



AHNA Beginnings

A Publication of the American Holistic Nurses Association

August 2016 | Volume 36 Number 4



Self Care: Finding Time and Balance

Self Caring

She went through all the motions
The rituals and prayers
She chanted Om and sang Shalom
Wishing beings love and care-
She served at the soup kitchen
Made quilts for those in need
Read stories at the library
She spoke out against greed-
Still she felt an emptiness
That service could not fill
Could not be found in ritual
Or cured with any pill-
Until one night she woke up
In the middle of a dream
Her body felt quite frozen
And she tried, but couldn't scream-
A wave of warmth washed over her
Bathing her in light
She moved out of her body
To the space of inner sight-
She realized in these moments
That her love was what she lacked
For she'd dwelt in her shortcomings
And so she felt attacked-
Then her heart broke into pieces
Until she saw her whole
The beauty of her spirit
Of her mind, body, and soul-
And she knew she was most worthy
Of the love she had denied
And she walked up to the mirror
Spoke 'I love you' as she cried-
And all the emptiness she felt
Washed out as she cried
As she danced into the present
Filled up from deep inside~

AHNA Beginnings

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Planning Ahead for the AHNA Conference

37th Annual Conference

June 4-11, 2017

Rancho Mirage, CA

Westin Mission Hills Resort & Spa

38th Annual Conference

June 4-10, 2018

Niagara Falls Convention & Civic Center, New York

The American Holistic Nurses Association (AHNA) is a non-profit organization whose membership is open to nurses and others interested in holistically oriented healthcare practices.

Membership fees: \$125/US, \$55/Full Time Student, \$80/Part Time Student, \$75/Elder, \$135/International.

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The mission of the American Holistic Nurses Association is to advance holistic nursing through community building, advocacy, research and education.

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Our vision is a world in which nursing nurtures wholeness and inspires peace and healing.

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Self-Care: Finding Time & Balance

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About the Cover Art

The art seen on the cover is designed by AHNA member **Norrie MacIlraith** RN, MS, CNS, HTP from Rochester, MN. Norrie has worked with textiles of all types since a young child. She teaches classes in fabric art and textile dyeing using both natural and fiber reactive dyes. "A Little Sunshine" was inspired from a Hopi Sunflower photograph she took. The three-dimensional sunflower is an original design: fabrics are combination of hand dyed and commercial; each petal has been inserted with sculpture wire mesh then free motion stitched; the center is hand painted and couched with eyelash yarn and beaded. Norrie's Fabric Art is available at Artify: A Collective Gallery in Zumbrota, MN. Her work is also shown at the Textile Center in Minneapolis.

The poem on the cover is by AHNA member **Jennifer (Jen) Reich**, PhD, RN, NC-BC. Jen is a nurse coach, poet, and storyteller. Her poems are inspired by people, animals, nature, and all aspects of our shared human experience. She is a passionate explorer of the healing potential of the creative arts. She loves to write poems from the road and trail as well as at her neighborhood coffee shop. When not traveling she lives and writes in Phoenix, AZ. Her daily blog can be found at <http://poetry-not-poverty.blogspot.com>

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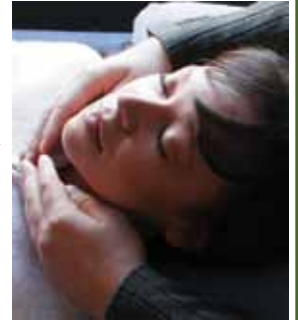


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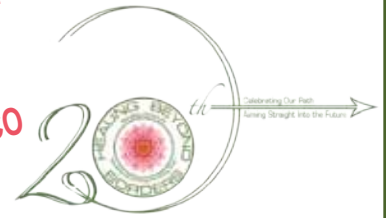
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Demonstrating Continued Financial Strength: 2015 & Beyond

by BARRY S. GALLISON, DNP, APRN-BC, NEA-BC, CPHQ, AHN-BC

AHNA continues to demonstrate financial strength with our Board of Directors, Finance Committee, and staff committed to the responsible management of AHNA's financial resources. It is with great honor and privilege that I serve as AHNA Treasurer. Some of my AHNA responsibilities include chairing the monthly Finance Committee meeting and working with staff to prepare the annual budget for the Board of Director's consideration and approval. The Finance Committee reviews monthly financial statements, analyzes long-term investment reports, and evaluates any proposals containing financial considerations with the impetus to always serve the association and membership. Our annual audit was performed by Varney and Associates CPA, LLC out of Manhattan, Kansas. AHNA's 2015 balance sheet is provided on page 31 and details an overall loss of \$9,930. This loss is a reflection of the drop in the value of our long-term investments, \$64,013 due to the 2015 stock market adjustment globally, and is not a result of overspending or exceeding the budget. AHNA expenses were \$54,083 below revenue, which offset the \$64,013 investment loss for a net ordinary income of -\$9,930.

Long-Term (LT) Reserve Investments

Our LT investment portfolio is a combination of nine Calvert Investments Funds, which are socially responsible mutual funds, giving AHNA a balanced market approach. Our investment advisor, Rick Ryan of Schwab Financial, provides monthly performance reports which are reviewed and scrutinized by the Finance Committee. Rebalancing of the portfolio occurs routinely, depending on market fluctuations and future predictions. Since 2011, the LT Reserve investments have increased from \$181,062 to \$549,692, with a significant amount coming from annual operations savings being transferred to the LT investments. During 2015, \$100,000 cash was added to LT Reserves. From January to June 2016, an additional \$50,000 was added. As of June 30, 2016, there was \$614,000 in LT Reserves. This is 60% of AHNA's current annual operating budget, which is above industry standard for non-profit organizations and a goal of the Board and the AHNA Strategic Plan. Our current financial strength allows for a bright future with the opportunity to create exciting new programs that further the mission and vision of AHNA.

A Place to Call Home

In 2014, during our strategic planning process, the AHNA Board of Directors identified "enhancing financial strength and resources" as a top priority for the association, including "capitalizing long-term investments." The Board works continually to ensure AHNA is in good financial health and that our assets are adequate, protected, and appropriately allocated. There was significant and thorough discussion by the Board as well as a consult with the Past-President. The Board reached a final and unanimous decision to purchase a building to house AHNA's national headquarters. Following an extensive review and assessment of the Topeka, Kansas community, a building was purchased in 2016 to meet office needs, fulfill the desire for a permanent home, and strengthen our overall financial position.



AHNA's office building was purchased February 25, 2016 for \$292,000. The two-story building is 6,100 square feet, sitting on a 28,660-square-foot lot. The building was constructed in 1963 of concrete block, masonry, and steel, and updated in 2005 with new windows, carpet, paint, ceiling tile, lighting, air conditioning, lawn irrigation system, and renovated male and female restrooms on each floor. The building has 18 parking stalls. There are outside and inside entrances to both floors, which are secured and well lit. The foyer of the building is tiled, and the stairs to the second floor are wide and carpeted. Meetings to accommodate wheelchairs are held in the first-floor foyer or the first-floor offices. The building has had three owners, including AHNA, in the 43 years since it was built, and it sits on a prominent street corner in a small business park of Topeka between two affluent residential sections of the city.

Financing the AHNA Building Purchase

The AHNA Board of Directors approved the \$292,000 purchase price, paying \$58,400 cash down on the building and financing the remaining \$233,600 at 3.82% interest for 10 years. The final payment due on the building is set for February 2026.

continued on page 31

[illegible]

...based on self-observations from more than 30 years of self-care discovery

dilemmas from different perspectives also raises the question, “If I don’t do it now, then when?” It’s time we found new, workable solutions by discovering insights from alternative viewpoints.

While holistic nurses are great at being flexible, adaptable, and creative problem solvers for others, we often forget to do this for ourselves. Some of us have tried checklists, but that becomes another thing to look at and check off. Self-care is not static; rather it changes from day to day and often requires ingenuity and out-of-the-box thinking. Our physical mind wants repetition and routines. For change to take place, let's move out of our physical mindsets and into the larger Universal Mind of creativeness, balance, and wholeness.

Foundation for Success

As we move into larger fields of perception, the foundation for success takes on a broader perspective and understanding. Three general principles are important to becoming continuously more successful at self-care. First, it is essential to *begin near in order to go far*. We must start with our own self-care before we can assist others in their self-care. We

can only be authentic when we speak from our truth and our experience. To speak from a “want to be” position comes across as less than authentic (e.g., “Do as I say, not what I do”). Our self-care and our care of others thrive when we are authentic and heart centered.

Second, begin with one important change rather than doing many things at once. In our eagerness, we tend to take

on more than we can handle. *Change one step at a time.* Choose the goal that is most important. If sugar is a challenge, then eliminate all forms of sugar. Do this for a couple of weeks. When comfortable, add the next most important step. This greatly ensures success, and it is success that motivates us to keep adding another healthy action.

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15 Fun Self-Care Ideas for Daily Living

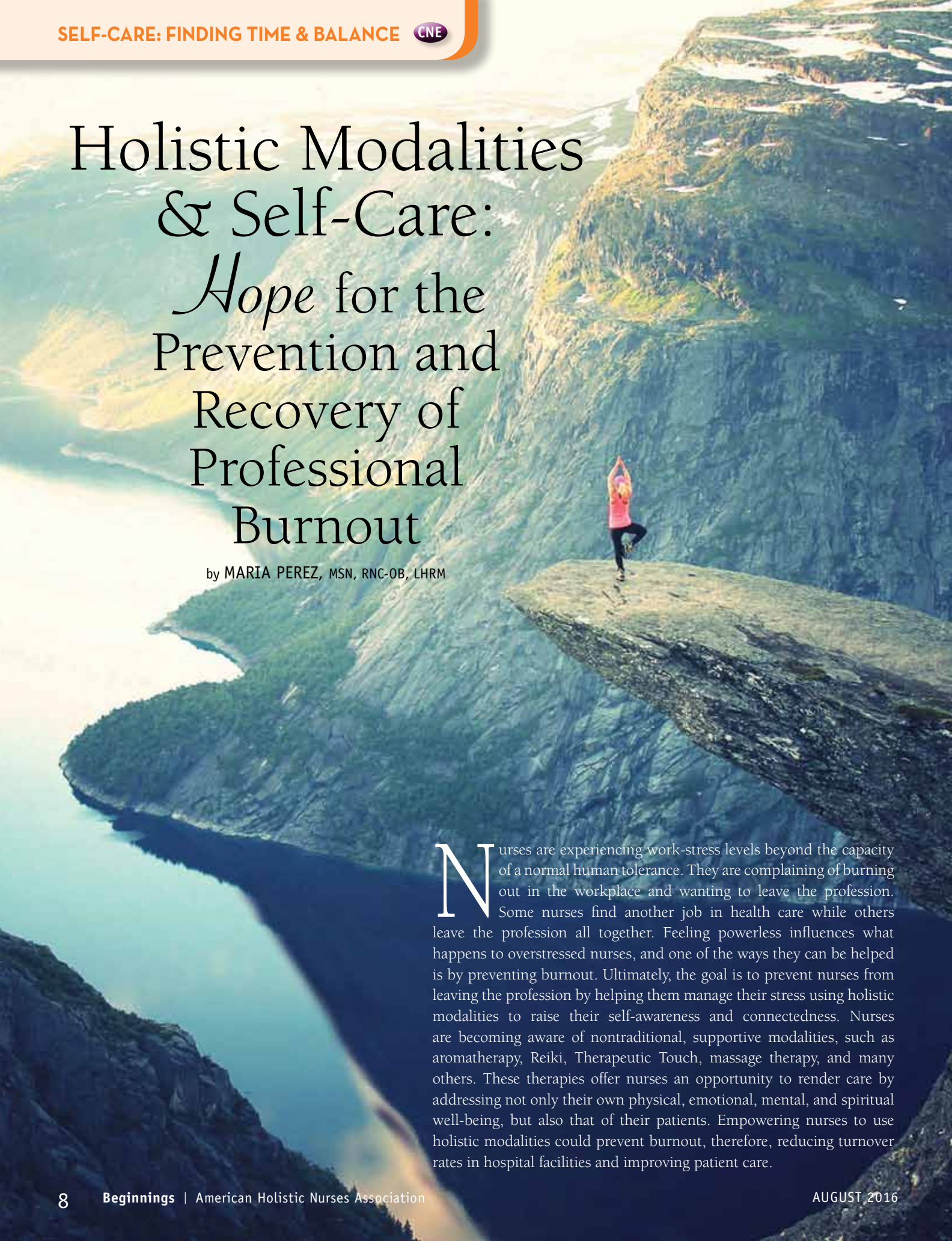
The key to finding time and balance is to *incorporate self-care into what we are already doing.*

