

MANDALA

Page 18

Page 20

TABLE OF CONTENTS

In the Spirit of Service and Integration Page 3

Peacemaker, Facilitator, Restorative Page 4

Justice Pioneer: Mark Umbreit

The Scent of Spring Page 8

A New Vision for Tibetan Healing Page 10

The Future of Health Care is Integrative Page 14

It Takes a Community Page 16

Mondays are for Mindfulness

From Health Care to Wellbeing: Unleashing the Potential of Health Coaching in Primary Care

Navigating Grief after COVID-19 Page 22

Mindfulness is for Everyone Page 24

AUTHORS:

Susan Maas, Craig Blacklock, Katie Dohman, Heidi Wachter, Kevin Coss, Suzy Frisch, Dr. Cherie Kroh, Jacques Lerouge

DESIGN:

Kelsey Hanscom

EDITOR:

Kit Breshears (kit@umn.edu)

EDITORIAL TEAM:

Pamela Cherry, Cole Garcia, Jacques Lerouge, Maeve Mikal, Virginia Kaczmarek, Alex Ruiz Shimada

Cover photograph: © Craig Blacklock, from the book, St. Croix & Namekagon River - The Enduring Gift

Photos courtesy of contributing authors and Unsplash.

Mandala, a biannual publication, is produced by the University of Minnesota's Earl E. Bakken Center for Spirituality & Healing. Detailed information about Center research, events, academic courses, workshops, and more can be found on our website at csh.umn.edu. Letters to the editor must include name, address, telephone number, and email address.

Explore with us how a financial gift can ensure that profound and meaningful opportunities offered by the Center. To begin the conversation about the impact you'd like to make, contact Virginia Kaczmarek, Development Officer, at 612-624-1121, virginia@umn.edu, or visit z.umn.edu/GiveCSH

Mandala is the Sanskrit word for "circle" and is a sacred symbol that mirrors a state of consciousness through a concrete pattern. Native Americans use mandalas as healing and transformational art in the sand; art therapists to facilitate healing; and Tibetans as visual representation of Buddhist beliefs. As a universal symbol of healing, the respective circles of the mandala capture the many diverse aspects of the Center's work: reflection, transformation, spirituality, creation, and lastly, the ongoing journey that continues to shape what we are to become.

Earl E. Bakken Center for Spirituality & Healing Mayo Memorial Building, MMC #505 420 Delaware St. S.E. Minneapolis, MN 55455

www.csh.umn.edu

IN THE SPIRIT OF SERVICE AND INTEGRATION

The three primary missions most often articulated for American universities are research, teaching, and service. All too often, staff and faculty are engaged in only one aspect of the tripartite mission and operate in silos. As a result, research fails to inform teaching, and both teaching and research are disconnected from service. In many ways, it is the service or community engagement mission of the University that offers the opportunity for true integration of research and teaching and partnership with the community that advances wellbeing for all.

I was recently asked to distill the work of the Center into a few words. I chose four words - we discover (conduct and disseminate research), teach, connect, and heal. Of course, our formal vision and mission statements are longer:

Vision: Advance the health and wellbeing of people and the planet.

Mission: Advance whole health and wellbeing by providing interprofessional education, conducting research, supporting integrative models of care, and delivering community engagement programs.

Simply stated, we discover, teach, connect, and heal!

This issue of Mandala is filled with stories that capture the integrative work of the Center and highlight our deep connection with the community. The classroom for Dr. Mark Umbreit, one of our longest serving and most esteemed faculty members, has been a world platform where he has taken his work in restorative justice. His courses on peacebuilding through mindfulness and forgiveness and healing are informed by both his research and his practice serving as a mediator and healer. For decades now, Mark's courses have drawn students from multiple disciplines and majors throughout the University. One

morning, about 20 years ago, I arrived at my office to find a letter from a student slipped under my door. She identified herself as a woman from Palestine and explained that she was just wrapping up her PhD. She wanted me to know that Mark's course was the most important she had taken during her time at the University. During the course, she attained new insights into the conflicts in her native land that were life changing.

Dr. Tenzin Namdul, while building on the work of his mentor Dr. Miriam Cameron who established the Tibetan Healing Initiative at the Center, is committed to community-based research and bringing the insights of Tibetan Medicine to both the Tibetan and broader community. He is currently conducting research in India where he also offers a course in Tibetan Healing. Another example of weaving together teaching, research, and service.

For the Integrative Health & Wellbeing Research Program led by Drs. Roni Evans and Gert Bronfort, community-based research involves working closely with a community advisory team that helps broaden their perspectives, build relationships, and understand cultural considerations. Their work focuses on non-pharmacological approaches to pain management, a critical issue given the escalating use of opioids. The research is also designed in partnership with the community to address health disparities, equity, and inclusion. Despite good intentions, researchers often don't have the full trust of the communities they serve. For this group of researchers, service is deeply intertwined with their research that in turn informs their teaching.

At the Bakken Center, our values permeate everything we do and shape our priorities, including how we partner with the community.

Our values include:

- * Compassion, love, and service motivate and drive our work.
- * Diversity, equity, inclusion, and belonging are integral components of our culture and operations.
- * Evidence-informed approaches integrating the best available data and lived experiences shape our actions and decision-making.
- * Innovation emerging from learning and discovery holds the potential for transforming people, systems, and the planet.

When people ask what the Center does, it can lead to lengthy explanations of what we do and how we do it! We are working on a simple one-page visual that captures the essence of the Center's work. It will first be published later this summer in our Annual Report and subsequently will appear on our website and in other publications. If you would like to receive a copy of our annual report, visit *z.umn.edu/CSHAnnualReport*

As you read this issue of Mandala, you will see in every story how our values are expressed in and drive our work. Thank you for your interest and support of our work.

Mary Jo

Mary Jo Kreitzer, PhD, RN, FAAN Founder and Director

Marskiper

Earl E. Bakken Center for Spirituality & Healing

PEACEMAKER. FACILITATOR. RESTORATIVE JUSTICE PIONEER.

Writer, researcher, speaker. Professor, mentor, and "social worker to the core": Mark Umbreit embodies all these roles and more. He does it with a warm, low-key demeanor that belies his international influence in the field he helped nurture. By **SUSAN MAAS**

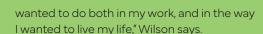


e's been a central figure at the Bakken Center for Spirituality & Healing since its inception. While Umbreit—now professor emeritus; he formally retired in 2022—always called the School of Social Work home, he was part of a multidisciplinary group convened by Center founder and director, Dr. Mary Jo Kreitzer.

"Although I'm grounded in the School of Social Work, I've actually taught more courses in the Center," Umbreit says.

"Mark's impact on the Center, and the world has been enormous," Kreitzer says. Umbreit's courses, Peacebuilding Through Mindfulness Practice and Forgiveness & Healing, are perennial favorites; over the decades, they've shaped the perspectives and work of hundreds of Center students. Mindfulness and forgiveness are perhaps the two most central themes of Umbreit's work and his life.

