

CONSCIOUS DECISIONS \* THE GRANDMOTHER METHOD \* POWER OF EIGHT

# pathways

to family wellness™

## *Resonance*

issue 56 | winter 2017 | \$7.95



# pathways to family wellness™

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PATHWAYS TO FAMILY WELLNESS is an award-winning quarterly publication offering parents thought-provoking articles and resources to make conscious, informed choices for their families' well-being.

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The information provided is not intended to replace a one-on-one relationship with a qualified healthcare professional and is not intended as medical advice. It is presented as a sharing of knowledge and information.

PATHWAYS TO FAMILY WELLNESS magazine is published by the International Chiropractic Pediatric Association, a 501-C3 nonprofit. Sales of PATHWAYS TO FAMILY WELLNESS and the direction of its community outreach program fulfills ICPA's mission for public education.

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Issue 56, Winter 2017. Printed in the USA.



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## SUBSCRIPTIONS

PATHWAYS TO FAMILY WELLNESS is published four times per year.

Print subscription rate is \$24.95/year.  
Digital subscription rate is \$9.95 for one year, \$15.95 for two years.

All funds U.S. Dollars.

Discounts are available for bulk single and recurring orders.

All proceeds support our mission of research, training and public education for family well-being.

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## ON THE COVER

Photo by Selena Reif

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# 56

## in this issue



### FEATURE

## THE FOUR SACRED GIFTS

One Mohican man's vision resulted in a prophecy of the coming together of the human race. The Eagle Hoop he dreamed of has come to symbolize the great wisdom of the Elders and humanity's connection to spirit and Mother Earth. Twenty-seven Elders came from the four directions of the globe to bless the Eagle Hoop with four powerful gifts, so that its message of harmony could finally be heard.

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**Be a part of PATHWAYS! We love to hear from you.**

If you have stories and photos to share about pregnancy, birth, family wellness lifestyle choices, or healthy recipes and nutrition ideas, please contact us at [editor@pathwaystofamilywellness.org](mailto:editor@pathwaystofamilywellness.org).



## A Summit for Conscious Choice, March 2018!

Chiropractors have always been a collaborative force in joining professions related to natural healing. The International Chiropractic Pediatric Association embraces this greater mission of chiropractic, and PATHWAYS has been its avenue of expression. We recognize the essence of chiropractic philosophy and practice as: There is a connecting intelligence in life, and each human, resonating in his or her own special way, is a unique and valuable expression of that intelligence. Each creative, evolving, innate manifestation of this intelligence forms the whole, which in its totality is greater than the sum of its parts. Many other proponents of natural healing also rely on this premise: Life is intelligent.

In 2008, we held our first Freedom for Family Wellness Summit. It drew together PATHWAYS authors, supporters, and advocates—in person, in one place. It was a weekend for hope...one to encourage participants that there is a community of like-minded people striving for real change. The enthusiasm was palpable. The energy was contagious. With such a successful gathering, we set the date for our second event in 2010, which surpassed what many of us had anticipated. More alliances were built, collaborations were strengthened, and what was initiated as hope for change had now transformed into a solid recognition of the mounting shift in consciousness, and the vital role each individual contributes to the wholeness of that shift.

In November, 2014, the four-day conference, now dubbed “ICPA Freedom Fest,” returned to Reston, Virginia, with more than 30 speakers and 50 exhibitors reaffirming its powerful, uplifting theme: “Celebrating the Shift to Conscious Choice.” Attendees were an

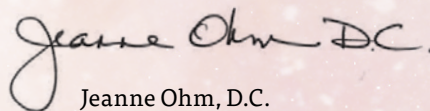
influential community of practitioners, parents, and activists. We interlaced our knowledge, resources, and enthusiasm in reclaiming our rights to informed, conscious choice.

The gathering convened numerous leaders, and we are intimately aware of the huge changes we have experienced since that event. We are honored and thrilled to invite you to our fourth Freedom for Family Wellness Summit in Reston, Virginia, on March 1–4, 2018.


In chiropractic we respect that each individual's innate potential deserves its fullest expression. There is intelligence inherent in all of us. We are intimately connected with that intelligence in all aspects of our expression: physical, emotional, mental, social, and spiritual.

If we think the body doesn't know what it's doing, we will likely live in fear. When we recognize there is intelligence and order, we will trust and respect the body's natural design for optimal performance. Our choices in healthcare can shift from a fear-based model to one of proactive respect for natural function. Our lifestyle practices can shift from the status quo to conscious choices. When we realize there is an interconnected intelligence among and within all living creatures, we are in resonance with the ageless wisdom of life. We hope you will join us in unison to celebrate our Freedom for Family Wellness. ☺

For the raising of the consciousness,

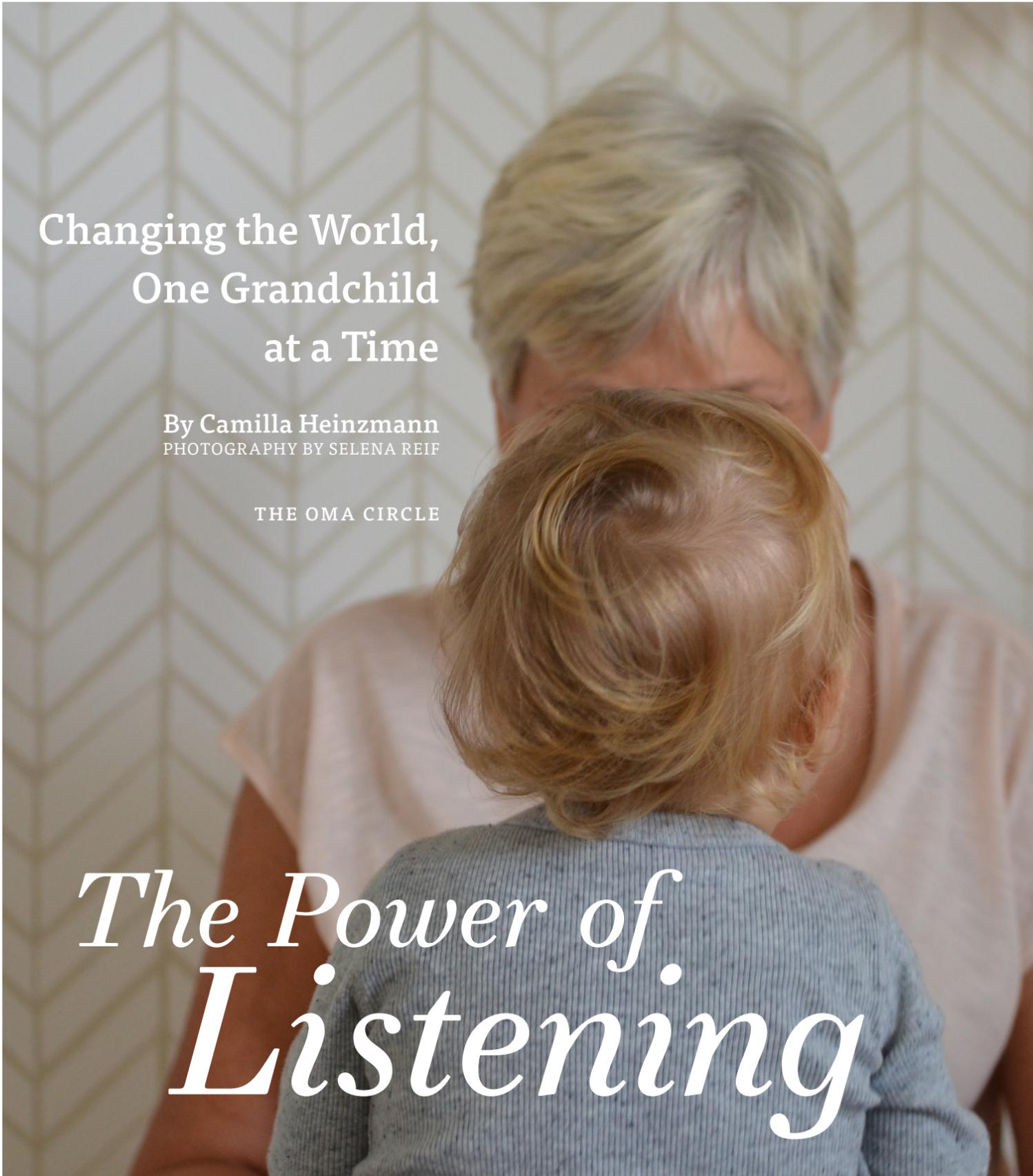


Jeanne Ohm, D.C.



*When we recognize there is intelligence and order, we will trust and respect the body's natural design for optimal performance. Our choices in healthcare can shift from a fear-based model to one of proactive respect for natural function.*

*Freedom*  
for family wellness



Changing the World,  
One Grandchild  
at a Time

By Camilla Heinzmann  
PHOTOGRAPHY BY SELENA REIF

THE OMA CIRCLE

*The Power of.*  
*Listening*



What if we really listened to our grandchildren? When my daughter was only 3 months old, I had “conversations” with her, much to the surprise of my family. I had read that small babies could copy sounds we make, and even copy our mouth and tongue movements. So we sat, looked at each other and repeated back and forth, “Dadada,” “Bababa”; she even tried to position her tongue on the top of her lips to copy me. I remember my delight—and even more, *her* delight—at this back-and-forth “conversation.”

Three years later, when my second daughter arrived, the same magic happened. As the babies grew a little older and started to vocalize on their own, our conversations become more sophisticated and longer. As they were babbling, I would repeat their sounds, which delighted them immensely and caused them to babble the next “sentence,” to which I would say: “Yes, and then what?” or “Oh, tell me more!”, showing interest in what they said and encouraging them to respond. One could practically palpate the love and depth of connection between us.

Thirty years have passed between these early conversations with my daughters and the delightful dialogs I now have with my grandson. We hold the same intense conversations that I held with his mom when she was his age. He just loves it when we repeat his “words.” The more closely we mimic the intonation and inflection of his sounds, the more happy and excited he becomes, and the more eager he grows to continue the conversation. I am sure that being heard and understood adds to his sense of being loved, even at his young age.

Communication and the power of listening have become front and center in my personal and professional life. I believe now more than ever that true listening is not only essential to creating any meaningful human connection, but is also a skill that needs to be taught, modeled, and practiced from a very young age. Once mastered, it has far-reaching impact: Listening transforms relationships, builds trust and understanding, fuels collaborations, defuses conflicts, circumvents wars...and can truly change the world.

As a corporate trainer working with hundreds of sales professionals around the world, I spent a significant amount of time talking about the power of listening. “Ask—don’t tell—and then listen” was one of our mantras. In sales, as in all relationships, the power of really listening is often overlooked. All too often, we are either distracted or think of our own responses while the other person is talking. I noticed over and over again that sales professionals who practiced actively listening to their clients’ needs reported much better sales results than the ones who did not. In the same vein, leaders and managers who listen to their employees get better employee engagement and long-term commitment, rather than simply compliance.

As I was training for my role as a certified professional coach, I was intrigued by the many types of listening and the effect the quality of listening has on relationships. Coaches empower their clients to clarify their own goals and create plans to achieve their personal and professional potential. To accomplish this, we practice listening in several different ways. We listen intentionally, we listen seeking to understand, we listen emphatically, attentively, purposefully, generously, non-judgmentally, deliberately, and compassionately. As a grandma, I can also add “joyfully” to the list of listening attributes.



GRANDMAS HAVE THE EXPERIENCE AND WISDOM NEEDED  
TO TAKE ON THE ROLE OF MASTER LISTENER...  
TO PLAY A VITAL ROLE IN PLANTING AND NURTURING  
THIS SEED OF UNDERSTANDING.



Grandmothers are in a unique position to listen and to teach what it means to truly listen through their words and actions. Whether by nature or nurture, women have traditionally been very good listeners. But young parents today are so busy juggling their careers with their families and social responsibilities that listening to their children (especially the pre-verbal ones!) can seem like just another task added to a long list. Grandmas have the experience and wisdom needed to take on the role of Master Listener. We often also have the time and patience to do so, especially when our own work schedules are more under our control than those of young people still making their mark. Thus, GRANDmas are perfectly suited to play a vital role in planting and nurturing this seed of understanding, connection, and love that will grow into a positive force, affecting the well-being of children, their families, and beyond.

Children's minds are like sponges: They learn through each experience in their early lives. Most of this learning comes from what they experience, the behaviors we model for them, and from the habits and values that we impart to them. What if we *really* listened to our grandchildren? What if we taught them the joy and value of truly listening and being listened to? What if our listening made them feel that they, their thoughts, and their ideas truly mattered to us? What if we made learning how to listen just as important as learning how to read and write? We might raise

a generation of people who truly seek to understand others. Imagine what the world would be like then.

I wholeheartedly agree with Margaret Wheatley, who said in her 2002 book *Turning to One Another*, "I believe we can change the world if we start listening to one another again. Simple, honest, human conversation. Not mediation, negotiation, problem-solving, debate, or public meetings. Simple, truthful conversation where we each have a chance to speak, we each feel heard, and we each listen well.

So, let's hone our own listening skills. Let's joyfully listen to our grandchildren, teach them the value of really listening to bring about true understanding, and change the world for the better—one grandchild at a time. 📍



*Camilla Heinzmann is an experienced coach and trainer with a strong passion for helping people reach their full potential. When she is not spending time with her family (and grandson) between Los Angeles and San Diego, she runs Heinzmann Coaching and Consulting Inc. Inspired by the immense joy of becoming a grandmother (oma), she has launched a venture, "The Oma Circle," a community that creates opportunities for like-minded grandmas to support each other. Camilla is currently writing her first book focused on celebrating and sharing experiences of conscious GRANDmothering and can be reached at [theomacircle.com](mailto:theomacircle.com) and at [Camilla@theomacircle.com](mailto:Camilla@theomacircle.com). View article resources and author information here: [pathwaystofamilywellness.org/references.html](http://pathwaystofamilywellness.org/references.html).*



An aerial photograph of a university campus, likely the University of North Dakota, serves as the background. A large, semi-transparent circular graphic is centered on the page, featuring a faint, stylized eagle feather design. The title 'THE EAGLE HOOP Prophecy' is prominently displayed within this circle. The word 'THE' is in white, 'EAGLE' is in black, 'HOOP' is in red, and 'Prophecy' is in yellow script. Below the title, the author's name 'Anita Sanchez, Ph.D.' is written in red. A quote from Don Coyhis is centered in black, followed by his name and title in red. The main text of the introduction is in black, with a large drop cap 'I' at the beginning of the first paragraph. The circular graphic has a white border on the left and a yellow border on the right, with a red border at the bottom.