Here are a few discoveries to get you started:

1. In the kitchen, squat for anything lower than the counter top (strengthens pelvic floor muscles for men and women, improves bladder control, and sexual performance, especially after childbirth).
2. Make a game out of preparing a meal – “once around the kitchen” – see if you can go once around the kitchen and collect all the things that you need for a meal. Start with breakfast (saves time and keeps you focused in the present moment).
3. Exercise with no electronics! Use time for breathing and centering (improves focus and awareness).
4. Put things away after use (requires only a small amount of time, keeps environment uncluttered, relaxed).
5. Keep water glass/bottle within reach – sip when thinking/talking on phone (encourages hydration).
6. Ongoing shopping list – plan meals for the week and buy weekly (saves time).
7. Take time to laugh, smell the flowers, and enjoy a precious moment (boosts energy and appreciation).
8. Eat meals mindfully without distractions such as TV, iPhone, ear buds, music, or reading. Enjoy the colors of the food, feel the textures, be aware (enhances digestion and nourishes while eating less).
9. Take frequent breaks – pause at least hourly for three to four slow cleansing breaths (refreshes and rejuvenates energy).
10. Walk around as you speak on the phone and focus on your breath (provides exercise and centering).
11. Begin to prepare for bed 30 minutes before and turn off any noise in the environment such as TV, music, iPhone, etc. (decreases stimulation, allowing the body to prepare for sleep).
12. On the road, drive in Stillness. Breathe and pay attention to the world around you (helps you arrive refreshed, rejuvenated, and centered).
13. Allow the telephone to ring twice and take a couple of centering breaths between the first and second ring (allows you to become more alert and aware).
14. Rather than using the drive-through, park and walk into banks, restaurants, dry cleaners, coffee shops, etc. (promotes exercise and as a bonus, you may receive quicker service).
15. Take at least five minutes to look out the window or sit outside in silence to observe and listen (increases your alertness and awareness).

Holistic Modalities & Self-Care: *Hope* for the Prevention and Recovery of Professional Burnout

by MARIA PEREZ, MSN, RNC-OB, LHRM



Nurses are experiencing work-stress levels beyond the capacity of a normal human tolerance. They are complaining of burning out in the workplace and wanting to leave the profession. Some nurses find another job in health care while others leave the profession all together. Feeling powerless influences what happens to overstressed nurses, and one of the ways they can be helped is by preventing burnout. Ultimately, the goal is to prevent nurses from leaving the profession by helping them manage their stress using holistic modalities to raise their self-awareness and connectedness. Nurses are becoming aware of nontraditional, supportive modalities, such as aromatherapy, Reiki, Therapeutic Touch, massage therapy, and many others. These therapies offer nurses an opportunity to render care by addressing not only their own physical, emotional, mental, and spiritual well-being, but also that of their patients. Empowering nurses to use holistic modalities could prevent burnout, therefore, reducing turnover rates in hospital facilities and improving patient care.

Understanding Burnout

Burnout syndrome involves a stressful job in health care where emotional exhaustion (depletion of energy), depersonalization (unfeeling and impersonal response), and a reduction in personal satisfaction from work (lack of sense of accomplishment) are the symptoms (Organopoulou, Tsironi, Malliarou, Alikari, & Zyga, 2014). Nurses tend to burn out due to the unrealistic demands and expectations of themselves which cause irrational thinking; therefore, burnout continues (Balevre, Cassells, & Buzaianu, 2012). This vicious cycle of burnout takes on a life of its own, which leads nurses to desperation.

According to the National Institute for Occupational Safety and Health (2009), work burnout is prevalent among high-risk jobs due to overworking the employees. Nurses are experiencing work-related burnout due to budget cuts and the continual demand of a heavier workload, which are causing tension and extreme stress in their work environments. In turn, the inability to manage stress leads to burnout. Nurses are struggling with job stress, feeling drained, unappreciated, disconnected, and unable to cope with everyday problems, which are known precursors to burnout (Freudenberger, 1975, Leiter & Maslach, 2009). Socialized to care for others and not themselves, nurses also struggle with balancing work and family. Stress consumes the enthusiasm of new nurses to the point where their motivation and spirits are broken (Balevre et al., 2012).

Fortunately, holistic treatment modalities are emerging as beneficial to the reduction of stress. Once nurses achieve control over their stress response, they feel in control and empowerment occurs. Providing nurses with a basic understanding of holistic modalities can potentiate the restoration of harmony and balance to their lives.

Restoring Harmony:

Theoretical Perspectives Related to Burnout

Martha Rogers believed that there are energy fields fundamental to living and non-living things which are in constant change. Howard Butcher's (1993) Theory of Kaleidoscoping in Life's Turbulence, derived from Rogers' Science of Unitary Human Beings and chaos theory, views crisis as life process – irregular, unpredictable, and always changing. Identifying these mutual patterns helps cultivate purpose and can transform “turbulent life events into opportunities for growth, self-actualization, creativity, and harmony” (Butcher, 1993, p.190). Recovering harmony from a turbulent event is achieving a sense of courage, balance,

calm, and resilience in the art of kaleidoscoping, (Butcher & Malinski, 2015). Rogers placed great emphasis on teaching nurses modalities that are non-invasive and holistic, such as massage, storytelling, journaling, and movement to promote health and strengthen the human energy field (Butcher & Malinski, 2015).

Jean Watson's theory of Human Caring suggests that to ensure caring and healing for others, the nurse needs to care for his or herself. Watson (2015) believed that intentional caring-healing modalities for the nurse would enhance his or her caring for patients. She writes, “The caring-healing modalities within the context of transpersonal caring/caritas consciousness potentiates harmony, wholeness, and unity of being by releasing some of the disharmony, the blocked energy that interferes with the natural healing process” (Watson, 2015, p. 327). Watson believed that using methods such as yoga, meditation, communication with nature, and prayer, just to name a few, are modalities used to achieve healing (Fontaine, 2015). These theories create a conceptual framework for the use of holistic modalities to restore harmony and wholeness to nurses who are recovering from burnout and help them better manage work-related stress.

The Role of Relationships

Healthcare professionals often work with people who are under stress, which can be emotionally draining and a risk factor for burnout (Maslach & Jackson, 1981). Freudenberger (1975) clearly observed and documented that the helping professionals exhaust themselves attempting to solve crises for other people on a regular basis, which can lead to serious implications in patient care. Nurses tend to make more errors or act less caring or compassionate when they have reached intolerable stress levels.

Furthermore, empirical findings have indicated that workplace conditions, such as burnout, increasing patient-to-nurse ratio, and psychological and physical stress contribute to nursing dissatisfaction and high turnover rates that add to the shortage of nurses (Vitale, 2009). Deterioration can cause a reduction in the quality of care and affect job turnover, absenteeism, and low morale (Maslach & Jackson, 1981). A new bedside RN can cost a facility upwards of \$58,400 (NSI Nursing Solutions, 2016). There is an infinite amount of work left to be done in this area.

Holistic Modalities for Nurses

Using holistic modalities to raise nurses' self-awareness, self-healing, and connectedness can help them manage stress and prevent them from leaving the profession due to burnout (Vitale, 2009). Even in 1975, holistic modalities were being recommended to help prevent burnout. Freudenberger (1975), recommended that to prevent burnout, workers should take a mental and emotional break through the use of physical exercise, meditation, or yoga. Integrating holistic modalities, such as aromatherapy, acupuncture, massage, pet therapy, music therapy, yoga, biofeedback, energy work, meditation, self-hypnosis, and guided imagery, to name a few, may help

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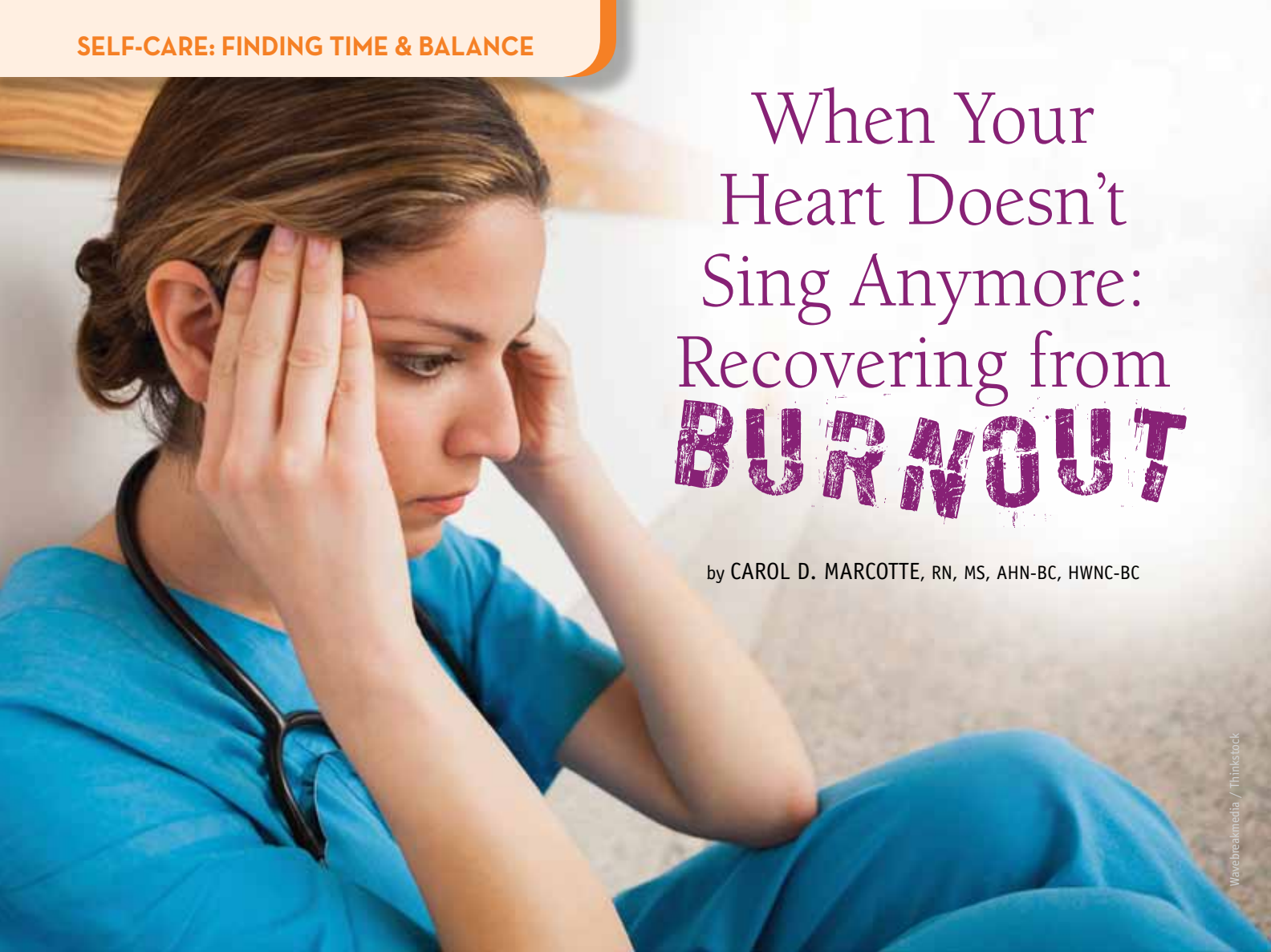
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When Your Heart Doesn't Sing Anymore: Recovering from **BURNOUT**

by CAROL D. MARCOTTE, RN, MS, AHN-BC, HWNC-BC

Recently while riding an elevator, I heard a young nurse express to her friend that she was experiencing exhaustion despite having two days off. As she leaned against the wall, she continued, "I am beginning to think that working is bad for my health."

