

wholistic
NOW!



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Executive Editor

Dr. Sue Roe

It is my pleasure to WELCOME you to our first issue of Wholistic Now! We are so pleased to have you be a part of our community. We hope you enjoy our features and resources on holistic health, wellness, leadership, and education. We also look forward to your contributions to our newsletter. Feel free to contact Managing Editor, Dr. Maryann Ivons, with features, articles, resources, or events you want to include in one of our issues. There are also opportunities to advertise. Feel free to contact me at:

sroe@theroegroup.org



Managing Editor

Dr. Maryann Ivons

Thank you for joining our newsletter community. I am here to assist you with your subscription and your contributions. Please feel free to let me know about your events and if you would like to advertise. I am also available for any questions you may have. Feel free to contact me at:

mivons@theroegroup.org



Subscriber Engagement Specialist

Delores Tanglen

Welcome to Wholistic Now! I am responsible for ensuring each subscriber in our community receives their newsletter trouble-free. I am also happy to welcome our new subscribers. You can reach me at:

dtanglen@theroegroup.org

Spotlight:

Editorial Advisory Board

Our prestigious Editorial Advisory Board reviews each newsletter and provides their expert input. Our Board members will be spotlighted in future issues.

- ***Deborah Aurianivar, MSM, BS-Ed, Dipl. OM, LAC, certified acu-detox specialist, certified accupressurist, certified feng shui consultant***
- ***Jacky Burke Cherney, MS, CSCS, CPT, CISSN***
- ***Susan B. Collins, APRN, FNP, AHN***
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- ***Cynthia L. Viera, PhD, LAC, LASAC***
- ***Mary Grace Warner, MD, MD(H), CCH***
- ***Sherry Zumbrunnen, MSN, BSN, RN, HB-BC***

Feature Article: *Living Medicine*

By Dr. Gladys Taylor McGarey, MD, MD(H)



I was born in 1920 and the world then was a very different place. When I was two years old, I knew that I would be a doctor. Later, the field of medicine I was introduced to during WW 2 was a battlefield. Disease, pain, and death were our enemies and our job was to find ways of getting rid of them. I did my best to keep my focus on the work I was doing but felt there was always something missing. I loved working with women who were birthing their babies but we had been taught that doctors "delivered" babies. I have learned that we deliver pizzas or speeches but women birth babies. We help. I have loved working with and helping people who were sick but I have learned that the patient is the one who does the healing. A doctor might get rid of the disease but the patient is still sick or the patient still has the disease but in spite of the disease, or perhaps because of it, they have become whole. They are the living examples of what I call ***Living Medicine***.

It has taken me almost 96 years to figure out that in our fight against death we are killing life. We will never get rid of death or birth. Every second of our lives cells are being born and then dying. It is the process that keeps us alive. Our job, no matter which field of healing we are working in, or what our life work is, to learn how to "live" our lives. No one else can live it for us and this moment is the one we have to choose how we are going to live. We can choose to age into health or not!

Health is the process of adjusting to Life itself. Years ago I remember working with a patient who had a chronic illness. We had worked for several years trying to get rid of the disease. He would get some relief and I was able to help but we were not getting rid of the disease. One day I said to him, "Perhaps there is a better way of dealing with this problem. You know that when a tree grows and its roots come to a huge bolder they can spend all of their energy trying to get through that rock or break it up. They may find ways to grow around that rock, make it part of its root structure, and, as a result, become a stronger tree. Then when the storms of life come it is not easily blown over. If it is blown over, it becomes a beautiful stump. So I said to him if we look at this disease as that big rock and realize that we have done everything we could to get rid of it; maybe we have another option. We can begin looking for ways in which we can enhance your life, giving you something to live for besides the disease. The disease may still be there but you don't think of yourself as the disease, a damaged person. You find out who you really are."

I have learned that true healing comes when the "physician within" each of us works with the health caregiver on the outside. No one really heals another person. It is team work. A surgeon can do a beautiful job but it is the patient who does the healing. After the surgery it is the health caregiver's job to support patients as they do their own healing. We encourage and give the power back to patients and help them with their healing. This is ***Living Medicine***.