Sheryl Wilson, a former student of Umbreit's who serves as executive director of the Kansas Institute for Peace and Conflict Resolution, credits Umbreit with inspiring her career path over two decades ago, and she expresses gratitude for his ongoing friendship and support. Umbreit's classes "are where the light bulb came on as far as what I





Sheryl Wilson, Executive Director, Kansas Institute for Peace and Conflict Resolution

The once-aspiring minister—Umbreit earned a full scholarship to seminary, which he attended for a time before realizing it felt "irrelevant" to him amid the Vietnam War and Civil Rights movement—is widely considered a trailblazer in restorative justice. That movement emerged in Canada in the early 1970s, as his career was beginning. As a young community organizer, Umbreit helped a diverse coalition of community members, including former felons, create a halfway house in Michigan City, Indiana, for men newly released from the Indiana State Prison: at the time, a radical endeavor. That led directly to a related effort: helping build a victims' assistance program.

While Umbreit initially thought of himself as solely an advocate for prisoners, ex-felons, and others who had done harm, he quickly realized that those who had been harmed had to play a key role in reshaping a retributive justice system. Along the way, he also experienced a burglary, an assault, a threat on his life, and a friend of his was

kidnapped and raped. "My rose colored glasses got [removed] real quickly," Umbreit recalls. "I've been very closely in touch with the reality of working with people who've been traumatized in life." More recently, and far more painful, he supported his adult daughter from afar in the wake of her violent assault in Italy.

EMBRACING 'THE F WORD'

Umbreit jokes that forgiveness was often referred to as "the 'F' word" early in his career. "People who've been harmed, and who have

a legitimate right to anger, the last thing in the world you want to do with them is talk forgiveness," he says. It was his close friend Mary Johnson, a Minneapolis mother who eventually made peace with the young man who murdered her son in 1992, who first suggested to Umbreit that he teach a course on forgiveness. Johnson's story, and that of Oshea Israel—whom she befriended while visiting him in prison after he killed her son as a teen—is featured in the award-winning 2018 documentary "Risking Light," in which Umbreit appears and for which he served as a consultant.



"Mark's impact on the Center, and the world, has been enormous."

—DR. MARY JO KREITZER,
BAKKEN CENTER FOUNDER AND DIRECTOR



In restorative justice contexts, Umbreit is careful to never press his own agenda on people who've been harmed. "I never bring it up - have you thought of forgiveness?" he says. "I never push that on people. It cannot be imposed."

Umbreit was the founding director of the SSW's Center for Restorative Justice & Peacemaking. Today the Center is housed at the University of Minnesota-Duluth campus. He also teaches at Marquette University's law school in the Andrew Center for Restorative Justice.

Here at the University, Michelle Lamere, assistant director for education at the University of Minnesota's Clinical and Translational Science Institute, took her first CSPH class with Umbreit as a public affairs master's student at the Humphrey School. Like Wilson, she says Umbreit had a profound influence on her professional path. He embodies the concepts he teaches, Lamere says.



Michelle Lamere,

Assistant Director for Education, University of Minnesota's Clinical and Translational Science Institute

"He has the most amazing healing presence. He's an incredibly calm and kind guy with a very quiet [sense of] humor," she says. Umbreit is "so quiet and unassuming that I'm not sure people recognize what a big deal he is."

A key aspect of Umbreit's approach is what he calls "deep compassionate listening," he says. "The core principle of Native Hawaiian emotional, physical, and spiritual healing, which I learned from an elder in Hawaii years ago, [is] Pa'a ka waha. It means 'close the mouth, be still.' That's integrated into my teaching and to how I listen to people."

GROUNDED IN REAL-LIFE EXPERIENCE

He's no cloistered theorist: Umbreit's teaching and research are informed by the work he's done outside academia over the decades. That has included peacebuilding efforts in Israel, Palestine, Northern Ireland, Brazil, Liberia, Japan, and dozens of other countries around the globe—almost always by invitation. From 2005 to 2012 he served as a senior international consultant with the UN Development Program and the Ministry of Justice in Turkey, supporting legislative efforts to implement victimoffender mediation.

"I have always had one foot in academia and one foot in practice. I call it grounded teaching," Umbreit says. "It's teaching that's grounded from real-life experience. You might know a lot of stuff, you might have read a lot of things, but you don't know sh*t in terms of the specific people, their culture, and life context" without that experience, he says. "And I think I'm a better researcher because of my life experience."

As it does for all human beings, that's sometimes included being hurt. And hurting others, albeit inadvertently. "I have realized that I have done harm. And I have been traumatized. Of course, with no intent whatsoever. It's been messy—it's not all just the beautiful stuff."

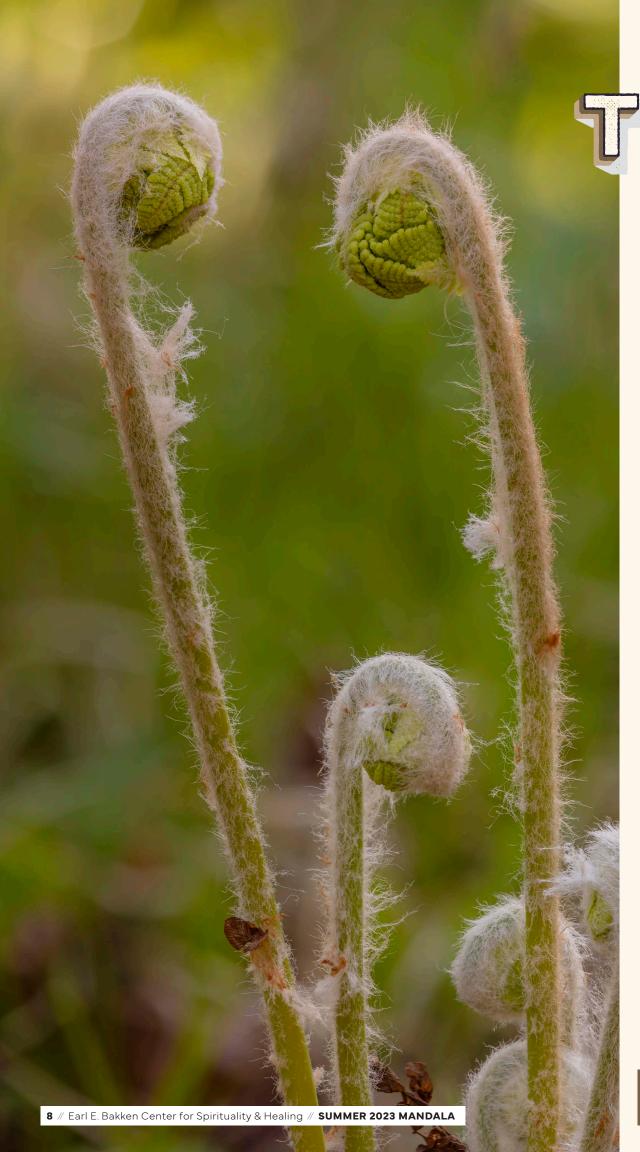
Ultimately, Umbreit's work is inseparable from his humanity—and that's a big part of why he's affected so many people so deeply, says Ph.D. candidate Jake Otis, who is Umbreit's teaching and research assistant. Otis is also engaged in the ongoing, Herculean task of poring through, distilling, and compiling both Umbreit's video archives and his various writings: a process that has deepened Otis's appreciation for Umbreit. "Mark is really one of the grandfathers of the restorative justice movement. And he personifies the spirit of a humanistic approach," Otis says.

"He's the mindfulness guy in the movement, in terms of bringing in a deeper level of being present with people. And he's the most self-aware, the most in control of his ego ... I really, really respect Mark. I'm honored to call him a role model."



