

**The Wisneski Institute, Inc.**  
*Serving Humanity Through an  
Integral Vision of Wellness, Education, and Community*

*Winter 2008*

*Volume 1 Number 1*

**A Message From  
Our Chairman :  
Leonard A.  
Wisneski, M.D.**

**February 2008, Colorado:** To everything there is a season, so the wise one's say. For more than 30 years my time was spent in the Washington, DC metropolitan area, having a regular practice of medicine while continuing with my love of teaching medical students and exploring the fields of Psychoneuroimmunology, alternative systems of healing, subtle energies and their roles in healing.

The season began to change when I added Dean of the University of Sint Eustatius School of Medicine to my professorial activities at George Washington University and Georgetown University. Having the opportunity to take a leadership role in an international medical school in its formative years, while taking me away from the daily practice of medicine, has provided a platform to expand upon my vision for health sciences education in the 21<sup>st</sup> Century. The acceleration of Judy and my's plan to move to Colorado was prompted by learning that we were to become grandparents. We are delighted to have welcomed two beautiful grandsons into the Wisneski family this past year, both of whom now live in the Denver area.

The Wisneski Institute was formed in order to create a home for the seasons of service that follow. As we launched, a year ago, we created a long list of activities in which we would like to be involved. I have been pleased that in our first year we completed the development of an innovative new framework for global health professions education. Information about this project entitled, *The Four Pillars and Two Guideposts of Education for the Healing Professions™* is included in this newsletter. We are launching this newsletter for three reasons, first to keep in touch, second to provide a forum to share information; and third to create the opportunity for dialogue and collaboration. Please enjoy.

*Leonard A. Wisneski, M.D.*

**An Integral Vision**

**An Integral Vision:** Throughout our activities, one sees the term 'integral vision'. Dr. Wisneski has defined this as a multidimensional view of life and living that understands people are more than physical beings. An integral vision approaches the person as a physical, mental, emotional and spiritual being living in a complex cultural and environmental context.

In *The Scientific Basis of Integrative Medicine*, Dr. Wisneski wrote, "In the past two decades, biomedical research has changed our understanding of body systems. It is now known that there is a complex network of feedback, mediation, and modulation among the central and autonomic nervous system, the endocrine system, the immune system, and the stress system. These systems which were previously considered pristinely independent, in fact, interact on myriad levels. Psychoneuroimmunology (PNI) also

## An Integral Vision (Continued)

known as integral physiology addresses the synthesis of conventional physiology and how our individual psyches (mind, emotions, and spirituality) interact with the world around us to induce positive or detrimental changes in our bodies. In a broader sense, the concept, the health of society as a whole.” An integral health education seeks to promote this understanding of body systems and the effect of mind, emotions, and spirituality on healing.

The Wisneski Institute recognizes the great debate over the last three decades regarding the categorization and labeling of medical practices into fields termed western, conventional, allopathic, complementary, alternative, integrative, and global. An integral approach to health goes beyond the integration of complementary and alternative medicine and incorporates lifestyle, behavior, and social factors that affect personal well being as well as the patient-physician interaction. This arena includes Mind-Body interactions which refer to the relationships among cognitions, emotions, personality, social relationships, and health. It is our desire to move past labels towards a focus on the promotion of optimal healing. With this in mind, the term integral health – the optimal synthesis of conventional, complementary and alternative health practices delivered with reverence and humanism is a term that will be promoted by the Wisneski Institute.

*Beth Clay*

Executive Director

## The Four Pillars and Two Guideposts of Education for the Healing

### **The Four Pillars and Two Guideposts of Education** for the Healing Professions™ - A Project of the Wisneski Institute

As its inaugural project, the Wisneski Institute launched a global medical education development activity with the intention of advancing the dialogue across constituencies in order to improve the quality of the educational experience for all health care professionals. The Four Pillars and Two Guideposts of Education for the Healing Professions™ stand as a framework for the developing dialogue in the global community. The education of physicians and all health professionals is built upon a solid foundation in the basic and clinical sciences. As transitions in science, policy, and patient needs occur, education curricula should adjust to meet these needs. In some institutions, this change has not occurred seamlessly.

