Behavioral Engagement
Decades of Research and Progress

Since 1980, the National Institute of Whole Health has been conducting pilot studies on its health behavior change model, Behavioral Engagement with Pure Presence™. This model provides a method of communication and peer interaction which results in enhanced patient-provider relationships, as well as deeper self-awareness and discernment for the client-patient.

Based on the behavioral health sciences, Behavioral Engagement with Pure Presence allows for both Emotional Shifting and Brain Overlap – two components of the model that result in self-discernment and sustainable behavior change.

Recently, in 2010, Stanford University School of Medicine began to investigate and study what they refer to as “intrinsic motivators”, which Behavioral Engagement identifies as “an individual’s beliefs, values and worldview.”

Dubbed as “stealth interventions”, Thomas Robinson, MD, MPH, professor of pediatrics and medicine at the Stanford University School of Medicine began a pilot study for effecting the eating habits of college students by offering courses that students volunteered to take which presented a “social consciousness’ perspective.
The outcomes showed that it may be possible to shift the eating habits of some college students by providing them with motivation that is based on their social consciousness and core values and personal beliefs, rather than telling them that veggies are good and fatty foods are bad.

This model is the model of Whole Health Education® and Behavioral Engagement with Pure Presence™ that has been developed and studied for almost 40 years in various hospitals, medical environments and private practices.

Within this handout packet you will find a research abstraction as well as an article from Stanford’s website publication that discusses the study, as well as copies of the various studies and pilots conducted by NIWH over the past 3 and a half decades. The NIWH research, many decades ahead of its time, continues to lead the way towards behavioral health breakthroughs and ongoing research.

For more information and pilot updates visit our website at http://www.wholehealtheducation.com/accreditation/whole-health-education-pilot-studies/
Effects of a College Course about Food and Society on Students' Eating Behaviors

Eric B. Hekler, PhD,
Christopher D. Gardner, PhD,
Thomas N. Robinson, MD, MPH

Background
Health education programs for promoting a healthful diet have shown limited success in clinical trials.

Purpose
This paper aims to examine whether an innovative educational course focused on societal-level issues related to food and food production (Food and Society) would promote healthful eating among college students.

Methods
A quasi-experimental non-RCT was conducted to compare changes in eating behaviors among students taking the Food and Society course (n=28) versus students taking health-related human biology courses about obesity, health psychology, and community health assessment (n=72). All participants were undergraduates. A Food Frequency Questionnaire was administered at the beginning and end of the four courses taught from January through March 2009. Students in the Food and Society course read selected portions of popular books and essays (e.g., Michael Pollan's Omnivore's Dilemma) and watched documentaries (e.g., Aaron Woolf's King Corn) highlighting environmental, ethical, social justice, cultural, political, and agricultural issues related to food and food production, and discussed these major themes during class sessions. In addition, students were required to (1) write an Op-Ed article and (2) create a brief YouTube video focused on themes discussed in the course.

Results
The students who took the Food and Society course reported significantly improving their healthful eating ($F[2, 97]=5.72, p=0.02$), with greatest improvements in increased vegetable ($F[2, 97]=10.96, p=0.001$) and decreased high-fat dairy ($F[2, 97]=5.39, p=0.02) intakes relative to the comparison group.

Conclusions
The results suggest that it may be possible to change dietary behaviors in college students by focusing on social, ethical, cultural, and environmental issues related to food and food production.
Stealth health
Tapping into the healing power of social movements

Thomas Robinson isn’t a prophet, but he might be more successful if people thought of him that way.

The gospel that Robinson, MD, MPH, preaches is a familiar one: Exercise and eat healthy food. But, like most of the researchers in his field, Robinson knows that he’s frequently crying in the wilderness.

For decades, physicians and health professionals have urged people to do what’s good for them, but their efforts meet with limited success. After all, we know that broccoli is better for us than French fries, but few of us are likely to order veggies with our next meal.

LEIF PARSONS
As a professor of pediatrics and of medicine at the School of Medicine, Robinson has given a lot of thought over the last 20 years to the reasons people do — and don’t — change their behaviors. If they won’t eat better to improve their own health, he wondered, what other reason might inspire them?

One example stood out: religion.

“Religious conversion is something that prompts dramatic changes that are sustained over time,” Robinson says. “I’ve always joked that, if it were ethical, I’d propose that we start a religion.”

