



ISMA-USA NEWSLETTER

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ISMA-USA NEWSLETTER EDITORIAL INFORMATION

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ISMA-USA NEWSLETTER is published twice a year. We invite all members of ISMA-USA and ISMA members from other countries to submit articles for publication in our newsletter. We will also accept articles with information of interest to ISMA from nonmembers. It is the newsletter's policy to include contributions with various points of views; however, these do not necessarily represent the views of ISMA or ISMA-USA Branch. Announcements of services or programs do not imply an endorsement. We reserve the right to edit any material that is received.

Deadline for receiving copy for the **Fall 2002** issue is October 15, 2002.

Send to [Serena Wadhwa](#) or [Betty J. McGuigan](#) via e-mail attachment.

LETTER FROM THE EDITOR

Dear Readers:

Welcome to the spring 2002 edition. I hope you find some interesting articles and information to peruse. My purpose of this letter is two-fold. First, I want to thank all of you for your support and contributions during my years as your editor. Second, I would like to share some thoughts I've had over the past few months regarding this newsletter.

I find it paradoxical that putting together a newsletter that focuses on stress is itself stressful. I also realize that in order to make it more meaningful to myself and maybe for others, there are opportunities I must forgo. With the events of September 11 and the chaotic schedule of obtaining a doctorate, I realize how disconnected I feel from those of you who support what we do. Although I have had the opportunity to begin knowing several of the members, I wished this occurrence had been more widespread.

The editorial board decided to include two new columns in hopes of making this newsletter more interactive and personable. Many of you have expertise in areas unknown to others. Many of you have ventured into business or created niches. I would like to hear of these things. On that note, we have decided to have a "letters to the editor" section as well as a section focusing on members. You will see the sprouts of these in this edition, and it is our hope that these will bloom as time passes.

If you have suggestions, comments or feedback, please let us know. This is your newsletter. I want to provide a forum that will inspire us and spark in us passion, hope and reflection.

Thank you for this chance to share. I look forward to hearing more from you.

Regards,

[Serena Wadhwa](#)

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LETTERS TO THE EDITOR

We welcome feedback from our members about the format and content of this newsletter. Please take the time to express your pleasure or displeasure if the spirit moves you. We want you to challenge or support what we have published. Let's make this an interactive experience so that we all can learn from each other.

NEWS

WESLEY E. SIME JOINS ISMA-USA'S BOARD OF DIRECTORS



[Wes E. Sime](#)

[Betty J. McGuigan, M.Ed.](#)
ISMA-USA Secretary-Treasurer

Dr. Sime is a professor in the Department of Health and Human Performance at the University of Nebraska-Lincoln. He developed the Stress Physiology Laboratory at University of Nebraska and was a Research Associate in the Cardiovascular Center, University of Nebraska Medical Center in Omaha, Nebraska. He received his MPH/Ph. D. from the University of Pittsburgh where he began to study exercise physiology, stress physiology and neuromuscular relaxation. He received a second Ph.D. in Counseling Psychology from the University of Nebraska.

He is Past Chairman of the Biofeedback Certification Institute of America and was the co-developer of the Stress Management Certification Program for BCIA. In recent years his teaching and research has focused on

health psychology and sport psychology. He has collaborated on numerous research projects spanning several departments both nationally and internationally. He currently is collaborating on the development of a new interactive computerized Stress Profile for assessing individual and organizational stress and strain factors. He has authored numerous articles and books, and his website www.unl.edu/stress/ focuses on stress management information.

Dr. Sime has a long history of active involvement with ISMA. He received his training in Progressive Relaxation from the method's originator, Edmund Jacobson. He co-edited three of the association's conference proceedings publications and has conducted numerous workshops at its conferences. He has served as co-chair of the stress management certification committee since it was inaugurated in 1999. He now begins serving on ISMA-USA's Board of Directors as 2002's Chairperson-Elect and as 2003's Chairperson.

