framework to assist health care organizations in creating a healing and nurturing environment for consumers and health care personnel. While originally designed for hospitals, it is equally useful for educational, business, or governmental organizations seeking to improve the health and wellness of their employees and to create a healing workplace environment. Implementation of this model has resulted in increased patient satisfaction, increased employee satisfaction, decreased nursing turnover, increased integration of organizational values by employees, and considerable cost savings.

The model appeals to organizations interested in strengthening the workforce and in creating a sense of meaning and purpose within the workplace. Adopting the model of whole-person caring is a way of bringing spirit back into the workplace. As an organization begins to view its employees and patients as sacred beings, changes begin to occur in every department and every instance of patient contact. Quality care and compassionate service become the standard as each organization customizes and implements the model to fit its particular needs and culture.

The model of whole-person caring creates a framework that invites the integration of healing practices and whole systems of medicine into health care. When we perceive ourselves as fields of energy, practices based in modulating and balancing energy systems make perfect sense. Medical systems such as traditional Chinese medicine, Ayurvedic medicine, naturopathy, and homeopathy, which treat the whole person, have valuable contributions to make to our health care system. They focus on prevention, patient empowerment, healthy lifestyles, and the low utilization of high-cost interventions. The WPC model places these systems in a position to help shift health care toward a paradigm of health, healing, and wellness, and to help provide affordable and sustainable

care. Adopting a framework that can explain healing practices and whole systems of medicine is an important first step in their integration into our health care system.

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4



Integrating the Model of Whole-Person Caring

“The success of the whole system depends on the success of its individual members, while the success of each member depends on the success of the system as a whole.”

—Fritjof Capra

Changing the culture of an organization to one that embraces healing and wellness is an enormous endeavor. People have deeply embedded beliefs and values that determine their responses, reactions, and behaviors toward new ideas. Some of these beliefs are not conscious, so individuals may react negatively to situations or new ideas, while having no awareness or understanding of their responses.

Cultures developed in organizations serve as stabilizers to resist change (Schein, 1993). People resist change for several reasons: a reluctance to give up old habits; change may be perceived as a stressor; change involves more work in the

value, and the service value showed a statistically significant increase from pre-test to post-test scores. (See Appendix A.)

Summary

The model of whole-person caring serves as a guide to creating a healthy and healing environment. Creating a culture of healing and wellness takes time, patience, and wise leadership. Some of the steps that have been identified in facilitating a cultural shift are:

- ☛ Assessing the organization's ideology and culture
- ☛ Eliciting support from key people
- ☛ Involving everyone
- ☛ Customizing strategies for implementation
- ☛ Honoring and recognizing exemplary people
- ☛ Initiating programs for personal growth and transformation
- ☛ Incorporating whole-person caring concepts in performance criteria

Developing programs that help employees create healthier and more wholesome ways of being are foundational to the success of the organization. To effect change in a person's behavior, the use of experiential techniques such as imagery, visualization, and relaxation techniques are necessary. They help people access both conscious and unconscious patterns of behavior. Offering programs on an ongoing basis is important to continue to reinforce and sustain positive lifestyle changes. Developing or acquiring programs that can be offered in-house is useful in supporting and maintaining a healing culture and decreasing the costs associated with outside consultants and facilitators.

Maintaining positive outcomes requires continual effort and a sustained vision until values of health and wellness become deeply embedded in individuals and cultures. It is important to involve people at every level of the organization in the process of supporting and sustaining the vision. The executive committee and governing board have the responsibility of holding the vision for the organization and making the transformation to a healing culture a priority. Including the transformational process as part of the strategic planning, as well as allocating funds to support the initiatives, is necessary for the process to be sustainable. Especially important are nurse managers and staff who can model wholesome, healthy, and caring behaviors until these behaviors are embedded in the cultures of each unit.

The model of whole-person caring can be used with other models of care such as patient- and family-centered care and relationship-based care. Combining models can create synergy and amplify the intended results.