"Mark is really one of the grandfathers of the restorative justice movement. And he personifies the spirit of a humanistic approach."

—JAKE OTIS, PH.D. CANDIDATE, TEACHING AND RESEARCH ASSISTANT



THE

By **CRAIG BLACKLOCK**

Photographs from
Craig Blacklock's book,
St. Croix & Namekagon
Rivers—The Enduring Gift.

More information at stcroixphotography.com

SCENT SPRING

Spring arrives not from the ground, but first from the air, on the wings of wood ducks and trumpeter swans. The snow in the forest may still be waist-deep, but as soon as the ice melts from parts of the rivers and edges of ponds, they appear—eager to find the best nesting sites and stake out territories.

With the open water come the first scents of the new season.

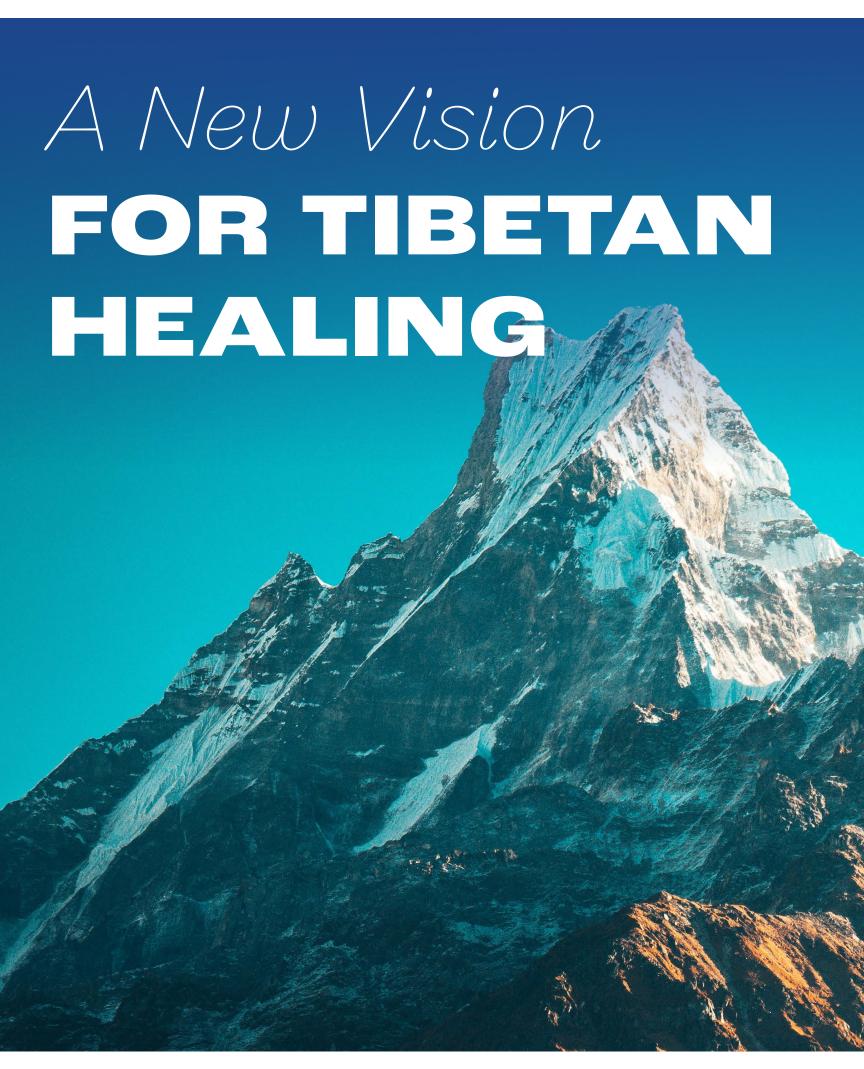
Winter has few smells humans can detect—the aroma of birch logs warming a home, of wet wool after a ski or snowshoe through the forest. But spring arrives with a punch to our olfactory receptors. Take a step into the mucky edge of a marsh and bubbles of earthy gas burst forth—the product of decaying vegetation. To some, this may be an unpleasant smell, but to me, it is the nostalgic smell of my boyhood days, as I explored the then-wild edges of lakes and ponds near our

home in Eden Prairie, Minnesota, stalking the wildlife with my camera.

Eventually, the vernal changes reach the forest bringing forth a new and sweeter scent. Wave upon wave of different plant species take their turn covering the forest floor. At any given moment, it seems as though only one kind of plant is present. But return two weeks later and you might find the same to be true of a completely different species, each locked in a precisely-timed race to fulfill their life cycle before being overgrown by other plants or blocked from access to sunlight by the canopy above.

After months of the monotonous sameness of winter, spring's rapid changes demand that we pay attention! So put on some rubber boots, head to a swamp or woodland, pause, and breathe deeply the scents of spring.







enzin Namdul, a Tibetan medicine doctor, researcher, and educator, has spent decades working alongside Cameron, and has hit the ground running.

"Ultimately, one of the main goals or visions is really to come up with integrated or holistic health models that can help our health care workers to implement in practice and thereby, and in extension, help human flourishing," Namdul says.

Namdul is up for that challenge. Since the Tibetan Healing Initiative came into existence in 1997, that's exactly what it's been doing, by promoting cross-cultural learning, community building, and marrying Tibetan practices with Western-style research. He has been influenced by, and has influenced, THI for decades already at the Bakken Center.

In 1997, THI founder Dr. Miriam "Mim" Cameron traveled in Tibet. She felt anxious and fearful due to altitude sickness, bureaucratic hurdles, and always-present government "spies." An elderly Tibetan nun, who by her very presence, helped Cameron dispel "all her negativity, the fear, and the anger." Back in Minnesota, Cameron wrote a book, "Karma and Happiness: A Tibetan Odyssey in Ethics, Spirituality, and Healing," about this challenge-filled, international adventure. His Holiness the Dalai Lama wrote the book forward. Cameron vowed to bring this transformative, healing wisdom to the University of Minnesota.

Years later, after founding THI at the Bakken Center, Cameron met Namdul, who attended medical school at Tibetan Medical and Astro Institute in Dharamshala, India, the site of a resettlement for Tibetans living in exile. Cameron and her husband, Michael Ormond (Mike), were impressed with Namdul's skillset and ambition, and set about helping him get to the United States. When Namdul landed stateside, they mentored him.

"From the Center's inception, we have focused on whole person health and wellbeing," says Dr. Mary Jo Kreitzer, director of the Bakken Center. That has included courses on other culturally-based healing traditions, from Ayurveda to yoga, Traditional Chinese medicine to acupressure and Indigenous Hawaiian healing, so it made sense to include Tibetan healing. "Culturally-based systems are incredibly important to study and understand," she adds. "They are whole-person focused and include healing practices and traditions that are deeply meaningful and effective. It's been very exciting for me to see the growth in research in areas such as Tibetan Medicine." Kreitzer also noted that Minnesota is home to the second largest population of Tibetans in the U.S., which also makes this area of cultural study critical.

"All along I've thought I don't want to be leading THI past the top of my game," Cameron says. "Tenzin is the best person by far to take over for me. Nobody else worked with me all these years, published together, conducted research together, helped with courses [like he has]. There's nobody else." To ensure the program flourishes, she and her husband have donated their life savings—a million dollars.