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EDUCATION AND CREDENTIALING IN STRESS MANAGEMENT

[Wesley E. Sime](#)

ISMA-USA Chairperson-Elect
Certification Committee Co-Chair

Discussions continue regarding the possibility of establishing training and credentialing in stress management for our membership. The committee's current stance is that basic stress management training should be offered on-line as course credit, in part to increase membership of ISMA-USA among those seeking proficiency and credentials. The exact method by which individuals would obtain some type of credentialing for their proficiency is not yet clear. We welcome suggestions from the membership.

ISMA-USA Board of Directors will be sending a letter to all members polling their interest in seeking credentials in stress management education and their willingness to participate in the credentialing program either as program administrators or as instructors. We strongly encourage everyone to respond to this letter (either my email or direct mail) when it arrives because this will help us assess both membership interest and availability of resources (personnel) for this endeavor.

Similarly, a letter will be sent to a group of 500+ individuals who received certification from the Biofeedback Certification Institute of America in the 1990s. Their credentials are now void because BCIA stopped administration of the program several years ago. It is possible that some of that group may be interested in membership in ISMA-USA and in continuing their credential.

It may be necessary and appropriate to follow the pattern of other certification agencies that have allowed a "grand fathering" phase wherein those who have previous training and experience will be asked to submit documentation for review. Upon verification of ongoing work in the field and continuing education, individuals would likely be granted the credential.

For the future we are hoping to offer a series of introductory and advanced level training programs centered on a body of knowledge as determined by those esteemed and experienced professionals in the field. Some of the educational programs would be web-based training courses and others would be offered in traditional workshop settings either at professional meetings or in independently organized programs in various regions of the country.

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FROM the CHAIR

[James Campbell \(Jim\) Quick, Ph.D.](#)



Professor of Organizational Behavior
Center for Research on Organizational
and Managerial Excellence (CROME)
The University of Texas at Arlington

Dear ISMA-USA Members:

Dr. Paul Rosch, Past-Chair of the USA Branch of ISMA and President of the American Institute of Stress, has done a wonderful job over the decades of tracking the costs of mismanaged stress and distress throughout the United States. The costs have mounted since the mid-1980s when the major restructuring of our national economy began and employment downsizing became almost a way of life for many Americans. While I was visiting Cary Cooper at the University of Manchester Institute of Science and Technology during my faculty development leave in the fall of 2000, I listened to his MacLain Lecture describing very similar costs throughout the UK. He believes the UK economy has become Americanized, with both its benefits and the social costs associated with it.

Most recently, Dr. Lennart Levi, President of the International Stress Management Association and tireless advocate for the well-being of workers through healthy stress management, has shared with me some of the conclusions developed during the November 2001 WHO/EURO Conference in Brussels and from the European Council of Health Ministers. The UK and all of Europe are more of one mind on the issues of stress management than are we in the US. Hence, ISMA has more fertile ground in Europe in which to flourish.

Our challenge is to help fertilize the soil throughout the US and to sensitize business leaders as well as policy makers to the issues related to healthy, preventive stress management. When speaking to a business group many years ago, I argued that good therapy with one executive can be primary prevention for tens, hundreds, and even thousands of employees in a workforce. That is never more true than today. So, I challenge our members to identify key leaders in our business and political arenas who are receptive to the important message of stress management for health promotion and distress prevention. I further encourage our members to communicate with the officers about ways in which we may be helpful in this mission.

Dr. Rosch has documented the costs and makes the case for a job stress epidemic. Dr. Cooper reinforces this across the Atlantic with his work. Both provide fuel for Dr. Levi's own message to policy setters and decision makers.

Stress management is good management!

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FOCUS ON STRESS THEORY

THE MISTAKEN NOTION OF GOOD STRESS

[Robert Dato, Ph.D., NCPsvA](#)

Chairman & CEO, Dato Leadership Institute
Assistant Editor, ISMA-USA Newsletter

Great men sometimes make great mistakes. Such was the case with Dr. Hans Selye (1907-1982), preeminent Canadian scientist and endocrinologist who is generally considered the Father of Stress Research. Let me preface my remarks by noting that I have the utmost respect for Dr. Selye and even nominated him for a Nobel Prize. Nonetheless, I feel professionally obligated to correct a theoretical mistake – his mistaken notion of “good stress.” I have chosen to call this a “great” mistake because of the enormous confusion it has caused for thousands of professionals and millions of others. This theoretical mistake does not invalidate or detract from his fundamental physiological discoveries in any way. There is abundant research supporting the validity of these discoveries.