# THE EAGLE HOOP *Prophecy*

Introduction to *The Four Sacred Gifts* by Anita Sanchez, Ph.D.

*"The hoop is an evolving symbol for humanity, as its wisdom  
and presence reminds us of how to be and how to do."*

—DON COYHIS, MOHICAN ELDER AND KEEPER OF THE HOOP

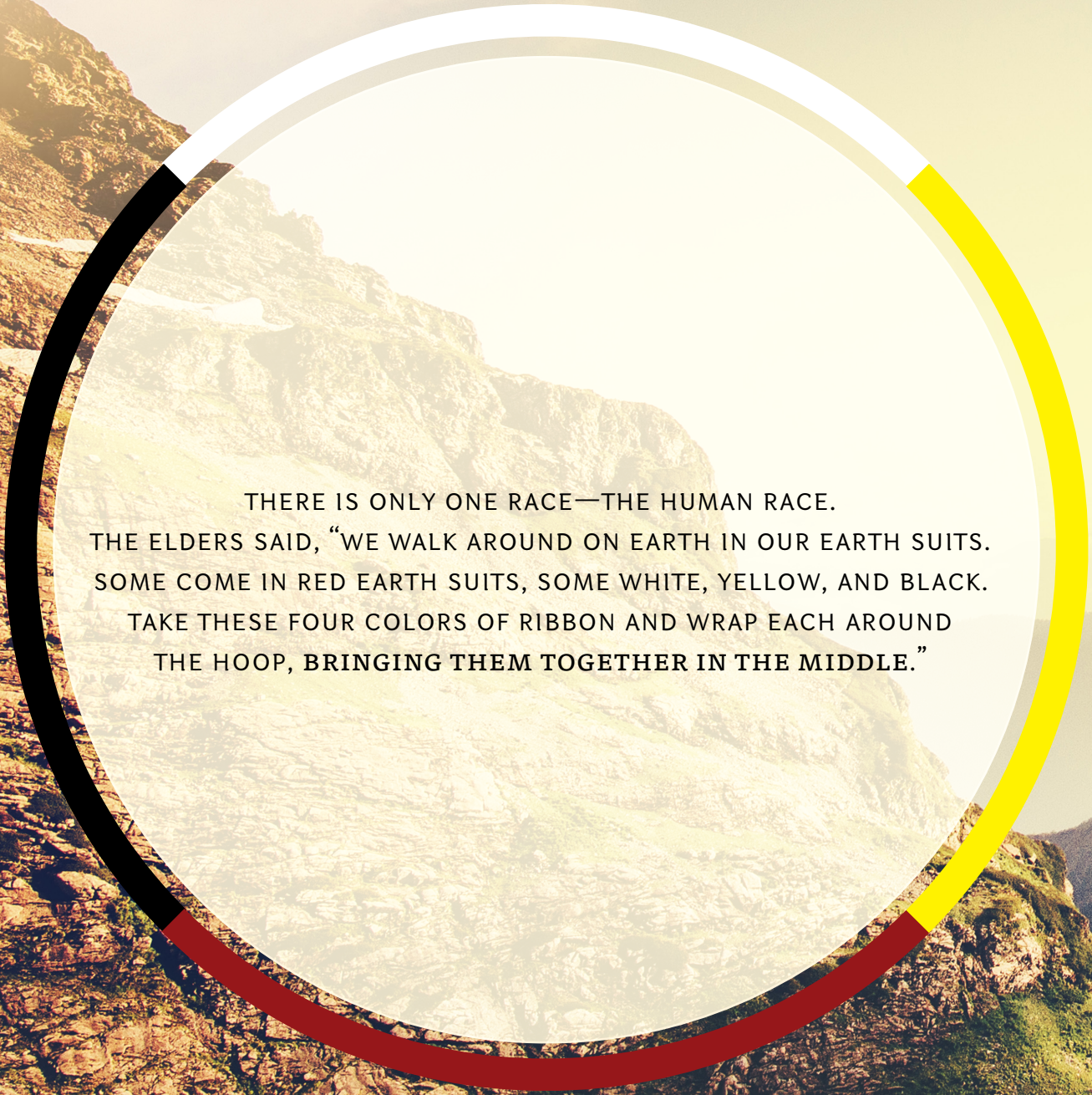
**I**n 1994, a vision came to a Mohican man as he slept in his house tucked into the large pine trees on the edge of the Rocky Mountains. An eagle flew above his sleeping self, dropping a beam of light upon the man's head. This ray of light began to expand, reaching from the sky to the earth.

Within the light, a very small sprout sprang forth, becoming a tree, growing through each of the four seasons—the spring, summer, fall, and winter.

Then the leaves of this tree began to fall off. And then soon, the branches began to fall off. What remained was a single stem of the tree, which rose up vertically and then turned horizontally, bending and forming itself into the perfect shape of a circle to represent the earth and the universe.

When the circle or hoop was completed, a single dot of light formed in the sky, coming down to the hoop. The dot of light transformed into an eagle feather attaching itself to the hoop. Then more and more dots of light came from all the four directions—north, east, south, and west—becoming eagle feathers, attaching themselves to the hoop until there were one hundred eagle feathers in all.

When indigenous people seek guidance, being in right relation with their community, they will naturally seek out the wisdom of the Elders, who are in communication with spirit and Mother Earth. So, with this dream, Don Coyhis, Mohican messenger, and members from his Turtle Clan took this vision to 17 Elders in South Dakota, who said, "You need to build that hoop." They saw this vision as a prophecy of the coming together of the human race: "There is only one race—the human race."



THERE IS ONLY ONE RACE—THE HUMAN RACE.  
THE ELDERS SAID, “WE WALK AROUND ON EARTH IN OUR EARTH SUITS.  
SOME COME IN RED EARTH SUITS, SOME WHITE, YELLOW, AND BLACK.  
TAKE THESE FOUR COLORS OF RIBBON AND WRAP EACH AROUND  
THE HOOP, BRINGING THEM TOGETHER IN THE MIDDLE.”

The Elders said, "We walk around on earth in our earth suits. Some come in red earth suits, some white, yellow, and black. Take these four colors of ribbon and wrap each around the hoop, bringing them together in the middle, and joining them with one eagle feather in the center."

Listening to the Elders, they began to build the sacred eagle hoop. A willow branch was made smooth and gently shaped into a circle. They took the colored ribbons—red, white, yellow, and black—praying and wrapping each one around the hoop. They took their collection of one hundred eagle feathers, praying and attaching each one to the hoop.

Then there was a sacred gathering and hoop ceremony. Twenty-seven indigenous Elders from the four colors and directions—Elders from the North American tribes representing the red and south, a Buddhist Elder from Tibet representing the yellow and east, a Sami Elder from Finland representing the white and north, and two Elders from African tribes representing the black and west—responded to the call.

During the ceremony, there was no man-made notion of time—past, present, or future; there was only the Now, one spirit, calling forth through the human beings, through their different languages, through their sacred chants, prayers, blessings, and meditations. There was no separateness, only one mind, one heart, one spirit connecting these Elders and their sacred traditions from the four directions.

The 27 Elders, with joy and solemnity, took cedar planks, and laid them in the four directions, placing the hoop on top, saying, "We have come together. We will put into this hoop four gifts that are necessary for this coming together...this healing time.

"The first gift we place is the power to forgive the unforgivable.

"The second gift is the power to heal." The Elders prayed their healing medicines into the hoop.

"The third gift is the power of unity. The power to come together.

"And the fourth gift is the power of hope. The ability to dream, to see wellness and the powers to attain it."

After the sacred eagle hoop was built and blessed by the 27 Elders with their four gifts, the hoop began a great land journey, traveling through 35 states in the U.S. and to Canada. Don Coyhis took the hoop and traveled to cities, communities, colleges, reservations, and homes.



He traveled through many seasons, climates, and environments in this land of our ancestors.

And on this journey, an awakening began. A healing time of prayers, tears, hopes, and a creating time of dreams from all the people, indigenous and non-indigenous alike. Standing in a central place, the hoop is both symbol and catalyst to our awakening, which continues to unfold in magical ways as it makes its journey, touching so many lives.

The four colors, the four directions of the hoop, symbolize harmony and interdependence between the different peoples around the world. The hoop is meant to support all people to discover and trust the four sacred gifts, so that each of us can be a life-giving connection to others: all beings, earth, and spirit. The hoop is a powerful force, a powerful medicine, a coming together of the human race.

Momentum is building. A movement is building across our great lands. We are seeing with a clearer vision the strength and wisdom of our Oneness, and the gifts of the hoop are needed now more than ever to help us realize that vision of life.

## What Is Indigenous?

Before we continue forward on our journey together, I want to take a moment to describe in more detail what it means to be indigenous, and in particular an indigenous Elder.

In the beginning, everyone's ancestors were indigenous. They were hunters and gatherers and lived in relationship to nature, to the earth. This is an anthropological definition of an indigenous person. If you search online, you will find that "indigenous" is usually described as: native or aboriginal or first peoples, who are the original inhabitants of a region or environment.

Now we have confused this term "indigenous" to mean someone who is born and raised in a particular place with other members of their tribe, therefore that makes them indigenous. But for many of us who have been separated geographically and/or culturally from our tribe's original or ancestral traditions and instructions, we then don't regard ourselves as indigenous.

Indigenous people are often defined as minorities. However, we are legally recognized as Nations in a country such as the United States, not minorities. Nations with rich cultures and knowledge, and with diverse traditions and practices. However, all of these definitions only touch the surface.

Across many indigenous peoples and their tribes, people point to a common description rather than a single definition, and that is: A truly indigenous person is one who has intimate connection with Mother Earth and who embraces all human beings in order to get along with them. There is a respect for diversity, which is part of the circle of life. Pluralism is valued, so it does not matter what color you are, for there is no being better than or less than, no negative judgment. We are all connected. Indigenous peoples listen to not only their minds but most importantly to their hearts, and to what Mother Earth is saying. This description of indigenous people is what I hold to be true.

As for indigenous Elders, these men and women are "tradition bearers" and are recognized by their people, specific tribe, or culture group as having wisdom. Being an Elder is not necessarily a function of age. The Dalai Lama is an example of becoming an Elder as a child.

To many indigenous people, Elders are people who are steeped in the traditions or the passed-down knowledge of a community or tribe. They carry on the traditions, stories, and memories of their people. In every indigenous culture I have experienced, people who



WE ARE SEEING WITH A CLEARER VISION THE STRENGTH AND WISDOM OF OUR ONENESS, AND THE GIFTS OF THE HOOP ARE NEEDED NOW MORE THAN EVER TO HELP US REALIZE THAT VISION OF LIFE.

have taken on roles as healers, cultural leaders, and spiritual teachers are referred to as Elders.

Also, an Elder can be really funny. Elders have a twinkle in their eye; they have both the innocence of a child and the deep wisdom of the ancient. They know that magic exists and are playful with it. They know how to balance things, creating harmony and connection.

How does somebody come to be considered an Elder? An indigenous Elder will never call himself or herself an Elder. What happens is that the community that they are from, the people, will recognize his or her wisdom—the fact that they are tradition bearers, healers, cultural leaders, and spiritual teachers. This is more than acknowledgment of their age; it is a term of respect for their lifetime commitment to embody, practice, and share indigenous wisdom. Through their actions, decisions, practices, and knowledge, Elders are seen for who and what they are, are sought for their wisdom, guidance, and counsel. In doing so, the people, the community, give them the title of Elder.

The wisdom that indigenous peoples, Elders in particular, have is more important than ever. And this wisdom is our interconnection, our circle of life, as represented so beautifully by the sacred eagle hoop.

### Why Is This Wisdom Needed?

Look around you. Look around in your community, town, city, state, country, and the world itself. Look at our media, our politics, our businesses, our culture. You will see that people act as if they are separate, alone, and have no relations. As a result, we think and behave in ways that cause needless suffering, further division, and reckless destruction. We act as if our behavior does not impact the circle of life, and as a result of that denial, we are out of harmony.

How do we get back into harmony? Indigenous wisdom tells us that we can do so by living in connection with all life—with all people, the earth, and spirit. The four sacred gifts can give us the support and guidance to get there.

### The Promise of the Four Sacred Gifts

The prophecy of the sacred eagle hoop is an urgent message for these urgent times. And, being an indigenous prophecy, it does not revolve around a single person, prophet, or hero. The focus of the prophecy is not on the messenger but rather on the message itself, and the collective community or tribe that holds the message. This is good news.

You and I, all of us, indigenous and non-indigenous, are meant to fulfill the message of the hoop with its four sacred gifts. The hoop prophecy does not predict the future; rather, it presents the probable positive or negative consequences of not heeding the original instructions from spirit. This is what is needed to joyfully fuel our hearts, thoughts, and actions in order to deepen our understanding, to live the truth, the reality, that we are all connected.

So if you do not remember where you came from, your culture, or your tribe, you have now found your Home. Welcome to this community, the community of human beings who accept these four gifts from the Pan-Indigenous Collective of Elders, and who will use their power to create harmony and connection with all other beings.

The time for bringing together the Medicines of the Great Hoop of Life has come. It is a time that has been prophesied by peoples all around Mother Earth for a long, long time, and so we can open our hearts to hope. ☺

—Pat McCabe, Navajo Elder

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Anita Sanchez, Ph.D., Aztec and Mexican-American, is a transformational leadership consultant, speaker, coach, and author of the new book, *The Four Sacred Gifts: Indigenous Wisdom for Modern Times*. She bridges indigenous teachings with the


latest science to inspire and equip women and men to enjoy meaningful, empowered lives and careers. For more information, visit [FourSacredGifts.com](http://FourSacredGifts.com). View article resources and author information here: [pathwaystofamilywellness.org/references.html](http://pathwaystofamilywellness.org/references.html).



WELLNESS LIFESTYLE

# PRESENT- TIME CONSCIOUSNESS

By James Peck, D.C.