There's also a Tibetan aspect to this handoff, Cameron says: "There are four stages of life, and in the fourth stage, which I'm entering now after retirement, you spend your time in spiritual practice and give back whatever wisdom you have to give to world...it gives me great joy that this is the harvest of our life."

"Tenzin is the best person by far to take over for me. Nobody else worked with me all these years, published together, conducted research together, helped with courses [like he has]. There's nobody else."

—DR. MIM CAMERON, FORMER LEADER OF THE BAKKEN CENTER'S TIBETAN HEALING INITIATIVE



Namdul, for his part, is already leading both new course development and a body of research. In fact, the results of some groundbreaking research may be published later this year.

One study involves a Tibetan monastic community in southern India, wherein zero cases of Alzheimer's exist among monks who do regular, rigorous yoga and meditations. "The finding is really fascinating," he says: Despite the facts that the monks are in the same age range and share similar risk factors for neurodegenerative disorders, they have intact cognitive function that would make even much younger people envious. "We are really seeing the impact of intersecting the physical (body movement) with the mental activities related to cognitive function," he says. "That's the kind of work we really want to incorporate into the pipeline at the Center through THI. I strongly believe that both clinicians and researchers are so ready for this kind of understanding. And patients and family members! We are excited to offer this to our community and beyond."

THI is also supporting the Tibetan diasporic community. Tenzin Sherap, board member of the Tibetan American Foundation of Minnesota who has known Namdul since his days in Dharamshala, says that THI and Namdul help educate and support Tibetan culture for people of all ages who are disconnected from their homeland and living in a very different culture than their own.

"In my view, Dr. Namdul's knowledge in Tibetan medicine and the English language could really reach younger and older generations," he says, citing talks Namdul leads at TAFM. "Taking ownership of Tibetan culture and Tibetan Buddhist philosophy is important. When you study Tibetan medicine, it's a gift for your whole life."

Namdul says he is excited to facilitate this work. "When you have a displaced community, there is a sudden pressure to maintain or sustain Indigenous culture vs. assimilating into the culture," he says. "It's not Tibetan or Western, but Tibetan AND Western, and how best we can do that."

Then, there is the work he does around death and dying. He's in the process of working with an interdisciplinary team to put together resources to use to train health care workers who are assisting people who are actively dying or at the end of their life course, as well as how to support family members who have loved ones diagnosed with terminal illnesses

"For much of Eastern traditional wisdom, death is viewed as a fertile ground to investigate and reassess our relationships to ourselves and others around us," he says. "The phenomenon of death itself is a precious and important and salient component of our life course. One of the key concepts of Buddhism is impermanence: Nothing lasts forever, everything is constantly changing, and there is nuance to understanding impermanence—death is a generic manifestation of impermanence."

The nature of his research and outreach makes Namdul's transition seem particularly poignant and timely.

"I am immensely proud of his development as a teacher and scholar, grateful for his many contributions to THI over the years, and honored to have him now become the leader of THI," Kreitzer says.

Dr. Namdul's inspiring and impactful work is supported by the Tibetan Healing Initiative (THI) Legacy Fund. The goal of this important fund is to generate long-term support for Tibetan Healing research, scholarships, education, and leadership at the Bakken Center. Consider making a gift or pledge by visiting z.umn.edu/GiveCSH or by contacting Virginia Kaczmarek, Development Officer at 612-624-1121, virginia@umn.edu.



Tenzin Sherap, board member of the Tibetan American Foundation of Minnesota

The Future of Health Care is Integrative

Reimagine medicine through integrative health. That's the powerful — and daunting — mission that the University of California-Irvine (UCI) set for itself a half-decade ago.

Integrative health is a whole-person, patient-centered approach to care. It redefines the practitioner-patient relationship as a partnership empowering the patient to take charge of and participate in their own wellbeing.

It's a care model informed by scientific evidence utilizing appropriate preventives and therapeutics while considering lifestyle factors such as sleep, stress, nutrition, and physical activity that influence mind, body, and spiritual wellbeing. Finally, the framework seeks to improve the wellbeing of patients and practitioners.

"Optimal health and healing come from taking an integrative approach to health care that is patient-centered, science-based, transdisciplinary, and team-delivered," says Steve Goldstein, MD, UCI Vice Chancellor for Health Affairs.

A critical step in reaching their goal included establishing The Susan and Henry Samueli School of Health Sciences at UCI, which consists of the School of Medicine, the Sue & Bill Gross School of Nursing, the Susan Samueli Integrative Health Institute, and the School of Pharmacy and Pharmaceutical Sciences. (A proposed School of Population Health is in development).

But shifting an entire health care enterprise required more than just buildings and infrastructure. "It required a vested interest in the mission from the chancellor and our executive leadership both on the college or the university side, as well as the medical center side," says UCI Health Director of Nursing, Molly Nunez, DNP, APRN, ACNP. Nunez is a graduate of the University of Minnesota Integrative Health and Healing DNP program specialty, a joint program between the School of Nursing and the Bakken Center.



SHIFTING CULTURE

Nunez, an advanced practice registered nurse and former Director of Clinical Operations for the Susan Somali Integrative Health Institute, was tapped to help create policies and procedures and to build the clinical footprint of integrative health within UCI's academic health care enterprise and integrative nursing.

Integrative nursing is a way of being, knowing, and doing that advances a whole health perspective to optimize a patient's wellbeing. Integrative nurses use evidencebased strategies to support the whole person, system, and planetary healing.

"Integrative nursing is not just teaching about integrative therapies; it's teaching a different way of interacting with patients, family members, and colleagues," says Mary Jo Kreitzer, PhD, RN, FAAN, Director of the Earl Bakken Center for Spirituality & Healing at the University of Minnesota.

The Principles of Integrative Nursing, developed by Dr. Mary Jo Kreitzer and Dr. Mary Koithan, include:

- **1.** Human beings are whole systems inseparable from and influenced by environments.
- 2. Human beings have an innate capacity for healing and wellbeing.
- 3. Integrative nursing is person-centered and relationship-based.
- 4. Nature has healing and restorative properties that contribute to health and wellbeing.
- **5.** Integrative Nursing is informed by evidence and uses a full range of conventional and integrative approaches, employing the least intensive intervention possible depending on the need and context.
- 6. Integrative nursing focuses on the health and wellbeing of caregivers as well as those they serve.

"The principles of integrative nursing fit nicely into UCI's established relationshipbased care model," says Nunez, creating a



"Optimal health and healing come from taking an integrative approach to health care that is patient-centered, science-based, transdisciplinary, and team-delivered."

-STEVE GOLDSTEIN, MD, UCI VICE CHANCELLOR FOR HEALTH AFFAIRS

solid foundation for building an integrative model. "But UCI viewed integrative nursing as a culture change," Kreitzer says.

As part of the years-long switch to integrative nursing, UCI partnered with Kreitzer and the Center's Director of Education and Associate Professor Megan Voss, DNP, RN, for strategic consultation and to train at least 85 percent of the registered nurses within the organization. UCI implemented a grassroots adoption approach that included training formal and informal leaders in their settings across their health care enterprise

"UC-Irvine has long been interested in the Center's work," Kreitzer explains. "A few years ago, a team, including the University's chancellor, spent a couple of days learning about what we were doing and were particularly interested in our research, interdisciplinary education, health coaching, and integrative nursing."