Augustin Cauchy, a French mathematician, coined the terms “stress” and “strain” in 1822, defining stress as the pressure per unit area and strain as the ratio of increase or decrease in the length of an object to its original length. This appears to be the origin of the confusing and unfortunate use of “stress” instead of “pressure” in

the field of physics. He *should* have said, “Pressure is force per unit area.” In 1935, the concept of biological stress was born. Selye reversed the use of the term “stress” defining it as equivalent to “strain.” He initially described stress as “the rate of wear and tear in the body,” and later defined stress as “the nonspecific response of the body to any demand.” But this only added to the confusion. Most of us misuse the physics and biological concepts of stress. We cannot use “stress” to describe both the cause and effect! What we *should* say is: “I am under a lot of pressure,” and then we may wish to add: “I have a lot of stress.” Even Selye, in his writing, often lapsed into this careless mode. Selye also coined the term “stressor” and used it instead of “stress” to indicate demand or pressure. Except for those in the field, very few people use the term “stressor.” It is a well-crafted and logical term; however, it is irrelevant. Since any *type* of pressure can cause stress, it is impossible to differentiate between “stressors” and “non-stressors.” We should simply discard the term “stressor” and use the term “pressure” instead. It is unambiguous and has exactly the same meaning in physics and biology.

While important, these careless errors of usage pale in comparison to the great mistake. The great mistake was to divide stress into eustress (good stress) and distress (bad stress). This dichotomy employs diametrically opposed concepts of stress from physics and biology. As late as 1980, Selye noted that eustress is “pleasant or curative stress,” and distress is “unpleasant or disease-producing stress.” He would have been correct if only he had said that pressure, depending on magnitude, results in either adaptability *or* unadaptability (stress as nonspecific pain or disease). Selye’s concept of “eustress” is erroneous and unnecessary, as his is model of stress as four basic variations, visually displayed as intersecting horizontal and vertical lines of eustress-distress and hyperstress-hypostress respectively. So why did Selye place too many brush strokes on his otherwise beautiful canvas? The artist William Merritt Chase hinted at the answer: “It takes two to paint. One to paint, the other to stand by with an axe to kill him before he spoils it.”

In 1978, after doing a through meta-analysis of the scientific literature, I developed a universal concept of stress I called *The Law of Stress*. This law states that *stress is the difference between pressure and adaptability of any kind, or Stress = Pressure – Adaptability*. This law clearly implies that *stress = unadaptability*. If we can agree that stress is unadaptability and that unadaptability is never good, then we must logically conclude that there is no such thing as good stress. The Law of Stress concept empowers us to improve Selye’s definition by stating it in a more accurate manner: *Stress is the nonspecific, unadaptive response of the body to any pressure*.

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FOCUS on STRESS MANAGEMENT

FOR HOSPICE WORKERS: MANAGING YOUR STRESS

[Helen Fitzgerald, CDE](#)

Training Director, American Hospice Foundation

www.americanhospice.org

People who are drawn to hospice work are people who have an abundance of caring concern for those they serve. Limits may be hard to set when a request comes from a person who is dying or from the family: “Of course, we can make that middle of night trip out to their home to comfort and assist.” Or, “One more stop on my way home can’t make that much difference.” This is not meant to be critical because it is this generous giving of time, love and caring that makes hospice workers special.

The hospice worker has a unique challenge that is rare even in the health care industry where compassionate care giving is an essential component. That challenge is coping with loss on a regular basis. It is expected that every hospice patient will die and leave behind a grieving family. Administering hospice care requires staff and volunteers to become an intimate part of their patients’ lives, almost becoming part of the family. Sharing in the patient’s dying, making the time that is left meaningful, administering to the entire family and giving so much of oneself is an immense undertaking.