**W**e are perfect, intelligent beings with very complex organs and systems that harmonize and function beautifully. We were designed to survive and thrive in a world of challenges. We're designed to forage for food, find and secure shelter, and create lasting art and language.

Somewhere we created a society affectionately known as "the rat race," in which we work intensely for multiple hours, squeeze family time into an exercise in quality versus quantity, and struggle with monetary issues, relationship crises, and burnout. Furthermore, we now have evolved into a sandwich generation in which many of us are being saddled with responsibilities of caring for both our children and our aging parents. All this creates a significant problem for our health.

It is generally accepted that the nerve system is the controller and coordinator of all the organs and systems of the body. Our nerve systems have a yin and yang relationship. The yin is known as the sympathetic nerve system. It is responsible for the fight-or-flight response: When confronted with a danger, such as a saber-toothed tiger, it produces the chemicals necessary for an active response—adrenaline, norepinephrine, cortisol, etc. These chemicals stimulate us so that we can respond appropriately, allowing us to run, attack, or defend, whatever physical reaction that will help us survive at that moment.

The yang is the parasympathetic system. It is responsible for the activities of rest: sleep, digestion, tissue regeneration, and reproduction. These activities do not require active participation, and therefore do not require the same energy expenditure.

Think of the yin as the accelerator of a car, and the yang as the brake. Most of the time the yang should be dominant, because we aren't constantly being attacked by tigers or other threats to our survival.

While in sympathetic dominance, we produce incredible amounts of energy so that we can react physically to the perceived danger. Running or fighting burns that energy, and when that crisis is over we can return to a relaxed state. The problem is our stressors today are generally not physical—they are deadlines, tension, worries over finances, concerns over responsibilities, relationship pressures, etc. And they are practically constant.

The Law of Conservation of Energy states that energy can neither be created nor destroyed. This Law of Thermodynamics essentially means that our bodies must dissipate any energy produced to respond to stress. Somewhere in the course of evolution, our fight-or-flight response has not adapted to this rat race. Even though our stressors are not so physically demanding, we produce the same chemicals as those required for running or combat. Since our modern stressors don't require much physical activity, we develop an energy imbalance, which our bodies must compensate for by tensing our muscles until the energy is used up. For a brief time this is efficient, but over a long period it becomes overwhelming, because the muscles are already taut—and that is when we have disharmony, pain, sickness, and disease.

Imagine for a moment that your body is an empty drinking glass, and that the stressors we encounter are water pouring into it. Over a short span the glass will fill, and any further water—stress—will simply spill out. That is the point of crisis where our health becomes compromised.

While in this perpetual state of sympathetic dominance, we tend to be on edge, forgetful, careless, and restless. Sleep is fitful and sporadic, because we are ready to jump up and respond to a crying baby, a fire alarm—whatever we subconsciously perceive could occur. I call this "fireman syndrome." When on duty, the fireman cannot rest because an emergency could happen at any time, and he or she has to be ready to immediately respond. The fireman sleeps with one eye open.

During sympathetic dominance we tend to rush, to lose things (keys, glasses), and we even injure ourselves unnecessarily (missing a step, banging our heads on car roofs as we enter, slipping when we fail to see things on the floor).

This state takes us out of present-time consciousness. It can be triggered by living in the past (never recovering from an early emotional trauma or slight), by living in the future (spending time worrying about what will happen), or by simply not prioritizing your personal needs (being the caregiver to your family, friends, or community).

Think back to the last time you had a fall, lost something important to you, or had an accident. Were you in present-time consciousness? Were you at ease, relaxed, and efficient? Or was your mind elsewhere while you operated on autopilot?

When you fly on a commercial airline, the flight attendants always inform you that if an emergency occurs, you should place the oxygen mask over your own nose and mouth before attempting to assist anyone else. This is because you cannot help anyone if you have passed out from lack of air. Even worse, you then become a burden in an already chaotic situation.

## IF YOU FIND YOURSELF TENSE, HURRIED, TIRED FROM FITFUL SLEEP, FORGETFUL, AND LOSING THINGS, RECOGNIZE THAT YOU ARE NOT IN PRESENT-TIME CONSCIOUSNESS.

This can serve as a valuable life lesson. Taking care of yourself—being “selfish”—is actually being selfless and assuring that you can be there for others and not be a burden. In the late 19th century, British philosopher Herbert Spencer stated, “The preservation of health is a duty. Few seem aware that there is such a thing as physical morality.” Somewhere in our Puritan upbringing we became brain-washed to believe that being selfish was inherently wrong and undesirable. It became confused with being self-centered, which is completely different.

*Selfish* merely means taking care of yourself, treating yourself with the respect you deserve, and accepting the responsibility of managing your own health and welfare. *Self-centered* means putting your interests before any others and lacking compassion and love for others. They should not be confused.

If you find yourself tense, hurried, tired from fitful sleep, forgetful, and losing things, recognize that you are not in present-time consciousness. This is serious and requires some intense introspection.

First, are you in the moment? Where are your thoughts? Are they trying to relive some traumatic memory from your youth? Are you spending more of your time worrying about the future? Are you critical and unloving toward yourself? It may be time to work on solutions.

If you are living in the past, try to determine what the problem was—perhaps a parental opinion that you were not adequate, a sibling’s hurtful treatment, or a teacher’s statement that caused trauma. If you can recognize the insult and then realize that it was someone else’s reality—that what they said or did was merely their perception, their action, and not gospel—you have the power to recognize the error of that action, to dismiss it, and to reprogram your unconscious with positive affirmations. As difficult as it may be, you then need to forgive the offender. You might never be able to understand them or condone their action, but you must forgive them to have closure. The act of forgiving is for you, not them. It’s been said that holding a grudge is like drinking poison and expecting the other person to die.

If you are constantly living in fear or concern about the future, recognize that it is unproductive, ineffective, and destructive. Whatever it is that concerns you,



worrying will not help. Recognize that there is only the present, and rather than fret about tomorrow, the best solution is to do what you can today and accept the result.

If these two issues feel overwhelming, seek therapy, but interview several therapists before you commit to one. Recognize that there is someone out there appropriate for you, but it might require patience and persistence to find that person. The effort will prove well worth it.

If your issue is a lack of self-love, an inability to treat yourself with the same respect and attention you give others, repeat daily affirmations, such as “I deserve this. I am important. I am a child of the universe, and I am perfect.” You may not believe this, but if you repeat this it will begin to resonate and you can reprogram that inner child. If our friends spoke to us in the manner our inner voice does, they would not be our friends for long! Recognize that you are important, and that self-work is worth the effort.

Furthermore, if you are experiencing these issues, realize you are not in balance. Your health is challenged, and your ability to be of service to others will eventually become compromised. One of the most important things you can do is be evaluated by a chiropractor for subluxation. Subluxations—misalignments in the spinal column interfering with nerve communication—are a common occurrence of sympathetic dominance, and adjustments help restore present-time consciousness.

We are perfect...but we still require and merit attention. 🍷



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# LOVE

## *for the unknown*

By Stephanie Libs, D.C.

After dating for eight years, followed by 14 months of planning, my husband and I finally tied the knot. Then, about six weeks before the wedding, we conceived. So, we thought, what better time than our wedding to announce our pregnancy? Everyone we loved and cared about would be there, and we could surprise them all at once. Upon completion of all the speeches and our thank-yous, Dean and I asked our parents to join us at the front of the room. We had them close their eyes and hold out their hands. When they opened their eyes they were holding onesies with the words “I love my grandma” and “I love my grandpa,” and we excitedly yelled out, “We’re pregnant!” The room exploded with excitement, cheers, laughter, and tears. All four soon-to-be-grandparents were overwhelmed with joy and couldn’t stop hugging us and each other. We were bombarded with love and support. It was a moment we will never forget.

Two days later I started to experience mild cramping and light spotting. I was uncomfortable but thought nothing of it. I read that implantation can cause spotting or bleeding, so I thought it was normal. After a few hours, the cramping increased and I began to worry, even calling the ER triage nurses at my local hospital to make sure what I was experiencing was within normal ranges. According to them it was, and there was nothing to worry about.

That night it was difficult to sleep. The bleeding and cramping increased to far worse than a normal period—I knew something wasn’t right. By the next morning the symptoms had increased, but I went to my office to see patients anyway. I had a full morning scheduled, but between appointments I somehow managed to call my midwife, and, with a trembling voice, explained what was happening. I’ll never forget the slow, soothing tone in her voice as she said “Stephanie, it sounds like you’re having a miscarriage.” Although her voice was soft, it hit me harder than a freight train. Panic immediately surged through my veins. I asked her what to do, desperately seeking an answer. She gave me options, but knowing

that I trust my body, she knew I would prefer little to no medical intervention. So I went home to spend time with my new husband of three days and cried.

It was not exactly what we expected during our first few days of marriage. I cried harder than I've ever cried before. Then the physical pain started. That afternoon I felt my uterus go through rhythmic contractions that grew more and more painful. I was still in denial. It took me hours to call my family and admit to them that things weren't picture-perfect. After all, how could this happen to me? I'm a chiropractor. I'm healthy. I specialize in pregnancy! How can I face my friends, my patients, and the birth community, who all listen to me talk about pregnancy and birth every day? I couldn't even keep a viable pregnancy. The self-blame kicked in. What did I do wrong? Photos of our wedding and our big announcement had been posted online, so even when the loss started, I was still receiving congratulatory messages.

I didn't leave my house for a week. I felt intense shame, but at the same time I felt compelled to be public about it. Like anything these days, it's not official until it's on Facebook. I took to my social media outlets to let the cat out of the bag. I assumed I'd get well wishes and condolences, but the feedback I received was completely unexpected. The number of women and even men who commented and sent me messages saying they had gone through the same thing was astounding. I realized I was not alone. This was the first step towards healing.

I began researching and learned that approximately 25 percent of women will experience a miscarriage at some time in their life. Most of these miscarriages occur in the first trimester, which is usually the time when we keep our pregnancy a secret. Why is that? There is so much fear placed around birth. We, as a society, have given our power to the white coat, monitors, procedures, and tests. We've lost our sense of connection to self. And with miscarriage afflicting so many, it's become normal to hide our vulnerabilities during those precious first few weeks.

For me, I wanted to share my pregnancy with everyone as soon as I found out. I'm glad I did, because it was the most exciting thing in my life. Telling everyone I was pregnant, then telling everyone that I miscarried, surprisingly facilitated an amazing amount of support. There were a few people who asked me why I even told anyone in the first place, and, why didn't I wait until 12 weeks to share the news. My answer was always, "Because I wanted to, that's why."

The fact that other people projected their need to justify my actions was just further proof that this common event was still a taboo subject that society preferred to turn a blind eye to. I'm so glad I was public about my loss, because it created a network that truly made me feel loved and supported by so many people. Studies show that progesterone increases when women talk to other women who are like them, and who have been through a similar experience. Progesterone is one of the main hormones that creates a

healthy uterine environment for a viable pregnancy. Could creating a tribe and talking about pregnancy help prevent loss during the first 12 weeks? How would we know, if we're not supposed to talk about it until we get through that "safe zone" of the first trimester?

For some expecting parents, the first weeks of pregnancy can be a sacred time and one that they might prefer to keep just between them, which is the route we decided upon the next time around. My husband and I conceived again three months after our loss. A positive pregnancy test on February 14th was the best Valentine's Day gift we could have ever received, and on that day we decided to share the news with only our family. I was nervous the entire 12 weeks. I didn't think my heart could take another loss, so I felt like I was constantly on edge. My logical mind knew the chances of a second miscarriage were lower. That didn't stop me from feeling fragile, however. Twelve weeks felt like 12 months, but once we got there, I was so excited to finally announce that we were pregnant. It felt so good to share with others, it made me wonder why I didn't tell people sooner. In October we met our beautiful baby girl, Aubree.

Each journey toward parenthood is unique and comes with its own set of challenges and celebrations. When women connect with each other, it's the storytelling that helps breed confidence and trust in the process. We've lost that sense of connection with the fear that is instilled in us through the media, Hollywood, and even our own doctors. It's taken me almost a year to write this article. I began with just a few bullet points shortly after our loss and I kept adding to them as new lessons unfolded. I believe that my miscarriage served a purpose for me. As difficult as it was, there was beauty in the pain, and the experience allowed me to connect more deeply to myself and the next pregnancy.

I'm still learning every day, and I hope my story can help facilitate healing for others. I still wonder what that child could have been. During those short six weeks, I sensed that he was a boy. I often wonder what he would have looked like, how his birth would have been, and what he would have grown up to be. But maybe he arrived just to say hello, and show me that getting pregnant was possible. And maybe he was teaching me how precious life can be, and not to take any future pregnancy for granted. Whatever it was, I'm grateful for the lessons.

Thank you, little one, for you have taught me great things—mostly to love and connect deeply. I hope we meet again. 🍀



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# THE POWER OF FEAR

By Father Ron Rolheiser, O.M.I.

**"F**ear is the heartbeat of the powerless." So writes Cor de Jonghe. That's true. We can deal with almost everything, except fear.

The late Belgian spiritual writer, Bieke Vandekerckhove, in her very fine book, *The Taste of Silence*, shared very honestly about the demons that beset her as she faced a terminal illness at age 19. She singled out three particular demons that tormented her as she faced the prospect of death—*sadness, anger, and fear*—and she suggested that we can more easily cope with the first two, sadness and anger, than we can with the third, fear. Here's her thought:

*Sadness can be handled through tears, through grieving. Sadness fills us like a water glass, but a glass can be emptied. Tears can drain sadness of its bite. We have all, no doubt, experienced the release, the catharsis, that can come through tears. Tears can soften the heart and take away the bitterness of sadness, even while its heaviness remains. Sadness, no matter how heavy, has a release valve. So too does anger. Anger can be expressed and its very expression helps release it so that it flows out of us. No doubt too we have also experienced this. The caution, of course, is that in expressing anger and giving it release we need to be careful not to hurt others, which is the ever-present danger when dealing with anger. With anger we have many outlets: We can shout in rage, beat a drum, punch a bag, use profanity, physically exercise until we're exhausted, smash some furniture, utter murderous threats, and rage away at countless things. This isn't necessarily rational and some of these things aren't necessarily moral, but they offer some release. We have means to cope with anger.*

*Fear, on the other hand, has no such release valves. Most often, there's nothing we can do to lighten or release it. Fear paralyzes us, and this paralysis is the very thing that robs us of the strength we would need to combat it. We can beat a drum, rage in profanity, or cry tears, but fear remains. Moreover, unlike anger, fear cannot be taken out on someone else, even though we sometimes try, by scapegoating. But, in the end, it doesn't work. The object of our fear doesn't go away simply because we wish it away. Fear can only be suffered. We have to live with it until it recedes on its own. Sometimes, as the Book of Lamentations suggests, all we can do is to put our mouth to the dust and wait. With fear, sometimes all we can do is endure.*

What's the lesson in this?

