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Health Realization/Innate Health: Can a quiet mind and a positive feeling state be accessible over the lifespan without stress-relief techniques?

Judith A. Sedgeman

Department of Community Medicine, West Virginia Initiative for Innate Health, West Virginia University, Morgantown, WV, U.S.A.

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Summary

Health Realization/Innate Health (HR/IH) questions long-held assumptions about chronic stress, and challenges current definitions of both stress and resiliency. HR/IH sets forth principles that explain why the experience of psychological stress is not an effect of causal factors beyond people's control, but is an artifact of the energetic potential of the mind. HR/IH describes the "cognitive factor" in stress not as the *content* of people's thinking in response to stressors, but rather as a *quality* of the way people hold and use their thinking, referred to as *state of mind*.

HR/IH hypothesizes that understanding principles that explain the nature and origin of thinking and experience offers a means to access innate protective processes that are healing and antibiosenescent reliably and consistently, without techniques. HR/IH suggests that the primary effort of mental health care could be to initiate life-long prevention of the state of chronic stress. In addition, HR/IH suggests that addressing mental well-being would have a broad impact on the incidence and course of the many physical illnesses that are known to be stress-related.

The brief therapeutic interactions of HR/IH draw upon people's innate wisdom and recognition of the healthy perspective available to everyone. Anecdotal results suggest that people who gain insight into the principles that explain the nature of thought and experience and who realize how to re-access a natural, positive state of mind can and do experience sustained day-to-day peace of mind, wisdom and well-being, regardless of circumstances. HR/IH deserves rigorous scientific evaluation.

key words:

resiliency theory • resiliency application • stress • coping • health • innate • Health Realization • Innate Health

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Author's address:

Judith A. Sedgeman, Assistant Professor, Department of Community Medicine, West Virginia University Health Sciences Center, P.O. Box 9147, Morgantown, WV 26506, U.S.A., e-mail: jsedgeman@hsc.wvu.edu

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BACKGROUND

The state of chronic stress underlies many disease states that diminish quality of life and reduce life expectancy [1–5]. And the state of chronic stress is a major contributor to the inflation of national health care costs [6].

Evidence has coalesced around the idea that the ultimate answer to stress may not lie in addressing external stressors but in exploring and enhancing internal human capacities. The intent to develop means to comprehend, build and buttress human resiliency is predominant in both behavioral [7–10] and biological [1,11–20] investigations.

This dual shift towards recognizing the experience of chronic stress itself as an underlying contributor to many disease states and towards seeing intrinsic human capacity as a healing mechanism has led to investigation of the biochemistry of a psychological immune system that addresses chronic stress systemically.

Research has established the positive physiological and psychological effects of resilience, as well as the extensive negative physiological and psychological effects of chronic stress [1,8]. The persistent assumption that stress is a consequence of factors outside of the control of the individual, however, has kept research attention on the relationship between stressors and the individuals who are subject to them. As a result, studies focus on how best to protect people from stressors or equip them to respond to stressors as successfully as possible. A question for further study is how people access their internal resiliency. What allows some people to draw upon their internal strengths when they most need them, while others are easily overwhelmed? What explains the power of the psychological immune system, and why is it not consistently engaged or functioning?

The mechanisms of acute stress are readily apparent, and have been for a century, since they were first described by Walter Cannon [21]. But the mechanisms of chronic stress are less clear. Hans Selye described the final, chronic stage in his general adaptation response to stress as "exhaustion" [22]. That remains a potent metaphor, although an inaccurate scientific description, of the effect of the state of stress unrelieved over time, which has been shown to redirect the body's resources and thus leave the person vulnerable to disease [2]. But as Sapolsky points out [3], chronic stress does not actually deplete hormonal resources, but keeps the body in a constant, unrelieved state of hormonal imbalance, which creates a "hormonal milieu" that fosters disease states [5].

But why are people vulnerable to chronic stress? Why doesn't the body return to homeostasis after every encounter with "stressors"? Why are some people in good circumstances unable to keep their bearings, while others in the worst of circumstances are able to remain stable? What is the common underlying explanation for the varied responses to the same stressors among different individuals? Why does each person respond differently to the same stressors at different times?