In the midst of this intimate and intense care giving, hospice workers often forget to take care of themselves. In order to continue doing this wonderful work, attending to one’s own needs is crucial. It is not enough to take vacations; it may be necessary to completely revamp a one’s lifestyle, and to incorporate manageable

stress-reducing techniques. This article suggests a variety of ways in which this can be done.

Saying Good-bye

Life is full of beginnings and endings. Hospice workers regularly say “hello” to new patients, knowing it will likely be followed by “good-bye” in the near future. It is easy to say “hello”, which portends a pleasant beginning, filled with hope for a special relationship. Saying “good-bye” is harder because it implies loss, which is inevitably followed by grief. In hospice work, it is essential to say “good-bye” properly; indeed, part of hospice work is to teach others how to say good-bye forever. However, it is also necessary to bring closure to one’s relationship, in order to welcome the next. Saying “good-bye” can be done in many ways.

Some people rely on the funeral or memorial service to find emotional and spiritual solace. It may help to recollect a meaningful story or read a poem that celebrates the life of the person who has died. Giving the grieving family a yellow flower may symbolize peace for the person who has died and hope for those left behind. Another way of saying good-bye is through an exchange of small, inexpensive gifts such as a photo, plant, book or some other small item. Gifts can be intangible as well. For example, sharing special moments with the dying patient can contribute to a peaceful time near the end. Reassuring patients that they will be fondly remembered is the best gift of all.

I had a delightful conversation with a dying woman who proceeded to tell me that, before she met me, she was wondering what I would look like. She had decided that I would be old and stuffy, and would sit on the edge of the bed responding to her in one-word sentences. She did not expect to like me. We had a good laugh over that image of hers, and we became fast friends during the little time we had together.

When my father was dying, I realized I hadn’t yet said “good-bye” to him and made arrangements to visit. We talked about our life together, about our horseback riding days and square dancing on our horses. I recounted the important lessons he had taught me, and I have passed on to my children, and my children are now teaching their children. When I left him, I had a lasting feeling of peace.

In my book, *The Grieving Child*, I am reminded of a 10-year old dying girl who I was counseling. One day, she said, “I need to talk to you in private.” She confided that she didn’t have a will, even though she believed that everyone should have a will, no matter his or her age. She had some wonderful toys she wanted to leave for certain family members and friends. We took care of this request by making a list assigning all her important belongings to people she carefully selected. Her second concern was more challenging. She told me that one thing she regretted was that she would never be a bride and wear a beautiful, white bridal dress. I told her I thought we probably could take care of this wish too, but first we would need to share the concern with her mother. The girl agreed, and her mother immediately took her shopping for a white dress. Many pictures were taken of her in this beautiful dress, leaning on a fence because she could no longer stand. As her mother wished, she was buried in that dress. Here I was able to say “good-bye” by helping her carry out a dream for the future. The girl’s gift to me was her trusting me enough to share such a secret; my gift to her was figuring out how we could carry it out.

Allowing Grief

In hospice work it is especially important to acknowledge and appreciate one's own grief. Since hospice workers often become like a part of the patient's family, the grief can be personal. Therefore, just as the family needs to mourn, so do hospice workers, lest their capacity to mourn is compromised over time.

Keeping a journal can also help because it allows free expression of feelings and confidential documentation about patients and their families. It is also an opportunity for creating a diary to share with others later on. Other forms of expression of grief could be through sculpture, painting, drawing and music.

Tending to Basic Health Needs

Rest, exercise and proper nourishment are three top priorities for all of us, not just for hospice workers. Getting enough rest is a challenge when the work requires lots of emotionally charged time with patients. Short naps during the day may help, and self-hypnosis techniques are effective when personal time is scarce.

Exercise programs have a way of disappearing when one gets busy. Yet vigorous activity is one of the best ways to reduce tension and to manage stress. It is important to find one or more activities that are enjoyable and easy to do. Walking is one of the best exercises, and it also can provide time to think, reflect, discharge anger and make plans.

