

## CHAPTER 70

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# Implementing and Evaluating Optimal Healing Environments

*Wayne B. Jonas, MD, and Ronald A. Chez, MD*

### OVERVIEW

Healing is defined as the process of recovery, repair and return to wholeness. It is the foundation for a vision of medicine in which the focus is the alleviation of suffering, the enhancement of well-being and the treatment of chronic illness. The incorporation of new approaches to healing is important for the management of chronic illness and the development of sustainable approaches in health care. A new model of healing (and a better scientific foundation for that model) is needed—one that integrates diverse healing philosophies from around the world. We believe that developing inner and outer envi-

ronments that optimize the inherent healing capacities of individuals, social systems, and the physical environment is an important step in achieving that vision.

We define an optimal healing environment (OHE) as one in which the social, psychological, spiritual, physical, and behavioral components of health care are oriented toward support and stimulation of healing and the achievement of wholeness. In our opinion, these components include at least five domains plus the physical and organizational structures that support them. The five core domains of an optimal healing environment are:

1. Conscious development of intention, awareness, expectation, and belief in improvement and well-being
2. Self-care practices that facilitate the experience of wholeness and well-being, and that foster greater compassion, love, and awareness of interconnectivity
3. Development of listening and communication skills and service-oriented, altruistic behaviors that cultivate social support and trust, including the “therapeutic alliance”—in the health care setting
4. Instruction and practice in health promoting behaviors in lifestyle to support self-healing such as proper diet, exercise, leisure and work balance, and addiction management
5. Responsible use of integrative medicine via the collaborative application of con-

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A biography of Wayne Jonas appears in Chapter 7.

Ronald A. Chez, MD, founding Deputy Director of the Samuelli Institute, has served as a practitioner, researcher, professor, educator, author, and administrator in some of the nation’s most prestigious medical institutions. Board certified in obstetrics and gynecology with a subspeciality in maternal-fetal medicine, he has authored more than 530 research articles and public and physician audiovisual learning aids in the areas of physician–patient relationship, maternal and fetal physiology, clinical obstetrics, nutrition, and biophysics. Since 2000, his writing and lecturing has focused on topics in complementary medicine.

*Source:* Courtesy of Wayne B. Jonas, MD, and Ronald A. Chez, MD, Samuelli Institute, Alexandria, Virginia. From: Jonas WB, Chez RA. Implementing and evaluating optimal healing environments. *Wellness Management*. 2004;20(2): 1–5. National Wellness Institute member e-newsletter. Available at: [www.nationalwellness.org](http://www.nationalwellness.org).

Table courtesy of Mary Ann Liebert, Publishers. From: Jonas WB, Chez RA. Introduction. In: *Toward Optimal Healing Environments in Health Care*. Supplement 1. 2004;10;S2.

ventional and complementary practices in a manner supportive of healing processes

These five domains need support from the physical space in which healing is practiced, including characteristics of light, music, architecture, and color. These domains also need supportive organizational structures including leadership, mission focus, and evaluation and reward policies among other elements that can create a healing environment. Health care managers and leaders ideally should have personal experience in these environmental domains, and practice self-care, personal wellness, and preventive approaches in their own lives.

## **DESCRIBING OPTIMAL HEALING ENVIRONMENTS**

Here we provide a short summary of the healing domains, and speculate on how they can be built from current foundations in health care. These domains, and their supporting physical and organizational environments, are represented in Table 70–1.

### **1. Developing Intention and Awareness**

Our current health care system has primary focus on treatment and cure of disease. Thus, patients and their families are oriented toward getting procedures that can “fix” their problems. Often with chronic disease, patients’ expectations are low for any fundamental healing in the midst of their condition. In addition, patients may not be prepared to engage in self-care activities that facilitate healing. Thus educational programs that orient people to the perspective of healing are needed. These programs should educate and enhance expectations about the possibilities of wellness, wholeness, and improved functioning.

Often people can obtain feelings of peace, meaning, and purpose in life when they perceive a personal connection and contribution to something larger than themselves. This sense of coherence can be fostered with various psychological, spiritual, and/or traditional religious practices. In the latter case, it is termed religiosity. However, frequently the experience of connection or spirituality does not occur within the context of formal religions, or individuals choose to keep it outside such domains. Thus, experientially based programs that foster this sense of expanded awareness and connectivity, with or without the context of spirituality, may be added to basic educational programs on the healing process.