So what’s another force that inspires change? Social movements. Robinson observed that many people will make large, sustained changes in their lives if they believe it serves a greater good. “A commitment to a larger belief system seems to be more compelling than personal health reasons for changing behavior,” he says. Behavioral Engagement connects to an individual’s intrinsic values and this is how “Emotional Shifting and Brain Overlap” occur which leads to sustainable behavior change.

And so he began exploring social movements that also could prompt healthy behavior changes. One good example he found was environmentalism: You can reduce your carbon footprint by eating more locally grown fruits and vegetables and cutting back on meat and processed foods. While your primary motivation in making these changes may be to help the environment, you’ll end up with a more nutritious diet.

That’s how he came to the idea he dubbed “stealth interventions” because they address the deeper needs and desires of the participants, their intrinsic motivators, while improving health as a side effect.

He put the stealth strategy to the test by evaluating the eating behaviors of Stanford undergraduates who enrolled last year in the Food and Society course he helped develop. The course focused on food-related social and environmental issues, but not on the health aspects of food and eating. Students viewed documentaries, read sections from books such as the *Omnivore’s Dilemma* and created brief videos on relevant topics. For comparison, Robinson’s team tracked undergrads enrolled in three health-related courses the same quarter.

At the beginning and end of the quarter, students in all four classes were surveyed about their eating habits. The results showed that students in the Food and Society course were eating more vegetables and fewer high-fat dairy products, high-fat meats and sweets than they were at the beginning. The comparison students reported no improvement in dietary habits. The findings were published in the May issue of the *American Journal of Preventive Medicine*.

Robinson is employing similar stealth approaches to boost exercise among children and adolescents, such as encouraging them to help the environment by walking and biking to school rather than being driven in a car.

“This approach looks very promising,” he says.

Can he get an amen?
“The experience of the program and the overall education has been nothing short of fantastic. There is a common thread throughout the courses which reflects on how everything in our life affects everything else. The program has a unique way of bringing all of this together and really makes you think about complementary approaches to handling common illnesses as well as working toward optimal health. I would most definitely recommend the program to other healthcare professionals and hospitals.”

Beth Borg, RN, MHA
Clinical Operations Administrator
Mayo Clinic
The National Institute of Whole Health
Whole Health Education Pilot Program

“Our clinic at the Lemuel Shattuck Hospital was for poor and chronically ill patients who wanted to deal with refractory pain conditions. They were a difficult patient population. Between 1980 and 1989, each year we placed at least one or two interns from NESWHE [now the National Institute of Whole Health] to perform health education counseling with our clients. These interns were always well educated, sensitive, willing to work hard and able to re-moralize and spark renewed interest in health and well-being in our difficult patients.”

“We came to rely on these placements because their enthusiasm for helping was a critical component of our clinical work to re-direct our patients towards a sense of self-help and self-reliance. On all levels, our relationships with NESWHE [now the National Institute of Whole Health] and its students was professional and of great value to our program.”

Ted Kaptchuk, OMD - Former Clinical Director
Lemuel Shattuck Hospital
Pain & Stress Relief Clinic Out-Patient Services
Jamaica Plain, MA
The Pilot Study set out to enroll 50 patients from the Cardiac Rehabilitation Department at Union Hospital. Patient population included a heart transplant recipient, patients with multiple pathologies, as well as obese, alcoholic, addictive and recalcitrant patients with varying cardiovascular disease. The patients were evaluated initially and at the end of six months using the SF36, a validated survey instrument widely used to measure quality of life. The evaluation also used a Clinical Data Collection Inventory (CDCI), which is a non-validated internal instrument.

In October 1997, the Union Hospital and the National Institute of Whole Health collaborated to carry out a pilot study of cardiac rehabilitation patients using Whole Health Education. The goal of the pilot study was to evaluate the effect of Whole Health Education on outcomes with cardiac rehabilitation patients.

Union Hospital is a 132 bed, community hospital located in Lynn, MA. Union Hospital is a part of The North Shore Medical Center and is a member of the Partners HealthCare System, founded by Massachusetts General Hospital and Brigham and Women's Hospital, both teaching hospitals of Harvard Medical School.

Whole Health Education is an invitational, non-directive model of health education, which empowers individuals to understand the cause and effects of their conditions through demystifying health information. The development of Whole Health Education® began in 1977 by Dr. Georgianna Donadio, founder and director of the National Institute of Whole Health Education, (NIWH), Boston, MA. NIWH trains educators in providing "Health Education for the Whole Person." Whole Health Education is a peer-counseling model of patient health education based on respectful listening, a whole picture of health® perspective, transformative behavioral engagement skills and personalized health information research.
The Pilot Study, initiated in 1997, set out to enroll 50 patients from the Cardiac Rehabilitation Department at Union Hospital. Patient population included a heart transplant recipient, patients with multiple pathologies, as well as, obese, alcoholic, addictive and recalcitrant patients with varying cardiovascular disease. The patients were evaluated initially and at the end of six months using the SF36, a validated survey instrument widely used to measure quality of life. The evaluation also used a Clinical Data Collection Inventory (CDCI), which is a non-validated internal instrument.