Nourishment is essential to keeping up strength and motivation. Too often, meals are skipped or shortchanged. Three nourishing meals a day are a must. There are some creative ways to accomplish this. Yogurt works well in a busy day; for example, even during phone calls as no sounds of chewing can be heard. Some organizations hold brown bag staff meetings at lunchtime. This allows staff to get some work done and also share a meal. For dinner, there are many prepared foods available in the grocery stores to help make evening preparation quick and easy. Alternatively, each family member could take charge of planning and making dinner on one day each week, thus relieving the pressure on a single-family member who makes all the meals. This approach can teach every family member to work in the kitchen and to feel good about the accomplishments of preparing a meal.

Sustaining Family Support

Many hospice workers have family support, but there are still times when one's family feels cheated, and resentment can build up over time. In this situation, it is helpful to find ways to bring the family into hospice work so they feel important and proud. In my own family, my children learned to screen my calls, and they enjoyed it when I attended their school classes to talk about my work or when they accompanied me when I was presenting a lecture. Having my children listen to me in professional settings opened many doors for later private discussions when we stopped at the local donut shop for donuts and chocolate milk afterwards. Proactively inviting one's family to talk about their concerns and complaints also can help to air concerns before they become big problems.

Nurturing Friendships

It is important to have friends apart from work. All too often when work colleagues get together, they talk about work because that is their main connection. Friendships that exist apart from work provide opportunities to share experiences unrelated to work stressors. To nurture work friendships, it may be relaxing to take a class together on something totally unrelated to work or to join a health spa together. These alternative settings provide opportunities to share common interests aside from work.

Relaxing

There are many ways to relax, such as reading an easy-to-read or an escapist book. When reading for relaxation, it is important to avoid books on hospice work, death and dying. Meditation, walks, hobbies, sports and quality time with family and friends all provide wonderful opportunities for relaxation.

Attending In-House Meetings

Attending regular in-house meetings or debriefing sessions are a must. It offers an opportunity to talk about the day's problems with people who share common experiences. In very tough times, it helps to have at least one trustworthy co-worker with whom to share personal feelings.

Minding Personal Stress

When situations hit too close to home, the stress can be overwhelming. For example, a hospice worker may be asked to serve a family with a mother dying of cancer when her own mother is gravely ill. Recognizing that taking on this patient may add substantially to the normal stress level, alternatives should be considered. Perhaps someone else can take on this case. Failing to manage these stressful situations before they become overwhelming could cause burnout. When this happens, both the hospice and the worker lose. Hospice workers can help each other by volunteering to take cases that may be unduly stressful for their co-workers with family crises.

Doing Something Nice For Yourself

Too often, we are very generous in taking care of others and forget to add our own name to that list of people. Try to think of something special that would be truly enjoyable. Perhaps a massage would feel great. Consider a bath with candles and soft music. Some might relish a leisurely trip to the bookstore to sip coffee and skim through a book or benefit from total immersion in a favorite spectator sport.

Summary

Managing stress is an important commitment to oneself, no matter who you are and whatever you do. Developing basic good mental and physical health care should become a daily routine, thus setting a good example for family members, friends and colleagues. Practicing good stress management is easy and does not require a lot of effort or expense. Giving oneself permission to take care of oneself is the first rewarding step that will prove invaluable throughout life. There is no better time to start than now!

For hospice workers, there is the additional challenge of working with dying and grieving people on a daily basis. Keeping oneself calm and collected is essential in order to respond to this demanding job. It is also a gift one can give to patients and their families because they too need to learn how to manage their own stress in a time of crisis.

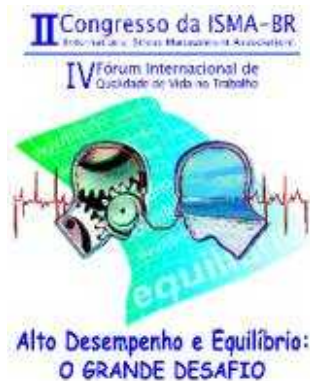
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ISMA INTERNATIONAL

ISMA-NL'S NEW WEBSITE

Jan van Dixhoorn, ISMA International's Vice-President and Director of ISMA-Netherlands, announced recently their new website. URL: <http://www.stress-management-nl.org/> offers information on the history and officers of ISMA International, the journal, *International Journal of Stress Management*, current activities such as workshops being offered in stress management in the Netherlands, and it provides links to various other sites.