The following two evenings, a young male nurse entered the elevator and repeatedly said to me, "I am so glad to get out of there!" Witnessing these young nurses express signs of burnout led me to reflect upon my own nursing career. *When, where, and how did my professional burnout begin?*

Understanding Symptoms

Leiter and Maslach (2009) describe burnout as a result of chronic work-related stressors in which profound exhaustion, emotional detachment from the job, and feelings of inadequacy develop. Cherniss states "...people suffering from burnout often are not aware of the connection between their feelings, their behavior, and the chronic stress they are under" (as cited in Hoff, 1995 p. 47).

Arnsten, Mazure, and Sinha (2012) state that our prefrontal cortex controls cognitive abilities such as "concentration, planning, decision making, insight, judgment, and memory

retrieval" (p. 50) and is sensitive to the chemicals released in the brain during unrelenting stress. Additionally chronic stress can disrupt pathways between the prefrontal cortex and older, reactive parts of the brain in which addictive behaviors or anxiety may develop.

Recently when I heard a nurse refer to a colleague as "cold and uncaring," I realized that a deeper understanding of professional burnout may help to reduce stress in those experiencing it as well as in those witnessing it.

Despite strong professional values and ethics as well as many joyful professional experiences, my nursing practice was affected by burnout. I hope my story will help elicit compassion for a burned-out colleague or perhaps for oneself. Compassion involves opening ourselves up to understanding another person's pain and suffering without judgment while desiring to help alleviate it (Neff, 2008).

My Burnout Journey

My burnout began within the first two years of my nursing practice during a staffing reduction in which my day/night shift rotation alternated every other week. Despite collegial

team work, the high patient acuity and staffing ratio was overwhelming. I became angry, tearful, and began performing my nursing duties in a perfunctory manner.

Each night I prayed that we would quickly find those who needed emergency care. My intention was to do the best I could in meeting patients' needs, but my heart didn't sing anymore.

At that time, I was taking a morning sleeping pill which caused me to sleep through two meals. I wasn't fully aware of a weight loss to 95 pounds until a surgeon verbalized concern about anorexia nervosa and asked if I was receiving help. My normal weight returned after a shift change and a vacation. A desire to develop my professional skills further led me to transfer to Intensive Care.

Although critical care nursing offered new learning opportunities, I wondered about my ability to care for critically ill people. Over time, patient quality of life and care issues became a major stressor for me. Acute care nursing also brought heartbreaking experiences such as when I witnessed a seven-year-old boy quietly pleading, "Mommy, please don't die." Feeling overwhelmed, I decided that a new nursing experience would help, so I transferred to a post-anesthesia care unit.

My heart sang in this supportive nursing community until stress developed again. Differing opinions related to adequate postoperative pain relief between myself and some anesthesiologists became a burden. Later, the integration of Therapeutic Touch into my nursing practice helped reduce my stress.

During this time, my mother developed cancer and transitioned to spirit. I felt another life change was needed and entered an Adult Psych/Mental Health Master of Science program. Despite exhaustion and many urges to quit, I completed the program.

Upon completing my degree, I transferred to an inpatient psychiatric unit to further develop my skills in mental health nursing. At this point in my career, I sought help from a psychologist who diagnosed my cyclic feelings of professional futility and exhaustion as professional burnout. Self-care techniques learned during therapy helped to manage my symptoms. However, despite some positive collegial relationships, workplace loneliness became a stressor. My ongoing difficulty with job-related stress finally ended when I retired early to heal from burnout and pursue my Holistic Nursing goals.

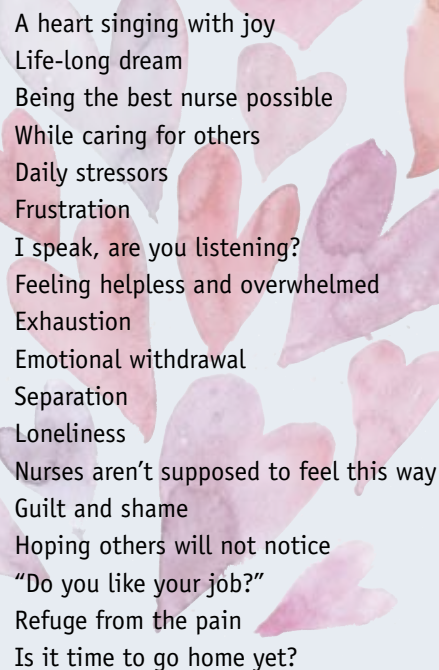
Through burnout, I found meaning and purpose in my professional experiences. The challenging lessons of when my heart stopped singing have enabled me to explore powerful self-care tools which may help others in the prevention and healing of professional burnout.

When My Heart Sang Again: The Journey Home

My journey home began when my symptoms were identified as professional burnout and with hope of healing through self-care. Over the next 16 years, I explored many self-care activities for work and home to heal from burnout and restore a sense of well-being:

When My Heart Stopped Singing

I wrote this poem to share my feelings, emotions, and behaviors experienced during burnout.



A heart singing with joy
Life-long dream
Being the best nurse possible
While caring for others
Daily stressors
Frustration
I speak, are you listening?
Feeling helpless and overwhelmed
Exhaustion
Emotional withdrawal
Separation
Loneliness
Nurses aren't supposed to feel this way
Guilt and shame
Hoping others will not notice
"Do you like your job?"
Refuge from the pain
Is it time to go home yet?

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Wellbeing is a state of being in balance or alignment in the body, mind, and spirit. In this state, we feel contented; connected to purpose, people, and community; peaceful but energized; resilient and safe. In short, we are flourishing. (Kreitzer, Delagran, & Uptmor, 2014, p. 125)

My healing journey home was supported through personal and professional growth, community connection, and self-care. I found it helpful to read holistic works from authors such as: Linda Bark, David Burns, Barbara Dossey and Lynn Keegan, Wayne Dwyer, Caroline Myss, and Eckhart Tolle. I also found encouragement by attending local spiritual and energy healing classes as well as the American Holistic Nurses Association's local chapter meetings and national conference. Other educational resources that supported my healing were the Clairvoyant Center of Hawaii, The BirchTree Center for Healthcare Transformation, The MGH Institute of Health Professions: Mind/Body/ Spirit Certificate Program, and the Wisdom of the Whole Coaching Academy. Also, to help cope with my exhaustion during burnout, the following affirmation was instrumental to my journey home:

Just do the best you can; doing something is better than doing nothing!

continued on page 12

What's in Your Self-Care Toolkit?

Here's a list of tools and activities that I found helpful in healing from burnout. Because each of us live in unique states of being, certain tools and activities will help some more than others. Find the ones that work best for you!

TOOLS FOR OVERALL WELLBEING:

Psychological support: Cognitive Behavioral Therapy

◆ Emotional Freedom Technique ◆ Spiritual support

Spiritual practice: Daily prayer ◆ Meditation

◆ The Ho'oponopono ritual of forgiveness

Naturopathic care: Homeopathy ◆ Herbs and nutritional supplements ◆ Dietary changes for food sensitivities

Exercise: Aerobic ◆ Nature walking

Coaching: Life transition

Energy healing: Therapeutic Touch ◆ Healing Touch

◆ Crystal healing ◆ Chakra care

Mindfulness: Engaging in and observing acts of kindness

◆ Humor ◆ Presence ◆ Affirmations

Community connection: Meditation meet-ups ◆ Family

◆ Friends and holistic colleagues

Environment: Clean ◆ De-cluttered home

◆ Animal companions

Creativity: Cooking ◆ Arts and crafts ◆ Photography

USEFUL TOOLS IN THE WORKPLACE:

Stress Reduction: Periodic assessment of musculoskeletal tension and breathing patterns ◆ Abdominal breathing

◆ Reframing thoughts ◆ Prioritizing daily goals ◆ Bathroom breaks with The Quick Coherence® Technique for Adults (www.heartmath.org)

Collegial feedback and role model: Respectful relationship ◆ Similar professional ethics and values ◆ Similar professional experience

Heart-centered activities: Sharing self-care tools ◆ Mentoring nursing students ◆ Energy healing

HELPFUL TOOLS POST RETIREMENT

Balance mind/body/spirit: Yoga ◆ Grounding meditation (For example, see <https://soundcloud.com/clairvoyant-hawaii/grounding-meditation-marjorie-bratt-gamero>)

Self-reflection journaling: *Who am I really?* Ego presence ◆ Archetypal patterns

Gratitude: Life lessons and blessings ◆ Divine support ◆ Nursing career ◆ Family and friends

Many tools and resources are available to help nurses reduce stress, build resilience, and restore balance in their daily lives. The tools and self-care activities for home and work which nourished my mind, body, and spirit are listed in the box above.

Throughout my burnout journey, I have discovered that self-care is essential in helping to reduce stress in my personal and workplace environments. Martha Rogers' Science of Unitary Human Beings discusses some attributes of the human and environmental energy fields as "integral," "open," and "pan-dimensional" in which "change occurs simultaneously" (Butcher & Malinski, 2010, pp. 255-256). Stress reduction in these open energy systems may prevent the development of professional burnout.

Although my burnout was discovered late in my career, healing occurred through self-care. My journey home evolved into expanding consciousness and well-being in which my heart sings again.

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Carol Marcotte, RN, MS, AHN-BC, HWNC-BC retired after 40 years of inpatient care to heal from professional burnout and pursue Holistic Nursing. In 1995, a desire to improve patient care led her to discover complementary and alternative therapies. Later in her career, Holistic Nursing became an integral part of her nursing practice, self-care, and teaching activities. This article was written as an independent study project with the MGH Institute of Health Professions: Mind/Body/Spirit Certificate Program. A special thank you to Kathleen Miller, RN, PhD, AHN-BC, faculty mentor for this article.



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- Melissa Sperry, RN, BSN - NIWH Graduate



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Learning Balance: Self-Care in Nursing Curriculum

by KATHLEEN CINO, PhD, RN

Every nurse knows the struggle to find balance between competing priorities. Often in the course of a week, despite our best intentions, the balance tips away from healthful patterns, and we find ourselves eating on the run, forgoing relaxation, and expressing frustration through behaviors we dislike. In these areas, nurses are human and vulnerable to the demands of our lives. On the other hand, this vulnerability can open the door to awareness, revealing the need for self-reflection as a practice for health. In self-reflection, our habitual patterns, both good and bad, surface for examination. Our usual outward focused “to-do list” mind turns inward, and we have the opportunity to learn more about ourselves. Once aware of health patterns, we can focus our self-care goals on small and measurable outcomes, linking what is to what *could be*. Self-reflection is a powerful learning tool that can be incorporated into nursing curriculum to help prepare student nurses for the challenge of finding balance and staying healthy throughout their professional careers.