The implementation of the model of whole-person caring in the case study resulted in savings of over \$1.5 million by significantly decreasing nursing turnover. It was instrumental in increasing patient satisfaction from the low 80th percentiles to 94% hospitalwide. A research study showed that the integration of organizational values was increased in employees participating in the model of whole-person caring program.

Implementing concepts, practices, and models that improve the quality of care and increase patient satisfaction are even more important as reimbursement begins to be linked to positive patient outcomes. The most significant and meaningful change that the model helped facilitate was the creation of a healing culture for patients and the staff.

5



The Infinite and Sacred Nature of Being

“We are not human beings having a spiritual experience, rather we are spiritual beings having a human experience.”

—Pierre Teilhard de Chardin

Redefining who we are as human beings is a primary focus of the model of whole-person caring. Broadening our self-perception from biomedical entities to a perspective that acknowledges our spiritual nature is essential. The schism that took place more than 300 years ago between the body, mind, and spirit needs to be bridged. We have neglected our humanity and relegated those things that enliven us, such as love, caring, and compassion, to the backburner.

We are out of balance and need to recover that which we have lost. The dramatic rise in recent years in consumers seeking alternative care is related to a need to be touched and cared for at a more personal level. While today’s health

Summary

Redefining who we are as human beings is a primary focus of the model of whole-person caring. Broadening our view from perceiving ourselves as biomedical entities to a perspective that acknowledges our sacred and infinite nature is essential. Although today's health care culture is one of brilliant intellectual achievements and technological advances, spirituality and the human soul have been largely overlooked.

As health care workers, we must begin a dialogue—not one that focuses on abandoning the biomedical model but one that asks, what is missing and what dimensions of ourselves have we left out of our care? Spirituality is central to this discussion and central to creating a caring and healing environment.

Differentiating between spirituality and religion is important. Religion refers to an organized system of beliefs shared by a group of people. It is a social institution that often, but not always, includes spirituality. Spirituality, on the other hand, is a personal concept; as such, it is defined in many ways, depending on a person's experience and expression of spirituality. The WPC model defines the spiritual dimension as a “unifying force that integrates the physical, mental, emotional, and social/relational aspects of being. The spiritual dimension is the essence of self and also transcends the self. It is our closest, most direct experience of the universal life force.”

Viewing ourselves as infinite and sacred beings changes our relationship to illness, disease, and death. Care may be oriented to the soul's purpose in addition to symptom relief. This orientation creates a potential to explore and derive meaning from life's challenges and to create a healing environment even in the face of death and terminal illness.

Healing and curing are different processes. Both healing and curing are defined as “restoring the body to health.” Although curing is mainly concerned with the physical, healing is a multidimensional process that can involve the body, mind, heart, and spirit. Healing can occur without curing and often involves a spiritual component that helps restore a person’s wholeness. Our health care system has primarily been concerned with curing. Rediscovering our role as healers is important in caring for the whole person.

Several steps are useful in integrating spirituality into the workplace:

- ☛ Setting the intention, creating the vision, and beginning the dialogue
- ☛ Creating reminders
- ☛ Creating healing spaces
- ☛ Developing policies
- ☛ Developing and mentoring staff

These steps are just suggestions; every organization will evolve its own process. The primary force for creating and sustaining a healing environment lies in the development of the staff. Staff development is an ongoing effort, so training in-house staff to become facilitators and leaders for programs, workshops, and in-services is desirable and financially prudent.

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6



Self-Compassion, Self-Care, and Self-Healing

“The moment you see how important it is to love yourself, you will stop making others suffer.”

—Thich Nhat Hanh

Self-compassion, self-care, and self-healing are key concepts in the model of whole-person caring. Self-care and self-healing cannot be practiced without an attitude of self-compassion.

