Learning Objectives

By the end of this lesson you will be able to:

1. Understand the importance of “Readiness for change”
2. “Sell Health” to your clients
3. Describe mind-body medicine
4. Practice and teach “the quickie” meditation
5. Describe the HPA axis
6. Understand the role and use of adaptogens
**Required Reading**

*Botanical Medicine for Women’s Health* (Romm)

- Stress, Adaptation, the Hypothalamic-Pituitary-Adrenal-Axis (HPA) and Women’s Health (pp 197-210)

**Watch Webinar**

- Supporting Adrenal Function with Adaptogenic Herbs

**Key Words**

Be sure to familiarize yourself with the definitions for all key terms. These can be found in the course resources or by using an online medical dictionary.

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<th>Key Term</th>
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**Key Botanicals**

Students should be familiar with the botanical name, common name, actions, common uses, forms of use, general dosage ranges, side effects, and contraindications of the herbs on this list. Ideally you will also be familiar with taste. This information can generally be found in the course and accompanying required reading materials.

- Asparagus racemosus
- Cordyceps sinensis
- Eleutherococcus senticosus
- Ganoderma lucidum
- Glycyrrhiza glabra
- Panax ginseng
- Panax quinquefolium
- R. carthimoides
- Rhodiola rosea
- Schizandra chinensis
- Withania somnifera
“In any moment, no matter how lost we feel, we can take refuge in presence and love. We need only pause, breathe, and open to the experience of aliveness within us. In that wakeful openness, we come home to the peace and freedom of our natural awareness.” ~ Tara Brach

The power of our beliefs over our health is profound. Only in the past couple of decades have science and medicine begun to appreciate the power of the mind-body connection in health and disease. The work of Herbert Benson, Jon Kabat Zinn, Esther Sternberg, and Ted Kaptchuk, to name a few, has nurtured the field of mind-body medicine, allowing it to make inroads in conventional medicine. Though much of our understanding of mind-body medicine is relatively new, many of the practices stem from ancient practices, for example, Buddhist meditation.

Mind-body interventions can significantly decrease our susceptibility to disease, and improve our adrenal stress response, thus reducing our likelihood of diabetes, hormonal dysregulation, heart disease, depression, anxiety, insomnia, and numerous other health problems that accompany stress.

In fact, we all have innate self-repair mechanisms. Our bodies know how to heal. Our cells know exactly what to do to eliminate toxins, produce energy, and regenerate tissue. Sometimes just reducing stress and believing in our body’s ability to heal is all that is needed to mobilize our innate wellness potential. Reducing stress also nurtures our desire and commitment to engage in positive habits that restore and support our health.

Skills to help our clients identify and transform their beliefs are integral to our effectiveness as clinicians and herbal educators. These can be learned and practiced by us for our own well-being and self-awareness, and taught to our clients in the context of a consultation. These skills, which range from stress reduction techniques to art to visualization, all incorporate focused attention on creating new ways of thinking, feeling, responding, and acting.

While there are numerous mind-body medicine techniques, they share three common characteristics:

1. Focused attention, i.e., on a word, thought, prayer, feeling, body part, or the breath
2. An attempt to override or transform thoughts and feelings that are intrusive, counterproductive to health goals, or destructive, and to replace these with positive, healthy new patterns
3. An attempt to achieve a state of inner peace, which is mirrored by the physiologic parameters of a relaxed state, i.e., relaxed heart and respiratory rates, normal blood pressure, etc.

This third component is a result of quieting the sympathetic nervous system - the system that is activated in stress (the HPA axis, or our “fight or flight” response), and breaking "the worry cycle" by cultivating and amplifying "the relaxation response."

While some of the techniques in this lesson may seem like “woo woo,” please rest assured that I am as hard core a skeptic as the next scientist, and I have a high aversion to “woo.” There is, in fact, firm scientific grounding demonstrating the benefits of activating the relaxation response and also in achieving what has been described as “flow” - a fully immersed state of energized focus, full involvement, and enjoyment in the process of an activity, which can be achieved with some of the creative activities in this lesson. Later in this lesson you will also learn how botanicals can be elegantly woven into achieving a reduced stress state by supporting the physiologic stress response system called the HPA axis. This too, is firmly grounded in reliable scientific evidence.
Breaking the Worry Cycle

“And the day came when the risk to remain tight in a bud was more painful than the risk it took to blossom.” ~ Anais Nin

A major goal of mind-body practices is to release us from the “worry cycle” – the endless “monkey mind” that chatters on about this worry and that problem. Breaking this cycle relieves our bodies of the sympathetic nervous system’s overdrive that leads to adrenal burnout, chronic fatigue, frequent colds, irritability, and a host of other common medical problems which can escalate to more serious diseases, including obesity, diabetes and heart disease.

The physiologic response that happens as a result of breaking this worry cycle is commonly referred to as “the relaxation response.” This concept, while ancient, was introduced into modern medical parlance by Harvard physician Herbert Benson who coined the term, and is now widely practiced by a variety of health care practitioners, yoga teachers, and health and even athletic coaches.

Extensive research in the field of mind-body medicine demonstrates that these practices can reduce heart rate, improve immunity, relieve stress-related illness, alleviate pain, and have numerous benefits for health outcomes and quality of life for children through to the elderly. Mind-body techniques build resilience that can reduce stress and its harmful effects, and positively influence gene expression and disease vulnerability.