Self-Reflection & Self-Care in Nursing Education

In nursing education, the focus for students is generally on knowledge development, critical thinking for problem solving, learning and practicing professional communication, taking tests, writing papers, and doing clinical work. While all these experiences are necessary to prepare for nursing practice, the students’ focus is typically far from self-reflection and even further from self-care. This core value of holistic nursing is not often found in the course objectives of a nursing syllabus or in program outcomes, however this is changing. The American Nurses Association’s (2015) scope and standards of practice have broadened the

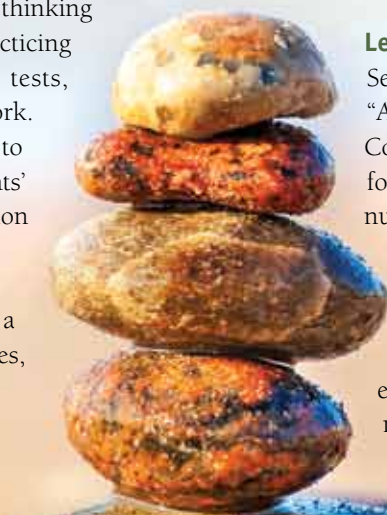
definition of nursing to include “the...facilitation of healing...” (p.1). This means that healing, including self-healing, now falls within the scope of professional nursing practice.

Stress is common among nursing students; a decreased ability to cope with stress is evident in poor academic performance, student attrition, and suboptimal professional identity formation (Galbraith & Brown, 2011; Hensel & Laux, 2014). For nurses and student nurses, learning healthy coping strategies is part of the development of self-care and a professional education. McElligott (2013) described self-care as engagement in activities to enhance wellness and health promotion. Self-care promotes health and encourages work-life balance, but it takes time and effort to learn. Effectively managing stress requires learning self-awareness. For example, noticing body sensations like muscle tension or increased heart rate can help signal stress. Another form of self-awareness includes recognizing mental and emotional feedback experienced in the stress response such as “all or nothing” thinking, frustration, and anger. The effectiveness of this learning increases with practice and genuine interest. Mind-body therapies may even help change self-defeating behaviors.

Learning Self-Care – the “Art of Nursing”

Self-care practice is one of the graded outcomes of the “Art of Nursing” course I teach at Farmingdale State College in New York. It is a two-credit mandatory course for all students enrolled in the Bachelor of Science nursing curriculum. The course explores such concepts as the mind-body connection, caring, presence, and mindfulness within the technology influenced healthcare delivery system. In the classroom, students participate in a variety of mind-body experiences including progressive muscle relaxation, meditation, laughter, chair yoga, and touch therapy.

One of the assignments for this course focuses



Maciej Bledowski / Thinkstock

Holistic self-care belongs in nursing curricula.

on self-care for health promotion. After completing a self-care inventory, the students created individualized self-care goals and plans. Throughout the semester, they worked periodically with a partner. The students took turns as the “coach” to support each other’s personal goals. Every few weeks during the semester, the student dyads had class time for reflection and dialogue on their self-care plan goals, helpful strategies, supports, and obstacles. This opportunity to reflect and re-prioritize self-care seemed to be an effective learning strategy. At the end of the semester, each student evaluated her/his self-care results for a grade. The results were used as part of a research project that met IRB approval and the informed consent process.

The research purpose was to assess changes in attitudes toward mind-body therapy and self-care after a semester-long experience. There were 35 students in total: 19 were student nurses (12 female and seven male), and 18 were registered nurses (17 female and one male). I used two methods to assess student self-care results. The first was the Attitudinal Mind-Body Skills Scale (MBSS), which is a 21-item, seven-point Likert scale originally designed by faculty at Georgetown University School of Medicine to measure attitude changes in medical and nursing students toward mind-body therapy after completing a Mind-Body Medicine Skills course (Tractenberg, Chaterji & Haramati, 2007; Karpowicz, Harazduk & Haramati, 2009). The second assessment was the students’ graded evaluation of their self-care project, which included two self-care goals, the strategies used, what interfered, and any new knowledge about how to care for self.

Students reported using the following self-care strategies:

- planning calendar reminders for designated self-care time,
- prioritizing important relationships such as the relationship to sleep, good nutrition, exercise, and movement, and
- scheduling family time with spouses and children.

Their reflections on learning were very interesting. For instance, there was recognition of the paradox that focusing on oneself resulted in improved relationships in the family. Many began incorporating physical stretching and getting up from studying to take a break.

Although some students did not meet their self-care goals of improved weight or exercise, their reflections expressed a sense of accomplishment and excitement to have begun the process. One student said, “I didn’t meet my goals, but I have started working toward them and that’s good enough for me.”

In addition, the coaching model encouraged motivation. During the semester, coaching partners/dyads reflected motivation back to the learner in small, manageable steps and short blocks of time. Despite all the challenges to living

healthful patterns in diet, exercise, and sharing quality time with loved ones, students recognized opportunities to practice in the moment. Any time spent on self-care is valuable.

Holistic self-care belongs in nursing curricula. Most interesting were the students’ reflections on the therapeutic modalities. One student reflected that meditation has become part of her daily life. Another learned to quiet her external environment and stretch. In addition, others reflected that the breathing and laughter exercises taught in class were helpful ways to care for self. One student said, “I do find myself treating ‘me’ better.”

Self-care is a professional competency for nurses in contemporary healthcare systems. One student reflected, “in order to care for others, we need to care for ourselves.” Incorporating therapeutic modalities and self-reflection in nursing curriculum appeared to demonstrate increased options and choice for self-care. When self-reflection and living in balance are learning outcomes, health patterns may shift. Equipped with invaluable skills for maintaining work-life balance, I believe these student nurses will have a greater opportunity to thrive in their future workplaces. As such, I am thoroughly convinced that the holistic principles and values of self-care and self-reflection resonate with excellence in nursing education.

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Holistic Nurses Bring Self-Care to Brigham & Women's Hospital Shapiro 8

by MARY A. ABSI, BSN, RN
SANTINA WILSON, BSN, RN
HEATHER HOGAN, BSN, RN, &
ALICE O'BRIEN, MS, RN

Whether through meditation, positive affirmations, massage therapy, reflexology, or soft tones from comforting music, there is one certainty: self-care revitalizes us. Every one of us seeks to be affirmed and comforted, to be valued by our healthcare providers, and to feel a sense of well-being from an experience that frees us from stress and infuses us with a profound spiritual energy. Nurses shouldn't be an exception to this. We, too, have the need and desire to experience caring replete with an awareness of the emotional impact that one's kindness can have on another, therefore enabling us, through awareness, to better give of ourselves in promoting quality care to others (O'Brien, Hogan, Wilson, Absi, & Roche, 2012).

At Brigham and Women's Hospital, Boston, MA, Shapiro 8, we have implemented essential self-care strategies for nurses which in turn has enabled them to be more engaged in their working environment. Nurses need to feel healthy and be in a positive mind-set in order to provide optimal care to their patients. This occurs first by learning the tools for self-care and later by implementing them. When nurses are balanced, present, and connected, patients feel comfortable to initiate authentic, deep therapeutic interactions, setting the foundation for the healing journey.

Our integrative care program is designed to meet the social, spiritual, and physical needs of the nurse. The following therapeutic treatment modalities are provided to nurses as stress reduction therapies: chair massages, reflexology treatments, healing Reiki sessions, meditation group sessions, music by harpist, and positive affirmations. In addition, we have created a designated area for nurses to relax, rejuvenate, and unwind – our “Caritas Room” (Watson, 2008). This quiet space is available 24 hours a day and is equipped with various relaxation treatment modalities including arm, neck, back, and foot massagers. Nurses have the option to use this space for journaling, reading holistic nursing publications and affirmation materials, listening to music therapy, or for simply spending their own quiet time. The nurses have a place to get away from stressful situations while experiencing a busy day to unwind. This room has allowed nurses to step away from the floor to reflect and center themselves, allowing them to take a deep breath and return to the floor with a positive mindset.

Maintaining strong mental, spiritual, and emotional health is essential to good self-care. Setting aside a quiet moment during the day for prayer, meditation, and reflection can help promote positive health outcomes for the nurse. The development of the Caritas Room has supported this idea. Our nurses have reported being less stressed and anxious upon leaving the room. They feel recharged, rejuvenated, and centered. In addition, they have a greater appreciation for the importance of self-care, which has fostered cohesiveness among our peers.

Caring for staff has significant implications for the profession of nursing (Blum, 2014). Low patient satisfaction has been correlated with nurse burnout, which suggests that wellness initiatives promoting self-care for nurses could help improve patient care (O'Brien, et al., 2012). Hernandez (2009) eloquently articulates:

Nurses are experts at caring for others but novices at caring for themselves, as reflected in high rates of burnout, illness, substance abuse, and the challenges of recruitment and retention that plague the nursing profession.

Self-care is foundational to nursing, and many nurses appreciate that self-care is essential to our practices, but many of us fail to properly care for ourselves. Nurses in all areas of our profession have the opportunity to influence their organization's culture and make a conscious effort to develop structures that create optimal healing environments by honoring our work, focusing on our patients, honoring our colleagues, and most importantly, honoring ourselves. (p. 129)

We believe that providing complementary and integrative therapies for stress reduction is imperative to the nursing profession. If nurses are able to achieve balance in their lives, they are more apt to be in a positive mindset and provide better care to their patients.

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alternative care nursing since 2007 and have been recipients of two prestigious awards including the Lily Kravitz Nursing Research Award in 2007 and the Be Well Work Well Nursing Research Award funded by the Harvard Public Health Department in 2014. Each of us has also received Reiki Master certification.



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Running & Meditation: Combining Modalities to Synergize Self-Care

by JUSTIN J. CARPENTER,
MSN, RN, HN-BC, AGCNS-BC, Caritas Coach

I started out my nursing career in a busy urban emergency center. Within just a couple of weeks of graduating nursing school, my first child was born – a beautiful, albeit colicky baby girl. While my wife was on maternity leave, her company closed down, leaving me as the sole provider in my family for the first time. While most of the stress I felt in my home life was eustress, it was still stress. This, coupled with working in an apathetic, mechanical emergency department, left me feeling burned out after just one year of being a nurse. Before I was introduced to holistic nursing, I was ready to leave my job in search of something more meaningful and life-renewing. Little did I know this had to come from within.

I first learned about the concept of self-care at a ReAwakening the Heart: Caring and Renewal in Nursing Practice™ retreat. This is a one-day introduction to holistic nursing developed by the BirchTree Center for Healthcare Transformation. Like many holistic nurses, I was instantly drawn to this idea. It just felt right:

I needed to be at my best to better care for others!

Brian A. Jackson / Thinkstock

It's such a simple concept, but still so difficult for many of us to do. We have all these other responsibilities, and we're always putting others first. In fact, that's what we're taught growing up: "It's selfish to put yourself first," and "You should put others' needs before your own." These are the hallmarks of a good person. The problem with this line of thinking is that we can only give so much before we have nothing left to give. We have to take the time to refill ourselves so that we may continue to give. When we're tired, stressed, rushed, and cranky, our patients notice, and they suffer because of it. This also is true for our coworkers, friends,

and family. We are better people when we take care of ourselves.

A Work in Progress

The *Holistic Nursing: Scope and Standards of Practice* (AHNA & ANA, 2013), states that "self-reflection and self-care, as well as personal awareness of and continuous focus on being an instrument of healing are significant requirements for holistic nurses" (p. 20). Practicing self-care kept me from leaving the emergency department and helped me be a better father, husband, friend, and nurse – but it is a process. It is not something that is learned and then you are complete.

Watson (2008) says it is an ongoing practice that must be cultivated, nourished, and sustained so that we may remain open, compassionate, and be better instruments of healing. We must learn to both give and receive. You may not be able to practice self-care every day, but every little bit helps.

Running & Meditation: Combining Two Renewing Self-Care Activities

Exercise is probably my favorite form of self-care. It has been part of my daily routine ever since I was a young teenager. However, I was never much of a runner.

continued on page 20

3 Easy Meditations for Nurses on the Run

The exercises included here are just a few of the meditation practices that I've incorporated into my running routine. They are adapted from meditations found in the works of Cohen (1997) and Brennan (1987). These exercises are also great whether you're walking, hiking, riding a bike, or sitting.

Exercise 1: Grounding & Opening

I usually start my runs with a grounding and opening exercise. Bring your awareness to the soles of your feet. There is an energy center located there on each foot. Visualize this center opening and allowing roots to grow out of your feet deep into the earth; going both down and out to stabilize you. Then bring your awareness to the palms of your hands. Allow the energy centers there to open. Visualize tree branches growing out of your palms and up to the sky bringing you in touch with the wisdom of the universe.