OVERCOMING CHALLENGES

The training program, which consisted of several days of in-person learning on aromatherapy, mind-body skills, acupressure, and integrative nursing, was to be implemented just as the COVID-19 pandemic struck. But UCI would not be deterred. "The decision was made that we still need to do this, so we pressed on," Nunez says.

COVID-19's arrival presented challenges as there was little e-learning done before the pandemic. UCI had to set up a learning management system and other technical infrastructure for staff to join from home.

Yet COVID turned out to be a catalyst for change — and success. UCI exceeded its goal of training 85 percent of nurses. Further, remote learning removed barriers to traditional classroom education, allowing many employees — including ancillary support staff and physicians — to access the training.

"Adoption of new practices is challenging, Nunez notes." Health care providers are very conservative and like to minimize risks for the patient. We were thoughtful about the implementation process, had solid policies and procedures, and only used evidence-based therapies."

"What was inspiring about UCI's approach is that they didn't mandate this education for nurses; they just created the culture for them to flourish," says Voss. "And the number of nurses excited and engaged in the education was mind-blowing."

PUTTING THEORY INTO PRACTICE

UCI nurses are putting what they learned to good use. After three years of implementation, the number of documented monthly integrative nursing interventions continues to rise. "We started this year at about 1,200 per month," Nunez says. "Through continued development and dissemination of tools to support integrative health practices, we now have more than 4,500 integrative nursing interventions monthly."

Example interventions include using guided imagery and music to reduce patient anxiety, essential oils to promote relaxation, and acupressure for pain relief so that lower doses of pain medication are necessary.

"Patient reports of nausea have improved by 42 percent, and sleep issues have improved by 20 percent," Nunez says. "The nursing units who adopted integrative nursing more robustly than others saw the most increase in our patient satisfaction scores this year."

"I really liked when my nurse rubbed my arms with massage oil, which smells like lavender," one patient said in a testimonial. "My doctors and nurses helped put my body back together again after my car accident because we did it without a lot of drugs or pain pills."

Explore with us how a financial gift can broaden and expand these strategically meaningful partnership opportunities that reimagine medicine through integrative health. To begin the conversation about the impact you would like to make, contact Virginia Kaczmarek, Development Officer at 612-624-1121, virginia@umn.edu or visit z.umn.edu/GiveCSH

Community

The Integrative Health & Wellbeing Research Program is working with community leaders to expand access to drug-free back pain treatments. By **KEVIN COSS**

s the opioid epidemic grows more severe, it's more important than ever to find drug-free treatments for chronic back pain. According to the Centers for Disease Control and Prevention, drug overdose deaths jumped nearly 30% from 2019 to 2020, and three-quarters of the deaths involved opioids.

Back pain affects people of all backgrounds, but some groups are less likely to receive effective, evidence-based treatments. This includes non-drug approaches, like complementary and integrative health — and part of the reason may be that they are often left out of clinical studies.

"Overall, there has been relatively little research examining back pain in populations who experience health disparities, especially those from minority and ethnic groups and those with lower income," says Roni Evans, DC, PhD, Director of the Bakken Center's Integrative Health & Wellbeing Research Program (IHWRP).

Evans and her colleague Brent Leininger, DC, PhD, Research Assistant Professor, are leading community-engaged research to develop and evaluate two programs that help participants benefit from non-drug practices to manage their back or neck pain. The programs will teach participants to use a range of activities such as mindfulness, pain coping strategies, meditation, progressive muscle relaxation, exercise, and more.

Supported by funding from the National Institutes of Health's National Center for Complementary and Integrative Health, the research team has been working with community leaders and members and listening to their ideas. They will launch a small study this summer to assess an early version of the pain management programs. Participation will be open to adults who have had back or neck pain for at least three months and who are a member of a racial or ethnic minority group or who have an annual household income of less than \$50,000.

Over the course of nine weekly group sessions, 40 participants will watch expert-led videos, discuss their goals and planning, and learn and practice different ways to address pain and overall health. The researchers will also connect with community members to hear their feedback on the program, the recruitment methods used and other aspects of the study.

"Earlier, we spent time learning about what community members need related to back pain and how our approaches and interventions can best meet those needs," says Doug Kennedy, PhD, Assistant Professor. "Our pilot study will let us know what improvements we need to make to our research, engagement, dissemination, and recruitment activities for the next stage of the study."

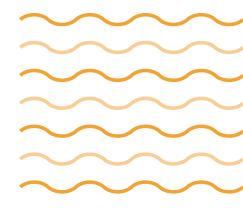


"This research project brings us together to address health, disparities, equity and inclusion."

> —CARMEN ROBLES, COMMUNITY ENGAGEMENT LEADER AND PROGRAM HOST OF CONVERSACIÓNES DE SALUD

The team will then launch a larger trial with nearly 400 participants that puts the improved programs to the test, measuring how effective the programs are in engaging community members and providing them the tools and resources to reduce and manage their pain.





FORMING DEEPER CONNECTIONS

Despite good intentions, researchers often don't have the full trust of the communities they work with. Community members may hesitate to get involved if they feel their own needs or experiences aren't recognized or if the jargon and processes of clinical research aren't clear.

The IHWRP research team is working with a Community Advisory Team (CAT) to broaden their own perspectives, build relationships with community members and organizations, and understand cultural considerations.



The CAT comprises trusted community leaders who help the researchers design recruitment, study and program materials; give them recommendations for how best to reach communities; and participate in community presentations.

Dr. Ronda Chakolis, PharmD, MPH, a member of the CAT, said moving away from a traditional, transactional method of research to a more authentic form of engagement can be uncomfortable or even humbling for researchers.

"This work is based on human experiences and involves relationship building; there will be some pain points along the way," Chakolis says. "The beauty I see with this approach, however, is we're starting to develop a list of best practices for community-engaged research. For so long, we did not have the 'rules of engagement' for how to do it."

In addition to the guidance they provide, partnering organizations will also help distribute recruitment materials and provide space to conduct parts of the study. Members of community organizations will even lead some sessions of the program, providing a familiar presence for participants.

Carmen Robles, a community engagement leader and host of the program "Conversaciónes de Salud," says she feels a surge of hope thinking about the project and its potential to provide real resources and support for community members dealing with chronic pain.

"This research project brings us together to address health, disparities, equity and inclusion," says Robles, who is also part of the CAT. "Community perspectives take more work, but by committing to doing so you can actually address the issue."

TEARING DOWN BARRIERS

For Evans, the most exciting part about the project is the opportunity to conduct trials in a new way. She sees an opportunity to help address systemic biases in the research process and make sure studies can benefit everyone, rather than a portion of the population.

To succeed, community-based pain management programs like the ones being developed will need to be easier for participants to navigate than the traditional health care system, as well as more sensitive and supportive toward those who have faced judgment from health care providers in the past. The study will also have to overcome the hurdles that come with clinical research, such as obscure and intimidating consent forms with unfamiliar terms and concepts.

"We are trying to figure out strategies and solutions with our community partners that make participation in our study better oriented to research participants from different backgrounds," Evans says. "We have been steeped in discussing what the needs are — and listening and learning."