Understanding Readiness for Change

Before we can facilitate change, we must understand our client’s readiness for change. Within our Healer’s Heart awareness is our ability to meet clients “where they are” in their readiness to change and thus to pace our plans accordingly. The good news is that if someone has come to you for education or health care help, she is already expressing the desire to make change and has made the first step - the appointment with you!

However, each woman’s readiness will vary and may not mesh with your enthusiasm or ideas about how fast she might make change. I had a potential client who, upon calling for an appointment, asked how I might go about addressing her Irritable Bowel Syndrome symptoms. When I began to talk about working with her diet, she said, “You mean I have to do work to get better?” I told her that his was definitely part of the package! She did not schedule an appointment.

Habits that come naturally to you may be entirely new or overwhelming to clients. For example, the idea of shopping at a natural foods grocery store, preparing foods differently or preparing different foods, or changing routines is often not easy due to time constraints, economic barriers, lack of knowledge, emotional attachment to old habits, or simply fear of something new and different. Just recently, a patient of mine who had a traumatic childhood that included an alcoholic father and 22 moves to different homes by the time she was 18 said, “I want to make changes, but because of all the changes in my childhood, I don’t do well with them; I never even rearrange the furniture in my house.”

Often we need to temper our enthusiasm – and expectations – and wait for our clients to achieve readiness incrementally. Even just learning to cook kale and whole grains, and to make chamomile tea might seem
daunting to some clients. And though you might have been eating them for years, not everyone knows what miso (a traditional fermented soy paste) or tahini (a thin sesame seed butter) are, let alone how to cook millet or or make an herbal decoction!

Honoring individual readiness to change in our clients requires a high level of personal maturity and attention to others – it requires patience, compassion, listening, reflecting back, and non-judgment.

When you do meet resistance to change, the Making Shift Happen Worksheet can be very helpful for helping clients move past it. They can do it on their own, and you can review it with them, providing strategies for identifying and transforming their barriers to change.

Setting Clients Up for Success: Realistic Goals

Understanding where clients are in their readiness to change can help us to facilitate their success by helping them to set realistic goals. Establishing realistic goals is one of the keys to success in changing a habit or following a plan. Sending a woman home with a list of major dietary changes and 10 new supplements and botanicals to take daily is likely not realistic for most. Really checking in on what is reasonable for any given woman is important if she is to succeed. Having this conversation in a respectful way also keeps the dialogue open to identifying obstacles should you discover, at follow-up appointments, that she has not been able to follow the plan. It lets her know you are on her team, that you want her to speak with you honestly about what is – and isn’t – working for her and why, so that you can help her to make appropriate adjustments.

When someone starts a new health program, they often contend with their own issues of success and failure. So often women, when changing their diets, describe relapses into unhealthier eating patterns in words such as “cheating,” “I was bad,” or “I was weak.” I always remind them that this is not about success or failure, not about good or bad, and there is no shame, punishment, or judgment – it is simply about making choices and that this is something within their power to do. When it comes to food addictions, such as sugar and carbs, or to substances such as coffee, alcohol, etc, I also let them know that they are not struggling because of weakness, but because something has caused their brain rewiring to change – and this is really hard to change but can absolutely be done. And I give them ideas on how to move forward.

The first step in change is always self-awareness: 1) recognizing the pattern, and then 2) the “why” behind it. For example, if a client is struggling with her weight and finds herself eating when she’s not hungry, particularly “feel good” foods like sweets, fatty foods, or salty foods (or in the case of certain ice cream flavors that are available, all of these in one!), have her try to understand what’s driving the reach for it. Is it fatigue and her body is craving energy? Is it sadness and she’s craving the boost she gets from the chocolate and the sugar? Is it loneliness and she’s filling a different kind of emptiness?

In the process of facilitating change we want to help our clients to identify and promote new, positive outcome expectations, encourage them to take small steps, plan for support and encouragement if they are struggling (i.e. a follow-up phone call or brief appointment), and have strategies for coping with relapses into old behaviors or an inability to follow the plan by understanding obstacles and triggers for relapse (often stress, anxiety, or depression), and re-strategize ways to overcome these.
Changing Habits: How Does it Happen?

Changing habits is rarely simple or easy. Habits evolve over time and are rooted in beliefs, needs, behaviors, are triggered by cues in our environment, and reinforced by some form of reward – depending on whether it is a healthy or harmful habit, typically a feeling of stress relief, satisfaction, a desired outcome, or praise. If a healthy habit, such as exercise or eating well, the stress relief may be due to a cascade of beneficial hormones and chemicals that are released into the blood, the desired outcome might be fitting into your old favorite pair of jeans, and the praise may be your own self-admiration or your BFF telling you those jeans look great on you. If an unhealthy habit, the rewards are likely short lived – the immediate release of chemicals that make you feel calm after eating that pint of ice cream, only to be followed by feelings of shame, disappointment, and a sugar crash!

Actually, most unhealthy (and even many healthy habits) have nothing to do with will-power – they have to do with addictions that arise from patterns that trigger the release of chemicals like dopamine and epinephrine from our brain’s reward center. You will learn a great deal more about this in the accompanying webinar on Stress, the HPA Axis, and Adaptogens.

The important parts here are:

1. To remind women that their habits are not their fault
2. That their habits are within their ability to change
3. And that there are 3 steps to changing habits

The 3 steps are:

1. Identify and become mindful of the habit
2. Change the cues that trigger the habit
3. Build in new rewards

Let’s talk about food addictions, for example, to sugar and fats. This is a super common one. Who hasn’t craved a giant chocolate bar or downed some ice cream at some point in their lives out of fatigue, anxiety, or depression. As you will learn in the accompanying webinar, there are physiologic reasons we crave these foods when stressed (and there is a highly developed junk food market that knows exactly how to cater to these cravings and even perpetuate them!). But how about using the 3 steps to intercept the craving at the pass?