Exercise 2: Increasing the Qi (Chi)

I like to combine this exercise with the grounding meditation. Once you feel rooted into the ground, breathe in the earth's healing energy up through your legs to your Dan Tien (an energy center located just below the naval). Then exhale the energy back down into the earth. Repeat this for a total of nine times. Turn your attention to your left palm. Breathe in the energy, wisdom, and love of the universe through your left arm up to your shoulders and exhale out through your right arm. Repeat this for a total of nine times and then switch arms, breathing in through your right arm and exhaling out of your left arm.

Exercise 3: Detoxifying

Bring your attention to the crown of your head. Visualize your crown opening like a flower blossoming. Now picture a warm, white, soothing liquid pouring into your body through your crown. Allow it to fill your body, starting first at your feet then moving up through your calves to your knees and thighs; up through your pelvic region and then to your abdomen and lower back. Continue up through your chest and upper back to your shoulders, and then down both arms, all the way to your fingertips. Lastly feel it in your neck and head until your body is completely full. Now allow this healing liquid to sit in your body, soothing you, relaxing your muscles. As this elixir sits in your body, allow it to soak up all of your mental, physical, and emotional toxins. Allow it to soak up your fears, doubts, worries, and feelings of insecurity or unworthiness – all of your negative energy or energy blocks, all of your aches and pains, anything that you feel is not serving your highest good. You may start to notice that as this elixir soaks up these toxins, it starts to turn dark in color, becoming gray or even brown or black; it might even become sludgy. Once you feel cleansed, "open" the soles of your feet and allow the liquid to drain out of your body and into the earth beneath you.

If after draining the liquid from your body, you still feel some "residue," picture a showerhead above your crown. Turn it on and allow it to rinse the rest of the toxins from your body. This may sound silly, but when I first started using this exercise, I felt like I was polluting the earth with my negative energy. So I started blessing this liquid as it left my body and asked that it be used as fertilizer to help grow more love and compassion on the planet.

That is, until my wife convinced me to run a half marathon with her a few years ago. I struggled at first, but eventually found it very cathartic, detoxifying, and renewing. While training for this marathon, I noticed that my mind would often start racing at the beginning of my run, but would taper off toward the end, much like with meditation.

I've been an inconsistent meditator for several years now, often meditating more when I'm going through something stressful rather than as a daily practice. I've often felt like I had to choose between exercise and meditation – that there wasn't enough time for both in my daily routine. However, over the years, I've found many different ways to incorporate various forms of meditation into my life, so that I now practice more on a regular basis. One of the most enjoyable ways I have done this is by combining running and meditation. I've found that it benefits both my exercise routine and my meditation practice, creating a synergistic effect.

When I'm particularly stressed out or worried, I find it difficult to sit in

meditation and calm my mind, which just keeps racing and racing. When I'm out jogging and I start to meditate, I find it much easier to clear my head and focus. Over time, this has also improved my focus when practicing a sitting meditation.

There is a lot of buzz in the field of nursing today about burnout and compassion fatigue. The single most important thing we can do for ourselves to help mitigate the effects of burnout and compassion fatigue is to practice self-care. If exercise or meditation doesn't appeal to you, I invite you to ask "What one thing can I do for myself today?" It can be taking your whole lunch break (or taking one at all!), taking a short walk, or just enjoying a cup of coffee or tea in peace and quiet – anything that helps you feel renewed. Remember, self-care is not selfish, it's necessary.

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Delivering Culturally Competent Nursing Care by Gloria Kersey-Matusiak, PhD, MSN, RN. (2013). New York: Springer Publishing. 284 pages. List Price: \$55.00 (paperback).



We are challenged to deliver nursing care to ever more culturally diverse patient populations. While we cannot be expected to know every aspect of each culture we encounter in our practice, we need to be open to and committed to a life-long process of learning and becoming increasingly culturally competent.

This author views the concept of culture broadly and includes the cultures of poverty, hospital units, social groups, and organizations in addition to language, racial, geographic, and ethnic nationalities. For example, the book includes chapters that consider issues and practices related to: patients' religious or spiritual needs that may differ from one's own; various beliefs and practices associated with death and dying; gender identity or sexual orientation; and geographically displaced patients, such as, new immigrants or refugees. Although there is a chapter on cultural considerations for patients with physical, psychological, or intellectual disabilities, I would also like to have seen a separate chapter that discussed the deaf culture – particularly because not everyone would view being born deaf as a disability. Some deaf parents, after all, have been known to express a desire for their children to be born deaf so that they may share the same culture.

The author presents a Cultural Competency Staircase Model designed to help nurse practitioners and student nurses continually self-assess and further develop their cross-cultural skills with these various population groups. Case scenarios are used to illustrate the application of the model. Strategies for strengthening culturally competent knowledge and skills are included. The importance of reflective and active listening is emphasized. NCLEX-type questions are included at the end of each chapter to help readers test their comprehension. Abundant references and important websites listed at the end of each chapter offer the reader additional help. This book is designed for use throughout the undergraduate nursing curriculum, but would also be a valuable aid to any nurse who is committed to providing excellent nursing care in light of the increasing diversity of our global society.

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reduce anxiety, restore health and balance, and offer nurses a sense of purpose and meaning in their work. For example, Touch Therapy and Reiki are inexpensive and noninvasive; they help reduce stress, pain, musculoskeletal conditions, depression, and anxiety, and produce relaxation and healing (Vitale, 2009). Nurses can use the conceptual framework of relaxation or stress reduction to achieve and identify measures of these holistic treatments.

There is existing literature to suggest that use of holistic practices may reduce nurse burnout, but it is limited. Several studies address specifics of complementary and alternative medicine in relationship to treating nurse burnout (see box at right). These studies support further investigation into nursing burnout and the effects of holistic modalities to reduce stress.

Balevre et. al.'s (2012) findings suggest that nurses need to change their thinking patterns to prevent burnout. Nurses are self-sacrificing which leads to increased stress levels. In Organopoulou et al.'s (2014) study, burnout was more evident in the nursing profession. Cuneo, et al. (2011), demonstrates how the body is connected to the nurse's energy field and how this affects work environment or the nurse's personal life. Vitale (2009) specifically addressed holistic therapies for improvement of stress management for well-being in nurses and patients. She encouraged health care to advocate for holistic therapies in the workplace. Research indicates that Reiki and/or Healing Touch are effective in reducing work-related stress, which supports the need for a qualitative phenomenology study of nurses' lived experiences with burnout and holistic modalities.

Looking to the Future

Research needs to be conducted on the effectiveness of each of the holistic therapies through nurses' lived experiences with burnout. Phenomenology gives rise to the

What Does the Research Show?

Literature searches on burnout on CINAHL produced 18,203 articles. Narrowing the search to peer-reviewed works related to nursing produced 254 articles. MEDLINE with the same inclusion produced 82 articles and ProQuest produced 192 dissertations. The following is a sampling of research on the use of holistic modalities for self-care and preventing burnout in nurses.



- ▶ Vitale (2009) observed that Reiki keeps nurses balanced, centered, and grounded which reduced their stress levels and anxieties, prevented burnout, and led to healing. This phenomenological study also concluded that:
 - self-Reiki is useful for stress management, especially during the workday.
 - being a self-healer in holistic nursing helps nurses de-stress and generates focus.
 - educators need to incorporate practices in holistic nursing into curricula.
- ▶ Tang, Tegeler, Larrimore, Cowgill, and Kemper (2010) conducted a quasi-experimental study that measured the stress of nurse leaders in an academic health center after a treatment period of Healing Touch. The nurse leaders self-reported significant improvement in depression, stress, anxiety, relaxation, well-being, and sleep after completing Healing Touch training.
- ▶ Cuneo, et al. (2011) demonstrated that educating nurses in Reiki decreased work-related stress after three weeks, including significant improvement in sleep, relaxation, calmness, peacefulness, and feeling of warm/hot.
- ▶ Balevre, Cassells, and Buzaianu (2012) reported a significant correlation between maladaptive thinking patterns and nurses' burnout thoughts and burnout behaviors. Highlights of this quantitative replication study include the following findings:
 - Nurses with specialty certification are less likely to have thoughts focused on failure and feelings of inadequacy, which may help protect them from burnout.
 - Nurses who work during the day can exhibit the maladaptive thinking of the self-sacrificing pattern that leads to burnout.
 - Regular stress management programs can provide nurses with the tools they need to diminish irrational beliefs that lead to professional burnout.
- ▶ Organopoulou, Tsironi, Malliarou, Alikari, and Zyga (2014) found that a low level of education seems to have a positive correlation with the phenomenon of burnout along with high levels of anxiety. Interesting findings of this survey study include:
 - a correlation between gender and anxiety; women have more anxiety than men.
 - higher levels of anxiety and greater burnout among nurses than physicians.
 - lower levels of depersonalization among physicians than nurses.

possibility of new meaning emerging from people's lived experiences by revisiting turbulent life events and providing understanding (Crotty, 1998). According to Rodgers (2005), phenomenology is the interplay between the perception, objects, and reality of human experience that shape the events or objects which have shaped the experience. Hermeneutical phenomenology as a choice, when researching the topic of complementary and alternative medicine with nurses who have burnout syndrome, would add to the researcher's interpretation of the data. Purely describing the experience with transcendental phenomenology would just leave the topic open to subjective interpretation. A phenomenological study would help nurses as healers and the patients through their lived experiences. Implementation of a pilot study on the effects of holistic therapies on nurse burnout would provide valuable insight into caring for future nurses and increasing retention.

Research on burnout needs to be presented to encourage involvement at local and national levels because of the nursing shortage crisis. Nurse researchers can raise awareness of the growing numbers of nurses who burn out and leave the profession. As change agents, the challenge will be to advocate for changes to provide safety for nurses and preservation of professionals in practice by helping nurses prevent burnout. Professional nurses are becoming aware of the crucial need for holistic practice in the workplace. Nurses requesting for a tranquility room or meditation areas in the workplace is becoming more evident in the hospital setting (Gonzalez, Pizzi, Thomas, Cooper, & Clyne, 2013). Teaching nurses to help themselves by setting goals, modifying their jobs, delegating, self-healing, self-caring, performing self-evaluations, and achieving work-life balance will help reduce stress and anxiety, and in turn, reduce nurse burnout. Likewise, teaching nurses to administer holistic modalities helps them manage their own stress which in turn helps to improve their personal outlook and sense of empowerment (Cuneo et al., 2011). Movement toward this paradigm shift to incorporate holistic therapies into self-practice, clinical practice, and education of nurses will result in collaborative research to further provide evidence of the significance of mind, body, and spirit (Vitale, 2009).

We must keep qualified and skilled bedside nurses in the profession. Incorporating holistic modalities into our daily lives can help reduce stress. And because stress is the root of burnout, I would like to conduct a pilot study on mindfulness meditation in the workplace to bring nurses back to practicing holistically. We as holistic nurses need to be leaders in the areas of self-care and self-healing. It all comes down to this basic question: How can we care for others, if we do not care for ourselves?

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Healing Ourselves While We Facilitate Healing In Others

by NICOLE LENZEN, MS, RN, NC-BC

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An essential part of holistic nursing practice is self-care, which in turn allows us to truly care for others. I've found that even a small amount of dedicated time for self-care can make a profound difference both in life and in quality of nursing care. My personal journey, first as a holistic Clinical Nurse Specialist (CNS) student and now as a recently hired integrative nurse clinician, has led me to a deeper understanding of what it means to be a holistic nurse.

