Take care” is often a parting phrase we use with our friends and family, noted Don Vickery, MD, a pioneer in self-care and coauthor of the groundbreaking book, *Take Care of Yourself*, published over three decades ago. Although the notion of taking care of yourself or that health is a personal responsibility rather than professional one was controversial at the time, the book helped create a national movement that resulted in a 1981 statement by the surgeon general that “you can do more for your health than any doctor, any hospital, any drugs, any exotic medical devices.” Over the years, the concepts of self-care and the mind-body connection have gained mainstream acceptance. In fact, the 2007 National Center for Complementary and Alternative Medicine’s survey on CAM use in the United States shows a substantial increase by the American public from 2002 to 2007 in the use of mind-body therapies, including deep breathing exercises, meditation, massage therapy, and yoga, and these self-care modalities combined accounted for more than one third of all CAM use.2

Self-care is one component of personal wholeness that we at the Samuels Institute believe to include the congruence of mind, body, spirit, and energy. For the purposes of this column, we will consider personal wholeness from the perspectives of employees and patients and how healthcare organizations can support them in attaining their personal goals.

From the humanistic psychology perspective of Carl Rogers,3 personal wholeness occurs in an individual who tends to see congruence between their sense of who they are (self) and who they feel they should be (ideal self). Although no one tends to experience perfect congruence at all times, the relative degree of congruence is an indicator of health. Herbert Benson, MD,4 highlighted the inseparable connection between the mind and the body—the complicated interactions that take place among thoughts, the body, and the outside world—in his book, *The Relaxation Response*, written almost 40 years ago. Benson describes health and well-being using the metaphor of a three-legged stool—drugs, surgical procedures, and self-care. Mind-body medicine is the third leg that incorporates all of the following: the relaxation response, cognitive behavioral therapy, physical activity, and nutrition.

Studies have shown that between 60% and 90% of all physician visits are for stress-related complaints,5 and Benson et al6 have proved the effectiveness of mind-body medicine in helping reduce this stress that can cause or exacerbate conditions such as heart disease, infertility, gastrointestinal disorders, chronic pain, and more.

Patients have traditionally been viewed as passive consumers of healthcare, with professionals as the providers; however, professional care reflects only the tip of the iceberg in the delivery of healthcare, notes David Sobel, MD,7 director of patient education and health promotion for Kaiser Permanente in Northern California. Consider, he says, the fact that 75% of the population in any given month experiences some type of symptom or physical discomfort. Almost 70% to 90% of these are self-diagnosed and self-managed—making people the true primary providers of healthcare. At Kaiser, they believe that increasing the confidence and skills of their members to be better primary providers of their own care makes good health and economic sense.

As far as employees and executives are concerned, many healthcare executives tend to neglect their own health, often saying they are too busy for healthy self-care behaviors. They not only fail to model what their organization is trying to deliver but also deprive themselves of the opportunity of learning, in a personal way, the challenges faced by their staff and patients by the attitudinal and behavioral changes being asked of them. In a very real sense, self-care is a key component both of the leader’s own behavior and the organization attempting to create a healing culture. Numerous studies have documented the high burnout rates (now at 67%) and poor mental health among physicians and the correlation of burnout to low patient satisfaction and the resulting low patient compliance, which has a direct impact on patient health, says Lee Lipsenthal, MD, ABHIM.7 For the last decade, Lipsenthal has been helping physicians heal themselves with his Finding Balance in Medical Life program, which helps them develop a set of self-care and mind-body skills and tools to enhance productivity and reduce error, find a greater sense of work and home life balance, gain emotional intelligence, manage crisis, communicate better, and enjoy relationships with patients and colleagues. To date, participants have reported a 70% drop in depression rates and improved quality of work and family life. In fact, according to a recent survey by the Mayo Clinic, those physicians who spent at least one day a week doing meaningful activities experienced half the burnout rate of those who did not.8

Nurses, the largest workforce in hospitals, face tremendous challenges with staffing shortages and the emotional and service-oriented nature of their work. It is almost universally recognized that nursing is, by its very nature, a stressful occupation, and that workplace stress can contribute to some forms of physical illness, particularly musculoskeletal problems, stress, and depression.9 When Linda Lewis, RN, took over as chief nursing officer at Valley Hospital in Ridgewood, New Jersey, she noticed that the soul of nursing had atrophied, and she recognized the need to care for the whole person—mind, body, and spirit—including that of the nurse. She launched the Integrative Healing Arts Program to train nurses in the skills they needed to “return” to a mind, body, and spirit approach to nursing practice. The result? The medical/surgical units where nurses were trained had zero nurse turnover during a 24-month period, employee...
satisfaction increased from the 60th percentile to the 90th percentile, and patient satisfaction rose from the 83rd percentile to the 96th percentile.10

Clearly, organizations who create the conditions for both patients and providers to experience personal wholeness find that it is not only the right thing to do but makes good economic sense.

REFERENCES

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