First, we have to identify the habit and get real with our clients about it. Use the worksheet accompanying this lesson to do exactly this. What is the habit? What triggers it? And how can this be shifted. Second, we have to change the cues. As my colleague Dr. Mark Hyman says, if you don’t have the trigger (i.e., the pint of ice cream or candy bar or chips) in your fridge or pantry, you can’t do the habit (i.e., eat the food). If your client always has a pastry with her afternoon coffee, try green juice instead – who wants a pastry with green juice (ewl)? You get the drift – you just have to get creative with your clients.
Finally, change the reward. This can be as simple as checking in with the powerful healthy feeling you get after making a positive choice and reveling in this, or as complex as setting simple goals and literally rewarding yourself for them. Finding the right reward for your client may take some experimenting – but it can be fun to explore!

Many people say it takes 30 days to form a new habit. If your client “falls off the wagon” that doesn’t mean she’s “failed.” There’s no failure in this model. It’s just about continually readjusting until the recipe for success is found.

Selling Health and Happiness to Your Client: The Power of Placebo and How to Use It!

I’m huge on selling hope and health to my clients. I boldly tell them, “I believe in you!” “You CAN do this!” “YES, this works!” You can lose that weight (or gain it, as the case may be), you can push this baby out, changing your diet will absolutely help you to get rid of those abdominal symptoms… and so on.

I am always entirely truthful, realistic, and never say it if I don’t believe it. And that’s the important point: What YOU believe as a practitioner is what you are going to “sell” your client on! So you’ve got to believe in what you’re telling them (i.e., that herbs work) and you’ve got to help your clients believe in themselves. Clients are stealth at sniffing out your doubts. If they have struggled with ill health, hormone imbalance, depression, periods from hell – whatever it is – for years, and have seen everyone on the beat and are themselves losing hope, they are going to sabotage their wellness potential by finding that seed of doubt in you that resonates with their own.

You just might need to rekindle a pilot light of hope for your client that went out long ago. Giving hope through your own belief in what you are offering or teaching sparks up the innate healing capacity that accompanies belief. And this is a powerful catalyst for change. It is likely what leads to the placebo effect – the phenomenon that occurs when a patient’s symptoms improve from simply believing they are getting an effective medication or treatment, even if it is actually a sham procedure or inert substance. The neurobiology of belief remains undefined, but it is nonetheless real.

The opposite of the placebo effect is called nocebo. While the placebo effect immerses a client in the positive outcome possibility, the nocebo effect, much like the effects of voodoo in which someone is hexed into believing they will die – and then does – is the negative effect. It’s the flip side of the placebo operational belief system. So whereas I might make eye contact with a women and tell her she can push that baby out, and she gets it and does, someone else could just as easily look her in the eye, say you cannot do this, your baby is too big, and you need a cesarean – and pow! Labor stops and this becomes a self-fulfilling prophecy even though she goes on to have a 6 lb 8 oz baby (3084 g for everyone outside the US)! Of course, we have to be honest – if she’s been pushing for 6 hours and the baby feels huge we wouldn’t lie! But whenever it is within our power to inspire hope, this can become a catalyst for health.
Change the Story – Helping Women Reinvent Themselves

We all have personal stories. Often these stories – some that we tell ourselves, some that others have told us and we have internalized – are not conducive to our well-being and may even keep us stuck in unhealthy patterns, habits, and relationships. Here are some of the many titles of women’s stories:

- I’m Not Lovable
- I’m Not Smart
- I’m Not ______________ [Fill in the Blank] Enough (tall, pretty, skinny, oh there’s lovable again)
- I Don’t Know Enough
- I’m Unwell
- This Problem/Condition/Situation is Permanent
- I Can’t Give Birth Normally Because None of the Women in My Family Did
- I Don’t Deserve to Be Happy
- He Doesn’t Love Me Because I’m Not ....
- I Have to Take Care of Everyone Else First
- I am Stuck in this (job, marriage, town, etc).
- I Can’t Take Time to Relax
- My Mom Had {diabetes, heart disease, you name it} So I Do, Too
- I Have to Do This (or That) to Prove Myself
- Life is Hard; Life is a Struggle

The list goes on. So many copies of each story have been sold that they should all be on the New York Times Bestseller List for years running! Harry Potter doesn’t have a chance against the I’m Not “XYZ” Enough title for most popular novel!

So how do we change the stories? Take out the tapes? Quiet the monkey mind chatter of negative self-talk that leads to stress and reinforces habits that interfere with radiant health for our clients? (And for ourselves as the starting point?)

We can:

- Encourage self-reflection and self-exploration
- Look at how current behaviors reinforce the story-line
- Decide the old story is boring – you’ve read it so many times you know it by heart
Rewriting your own history is a powerful act. One way to go about it is to do a review of your life, chronologically, dividing it into epochs: Childhood, The Teen Years, College, Those Early Relationships, etc., up to the present. Focus on the life lessons, skills, and triumphs you had in each period. Trace where you came from, where you’ve been, what you’ve learned (and are learning) and who you’ve become, acknowledging mistakes you’ve made, and looking at your strengths. Write it in any style you want. Make yourself the heroine of your tale! Music, mediation, nice scents, and a cup of relaxing tea can set the mood.