Roni Evans,
DC, PhD, Director of the
Bakken Center Integrative
Health & Wellbeing
Research Program



Douglas Kennedy, PhD, Assistant Professor, Bakken Center Integrative Health & Wellbeing Research Program



Dr. Ronda Chakolis, PharmD, MPH, Community Advisory Team member



Carmen Robles, Community Engagement Leader and Program Host of Conversaciónes de Salud

MONDAYS ARE FOR MINDFULNESS

Hundreds of people across Minnesota and around the world tune into the Bakken Center's free Mindful Mondays sessions each week. By **SUZY FRISCH**

Three years into teaching Mindful Mondays sessions that offer a mix of movement and meditation, Mariann Johnson is still amazed that hundreds of people across Minnesota—and around the world—participate weekly. Even more astounding is that participants can't see each other and likely never met, yet they have cultivated a tangible sense of community and kinship during the free, hour-long program.

"Its become a sanctuary for people where they can renew their sense of wellbeing and mindfulness," says Johnson, Mindfulness and Wellbeing Instructor at the University of Minnesota's Earl E. Bakken Center for Spirituality & Healing. "It's really powerful."

The Center's Mindful Mondays offering has grown in popularity since the beginning of the Covid-19 pandemic, but its roots date back to 2003 with the launch of Stressbusters. The program met weekly in the Mayo Building Meditation Space, and offered an opportunity for students, faculty, and staff to drop in for respite and engage in mind-body practices.

When much of the University went online in March 2020 due to the Covid-19 pandemic, Bakken Center leaders knew they wanted to continue offering this lifeline of support to current participants, while opening the door for others throughout the University and beyond to join. They renamed the program Mindful Mondays to better reflect the content and focus, and enlisted Johnson to teach via Zoom each week, says Sue Nankivell, the Center's Director of Business Development and Community Relations.

"People were afraid, anxious, and many were isolated and lonely. Some were suddenly with their families constantly—another stressor," Nankivell says. "We heard from participants that these free, weekly drop-in sessions were important to their wellbeing as the pandemic unfolded. They grounded them with helpful wellbeing

practices and tools, offered community, and gave them something to look forward to each week. That has continued to this day."

Nearly 500 people registered for the first session on March 24, and by the second week it had grown to 1,100 people. Participation has stayed in the hundreds each week for three years, including people from all five UMN campuses and residents of 83 out of 87 Minnesota counties in 2022. In addition, 11 percent of participants are from another state, and 2 percent join from other countries, says Molly Buss, Community Relations Program and Event Manager at the Center.

University attendance has even grown in the past year as employee participants now receive wellbeing points through its Wellbeing Program, which helps people save money on their health insurance. Today, faculty and staff account for 60 – 70 percent of registrants, joining community members, alumni, and students, Buss says.

MEETING THE MISSION

This effort to offer weekly, free programming like Mindful Mondays strikes at the heart of the Center's mission to advance wellbeing in people, communities, and organizations, Nankivell says. "Mindful Mondays has become a beloved resource for many," she adds. "It offers a consistent opportunity to set aside time for calming, grounding self-care during times that can be challenging for many."

Each week, people join the live program on Zoom from noon – 1 p.m. Central time. The Center also records sessions and makes them available online for people to engage when it works for them. During each session, instructors spend time walking participants through gentle, mindful movements like chair, lying down, or standing yoga, and qigong, a mind-body practice that focuses on movement, breathing, and posture. These practices are then followed by 10-15 minutes of guided meditation.

Alvina Brueggemann, PhD, a cognitive psychologist who earned



I'm so grateful for Mindful Mondays. When it started during the darkest shutdown days of the pandemic, it was an enormous resource for physical and mental health. Now, even with life back to in-person in most ways, how wonderful to continue having this online option for people working in person and for anyone who doesn't want/lives too far away to drive to class. Every Monday that I can, I participate with the virtual community."

—DEBORAH MCKNIGHT, MINDFUL MONDAYS PARTICIPANT

a certificate in Integrative Therapies & Healing Practices from the Bakken Center, started teaching Mindful Mondays sessions in 2022. She believes that pairing movement with meditation is an integral part of the program.

"What's nice about the structure of Mindful Mondays is that it can be helpful to move before you meditate," says Brueggemann, a Quality Improvement Consultant in Mental Health Services at M Health Fairview. "It's really helpful to get some of those fidgets out, release some of the tension, and then it's easy for the mind to quiet as well."

Brueggemann usually teaches qigong and meditation, a combination she finds invigorating and relaxing. Qigong is known for loosening joints, lowering blood pressure, and relieving stress and anxiety, plus it is accessible and easy to learn. For any Mindful Mondays session, people can come as they are, without needing a special outfit or equipment. They will find a welcoming and supportive community that continues building connections with others from across the state and around the world, she says.



Alvina Brueggemann,
PhD, Quality Improvement
Consultant in Mental
Health Services at
M Health Fairview



Sue Nankivell,
Director of Business
Development and
Community Relations
at the Center

"I love Mindful Mondays. There's such a beautiful sense of energy, awakening, and aliveness that comes from sharing this practice with other people," Brueggemann says. "It's so energizing as a teacher to know that others are joining. I feel like I'm helping ignite the fire in others to do this practice that will benefit their lives."

LASTING OUTCOMES

Beyond the hour that people spend participating in Mindful Mondays, embracing these mindfulness practices can have life-long effects, Johnson says. Taking time to be present is especially important in our 24/7 connected world; through mindfulness people can tap into some of their innate capabilities to be aware and engaged instead of distracted.

"We find that when we're mindful, even in really difficult times, we're even more resourceful. It's a training of the heart and mind to bring mindful awareness to the sensations in our body, and we learn to respond rather than react," Johnson says. "Mindful movement and meditation trains our brains to come home. It's a stepping-stone for good self-care."

The thousands of people who join Mindful Mondays programs have found a place to come home, knowing that they are spending time with a community of like minded others. It's been a surprising and welcome outcome of moving the program online, Johnson says.

She still can't believe how much of an impact Mindful Mondays has made and continues to make. "It's as rich as it is because of community members who participate," Johnson adds. "I never would have guessed that we would feel this sense of community and support when you can't see anyone else, but it's palpable."

Explore with us how a financial gift can ensure these profound and meaningful opportunities remain available and help broaden our reach to more people. Philanthropy supports our mindfulness facilitator team and removes financial barriers for participation. To begin the conversation about the impact you would like to make, contact: Virginia Kaczmarek, Development Officer at 612-624-1121, virginia@umn.edu or visit z.umn.edu/GiveCSH.

From Health Care to Wellbeing: Unleashing the Potential of **Health Coaching in** Primary Care By DR. CHERIE KROH

s the health care landscape Aundergoes rapid changes, primary care is no exception to the trend. The future of health care is an exciting blend of traditional primary care and health coaching, a dynamic duo poised to make a lasting impact on patient wellbeing. Evidence supports that the integration of health coaches into primary care can enhance patient outcomes, improve the physician-patient relationship, and ultimately, reduce health care costs. In addition to these benefits. health coaches can also help to tackle social determinants of health and health inequities. Patients who receive health coaching are less likely to require expensive interventions such as hospitalizations and surgeries. Health coaching and its impact cannot be overstated. The American Medical Association highlights that integrating health coaching into primary care is a recipe for success. We believe health coaching is the secret saucel

A health coach is a professional who works with patients to help them achieve their health and wellbeing goals. Health coaches serve as an essential link between patients and physicians. They work collaboratively with patients to create comprehensive, personalized care plans that address their physical, emotional, and social needs while establishing long-term mindset and behavior changes the patient wants to make. They also provide ongoing support and accountability, which can be key to helping patients stick to their care plans.