One of the lessons we are taught is to not give people false hope. I learned that I could not live like that because there is not such a thing as "false hope." There are false expectations and false information but not false hope because hope is a spiritual quality and sometimes it is the only thing we can give one another. Sometimes hope is the very thing that helps the healing process. This is ***Living Medicine***.

There are **5 Ls** which are the foundation for ***Living Medicine***.

1. **Life:** Without life nothing else counts. Life attracts life.
2. **Love:** No real healing happens without love. A disease may be cured but the

patient is not healed or, the patient may be made whole but the disease not cured.

3. **Laughter:** Joy and laughter activate the life force and make life wonderful.
4. **Labor:** Without labor nothing gets done. We can really want the three above but if we are not willing to work on them they cannot be realized.
5. **Listening:** We have to be able to listen to ourselves, our bodies, our earth and planet, the true wisdom of others and spirit (in whatever form we understand our spirit).

We have a choice. Do we continue to live in a world where the focus of healing is on killing, fear, and hate? Or on life, living, love, and light? We are building the future our children will live in. As we continue to grow in the world of science and technology, let us choose to use it to promote life, living in love, hope, and joy . . . in **Living Medicine!**

Dr. Gladys Taylor McGarey is internationally recognized as the "Mother of Holistic Medicine." Dr. Gladys, as she is affectionately known, is board certified in Holistic and Integrated Medicine and has held a family practice for more than sixty years. She is the co-founder of the American Holistic Medical Association, as well as the co-founder of the Academy of Parapsychology and Medicine. Her efforts worldwide continue to receive international acclaim. Dr. Gladys is the author of four books, "The Physician within You," "Born to Live," "Living Medicine," and "The World Needs Old Ladies." Her public speaking career bridges four decades during which she has shared the podium with Andrew Weil, Deepak Chopra, Wayne Dyer, and Elisabeth Kübler-Ross. Dr. Gladys' work lives on through The Foundation for Living Medicine, which helps to expand the knowledge and application of holistic principles through scientific research and education. To learn more about the Foundation and/or to receive information about purchasing Dr. Gladys' books please go to:

<http://www.thefoundationforlivingmedicine.org/>

Quarterly Snapshot: *Holistic Leadership*

An Interview With:



Diane Drexler, DNP, MBA, BSN, RN, FACHE

It was my pleasure to interview Dr. Diane Drexler, Chief Nursing Officer for Yavapai Regional Medical Center in Prescott, Arizona. I was delighted that Diane agreed to be interviewed for the inaugural issue of **Wholistic Now!** I believe she is a model of holistic leadership and a mentor for

holistic leaders. ***Dr. Sue Roe***

What is your perspective on being a holistic leader?

I believe holistic leadership is truly the blend of mind, body, and spirit. I

consciously make an effort to be a holistic leader by caring about staff; I focus on them and not solely on what they are doing. By doing this there is valued added to our relationship resulting in a mutual commitment particularly as I bring forward new initiatives. Staff response then is not “no we can’t do this” but rather, “how can we do it?” Over the years I have found that as a holistic leader it is important that I understand staff members as individuals and learn about the types of leaders they are. And I have learned that it is important that staff learn about my style, as well. This aids in our ability to effectively communicate, leverage, and maximize our leadership resources so we can work as a collective team. I have also found that as you practice holistic leadership it becomes natural. You find yourself transitioning from being a manager to being a leader and developing strong relationships with your staff.

What has been the payoff of being a holistic leader?

By responding holistically I give staff “permission” to be able to do what is needed. I empower them to take appropriate action. Seven years ago I developed a Shared Leadership Council where staff, over time, assumed ownership of their practice and processes. A clear payoff arrived this winter when all beds were filled and every day was a challenge. In the past I would have been the one to direct all activities. In contrast, I found that I did not need to be present except to provide support. Staff members were asking all the needed questions and came up with all of the ideas and strategies to move forward and accommodate patients. Clearly they demonstrated ownership, empowerment, and engagement. And we have also seen satisfaction scores rise.

Has your holistic leadership changed over time?

