This document has been written for clinicians. The content was developed by the Integrative Medicine Program, Department of Family Medicine, University of Wisconsin-Madison School of Medicine and Public Health in cooperation with Pacific Institute for Research and Evaluation, under contract to the Office of Patient Centered Care and Cultural Transformation, Veterans Health Administration.

Information is organized according to the diagram above, the Components of Proactive Health and Well-Being. While conventional treatments may be covered to some degree, the focus is on other areas of Whole Health that are less likely to be covered elsewhere and may be less familiar to most readers. There is no intention to dismiss what conventional care has to offer. Rather, you are encouraged to learn more about other approaches and how they may be used to complement conventional care. The ultimate decision to use a given approach should be based on many factors, including patient preferences, clinician comfort level, efficacy data, safety, and accessibility. No one approach is right for everyone; personalizing care is of fundamental importance.
WHOLE HEALTH: CHANGE THE CONVERSATION
Health Care Professional as Griever: The Importance of Self-Care
Clinical Tool

As a health care professional, you are likely to experience many losses in your professional life in addition to those everyone experiences in their personal lives:

- The death of a patient may feel like a personal loss because of the bonding that occurred with patient and family.¹
- Loss of professional expectations, self-image and identity can occur when patient outcomes are less than expected or desired.¹
- Loss of one’s own assumptions or beliefs about life can follow unexpected patient deaths or the death of a young patient.¹
- Losses may remind you of your own mortality.²
- Grief can intensify the stresses intrinsic in complex medical organizations.¹

These losses can be disenfranchised. Disenfranchised grief—hidden sorrow—is grief experienced when a loss is not or cannot be openly acknowledged, publicly mourned, or socially supported.³ It may be helpful to pause and read Vallurupalli’s brief, insightful narrative of disenfranchised grief in a hospital setting—an experience that may occur frequently in medical professions.

The brief article Mourning on Morning Rounds describes a poignant example of disenfranchised grief for two clinicians.⁴

Disenfranchised grievers may not recognize that their own symptoms are related to grief. An important step is to identify and acknowledge the importance and meaning of a lost relationship (or non-death loss). Doka and Vachon offer counsel to health care professionals:

...grief in health care professionals is often disenfranchised, yet the effective holistic treatment of individuals with disease begins with an acknowledgment that loss is a constant companion to illness, for patients, families, and health care professionals alike.¹

...through initially learning how to recognize and deal with loss and grief through a process of mentoring in a team of committed caregivers, taking the time to grow and reflect on your own mortality, acknowledging and dealing with loss and grief as it occurs, having a full life outside the work situation, engaging in self-care, and exploring meditation and spirituality, you can continue to grow and thrive in your work.⁵
MINDFUL AWARENESS MOMENT
GRIEF

Take a few minutes to sit in a quiet, peaceful, comfortable location where you will not be interrupted. This might be by a lake, in a wooded area or flower garden, or your favorite chair at home. Take some deep breaths, close your eyes, and when you are ready, turn your attention to any losses that you have experienced. This might be the death of someone close to you, the death of a patient, the end of a friendship or relationship, a decline in health status for yourself or someone else, a lost career opportunity, the effects of a natural disaster. Think back over the past month, year, or longer.

- What comes up for you? Is there a loss that readily comes to mind?
- Are you surprised by the particular loss that comes to mind or well aware of it?
- How recent is the loss?
- Is there more than one loss that feels particularly salient?
- How painful is the loss?
- What emotions do you feel as a result of that loss?
- What thoughts do you have about the loss?
- What physical sensations are you experiencing as you think about the loss?

If you have more time or during another quiet time, continue to explore your feelings related to loss:

- In what ways (both negative and positive) does the loss affect your daily life?
- How are you supported by others related to this loss? Is your loss disenfranchised, i.e., hidden from others?
- What do you need to help integrate this loss into your life?
  - Acknowledge this loss to yourself?
  - More time to experience and work through the pain of the loss?
  - Share your thoughts and emotions with someone else?
  - Honor the deceased individual or your loss experience through an activity such as writing, building something, planting a tree, shrub, or flowers, creating a work of art, singing a song or playing music?
- If this exercise brings up particularly unsettling thoughts and emotions, what can you do right now to help yourself feel more at peace as you continue over time to cope with the loss? What characteristics, skills, and resources do you have that give you strength as you move through the grieving process?
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References