Patients were contacted via letter by the Pilot Study Coordinator, Anna Seubert, and those expressing interest were contacted by the Study Coordinator who outlined the study protocol. If patients agreed to participate, they completed the SF36 and the CDCI. They then met with a Whole Health Educator for six, one-on-one sessions. Patients then completed another SF36 and CDCI six months later.

The data from the Whole Health Education patients was compared with data from historical controls. These were patients who had only been through cardiac rehabilitation. The control patients had filled out baseline and six month SF36 and CDCI questionnaires. The control group was not studied at the same time as the treatment group, and no attempt at randomization was made. No attempt was made to pair subjects, and the study was not considered a controlled study. The study was approved by the Investigational Review Board at Union Hospital.

Patients in the Whole Health Education application component of the study were enrolled in 1998 and 1999. Six certified Whole Health Educators and six Interns from the National Institute of Whole Health participated in educating the patients in the study at Union Hospital. The study was funded in part by Union Hospital and in part by the National Institute of Whole Health.

Anna Seubert, the coordinator for The Pilot Study, has been an educator for more than twenty-five years and has worked with communities and individuals in building bridges between complimentary and conventional health care. Anna had been working with the Healing Connection at Union Hospital prior to the Pilot Study.

The Principal Investigator for the Pilot Study was Harvey Zarren, MD, FACC, a cardiologist in private practice and also Medical Director of the Department of Cardiac Rehabilitation at Union Hospital.
OUTCOMES

The Study was not powered to reach statistical data significance. The sample size was small and the SF36 and CDCI may not have been optimal indicators of the experiences of the patients.

Although no significant overall clinical differences were observed between the treatment group and the control group in SF36 data or in CDCI data, there were quality of life questions where patients receiving Whole Health Education did significantly better than the control group after 6 months. The Questions involved:

- Sharing feelings routinely, --> 11% improvement
- Level of stress, --> 6% improvement
- Perceptions of tendency to get sick compared to others, --> 22% improvement
- Expectations of future health decline, --> 21% improvement
- Perceptions of current health status. --> 4% improvement

PATIENT ANECDOTES
at their 6 -12 month follow-ups

For representations of the Whole Health Education experience, the best indicators are patients’ anecdotal comments. Many patients who experienced Whole Health Education said

"No one has ever listened to me in such a deep, respectful fashion before."

Other comments from Whole Health Education patients included:

"The effects of this process have been very subtle but life-changing for me."

"I am choosing to do things for myself that I have not thought about in a long time."

"I finally have information that's helping me to make different kinds of choices."

"Never before in my life have I been listened to like this!"

"Thanks to following your program I am a completely new man."

"I have a new approach to life including a change in eating habits, stress reduction, and improved physical health. I have made new friends and have fun socially. This has been a real plus in my life."

"I have more knowledge of mitigating diet factors and habits for general health and control."

"I have more information on what and what not to do."
"I got enlightenment."

"I've become stronger, got education for self-care and got support from wonderful people who worked with me."

"I got information on the latest nutritional findings and recommendations about vitamin do's and don'ts and exercise information to improve my heart and general health."

"I got health!"

"I got to educate myself about diet, exercise, and change of lifestyle to reduce my risk of heart surgery."

"I've become more energetic and I've felt much better after the program."

"I have a firmer grip on understanding not only the outside forces that affect my health and hopefully ways to deflect or better manage these influences."

"I got muscle tone and friendship with people."

"I learned more about my body and its function and diet control and effects."

"I got a healthier heart."

"Thank you for your help, support and education. All of you gave me on a day to day basis peace and compassion: the most important pill. Good health and happiness to you and thank you."

"I received knowledge of my body, ways to extend my life, and to live healthier."

"I learned to feel good about myself and to enjoy life to the fullest."

"I received knowledge of my ailment, treatments available and strengthening of my heart and body."

"I learned why it's important to exercise and eat correctly. Just to know there are other people like me is consoling."

"I learned about a healthy heart, body and mind."

"I learned to help myself with a spiritual program and meditation."