The Wisneski Institute believes that the time has come to consider a full transformation and evolution of health professions education reform to fully engage the opportunities and incorporate foci critical to the global medical community. What follows is a discussion of distinguishing characteristics that will stand as the hallmarks of a high quality medical education in the 21<sup>st</sup> century. While the issues discussed are couched in terms of physician education, they can and should apply to the education curricula of all healing professions.

These Four Pillars In conjunction with the Two Guideposts on Resolving Global Medical Issues set the stage for a much needed revitalization and compass correction to medical education.

**The Four Pillars:**

- Collaborative Care Through an Integral Health Approach
- Cultural Competence
- Clinical Compassion
- Technological Innovation

**Two Guideposts on Resolving Global Medicine Issues:**

- ◆ Increased Services to the Underserved, and
- ◆ Decreasing the Brain Drain of Health Care Professionals

**The Four Pillars:**

**1. Collaborative Care Through an Integral Approach** – Collaborative care is defined as an approach to providing care as an ongoing collaboration among a variety of health service providers, patients, their families and caregivers, and the community. Patients are both the focal point and a full partner in the overall effort. This team approach to care is an advance in medicine's understanding of the healing process and opens new pathways for physicians to approach healing. Medical education with a focus on patient-centered care is expanded with an essential knowledge on the integration of complementary, alternative, and traditional health practices to provide an optimal healing opportunity.

**2. Cultural Competence** – In today's medical environment, physicians will respond to the associated medical needs of varied populations that are different from their own in terms of race, ethnicity, sexual orientation, disability status, and cultural background. Cultural competence is essential to the delivery of quality health care in diverse populations. As part of the 4 Pillars program, we feel it is important for schools to strive throughout the educational process to provide students with an understanding and appreciation for cultural belief systems and the differing views of health and illness.

**3. Clinical Compassion** – In line with collaborative and patient-centered care is the development of personal behavioral skills that assist physicians in the appropriate display of caring and compassion. This is sometimes referred to as the art of doctoring.

The ability to express compassion in clinical interaction may be the single greatest tool a physician brings to the bedside. The Four Pillars seeks to promote the restoration of compassion in medical care.

**4. Technological Innovation** – This need to balance compassion with knowledge building brings us to the fourth pillar – the importance of capitalizing upon technological innovation of both the educational process as well as the practice environment of medicine in the 21<sup>st</sup> Century. It is important for medical educators and administrators to engage in a fundamental rethinking of approaches to education and incorporate new learning technology platforms to expand the educational experience and take advantage of the natural cognitive abilities of our students.

**Two Guideposts:**

The Wisneski Institute believes that these Educational Pillars provide a unique and valuable opportunity for advancing curricula evolution. These four pillars are combined with two Guideposts on resolving global medical issues:

**A. Service to the Underserved:** It is important to emphasize throughout the educational experience the importance and the opportunity of providing medical care in communities and countries where there are shortages of trained medical personnel. There is a broad recognition of the global shortage of health care professionals, for example, in 2006; the United Nations announced an immediate need for 500,000 trained medical personnel around the world, the greatest need for physicians. Experts concur that 43 to 53 physicians per 100,000 is a minimal need while 59.5 to 75.7 physicians per 100,000 are needed to provide adequate medical services.

Sadly, approximately one-fourth of the world's countries have fewer than half (21.5 doctors per 100,000) of the minimal level of physicians needed and for 34 countries (17%), there are fewer than 10 doctors per 100,000 people. The United States has more than 540 physicians per 100,000, Italy 607, France 329, and Canada 209 physicians per 100,000 while Chad has 2, Ethiopia 3, and Malawi only 1 physician per 100,000. Afghanistan has just 19 physicians per 100,000, Yemen 22, Iraq 54 while Saudi Arabia has 140, the United Arab Emirates 202, Egypt 212 and Israel 391 per 100,000.