Assumptions of current research

Current investigations of chronic stress are governed by unchallenged assumptions. From the outset, stress has been studied as an inevitable result of pressures beyond the control of those experiencing the stress. Cannon and Selye, both using animal studies, established the scientific basis for the study of stress. Their work focused on physiologic responses of animals to stressful external pressures, such as heat and cold, prolonged restraint, surgical procedures. Ideas about psychological stress in human beings were extrapolated from the study of physiological stress responses in animals. Then, early studies of human stress by Richard Rahe and others [23–26] established the prevailing view that there are distinct, measurable life stressors that cause stress, and even that those life stressors can be ranked according to their level of influence on the degree of stress people experience. The stressors were ranked by median responses to various situations. Thus the question was never raised why one person might call "going to the dentist" a 20 on the stress scale, while another called it an 85. The broad variations in responses to the same stressors have never been addressed.

Psychologists now refer to "toxic" circumstances, relationships, emotions and events when describing stress-related syndromes. Stress-coping presentations address "noxious" events or "insults" to the psyche. Psychiatrists document "allostatic load," the weight of stressful and negative circumstances in a person's life history [27]. It is assumed that some degree of stress is inevitable for all people, given the life demands and challenges everyone must face. It is assumed that "relief" from stress is a desirable, if temporary, departure from that normal expectation. Techniques and methods that provide a respite from stress are seen as the appropriate focus of stress remediation. The premise is that people who practice such techniques or methods still must cope with a relentlessly stress-inducing milieu but are better equipped to withstand and recover from stress [28–36].

THE HEALTH REALIZATION/INNATE HEALTH CONCEPTUAL MODEL

Since the late 1970's, a completely different way of understanding and addressing stress has been quietly spreading through the helping professions. Known primarily as Health Realization, or Innate Health, this work emerged from the insights of Sydney Banks, a man who had spent much of his life until the early 1970's in a state of extreme stress and insecurity. The insights that set him free to transcend a lifetime of limitations came out of the blue, unsought, in a profound experience. When he realized how much these simple, but extraordinary, insights had changed him, he began to share his knowledge with others, offering free public talks. After a few psychologists and psychiatrists were exposed to his insights and began to see and experience life differently for themselves [37-40], they changed their minds about what is possible in mental health and well-being, and developed a new approach to clients. The work ultimately became a psychoeducational approach that is based on the assumptions that (1) people have an innate wellspring of psychological well-being from which to draw, and (2) anyone can realize that and live from a healthy, wise, balanced state of mind, regardless of the "stressors" and external circumstances encountered over time [38,40-42].

Principles underlying HR/IH

Health Realization/Innate Health (HR/IH) suggests that the prevailing fundamental assumptions about chronic stress are inherently flawed [43–46]. It proposes to replace the theories of how and why stressors induce and sustain stress from the outside-in with principles that explain how and why the experience of stress is created from the inside-out, regardless of circumstances. HR/IH describes universal principles that explain how people arrive at so many different ideas about the world and so many strategies about how to cope with it [43–47]. Current therapeutic methods concern themselves with *what* people think and how people deal with *what* they think, and what has caused them to think the way they think, all of which exist in the realm of already-created experience. HR/IH addresses the fact *that* people think, which represents the fundamental source of experience, experience inchoate [38,43,47–49].

The principles underlying HR/IH are Mind, Thought and Consciousness [43,47]. The principle of Mind describes the formless, infinite energy of all things. The principle of Thought describes the capacity for the personal mind to use that energy to form an infinitely variable personal reality to express unique life. The principle of Consciousness describes the capacity to be aware of the reality being created, i.e. to perceive, recognize and experience ever-changing life [43,47]. These three principles combined refer to a universal dynamic of creation that is constant. Each person's moment-to-moment thinking is variable, representing the boundless array of potential forms energy can take. The essential meaning of the principles is that thoughts are no different from any other "forms" of life, always in motion, ever-changing through an infinitude of possibilities, originating from the one formless, energetic source.

HR/IH operates at the emergent impetus for human inquiry and self-expression. There are ideas that point to it in the current literature regarding the mind and the brain, for example the definition of the mind proposed by Stefano, Fricchione, Slingsby & Benson [4, p6]:

"...in order for cognitive ability to develop and succeed, however, there must first be a unifying consciousness to control or regulate the many individual neural processes that potentially summate a decision-making process. ... That is, the brain represents only neural tissues organized into various neural patterns that can work together or separately. Without a unifying component being able to cope with a focus, the significance and uniqueness of this coping strategy would be lost. ... Moreover, a unified entity, a 'mind', would only be involved with experience-related phenomena (both exteroceptive and interoceptive) since this is the realm in which coping strategies are designed."