ISMA-BRAZIL CONGRESS



Ana Maria Rossi, Director of ISMA-Brazil, announces the II Congress of ISMA-BR and the IV International Meeting on QWL. It will take place on July 24 and 25, 2002, in Porto Alegre, Brazil.

Among many experts, the main presenters are James Campbell Quick, Ph.D., "Stress Management for World Class Performance," Joan Budilovski, "Movements of Mantra" and a videoconference with Dr. Herbert Benson, "The Relaxation Response and Timeless Healing: The Power and Biology of Belief."

Additional information can be found at: www.ismabrasil.com.br or inquiries made to stress@ismabrasil.com.br

ISMA-7 INTERNATIONAL CONFERENCE PROCEEDINGS

Laurie van Someren, Chairman of ISMA's International Board of Directors, reports that ISMA-7 International Conference proceedings, featuring many of the presentations, is being published on CD-ROM and should be available soon. More information will be forthcoming.

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SPOTLIGHT on ISMA-USA MEMBERS

In this section, we want to focus on **YOU**, our members. We will introduce and welcome new members to our association, and we will report and congratulate members on their achievements and involvements. Please help us to connect with each other and to be informed about the great things you are doing by sending information to the editors either about yourself or another member.

NEW MEMBERS

A warm welcome to these new members who joined ISMA-USA in the last two years:

[Jennifer R. Bradley, Ph.D.](#), has recently moved to Beaverton, OR, from the UK. She specializes in occupational stress and social support.

[Maynard Rrusman, Ed.D.](#), resides in San Francisco, CA, and is a returning member after being away from ISMA for a couple of years. He is the president of Working Resources, a human resources consulting and training firm that develops leaders and organizations. Website: <http://www.workingresources.com/>

[Marlene K. Elbin, MAC.](#), resides in Oakland, CA. She is an acupuncturist and massage therapist.

[Roderic Gottula, M.D.](#), resides in Parker, CO. He is a family physician specializing in correctional health care. He offers education on suicide prevention, stress management and detox. In addition, he provides in-court expert witness services. He is a volunteer on a medical society task force that is developing educational material for health care providers to detect all aspects of violence when dealing with their patients. He is President-Elect for the Association of Correctional Health Care Professionals.

[Terry Isaacson, Ph.D.](#), is a psychologist in private practice in Winston, OR.

[Jennifer Krueger, M.Ed.](#), is a former teacher and is now pursuing a Ph.D. in health education. She lives in Austin, TX, and is interested in vocational stress management, specifically the relationship between employee retention and job satisfaction.

[Kate Partridge, Ph.D.](#), is a psychologist in private practice in London, Ontario, Canada.

Website: www.stressrelease.org/

[Gary L. Rowe, M. Div.](#), is a rector of a midsize Episcopal Church and Day School in Wilmington, DE. As the manager of the staff and leader of the congregation he is interested in stress management for everyone's well being.

[Loretta M. Siani, Ph.D.](#), specializes in clinical hypnotherapy with Accelerated Human Performance in Long Beach, CA.

[Geraldo C. Watson, M.D.](#), resides in Orlando, FL, and is a lecturer at Florida College of Natural Health. He is interested in the physical manifestations of stress and their management.

MEMBERS' MILESTONES

Congratulations and best wishes to these members:

[John G. Carlson, Ph.D.](#), Psychology Professor at the University of Hawaii, Past-Chairman of ISMA-USA, Editor of the *International Journal of Stress Management*, was chosen as Chairman of Biofeedback Certification Institute of America Board of Directors. This administrative board governs all aspects of the biofeedback certification.

[Paul Lehrer, Ph.D.](#), Psychiatry Professor at Roy Johnson Medical School, is the newly elected President for the Association for Applied Psychophysiology and Biofeedback. He began his term at AAPB's annual conference this past March.