This exercise is a real gift to clients who are down on themselves, have had hard struggles in their lives and see the deficits and damage, not the strength. Encourage ‘phoenix rising out of the ashes’ kinds of thoughts while they write… And as author Danielle Laporte writes, “Let go of the ‘what sucks’ story in your life. There’s lots to bitch about – and you should bitch – bitching can be incredibly life-affirming, clarifying and galvanizing.” But then, and I will paraphrase her, it’s important to know when to stop complaining and start acting.

What if we all grew up hearing this story? What if we all believed this?

Transforming Limiting Beliefs, Creating Intention

Part of rewriting our story is transforming our limiting beliefs into productive beliefs. I have found that a powerful first step in this is to help clients identify how they actually want to feel. It is about helping them to define themselves on their own terms. Do they want to feel healthy? Energetic? Joyous? Loved? Abundant? Well rested? Successful? We need to help our clients reinforce for themselves that they are worthy of health, happiness, love, rest, respect, healthy work hours, a night out with the girls, saying no to over-commitments and invitations or jobs that just don’t feel right – you name it. Once your client knows what she wants, she can move onto the creating intention exercises below.
Life Inventory/Health Mapping

About once a year I take inventory. Not of which tinctures I’m short on in the apothecary. Not of what supplies I need in the office. It’s a life inventory. I take stock – a time to check in and literally map out how things are going in each of the important areas that make up a healthy life. I use the Eight Ingredients for Total Health diagram from Lesson 2 as a Life Inventory Map for my framework. I draw it out on large paper and then refine it on a smaller scale in my journal so I can easily refer back to it over the year. I create space to do this activity, light a candle, make a cup of tea (a glass of wine could be nice instead and might suit some women as it is relaxing and luxurious), play some quiet inspirational music, and have colored pencils aplenty on hand. A simplified version for clients might look like this:
In each section, which is substantially larger than those in the image below, I jot down what is going well, what is missing that I want to add, and get very specific on what I’d like to create. A segment might look something like this:

Similarly, women just don’t realize where things are out of balance or undernourished in their lives; sometimes they do know but can’t really face it until they see it in front of them loud and clear. If you – or your client – feel that health issues are being exacerbated by life issues, then using this tool can help as part of the total intake and is an important exercise for clients to sit with and use to find some life clarity. If there are big sore spots, i.e., career or relationship, that are not so easy to change, then working with a woman to develop positive skills for making lemonade out of lemons will be important for her overall well-being, rather than just living with insidious stress and unhappiness – which does influence health and disease.

**Body Wisdom, Body Speak – The Next Step**

As discussed earlier in the course, Body Speak is a powerful language! Teaching women to hear and use Body Speak is a powerful clinical tool.

Body Speak awareness can enhance your client’s health in many ways. Being more aware of her body can:

- help her to identify how she feels when she eats, or excludes various foods, or has environmental exposure
- help her to identify emotions associated with unhealthy and healthy habits and adapt her behaviors
- help her to identify how she feels in various relationships and social or professional settings
- help her to identify where she holds stress – both acutely and related to past experience and trauma

**Fun: need more time in Nature:**

- **Work in garden every Saturday morning; one hour hike after work twice/week. Get bench to sit on so I can work outside…**
I sometimes teach my patients this very simple activity:

I have her sit upright in a chair or lay on the ground and close her eyes, breathing naturally at first, then gradually more slowly and deeply. Then I ask her to simply feel either her feet on the ground, or the parts of the body touching the ground. Just to feel that contact, that grounding with the earth. Then deepen the breath. Now let the breath wander throughout the body to any areas that feel tight, blocked, or stuck. Use the breath to imagine massaging out that tension or releasing the blockage. Linger on how she can use the breath and attention to identify areas in the body that feel tense or blocked. Encourage her to hold this awareness so that when she returns to regular awareness, she can draw on that skill to use anytime without even having to go into a meditative state.

**Body Mapping**

Women can hold a great deal of tension in various parts or regions of the body, often the lower back, belly and pelvis, but also in the shoulders, buttocks and neck. This may cause pain, affect sleep, or even affect sex or ease of bowel movements. Further, women may experience parts of their identity through negative body image – for example, a woman might say that she identifies her mother’s anger in her belly pain, she may hold past negative sexual experiences in her pelvis, inadequacy or shame in her breasts, etc.

Body mapping is an activity that takes the above awareness exercise a step further. It is done with the client sitting upright. She does the guided meditation above, or can just deeply relax and get body-centered. When she opens her eyes, she tries to maintain some of the meditative state and on large paper, using colored pens, draws a rough outline of her body, head to toes. Then on the various body parts she writes out the related thoughts or emotions – positive or negative – that arise in this meditative state. She can write out how she thinks of, relates to, or the positive or negative words she identifies with her various body parts.

Assure her that this is not an “art exercise” – many women are intimidated about drawing. Playing some music and creating a relaxed mood might help her settle into the activity and she might find it super fun! This is also a great exercise to use in women’s groups, and opens a deeper connection for women, allowing them to release shame and embarrassment as they realize their body image and identity issues are not unique to them – that many women hold powerful and also negative body images.