In facilitating a shift toward healing and wellness, it is important to become aware of the underlying dynamics that keep us from changing. Why are some behaviors so hard to change? What keeps us stuck in unhealthy patterns of living? As mentioned, some of the reasons people resist change include the following (Oreg, 2003):

- ✿ **Find a friend or support partner:** Identifying someone with whom to share the goal of creating a healthier and more wholesome life can be of invaluable assistance. Making a commitment to meet weekly or call each other daily is a good way to positively reinforce each other.
- ✿ **Be kind and compassionate toward yourself:** The process of taking care of ourselves is ongoing. It is a process that must be entered into with gentleness and an open heart toward ourselves. Many times, old patterns of making certain everything is perfect, or negative self-talk such as “This isn’t going to work,” “Why are you wasting so much time on yourself?” and so forth will resurface and cause setbacks. This is to be expected. When setbacks occur, simply observe them and reorient yourself toward your course of self-care and self-healing.

Summary

Self-compassion is a necessary component in caring for and healing ourselves. The three components of self compassion are self-kindness versus self-judgment, a sense of common humanity versus isolation, and mindfulness versus over-identification. These components combine to create a self-compassionate frame of mind. If we cannot feel compassion toward ourselves, we cannot care well for ourselves, nor can we care well for others. When we have closed our hearts to ourselves, we have closed ourselves to the very essence of our existence.

Mindfulness practices are important in developing a self-compassionate attitude. The practice of engaging your observer is particularly useful in dealing with emotionally charged situations and difficult social encounters. The loving-kindness meditation is another practice that is useful in cultivating love for ourselves and all human beings.

Self-compassion is linked to less anxiety, less depression, and is strongly associated with emotional intelligence and wisdom. Self-compassion is linked to greater emotional resilience and psychological well-being. Self-compassionate people are happier, have better emotional coping skills, and feel more connected to others.

Self-care and self-healing practices help us live a more balanced life and facilitate greater health, harmony, and productivity in our lives. The healthier and more balanced we are, the more effective we'll be in helping and caring for others.

The concepts of self-care and self-healing are closely related and often used interchangeably. Self-care relates to health promotion and disease prevention. Self-healing, while it may encompass those aspects, often involves a broader spiritual and transcendent component related to integration and wholeness. Some of the practices associated with self-care and self-healing include reflection, introspection, mindfulness, nutrition, exercise, massage, yoga, prayer, meditation, imagery, visualization, breathing techniques, subtle energy healing, reflexology, and acupressure.

Some of the processes involved in a self-care program include the following:

- ✦ Being mindful and setting aside time for introspection and reflection
- ✦ Identifying areas for change
- ✦ Setting achievable goals and identifying specific activities to achieve goals
- ✦ Setting intention and visualizing results
- ✦ Journaling or logging activities
- ✦ Finding a friend or support partner
- ✦ Being kind and compassionate toward yourself

7



Self-Care and Self-Healing Practices

*“Every man is the builder of a temple called
his body.”*

—Henry David Thoreau

Chapter 1, “Shifting Toward a Paradigm of Healing and Wellness,” mentioned how a large percentage of chronic disease and illness can be prevented by lifestyle changes. Eating a balanced diet consisting of whole foods, exercising regularly, and not smoking are lifestyle changes that, if implemented, could reduce the incidence of chronic disease dramatically. The World Health Organization (2005) has estimated that if the major risk factors for chronic disease were eliminated, at least 80% of all heart disease, stroke, and type 2 diabetes would be prevented, as would more than 40% of cancer cases.