### **2. Experiencing Personal Wholeness**

A cognitive understanding of healing and the development of healing intention is crucial, but insufficient for stimulating healing behavior and experience. Patients also need to have an experience of wholeness and well-being. Some patients with chronic disease may not recall ever feeling well. Well-being does not depend on cure and can be fostered with various mind-body-energy practices. It is in these areas of psychophysiological practices and their effects that a sense of wholeness is experienced and developed; this may include an experience of healing presence or healing energy. Both arise from a sense of personal integration or wholeness, and can be fostered with mind-body practices through personal growth sessions and workshops, a common approach in the West, or through practices such as yoga, tai chi, and meditation, commonly used in the East.

### **3. Cultivating Healing Relationships**

Immersion in healing relationships is one of the most powerful ways to stimulate,

**Table 70-1** Optimal Healing Environments

<i>Building Healing Spaces</i>	<i>Developing Awareness and Intention</i>	<i>Experiencing Personal Wholeness</i>	<i>Cultivating Healing Relationships</i>	<i>Practicing Healthy Lifestyles</i>	<i>Applying Collaborative Medicine</i>	<i>Creating Healing Spaces</i>
<ul style="list-style-type: none"> <li>• Nature</li> <li>• Color</li> <li>• Light</li> <li>• Fine Arts</li> <li>• Architecture</li> <li>• Aroma</li> <li>• Music</li> </ul>	<p>Enhance belief</p> <ul style="list-style-type: none"> <li>• Expectation</li> <li>• Hope</li> <li>• Understanding</li> <li>• Love</li> </ul>	<p>Enhance integration</p> <ul style="list-style-type: none"> <li>• Mind</li> <li>• Body</li> <li>• Emotion</li> <li>• Energy</li> </ul>	<p>Enhance caring</p> <ul style="list-style-type: none"> <li>• Compassion</li> <li>• Communication</li> <li>• Empathy</li> <li>• Social support</li> </ul>	<p>Enhance health habits</p> <ul style="list-style-type: none"> <li>• Diet</li> <li>• Exercise</li> <li>• Relaxation</li> <li>• Balance</li> </ul>	<p>Enhance medical care</p> <ul style="list-style-type: none"> <li>• Conventional</li> <li>• Complementary</li> <li>• Traditional</li> <li>• Alternative</li> </ul>	<ul style="list-style-type: none"> <li>• Leadership</li> <li>• Mission</li> <li>• Culture</li> <li>• Teamwork</li> <li>• Technology</li> <li>• Evaluation</li> <li>• Service</li> </ul>
	<p>Achieved with Learning programs</p> <ul style="list-style-type: none"> <li>• Mindfulness practice</li> </ul>	<p>Achieved with Personal growth</p> <ul style="list-style-type: none"> <li>• Mind-body practices</li> </ul>	<p>Achieved with Communication skills</p> <ul style="list-style-type: none"> <li>• Community support</li> </ul>	<p>Achieved with Family education</p> <ul style="list-style-type: none"> <li>• Support groups</li> </ul>	<p>Achieved with Clinical teams</p> <ul style="list-style-type: none"> <li>• Person-centered care</li> </ul>	

Table courtesy of Mary Ann Liebert, Publishers. From: Jonas WB, Chez RA. Introduction. In: *Toward Optimal Healing Environments in Health Care*. Supplement 1. 2004;10:S2.

support, and maintain wellness and recovery. Family, friends, and community generally form the primary relationships. The work site, school, community, and health care settings can also facilitate relationships that support healing and wellness. Characteristics of such interactions involve empathy, compassion, beneficence, caring, love, reassurance, comfort, warmth, trust, confidence, credibility, honesty, courtesy, respect, harmony, challenge, and communication. Cultivating these characteristics requires skills in listening and communication, and can be fostered by engaging in social service, and through family and community activities. An optimal healing environment should incorporate training in these characteristics and develop opportunities for such activities in educational and group programs.

#### 4. Practicing Healthy Lifestyles

Health promotion and disease prevention involves behavioral and lifestyle activities targeted toward establishing habitual behaviors that support well-being, facilitate healing, and prevent or treat illness. These programs are often established at work sites, schools, community centers, churches, or hospitals and clinics. They typically involve five behavioral areas:

1. Management of negative addictions (smoking, alcohol, drugs, unhealthy sexual behavior, violence) and fostering positive habits (relaxation methods, healthy sexual behavior, establishment of social support networks)
2. Healthy eating
3. Regular and appropriate physical exercise
4. Stress management techniques and attending to attaining balance between work, leisure, and family activities
5. Screening for preventable disease

Optimal healing environments should provide services that foster and maintain healthy lifestyles.