In her memoirs, the Russian poet Anna Akhmatova recounts an encounter she once had with another woman, as the two of them waited outside a Russian prison. Both of their husbands had been imprisoned by Stalin, and both of them were there to bring letters and packages to their husbands, as were a number of other women. But the scene was like something out of the existential literature of the absurd.

The situation was bizarre. First of all, the women were unsure of whether their husbands were even still alive, and were equally uncertain as to whether the letters and packages they were delivering would ever be given to their loved ones by the guards. Moreover, the guards would, without reason, make them wait for hours in the snow and cold before they would collect their letters and packages, and sometimes they wouldn't meet the women at all. Still, every week, despite the absurdity, the women would come, wait in the snow, accept this unfairness, do their vigil, and try to get letters and packages to their loved ones. One morning, as they were waiting, seemingly with no end in sight, one of the women recognized Akhmatova and said to her: "Well, you're a poet. Can you tell me what's happening here?" Akhmatova looked at the woman and replied, "Yes, I can!" And then something like a smile passed between them.

Why the smile? Just to be able to name something—no matter how absurd or unfair, no matter our powerlessness to change it—is to be somehow free of it, above it, transcendent in some way. To name something correctly is to partly free ourselves of its dominance. That's why totalitarian regimes fear artists, writers, religious critics, journalists, and prophets. They name things. That's ultimately the function of prophecy. Prophets don't foretell the future, they properly name the present. Ecumenical teacher Richard Rohr is fond of saying, "Not everything can be fixed or cured, but it should be named properly." Psychologist James Hillman had his own way of casting this: "A symptom suffers most when it doesn't know where it belongs."

This can be helpful in dealing with fear in our lives. Fear can render us impotent. But naming it properly, recognizing where that symptom belongs and how powerless it leaves us, can help us to live with it, without sadness and anger. ☺

Used with permission of the author, Oblate Father Ron Rolheiser.



Father Ron Rolheiser has inspired many people with his retreats and workshops. Along with his academic knowledge in systematic theology and philosophy, he has become a popular speaker in the areas of contemporary spirituality and religion and the secular world. Father Ron still is very involved in the life of his large extended family, enjoying their annual hiking trips and New Year's celebrations. Most Christmases you will find him in his home church, St. Donatus, near the former family farm in Cactus Lake, Saskatchewan. Currently, he is serving as president of the Oblate School of Theology in San Antonio, Texas. He can be contacted through his website, [ronrolheiser.com](http://ronrolheiser.com). View article resources and author information here: [pathwaystofamilywellness.org/references.html](http://pathwaystofamilywellness.org/references.html).

# THE MIRACULOUS MIRROR EFFECT OF GROUP INTENTION

By Lynne McTaggart

**I**n 2005 I had grown especially curious about the implication that thoughts are an actual *something* with the capacity to change physical matter.

A number of bestselling books had been published about the law of attraction and the power of intention, but I maintained a certain incredulity, overwhelmed by a number of awkward questions. I wondered if it was a true power, and how all-purpose it was. Were we talking about curing cancer or shifting a quantum particle? And what happens when lots of people are thinking the same thought at the same time? Does it magnify the effect?

Quantum physics and the new science seemed to change everything we thought we knew about our innate human capacities, and I wanted to test it to the limit.

Like a 21st-century doubting Thomas, I was essentially looking for a way to dissect magic.

My next book, *The Intention Experiment*, intended to do this by enlisting my readers in an ongoing scientific experiment, as the experimental body of group intenders. After the book's publication in 2007, I gathered together a consortium of scientists from prestigious universities. Periodically I would invite my Internet audience to send one designated, specific thought to affect some target in a laboratory, set up by one of these scientists, who would then calculate the results to see if our thoughts had changed anything.

Eventually the Intention Experiment evolved into the world's largest global laboratory, involving several hundred thousand of my international readers from more than 100 countries in some of the first controlled experiments on the power of mass intention. Even the simplest was carried out under rigorous scientific conditions.

As it turned out, the experiments did work. In fact, they *really* worked. In the 30 experiments I've run to date, 26 have evidenced measurable, mostly significant change.

After early successes in making seeds grow faster and changing certain properties of water (like pH), it was time for us to test whether this group mind we were measuring in the global experiments had the power to lower violence and restore peace in a war zone.



In 2008, I assembled a team of scientists, including Dr. Jessica Utts, a professor of statistics at University of California at Irvine. Dr. Utts wanted to be able to use more than two years' worth of weekly violence data, starting from two years before our experiment until a few months afterwards, in order to model a prediction of the likely average violence levels we could expect after our intention, if the fighting carried on just as it had done in the previous two years. If there was a large difference, we'd have a compelling indication that our intention had had an effect.

For our target we settled on Sri Lanka, where a 25-year war had raged between the Tamil Tigers, the well-armed and trained rebel forces, and the Muslims and Sinhalese, the two majority communities of different faiths. In 2008 there was still no end in sight to either the violence or the Tigers' campaign to create an independent state for the Tamil people. By the time of our experiment, the Tigers had choked off the entire north of the country.

The Foundation for Coexistence (FCE) in Colombo, Sri Lanka, a humanitarian organization focusing on conflict resolution, had created a careful recordkeeping system of weekly casualties, and agreed to supply us with the necessary data.

More than 15,000 people signed up to participate in our experiment from more than 65 countries. We sent our collective intention for 10 minutes every day for eight days, starting on September 14 and culminating on September 21, the International Day of Peace.

The first feedback about the effect of our efforts was alarming, suggesting that violence had vastly *increased* during our intention week. The North experienced a sudden surge of attacks and killings, largely brought on by the Sri Lankan government, which mounted full-on land, sea, and air attacks to drive the Tamil Tigers from their last strongholds in the north of the island.

But then in the immediate aftermath of the experiment, both deaths and the number of people injured fell dramatically—the death rate by 74 percent, and injuries by 48 percent. Injury levels remained down 43 percent from what they were in the months before the experiment started.

From the FCE's statistics, violence had plummeted to well below what Dr. Utts's model predicted should have occurred during the weeks after the experiment. Deaths, which had been steadily rising nearly week on week to the record high of our experiment, plunged a week later, back to levels that hadn't been seen since before the fighting had intensified.



Of course, this could all have been coincidence.

But in the months that followed, the events during that week in September proved pivotal to the entire 25-year conflict. During that week, the Sri Lankan army had won a number of strategically important battles, which enabled them to turn around the entire course of the war.

In January 2009, the army recaptured the entire northern peninsula, liberating the entire Vanni district, the target of our intention. After all the decisive wins in September and January, the 25-year, intractable civil war ended in a bloody finish on May 16, 2009, nine months after our experiment.

Did we do this?

Short answer: Who knows?

Certainly, when we started in September, the rebels still had a tight grip on the North, and there was no foreseeable end to the war. When noting that the most decisive battles in the entire 26-month period occurred during our very intention week, Dr. Utts had only two words to say: "Weird, huh?"

In the end, there are too many variables to say that our experiment was completely responsible. Nevertheless, there is no doubt that the week the Intention Experiment had been carried out had been the most pivotal of any during the entire 25 years of the conflict.

But the most interesting part of the study wasn't the effect of the target. A more compelling part of the story had to do with the short- and long-term effects on the experiment's participants, which I discovered when reading the surveys I'd asked them to fill out about their experiences.

"It's as if my brain is wired to a bigger network," wrote one participant on his survey. Thousands more described a similar phenomenon:

"I felt like I stepped into a palpable stream of energy along my arms and hands, which felt like it had direction and force and mass."

"My whole body was tingling, and I was having goose bumps."

"Sort of like what I imagine it would be like to be locked in a tractor beam, like those described on *Star Trek*."

"The first day, I started sobbing," wrote Diana from New Orleans. "Not from sadness, but from how overwhelming it felt to be connected to so many people. It was *powerful*."

The participants had been plunged into an altered state of consciousness, simply by holding on to the power of a collective thought.

But that wasn't all. Something about praying in a group caused deep, possibly permanent psychological



transformation in many participants, and improvements in their daily lives. The experience appeared to carry on long after the experiment was over for most of my participants, as though they had been touched by something deeply profound.

Nearly half reported that they felt more peaceful than usual, a feeling of peace that mostly affected their dealings with other people. More than two-thirds noted some change in their relationships; more than a quarter felt more love for their loved ones, and another quarter said they were getting along better with people they normally dislike or argue with. Almost half claimed to feel more love for everyone with whom they came into contact, and this connection seemed to carry on after the experiment was over.

These rebound effects seem to mirror the experiment itself. When we focused on peace, people began being peaceful. In a later experiment of mine attempting to heal a Gulf War veteran with post-traumatic stress disorder, thousands had reported some sort of pronounced physical improvement.

"My carpal tunnel injury improved."

"Last 10 days I have regular digestion (I had constipation for almost 20 years)."

"The pain in the knee is completely gone."

"I used to have colon problems, not anymore. :)"

"No longer experiencing sciatic pain."

"I sleep better, and anxiety and panic attacks have disappeared."

The positive effects occurred in other areas, too. Ingrid Pettersson's husband died in late 2013, only four weeks after being diagnosed with a rare cancer. Although his oncologist had been confident that the cancer was treatable, he had been deeply affected by the pessimistic attitude of his home-health nurses and their gloomy prognosis, particularly their repeated pronouncements that he'd never resume normal activity like driving again.

Ingrid stood by, watching helplessly as her husband seemed just to give up.

Because of her husband's rapid decline and death, Ingrid had to close his thriving business and move out of their new apartment in Gothenburg, Sweden. Within months she was beset with financial difficulties. For most of the early part of that year she was overwhelmed by shock, grief, and depression at her dramatic loss and her suddenly changed circumstances.

Several months after her husband's death, Ingrid



“THE FIRST DAY, I STARTED SOBBING,”  
WROTE DIANA FROM NEW ORLEANS. “NOT FROM SADNESS,  
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decided to join one of our large-scale experiments, targeting a person with post-traumatic stress disorder.

After participating, her debilitating grief vanished.

"Since your last experiment, it's all gone," she wrote.

"I couldn't believe it. It's just amazing. The negativities and even my grief after my husband died did not seem to affect me as much as it had done during the last months." And best of all, she said, "I got back the flow in my life." After the experiment she decided to start a new career organizing workshops in energy healing in Gothenburg and Stockholm.

A year after I began the global experiments I decided to try to scale down the entire process in my workshops by placing participants in small groups of about eight, just to see what would happen if group members tried to heal one of their group through a collective healing intention.

These Power of Eight groups experienced a transcendent state identical to that of the large Peace Intention Experiment participants, but in many instances, both senders and receivers reported instant, near-miraculous healings.

Marek's multiple sclerosis had made it difficult for her to walk without aid. The morning after she was the target of a Power of Eight group, she arrived at the workshop without her crutches.

Marcia suffered from a cataract-like opacity blocking the vision of one eye. The following day, after her group's healing intention, she claimed that her sight in that eye had been almost fully restored.

Heddy in Maarssen, the Netherlands, suffered from an arthritic knee. After her Power of Eight group did a healing intention, Heddy was able to climb up and down the stairs easily. "I just walked downstairs normally."

Diane in Miami had so much pain in her hip from scoliosis that she'd had to stop working out. As she was concentrating on the intention, she felt intense heat and a rapid-fire, twitching response in her back. The next day she declared, "It's like I have a new hip."

The healings were even more dramatic in my master classes, when I put people in groups of eight and asked them to meet weekly and intend for each other. Mitchell Dean, one of the participants, had suffered from depression for as long as he could remember. At times, he would descend into major depression, where he harbored thoughts of suicide all day long. To be a 44-year-old psychologist suffering from depression was doubly difficult, and as an integrative therapist, over the years he'd tried everything, from diet and supplements to Chinese herbs and chiropractic, but nothing had seemed to help.

Not long after Helios, his "master class" group, sent an intention to help him with his condition, Mitchell was inspired to work with a chiropractor, who ran 46 tests on him. When he got the results back, 45 were fine, but the 46th showed that one of his liver filtration systems wasn't

working. That meant that some of the toxins his body took in were going directly to his brain. Mitchell started a new regimen of Chinese medicine, diet, and supplements, and this time, they worked.

Although the depression returned for a day or two now and then, it had subsided. "Holy cow," he thought at one point, "I feel a lot better." But the most profound effect on himself occurred whenever he held an intention for someone else. "It just feels like there's more good fortune that comes my way," he said. "Something in me feels more central, more grounded, more hooked up—like a conduit to spirit."

There have been thousands more. Intention in a group, whether large or small, creates what could only be described as an ecstasy of unity—a palpable sense of oneness. A cosmic power seems to work through us, breaking down separation among individuals, allowing them to experience the "God consciousness" of pure connection.

Perhaps praying together as a group affords a glimpse of the whole of the cosmos, the closest you can get to an experience of the miraculous. And it may be that this state, like a near-death experience, changes you forever. ☺

Excerpted from *The Power of Eight* by Lynne McTaggart, which includes full instructions about how to do group intention and construct your own Power of Eight group.



Lynne McTaggart is one of the central voices in the new consciousness movement. She is the award-winning author of seven books, including worldwide bestsellers *The Field*, *The Intention Experiment*, *The Bond*, and the forthcoming *The Power of Eight*. She also serves as

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# Creating Your Own Power of Eight Circle

By Lynne McTaggart

**A**ssemble a group of eight like-minded friends who are open to the possibility of healing and intention. You can use a book group, a church group, or the members of your neighborhood. It's not necessary to be physically present with the members of the group. A virtual connection, in my experience, works just as well. It's also not strictly necessary to have exactly eight people, but eight is the optimum number. I would suggest that your group be no fewer than six and no more than 12, so that you have enough of a critical mass to feel like a group, but not so many that you get lost in it.