Primary care providers are embracing health coaching techniques, shifting their focus from just treating illness to promoting overall wellness. As primary care and health coaching continue to merge, it's crucial to prepare health coaching students for this everevolving world of health care. So, how do we educate and train these students to become the health coaching superheroes of tomorrow? Let's break it down:

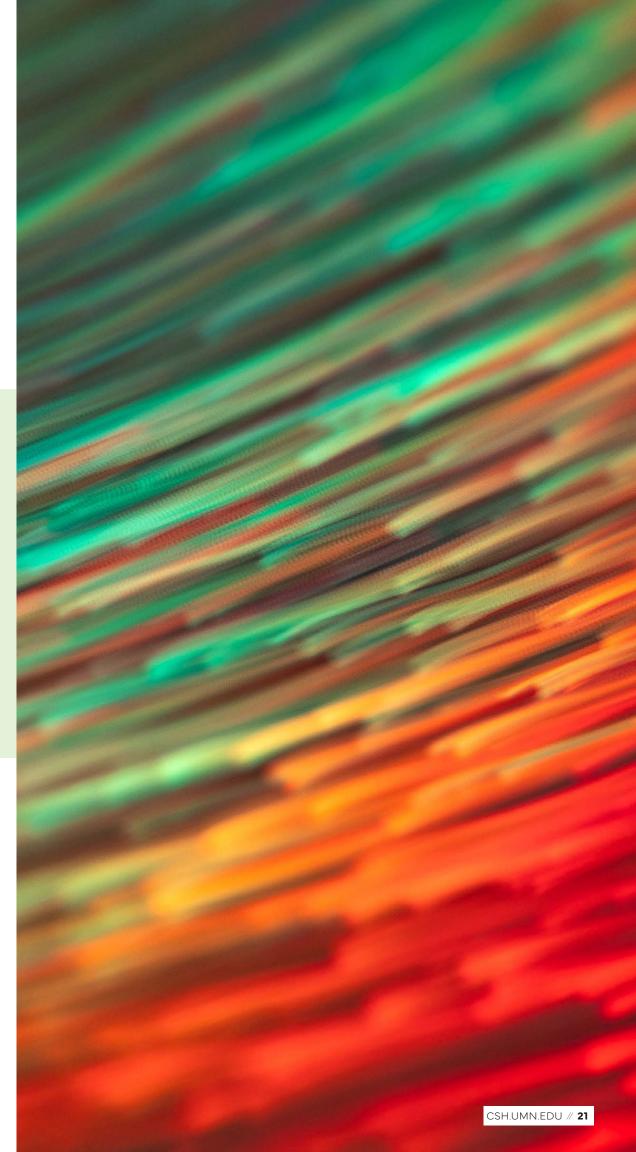
- 1. Comprehensive Curricula: Equip students with a holistic understanding of health coaching techniques, behavior change strategies, motivational interviewing, and goal-setting. This solid foundation will enable them to provide effective support for patients and seamlessly collaborate with primary care providers.
- 2. Interdisciplinary Collaboration Competencies: These competencies will enable our students to gain a deeper understanding of the various factors affecting patient health and how to work in an interdisciplinary health care team.
- 3. Reimbursement Code Readiness: We are teaching students about the intricacies of reimbursement codes and telehealth, a vital element in integrating health coaching into primary care. As health coaching gains traction, new reimbursement codes are likely to emerge, making it essential for students to stay informed and adept at navigating these changes. Health coaches will become essential to primary care providers as health coaching reimbursement codes are key in unlocking financial support for coaching services, a critical aspect of health care integration.
- 4. Diversity, Equity, Inclusion, and Belonging Competencies: Instilling the importance of understanding and respecting diverse cultural backgrounds, beliefs, and values will enable students to deliver personalized and inclusive health coaching services that cater to the unique needs of each patient. In addition, with an understanding of social determinants of health and health equities, health coaches can help make an impact in these areas.
- 5. Leadership and Management Competencies: Inspire students to embrace lifelong learning by staying up-to-date with the latest health coaching research and best practices. This commitment will help them remain at the forefront of the industry, ready to tackle new challenges and adapt to the ever-changing health care landscape.
- 6. Trauma-informed Approaches: Engage students in their understanding of trauma, mental health, and mind-body science, will help students understand the importance of their scope of practice and recognize when referrals are needed to better serve clients and patients.

The future of health care is undeniably an exhilarating fusion of health coaching and primary care. We are equipping health coaching students with the right tools, knowledge, and experiences, to ensure that they become the trailblazers of this exciting new era in health care where wellbeing becomes the norm rather than the exception. And who knows? Maybe, just maybe, we'll inspire a new generation of health care heroes, ready to take on the challenges of tomorrow and transform the way we approach health and wellbeing, making a lasting impact on the lives of patients and communities.

You can help lead the critical change needed in health care. Financial barriers stand in the way for many promising students and scholarships make all the difference for students pursuing a Health Coach degree or certificate. Donors make integrative health and wellbeing education possible for scholars from all backgrounds and walks of life. To make a financial donation or pledge, contact Virginia Kaczmarek, Development Officer at 612-624-1121, virginia@umn.edu or visit z.umn.edu/GiveCSH.



Dr. Cherie Kroh is the Integrative Health and Wellbeing Health Coaching Programs Director at the Earl E. Bakken Center for Spirituality & Healing.





Navigating Grief after COVID-19

Grief is a natural response to loss that affects our whole health – body, mind, and spirit. By **JACQUES LEROUGE**

The world experienced a profound sense of loss during the COVID-19 pandemic, which exacerbated and revealed challenges for people, their families, and communities. Now, it is important to take time to build resilience by understanding grief, creating spaces for open dialogue, destigmatizing mental health conversations, and providing accessible resources for grief counseling and support.

GRIEF IS A UNIVERSAL HUMAN EXPERIENCE.

Many people think about grief when it comes to death, but the pandemic illustrates the pervasive ways grief and loss can affect everyone including loss of health, freedom, livelihood, and even just a sense of normalcy. As people process during ongoing uncertainty, it is crucial to acknowledge complex emotions and experiences of grief.

No one should have to cope with grief alone. Emotions will vary widely, and whatever feelings arise – sadness, anger, denial, confusion, or otherwise – give yourself permission to feel them fully in addition to sharing them with others. While it is possible to work on grief informally, there are also many grief counselors and mental health professionals that are trained to offer support.

COMPANIONING

Jordan Deines, a licensed clinical social worker and Community Programs Director at the Fanconi Anemia Research Fund (FARF), works with people and their families who have been diagnosed with Fanconi Anemia. "Grieving can start before a diagnosis when unexplained symptoms are experienced, or even in the anticipation of a diagnosis; often in anticipation of what might be lost. It's not uncommon for caregivers or diagnosed individuals to grieve the future they expected."

When working with people and their families, Deines values the Companioning Model from Dr. Alan Wolfelt. She says, "Companioning someone through grief means we meet them where they are."