My CNS Journey: Caring for Colleagues, Patients, & Self

Starting Spring 2015, New York Presbyterian formed an agreement with The College of New Rochelle that allowed graduate students from the CNS in Holistic Nursing program to do a clinical rotation at the Weill Cornell campus under the supervision of Jane Seley, DNP. I had worked at New York Presbyterian Weill Cornell (NYPWC) as a staff nurse for more than six years, first in the Pediatric ICU and then in the Endoscopy unit. I was excited to have this opportunity to bring my additional holistic education into my workplace and give care to the staff in the hospital that gave me my start. In my clinical experience, I provided holistic nursing sessions to the hospital staff on 14 units on four floors. Each session was approximately 15 minutes and usually included some combination of health coaching, meditation, energy based healing, aromatherapy, and/or light massage. For my clinical hours outside of New York Presbyterian, I worked at White Plains Hospital, the College of New Rochelle student health clinic, and other NYC area healthcare institutions giving similar holistic care directly to patients.

During this time, I came to truly understand that in order to care for others, I needed to learn to care for myself too. An important part of this journey in self-care for me has been taking self-healing classes with Barbara Joyce-Lambert, PhD, RN, former chairperson of the graduate programs and the co-creator of the master's degree program in Holistic Nursing at the College of New Rochelle. In these classes, I explored my inner resources of wisdom, love, and compassion. I also explored what truly mattered in my deepest self. I furthered my journey of accessing and speaking my truth. There is a phrase called *right action* in the holistic world. To me, that means doing what

feels right in your mind, body, and soul... down to your very bones. This is what I've been working on cultivating in my life.

Now, my continued journey of learning to truly care for myself and for others simultaneously has resulted in full-time work doing what I am most passionate about – being a holistic nurse. In the fall of 2015, I had emailed the Clinical Nurse Coordinator and manager of the Department of Integrative Health Programs at NYU Langone Medical Center (NYULMC), inquiring about job opportunities for holistic nursing. The Department of Integrative Health Programs at NYULMC was established under the Leadership of Kimberly S. Glassman, PhD, RN, NEA-BC, the Senior Vice President, Patient Care Services and Chief Nursing Officer, which in turn made holistic nursing an integral part of the medical team.

In the email inquiry, I submitted a letter and my resume to the clinical nurse coordinator Jeanne AbateMarco, NPP, MS, RN, even though we had never met. Not surprisingly, there were no openings at the time. A month later, in a very synchronistic moment, I met Jeanne at a holistic class that I was taking for my self-care (at first, we didn't recognize each other). Unbeknownst to me, she was a co-teacher in many of Dr. Joyce-Lambert's classes. Several months later, the position at NYULMC became available. Because of my work healing and learning over the years as well as in that class with Jeanne, I was able to formally apply to NYULMC when the position opened up and demonstrate that I was the right person for the job! As of this May, I am working as a nurse clinician providing care to help manage pain, stress, anxiety, and sleep using integrative and holistic modalities. Pending my board certification, I will be recognized as a practicing Clinical Nurse Specialist in holistic nursing in my position at NYULMC.

Understanding Holistic Nursing

Upon reflection, these last five years of holistic classes and experiences have transformed my nursing practice and deepened my understanding of what it means to be a holistic nurse. Holistic nurses study unitary/transformational caring healing theories and research (Zahourek, 2013). Studying under the coordinator of the master's program in Holistic Nursing, Professor Dorothy Larkin, PhD, RN, I learned that

this specialty practice is grounded in academic theories that use principles of true presence, intention, and caring. The modalities we learn are associated with many health-promoting benefits in the literature. We use various modalities to create an environment that promotes connectedness and healing, but a significant goal of the work is for the nurse to literally become the healing environment (AHNA & ANA, 2013). In this process, we are facilitating patients' abilities to seek and utilize their inner resources for healing. This can create an opportunity for them to find comfort, peace, and relaxation, even when the patient cannot physically be cured. We focus on relationship-based care, which is shown to improve outcomes in health care (Smith & Parker, 2015; Beach et al., 2006).

Holistic nurses have the schooling and clinical experience of a nurse with extra holistic education. This allows us to teach or offer integrative methods to decrease the stress response, facilitating repair and restoration. When providing care, holistic nurses actively devote their attention and intention for the highest good. In this way, the tenets of holistic nursing overlap with traditional nursing. In both, one is attempting to create the best possible outcome for the patient. One of our main goals is to care for the needs of the whole person – mind, body, emotion, and spirit. We strive to create an environment where the patient has the best possible chance to heal or recover from illness, as well as promote health and wellness.

In the recent Institute of Medicine (IOM, 2011) report on the future of nursing, nurses are called to practice to the full extent of their education and training, as well as act as full partners with other healthcare professionals. The Joint Commission (2014) recently released new standards where integrative approaches, like relaxation therapy, acupuncture, and massage, are expected to be included in pain management in hospitals. These paradigm shifts support the core values of holistic nursing and encourage the use of holistic nursing modalities in all healthcare settings. We are aligned with the IOM recommendation that patients are partners in the healthcare process rather than the nurse acting as the decision-maker for the patient. We are aligned with nurses being leaders in transforming our healthcare system.

I have seen holistic nursing truly impact patients' health and the delivery of health care – especially when integrative modalities are used. After treatments, my clients usually report feeling relaxed, energized, or both. Following energy work, people often say they feel a decrease or alteration in their perception of pain. Occasionally, a patient has declined or no longer needed pain medication after a treatment. I've had one client say, "All I really needed was someone to listen." This reinforced for me the power of presence in nursing. Often, the session will be one of the few times that clients felt they were able to devote time to take care of themselves. After imagery or meditation, I've heard people say that they felt transported to another place, a place where they felt refreshed and better able to get through the day. I would not be able to do this work with patients unless I experienced this kind of healing myself.

It is a gift to have dedicated time to simply be present with another individual. We, as holistic nurses, are taught the ability to devote our full, caring attention to the individuals around us, despite the many distractions of a busy healthcare setting. Sometimes the holistic nursing session solely consists of deeply listening to the story of the person in front of us. We bear witness without judgment to their personal journey. Other times, we are offering a reprieve from a chaotic, pressure-filled day with a warm, caring presence, touch, and smile. This can be the small act of kindness that promotes new, fresh energy to continue forward. Each holistic nursing intervention is individualized to the client, determining exactly what their unique needs are and how to meet them. The goal is to promote the best possible outcome for the client while attending to their humanity. This is behavior that I often see in nurses in hospitals; so, in my view, holistic nursing is a way to deepen that expression.

After one particularly busy clinical day, I received a large amount of thanks from the staff receiving holistic care, which prompted me to write this article. Given the extraordinary work that healthcare professionals do every day taking care of patients, they deserve their own care too. Whether holistic nursing care is given independently of other services or it is woven into one's nursing care, there is immense benefit for the giver and the receiver. The better we are able to take care of ourselves, the healthier and more mindful we will be when caring for others. The better we care for ourselves, the more able we will be to take care of the larger field of health care. And together, we can lead the much needed change of healing our healthcare system.

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Maintenance of Nursing Certification:

Ensuring Holistic Nursing Competency

by MARY ELAINE SOUTHARD, DNP, RN, MSN, APHN-BC, HWNC-BC, DiHom

Certification by the American Holistic Nurses Credentialing Corporation (AHNCC) sets the highest standard in holistic nursing through successful completion of qualitative examinations. AHNCC is a nurse-led, non-profit organization that has established certification criteria for holistic nurses at the basic and advanced levels. Accredited by the American Board of Nursing Specialties (ABNS), AHNCC examinations are Magnet® recognized. Nurses who have obtained a certification in holistic nursing demonstrate – to both peers and the public – that they possess the clinical judgment, skills, and attitudes essential for the delivery of excellent, holistic patient care. Specialty certification benefits the public, employers, and nurses alike.

How Recertification Benefits Nurses

In today's economy, nurses are strategically choosing their professional memberships and certifications. Holistic nurses view certification within the professional context of employment and personal commitment to holistic philosophy and practice. Once certified, many nurses are challenged by systems that do not recognize their certifications. These systems often request more “mainstream” venues of certification that are based on traditional nursing models consistent with their medical counterparts (e.g., critical care, diabetes, pulmonary). Holistic nurses need to identify the importance of their certification credential as a catalyst for creating change that is needed in health care.

When contemplating recertification, it is important to evaluate this holistic credential through the lens of healthcare

leadership. The benefits of recertification are not just financial; they are personal, professional, and goal driven. Recertification reveals a continued commitment to self-evaluation, reflection, and learning in holistic nursing. As the current healthcare landscape changes, holistic nurses are being viewed as forerunners of health, wellness, and wellbeing in a variety of healthcare and practice settings. Shifting the healthcare paradigm to a health and wellness-focused platform requires leadership from a holistic framework and practice.

For continued visibility, credibility, and recognition, recertification is even more valuable today than in the past. The scope, relevance, and quality of holistic nursing recertification can contribute to innovative workplace practices and multi-level leadership. Choosing to continue certification at this transformative time links holistic nursing to the changing milieu.

In 2007, a national study conducted by ABNS investigated nurses' perceptions, values, and behaviors related to certification. The study indicated that nurses who pursue certification have an increased sense of job satisfaction (Niebuhr & Biel, 2007). The recognition of holistic nursing through certification also increases the nurse's perception of empowerment and contributes to workplace effectiveness. Board Certification sets the stage for continued professional development and a sense of pride and accomplishment in one's everyday practice.

Clinical ladders and Magnet® recognition are often the stimulus for specialty nursing certification in healthcare institutions (Watts, 2010). As institutions add wellness services, holistic nurses will play a pivotal role in changing the healthcare culture.

More research is needed to link nursing specialty recertification with enhanced patient outcomes. Hickey et al. (2014) confirm, “Although it is hypothesized that credentialing leads to a higher quality of care, more uniform practice, and better patient outcomes, the research evidence to validate these views is limited.” Credentialing in nursing has implications for healthcare professions and national policy. With all this in mind, recertification in holistic nursing is imperative to advance the specialty and provide best practice guidelines.

For the Public

In recent years, healthcare consumers have become more interested in quality indicators (Briggs, Brown, Kesten, & Heath, 2006). Board Certification represents knowledge, skill, and



professionalism that provide patients with further assurance of safe, effective care. Obtaining recertification in holistic nursing informs patients that the nurse has met the recommendation for continued competency.

As consumers and insurers look to wellness and health promotion providers, the demand for knowledgeable, skillful practitioners within the holistic healthcare arena has escalated. Consumers are looking for validation of clinical expertise within a more natural approach to health and wellness.

For Employers

As the healthcare landscape shifts, many hospitals and organizations have developed strategies to encourage and incentivize nurses to obtain certification in a specialty area of practice. The reimbursement for this process varies among healthcare organizations. To advocate for reimbursement, holistic nurses need to positively position themselves within the decision making structure of their institutions and provide data validating the benefits of certification.

Advocating for holistic nursing specialty certification/recertification needs to be translated into economic benefits for the organization. Aligning holistic certification with the mission, vision, and values of the institution is an important strategic component and contributes to marketing campaigns for quality, patient-centered care. Cost-effective analysis of recertification benefits organizations while contributing to professional resilience and retention. Nurse staffing, patient outcomes, patient satisfaction, and nurse retention are all factors that contribute to a value-based perspective.

The ultimate goals in pursuing holistic nursing recertification are to advance the specialty, demonstrate

competency, and increase professional accomplishment and success. The movement most widely known as the Triple Aim – enhancing the patient experience, better population health, and lower per capita costs – can be greatly influenced by employing certified holistic nurses. AHNCC holistic nursing recertification is a process and indicator of continued professional development in a profession that is constantly evolving. Keeping your AHNCC Board Certified designation not only demonstrates that you have mastered the knowledge, skills, and competency to maintain your credential, but also testifies to your continued dedication to advancing our profession.