"I know a few of the guys in rehab wished they had had the chance to work with the Whole Health Educators."

"I received a better understanding of myself."
SUMMARY

The Pilot Study demonstrated that Whole Health Education was not only valuable but also desirable in the journey of cardiac patients towards wellness. The qualitative data, collected in the form of exit interviews with patients, interviews with staff, and unsolicited notes and letters was positive. Patients who had presented with behavior problems for staff became cooperative and related in a manner serving themselves and others in a much better fashion.

The Whole Health Educators had a lot of time with patients: time that patients valued in itself, apart from any informational content. That time was effective in allowing patients to see their conditions more clearly and to work through barriers to improved health.

The relationship of Educators to patients provided behavior models that, along with the education content, allowed for persistent lifestyle changes. The combination of Cardiac Rehabilitation and Whole Health Education allowed repetitive exposure of patients to information enabling them to make better decisions about behaviors creating wellness.

The Principal Investigator for the Pilot Study, Dr. Harvey Zarren said "As a physician, I find that Whole Health Educators are incredibly supportive in my attempt to help patients regain or maintain wellness.

The Educators reinforce knowledge, motivate patient behavior, and have the time to help remove barriers to wellness. Whole Health Education is a very potent, valuable tool in helping patients transform their lives. Whole Health Education can be a very effective ally in the health care practitioner's efforts on behalf of patients."
Other findings associated with the study and application of Whole Health Education:

Excerpted from Report by Harvey Zarren, M.D., F.A.C.C.

January, 2001

“Whole Health Education is a model of patient education that allows relationship skill building in an overt way. It is totally supportive, not expensive, and incredibly effective. It invites people to learn rather than directing them as to what to do. It values participation and useful behavior rather than moralizing about a particular course of action. It is a model for all relationships. Here is a method of education that can help to transform medical care for both patients and caregivers, allowing the healing experience to once more be a journey towards wellness for all.

Whole Health Education at Union Hospital [is] in service to patients, health care professionals and health care itself. The pilot program demonstrated clearly that Whole Health Education was not only valuable but also desirable in the journey of patients towards wellness. Every patient said "No one has ever listened to me with such respect and attention." Patients who presented behavior problems for staff became cooperative, and related in a manner serving everyone in a much better fashion [and] allowed patients to see their condition more clearly and to work out barriers to health improvement. The relationship of educator with patient gave people a behavior model that, with the content of the education, allowed for persistent lifestyle changes.

Other patients, with behavior problems such as alcohol abuse have been exposed to Whole Health Education at the hospital. In each case, the invitational, respectful attitude of the educators has been instrumental in patient behavior changes leading towards wellness.”

Harvey Zarren, MD, FACC
Medical Director
Department of Cardiac Rehabilitation
Union Hospital
April 21, 2011 – Rochester, MN - Numerous studies have shown that when patients with chronic diseases focus on their health and get involved in their own healthcare, their health improves and their health expenses decrease.

Like many clinical administrators today, Beth Borg, RN, MHA, a Clinical Operations Administrator at Mayo Clinic, one of the largest academic medical centers in the world, is striving to develop a healthcare model that improves the health and wellness of their patients.

“My goal is to be able to offer a patient-centered, holistic model of care that meets the patient where they are at, educating them on what they need to know to improve their health, so that they are more informed and have the ability to make better decisions,” said Borg.

“If we are going to have an impact on the health and wellness of patients then we have to give them precisely what they are requesting, which is information, self help tools they can understand, and possibly individual coaching before they get sick and not just when they are in distress.”

To that end, Borg began piloting the NIWH Whole Health Educator program for Nurses in December after searching for educational training which would compliment the skills needed to train their staff on team-based patient focused care.
“The experience of the program; and the overall education have been nothing short of fantastic,” said Borg. “There is a common thread throughout all of the courses which reflects on how everything in our life affects everything else. For example, how your thoughts and feelings affect your physical being, and how your diet and stress management can impact all of the systems in your body and vice versa.”

“The program has a unique way of bringing all of this together and really makes you think about complementary approaches to handling common illnesses as well as working towards optimal health.”

“The way the information is presented has helped me to assimilate it quickly and use examples on a daily basis with colleagues that I work with, as well as friends and family. I would most definitely recommend the program to other healthcare professionals and hospitals.”

The National Institute of Whole Health is committed to facilitating the transformation of healthcare environments to one that is whole person in focus.