Jordan Deines, LCSW, Community Programs Director at Fanconi Anemia Research Fund

"We're not forcing any preconceived notions about grief, such as the misunderstood stages of grief or that grief has a timeline - there isn't an end point. We're here for them, but at no point are we saying, 'you need to move on.' Our job is to provide compassionate support and care along the way."

UNITING

One way to cope with grief is by increasing social connections. The COVID-19 pandemic has united people in a shared struggle which fosters a collective consciousness about grief. Communities worldwide have come together to support each other, share stories, and honor the lives lost. From virtual memorial services to public displays of solidarity, collective mourning offers solace, strength, and a sense of belonging.

TECHNOLOGY

Technology has changed the way many people experience and express grief. Social media has created new platforms for people to share their experiences and connect with others who are going through similar struggles. Online support groups or forums can provide a sense of community and connection for people who may not have access to in-person support.

SURVIVORS

Grief is a collective experience within communities of survivors who have been diagnosed with cancer, hematologic, metabolic, or genetic disorders. The loss of a member of a community can be felt by everyone and can have a profound impact on the group as a whole. Communities of survivors create spaces to acknowledge and honor their collective grief. This could include holding a memorial service or creating a space for people to share their memories and feelings.

Deines shares that "Part of FARF's mission is to provide support services to affected families worldwide." To accomplish that, they facilitate online support groups, virtual events to learn and connect, a volunteer card making program, Postmarked with Love, and many other ways for the Fanconi anemia community to connect.

In this article, you'll also find a short list of other organizations that provide similar supportive resources for people experiencing all kinds of grief.

FINDING HEALING AND RESILIENCE

Navigating grief during a global crisis necessitates the cultivation of collective resilience. Supporting one another, both emotionally and practically, becomes paramount. This includes creating spaces for open dialogue, destigmatizing

mental health conversations, and providing accessible resources for grief counseling and support.

When listening to grief experiences (whether your own, or someone else's) practice simply showing up without expectations or needing to "find the right words." Ask, how can I emphasize the power of holding space, listening, and validating foremost?

The pandemic has taught many people the value of empathy, the strength of human connection, and the importance of prioritizing mental health. Moving forward, people can work towards building compassion that supports the healing journeys of grieving individuals and communities.

A short list of notable organizations that offer so many different services such as support groups, helplines to call or text, educational videos, and much more

- * The U.S. Crisis Call Center 775-784-8090
- * NAMLorg | National Alliance on Mental Illness
- * Cancer.org | American
 Cancer Society
- * Reininsarcoma.org
- * Gildasclubtwincities.org **Gilda's Club**
- * Griefshare.org/findagroup Grief Share

A more in-depth version of this article is featured on the Bakken Center's "Taking Charge of Your Survivorship" at **z.umn.edu/tcsurvivorship**

Additionally, the Bakken Center offers three courses that explore the topics of death and dying:

Redefining End of Life Care Suffering and Self-Transformation Death, Happiness, and Resilience

For more information, contact csh@umn.edu

INCREASE YOUR SOCIAL CONNECTION TO SUPPORT HEALING

- * Write a letter or join a writing support group. You can write to anyone, whether they are physically present on this earth or not, including yourself. You can also choose to send, or not to send the message. Giving a form to amorphous feelings may help find definition. Often, emotions flow out of us and can be expressed in writing even when we aren't aware we are holding on to them.
- * **Reach out to your past.** This might be your family relatives or found but it can be helpful to talk to someone who might be sharing a similar experience of loss to you.
- this may not be available to everyone based on cost and locations, but consider all the resources that may be around you like at your school, at a religious institution you may be close to, or otherwise in your local community. There are also many opportunities for free, online grief support groups offered by organizations highlighted in this story.
- * Identify dates, people, places or activities that bring your grief to the forefront. Plan ahead for these situations if you can. For example, if the anniversary of a diagnosis or death is coming up, carve out time to honor it (if that's what feels right to you). This may involve taking a day off work, surrounding yourself with a supportive person or pet, or planning something special to honor the anniversary like cooking a special meal or planting a tree.
- * Consider talking about your grief with someone you trust. Often the biggest struggle in grieving is isolation. Talk to a trusted friend or family member. Share how you are feeling. Ask them to just be with you without offering solutions or cliche advice.
- * Read or listen to a book that might add insight to what you are experiencing and encourage those in your support system to do the same. In No Cure for Being Human, Kate Bowler serves up some refreshing truths about what it actually feels like to go through something horrible. She removes the pressure to make sense of challenging times and gets real about how hard life can be.

Mindfulness is for Everyone By SUZY FRISCH

Since the start of the Covid-19 pandemic, there have been few opportunities for mindfulness-based stress reduction (MBSR) instructors to gather in person to share, learn, and connect. The Earl E. Bakken Center for Spirituality & Healing changed that in April with a workshop to convene MBSR trainers in a spirit of renewal.

The Center brought in Eric Lopez Maya, PhD, director of the Mexican Institute for Mindfulness and an MBSR teacher-trainer, to lead the day-long workshop. Lopez facilitated Mindfulness is for Everyone: An Inquiry into Diversity Within MBSR and Mindfulness, aiming to call attention to diversity, inclusion, and trauma-based approaches to MBSR.



Eric Lopez Maya, PhD, director of the Mexican Institute for Mindfulness

Through a series of small and large group sessions, 20 participants engaged in discussions about working with diverse populations, exploring bias, recognizing trauma in themselves and others, and

cultural humility, or being open to other cultures. The group included MBSR instructors from the Bakken Center and the community, Mindful Mondays facilitators, mindfulness practitioners, and staff members.

"My hope is that people can really incorporate all of the learning in their personal lives and become more aware of their own bias or cultural biases, and that this personal awareness can transpire into their classrooms," Lopez says. "By doing that, they will be able to serve their students in a much more effective way."

Mariann Johnson, a Bakken Center mindfulness and wellbeing instructor, found the workshop to be thought-provoking and invigorating. It opened the door for discussion about how to make the mindfulness community more diverse in terms of teachers, practitioners, and research. "There are cultural differences in different populations of people, and we need to approach our teaching differently as well," she says.

"It was a very rich day of inquiry and dialogue. It was important to be in dialogue

with each other and go in-depth and explore what all of these issues mean to us personally and what it means for us to really show up as instructors in ways we hadn't done previously," Johnson adds. "It was an enriching experience for all."

The Bakken Center held the workshop to help people reconnect after being apart for so long and to open the door to fresh conversations about diversity, says Molly Buss, community relations and event manager. Such conversations are ongoing at the Center.

"How do we create a place where people view that mindfulness is for them? When you don't see yourself reflected in the leaders in a space, you don't connect with it or think it's for you," Buss says. "That's something the Center is working on," including training a more diverse body of mindfulness facilitators and making mindfulness programs more accessible through sliding-scale fees.



Molly Buss, community relations and event manager at the Center

The heart of MBSR is inquiry, Johnson says, making the workshop a highly fitting place for people to think, reflect, and learn about incorporating a spirit of diversity and inclusiveness into their practice and teaching.

Join us in exploring how your financial contribution can secure these profound and meaningful opportunities, enabling us to expand our impact and reach even more individuals. Philanthropy plays a crucial role in supporting our dedicated mindfulness facilitator team and removing financial barriers to participation. For more information, contact Virginia Kaczmarek, Development Officer at 612-624-1121, virginia@umn.edu or visit z.umn.edu/GiveCSH