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TYPE OF CERTIFICATION	(STEP 1) SUBMIT APPLICATION TO QUALIFY BY	(STEP 2) APPLY FOR TESTING SITE/DATE BY	TESTING PERIOD
HOLISTIC NURSING CERTIFICATION EXAMINATION (HN-BC)			
Fall, 2016	September 1, 2016	September 30, 2016	November 5-19, 2016
Spring, 2017	February 1, 2017	February 28, 2017	April 8-22, 2017
HOLISTIC BACCALAUREATE NURSING CERTIFICATION EXAMINATION (HNB-BC)			
Fall, 2016	August 1, 2016	September 1, 2016	October 8-22, 2016
Spring, 2017	December 15, 2016	January 15, 2017	March 4-18, 2017
ADVANCED HOLISTIC NURSING (AHN-BC) & ADVANCED PRACTICE HOLISTIC NURSING (APHN-BC) CERTIFICATION EXAMINATIONS			
Fall, 2016	July 1, 2016	July 31, 2016	September 10-24, 2016
Spring, 2017	December 1, 2016	December 31, 2016	February 4-18, 2017
TYPE OF CERTIFICATION		APPLICATION DEADLINE	TESTING PERIOD
NURSE COACH CERTIFICATION EXAMINATION (NC-BC or HWNC-BC)			
Fall, 2016	September 30, 2016		November 5-19, 2016
Spring, 2017	January 15, 2017		March 11-25, 2017



2016 AHNA Award Winners

Congratulations to the 2016 AHNA award recipients and a special “thank you” to all of the contributors that make these awards possible. The following awards were announced at AHNA’s 36th annual conference in Bonita Springs, Florida.



2016 Holistic Nurse of the Year

Marie Shanahan, MA, BSN, RN, HN-BC

AHNA proudly honored Marie with the 2016 Holistic Nurse of the Year (HNY) award, which recognizes outstanding and current innovation and/or change in the field of holistic nursing. Founder and CEO of The BirchTree Center for Healthcare Transformation, Marie developed curricula for Holistic Nursing education programs that directly support the core values and standards of practice established by the AHNA. This model, the BirchTree Model, is also used in the three BirchTree Center programs that prepare nurses and nursing leaders for holistic nursing practice.

Under Marie’s leadership, the BirchTree Center also provides customized consultative services to healthcare leaders and organizations who seek to enhance delivery of their holistic caring practices. This model is unique as it fosters the importance of self-care and renewal as foundational for exemplary professional nursing practice. The model also recognizes the importance of creating an environment that is conducive for professional excellence and healing opportunities for person-centered care.

Marie served as the AHNA Treasurer in 2011-2013 and most recently as the chair of the AHNA Policy Committee. She was also the co-founder of the North Jersey AHNA network. She has published several articles in nursing journals on the BirchTree Model and self-care.

Lifetime Achievement Award

Helen Erickson, PhD, RN, AHN-BC, FAAN

Helen has been an advocate for Holistic Nursing throughout her nursing career, demonstrated in both her personal and professional life. A promoter of Holistic Nursing as a nursing educator and practitioner, her name is internationally known for authoring the Modeling and Role-Modeling Theory (MRM) of Nursing. She was instrumental in the development and promotion of Certification in Holistic Nursing and continues to be a strong advocate for Holistic Nursing Certification. Helen is perpetually giving her time on special task forces within AHNA and the American Holistic Nurses Credentialing Corporation.



Service Award

Debra Rose Wilson, PhD, MSN, RN, AHN-BC

Debra has served on committees and task forces for AHNA for many years. She served as the nurse planner for the 2015 AHNA Annual Conference and will serve again in this capacity in 2018. She has been a member of the AHNA Education Approval Committee since 2000 and the Program Recognition Committee since 2007, and is a frequent contributor to *Beginnings* magazine. In her private practice, Debra offers grief counselling founded in holistic principles, including the use of CAM and hypnosis at pain clinics and Rape and Sexual Abuse centers in Nashville.



Practice Grant: Implementing Institutional Self-Care Award

Children’s Hospital of New Orleans, Louisiana (CHNOLA)

CHNOLA is a 247-bed, nonprofit pediatric medical center that offers a complete range of healthcare services for children from birth to 21 years. It is also the only full-service hospital exclusively for children in the Gulf South. CHNOLA has developed a two-part action plan that the grant will

fund. Part one includes a Rejuvenation Room and Roaming Rejuvenation Cart to “Care for the Caregivers” and “Heal the Healer.” Part two is to inspire and teach the “Healer to Heal Thysself” so that overworked nurses can better nurture and care for themselves, and in turn, continue to care for the whole patient.

AHNA Research Grant

Jill Peltzer, PhD, APRN-CNS

For her study, “Self-Care Practices Among HIV-Infected African American Women,”

Jill intends to listen to the stories of 10-15 HIV-infected African American women, collected through two, one-on-one audio recorded interviews. These interviews will be transcribed and narrative stories developed, which will be analyzed to develop or extend a holistic theory of self-care to guide nursing interventions that optimize health outcomes. Jill is currently an Assistant Professor at the University of Kansas, School of Nursing in Kansas City.



Holistic Nursing Rising Star Award

Sarah Weaver, RN, MSN, FNP-C, HN-BC

Sarah is an Integrative Nurse Practitioner at Parkview Health Systems of Ft. Wayne, Indiana, who has worked tirelessly to bring holistic nursing to her workplace and community. Discovering AHNA during a class research project, she joined in 2011 and then signed up to be a Chapter Leader. In 2013, she worked with a team of nurses to coordinate a Holistic Nursing Certification training program, and secured a \$10,000 sponsorship for the training from Parkview Health. The training was offered to 38 area nurses. The program inspired Parkview Health to integrate a Holistic Nursing Program into their healthcare system which has grown to include more than 50 unit champions across the system.



**Charlotte McGuire
Scholarship Awards
Shannon Schuler,
RN, Undergraduate
Recipient**

Shannon is a nursing student studying at Augsburg College in Minneapolis, MN. She is expected to graduate in 2017 with a BSN focusing on Caring Science, Transcultural Nursing, and Holistic Approaches to Nursing. Additionally, she is studying to become a master in Reiki and a graduate of the Professional Yoga Therapy Institute in how to apply yoga philosophies and practices into the professional medical environment.



**Justin Behnke,
RN, BSN, HN-BC,
Graduate Recipient**

Justin is working toward a master's degree in Advanced Holistic Nursing at Florida Atlantic University. Justin received a certificate from the BirchTree Center for Healthcare Transformation's Integrated Healing Arts Program, and serves as a staff nurse and the Chair for his Professional Nurse Developmental Council at St. John Hospital and Medical Center in his hometown Detroit, Michigan.



Run for the AHNA Board of Directors

Are you ready to take a more active role in AHNA? For the 2016 AHNA Elections, the following positions are open:

- President-Elect
- Treasurer
- two Board of Directors-at-Large positions
- two Nominating Committee positions

Self-nominations are welcome. The AHNA Nominating Committee members are Cynthia Backer, Susan Dyess, Kimberly Holden, and Karilee Shames. The nomination deadline is **September 15, 2016**. Download the 2016 Nominations Handbook from www.ahna.org/elections or contact Tabetha Schoenfeld, AHNA Support Services Administrative Assistant, at info@ahna.org for more information.

**Institutional Excellence in Holistic
Nursing Practice Award
St. John Hospital & Medical Center of
Detroit, Michigan**

St. John Hospital is designated as a children's hospital and medical center with specialties in Pediatric Emergency Services, Pediatric Intensive Care, Level III Neonatal Intensive Care, and Level II Special Care Nursery with 1,100 nurses providing care to nearly 30,000 patients and families each year. Holistic care is ingrained in the building blocks of St. John Hospital, present in its mission statement, nursing philosophy, and vision. The intentional start of this holistic journey began in 2005 when some of the nurses from St. John Hospital attended the AHNA national conference in King Prussia, PA, which sparked the passion to deepen their understanding of holistic nursing practice within themselves and the hospital.



In 2007, St. John Hospital began a relationship with The BirchTree Center for Healthcare Transformation for formal education and support in creating an internal holistic education program. They opened the first of now 17 Renewal Rooms throughout the hospital that all associates are welcome to find respite and renewal throughout their workday. There are now 55 board certified holistic nurses including the Chief Nursing Officer and most of the Nursing Directors on staff. To date, more than 830 nurses from all clinical areas within the hospital have participated in some aspect of holistic nursing continuing education.

Thank You!

A special thank you to everyone who made our 36th annual conference a grand success! 471 Conference Registrations filled the Hyatt Regency Coconut Point Resort & Spa in Bonita Springs, Florida for an inspiring journey of learning and transforming! Many thanks go out to the AHNA staff, volunteers, sponsors, presenters, auction/raffle donors, and exhibitors. The 2016 conference committee did an extraordinary job this year, donating many hours to ensure that the conference was a success:

- Kim Holden, PhD, MPH, RN, Chair
- Christie Bailey, MS, RN
- Colleen Delaney, PhD, RN, AHN-BC, Research
- Patricia Manning, RN, BSN
- Lourdes Lorenz, MSN, RN, AHN-BC, NEA-BC
- Roxane Raffin Chan, RN, PhD, AHN-BC, LMT, Nurse Planner 2016
- Deborah Shields, PhD, RN, CCRN, QTTT, AHN-BC, Nurse Planner 2017



Also, please take note of our Conference Sponsors. Our thanks go to each of them for their support of AHNA and our mission!



2016 Conference Totebag Sponsor



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2016 Diamond Exhibitor



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2016 Quartz Exhibitors
Barbara Brennan School of Healing
Carolyn Green: The Energy Nurse™
Nutrition Therapy Institute
SQL Health™



Pamela Cipriano (Left), PhD, RN, NEA-BC, FAAN, ANA President with Terri Roberts, JD, RN, AHNA Executive Director at ANA Membership Assembly Meeting in June.

Terri Roberts, JD, RN, Elected as Organizational Affiliate Liaison to the American Nurses Association

Terri Roberts, JD, RN, Executive Director of AHNA, was recently elected as the Organization Affiliate Liaison to the American Nurses Association (ANA) Board of Directors through June 2018. ANA has 36 organizational affiliates which are the specialty nursing organizations in the United States that hold organizational-level membership of ANA. Working together, ANA and the organizational affiliates, like AHNA, share information and collaborate in finding solutions to issues that face the nursing profession and advancing care provided by registered nurses. While each of the Organizational Affiliates maintains its own autonomy, the nursing profession and healthcare consumers benefit from opportunities to speak with aligned voices as a result of the collaboration that occurs between ANA and the affiliates.

JHN Call for Manuscripts Special Issue: Advanced Practice Holistic Nursing June 2017

The June 2016 issue of *Beginnings* magazine focused on advanced practice holistic nursing. A wide array of topics were discussed that provide a comprehensive overview of advanced practice holistic nursing and many of its potentialities for improving the health and well-being of the public. This also offers a prelude to the launch and call for manuscripts for a special issue of the *Journal of Holistic Nursing* that will focus on advanced practice holistic nursing. This issue will be published in June 2017. Mary Enzman-Hines, PhD, RN, CNS, CPNP, AHN-BC will be the Guest Editor of the Special Issue. The deadline for submissions is **October 15, 2016**.

Manuscripts are sought regarding the advanced practice of holistic nursing that:

- Report research that provides evidence for practice

Holistic Nursing Scope and Standards Field Review

The Holistic Nursing Scope and Standards proposed revisions field review will be conducted **October 1 – November 15, 2016**. Please look for the notice and participate by reviewing all or a section, and providing feedback.