**Journaling**

*The sorrow that hath no vent in tears, may make other organs weep. ~ unknown*

Journaling is a powerful vehicle for expressing experiences, thoughts, and feelings that we might otherwise hold inside, and as alluded to in the above quote, unexpressed grief may become a source of disease. There are numerous ways to journal. Here are just a few:

- Daily chronicle of experiences as well as related feelings
• An art or collage journal

• Gratitude journal

• A place for venting (my least favorite unless you find some golden nugget because otherwise you may just end up feeling negative)

• Letters to yourself – i.e., instead of ‘Dear Diary’ my journal would say ‘Dear Aviva’; yours would say ‘Dear (you)’.

The last is my favorite form of journaling, maybe because I also like talking to myself. Seriously. I talk to myself in the mirror and in my car, too. I’ve adopted this type of journaling in the past few years and find it incredibly supportive because I write to myself as if I were giving my best girlfriend advice. I also glue images and sayings into my journals, write out inspirational quotes, make notes of things I want to remember or do, and I sketch in them, too. I don’t journal often these days – more catch as catch can, but I do love the process. I set up a peaceful, nurturing environment when I journal at home, but I also love to journal in cafés and weirdly, I get the most journaling done on airplanes on the way to and from teaching at conferences.

A quick visit to Amazon.com or Barnes and Noble.com will bring up no shortage of quality books on how to journal, and books in which to journal.

There is no right or wrong way to journal – it’s really about whatever is effective and meaningful for any individual woman, and how much she wants to put into it and what medium she prefers. Some women will enjoy lined journals, others blank, some large books, some small. There is no shortage of types of journals, from ones with prompts and ideas, to others with quotes, and my favorite kind, blank paper.

Here are instructions for therapeutic journaling about a tough experience or feelings, from the University of Wisconsin Center for Integrative Medicine:

Using pen, pencil, or computer, write about an upsetting or troubling experience in your life, something that has affected you deeply and that you have not discussed at length with others.

• First describe the event in detail. Write about the situation, surroundings, and sensations that you remember.

• Then describe your deepest feelings regarding the event. Let go and allow the emotions to run freely in your writing. Describe how you felt about the event then and now.

• Write continuously. Do not worry about grammar, spelling, or sentence structure. If you come to a block, simply repeat what you have already written.

• Before finishing, write about what you may have learned or how you may have grown from the event.

• Write for 20 minutes daily for at least 4 days. You can write about different events or reflect on the same one each day.

• Consider keeping a regular journal if the process proves helpful.
Art and the Vision Board

For clients who loved kindergarten and want a little collage-making reminiscence, or for clients who enjoy creative expression, this is a great activity. I use it myself when I want to manifest something new – including change in my life – or when I want to emphasize, reinforce, or remind myself of something I am reaching for. It’s super simple. All you need is old magazines and catalogs, scissors, paper, and glue. Sometimes instead of paper it can be fun to do the vision board in a shoebox, 3-D diorama-style, or in a scrapbook.

To create a vision board, set the mood with music and an environment that is conducive to focus and to spreading out papers, clippings, and any other desired craft materials. Create an intention, for example, something you hope to achieve or manifest, and then flip through magazines and catalogues, cutting out images and words that resonate. Allow for the unexpected to happen in the process – for example, you think the intention is one thing, but really you keep finding yourself drawn to something completely different. Our subconscious can speak to us in powerful ways if we stay open to possibility. I recommend spending about an hour just gathering images and words. This is the part where flow and creativity can really arise. Once a stockpile of images has been created, the next step is to arrange them on paper or whatever medium has been selected. Next simply trim as needed and glue them into place until the field is covered as desired. The finished product, when dry, can then be put somewhere that it serves as a visual focus and reminder for the artist of the desired intention.

We needed to make a complicated move to a very expensive area, out of our perceived price range for a home, and to rent since buying a home at that moment wasn’t an option. But the area is almost a zero rental market except in the summer when houses are $10-$20K per month! Yes, you read that right. I told you, a pricey area. I had already accepted a job without realizing the complexities of the market I was moving into. I created a verbal vision board – just words – of what I needed to manifest – and then I sent it to a realtor. See how specific I am? Being specific can help you narrow down your goals and vision. Here’s what I wrote:

- I’d like to be within 25 minutes of the clinic
- 4 bedrooms 2 baths. 3 BR might be ok if it is spacious and with an extra room (i.e. office)...enough space for all the kids to be home for holidays, is the point
- Open, light, airy, windows, sun
- Can be an old home - in fact, love love love old farmhouses... but renovated and fresh. Fresh is a good word.
- Space. This is important. We want to stretch out after two years of apartment living and medical residency.
- Land is nice, but town is ok if there’s a feeling of space. And great views and privacy and a place for a reasonable garden.
- Wood floors
- Interiors without wallpaper!
- Great kitchen. We cook.
- No subdivision or prefab anything. No furnished rentals. Gotta make a space feel my own.
If it’s a rent to own that’s an interesting prospect. Then some land becomes more important.

Good heat so we’re not bleeding out $ in the winter months.

(Price points were given)

Literally the next day I got an email with the subject line “This is your dream house.” It met every criteria except it’s 30 minutes from work – but over gorgeous country roads. It was even a rent to own option! Seriously!

I’ve used this technique multiple times and it’s amazing what can happen when we send our intentions out there. It’s not 100%, but helping our clients set a course in the direction of their health, and whatever they envision that supports it, through intention, can be an important proactive tool for shift-making.