“We are pleased to be working with Beth Borg to facilitate whole person health care, and improve patient outcomes at the Mayo Clinic,” said Dr. Georgianna Donadio, Program Director for NIWH.
Advance Practice Nurses Pilot NIWH Whole Health Educator Program

December 12, 2010 | News & Press Releases

FOR IMMEDIATE RELEASE

Advance Practice Nurses Pilot NIWH Whole Health Educator Program

The National Institute of Whole Health is providing coaching education for advanced practice nurses who desire to focus on the whole person rather than compartmentalized care.

Wellesley, MA — The National Institute of Whole Health (http://www.niwh.org), pioneers of Whole Health Education® and Whole Person Health Care™, today announced that a team of advanced practice nurses have selected the National Institute of Whole Health (NIWH) to fill a void in their existing patient care.

The group, who works at Hermitage Farm Center for Healing, Inc.in Rochester, MN, a provider of integrated complementary healing therapies, and also work at Mayo Clinic Rochester, recently began NIWH’s online Whole Health Education program to provide them with the education and skills needed to coach their clients into a more healthful lifestyle.
“Everyone on our team has been a nurse for over 25 years,” said Lisa Van Getson, founder of Hermitage Farm and a Family Nurse Practitioner at the Mayo Clinic. “When we look at illness we don’t exclude spirituality so in that way we wanted to focus on the whole person, which is why NIWH was the ideal fit for us.

This program has deepened what we already know and has helped us to learn about the aspects of health we don’t, such as nutrition coaching. It has created a lot of passion in us about how we can talk to our patients about things like supplements.”

Van Getson created Hermitage Farm in 2009 to provide a well-rounded set of spiritually-based complementary therapies in one setting, such as Reiki, Energy Medicine, Homeopathy, Hypnosis, Aromatherapy and Meditation that help individuals of all ages to create inner peace in their lives. The 5-acre facility housed in a historic farm house and barn also offers weekly events and workshops on various topics.

“At the core of Hermitage Farm is providing services that will empower people to heal themselves, said Van Getson. “Through learning about things like mindfulness and active listening from NIWH, we are able to deepen how we are with our clients at Hermitage Farm.”

NIWH courses are delivered through a relationship-centered, whole-person health focused curriculum and are designed to empower the learner and their clients with demystified health information to take greater control over their health and wellbeing. In addition, all courses are video-based and streamed online from anywhere in the world.

“We are excited about our partnership with Hermitage Farm and this amazing group of nurses,” said Paul Bergeron, MD, CPE, Director of Pilot Programs for NIWH. “The work they are doing is incredibly inspiring and we look forward to deepening our relationship with them in the years to come.”

The coaching program is first being piloted with 12 patients at Hermitage Farm and, following a successful pilot, will be rolled out to all of their clientele.

# # #
About the National Institute of Whole Health -

Founded in 1977 and headquartered in Wellesley, MA, the National Institute of Whole Health (NIWH) offers the most respected and credentialed integrative, whole health certification programs in the US. NIWH’s offerings include the Norman Cousins Award nominated Best Practice Whole Health Education certification program.

The Whole Health Educator program for Nurses, endorsed by the American Holistic Nurses Association along with the Whole Health Nutrition Educator certification program and Whole Health Coaching certification program, can be completed via on-line distance learning. Recognized nationally as the pioneers of Whole Health Education®, the school has instructed thousands of students from varying health occupations from all over the U.S., and now offers on-line distance learning with students located on five continents. For more information call (888) 354-HEAL (4325).
HealthCorps® Army Seeks to Advance Advocacy Efforts with Whole Health Education

PRLog (Press Release) - Sep 22, 2011 - New York, NY & Wellesley, MA -- An army is only as good as the training it receives. Early on in the non-profit’s development, HealthCorps (http://www.healthcorps.org), a proactive health movement and vehicle for research, co-founded by Dr. Mehmet Oz and his wife Lisa Oz to fight child obesity, recognized the need for an educational program that would prepare their teen soldiers to become health agents of change for the fight against this national health crisis, working in high schools and at risk communities.

New HealthCorps Coordinators undergo month-long training on nutrition, fitness, mental resilience, how to run community initiatives, as well as classroom management and instructional skills. Recently, however, the organization saw the opportunity to make their program richer by enhancing their Coordinators’ work as wellness advocates. Working with the National Institute of Whole Health (http://www.niwh.org), the entire HealthCorps army will soon become certified Whole Health Educators. Starting in December, they will hone their skills in such relevant disciplines as peer counseling, mindful listening, health sciences, behavioral engagement, cultural diversity and more.