But HR/IH is a unique perspective because of its neutral and non-specific treatment of the creative power of thought as evidence of the universal energy of Mind, rather than as evidence of the strength of discrete external situations with which the personal mind must interact. Most therapeutic work focuses on the specific content of people's thinking as though it were absolute, with no acknowledgement of the subtle variations in thinking that arise from an ever-changing state of mind or feeling state. Once the process of thinking is realized, once people understand how their thinking works to create reality and how powerful the transitory and illusory images of thinking appear to be, they are set free from living at the mercy of any thoughts they think. They can see that the experience of stress and distress is actually

their own thought-consciousness manifesting negative, worrisome, distressing thoughts in the form of negative, worrisome, distressing experience, and that those thoughts have no life beyond the moment they are created and held in their minds. They see the illusory, kaleidoscopic nature of all formed thoughts.

THE HEALTH REALIZATION/INNATE HEALTH THERAPEUTIC MODEL

HR/IH assumes that the state of stress is an occasional brief and temporary interruption of life lived naturally in a healing, positive, antibiosenescent state. Moments of stress, registered as recognizable physical and psychological changes, are regarded as valuable information about the temporarily deteriorating quality of one's state of mind (feeling state and quality of thinking), rather than as upsetting information about the negative reality of life circumstances. One might say that the feeling of stress is a measure of the barometric pressure of the human mind, not the barometric pressure of life. If these assumptions hold under scrutiny, the need to develop and teach stress coping and stress management strategies would be drastically reduced, if not eliminated. People could recognize and access their own natural resiliency to address life situations. By using their feeling state as a guide to the quality of their thinking, with the understanding that all thinking is illusory and fleeting and will pass, they would naturally default to a quiet mind and a positive feeling state.

HR/IH is innovative because it demands a departure from prevailing assumptions. But because prevailing assumptions are so strong, HR/IH is often linked with recognized therapeutic models by people who try to explain it. For example, it is often confused with, but is not related to, many theories that draw on human spirituality and the ability people consistently show to attain positive feeling states and quietude under controlled or induced circumstances [9,12,34,50-54]. It is important to note that even spiritually advanced and profound therapeutic approaches do not depart from the notion that "stressors" are real and inevitable and must be dealt with by marshalling human resources. Even when psychoneuroimmunology suggests that "innate processes" are at work, it is taken for granted that these arise from "remembered wellness" or primal learned responses to external stressors [4,55]. The word "innate" in that context appears to mean "internal to processes that naturally occur within the body and brain." But the word "innate" in the context of HR/IH means the common, universal, infinite, intrinsic energy before the formation of the body and the brain.

Comparison with current therapy models

Prevailing therapeutic assumptions, even those that are at the leading edge of the discoveries of psychoneuroimmunology, consistently seek to analyze, treat or stave off stressors that are presumed to exist as factors separate from, and threatening to, the people who must deal with them [1]. HR/IH proposes that "stressors" are the moment-to-moment perceptions of a mind innocently caught up in negative, upsetting thinking without recognition and understanding of the process that is driving the experience. HR/IH does not question the existence of external life circumstances that



Hypothesis Med Sci Monit, 2005; 11(12): HY47-52

affect people – physical discomfort or limitations, the upheavals of war and weather, unforeseen tragedies, etc. It explains that there is an internal mediating factor between such external factors and each individual's experience of them; the factors do not have the power to determine a person's reaction to them, the person has the power to determine how factors will affect him or her.

Because the principles of Mind, Consciousness and Thought are linked to the idea of empowerment, they are often attached by observers to familiar concepts of "reframing thinking" or "assertiveness" or "locus of control". Yet the empowerment that arises from the principles in action is a much different quality. It is not an experience of effort or willpower. It is an experience of freedom before the thought of any particular activity or frame of reference.

The power of the principles in action is seen as the very ability to have and hold such ideas, *i.e.* the natural, intrinsic capacity of individual minds continually to make things up and see them as real. Willpower, exercising personal control, is thus a byproduct of that power, not an aspect of it. It is a *use* of the personal mind – just as apathy is a use of the mind, negativity is a use of the mind, positivity is a use of the mind, anger is a use of the mind, good will is a use of the mind, quietude is a use of the mind.

The principles distinguish Health Realization/Innate Health from theories, such as cognitive-behavioral theory, or rational-emotive theory, or behavior modification, or positive psychology – or other conceptual frameworks – as means of "improving" thought or experience [38,44]. All theoretical teachings are derived from the power of thought; they are thoughts or thought systems made up by people using their own power to see the world and make sense of what they see.