Ritual, Ceremony, Celebration

Weddings, birthday parties, communions, bat mitzvahs, graduations – these are all common celebrations that have predictable rituals and ceremony – making sure there is an extra candle on a birthday cake to send a wish into the universe for another healthy year for the birthday girl, exchanges of rings and vows, witnessed by friends and loved ones who will all share in the common intention of a long and happy marriage, events which mark accomplishments, milestones, completion of challenges, triumphs. These events, made meaningful by their familiarity, shared beliefs in their importance and power, by the connection and shared intention or well-wishing created in a community, also create memories and meaning carried into the future, that can be called upon mentally and emotionally as a reminder of strength.

Creating ritual and ceremony around women’s important life cycles, milestones, and passages can be an important part of creating and reinforcing intention, and can link physical and mental expression through art, music, dance, sharing tea, or any number of forms.

Rituals empower people emotionally, mentally, and spiritually. Healing rituals can activate innate inner belief, similar to that activated in utilizing placebo. Symbolism can be a powerful part of ritual.

The Blessingway is a powerful ritual that I have used in my midwifery practice to honor and support the mother before labor. The term Blessingway derives from the Diné (Navaho) culture and language, but such rituals are germane to peoples all over the world. The Blessingway, taught to me by my mentor Jeannine Parvati Baker, has become popular among midwives across North America as we have sought to reclaim and create meaningful rituals and beautiful celebrations for our clients. The ceremony can be modified for most any healing situation, and can be entirely non-denominational.

My focus in ritual is:

1. Helping a woman to find strength in her own healing abilities or inner power
2. Centering a woman in the support and strength of her community
3. Connecting to nature
A ritual typically has a beginning, middle, and end, with intentional words and symbolic gestures throughout that reinforce a healthy belief for the one(s) being celebrated. The beginning typically includes an invocation to whatever spiritual guides you might typically call on, for example, particular saints, goddesses, or nature spirits as your beliefs encourage, or this can be non-denominational and just be a time to clearly and specifically speak an intention, for example, “We are here to help so and so heal her so and so, and we ask that all gathered focus their deepest intention and belief on this.” During this time candles may be lit, incense burned, a prayer offered, or any combination of these or other practices. The middle, or body of the ritual, typically involves each participant individually or collectively engaging in activities that reinforce the intention of the ritual. For example, if you are gathered to support a woman in her pregnancy and share collective strength and empowerment toward the birth, each participant might offer an inspirational song, story, or poem with the pregnant woman, might participate in massaging her feet during this part of the ceremony, brushing her hair, or in some way imparting positive beliefs. The closing of the ritual usually involves sharing a personal gift to represent the intentions being created, and often serves to “bind” the intention of the group in some way. Tying a string around each participant’s wrist and leaving this on until it falls off is a common practice. There are many excellent books on creating ritual and ceremony, many of which are non-denominational and can be used or adapted comfortably for almost any cultural group.

The Healing Altar

While creating an elaborate ritual is not always possible, it is always easy to create a small healing altar or place for meditation and focus in your home or garden. Think of it as a sacred place where you can sit quietly for five minutes each day to reflect on gratitude, your intentions, and cultivation of an inner life. I have shared the practice of creating altars with numerous women over the years and all have found it a comforting and helpful practice. An example is for a woman who has struggled with fertility to create an alter that contains images, objects, or mementos that remind her of fertility, her strength as a woman, her bond with her partner, or whatever will help her to reframe her attitudes and beliefs around her fertility struggle toward one that is more inspired and productive. While not necessarily for everyone, many women find this practice centering and relaxing, reminding them to focus on what is productive rather than worries and fears, and as a part of an overall healing protocol, it can bring the power of intention and feminine spirituality into the picture.

Radical Self-Care

How many of your grandmas actually never sat down at the table to eat a meal until it was almost over, serving everyone else first, only to get up and start doing the dishes before the meal was over? Somehow us girls grow up with the idea that we have to take care of everybody else, and only if there’s something left after that, do we get some. This is an outdated idea. Yes, of course, we aim to love our families abundantly, having our partner and children feel that they come first, but in truth, a lot of women spend a lot of time feeling unfulfilled and resentful – and this does not help anyone in the short or long run. Radical self-care is not about prioritizing you; it is about prioritizing your wellness so you can live the best life possible and that serves everyone in your world, improves your work quality and productivity, and leads you to make the best possible choices and contributions in the world.
Many of our clients do not take care of themselves because they are giving to others all day and night. I’ve worked with clients who were nursing 3-year olds until they felt their eyeballs were being sucked out of their heads, and they were dreading their kid, and were exhausted – but didn’t feel they could stop nursing out of guilt or fear. Ok, not good for anyone. I know a lot of us who have breastfed have been there. I’ve worked with clients who have said ‘yes’ to everything, becoming so overcommitted that they were forgetting to go to the restroom and became constipated as a result, and were living on coffee out of exhaustion and because it was what helped them have a bowel movement! Not good for anyone. And I’ve known women who have put off their dreams, their basic self-care, and pleasure in life to take care of others. While there is also beauty in this, if women are having symptoms that they are somaticizing because of stress, then it is no longer healthy.

Radical self-care is the courageous act of making your quality of life of primary importance. It is the recognition that your life and health are of central importance to you and to those around you.

Many of our clients will need our permission to practice radical self-care. I once was asked by a pregnant client who was exhausted from tending the older kids, but couldn’t get adequate support from her partner, to write her a prescription for two hours of bed rest every afternoon. And I did! Radical self-care honors your need for sleep, exercise, time alone, time with friends, for a massage, spa day, a glass of wine on the porch or in a candlelit bath with no noise but our own breathing or quiet music. It honors the contribution of YOU to this world, and this means taking care of YOU to keep that contribution alive and well.