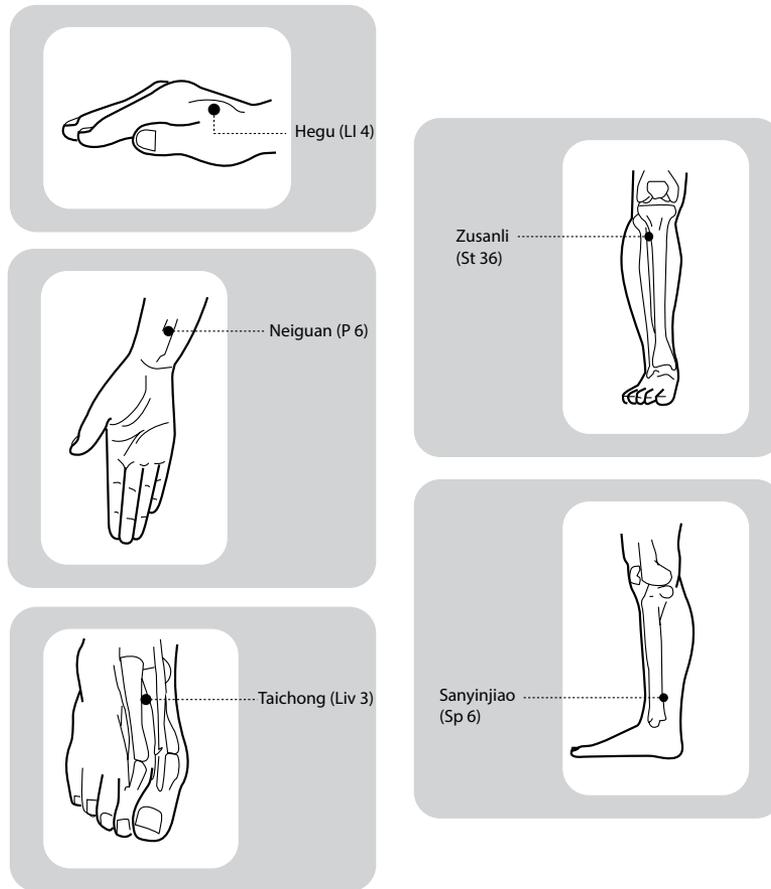


Figure 7.7 Five essential acupressure points.

Summary

A large percentage of chronic disease and illness can be prevented by lifestyle changes. Not smoking, eating a balanced diet consisting of whole foods, and exercising regularly are lifestyle changes that, if implemented, could dramatically reduce the incidence of chronic disease.

The impact that stress has on creating or contributing to illness and disease may be as significant as an unhealthy lifestyle. The American Academy of Family physicians has estimated that 60% of all problems brought to physicians in the United States are stress related, and the problems that aren't directly caused by stress are made worse or last longer because of it (Hafen, Karren, Frandsen, & Smith, 1996, p. 243). Programs that care for the whole person must include components of stress management.

Stress affects every system of the body. It has adverse effects on the brain, immune system, cardiovascular system, gastrointestinal system, reproductive system, liver, adrenal glands, pancreas, and all of our senses. Recent advances in the field of psychoneuroimmunology have demonstrated that stressful thoughts and feelings create adverse physiological effects in almost every cell of our bodies. Also, our cells can become physiologically addicted to experiencing certain emotions. That means unhealthy emotional patterns may be deeply embedded in the physiology of our bodies.

The use of self-care and self-healing practices can help reprogram our thoughts and feelings, reestablish healthy ways of being, and create healthier bodies. Using techniques such as affirmations, visualization, and the WHEE technique are ways that we can create healthier patterns in our life and mitigate the negative effects of stress.

The use of conscious breathing practices is an easy and effective way to shut down the stress response and enable us to relax during challenging times. When we are stressed, our sympathetic system engages, and we usually respond with shallow breathing, holding our breath, or irregular breathing. Using conscious breathing practices such as belly breathing, or other slow and deliberate breathing techniques, voluntarily activates the parasympathetic system and enables us to relax.

There are a variety of body-based and subtle energy practices that are very useful in balancing and unblocking the flow of energy and helping us relax. Subtle energy and body-based practices that can be incorporated into a self-care practice include therapeutic touch, healing touch, Reiki, Jyorei, qigong, Jin Shin Jyutsu, acupressure, and reflexology, to name a few.