Absolutely! I had an “aha” moment a few years ago. I always thought I was patient- centered but that perception was changed in just a day. We had a patient I had grown to know who was dying from cancer. He was asking to leave against medical advice (AMA). It had been determined by the medical staff that he was at high risk to leave. I was asked to talk with him, I prepared, and was ready to convince him to stay. When I walked into his room we said hello and he followed with, “It is my birthday and I want to go dancing. Can you help me do that?” That completely changed my frame. I called on all of the resources at hand and made it happen; he went home! His son called two weeks later to let me know his father had died. He thanked me for letting his father “dance” to the end. The “aha” was that being holistic isn’t about me or medical care alone, it is doing the “right thing” for patients.

What is the “down-side” of holistic leadership?

This is something you have to work on all of the time and it takes time and energy. Daily there is a lot of pressure, stress, and needed responses to often unreasonable people. As a result it is easy to become defensive, to not be holistic and to be reactionary. Rather, I have learned to focus on and be mindful of my approach and the intended goal. I have learned to reflect. Every day as I drive home I think about my day. What could have I done better? What conversations could have been more holistic?

In what areas would you like to develop further as a holistic leader?

I believe I have a good grasp of what is needed in nursing. I would like to take my holistic leadership practice and skills to the next level with colleagues and physicians. I know I will need to strengthen my approach, set parameters and boundaries, and follow-up in a timely manner along with emphasizing body, mind, and spirit.

How do you think we should grow holistic leaders?

We need to start early in educational programs to be successful. Have students understand and practice taking care of patients with a total mind, body, spirit approach and have that model continue influencing student's practice as they become leaders. Senior leaders also need to reinforce and encourage the holistic leadership model.

Diane shared at the end of our interview, “We are given the privilege of taking care of people at their most vulnerable time. It is really a privilege. They are scared and anxious and having a difficult time. We must never lost sight of

that. Remember, patients expect that we already deliver safe quality clinical care but it is how we make patients feel that makes our care holistic!”

Diane Drexler is the Chief Nursing Officer for Yavapai Regional Medical Center (YRMC) in Prescott, Arizona. Diane provides leadership and strategic vision for nursing services. Prior to joining YRMC, Diane served as the Vice President of Patient Care Services at Cancer Treatment Centers of America (CTCA), Western Regional Medical Center, located in Phoenix. CTCA opened in December 2008, bringing the organization’s model of integrative and compassionate cancer care to the region. Diane came to CTCA from Banner Estrella Medical Center (BEMC), where she served as its inaugural CNO. BEMC opened in January 2005 as the “hospital for the future,” employing advanced information technology in a community health care setting. She is a member of various organizations including the American Organization of Nurse Executives (AONE), Arizona Organization of Nurse Leaders (AzONL), and the American College of Healthcare Executives (ACHE). In 2006, she participated in the Wharton Fellows Nurse Executive Leadership Program. Diane is also a graduate of the Robert Wood Johnson Executive Nurse Fellowship Program. Diane is a registered nurse and has earned a Doctor of Nursing Practice (DNP), a Master of Business Administration (MBA), and a Bachelor of Science in Nursing (BSN).

Quarterly Snapshot: *Holistic Education*

Movement and Motion Can Enhance Learning



By Christopher Black, MA Ed

Adult learning is a fascinating and complex field of study. Many would agree that learning can have a relatively lasting change in behavior: in the cognitive (thinking), psychomotor (doing), or affective (believing) domains. It is also believed that these changes can be measured.

There are some general concepts that most adult learning experts agree on: Adult learners bring with them an array of life experience, are associative learners, are largely intrinsically motivated, and are problem-solvers. As an instructor, you are tasked with facilitating changes in behaviors by helping to identify needed change and by delivering instruction to promote that change.

There are many ways to deliver instruction. ***Movement and Motion Enhances Learning (MMEL)*** is one such strategy. MMEL assumes that people learn best when they are healthy. Physical health, wellness of the mind, and emotional health are essential to creating long-lasting changes in behavior.

Let’s look at some of the concepts associated with MMEL and some of the strategies.