[Betty J. McGuigan, M.Ed.](#), ISMA-USA Secretary-Treasurer 1999, 2000 and 2002 received an Honorable Service Award "for her dedication and unselfish devotion to perpetuating the efforts of Joseph McGuigan to establish the USA Branch of the International Stress Management Association and the *International Journal of Stress Management*." Past and present Chairpersons John G. Carlson, Richard H. Rahe, Paul J. Rosch and James C. Quick presented this award in December 2001.

[Marcie Parker, Ph.D., CFLE](#), Senior Qualitative Researcher with Optum, a health and well-being firm, in Golden Valley, MN, has been appointed to the Board of Directors of The American Hospice Foundation in Washington, D.C. In addition, Dr. Parker has been appointed to serve on the Editorial Review Board of a new publication, *Alzheimer's Caregivers Activity Quarterly*.

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ANNOUNCEMENTS

POSITIONS AVAILABLE

STRESS MANAGEMENT WORKSHOP LEADER

Wanted: Someone to conduct a stress management workshop at the Communications Workers of America Women's Conference in August 2002, in San Antonio, TX.

This is a Labor Union, a non-profit organization with limited resources.

Contact: Susan Stoll, E-mail: cwa6009@workingfamilies.com

RESEARCH & WRITING PARTNER

Wanted: Former academic psychologist seeks a research and writing partner to complete a project on defining stressors in higher education, as analyzed by gender, age, and college major. Person who would like to partner in this project would have a background in developmental psychology, small sample statistics, and stress management. As senior author is now involved in the corporate world, a partner would necessarily have access to administering measuring instrument to college students and reducing data in accordance with the factors mentioned. If interested, e-mail: Drpsyreal8@aol.com or phone 949-642-2611. The goal of this project is to have a joint-authored article publishable in the *International Journal of Stress Management*. Prior data was collected in 1995.

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CONFERENCE

SPIRITUALITY AND HEALTH CARE

Date: April 20, 2002

Location: Oak Forest Hospital, 15900 South Cicero Ave., Oak Forest, IL

Overview:

The Spirituality and Healthcare Conference at Oak Forest Hospital seeks to address the issue of Spirituality in the Healthcare setting through a variety of activities, including a panel discussion, problem solving sessions, workshops and a keynote address by Christina Puchalski, M.D., a nationally recognized expert on Spirituality and Healthcare.

Conference Objectives:

1. Identify three aspects of the role of spirituality (that which gives ultimate meaning to a person's life and assists in coping with suffering and stress) in providing quality patient care.
2. Describe three ways to support patients' spirituality in their search for sources of strength to help them adjust to disabilities/chronic illnesses.
3. Identify two key elements of religious/spiritual traditions different from your own and their potential to influence patient care.
4. Discuss two reasons for forming a working dialogue between healthcare providers from different religious/spiritual backgrounds around the central issue of providing improved patient care.

Keynote Speaker:

Christina Puchalski, M.D.

Dr. Puchalski is Assistant Professor of Medicine and Health Care Sciences at the George Washington University Medical Center, Washington, D.C. She is also Founder and Director of the George Washington Institute for Spirituality and Health (GWish). She has pioneered the development of numerous educational programs in spirituality and medicine. Her research interests and expertise include the role of spirituality in healthcare and end of life, the role of clergy in health and in end of life care, and evaluation of education programs in spirituality and medicine. Her work has been featured on *Good Morning America*, *ABC World News Tonight*, *NBC Nightly News*, *PBS Religion and Ethics*, *Newsweek* and in major newspapers across the country.

Panelists:

Buddhist Perspective: Paul Larson, Ph.D., J.D., is Associate Professor at the Chicago School of Professional Psychology. Dr. Larson has been an active Buddhist for over 20 years in both the Thai and Tibetan traditions and chaired a doctoral dissertation on Buddhist psychotherapists.

Catholic Perspective: Helen Mainelli, Ph.D., is Professor of Biblical Theology and Spirituality at Northern Baptist Seminary. Dr. Mainelli has been a reviewer of books in the area of Spirituality for the Catholic Press Association since 1987.