An important aspect of developing a self-care program is getting in touch with your body, mind, heart, and soul. It is critical to deeply listen to those parts that you have shut off or neglected. When you use affirmations and visualization, you are taking time to relax and imagine what you want to create in your life. To do this, you must get in touch with how you are presently feeling. The WHEE technique engages you in a process of asking your body what it is trying to tell you. You must listen and hear your body's message. When we engage in deep abdominal breathing, we are moving our consciousness back into our body and quieting our system so that our perspective can broaden and we can respond from a place of clarity. When we incorporate the practices of harmonizing the main central vertical flow and the harmonizing finger holds, we are paying attention to the flow and pulsations of energy and learning to get in touch with our subtle energy body. Incorporating the practice of reflexology and acupressure helps us become aware of the meridians in our body and of how the different points on our body are connected to various organs, systems, and other parts of our body. Caring for ourselves is an ongoing process that involves a variety of approaches and practices that will change throughout the course of our life.

8



Optimal Health and Wellness

*“May your life be an awakening and may you
see each choice as the dawning of a new you.”*

—Anonymous



Note

The majority of this chapter was contributed by C.M. Thornton, JD, MA).

In the model of whole-person caring, optimal health and wellness occurs when we have integrated our highest potential into every aspect of our lives. This is a lifelong journey that involves valuing who we are, appreciating the preciousness of our existence, and treating ourselves with loving-kindness in all that we do. It is about living consciously: being aware of what we eat, how we care for our bodies, who we bring into our lives, the quality of our relationships, and the meaning and usefulness of our work.

Achieving optimal health means more than having acceptable health markers and avoiding chronic illnesses. Optimal health is a state of being that facilitates the achievement of higher goals and purposes. With optimal health and wellness, we can actively pursue our passions, spend meaningful time with our families, develop healthy relationships, and engage in meaningful work. Optimal health provides us with strength and confidence to overcome obstacles, grow, and evolve. Whether we are pursuing our dreams or enjoying an everyday experience, optimal health and wellness allow us to reach our highest potential.

Summary

In the model of whole-person caring, optimal health and wellness occur when we have integrated our highest potential into the various aspects of our lives. This is a lifelong journey that involves valuing who we are, appreciating the preciousness of our existence, and treating ourselves with loving-kindness in all that we do. As the spiritual/energetic essence (our highest potential) is integrated into the various aspects of life (e.g., physical, mental, emotional, social/relational, spiritual), patterns of optimal wellness manifest. Optimal wellness might manifest in the different aspects of our lives as follows:

- ☛ **Physical:** Optimal diet and exercise
- ☛ **Mental:** Ability to perceive reality with more clarity
- ☛ **Emotional:** A greater acceptance of self and others
- ☛ **Social/relational:** Engaging in relationships that are wholesome and loving
- ☛ **Spiritual:** A closer connection to God/spirit.

The fundamental guidelines for optimal nutrition have not changed over the years: Eat a plant-based diet low in saturated fats, sodium, and added sugars. Research has shown that populations with the longest lifespan, including several Asian and Mediterranean populations, tend to eat relatively low-calorie diets that are high in vitamins, minerals, fibers, and other plant compounds (phytochemicals) and rely less on foods from animal sources. Confusion arises because most nutrition advice comes from the media and the food industry.

Due to our culture of excessive consumption and inactivity, 64% of American women and 72% of American men are overweight or obese, with about one third of adults being obese. Yet we can get all the nutrients we need without overconsuming calories by choosing nutrient-dense foods—foods that contain a relatively high concentration of nutrients for the calories they contain. For example, fruits and vegetables are nutrient dense because they are low in calories but contain a lot of vitamins and minerals. In contrast, sugar and alcohol have low nutrient density because they contain empty calories without providing vitamins, minerals, or protein.

Most experts agree that it is better to obtain nutrients from whole foods, not pills and powders. Food contains non-nutrients such as phytochemicals, which have disease-fighting properties but cannot be extracted and replicated in supplement form. Research shows that most people take supplements that they do not need and do not take supplements containing nutrients missing in their diet. Online dietary analysis programs, such as Sparkpeople or the USDA's SuperTracker, can be used to track dietary intake and identify potential deficiencies or toxicities. Refrain from buying the newest "magic pill" or trendy supplement. If a product sounds too good to be true, it probably is.