Instructors have great influence on students and can effect change by messaging health concepts and strategies. Encouraging students, in fun and creative ways to eat healthy food, drink water, and exercise regularly is one component of MMEL. For example, institute a guideline of eating only healthy snacks during class. A fun water bottle contest or water consumption log can encourage the students to stay hydrated. A quick start of class share about what they did for exercise that day (or week) may motivate some students.

Inside the classroom movement can enhance learning. “Stand and be Heard” is a movement methodology in which anyone speaking must stand. The physical act of rising releases neuro-chemicals that increase the pulse rate and respiration, and increases blood-flow to the brain and body. This simple act can re-focus attention for several minutes and increases a person’s ability to learn.

Another movement methodology is “Last Person Standing” in which all of the students stand and answer quiz questions. If a student answers correctly he or she remains standing. If a student answers incorrectly, he or she sits down. Continue asking questions with increasing difficulty until only one person is standing. That person wins a “fabulous prize” – usually a trinket such as a pen or small item from the dollar store.

The final example of a movement methodology is “Spin Around.” In this activity, three to four students stand back-to-back with small white-boards and a marker. The instructor asks a question and students have 20 seconds to write answers on their board. At the 20-second mark the instructor calls out “Spin” and the students face each other to review their answers. They then have an additional 60 seconds to discuss their answers and choose the best answer. Once, decided, each group shares their answer with the class. This is a form of distillation using movement; it is fun and highly effective.

Remember that the act of seeing and hearing motion can be effective tools to refocus attention. Motion elicits a type of startle response in the brain. This releases neurotransmitters, which in turn, establishes a better memory pathway. A simple motion technique is called “Sign Posting.” Imagine the classroom as a baseball diamond. The instructor begins at home plate and delivers instructional content related to a key learning concept. After this first instructional content, the instructor walks to first base and presents additional content related to the concept. It is important to not speak while walking. Wait until arrival at the next base. This stimulates an anticipation response in the student and refocuses attention. Then, walk to second base and deliver the second additional content related to the concept. Then walk to the third base and deliver the final content related to the concept. Finally, walk to home plate and deliver a summary of what was shared related to this key learning concept. The use of motion can effectively maintain and refocus attention.

Instructors have the privilege of helping people change what they know, can do, and believe. As agents of change finding and using new and innovative ways to create learning environments will help students make these changes. MMEL is one you can start using tomorrow. It has unlimited potential to promote health, movement, and motion in your classrooms.

Chris Black has over 30 years of educational leadership experience in both public safety and community college environments. Chris, a firefighter/paramedic, is also a retired Division Chief. As an educational leader, Chris has been involved in local, tribal, state, and national projects. He was named Employee of the Year for the State of Arizona Department of Health Services and was instrumental in drafting State EMS legislation and administrative rules. As the Arizona delegate to the National Association of EMS State Training Coordinators he worked on multiple national initiatives. Chris also provided leadership in developing one of the largest public access AED programs in the State of Arizona. Chris was a charter member of the National Association of EMS Educators and National Native American EMS Association. Currently, Chris’ focus is on program, instructor, and leadership development. He teaches regularly and works occasionally as a paramedic. Chris holds a bachelor’s degree in psychology and a master’s degree in education. He is also a board certified EMS instructor and holds a National EMS Educator Certification.

Quarterly Snapshot: ***Holistic Health and Wellness***

Medical Intuition: The "Inside Stories"



By Wendie Colter, CMIP www.thepracticalpath.com

What if your bad knee wanted you to live life more authentically? What if your stuffed sinuses were holding onto painful childhood memories? Could your aching back help you gain closure with your ex? Imagine what our bodies could tell us about our physical well-being, thoughts, emotions, and choices, if only we knew how to understand them?

What Is Medical Intuition?

One of the main tenets of energy medicine is the principle that physical imbalances may have a traumatic event at their root, sometimes deeply hidden from our conscious awareness. We know from somatic modalities such as Rolfing, craniosacral, kinesiology, and others, that our bodies can store the physical and emotional effects of trauma for years. This "stuck" energy can potentially manifest as acute or chronic imbalances. Recent studies in epigenetics indicate that we may even inherit significant impacts to our genetic makeup from traumas our parents or grandparents experienced. Medical Intuition can allow access to the "inside stories" at the roots of illness, imbalance, and disease.