1. Ask if any of the members of the group with a healing challenge of some sort (emotional or physical) would like to be the target of the healing intention. Allow the person nominated as the recipient to describe her problem in detail.
2. Spend a few moments talking over and designing the intention statement that you will all hold together.
3. Gather around in a circle. Either join hands or place the nominated subject in the middle of the circle, as every other member of the group places one hand on the subject, like the spokes of a wheel. (You can embody this process virtually, through visualization, as a way to increase your intention and focus.)
4. Have the members of the group close their eyes and concentrate on inhaling and exhaling. Each should hold the intention statement in her mind while imagining, with all five senses, the intention recipient as healthy and well in every way. All members should then send out the intention through their hearts. The intention recipient should remain open to receive.
5. After 10 minutes, gently end the healing intention and have everyone take a few moments to "come back" into the room. First ask the intention recipient to describe how he feels, and if he has experienced any changes, positive or negative. All the other members may then take turns sharing experiences. Take note of any feelings of palpable oneness, as well as any improvement in the conditions of both senders and receivers.
6. With time, begin to select targets outside your group.
7. Keep a careful note of any monthly progress in your own life: your health, your relationships, your career, your life's purpose. 🌀



*Lynne McTaggart is one of the central voices in the new consciousness movement. She is the award-winning author of seven books, including worldwide bestsellers *The Field*, *The Intention Experiment*, *The Bond*, and the forthcoming *The Power of Eight*. She also serves as editorial director of *What Doctors Don't Tell You* (WDDTY.com), one of the world's most highly praised health publications. Lynne and her husband, WDDTY co-founder Bryan Hubbard, live and work in London. For more information, visit [LynneMcTaggart.com](http://LynneMcTaggart.com). View article resources and author information here: [pathwaystofamilywellness.org/references.html](http://pathwaystofamilywellness.org/references.html).*





# The Power of Thought

By James Goodlatte

Experts and evidence suggest that positive thinking can shape the body, heal it internally, and even nurture a healthier child during pregnancy.

A pregnant woman's thoughts have a physical connection to her unborn child. "Everything the pregnant mother feels and thinks is communicated through neurohormones to her unborn child, just as surely as are alcohol and nicotine," says Dr. Thomas Verny. Verny is the founder of the Association for Prenatal and Perinatal Psychology and Health (APPPAH) and its journal, the *Journal of Prenatal and Perinatal Psychology and Health*; his books and professional publications have established him as one of the world's leading authorities on the effects of prenatal environment on personality development.

Medical dictionaries define emotion as a mental and physical state, referring to the hormones and other molecules associated with emotion. Deepak Chopra, M.D., further bridges the gap between the mental and physical state when he writes, "Thoughts that we feel are called emotions."

A pregnant woman's emotions are created based on the way she perceives her pregnancy, baby shower plans,

nursery decoration, marriage, work, health, or anything else. A pregnant woman's thoughts are the precursor for her emotions. And her emotions are the precursor for the neurohormones Verny refers to.

In *Magical Beginnings, Enchanted Lives*, Chopra explains what pregnancy research has revealed: "When a pregnant mother is anxious, stressed, or in a fearful state, the stress hormones released into her bloodstream cross through the placenta to the baby. Hundreds of studies have confirmed that chemicals released by the pregnant mother's body are transported into the womb and affect the unborn baby."

Negative thoughts are often the root cause of a fear-based stress response. "Stress activates the unborn child's endocrine system and influences fetal brain development," writes Chopra. "Children born to mothers who had intensely stressful pregnancies are more likely to have behavioral problems later in life."

Verny adds, "Studies show that mothers under extreme and constant stress are more likely to have babies who are premature, lower than average in weight, hyperactive, irritable, and colicky."

“USED BY ANCIENT MEDICINE MEN, SHAMANS, AND YOGIS FOR MILLENNIA, VISUALIZATION WAS LONG THE FIRST LINE OF DEFENSE AGAINST DISEASE.”

—DR. THOMAS VERNY

Backing up those experts, cell biologist and neuroscientist Bruce Lipton, Ph.D., writes, “When passing through the placenta, the hormones of a mother experiencing chronic stress will profoundly alter the distribution of blood flow in her fetus and change the character of her developing child’s physiology.”

On the flip side of the emotional-stress spectrum, something else occurs. “Positive maternal emotions have been shown to advance the health of the unborn child,” writes Verny. “Thoughts which infuse the developing baby with a sense of happiness or calm can set the stage for a balanced, happy, and serene disposition throughout life.”

Deepak Chopra agrees: “When you feel joyful, your body produces natural pleasure chemicals called endorphins and encephalins. When you are peaceful and relaxed, you release chemicals similar to prescription tranquilizers. Without stress, your baby’s nervous system works smoothly. When you’re calm and centered, your baby is able to grow peacefully.”

In *Nurturing the Unborn Child*, Verny suggests 47 exercises that a pregnant woman can perform throughout pregnancy. One of these is creative visualization. This form of mental imagery can program an expectant mother’s subconscious thoughts, changing perceptions and responses from negative to positive. Verny writes that it “has helped cure disease, enhance performance, and improve state of mind. Used by ancient medicine men, shamans, and yogis for millennia, visualization was long the first line of defense against disease.”

Research has confirmed that imagery can alter blood flow, grow healthy cells, and destroy cancer cells. Lipton has even suggested that a pregnant mother can affect her unborn child’s genetic development. Whether it’s called imagery, visualization, meditation, or hypnosis, decades of research have established this process for generating a multitude of tangible changes in the mental, emotional, and physical body.

If you are a pregnant woman, try these visual exercises: In a place that is free of interruptions, close your eyes and practice seeing, feeling, hearing, smelling, and even tasting

your way into a relaxed feeling, perhaps bringing attention toward your developing baby. The key is to gently feel ease as you flow through this imagery.

Imagine as many senses as you can, immersing yourself in the feeling. Use the richness of your imagination, and go on a daydream. If other thoughts enter your mind, patiently return to your happy self, healthy baby, or simply a place of ease.

Similar to how actors develop emotions on cue, practicing positive thoughts and feelings will branch neurons and wire parts of your brain to respond accordingly. The more you practice, the faster and better you will learn to retrieve those emotions.

An example of more in-depth guided imagery:

- *Imagine your growing baby.*
- *Maybe she is 1 centimeter, or maybe 10 centimeters.*
- *Visualize what a healthy child looks like.*
- *Sense what a healthy child feels like.*
- *Hear what a healthy child sounds like.*
- *How does his heart pump blood?*
- *How do her arms move?*
- *How are his cells growing?*
- *See your little one smile in the womb.*
- *Hear her laugh, and feel her move in joyful motion.*

There is no right or wrong. Let your five-minute daydream flow however a healthy child may be imagined. 🌀



*James Goodlatte is a holistic health coach, corrective exercise practitioner, speaker, author, and professional educator. His passion is to heal families by inspiring the use of natural methods and by building a global team of fitness and health professionals to reduce infertility,*

*avoid mechanized childbirth, and reduce chronic disease in our infants. As the founder of Fit For Birth Inc., he is a driving force for providing continuing-education credits for the pre- and postnatal world. His articles have been published in a dozen languages and have inspired contact from pre- and postnatal women as well as health professionals in more than 150 countries. View article resources and author information here: [pathwaystofamilywellness.org/references.html](http://pathwaystofamilywellness.org/references.html).*

# How Chiropractic Reduces



# Interference at Birth

Written by Ian Shtulman, D.C. | PHOTOGRAPHY BY JAMEE FINK



Lindsay was in labor all day. Her water had broken nearly 24 hours before and her progression was slow; her midwife, Elizabeth Charron of the Palms Birth House, was uncertain if she'd be able to continue at the birth center. That's when she reached out to me for some late-night chiropractic support.

In the calmness of the quiet birth center at night, Lindsay lay on the chiropractic table, specially made to accommodate her belly. I delivered a gentle adjustment with the intent of restoring normal pelvic structure and

motion, releasing unnecessary tension in the uterine and pelvic floor muscles, and facilitating the normal progression of birth. And that's what happened: Almost immediately Lindsay noticed her contractions increased in frequency and intensity. Elizabeth noticed the change, too. "After hours of struggling with her labor, she was adjusted and seemed to surrender to the sensation of birth," she recalls. "Things progressed quickly from there."

A couple hours later, Lindsay welcomed baby Scarlett into her arms, peacefully and surrounded by a loving husband and team. "It was really incredible," she says. "With the help of my husband, midwife, chiropractor, and the birth assistant, I was able to gently and peacefully give birth to my baby girl."

One member of the birth team wasn't surprised. "I always suggest chiropractic





when labor seems to be taking long,” says doula Samara Andreadis of the Orchid Nest, who was serving as Elizabeth’s assistant. “To be honest, I feel like my clients always benefit from a chiropractic adjustment. It helps with all labors, fast or slow, and I often see labor pick up and progress after an adjustment.”

“I tell my clients I get nothing out of recommending chiropractic other than it makes me look really good,” adds Andreadis, laughing.

“It was amazing how her labor changed quickly after she was adjusted. What an amazing experience to witness the birth of baby Scarlett!” wrote photographer Jamee Fink; this was her first time photographing a birth, and she captured the beautiful images on these pages.



All expectant moms should receive chiropractic care for a more comfortable pregnancy and prepare their body for birth. We should strive for chiropractic to be available at every birth, for every mom and every baby, everywhere. Lindsay did all the work; chiropractic just helped reduce any interference.

Lindsay is the epitome of what's possible when a mom taps into her innate power and chooses a supportive birth team to help. "There is nothing more empowering than being surrounded by people that support you and knowing that your body is doing exactly what it's supposed to do," she says. Her story will likely inspire more women to seek the same amazing experience. Hopefully chiropractic will be available for them, too. 🍷



*Dr. Ian Shtulman is a second-generation chiropractor in private practice in Palm Beach County, Florida. Soon after graduating from Life University with the Philosophy Distinction award, he became certified in chiropractic pediatrics through the International Chiropractic Pediatric Association. His passion for perinatal chiropractic led him to being the in-house chiropractor for the Palms Birth House, a free-standing birth center, and as a CE speaker for chiropractors, midwives, and childbirth educators. He has fostered relationships with OB/GYNs and pediatricians and is particularly interested in establishing subluxation correction as a routine component of prenatal and pediatric healthcare. View article resources and author information here: [pathwaystofamilywellness.org/references.html](http://pathwaystofamilywellness.org/references.html).*

# The True Meaning of Evidence-Based Practice

By Pathways Authors

**C**hiropractors that run evidence-based practices are able to provide patients with adjusting techniques, recommendations, and advice for wellness and health management that reflect knowledge and experience confirmed by the most up-to-date information. New studies are released all the time, each requiring an analysis of its implications, and a practitioner with a busy practice hardly has the time to pore over studies, and will have little patience and too much wisdom to adapt to each new whim of the day.

A true evidence-based practice, then, is more than research alone. Dr. David Sackett, in his paper “Evidence Based Medicine: What It Is and What It Is Not,” describes this relatively new approach as:

*The conscientious, explicit and judicious use of current best evidence in making decisions about the care of the individual patient. It means integrating individual clinical expertise with the best available external clinical evidence from systematic research.*

In the eye of a perfect storm, so to speak, a true evidence-based practice resides at the intersection of current evidence, clinical expertise, and knowledge of the individual patient's needs and desires.

## History of Evidence and Chiropractic Care

The field of chiropractic care has always been a balance of generational wisdom and modern discovery. With its inception as a formal practice of healthcare in 1895, criticism and skepticism dominated the narrative. The profession has largely overcome these prejudices, as demonstrated by its emerging popularity.

Within modern chiropractic care, a growing focus on this intensive form of evidence-based care is changing the level of expertise that providers can (and should) offer. Chiropractic students utilizing a curriculum that favors evidence-based practice have shown greater retention and ability to improve their skills. While there is still room for improvement, an evaluation of Australian chiropractors indicated that more than half received training in evidence-based practice, and two-thirds were proficient in reading and evaluating studies to affect their practices.

Schools and philosophies adapt over time to include more education surrounding the use and interpretation of research, but we know that studies alone do not make an evidence-based practice. As Dr. Sackett writes,

*External clinical evidence can inform, but can never replace, individual clinical expertise, and it is this expertise that decides whether the external evidence applies to the individual patient at all and, if so, how it should be integrated into a clinical decision.*

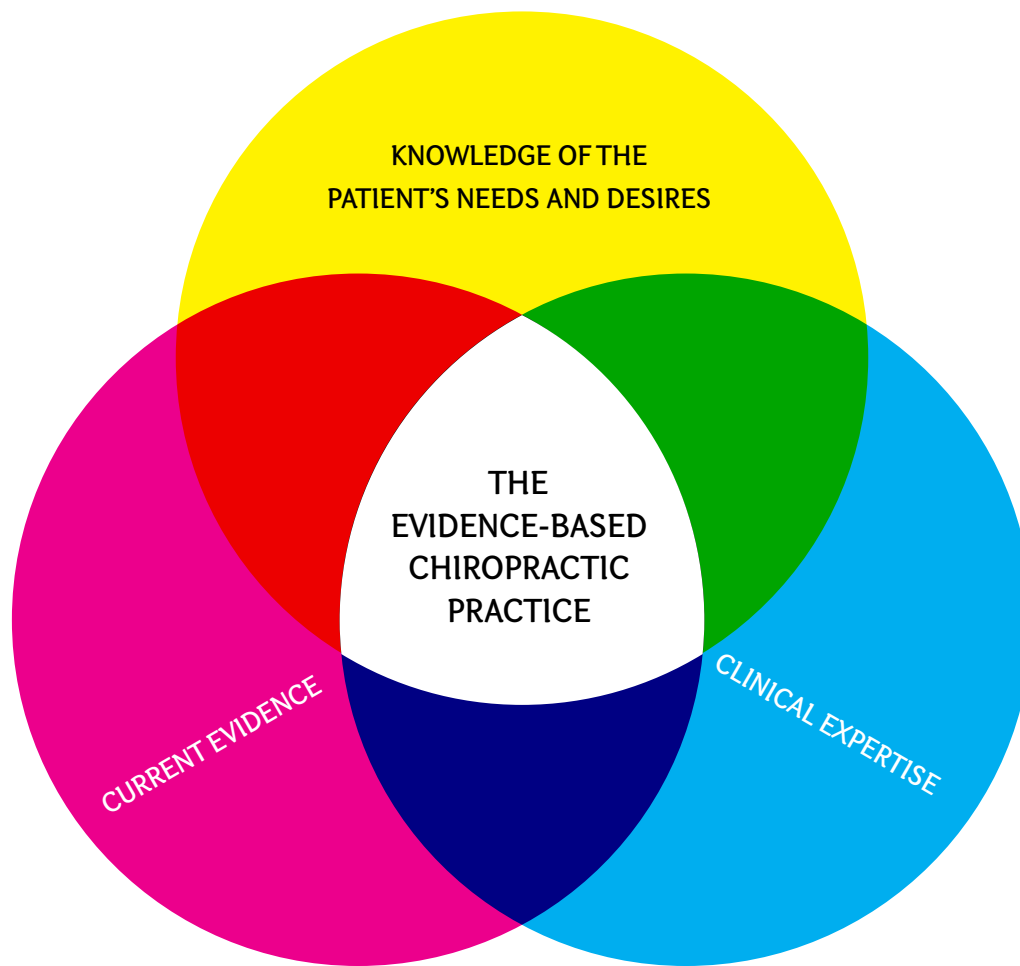
With chiropractic care being among the most hands-on, patient-driven practices in healthcare today, developing and improving upon an evidence-based practice comes naturally. Indeed, the care of our patients is what drives the desire to pursue clinical evidence. As Dr. Sackett so eloquently put it, “[Evidenced-based practice], then, is a process of life-long, self-directed learning in which caring for our own patients creates the need for clinically important information.”