Engaging in regular physical activity is one of the most effective and accessible means of improving and maintaining both physical and mental health. A combination of aerobic exercise (swimming, running, cycling, brisk walking),

strength training (lifting weights, using bands), and flexibility exercise (stretching, yoga, Pilates) should be combined for maximum benefit. Optimal health and wellness is a state of being that facilitates the achievement of higher goals and purposes and allows us to reach our highest potential.

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9



Therapeutic Partnering and Transformational Leadership

“True compassion only occurs among equals.”

—Dalai Lama

Therapeutic partnering and transformational leadership are key concepts of the model of whole-person caring. Together, these concepts help organizations bring to life a caring and healing environment. In the model of whole-person caring, the foundation for all relationships and all leadership is based in the spiritual-energetic realm. So while therapeutic partnering and transformational leadership are different concepts, what supports and enlivens them is the same.

Therapeutic Partnering

Therapeutic means to promote health and healing. Partner is defined as one with whom we share a common mission and purpose. A healthy partnership is characterized by mutual respect, compassion, trust, and clear

leadership literature—and have attempted to examine how a greater sense of spirituality in the workplace might be fostered (Avolio, Walumbwa, & Weber, 2009). Some contend that spiritual leadership fosters the creation of organizational cultures characterized by altruistic love, where leaders and followers express genuine care, concern, and appreciation for both themselves and others.

The ultimate effect of spiritual leadership is to bring together or create a sense of fusion among the four fundamental forces of human existence (body, mind, heart, and spirit) so that people are motivated for high performance, have increased organizational commitment, and personally experience joy, peace, and serenity. (Fry, 2003, p. 727)

This is precisely what the model of whole-person caring was designed to do. Spirituality is not a separate process, but it is the very foundation of our being. Our spiritual dimension is the essence of who we are. As we come closer and closer to that essence, every aspect of our lives becomes integrated and transformed. When leaders lead from this perspective, the soul of the organization emerges, and a caring and healing environment is created. Leadership development within the model of whole-person caring is a spiritual practice: transforming us, our patients, and our coworkers.

Summary

Therapeutic partnering and transformational leadership are key concepts of the model of whole-person caring. Therapeutic partnering in the WPC model is defined as a relationship between people whose common mission and purpose is to promote healing and wellness and is characterized by mutual power, respect, compassion, trust, and clear communication. There are two primary relationships involved in therapeutic partnering: the relationship between the health care provider and the patient and the relationship between health care providers.

Therapeutic partnerships promote healing and wellness. In therapeutic partnerships, the health care provider creates sacred space for the patient through the process of heart centering. This results in many positive emotional and physiological effects. In the model of whole-person caring, we call this the *field of healing*. A person who receives this type of care often experiences a deep level of caring and a feeling of being healed. The health care provider also benefits from the positive effects that are generated through the field of healing because they are an inseparable part of the energy field. This is a wonderful antidote to compassion fatigue, which is so prevalent among nurses and caregivers.

Therapeutic partnering empowers people to take control of their health. In therapeutic partnering, the patient is a partner in his or her plan of care and treatment. While the provider offers a diagnosis and options for treatment, the patient ultimately decides what he or she will do and is in control of decisions regarding his or her own health. This is paramount in reducing the incidence of chronic disease and creating a healthier society. Therapeutic partnering encourages and supports patients in developing their own practice and plans for healing and wellness.

In the workplace, therapeutic partnering fosters respect, compassion, trust, and clear communication. Every member of the team is treated equally and is crucial in providing the best possible care. Therapeutic partnering fosters a caring and healing environment in the workplace.

The concept of therapeutic partnering is particularly useful in the integrative health care setting. Integrative care involves combining conventional medicine with CAM practices. The prevailing model is based on inequitable partnerships where the medical practitioner is the gatekeeper and the CAM practitioner functions as a subordinate. The concept of therapeutic partnerships requires that care is patient focused, that collaboration takes place, and that practices will evolve based on their clinical effectiveness and without bias toward status or position.