#### 5. Applying Collaborative Medicine

Complementary and alternative medicine is popular among the public and is increasingly used in mainstream health care institutions. Integrative medicine is the coordinated application of a variety of complementary and conventional modalities in therapeutic settings. The coordinated, appropriate preventive and therapeutic approaches are important for obtaining and maintaining wellness and healing. From the perspective of optimal healing environments, approaches that support and stimulate the inherent healing and self-recovery capacities of a person are primary, but curative treatments are needed as well. The ideal system would match the individual patient or client and support persons with the most appropriate treatment strategy derived from the variety of global health care systems and the preferences and capabilities of the patient.

Collaborative medicine requires the coordination of multiple service components. These components include:

1. The availability of knowledgeable and competent practitioners
2. Appropriate facilities, equipment, and supplies for practice
3. Reliable, quality products
4. Supportive organizational and professional settings
5. Information about safety, effectiveness, and interactions of treatment modalities
6. Training in appropriate communication and partnership skills for the appropriate selection of interventions
7. Economic resources for delivery and availability of services

## 6. Healing Places and Spaces

Both the physical space and the leadership environment (the place) are crucial for the successful creation of effective healing environments. Healing spaces may contain a variety of components that foster or detract from wellness and recovery including architecture, nature, color, sound, music, art, and light. Designing community, personal, and sacred spaces that incorporate the aspects of a healing environment are integral to the support of health and well-being. Healing places require the understanding, experience, and support of the leadership and organizational decision makers for successful implementation of a healing environment. Health care managers and leaders ideally should have personal experience in these environmental domains.

## 7. Implementing Optimal Healing Environments in Health Care Settings

Clinical, work site, school, and health care settings are busy places. The people involved in these settings have goals of productivity, service, and quality parameters. Time is precious and often short—a factor that itself may influence healing and its optimization. How the core domains of healing might be implemented in a manner within the context of normal health care and other settings is the focus of our research interests. Many of these domains have been partially implemented in a variety of settings. Work site health promotion programs have successfully implemented many behavioral and lifestyle changes in ways that impact health and productivity. Healing-oriented clinics and hospitals have been developed and have demonstrated their ability to deliver quality treatment. Integrative medicine programs are developing models for appropriate use of

complementary and alternative medicine. Patient education programs teaching self-care, including support groups, have an impact on chronic disease management and its outcomes. The addition of social support to standard care, such as a visit or phone call from a nurse after treatment, has shown improved clinical outcomes and reduced mortality in several clinical populations.

Can a health care program efficiently maximize the components of optimal healing? What impact would an optimal healing environment have on morale, practitioner-patient interactions, patient satisfaction and empowerment, clinical outcomes, and costs? The components in Table 70-1 under the heading “achieved with” may provide guidelines for the development of such programs. A comprehensive environmental program might include the following as a minimum:

1. Education about healing, its capacity, expectation, and implementation
2. Instruction in ways to expand awareness, manage beliefs, and improve emotions
3. Practice in enhancing mind-body integration through self-applied skills
4. Opportunities for cultivation of interpersonal communication, social support, and service
5. Education and engagement in core healthy lifestyle choices
6. Provision of quality health care delivery with collaborative and integrative components
7. Attention to the physical and organizational structures that facilitate healing

## ASSESSING AN OPTIMAL HEALING ENVIRONMENT

The competent, rigorous, and effective performance of clinical research in the area of healing environments requires appropriate

tools for measurement. Ways to assess the elements and outcomes of an optimal healing environment can be extrapolated from existing assessment and evaluation scales, which have been validated. A healing environment measuring tool should include a focus on three main areas: health and disease outcomes, process outcomes, and financial outcomes. Another facet of measurement would be the linking of biologic, physiologic, and disease-specific markers. These measures should include tangible outcomes such as money, value, health behaviors, measurements of quality of life and pain, functional status, and patient satisfaction for quantitative analyses. Each of these, and others, would then be directed toward the communities being explored: work

sites, medical practices, hospitals, schools, health maintenance organizations, and the patient–provider dyad or therapeutic alliance.

It is our belief that the development and evaluation of optimal healing environments can provide a model for the effective management of chronic illness, the improvement of well-being, and the integration of prevention with treatment. These environments are complementary to conventional medicine. The ability to conceive of, design, create, and implement healing environments will always begin with the individual, whether it be the healer, the one who is healed, a significant other, organizational leaders, and/or the community as an entity.