## Evidence-Based Practice in Action

In order for chiropractors to apply evidence-based philosophy and techniques in their practices, they must look at each step of their interaction with patients and weigh it against the priorities of patient value, up-to-date information, and clinical expertise. The Duke University Medical Center broke this down practically into six steps:

1. Assess the patient
2. Ask the question
3. Acquire the evidence
4. Appraise the evidence
5. Apply the information
6. Self-evaluate the experience

Rather than an attempt to keep up with all new evidence and theories, an evidence-based practitioner takes each patient's issues and concerns into consideration in light of the data available. These steps take the care provider through the process of thoroughly researching an individual's circumstance to determine the best course of action. This keeps the patient at the forefront, ensuring that the doctor has spent time with them to understand their situation as fully as possible.




By first assessing the patient, the provider can identify the problem that needs to be resolved, then frame it as a specific question to be researched, such as whether a particular adjusting technique, supplement, or lifestyle change has been shown to benefit a specific issue. At that point, the question at hand can guide the practitioner in his or her research.

For patient-focused, integrative care providers, there is no one-size-fits-all answer. If there is a conclusive answer given, the study itself must have been conducted with the highest quality, with variables as close to the patient's circumstance as possible if it is to be considered relevant. By self-assessing after each encounter of this sort, the care provider is able to hone his or her practice and improve over time.

#### **ICPA Chiropractors and Evidence-Based Practice**

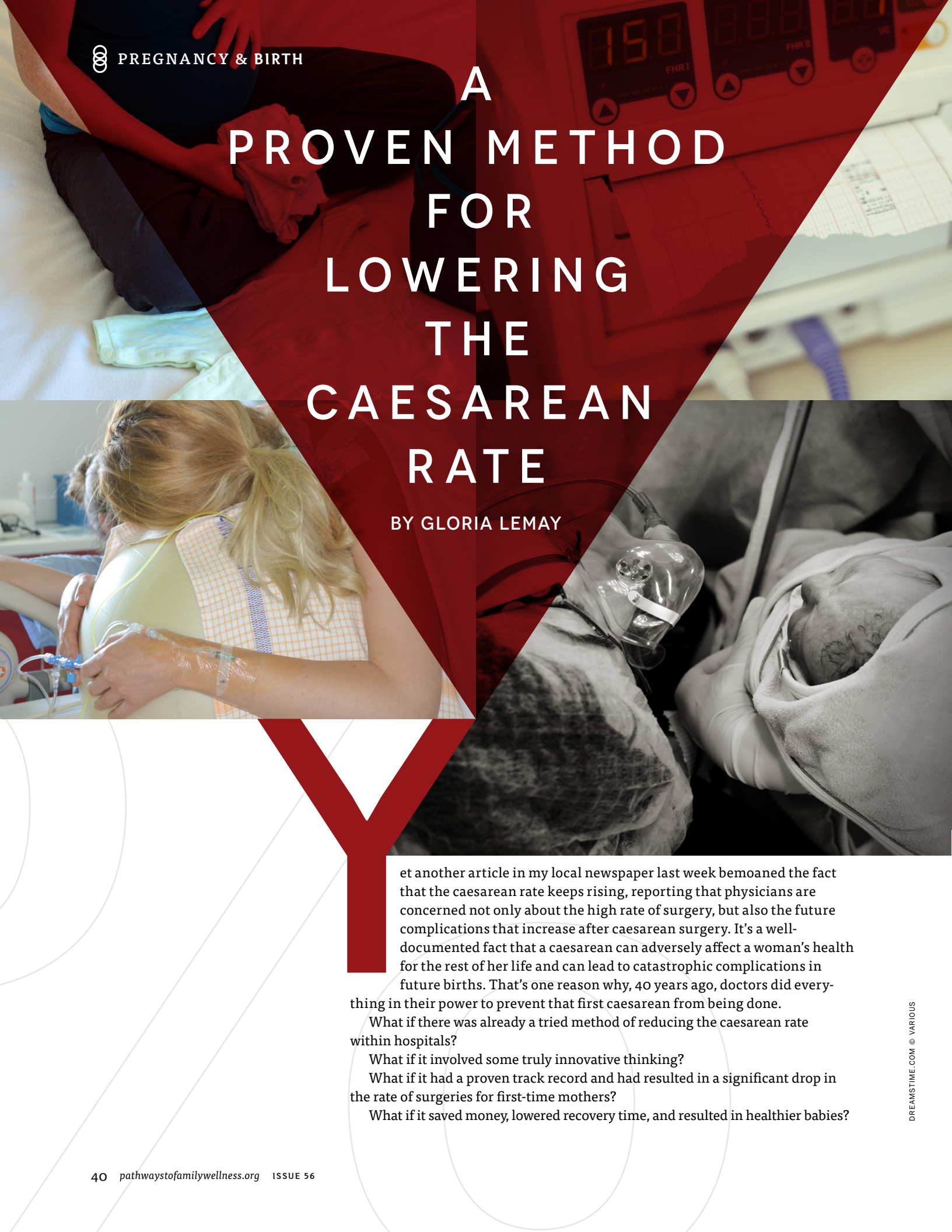
Chiropractors who are members of the International Chiropractic Pediatrics Association (ICPA) are committed to evidence-based care. Within our Practice-Based Research Network, we are constantly evaluating the evidence against the wealth of “generational” professional knowledge,

studying concerns that are applicable to chiropractors that are active in the field, and attempting to answer some of the questions that their patients are facing.

To borrow phrasing from Dr. Sackett, evidence-based practice does not exist in an ivory tower, apart from the day-to-day efforts of care providers. It also does not require a statistician in the back of the office constantly analyzing reports as they come in. A truly evidence-based practice is simply a care provider who listens to patients, seeks out relevant information on their concerns, weighs that data against the history of the profession and the history of the individual, and guides the patient to the best possible solution. Nurturing an understanding of the information available and a desire to connect with individuals where they stand, any chiropractor—and, indeed, any care provider—can (and should) create this environment in his or her office. 

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View article resources and author information here: [pathwaystofamilywellness.org/references.html](http://pathwaystofamilywellness.org/references.html).



# A PROVEN METHOD FOR LOWERING THE CAESAREAN RATE

BY GLORIA LEMAY

Yet another article in my local newspaper last week bemoaned the fact that the caesarean rate keeps rising, reporting that physicians are concerned not only about the high rate of surgery, but also the future complications that increase after caesarean surgery. It's a well-documented fact that a caesarean can adversely affect a woman's health for the rest of her life and can lead to catastrophic complications in future births. That's one reason why, 40 years ago, doctors did everything in their power to prevent that first caesarean from being done.

What if there was already a tried method of reducing the caesarean rate within hospitals?

What if it involved some truly innovative thinking?

What if it had a proven track record and had resulted in a significant drop in the rate of surgeries for first-time mothers?

What if it saved money, lowered recovery time, and resulted in healthier babies?

Would you think that method would be adopted all over North America right away? Think again. This project was undertaken at British Columbia Women's Hospital. It was a success...and it was dropped once the project was complete, resulting in a re-increase of the caesarean rate. No reason for discontinuing the project has ever been given.

The "First Births Project" was undertaken at B.C. Children's & Women's Health Centre in Vancouver. It was the first phase of a continuous quality improvement project with the stated aim of "lowering the caesarean section rate." Its start date was January, 1996. The target objective was to lower the caesarean rate by 25 percent for nulliparous women (those who had never given birth), while maintaining maternal and infant outcomes, within 6 months of implementing solutions.

Staff from all departments of the hospital were brought together to brainstorm what might be causing the high rate of caesareans. Many of the ideas thrown out were not under the control of the hospital but, in the end, four practices were identified as possibly contributing to the high rate of surgical births.

1. Women were being admitted to the hospital too early (before reaching 4 cm dilation, active labor).
2. Fetal surveillance by electronic fetal monitoring (continuous electronic fetal monitoring has been proven to increase the cesarean rate with no improvement to the health of the baby).
3. Too early use of epidurals (women who get an epidural before 8 cm dilation are at increased risk of surgery).
4. Inappropriate induction (inducing birth before 41 weeks gestational age with no medical indication).

Teams of nurses were assigned to do an audit of hospital records to see if these hypothetical practices were, in fact, as widespread as some of the staff thought. The audit confirmed that these four areas needed attention. The hospital created task forces in each area to use the best evidence and existing guidelines, as well as solutions from other hospitals, to improve care at B.C. Women's Hospital. Guidelines and other strategies in all four target areas were implemented in the spring of 1997.

### What Happened?

This is an excerpt from the hospital's published results:

*After six periods, B.C. Women's had admitted and delivered 1,369 nulliparous women with singleton (one baby only), cephalic (head enters pelvis first), term presentations. The caesarean section rate was reduced by 21 percent compared to the 12 periods prior to implementation. The number of epidurals initiated at 3 cm was 64 percent lower, continuous fetal monitoring was used 14 percent less, the induction rate had dropped 22 percent and admission at 3 cm cervical dilation had dropped 21 percent. All changes were statistically significant. Newborn outcomes were unchanged post implementation.*

WHAT IF THERE WAS ALREADY A TRIED METHOD OF REDUCING THE CAESAREAN RATE WITHIN HOSPITALS? WHAT IF IT INVOLVED SOME TRULY INNOVATIVE THINKING?

WHAT IF IT HAD A PROVEN TRACK RECORD AND HAD RESULTED IN A SIGNIFICANT DROP IN THE RATE OF SURGERIES FOR FIRST-TIME MOTHERS?

### What's Happening Today?

In 2009, it's back to business as usual at this hospital. Women are induced, monitored, epiduralized, and admitted early. The caesarean rate is 30 percent and the head of obstetrics is concerned but has no action plan.

### Why on Earth Would This Be?

I assert that it is because it is an "up at dawn" battle with the physicians to change their ways. I hear from nurses that doctors did everything they could to undermine this project. For example, a doctor would examine his patient and state, "She's 8 cm dilated, get the anesthetist." Then, later, when the woman had her epidural, someone else would examine the same woman and find her to be only 6 cm. The doctor would smile and shrug his shoulders: "Whoops." The same thing happened around the issue of monitoring, induction, and admitting: trickery to subvert the project and return to their old ways of doing things.

Most obstetrics workers have no idea that this project ever existed. It's a low-tech, innovative approach that had excellent results. I'd love to see it copied everywhere, but it's a bit like dieting: Everyone knows how to lose weight (eat less, exercise more) but only a few get into action.

We do know how to lower the cesarean rate. But committed action is needed. 



Gloria Lemay is a childbirth activist living in British Columbia, Canada. She has a passion for VBAC, water birth, and ending male genital mutilation. She is a blogger at [wisewomanwayofbirth.com](http://wisewomanwayofbirth.com). Her film, *Birth With Gloria Lemay*, was produced in 2012 and has been screened all over the world. View article resources and author information here: [pathwaystofamilywellness.org/references.html](http://pathwaystofamilywellness.org/references.html).

# BEING ADMITTED TO THE HOSPITAL

IS

NOT

IMPLIED  
CONSENT



Hospital Admissions

By Cristen Pascucci

**E**ven in 2017, women's consent rights in childbirth are disturbingly unclear to the professionals and institutions delivering their medical care. One aspect is the idea of "implied consent"—a concept mischaracterized by hospitals to a number of women who have contacted me, and sometimes used to justify violations of their dignity and rights.

Specifically, when these women have complained to their hospitals about receiving one or more non-consented or forced procedures in birth, they were told that their explicit consent was not necessary because they had a) agreed to be admitted to the hospital or b) signed blanket consent forms giving the medical staff permission to treat them. Sometimes these hospitals refer to this, erroneously, as "implied consent." The idea is that once the women were admitted or signed those forms, they should no longer have had the expectation that the care team must obtain consent for each procedure during treatment—including medication,

surgical cuts, and procedures performed on and through the vagina—but, rather, expect that the care team had the authority to administer whatever treatment they chose for the duration of that patient's labor or hospital stay. Put another way, from the perspective of the hospital, these women had forfeited their rights to informed consent and refusal in order to give birth in their facilities.

This belief by hospitals is wrong, legally and ethically.

First, let's take a rational look at this idea by pulling it back to all medical care—not just Labor & Delivery departments. We can make this comparison because patients are patients, whether they are in the emergency department or in Labor & Delivery. Patients in Labor & Delivery do not have different, or fewer, legal rights than other patients. Pregnant or not, you retain your basic legal rights. (Caveat: There are certain states where fetal personhood laws conflict with this idea and make things a little more tricky, but there is no broad, statutory law that conveys a different set of rights or restricts the rights of pregnant people in the United States.)