A medically intuitive practitioner may "see" the physical symptoms, but will also look for indicators of when an imbalance may have begun, why it may have occurred and how it might shift. Through the use of meta-sensory skills, "meta" meaning beyond a typical five-senses experience, medical intuition employs a unique visual intuitive skill set that allows the practitioner to intuitively "see" detailed information in both the physical body and the bio-field, at the origination points of an imbalance, not only from the physical aspects, but also from the mental, emotional and even spiritual viewpoints. This holistic perspective can create positive and profound shifts for clients, and can help them find greater opportunities for relief, deeper permission for health and wellness, and a more complete awareness of their healing journey.

Medical Intuition and Modalities

Medical Intuition is not defined as an energy-based modality, as is Reiki, Healing Touch, or other methods. Medical Intuition is a set of refined intuitive skills that is designed to support and enhance all modalities, from complementary and alternative, to energy or bio-field-based, to integrative and functional perspectives.

In current health care practices, a full-scope assessment of the underlying root causes from the physical, emotional, mental and spiritual perspectives is ignored, misunderstood or is simply not part of standard protocols. Medical Intuition supports a truly holistic perspective, for both the practitioner and the client or patient.

Aren't You Just Born With It?

The question I get asked most often is, "How can you teach intuition? Aren't people just born with it?" After many years of teaching intuitive development to all kinds of people, even those who don't identify as intuitive or are die-hard skeptics – my opinion is that everyone is born with it! As with any new skill such as learning how to play an instrument or how to speak a new language intuition can not only be developed, but it can also be improved and refined.

Many health care professionals already experience intuition in their practices. Nurses are encouraged to trust their "gut feelings."^{1, 2} Some practitioners report a sense of "knowing awareness" about a patient or client's issues, with no logical explanation.^{3, 4} I call this experience a "flash of insight," or random moments of intuitive clarity. Flashes of insight are wonderful and often profound experiences. But most people experience them as unpredictable and unexpected.

Being a Medical Intuitive

I experience the medical intuitive process as a deliberate, informative conversation with the body and the energy systems, in order to assist people in connecting to the source of their own healing.

Although I had been interested in all things metaphysical from a young age, my

personal journey as a healer began not long after I read Deepak Chopra's "Quantum Healing," a seminal book on visualization in the mind-body healing process. My body had created a small, benign tumor, which I wanted to try to heal using the visualization techniques that Dr. Chopra described in the book. Both I and my doctor were rather shocked to find that the techniques actually worked. The tumor had shrunk by half within two weeks!

That experience propelled me towards years of intensive study in metaphysics and energy healing. I received certifications as a master energy healing practitioner, clairvoyant practitioner, teacher, minister, and transformational coach and I have had a private practice for nearly 20 years. I served as staff instructor at a respected school of metaphysics for over five years, and have been teaching intuitive development to wellness professionals for 10 years. I've been truly privileged and blessed to work with brilliant teachers and dedicated healers, as well as wonderful students and clients from all over the world.

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1. Brush J.E., Sherbino J., & Norman G.R. (2017). How expert clinicians intuitively recognize a medical diagnosis. *American Journal of Medicine*, 130(6), 629-634. doi:10.1016/j.amjmed.2017.01.045
2. Liem T. (2017). *Intuitive Judgment in the Context of Osteopathic Clinical Reasoning*. *The Journal of the American Osteopathic Association*, 117(9), 586-594. doi:10.7556/jaoa.2017.113
3. Hassani, P., Abdi, A., Jalali, R., & Salari, N. (2017). Relationship between the use of intuition in clinical practice and the clinical competence of critical care nurses. *International Journal of Evidence-Based Healthcare*, 1. doi:10.1097/xeb.0000000000000113
4. Melin-Johansson, C., Palmqvist, R., & Rönnerberg, L. (2017). Clinical intuition in the nursing process and decision-making-A mixed-studies review. *Journal of Clinical Nursing*, 26, (23-24), 3936-3949. doi:10.1111/jocn.13814