**B. Decreasing the Brain Drain:** A Brain Drain also known as human capital flight is an emigration of trained and talented individuals to other nations or communities with perceived more favorable geographic, economic or professional opportunities. Much is written in the medical literature regarding the "Brain Drain in Medicine." Doctors from African, Far and Middle Eastern countries immigrate to North America or Europe, leaving their homelands with fewer and fewer trained health care professionals. According to the United Nations, many African countries for instance have fewer than 10 doctors per 100,000 citizens.

Because of varying economic and sociological factors, even within the European Union, there is a mass exodus of physicians from some formerly Soviet bloc countries to the United Kingdom. The lack of trained medical personnel in any community has devastating results that include preventable deaths, and much pain and suffering.

The lack of physicians and other health professionals undermines the stability of communities, often means that even the most essential health services are not routinely available. In a desire to increase the number of physicians world-wide and to curtail the Brain Drain of physicians, it is important to expand health professions educational opportunities to the global community for students to receive training and to their homeland. Throughout history, physicians and health professionals have been viewed as pillars of their own communities and the lack created through the Brain Drain has been a destabilizing factor in many communities. Educational institutions may need to develop or expand programs to insure international students have the requisite understanding of the basic sciences in order to insure success in their medical training. Further there is an urgent need to foster the establishment of health sciences universities in regions of the world in which there are dramatic shortages. The Wisneski Institute desires to develop global partnerships to address this need. We are pleased to announce that the University of Sint Eustatius School of Medicine is acting as a Curricula Incubator for this framework.

## 2008 Activity Campus Development

With the leadership of Dr. Wisneski, the University of Sint Eustatius School of Medicine has focused on implementing development activities that position it to be a model educational institution for the global medical community. They have formed a prestigious Board of Governors which is aligned with our vision for quality medical education. A key to the success of newly formed medical schools around the world is the development and construction of a permanent campus. Since its inception, the University of Sint Eustatius has focused its initial efforts on the development of a quality curricula and clinical partnerships in the United States to insure an excellent educational experience for its medical students. The University is collaborating with the Wisneski Institute and acting as a Curricula Incubator to test our Four Pillars and Two Guideposts of Education for the Healing Professions framework. The Wisneski Institute has recently agreed to conduct the US campaign for campus development in order to raise donations to build a permanent campus. This activity is an initial activity to address the global shortage of venues through which individuals may obtain a quality medical education and address the global shortage of physicians. Information about this campaign will be posted shortly. Donations may be made online to the Wisneski Institute with a notation that it is for medical school building campaign.

## How You Can Help

The Wisneski Institute is a non-profit corporation. As such, we rely on the generosity of donors, especially in this formative time, to build a sustainable activity and to achieve our project goals. Donations may be made online on our website at <http://www.wisneskiinstitute.org/cont.html> or mailed to the address below. If you have questions about our projects, please contact Ms. Clay at [bclay@wisneskiinstitute.org](mailto:bclay@wisneskiinstitute.org).

## About

The Wisneski Institute Inc. is a non-profit corporation established to further implement the inspired vision of Dr. Leonard A. Wisneski regarding healing and wellness for individuals, organizations and communities. The Institute will lead and participate in policy development and task-oriented projects focused in the areas of health and well-being, social and community needs, and technological innovations in education. Dr. Wisneski serves as Chairman of the Board, Hope Wisneski, LCSW serves as President, Steven Grantowitz as Vice President and Ms. S. Elizabeth Clay serves as Executive Director. For more information on the Wisneski Institute, please contact us at [info@wisneskiinstitute.org](mailto:info@wisneskiinstitute.org).

*“A human being is a part of the whole called by us universe, a part limited in time and space. He experiences himself, his thoughts and feeling as something separated from the rest, a kind of optical delusion of his consciousness. This delusion is a kind of prison for us, restricting us to our personal desires and to affection for a few persons nearest to us. Our task must be to free ourselves from this prison by widening our circle of compassion to embrace all living creatures and the whole of nature in its beauty.”*  
Albert Einstein