Neither is there any law that endows obstetricians or L&D departments with special legal authority over the medical care of their patients who are pregnant. Obstetricians and hospitals certainly have tried to claim this right in court—for example, in testimony for *Malatesta v. Brookwood Medical Center*; or when lawyers defending the hospital in *Dray v. Staten Island University Hospital, et al.* argued that doctors do not need to wait for a court order to “override” a woman’s refusal of surgery in labor (that is, that they do not need to respect her right to due process); or when the implicated doctor in *Switzer v. Rezvina* argued she doesn’t need to respect pregnant women’s decisions. Despite these claims, there is no general basis for a hospital to argue that implied consent applies in any way differently on their L&D unit or to their pregnant patients than it would to the rest of the hospital or non-pregnant patients.

With that in mind, consider the effect of the idea that admission to a hospital is “implied consent” for treatment: No patient would ever have the right to information about their medical care or the right to say “no” to it. Informed consent—the basic legal right to receive information and give or refuse permission in our medical care—cannot coexist with this flawed definition of implied consent. The concepts contradict each other.

case of a woman receiving a non-consented membrane stripping during a consented vaginal exam, she was told by a hospital representative, “When you sign the consent for care, that goes from the beginning all the way through until discharge”; in context, the hospital representative was saying that once the patient had signed a consent form at admission, they did not need her ongoing permission to administer medical procedures.

This belief is also wrong, legally and ethically.

The American College of Obstetricians and Gynecologists (ACOG), says plainly:

*Often, informed consent is confused with the consent form. In fact, informed consent is “the willing acceptance of a medical intervention by a patient after adequate disclosure by the physician of the nature of the intervention with its risks and benefits and of the alternatives with their risks and benefits.” The consent form only documents the process and the patient decision.*

—From Committee on Ethics Committee Opinion #390, “Ethical Decision Making in Obstetrics and Gynecology,” 2013.

## CONSENT FORMS AND INFORMED CONSENT ARE PRIMARILY MEANT TO PROTECT THE PATIENT. SOMETHING HAS GONE TERRIBLY AWRY WHEN HOSPITALS USE THESE PROTECTIONS AGAINST PATIENTS, RATHER THAN IN DEFENSE OF THEM.

In fact, “implied consent” in medical care is something that is generally understood to apply to emergency situations when the person is *both* unconscious and incapable of consent (i.e., a person presents at an E.R. with a gunshot wound and then passes out before he can agree to a certain course of treatment). It is a concept with very limited scope that applies to a limited range of situations—none of which are the very broad scope of pregnancy.

Moreover, says attorney Farah Diaz-Tello, formerly of National Advocates for Pregnant Women and a specialist in birth law, “Implied consent *never* overrides non-consent. So if someone walked into a hospital with a baby hanging out of her vagina, she has implicitly consented to them treating her by seeking help. But the second she says ‘No, stop that,’ they have to stop. She hasn’t consented to every possible thing ever. You might consent by seeking help, but *consent is always revocable.*”

The idea that consent is always revocable brings us to our next point: the confusion around consent forms and the power they do or do not have. I have heard pregnant women and medical professionals state that executing consent forms means “signing away your rights.” In one

ACOG is clear that the documentation of informed consent is fundamentally different from the actual process of informed consent—a process based on a constitutionally based idea that human beings own their own bodies, enshrined in a right that extends to their medical care. We should also remember that consent forms and informed consent are primarily meant to protect the patient. Something has gone terribly awry when hospitals use these protections against patients, rather than in defense of them.

Indeed, based on my extensive interactions with unhappy maternity care customers, hospitals seem to routinely respond to complaints about violations of informed consent with something along the lines of, “We’re sorry for the communication problem, but your treatment was medically appropriate”—and then claim the patient didn’t have the right to say no to the treatment in the first place (ACOG says otherwise). I can think of several women off the top of my head who had vaginal exams without their consent, or who consented to the vaginal exam but then had had an additional procedure forced on them in the course of the exam. For example, in a story documented in Episode 8 of Birth Allowed Radio, the hospital representatives claimed



repeatedly to the woman that a membrane sweep (meant to induce labor) is part of a vaginal exam (meant to assess dilation), so she did not have a right to refuse it once she had consented to the vaginal exam. (This claim, by the way, that an assessment of cervical dilation includes a manual induction of labor, is false. These are two stand-alone procedures with separate functions.) One representative said to her: “So [the physicians] feel like, you know, their fingers are up in your vagina and you’ve consented to *that*, so...”

Essentially, this hospital, like other hospitals, justified a physician’s actions by pinpointing the moment they claim the patient *no longer has consent rights*—the moment the medical professional assumes control of the patient’s body... ostensibly at the request of the patient.

That is wrong from any angle and easily fits a definition of obstetric violence as “appropriation” of the patient’s body. There is no moment when a patient forfeits the rights of informed consent and refusal, short of a serious medical emergency where the patient is unable to consent. It is especially alarming when, as in another situation with a non-consented membrane sweep, that hospital defended its physician with an “implied consent” argument even when the woman loudly, explicitly refused the procedure after it started happening. The hospital used her own prior consent to justify the physician inflicting that humiliation and trauma on her *even as she was crying, “No!”* This is simply unjustifiable.

These are foundational legal and patients’ rights issues, and yet the front line of communications in many hospitals doesn’t seem to have, or isn’t willing to admit they have, a basic grasp of them. In fact, in both of the specific situations I’ve mentioned in this article, each hospital conducted an internal physician review of the patient’s complaint before responding. So, it seems that neither the

administrations nor the physicians at these facilities have a working understanding of the legal and ethical obligations owed to patients for informed consent and refusal.

One hospital representative also said she’d contacted other local hospitals about their consent processes, and they agreed they did not have a consent process for stripping women’s membranes in the course of a vaginal exam. It’s fair to say, then, that her major errors about the ideas of implied consent, informed consent, and consent forms are not unique to the facility where she works.

All hospitals that provide maternity services should note that women are bringing lawsuits about informed consent violations in childbirth—most recently, the California case where a woman sued her doctor for medical battery following a forced, explicitly refused episiotomy. Several cases revolving around informed consent and refusal in childbirth have also been resolved in and out of court over the last year or so in Washington, Alabama, and New Jersey.

Informed consent and consent forms protect patients, but they also protect healthcare professionals. A medical professional should not be held liable for adverse outcomes resulting from a patient’s informed decision about their own medical care, and documentation of a patients’ refusal of treatment is a liability protection for the care providers involved. If that principle rings hollow to lawsuit-shy practitioners, there are lawyers and experts in the birth rights movement willing to testify to it.

Instead of blaming patients who have been harmed by institutional failures to respect informed consent and refusal, hospitals must look critically at what is happening in their facilities. They should have written policies and in-house educational requirements based on current, accurate interpretations of care providers’ legal duties to patients, with meaningful feedback loops for patient complaints. Sometimes, this will mean hospitals need to admit they have been doing it wrong for a long time. That moment of truth is a small and necessary price for earning women’s trust in the future. 🍷



A former communications strategist at a top public affairs firm in Baltimore, Cristen Pascucci is the founder of Birth Monopoly and Birth Monopoly’s Doula Power group, co-creator of the Exposing the Silence Project, and a former vice president of the national advocacy organization Improving Birth. She has run an emergency hotline for women facing threats to their legal rights in childbirth, created a viral consumer campaign to “Break the Silence” on trauma and abuse in childbirth, and helped put obstetric violence and the maternity-care crisis in national media. Today, she is a leading voice for women giving birth, speaking around the country and consulting privately for consumers and professionals on issues related to birth rights and options. Cristen is also the host of the Birth Allowed Radio podcast, and is the executive producer of an upcoming documentary about obstetric violence, birth trauma, and women’s rights in birth. View article resources and author information here: [pathwaystofamilywellness.org/references.html](https://pathwaystofamilywellness.org/references.html).

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# 5 WAYS MOTHERS GIVE AWAY

## THEIR POWER

By Chantel Quick, G.T.A.

**D**ear Mama,  
You have more power than you might think. You are the master of your domain, and the domain is you and your children. Your mastery should not be confused with dominance and control. I do not mean that you are here to control your child, but you are 100 percent in control of the decisions you must make for your child.

There are so many ways that we mothers give away our power and authority to people and systems without thought, because we don't realize there is any other way. We allow our bodies and souls, and the bodies and souls of our children, to get overridden by people who we think know better than we do when it comes to our lives and the lives of our children. But they don't.

As mothers, we are constantly being thrown shame about our choices, no matter what we do. It's important that we talk openly about evidence-based practices that are proven to have better outcomes for our children, but in many cases, people want us to just go with the status quo and do what was done to them, the way their parents did it. Don't ask questions, don't be too loud, don't speak up, don't question the "experts." Ignore that gut feeling—that feeling you might get at a doctor's appointment, or when you're sending your kid off on the first day of school. We are told these feelings are "normal," and that every mother has them. I agree that they are common, but they are not normal. Our world has prioritized other people's opinions, and living for systems beyond our communities, over what we intuitively know—to the point that many people don't feel that intuition anymore. We are filling our kids' bodies and heads with things that we don't even have the slightest clue what they are, because we think we must. It doesn't even occur to many people that there could be another way.

This isn't about convincing anyone to do things my way (how boring a world that would be!). But if you don't know you have choices beyond the mainstream world, then you aren't making decisions from a place of truth and desire. You are on autopilot, and not considering the impact of living in accordance with the status quo, whose only agenda is to keep you relying on it.

So what do I mean by giving away power?

Your power is your deep internal knowing and the actions that support it. It is standing up for what you know to be true and not fearing backlash from those who feel confronted by how you live. You might feel fear, but you do it anyway. Otherwise you're living for others, out of alignment with what you know to be best for you and your family, and you won't be able to function.

I see mothers give away their power all the time. Sure, there will be women who live by the book. They do what they are told, trust the "experts" no matter what, never venture far from their predetermined path, and will insist that they are not run by fear and are not giving their power away. That is fine. I am not speaking to them. I am speaking

to those who know something feels off. They have a feeling that things aren't right and they want to change something, but it goes against everything they are told about raising children. Listen to that feeling. It is OK, and very empowering, to never feel confused or afraid in your parental choices. I love how much freedom I have, and I have that freedom not because I don't listen to other people, but because I cultivated a deeper trust in myself. If you have that, then it almost doesn't matter what you do—that faith and confidence will carry you. Even if you do everything totally opposite from what I believe to be true, if you feel so good and right doing it, then your family and children will feel that.

Here are 5 places I see mothers giving away their power, where they should never do so:

## **1 Doctors During Pregnancy**

Ninety-nine percent of women follow a predetermined agenda once they see those two blue lines on the pregnancy test. From that point on, they are under the control of a doctor. They view their birth experience as them working for the doctor, rather than the other way around. Remember, it is your body, and your baby. Your caregiver works for you. If you don't want to drink a nasty glucose drink, you don't have to. If you don't want to be induced, you don't have to. If you don't want to labor on your back strapped to a bed, you don't have to. If you don't want an episiotomy, you don't have to get one. If you don't want your baby taken out of your sight, she doesn't have to be. If you ever have that "bad" feeling about anything, listen to it. I cringe when I hear a woman say, "My doctor won't let me..."

If your doctor won't let you do something, then don't hesitate to find someone who works for you and honors your wishes. I understand that there are special circumstances where a woman must do something she didn't originally desire or plan, but that isn't what I am talking about.

Women have so much choice and power around how they bring their babies into the world. Exercise that right. Question and research everything.

## **2 Parenting Experts**

The problem with listening to the experts is that they come from all ends of the spectrum. Some will say never ever leave a baby alone to cry, others will suggest you go in the nursery just to clean up the vomit, make no eye contact, and get out. (It's cruel, but that line of thinking actually exists.) Sure, I think it is great to find people who support what you intuitively know, and refer to them in times of confusion because you trust them and their opinions on such matters. But that is different than giving away power.

Ultimately, you know what feels good and what doesn't. Yes, it is true that sometimes we have to feel our feelings to work through them, and doing that can be

WE ARE FILLING OUR KIDS' BODIES AND HEADS WITH THINGS THAT WE DON'T EVEN HAVE THE SLIGHTEST CLUE WHAT THEY ARE, BECAUSE WE THINK WE MUST. IT DOESN'T EVEN OCCUR TO MANY PEOPLE THAT THERE COULD BE ANOTHER WAY.



uncomfortable. Feeling our children's feelings can be even more uncomfortable.

So how do you know the difference between "good" uncomfortable feelings and "bad" uncomfortable feelings? I would say the answer to this is that the "bad" uncomfortable feelings are persistent, nagging, and have a flavor of guilt associated with them, whereas "good" uncomfortable feelings are fleeting, and you will often feel refreshed or renewed after having let yourself feel them all the way through. There also isn't much doubt in your decisions when you have "good" uncomfortable feelings that need to be loved and felt. It all feels very clear, but it still feels, and that is OK.

One example is parents' confusion over sleep and letting babies cry alone. Many think if they pick up or sleep near their baby, then they are somehow spoiling him. On the other hand, they feel terrible listening to their baby's screams. This is a perfect example of listening to our intuition, and how it often goes in the exact opposite direction of what the "experts" tell us (not all experts, of course). My opinion is that it is rather sad that we believe a vulnerable baby can have too much love and care, or be made to feel too secure, or to think a baby's needs go away at night. Understanding child development and listening to our intuition will make examples like these pretty clear.

### 3 Your Mother-In-Law, or Your Own Mother

This might sound a little harsh, but it needs to be said. I often see mothers posting in mom groups about how to deal with a mother-in-law or their own parent strongly disagreeing about how they parent. They complain about their beliefs and ask for advice on how to get them to "see their point of view."