Wendie Colter is CEO and founder of The Practical Path, Inc., presenting accredited, certification programs in Medical Intuition to wellness professionals. Students report powerful results in their practices, in many cases with clients and patients who had previously been blocked or stalled in their healing process. She teaches at Scripps Memorial Hospital/Prebys Cardiovascular Center in La Jolla, CA, as well as comprehensive live online programs. Ms. Colter has presented workshops and talks at the Scripps Center for Integrative Medicine Holistic Nursing Conference, ISSSEEM (International Society for the Study of Subtle Energy and Energy Medicine), ACEP (Association for Comprehensive Energy Psychology), IONS (Institute for Noetic Sciences), and has been a featured guest on L.A. Talk Radio and Om Times Radio.



NEWS From...

The Arizona Chapter . . . a Chapter of the American Holistic Nurses Association

It is very exciting to share that in July 2018 the Arizona Chapter . . . a chapter of the **American Holistic Nurses Association (AHNA)** was launched. Some of

you may remember that in the past there was a Phoenix chapter which was led by Sue Roe, and previously led by Debbie Harbinson and Sherry Zumbrunnen. The three of us decided to take on the role of co-chapter leaders because we felt the time had come to re-energize a chapter. We also thought chapter activities should be available state-wide. Hence, the Arizona chapter.

Plans include holding Holistic Nursing Symposiums across the state. The purpose of the Symposiums are to introduce nurses to different holistic modalities and practitioners and to explore how these modalities can be used in practice to promote health and well-being. While the focus is on nursing, any healthcare provider is welcome to attend.

The first Symposium will be held in Phoenix this fall. The date and location will be announced shortly. We are also planning a Symposium in Tucson in February 2019, in Flagstaff in July 2019, and in Yuma October 2019. See below for more information about the Phoenix Fall Symposium.

As co-chapter leaders, we also felt it would be important to have Holistic Nursing Forums. These will be held in the evening at different sites across the state. They will focus on a brief holistic nursing presentation and will emphasize networking. The first Forum is scheduled for April 2019 in Prescott and is hosted by Yavapai Regional Medical Center. Details will be provided in the next issue of **Wholistic Now!**

There are also plans to schedule visits to nursing programs and medical centers to share information about the benefits of integrating holistic nursing into practice.

In addition, from feedback provided by past chapter members, NCE228- Holistic Nursing Fundamentals - Certification Exam Preparation, an online three credit course offered by Rio Salado College is now available to help prepare for holistic nursing certification offered through the American Holistic Nurses Credentialing Corporation (AHNCC). See below for more information.

And, as a member benefit, a **Wholistic Now!** Annual subscription is being provided to each active Arizona member of the AHNA. News about the Arizona chapter will be featured in each issue.

Contact information for the Arizona Chapter follows.

Address:

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Scottsdale AZ 85260

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Sherry Zumbrunnen 480-625-9119

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Sue Roe at sroe@rgent.org

We welcome any questions you may have, comments, ways you might like to participate or host an event, and ideas for chapter activities.

P.S. If you are not a member of the AHNA and are interested in learning more about the Association and/or joining go to: <http://www.ahna.org/>

The Arizona Chapter . . . a Chapter of the American Holistic Nurses Association

The Holistic Nursing Symposium

Fall, 2018

Registration Fee is \$39

An announcement with more details will follow.

However, if you would like to register now for this exciting Symposium see the registration information below in "Upcoming Events."

Go to Upcoming Events for registration

CHAPTER EVENTS 2019

Holistic Nursing Symposium Schedule

February 2019 - Tucson, Arizona

July 2019 - Flagstaff, Arizona

October 2019 - Yuma, Arizona

Holistic Nursing Forum Schedule

April 2019 - Prescott, Arizona

Hosted by Yavapai Regional Medical Center

SEE DETAILS IN FUTURE ANNOUNCEMENTS

NCE228 - Holistic Nursing Fundamentals - Certification Exam Preparation



Do you have a strong interest in holistic nursing and integrating wellness, healing, and growth into the care you provide to individuals, families, and the communities you serve?

If you are ready to make a difference in your nursing practice, consider holistic nursing certification.