When our basic needs are not met, we are not honoring ourselves, and we tend to find ways to fill those spaces with behaviors that are less healthy for us (think back to that sweet, salty, fatty ice cream from before). We also run the risk of becoming more emotionally brittle with ourselves and those around us. In closing this important lesson, I ask you to reflect on your own ability to care for yourself, and how you will plan to do so. The authenticity of what we share with our clients will shine through when we walk our talk; this adds to the healing potential of the guidance and protocols we share with them. In identifying our own obstacles to personal transformation, we can better understand those that bear on our clients’ lives. And in pushing through to transformation, we have more ownership of those skills that we used, and thus more power in our ability to impart belief to those who seek our help.

Reinventing Self

The ability to make change rests on the belief that we can reinvent ourselves. Biologically, we are in a constant state of change and cellular turnover. Our bodies are quite literally constantly in the process of reinvention. Too often, however, psychologically and emotionally, we become entrenched by the belief that we are stuck in our current mode – that we cannot possibly change our eating habits, health conditions, weight, emotional patterns, exercise habits, etc., let alone overhaul our lives, relationships, professions, where we live, economic status, or the other “big” things.

I would like us as women to help our clients challenge the belief that we cannot re-invent ourselves, and in fact, to see reinvention as the keynote to all of the other health changes they will make.

As women, our lives are about cycles – childhood, puberty and adolescence, reproductive (or professionally productive if no kids are in the picture) years, and wisdom years. Within these cycles are smaller cycles –
hormonal cycles, for example, which influence our moods and energy. As women who cycle we are the mistresses of shedding the old and recreating afresh.

Many years ago I could no longer shake off the desire to become a physician. This inspiration had been with me since grade school and I’d even gone to college at age 15 to manifest this dream. However, my life took some interesting twists and turns, and I first became a midwife, herbalist, and mother of four beautiful children whom I had no intention of leaving for 120 hours a week to study medicine. As time passed the drive to return to school became stronger. I began to feel restlessness and sometimes even irritable. I wondered how I could possibly reinvent my life so that I could remain a devoted mom and become a physician. And with the passing of time I got older and wondered if I could even get into medical school. Then I started to wonder whether I was simply crazy for having this big dream and why would I give up my comfortable life at nearly 40 to pursue something that would take 7-10 years of my life to accomplish! I wanted this inspiration and dream to go away. I wanted to run away from it! But it nagged me relentlessly.

Around this time I met the father of a close herbalist friend. When he was in his early 60s he considered going to school to become an herbalist himself, but convinced himself otherwise because he thought he was too old to start something new. Now in his early 80s, he told me in reflection, he realized that had he done it, he’d already have had 20 years of doing something he’d dreamed of for years. He urged me to go to school – that we are never too old to start something new. It was one of the best pieces of advice I ever received, and though the road wasn’t always easy, I am grateful for the decision I made.

Making big decisions and changes is not easy. It puts us out of our comfort zone, and most of us prefer comfort. I certainly do. But the reality is, too often our clients have gotten comfortable with habits, lifestyles, and symptoms that actually aren’t comfortable at all. We confuse familiar with comfortable. In fact, what is perceived to be comfortable may actually be causing significant personal suffering – a paycheck is really a job with an abusive boss, a steady relationship is with a boyfriend who is verbally (or physically) abusive, a healthy weight is actually 15 pounds underweight – but we keep at the same old story because we are afraid to change – we won’t get another job, we won’t have another love, we won’t be in control or attractive if we gain weight…

But as I tell my patients over and over, the pain in your foot won’t go away if you don’t take the stone out of your shoe! We can only ignore it for so long before the pain gets worse, we start to limp, or even develop an infection from the rub! In other words, the body will eventually manifest symptoms when there is an impediment to living our optimal life.

A huge life question on which clients can reflect is HOW DO YOU WANT TO FEEL? This becomes a North Star to use as a point of reference, navigation, and path adjustment. When we feel off course we just reconnect with how we want to feel and recalibrate. This can be done anywhere, anytime. It can be done in the middle of an argument with a partner – hey, I don’t want to feel this awful, agitated, angry feeling – I am going to adjust course, because I want to feel happy, at peace, in love, kind. Hey, I don’t like the fact that I am saying yes right this second when my brain is screaming out no because I want to feel authentic, so I am really sorry, but actually, I won’t be able to [walk your dog this weekend, work overtime, come to that party when I scheduled time alone to read or just chill]… And so on…

This is where as educators and practitioners we also sometimes become sideline coaches or the cockpit crew cheering, advising, helping women to figure out their best course around the track. We can do a tremendous
amount to help our clients facilitate change in their lives. As a word of caution, I just want to share that while change always involves some risk, the outcome is usually liberating if well orchestrated. However, for women in physically abusive relationships, the stakes are a different – in fact, when leaving an abusive relationship, the woman is at the highest physical risk. If you are working with a woman in a physically abusive relationship, unless you are trained and experienced in counseling in this situation, please refer her for appropriate counseling so that she can emerge safely. This is a critical point.

### Stress, The HPA Axis, and Adaptogens

Ready for some science? Stress physiology has a strong scientific basis – and it all starts in the highly conserved stress response system – the hypothalamic-pituitary-adrenal axis – the parts of our body that connect our ancient stress response system – our “lizard brain” or primitive fear response drives to our stress hormones. Learning about the HPA axis will start to connect the dots for you between soul (what we learned above) and science, which follows below.