2017 AHNA Conference Proposal Solicitation Open

Pre-Conference Workshop Proposal Deadline is **Saturday, October 15, 2016**

Workshop Proposal Deadline is **Saturday, October 15, 2016**

Research Papers Deadline is **Thursday, December 1, 2016**

Research Posters Deadline is **Thursday, December 1, 2016**

Non-Research Posters Deadline is **Thursday, December 1, 2016**

Eligible proposals must reflect the theme, purpose, and objectives of the conference, and topics may apply to practice, education, research, aesthetics, and personal and professional development. Proposal guidelines can be found at:

www.ahna.org/Conference/Request-for-Proposals

If you have any questions about logging into the AHNA website, please feel free to contact us at (800) 278-2462, Monday-Friday 9:00 a.m. CST to 5:00 p.m. CST, or by e-mailing memberassist@ahna.org

- Explore and analyze conceptual, theoretical, and philosophical perspectives
- Describe and evaluate methods and approaches that support research, practice, and education and advance knowledge
- Portray and analyze aesthetic representations and methods to advance forms of knowledge

It is critical that all content of manuscripts make an explicit connection to advancing the knowledge and practice of holistic nursing in the realm of advanced practice. Manuscripts should be submitted through the standard process adhering to the guidelines for submission that can be found at:

<https://us.sagepub.com/en-us/nam/journal-of-holistic-nursing/journal200847#submission-guidelines>

Please note in your cover letter that you are submitting your manuscript for consideration for publication in the special issue related to advanced practice. We welcome this opportunity to showcase and report significant advancements in the art and science of holistic nursing.

Carole Ann Drick Attends ANA Membership Assembly

ANA held its annual Membership Assembly in June in Washington, DC with AHNA's President Carole Ann Drick, PhD, RN, AHN-BC and Executive Director Terri Roberts, JD, RN, in attendance. The assembly, in honor of the victims of Pulse nightclub in Orlando, issued a new statement calling for sensible gun control laws and a lift on the ban on the Centers for Disease Control and Prevention from studying

gun violence. Representatives also took action on measures aimed at improving care to sexual minority and gender-diverse populations and partnering to develop model programs for nurses with substance use disorders. Assembly representatives also re-elected Pamela Cipriano, PhD, RN, NEA-BC, FAAN, as ANA president, as well as elected nurses into other ANA Board and Committee positions.

Veda Andrus Receives Inaugural Outstanding Support of AHNCC Award

The American Holistic Nurses Credentialing Corporation (AHNCC) recently recognized Veda Andrus, EdD, MSN, RN, HN-BC of Florence, Massachusetts with the inaugural "Outstanding Support of AHNCC Award." Veda is the Vice President of Education and Program Development for The BirchTree Center for Healthcare Transformation and a former president of AHNA. She holds the distinction of being the first nurse certified by AHNCC. This award honors individuals who have:

- advanced the mission and philosophy of AHNCC,
- supported certification as a means of advancing holistic nursing and nurse coaching,
- contributed expertise to promote holistic nursing and nurses through significant participation in the healthcare community, and
- served as a spokesperson for AHNCC in state and national venues.



A welcomed surprise to the Board of Directors, the bank's appraisal of the building came in \$18,000 higher than the purchase price, at \$310,000. We currently use 66% of the building for AHNA offices and storage: the entire first floor plus two offices and a large Board room on the second floor. The remaining 34% of the building is occupied by two tenants, both on the second floor. The majority tenant has a 5-year lease ending June 2020, and the other tenant has a month-to-month lease. The total amount of rent collected monthly from the two tenants is \$1,850, and the monthly mortgage payment on the building is \$2,351. Utilities average \$570 per month, and this makes the monthly AHNA building expense \$1,071, or \$12,580 annually.

Building Acquisition: 2900 SW Plass Court, Topeka, KS, 66611-1980

- **Purchase Price** **\$ 292,000**
 - Cash Paid \$ 58,400
 - Financed \$ 233,600
 - Interest Rate 3.82%
(10-year fixed)
- **Other**
 - Monthly Mortgage \$ 2,351
(Two Tenants)
 - Monthly Rental Income \$ 1,850

Comparatively speaking, AHNA's rent in 2015 was \$2,575 per month and \$30,900 annually. In Flagstaff, Arizona in 2012, it was \$3,785 per month and \$45,420 annually. Even with the additional cost of property insurance and taxes that come with commercial ownership, the building acquisition has provided a significant operations savings. Moreover, it has also improved AHNA's financial positioning with the building as a fixed asset on the AHNA balance sheet.

Many members have said that finding AHNA is "like coming home." We are excited to finally have a permanent place to call home. Our doors are always open to visitors, and we encourage you to stop by and say "hi" if you are traveling through the Topeka area.

2015 Treasurer's Finance Report

ORDINARY INCOME/EXPENSE

January to December 2015 (Audited Statement)

REVENUE 2015

(Accrual)	
General	4,780
Donations	18,546
Royalties	80,233
Communications	36,705
Education	67,416
Membership	468,476
Conference	273,904
Total Income	\$950,060

EXPENSES 2015

General Operating	82,135
Miscellaneous	
Dues/Fees/Charges	67,707
Computer Related	7,138
Personnel	316,853
Taxes	895
Insurance & Service Contracts	16,584
Awards	7,643
Communications	141,193
Education	5,024
PR & Marketing	30,214
Membership/Network	5,579
Board of Directors	29,456
Conference Expense	245,086
Total Expense	\$959,990

Net Ordinary Income **\$(-9,930)***

Net Profits

2011	\$(-67,361)
2012	\$72,217
2013	\$162,800
2014	\$142,683
2015	\$(-9,930)*

* Drop in investment income of -\$64,013 plus Net Income over Expenses *operationally* \$54,083

AHNA BALANCE SHEET

12/31/2015 (Audited)

ASSETS

Current Assets

Cash and cash equivalents	\$ 31,040
Accounts receivable –	
Net inventory	87,532
Inventory	13,020
Prepaid expenses	4
Total Current Assets	\$ 131,596

Non-Current Assets

Investments	\$ 549,962
-------------	------------

TOTAL ASSETS **\$ 681,558**

LIABILITIES & NET ASSETS

Current Liabilities

Accounts payable	\$ 13,640
Payroll and related liabilities	6,382
Deferred conference revenue	9,962
Deferred membership revenue	183,040
Total Current Liabilities	\$ 213,024

Net Asset Balances

Unrestricted net assets	
Undesignated	\$ 448,792
Board-designated endowment	8,015
Total Unrestricted Net Assets	\$ 456,807
Permanently restricted net assets	11,727
Total Net Assets	\$468,534

TOTAL LIABILITIES & NET ASSETS **\$ 681,558**

LONG-TERM RESERVES

2011	\$181,062
2012	\$190,871
2013	\$363,864
2014	\$422,252
2015	\$549,692 (Added \$150,000 cash to LT Reserves in 2015)

~ Be kind to yourself. ~

Self-Care: A Busy Person's Guide for Finding Time & Balance continued from page 7

Finally, *be kind to yourself*. Often times as nurses, we have great patience with others yet are extra hard on ourselves as we struggle to reach unrealistic expectations. Take time to experience the small steps and successes. Rather than adding up our failures and becoming disheartened couch potatoes, let's give ourselves a pep talk or call our friends to share our accomplishments and refocus on how to move forward. (Notice there is no time here for complaining, which pulls us down and drains our energy.) And, yes, breathe! The best way to be gentle with ourselves and get back into the flow of moving forward, is to breathe – three or four cleansing breaths brings us into the present moment, opens up the flow of energy, and increases our awareness.

The Key to Finding Time & Balance

Especially for nurses, it may seem that there are never enough hours in a day, and many of us are tempted to sleep less so we can do more. This is not the key to finding time and balance. Take eight hours each day for sleep – no excuses. Without sufficient sleep, the body's first priority is sending energy to keep functioning – everything else is secondary. Instead, let's use time to our advantage.

The key to finding time and balance is to *incorporate self-care into what we are already doing*. Use your activities of daily

living (ADLs) to do various self-care activities. This is where our creativity and ingenuity come into play (with the key word being “play”). Rather than viewing self-care as another item on your “to-do” list, remember to have fun with it and use your imagination to find what works best for you.

Once we start looking for opportunities to add self-care into our ADLs, so many more ways will pop up. We all are creative when we step into larger fields of perception. It is our inherent ability.

As we move into creativity, let's live life on the path of the present moment. We live on a learning planet. Part of that learning is finding time and balance in our self-care. There really is plenty of time. The question is: How do we use time to our best advantage?

Carole Ann Drick, PhD, RN, AHN-BC is president of the American Holistic Nurses Association and a life-long learner when it comes to self-care. She shares her deep wisdom and insights with many through her presentations, writings, private practice, and corporate consultations. She always has room for one more friend, one more client, and one more exciting adventure in life. She can be reached at caroleanndrick@gmail.com



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Fall: Wednesday, October 19 – Saturday, October 22, 2016

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This continuing education activity was approved by the American Holistic Nurses Association (AHNA), an accredited approver by the American Nurses Credentialing Center's Commission on Accreditation.





AHNA-Endorsed CNE Programs

Wanting to go to the next level in your practice? Endorsed programs offer content based on a well-developed body of knowledge congruent with the philosophy, mission, and purpose of AHNA. These programs are only endorsed by AHNA after a rigorous peer-review process and approval of the AHNA Board of Directors.



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— Kelly Freeman, MSN, NP-C

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HAPPENINGS

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(120 hours)

San Diego, CA

Sept. 21 – 25, 2016 • Mar. 1 – 5, 2017

Boston, MA

Nov. 4 – 9, 2016 • April 23 – 28, 2017

New York, NY*

Nov. 9 – 13, 2016 • April 26 – 30, 2017

INCCP with a focus on End of Life Care

At the end of the six-month program, participants will be eligible to sit for Nurse Coach Certification and Holistic Nursing Certification.

www.inursecoach.com/programs

For more information contact:

info@inursecoach.com

September 28 – 30 &

November 30 – December 2, 2016

New York, NY

Become a Transpersonal Nurse Coach

1. *Clinical Meditation and Imagery (CMI)*

Two on-site modules 50 Contact Hours

2. *Transpersonal Development*

Nov 16-18, 2016 – 22.5 Contact Hours

3. *Basics of Nurse Coaching:*

Scope and Competencies

On-line study (10 hrs) Available beginning Aug 1, 2016

Huntington Meditation and Imagery Center

www.HuntingtonMeditation.com

Bonney Gulino Schaub, RN, MS, PMHCNS-BC,
NC-BC BonneyGulinoSchaub@gmail.com

October 13 – 16, 2016

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October 22 – 27, 2016

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October 22 – 29, 2016

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October 30 – November 3, 2016

San Diego, CA

AIHM Annual Conference, People, Planet,

Purpose. Integrative Health & Medicine

Conference of the Year. Holistic and transformative, executed with UC San Diego, features interprofessional luminary faculty, networking, self-rejuvenation. Speakers include past AHNA President Lucia Thornton, Mimi Guarneri, Barbara and Larry Dossey, Mark Hyman, and many more! Pre-Conferences include Healing Touch I. PostConference with CHI and Deepak Chopra, MD. Register now at www.aihm.org/aihm-conference

November 4, 2016

Mesa, AZ

AHNA Arizona Regional Conference

Holistic Self-Care: Your Secret Power for Enhancing Patient Care. 6 CNE. Mesa Convention Center. Keynote: Carole Ann Drick, PhD, RN, AHN-BC

November 11, 2016

Techny, IL

AHNA Illinois Regional Conference

Holistic Self-Care: Your Secret Power for Enhancing Patient Care. 6 CNE. Techny Towers Conference and Retreat Center, 2001 Waukegan Rd. Keynote: Carole Ann Drick, PhD, RN, AHN-BC. Registration www.ahna.org

November 11 – 13 2016

River's Edge Cleveland, OH

Tai Chi Easy™ Practice Leader Certification

23 Contact Hours

Tai Chi Easy™, developed by Roger Jahnke, OMD, is a mind/body practice, combining gentle exercise and meditation. Learn this simple self-care practice for yourself – or train to lead others in your community. No experience necessary, adaptable to all levels of fitness, and can be practiced sitting or standing. Register at RiversEdgeCleveland.com or phone (216) 688-1111, Ext 251. See healerwithinfoundation.org for complete training event calendar and locations.

Classifieds

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or
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Friday, November 4

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