Get started by enrolling in [NCE228- Holistic Nursing Fundamentals-Certification Exam Preparation](#), an online three credit course offered by Rio Salado College. It will help you prepare for certification offered through the American Holistic Nurses Credentialing Corporation (AHNCC).

NCE228 starts every Monday. To learn more contact shelley.dennis@riosalado.edu

Learn More at Rio Salado College

Multi-Disciplinary Corner

Meet Our Newest Healthcare Team Member - The Medical Clown

Meet a new interdisciplinary paraprofessional member of the healthcare team; **the medical clown** - an inspiration to patients! The medical clown can positively impact patient recovery and help build a more restorative care environment.

Medical clowns are therapeutic allies to patients. They offer their authentic presence through joy, interactive humor, and empathy by immediately building rapport with patients and creating an amusing, relaxing, and overall beneficial environment that communicates: YOU are powerful, YOU have all that you need for well-being, all is well at this time, and please allow us to assist YOU in your healing journey.

We know the relaxation response supports patient resiliency. Why not strengthen it? The use of a medical clown allows us to leverage this state when offering necessary interventions of surgery, chemotherapy, nutrition, or mental health.

The medical clown is different from the volunteer clowning role. The medical clown is an individual with an undergraduate degree in the performance arts who completes an advanced college-level program in medical clowning. The vision is artists who bring their brilliant talent to the bedside after gaining considerable regulated supervision and instruction to assist the healthcare team achieve an amazing restorative and helpful process.

The role of the medical clown is to partner with clinical staff and patient support teams (parents and other family and friends) to empower patients. While still accepting and acknowledging the patient's current status as well as organizational policies and procedures, the medical clown's focus is on what is right with the person. The medical clown begins to construct this art by first offering simple invitations to interact scanning the patient for the flicker, the twinkle, the ember of joy to be fanned, and then filling the room with the warm glow of delight! The patient is in charge of everything, even giving permission to allow the medical clown to enter the room and letting the clown know when to leave.

In his book, *Medical Clowning, The Healing Performance*, Dr. Amon Raviv (the first practitioner awarded a PhD in Medical Clowning), describes elements critical to the training and evaluation of medical clowns: pleasure, empathy, and "diag-red-nosis" (information gained through active listening and rapport). The medical clown interaction with patients is then the result of these elements within a framework of their unique improvisations and witticisms.

The outcomes of the use of medical clowns, to date, has been overwhelmingly positive throughout the world. The Dream Doctors Project (www.dreamdoctorsproject.org) in Israel has been very successful with the integration of medical clowns into acute care and trauma settings. Their education is a collaboration with Haifa University, Israel. The Red Noses Clown Doctors (www.rednoses.eu) in Austria continues to be a clearing house for the science of medical clowning and facilitates research of methods of sustainability in programming throughout the rest of the world.

Raviv, A. (2018). *Medical clowning: The healing performance*. Calcutta, India: Seagull Books.

[RED NOSES Clowndoctors International](#)



[Dream Doctors 2017](#)



Michael Christensen

Currently there are few medical clown programs in the U.S. (e.g., in Texas) and Canada. However, we are about to change that in Arizona! The newly formed Foundation for Advancing Medical Clowning - Medical Clown Exchange will host Michael Christensen, internationally known founder of



Medical Clowning, in Phoenix, AZ, November 7-10, 2018 at various sponsored sites. He will present at the Medical Clown Summit on Friday morning, November 9, and will also offer his premier workshop, Human First, across the valley. These are invitation-only events.

Human First includes cultivating a state of authentic presence, becoming aware that every BODY is talking (how one stands, sits or gestures), and reminding people that each of us has a red nose in our pocket - NEVER underestimate the power of play!

The overall goal of this first visit by Michael Christensen is to “inoculate” our healthcare community with the tremendous benefits of medical clowning.

For additional information on Michael Christensen’s visit, to sponsor a Human First workshop, and/or to be placed on the invitation list for a November event, contact Debbie Harbinson at debbie@harbinsonwellness.com



Homeopathic Nurses Association

DID YOU KNOW!