The HPA axis is elegantly orchestrated to modulate most of the biological functions needed to help us avoid, and should we be unable to avoid, survive a life-threatening emergency: blood sugar, energy storage and utilization, immune system response, and blood pressure.

The accompanying required reading and webinar, which weave stress and disease into an understandable model, will give you greater insight into the importance of preventing and managing stress for health promotion and healing, and will solidify for you the value of incorporating some of the practices previously described in this lesson (or some of your own favorites) into your work. It is also the gateway to understanding one of our more important classes of botanical medicines, the adaptogens.

The adaptogens are an important therapeutic category of herbs that can reduce not only stress-related symptoms, but prevent or mitigate the long-term effects of stress on the body. They are used to promote a sense of well-being, improve energy and stamina, reduce fatigue, improve immunity, and enhance mental concentration, and promote hormonal balance due to their regulating effects on HPA axis. In Traditional Chinese Medicine and Ayurveda, these herbs are considered the Kings and Queens of the herbal tonic world.

At this time please:

- Read the section on Stress, Adaptation, the Hypothalamic-Pituitary-Adrenal-Axis (HPA) and Women’s Health in *Botanical Medicine for Women’s Health* (pp. 197-210)
- Watch the webinar Supporting Adrenal Function with Adaptogenic Herbs
Select the best answer for the following multiple choice questions.

1. The tendency to want fat, sugar, and salt when we are stressed and tired is ______________.
   a. a sign of weak will power
   b. mostly an addiction created by the food industry
   c. a physiologic response driven by the HPA axis

2. Women in physically abusive relationships are at greatest physical risk when ______________.
   a. they are physically trying to leave the relationship
   b. completely compliant with their partner
   c. thinking about leaving the relationship

3. A small amount of stress can ______________ and ___________ health and general performance.
   a. impair and worsen
   b. stimulate and improve
   c. stimulate and worsen

4. A 48-year old woman comes to you reporting feeling “burnt out” and anxious. She is a busy lawyer and mother of 4 young children, who has been preparing a major court case against a large corporation found to be in violation of a number of environmental practices. She’s been putting in long hours after the kids go to bed at night then having a hard time falling asleep, she is waking up early, and is worried about the outcome of the case as well as the impact of her work on her family. Which of the following adaptogens might be the most appropriate for her right now?
   a. ginseng
   b. eleuthero
   c. rhodiola
5. Your client is a 52-year old woman who is experiencing low libido and her doctor told her that she really needs to watch her diet because her blood sugar is creeping up. She's often tired in the afternoon and has been getting more colds lately since training for a marathon. Which of the following adaptogens most closely addresses all of these issues?

   a. ashwagandha
   b. rhodiola
   c. ginseng

6. Allostasis is ____________________.
   a. the ability to remain stable in the face of change
   b. stability through constancy
   c. the price the body pays over long periods of time for adapting to challenges

7. The relaxation response ________________.
   a. can be thought of as breaking the worry cycle
   b. a way to relieve stress
   c. can help to regulate blood press, heart rate, and blood sugar
   d. all of the above

8. Allostatic load ________________.
   a. helps us to stay stable under stress
   b. can cause cognitive problems including memory loss
   c. is beneficial in high levels

9. To be considered an adaptogen a substance has to ________________.
   a. have a specific action on an organ system
   b. be a tonic in a traditional medicine system
   c. have non-specific effects and increase resistance to a broad spectrum of stressors
10. Stress has a(n) ________________ effect on illness.
   a. unproven
   b. bidirectional
   c. irreversible

11. Categorized as a Rasayana medicine, this adaptogen has both long-term effects on stress reduction and more immediate benefit in those with sleep and musculoskeletal problems.
   a. ginseng
   b. licorice
   c. ashwagandha

12. Care should be taken to avoid ________________ in individuals with hypertension, however, the ________________ form can be used.
   a. ashwagandha, withanolide-free
   b. licorice, DGL
   c. ginseng, ginsenoside-free

13. A primary mediator of the stress response is ________________.
   a. cortisol
   b. waist to hip ratio
   c. hemoglobin

14. Adaptogens are generally given ________________.
   a. for acute conditions
   b. over a long course of time
   c. for a maximum of 3 months
15. Adaptogens are generally considered safe and well-proven for use during pregnancy.
   a. True
   b. False

16. The first step in change is always _________________.
   a. self-discipline
   b. a health scare
   c. self-awareness

17. An important aspect of effectively making changes is to change the ______ associated with the behavior.
   a. cues
   b. addictions
   c. results

18. ________________ responses are the counteracting forces to stressors.
   a. Stress
   b. Homeostatic
   c. Adaptive

19. Which hormone inhibits ACTH response from the pituitary gland?
   a. Epinephrine
   b. Cortisol
   c. Adrenergocorticotropic [ACTH]
   d. Corticotropin releasing hormone [CRF]
20. This herb is unique as an adaptogen – not only does it have long-term stress normalizing effects, but more immediately it has the ability to promote sleep and relieve musculoskeletal tension.

a. Panax ginseng
b. Rhodiola rosea
c. Withania somnifera
d. Schisandra chinensis

CASES, FORMULAS, and REFLECTIONS

1. Pick one mind-body practice from this lesson and try it on yourself or guide a friend or client through it. Record your experiences/observations on the PDF.

2. Using our own tools is the best way to understand our clients’ experience of using them. Using the Making Shift Happen Worksheet as a guide, identify one health or personal goal for yourself, areas of resistance or obstacles, and set a reasonable goal for success.