“We want our Coordinators to be able to go to the next level by receiving training in wellness advocacy and peer mentorship, and the Whole Health Education with wellness coaching certification is providing that,” said Michelle Bouchard, President of HealthCorps. “We like the multidimensional aspect of the National Institute of Whole Health’s program, as well as the fact that our students can do it online when it’s convenient for them. Our hope is that, as a result of this additional training, many of our Coordinators will go on to play a significant role in healthcare.”

HealthCorps partnered with the National Institute of Whole Health (NIWH) to pilot the accredited, year-long Whole Health Education program. The NIWH Whole Health Education® with Behavioral Engagement™ is the first known first patient education and health behavior change model developed and utilized in clinical settings.
It is designed to provide students with evidence-based health sciences, integrative nutrition information, natural health care perspectives, and Behavioral Engagement ™ health behavior change skills to facilitate lifestyle changes.

“NIWH shares the compelling vision that HealthCorps and the Oz’s have to transform the well-being of today’s youth,” said Dr. Georgianna Donadio, Program Director for NIWH. “We are pleased to participate in this great work of educating and empowering young people to choose healthier behaviors.”

Jake Ross and Mary Kathryn Rains are two of a handful of Coordinators participating in a pilot program presently under way.

Mr. Ross, a HealthCorps Coordinator at New Utrecht High School in Brooklyn who will start a Ph.D. program for Psychology in the fall, considers his newfound knowledge to be a complement to his psychological studies. “The National Institute of Whole Health program has really helped me to get into my students’ heads. The practical tips it provides has enabled me to connect with students on a much deeper level.”

Ms. Rains, a HealthCorps Coordinator at Freedom High School in Tampa, Florida, has enjoyed a similar positive experience with NIWH and recently gained notoriety for her success in establishing a salad bar and organic garden at the school. “I am now able to tie everything together and take an integrative approach. It has really affected the way I communicate with people and relay health information to them.” She plans to major in Public Health at Tulane in the fall.

Said Bouchard, “Not only does NIWH offer health education that is ideal for our Coordinators who work on a daily basis to empower teens to make lifestyle changes, but the information they impart is something everyone can apply to their own personal health. The curriculum has a unique approach to health by making it more human.”

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About HealthCorps
HealthCorps® a 501 (C) 3 co-founded by heart surgeon and Emmy Award-winning talk show host Dr. Mehmet Oz and his wife Lisa, is building a movement to fight the childhood obesity crisis by helping Americans discover what they are really hungry for and why. HealthCorps “Coordinators” carry out unique in-school and community programming targeting high-need populations. Using peer-mentoring to deliver a progressive curriculum in nutrition, fitness and mental strength, HealthCorps Coordinators give teens purpose, help develop human character and inspire an interest in health and culinary arts careers. HealthCorps also serves as a unique research laboratory - exploring the complex, underlying causes of the obesity crisis and discovering and communicating solutions.
HealthCorps is bringing many initiatives together to address the "Whole Child" and activate the students’ mind, body and spirit. As a result, HealthCorps is transforming the educational paradigm one school at a time. The program network spans 54 schools in 13 states. For more information, please visit.

About the National Institute of Whole Health
Founded in 1977 and headquartered in Wellesley, MA, the National Institute of Whole Health (NIWH) offers the most respected and credentialed integrative, whole health certification programs in the US. NIWH's offerings include the Norman Cousins Award nominated Best Practice Whole Health Education certification program. The Whole Health Educator program for Nurses, endorsed by the American Holistic Nurses Association along with the Whole Health Nutrition Educator certification program and Whole Health Coaching certification program, can be completed via on-line distance learning. Recognized nationally as the pioneers of Whole Health Education®, the school has instructed thousands of students from varying health occupations from all over the U.S., and now offers on-line distance learning with students located on five continents. For more information, visit www.niwh.org or call (888) 354-HEAL (4325).

Press Contact: Carol Arnold, Arnold Communications, (877) 718-4604 x2, carol@arnoldcomm.com.
MARINA MEDICAL CENTER BEGINS WHOLE HEALTH EDUCATION PILOT STUDY

May 19, 2011/ NEWS and RELEASES

Marina Medical

Dedicated to Prevention

Marina Medical, in De Moines, Washington, is the site of a Whole Health Education® pilot study. Whole Health Education®, a model of whole person health education, was developed and pioneered by the National Institute of Whole Health (NIWH). Founded in 1977, NIWH is dedicated to providing medical, allied health, wellness care and health education professionals evidence-based, cutting-edge continuing education programs from a whole health perspective. Marina Health began its pilot study in January of 2010 to further enhance services to their patients through the inclusion of Whole Health Education in their practice.