Hindu Perspective: Jagdish Dave, Ph.D., is a clinical psychologist and Emeritus Professor of Psychology at

Governors State University. He also serves as an officiating Hindu priest.

Islamic Perspective: Mahmoud Ismail, M.D., is Professor of Obstetrics/Gynecology and Maternal Fetal Medicine at the University of Chicago, where he is also the religious advisor for Muslim students.

Jewish Perspective: Elie Schwartz, Ph.D., is Professor of Clinical Psychology at the Illinois School of Professional Psychology where his special interests include the areas of Health and Rehabilitation.

Dr. Schwartz's involvement with Spirituality evolved from the recognition of its importance in his clinical practice.

Protestant Perspective: Emma Justes, Ph.D., Th.M., is an ordained American Baptist minister and currently serves as Professor of Pastoral Care and Pastoral Theology at Northern Baptist Seminary.

Workshop Leaders:

Alita Anderson, M.D. Dr. Anderson graduated from Yale University School of Medicine and is currently a PhD candidate at Emory University's Institute for the Liberal Arts. Dr. Anderson is an accomplished dramatist, artist, researcher and lecturer on the topic of African Americans' experience with illness and healing.

William Espinoza, M. Div. Reverend Espinoza is the senior pastor at the Spanish Evangelical Church in Chicago and a volunteer chaplain in the Pastoral Care Department at Oak Forest Hospital. He received his degree from McCormick Seminary in Chicago. His special emphasis is treating the whole person by addressing not only the medical, but also the spiritual, social, psychological and emotional needs of patients.

Conference Schedule:

Saturday, April 20, 2002

8:30 am: Welcome and Introduction: Cynthia T. Henderson, M.D., MPH

8:45 am: Keynote Lecture: When should religious beliefs affect medical decision-making?
Christina Puchalski, M.D.

9:15 am: Panel Discussion: Religious Perspectives on Healthcare.

10:30 am: Break

10:50 am: Small group discussions of spiritual issues in the healthcare context.

12:00 pm: Large group debriefing of small groups

12:30 pm: Boxed Lunch Provided

1:30 pm: Workshops

A. Alita Anderson, MD: Bearing Witness: A Phenomenological Examination of Healing through African American Testimony

B. Christina Puchalski, M.D.FICA: Spiritual Assessment

C. William Espinoza, M. Div: Understanding Whole Person Care and Latino Views of Spirituality and Healthcare

2:30 pm: Closing Remarks

Registration Information: (See below for registration form)

Please FAX or Mail information to complete registration.

FAX To: Education & Training Department FAX # - (708) 633-2528

OR Mail to: Oak Forest Hospital of Cook County, Education & Training Department,
15900 South Cicero Avenue, Oak Forest, IL 60452

Questions or more information - Email: Jim Kirkpatrick - kirkjam@hotmail.com

Oak Forest Hospital is accredited by the Illinois State Medical Society (ISMS) to provide continuing medical education for physicians. Oak Forest Hospital designates this educational activity for a maximum of 5 hours in category 1 credit towards the AMA Physician's Recognition Award. Each physician should claim only those hours of credit that he/she actually spent in the educational activity.

CEU applied for: Nursing, Social Service, Therapeutic Recreation, Dieticians, and Speech Pathology.

Governors State University is approved by the Continuing Education Board of the American Speech-Language-Hearing Association (ASHA) to provide continuing education activities in speech-language pathology and audiology. This program is offered for 0.5 CEUs, introductory level, related area. ASHA CE provider approval does not imply endorsement of course content, specific products, or clinical procedures.

Cost: \$25 for non Cook County Bureau of Health Services employees.

\$10 for students and residents. Free for employees of Cook County Bureau of Health Services.

Name: _____

Address: _____

Email: _____ Phone: (_____) _____ - _____

Indicate which workshop you plan to attend.

- A. Bearing Witness
- B. FICA Spiritual Assessment
- C. Whole Person & Latino Views

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