Therapeutic impact of HR/IH

The strength of HR/IH is that it opens hope and possibility even to those who have been caught in a certain way of thinking for years because it allows them to pull back the curtain and recognize themselves at the controls before the thoughts they create. HR/IH practitioners do not try to talk clients out of negative thoughts, or ask them to replace them with other, more encouraging, thoughts or teach them how to empty their mind of certain thoughts. HR/IH practitioners explain to clients that fundamental and powerful principles are at work, and that they are experiencing the fact of those principles as surely as a glass of water experiences gravity when it slips out of someone's hand and drops to the floor. As long as they have not yet realized their own ability to create experience via thinking, they're bound to get caught in little whirlwinds of upsetting experiences. They may fight the content of the thoughts that create them and thus keep them spinning in their minds, rather than allowing them to pass as new thoughts come to mind. When they begin to see the nature of thought, they are able to use distress as a warning sign to stop ruminating. Then their natural, resilient flow of thinking can resume. Upsetting thoughts lose their power; they are no more real, and just as real, as any other thoughts. The person becomes an artist holding the paintbrush, able to create a constantly changing reality, rather than a victim painted into a frightening scenario by thoughts that seem out of his control and seem to be coming from life.

People realize they can navigate life using their feeling state as a reliable guide to the moment-to-moment quality of their thinking, knowing that the thinking process naturally self-corrects. Unattended thoughts pass, the mind clears, consciousness lifts, and from a quieter mind and positive feeling state, people get increasingly functional ideas. The natural tendency of the human mind at peace is towards wisdom and insight [8,43,46,47], which might be called psychological homeostasis. Chronic stress is not an actual enemy of human well-being with which one must do battle; chronic stress is an artifact of the human imagination in a negative state of mind.

IMPLICATIONS FOR RESEARCH

For more than 20 years, psychiatrists, psychologists, counselors and social workers who have shared the principles underlying Health Realization with clients from all walks of life and across all diagnoses have consistently reported common results [40,45,46]. Clients come to see life from a perspective that allows them to operate from wisdom, peace of mind, insight and strength and to accept negative states of mind as an indicator of the quality of their thinking. Common sense tells them to allow their thinking to pass in such cases until more constructive thinking comes to mind [46,56–59].

The logic of Health Realization indicates that research now providing increasing evidence that a quiet mind, such as the state of meditation, is a healing state that not only prevents the effects of chronic stress [9,15,32,60–63] but may even reverse them [8,18,19,64,65] should be directed towards the study of the unique and growing population [40,42,45,59] of HR/IH clients. In that population are people who have realized how to live day to day in a serene state of mind regardless of past experiences, external challenges in the present, or uncertainty about the future.

A study population could readily be identified. Over the years, HR/IH has been a grassroots movement, spread through demand from clients who saw others come to a peace and sense of well-being they did not think possible, and through word of mouth by practitioners and colleagues who found hopefulness in working with clients that had eluded them previously. There are thousands of practitioners and many thousands of clients across the U.S. and in other countries. Many practitioners have gathered an extensive array of qualitative and anecdotal results that fall outside current parameters for expected outcomes in mental health [40,45,59]. Health Realization is now beginning to be recognized by and incorporated into university programs (e.g., San Jose State in California, UBC in British Columbia, University of Minnesota, Portland State University in Oregon, State University of West Georgia, West Virginia University) and is appearing in curricula and textbooks in counseling, education and prevention [66].

CONCLUSIONS

Health Realization/Innate Health represents a paradigm shift in the understanding and study of chronic stress. It explains the experience of stress as an inside-out process, originating within the mind. It suggests that people can recognize how to access their own innate health and resiliency to live in a quiet mind and a positive feeling state. It suggests that the experience of stress can be temporary, regardless of circumstances, and should be seen as a warning signal to allow the mind to quiet, rather than to focus on the content of the thinking that is creating the negative feeling state. HR/IH sees the research demonstrating that quietude fosters psychological and physiological benefits that can ameliorate, or even reverse, the effects of chronic stress as evidence for the pressing need to investigate its effects. HR/IH is a new prevention strategy in mental health which may hold promise for a significant reduction in the problem of chronic stress. Evidence to date is anecdotal but compelling and warrants carefully designed clinical studies.

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Hypothesis Med Sci Monit, 2005; 11(12): HY47-52

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