The Homeopathic Nurses Association (HNA) is a professional support organization for nurses interested in or who use homeopathy with their family and friends, or are homeopathic practitioners.

Founded in 1984, HNA works to bring homeopathy into the mainstream of nursing care. We reach out to those in the nursing profession in order to share the benefits of homeopathic health care and the rewards of homeopathic practice.

Two year membership is \$100; \$70 for seniors and students. Membership benefits include networking, monthly calls, a quarterly newsletter, practitioner referrals, and CEU Programs.

HNA is great place to join with other nurses to learn and apply the principles of homeopathy to your practice or for self-care.

[Click Here For More Information](#)

Quarterly Resources: Integrative

Modalities and Pain Relief



In this issue of Wholistic Now! find resources on the use of integrative modalities for pain relief.

[Mind/Body Approaches for Chronic Pain](#)

[VA Research on Pain Management-Complementary and Integrative Medicine](#)

[Holistic Nurses Pain Relief Tools for Patients & Self](#)

[Care](#)

[Holistic Nurses Pain Relief Tools for Patients & Self Care-References](#)

[Integrative Medicine Treatment Approaches for Pain](#)

[Moving Beyond Medications](#)

Hershoff, A. (1996). *Homeopathy for musculoskeletal healing*. Berkeley, CA: North Atlantic Books.

Mora-Ripoll, R. (2010). Therapeutic value of laughter in medicine. *Alternative Therapies*, (16)6, 56-64.

[Amazing Story of Pain Relief](#)

[Tai Chi and Fibromyalgia](#)

[Yoga and Low Back Pain](#)

[A Comprehensive Review of 46 Exercise Treatment Studies in Fibromyalgia](#)

[Music Therapy and Music-Based Interventions in the Treatment and Management of Pain: Selected References and Key Findings](#)

[Medical Clowning: Pain and Anxiety Reduction](#)

Upcoming Events



Register early for the Arizona Chapter...a chapter of the American Holistic Nurses Association
Holistic Nursing Symposium,
[Fall 2018](#) .

The purpose of the Symposium is to introduce nurses and other healthcare providers to different holistic modalities and practitioners and to explore how these modalities can be used in practice to promote health and well-being.

\$39

Nurses and Other Healthcare Providers Welcome

**You may register online or remit a check to AHNA, Arizona Chapter.
Include your name and contact information and send to:**

Debbie Harbinson
8114 E Cactus Rd, Suite 240
Scottsdale AZ 85260

[Click Here to Register Online](#)

How to Create Therapeutic Laughter



**Join Debbie Harbinson MHI, RN HNB-BC, Master
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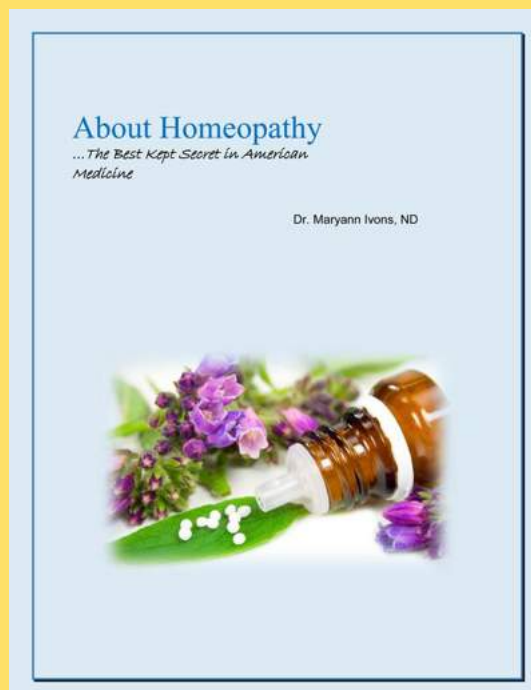


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This Month's Feature



About Homeopathy . . . the best kept secret in American medicine

E-Guidebook by Dr. Maryann Ivons, ND

About Homeopathy explains the concepts and principles of homeopathic medicine and homeopathic remedies in an understandable way. An excellent resource for yourself, for patient education, for students, or to gift another practitioner!

\$20

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