In addition, Marina Medical will be expanding its billing and coding capacity through utilizing established medical billing guidelines which are specific for reimbursement relating to disease management, disease prevention and patient education. Below is what Kaye Brown, MSPH, co-Founder of Marina Medical, has to say about Marina Medical’s experience of the Whole Health Education pilot:

“The National Institute of Whole Health’s curriculum is really cutting-edge,” said Kaye Brown, MSPH, co-Founder of Marina Medical. “Their evidence and broad-based program not only embraces lifestyle, but also behavioral components, which has enabled us to start applying it immediately in our clinical setting and achieve our goal of transitioning to more of a functional medicine model. NIWH is helping us live true to our motto of practicing disease prevention through enlightened intervention.”
FOR IMMEDIATE RELEASE

Whole Person Health Program Benefits Nurses and Patients at Spaulding Rehabilitation Hospital

New Pilot Program Delivers Valuable Training that Improves Patient Focused Care, Disease Prevention and Wellness

WELLESLEY, Massachusetts, September 14, 2012 – The National Institute of Whole Health (NIWH), a provider of nationally accredited Whole Health Education® professional development programs and continuing education courses for nurses and credentialed health care professionals, has partnered with Spaulding Rehabilitation Network, a member of Partners HealthCare, in a 12 month Whole Health educational pilot program with Spaulding nurses from across their 6 facility multi-level network. Through this year long pilot program 6 Spaulding nurses, one from each of the Spaulding facilities, have received whole health skills and tools to enable them to deliver more effective patient-focused care that is central to improved healing and well-being.

The Whole Health Education program provides training and resources needed to give nurses immediate, in-the-moment skills and knowledge to increase patient health awareness and self-care, while remaining focused, attentive and effective in their care. This allows nurses to take a proactive approach of engaging patients in their own care and to focus on the overall spectrum of better health.
Joanne Fucile, Vice President of Operations and Director of Nursing at Spaulding Hospital in Cambridge, MA, states, “This course teaches our nurses how to incorporate whole-health principles into their daily practice, to further improve their patient’s recovery and overall outcomes.” Valeria Kenny, a nurse at Spaulding Hospital North Shore, says “The Whole Health program has definitely helped me become more focused and present as a nurse professional. I feel I can give my undivided attention, even if it is for a very brief period of time.”

The benefits of this training are not limited to direct patient care nurses. Nancy Boudreau, RN Case Manager at Spaulding states, “The lessons focus on a preventative and holistic perspective to health and well-being. Pathophysiology is reviewed taking into account current research regarding causation and the prevention of disease. The course is rigorous and challenging, but also very engaging.” Louise Mackin, a 30 year nurse at Spaulding states that her experience in the pilot is changing her own health behavior, “I love what I am learning and perceive it is changing some of my behaviors and informing better choices towards health in my life.”

**About The National Institute of Whole Health**

Since its inception in 1977, the National Institute of Whole Health has held a compelling vision for American health care. Today, 35 years later, that vision is becoming a reality in mainstream medicine and health care with the inclusion of whole person health education, health and wellness advocacy and disease prevention.

For the past three and a half decades, with this vision as its guiding light, NIWH has developed, for qualified health, allied health and related professionals, continuing education and professional development programs. The programs are peer-reviewed by leading national associations, and have received the accreditation, approval or endorsement of more than a dozen of the leading health and related associations.
The NIWH recently published award winning, bestselling book “Changing Behavior” documents the development and research of Whole Health Education at various Boston hospitals that began in 1980. For more information, please visit [www.wholehealtheducation.com](http://www.wholehealtheducation.com). Media Contact: Maureen Landry, NIWH. 888-354-4325, e-mail Maureen@niwh.org

**About Spaulding Rehabilitation Network**

A member of Partners HealthCare, The Spaulding Rehabilitation Network includes Spaulding Rehabilitation Hospital its main campus, a 196-bed facility, located in Boston, as well as Spaulding Rehabilitation Hospital Cape Cod, two long term care facilities Spaulding Hospital Cambridge and Spaulding Hospital North Shore and two skilled nursing facilities, as well as twenty three outpatient sites throughout Eastern Massachusetts.