Leadership within the model of whole-person caring is spiritually based and transformational in nature. The foundation for leadership in the WPC model is based in the spiritual or energetic realm. Leaders must learn to access their own spiritual or energetic essence to be effective. Activities that can help leaders access their spiritual nature include prayer, meditation, reflective and introspective practices, centering methods, journaling, dream work, and learning to be fully present to life. The evolution of leadership is a process of deep inner growth, change, and development. Leadership development within the model of whole-person caring is a spiritual practice, transforming us, our patients, and our coworkers.

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10



Caring as Sacred Practice

“The highest happiness of man...is to have probed what is knowable and quietly to revere what is unknowable.”

—Johann Wolfgang von Goethe

In the model of whole-person caring, caring for people is considered to be sacred work. The final concept of the model, caring as sacred practice, helps evolve the attitude and approach that we bring to our work and into our lives. Transforming our workplace is first and foremost a matter of transforming ourselves. So beginning to perceive ourselves as sacred is the first step in this journey.

How do we perceive ourselves as sacred? What does it mean to do sacred work? The idea of sacred is not to be misconstrued with being religious and singing hymnals in the hallways. It is not about being sanctimonious, self-righteous, or holy (as in holier-than-thou). It does not mean that we must be somber and serious in our dealings

space for patients. The model of whole-person caring reminds us that caring for people is an honor and a privilege.

Summary

The final concept of the model of whole-person caring, caring as sacred practice, helps evolve the attitude and approach that we bring to our work and into our lives. Approaching our life as sacred means having a deep respect and reverence for all of life...beginning with ourselves.

Each of us has the ability to heal. Healing is a process involving self-knowledge and self-awareness. Reflective practices facilitate the process of self-knowledge and self-awareness and therefore help to cultivate our inner healer. Meditation is perhaps the single most useful reflective practice to help gain self-awareness and self-knowledge, increase intuition, and enhance one's spiritual development. Journaling is another reflective process that enhances self-understanding. Dream work can provide insights on those dimensions of ourselves that we have repressed or shut down.

Being reflective while we are interacting with others is achieved through centering, transpersonal/transcendent communication, and other practices such as engaging our observer. These practices allow us to reflect on situations as they happen and to respond from a place of clarity, without reflexively engaging past patterns.

Our presence is one of the most powerful tools for healing. Realizing that we are open fields of energy that are in continual process with everything else helps us understand the effects that our state of being can have on another. All that we are—our thoughts, behaviors, emotions, that which is conscious, and that which is unconscious—interacts and affects everything and everyone in our environment. The degree to which we can be a healing presence is in large

part determined by our self-knowledge and the health and wholeness that we embrace in our own lives.

Creating a field of healing is facilitated through intention, heart centering, and transcendent/transpersonal presence. Creating an intention is a powerful way for the health care provider to create a healing environment. It is a positive affirmation that aligns us with our creative force and sets into motion the caring-healing process.

Heart centering is a process in which the health care provider sets aside concerns and thoughts, focuses his or her attention on the heart, and connects with feelings of love and compassion. This creates a condition in the heart called *heart coherence* that results in many physiological changes, such as increased IgA levels, balanced heart rhythms, and increased mental clarity. In addition, heart coherence reduces sleeplessness, body aches, and fatigue, and reduces anger, sadness, hypertension, and other chronic problems. When the health care provider becomes heart centered, a healing environment is created in which the patient feels safe, nurtured, and loved, and is in an optimal state for healing to occur.

Presence is defined as a way of being, a way of relating, a way of being with, and a way of being there. Research has identified four ways of being: presence, partial presence, full presence, and transcendent presence. It is at the transcendent level of presence that the potential for the deepest healing occurs. The transpersonal caring relationship is similar to transcendent presence. Transcendent presence is felt as peaceful, comforting, and harmonious. When we are able to connect with our own heart and soul, we can establish that connection with others.

Embracing the wholeness and sacredness of life involves being present to all of life. Staying present and connecting with someone center to center, whether

bearing witness to their joy, their suffering, their grief, their torment, or their confusion, is a type of presence that creates a healing environment and honors the wholeness of that person's life.

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