Spaulding is a teaching hospital of Harvard Medical School as well as the official rehabilitation hospital of the New England Patriots. Spaulding is the only rehabilitation hospital in New England continually ranked since 1995 by U.S. News and World Report in its Best Hospitals survey with a #5 ranking in 2012. For more information, please visit [www.spauldingnetwork.org](http://www.spauldingnetwork.org). Media contact SRN: Tim Sullivan, 617 573 2918, email at tsullivan11@partners.org
Mount Pleasant, MI and Wellesley, MA, November 20, 2013 – In an effort to shift the growing problem of type 2 diabetes (T2DM) and improve doctor-patient communication, Central Michigan University has partnered with the National Institute of Whole Health to study NIWH’s hospital tested Behavioral Engagement with Pure Presence ™ (BEPP). This partnership is the result of doctoral research requirements of CMU’s graduate learner, Christie Clipper, a researcher and administrator in public health.

Saleh Aldasouqi, MD, FACE, ECNU, Associate Professor of Medicine and Vice Chief of Endocrinology at Michigan State University College of Human Medicine, and Steven Berkshire, EdD, MHA, SPHR, FACHE, Professor and Director of the Health Administration doctoral program at Central Michigan University, are supporting and assisting Clipper’s efforts to test Behavioral Engagement with an experimental study involving patients with T2DM and their physicians.

Dr. Aldasouqi believes that most of these patients not only have diabetes, but also have problems with weight and eating habits. He states, “As such, they need the full attentiveness, the Pure Presence, of their physicians to provide counseling and effective interviewing in order to achieve healthier outcomes. The role of physicians is not merely to adjust medications and order labs.”
The study is designed to test how the model of Behavioral Engagement can impact the relationship between doctor and patient, and potentially result in improved outcomes and compliance. Dr. Aldasouqi has become a champion of the study as he believes the BEPP model can potentially have a positive impact on the patient-physician relationship and communication issues impacted by the now mandated use of electronic medical records (EMR). The widespread use of EMR has had a negative impact on patients as well as physicians.

Dr. Aldasouqi says this about the problems relating to EMR, “With the advent of EMR, and office visit time is shrinking, physicians are challenged even more to find time to empathize with their patients which is essential to building trusted relationships for improved patient compliance and healthier outcomes. The complaint by patients about their physicians not listening to them is vastly underestimated, and under-appreciated in healthcare discussions.”

“Recently, a popular radio show host complained about her doctors, who used to listen and dedicate more time to her needs and questions in the past, are not listening as they used to because they are spending more time entering patient visit notes into their computers.”

“Because of the aforementioned emerging burdens, what doctors are now doing has become less face-to-face interviewing, and more focused on putting information into their computers. Within the current healthcare environment, the role of the physician appears to be moving closer to clerks whose main job is to enter information into computers, rather than the role of physician who is expected to counsel and advise their patients.”

“I am excited to participate as a co-investigator in this promising study, and I am optimistic about its findings, because I have personally examined this promising behavioral model and believe the model, (Behavioral Engagement with Pure Presence™) is a potentially effective tool to transform the patient-physician relationship under the challenging provisions physicians must learn to balance within patient care today.”
Clipper, the study originator and Co-Primary Investigator regards her interest in studying Behavioral Engagement with Pure Presence as part of her professional mission. “It is my mission to help others live life to their highest potential whether managing a chronic illness or practicing preventive measures while working to reduce healthcare costs. Offering effective communication tools for the patient-provider encounter, I see the dissemination of Behavioral Engagement with Pure Presence™ into clinical practice as an essential tool for providers in achieving this immeasurable purpose.”

Dr. Berkshire, Clipper’s research chair concurs. “Dr. Aldasouqi, Dr. Deaton and myself believe that this is certainly an important study to conduct and will provide results and findings that can be extremely helpful in changing behaviors in treatment compliance through behavioral change.” The study is scheduled to begin in January, 2014. The findings will be submitted for article publication to medical journals. This will provide national exposure to the research and its findings.

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About NIWH

Since its inception in 1977, the National Institute of Whole Health has held a compelling vision for American health care. Today, 36 years later, that vision has become a reality in mainstream medicine and health care with the inclusion of chronic care coordination, whole person health information, wellness advocacy and self-directed care.

The recently publish award-winning, bestselling book “Changing Behavior” documents the development and research of Whole Health Education at various Boston hospitals than began in 1980. For more information, please visit www.niwh.org.

About CMU

Established in 1892, Central Michigan University is among the nation’s 80 largest public universities with more than 20,000 students on the Mount Pleasant campus and another 7,000 enrolled on-line and at more than 50 locations across North America. Visit, www.cmich.edu.