Honestly, the problem isn't your mother-in-law; the problem is lack of boundaries on your own part. I get that some women deal with really nasty mothers-in-law and mothers. It still comes down to boundaries and confidence. If you know your deepest truth and you are confident in carrying it out as a parent, then there is no need to convince anyone or make them see it your way (unless they ask, of course!). If a friend or anyone in my family gives me a hard

time about how I do something, I have no problem setting a boundary, whatever that would need to look like. I think my own mother knows this about me, which is probably why she doesn't give me a hard time, despite the fact she might not agree with everything I do. Seeing her grandchild and having a relationship with him is more important to her than questioning my choices. That said, I love having open, respectful conversations about it when she wants to.

I do believe some people just like the drama and want to appear right (I've been there!), but if you just want to be left alone about your decisions, I promise you can make that happen.

You also don't need to give away your power by doing something that you feel uncomfortable or unsure about just because that is how your mom raised you and you don't want to upset her or make her feel guilty. I know some women are very concerned that if we do the opposite of what our mothers did, then we are indirectly telling them that we're not OK with how we were raised. We worry that we could offend our mothers, and we don't want to hurt them. But it is actually less kind to go along to get along and protect your mother from feeling the truth of who you are and what you believe. It prevents potential growth for the both of you. You are not giving her the opportunity to possibly learn from her mistakes, which she wasn't aware she was making at the time.

## 4 Pediatricians

This is similar to my first point, but I see mothers putting up with pediatrician bullying so much more. I see women dreading going to check-ups because they don't want to feel bullied into giving an injection or medication that they're uncomfortable with, or still have very little knowledge about. It is horrible how much we shame women for questioning substances that they must decide whether or not to put in their children's bodies. I think we can all agree that it is totally legitimate to know what we are consenting to give our children, and its possible side effects. To not ask about these things feels totally irresponsible, but we treat the women who question as the irresponsible ones.

Remember, you are not obligated to keep a care provider who makes you feel horrible. You are also not required to attend check-ups until and unless you feel good about going. These experiences can and should be mostly carefree, and without stress. If you find yourself feeling dread every time you go to the doctor, consider another game plan. We personally do not see doctors unless I feel that I cannot care for my son on my own and I need the help of someone I trust. I can weigh and measure my son myself and I don't need to be told that my clearly happy and healthy child is, well...happy and healthy.

## 5 Schools

Somewhere down the line we fell for the belief that once our child turns 5, we should give them away to a system that can supposedly raise and educate them better than we (or the world) can.

We trade their freedom and bodily autonomy for the safe bet that when they come out, they will be "educated"—because they can't possibly learn outside of the starkness of school walls. We fall for the lie that learning can only be done one way, at one place, for everyone.

Once again, we are told to abandon our power as mothers and hand our children's education over to strangers, but we are told these strangers are "experts," so we feel justified in this decision. We tell ourselves our children must be educated, even though there are far more experiences and resources available in the rest of the world than are within the confines and limits of schooling. We tell ourselves that our children must be socialized, even though socializing is all we ever got in trouble for as kids in school. We know very well how much socializing is discouraged in the traditional school environment.

I know my condemnations of schooling will get a lot of backlash. I am not saying





## WE TELL OURSELVES THAT OUR CHILDREN MUST BE SOCIALIZED, EVEN THOUGH SOCIALIZING IS ALL WE EVER GOT IN TROUBLE FOR AS KIDS IN SCHOOL.

what you should or shouldn't do. I am simply suggesting you know the reality of your choices and question why you have chosen your path. Remember, the path you choose is a path, but not the only path. School is not in any way a given, or required. It is a relatively newly created system designed to create 9-to-5 workers for a capitalistic society. Why have you chosen it? Was it a conscious choice, or simply the next step? Are we considering how much of our time, attention, energy, and lives we give away to the schooling system? We are on their clock all year, and having to constantly make sure we turn in assignments, wake up at a certain time, abide by its rules, etc. These things affect the entire family unit, not just children. Did you choose a life and learning path based on the wants and needs of your family? Or are you molding and shaping your life to fit the requirements of the school you send your child to?

If you think you made the best decision and your children love school, then maybe you don't need this message. My message to you is still that you have more power than you know, and if you ever feel off, or that your child isn't thriving in the school environment, then your job isn't to ignore those feelings or "fix" or medicate your child, or put her in a special class with other children who are acutely

aware of a broken system. Your job is to change the environment, not change your child.

Sometimes we resist this notion because it would require us to take a hard look at our deeply held beliefs. It would require us to realign our priorities and make big (but often very necessary) changes in our own lives. And it is so much easier to try to change our child than it is to see them as people who reflect what we need to change about ourselves. But that is why children are so great and magical. We just have to look and listen. 📌



*Chantel Quick is a parenting blogger and a gynecological teaching associate. In 2013 and 2017, she completed her coaching and teaching certifications and is now a women's health and parenting mentor for women and medical students. As a trained birth doula, she is*

*passionate about empowering women with evidence-based birth information so that we can collectively change the way we view birth. She is a (mostly) work-at-home mom to her 3-year-old son, whom she gave birth to in the comfort of her own home. Chantel lives in Austin, Texas. You can find her blog at [earthbasedmom.com](http://earthbasedmom.com). View article resources and author information here: [pathwaystofamilywellness.org/references.html](http://pathwaystofamilywellness.org/references.html).*

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# Conscious DECISIONS

By Madisyn Taylor

Just because an idea or way of doing things is popular doesn't mean it's right for everyone. Part of the way that something becomes popular is that many of us don't take the time to determine what's right for us; we simply do what most people we know are doing. In this way, our decisions about life are made by default, which means they aren't what we call conscious decisions. There may be many other options available, but we don't always take the time to explore them. This may be the result of feeling overwhelmed or pressured by family, peers, and humanity at large to do things their way—the way things have always been done. Regardless of the cause, it is important that, as often as we can, we decide for ourselves what to do with our lives rather than just drift along on the current of popular opinion.

It is not always easy to make decisions that go against the grain. Many people feel threatened when those close to them make choices divergent from their own. Parents and grandparents may be confused and defensive when we choose to raise our children differently from the way they raised us. Friends may feel abandoned if we decide to change our habits or behavior. Meanwhile, on our side of the fence, it's easy to feel frustrated and defensive when we feel unsupported and misunderstood simply because we are thinking for ourselves. It can be exhausting to have to explain and re-explain our points of view and our reasons.

This is where gentleness, openness, and tolerance come into play. It helps if we are calmly persistent, consistent, and clear as we communicate to those around us our reasons for the choices we make. At the same time, we have the right to say that we are tired of talking about it and simply need our choices to be respected. Our lives belong to us, and so do our decisions. Those who truly love us will stand by us and support our choices, regardless of what's popular. 

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*Madisyn Taylor is a bestselling author and the cofounder of the popular inspirational website DailyOM ([dailyom.com](http://dailyom.com)). A recognized leader in self-help and New Thought spirituality, Madisyn has more than 15 years of experience in personal development and alternative healing methodologies. When not working, Madisyn can be found meditating in her garden and communing with nature. She lives in Ashland, Oregon, with her husband, Scott Blum, and their son, Oliver. View article resources and author information here: [pathwaystofamilywellness.org/references.html](http://pathwaystofamilywellness.org/references.html).*

# 8

## ALTERNATIVES TO COLLEGE

By James Altucher

# W

hen I was 19, I won some money in a chess tournament. Instead of putting that money toward my college tuition, I decided to drop out of college and buy a car.

I bought a used 1982 Honda Accord. I drove it around for a few hours since they let me drive it right out of the lot. But when I saw my girlfriend and everyone else taking their classes, I got a little jealous. I returned the car and canceled the check and entered my sophomore year of college. I regret it now.

Whenever I suggest, "Don't send your kids to college," a lot of very smart people invariably respond, "Well, what else should they do?" This amazes me. I guess it's really hard to figure out what people age 18–23 should do during the most vibrant, healthy years of their lives, while they grow from being a child to an adult.

So I figure I will help people out by coming up with a

list, and try to handle the criticisms before they arise. I can do this because I have a college degree, so I've learned how to think and engage in repartee with other intelligent people.

### 1) START A BUSINESS.

There are many businesses a kid can start, particularly with the Internet. If you always focus on the maxim, "Buy low and sell high," you'll start to generate ideas.

Many people say, "Not everyone can be an entrepreneur." It's amazing to me, also, how many times I've answered this question in writing and yet people still say the same thing. First off, there's no law against being an entrepreneur. In fact, everyone can be an entrepreneur. What they really mean is, "Not everyone can be a successful entrepreneur." As far as I know, there's no law against failure, either.

When someone loses a tennis match or a chess game, how do they improve? They study their loss. As anyone who has mastered any field in life knows, studying your losses is infinitely more valuable than studying your wins.



I failed at my first three attempts at being an entrepreneur before I even learned how to spell the word, but eventually I had a success (a company with profits that I was then able to sell).

Failure is a part of life. Better to learn that at 18 than at 23 or older, when you've been coddled by ivory blankets and hypnotized into thinking success was yours for the taking. Get baptized in the river of failure as a youth so you can blossom in entrepreneurial blessings as an adult.

Here's what you learn when you start a business when you're young, regardless of success or failure:

- You learn how to come up with ideas that will be accepted by other people.
- You begin to build your B.S. detector (something that definitely does not happen in college).
- You learn how to sell your idea.
- You learn how to build and execute on an idea.
- You meet and socialize with other people in your space. They might not all be the same age but, let's face it, that's life as an adult. You just spent 18 years with kids your age. Grow up!
- You might learn how to delegate and manage people.
- You learn how to eat what you kill, a skill also not learned by collegegoers.

## 2) TRAVEL THE WORLD.

Here's a basic assignment. Take \$10,000 and get yourself to India. Check out a world completely different from our own. Do it for a year.

You will meet other foreigners traveling. You will learn what poverty is. You will learn the value of how to stretch a dollar. You will often be in situations where you need to learn how to survive, despite the odds being against you.

If you're going to throw up, you might as well do it from dysentery than from drinking too much at a frat party. You will learn a little bit more about Eastern religions, compared with the Western religions you grew up with. You will learn you aren't the center of the universe. Knock yourself out.

## 3) CREATE ART.

Spend a year learning how to paint. Or how to play a musical instrument. Or write five novels. Learn to discipline yourself to create. Creation doesn't happen from inspiration. It happens from perspiration, discipline, and passion.

Creativity doesn't come from God. It's a muscle that you need to learn to build. Why not build it while your brain is still creating new neurons at a breathtaking rate,



WHENEVER I SUGGEST, “DON’T SEND YOUR KIDS TO COLLEGE,” A LOT OF VERY SMART PEOPLE INVARIABLY RESPOND, “WELL, WHAT ELSE SHOULD THEY DO?”

rather than learning it when you are older (which, for many people, is too late).

#### 4) MAKE PEOPLE LAUGH.

This is the hardest thing of all. Spend a year learning how to do standup comedy in front of people. This will teach you how to write, how to communicate, and how to sell yourself. It will teach you how to deal with people who hate you, and how to deal with the psychology of failure on a daily basis. And, of course, how to make people laugh.

These skills will help you later in life much more than Philosophy 101 will. And, by the way, you might even get paid along the way.

#### 5) WRITE A BOOK.

Believe me, whatever book you write at the age of 18 is probably going to be no good. But do it anyway.

Write a novel about what you are doing instead of going to college. You’ll learn how to observe people. Writing is a meditation on life. You’ll live each day, interpret it, and write it. What a great education!

#### 6) WORK IN A CHARITY.

Plenty of charities do not require you to have a college degree. Which is going to serve you better in life: Taking



French Literature 101 or spending a year delivering meals to senior citizens with Alzheimer's, or curing malaria in Africa?

I have an answer to this. You might have a different one. Which is why I'm listing eight alternatives here instead of just this one. And, by the way, if you do any of these items for a year, two years, or maybe 10, you can still go to college afterward. Why not? It's your life.

## 7) MASTER A GAME.

What's your favorite game? Ping pong? Chess? Poker? Learning how to master a game is incredibly hard. Let's start with the basics:

Study the history of the game.

Study current experts on the game, videos, books, magazines, etc. Replay, or try to imitate in some way, the current masters of the game.

Play a lot: with friends, in tournaments, at local clubs, etc.

Take lessons from someone who has already mastered the game. This helps you to avoid bad habits and gets someone to immediately criticize your current skills.

Mastering a game builds discipline, lets you socialize with other people of all ages and backgrounds but who have similar passions, and helps you to develop the instincts of a killer without having to kill anyone. Nice!

## 8) MASTER A SPORT.

Mastering a sport is probably even better than mastering a game, because it has the same benefits listed above, but you also get in shape.

We only have the life we have lived. And I always sit and daydream, "What if...?", "What if...?" It's the easiest and most dangerous meditation to do: What if? Because that wish is like a wisp of smoke that can twist and turn until we disappear along with it.

As I write this article I look at these alternatives with longing and I know that when I'm done, I'm going to sit here quietly while the sun goes down, wondering only about "what if." [P](#)



James Altucher has started and ran more than 20 companies and is currently an investor in and advisor to more than 30 others. He is the author of the bestselling book *Choose Yourself*, editor at The Altucher Report, and host of the popular podcast The James Altucher Show, which takes listeners beyond business and entrepreneurship by exploring what it means to be human and achieve well-being in a world that is increasingly complicated. He has contributed articles to The Wall Street Journal, Financial Times, and Yahoo Finance. You can learn everything (probably too much) about him through his popular blog at [jamesaltucher.com](http://jamesaltucher.com).

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# The Grandmother Method

How a Hole in the Wall Became a School in the Cloud

By Patrick Farenga

What would children do with a computer that is made freely available to them in their village?"

So wondered Sugata Mitra, who in 1999 was working in New Delhi, India, as a science director for an education technology company when he decided to put this thought into action. He placed a personal computer with an Internet connection into a hole in the wall that bordered his office from the slum, and hid a video camera to record what happened.

Children asked him what he was doing while he was installing the computer. Mitra replied, "I don't know," and left them to figure it out on their own.

### **Children Don't Need Adults to Learn...**

Mitra was surprised by what he observed: Without any adult guidance, the children learned how to use the computer and, in doing so, they showed each other how to surf the Internet, read English (the most common language used online), and developed their interpersonal and analytical skills. Mitra realized that what he was observing was not what most educators would expect to happen if a group of children were left alone with a computer. This experience also made him wonder just how far learning could progress before a formal classroom teacher would be needed. He named this type of learning "minimally invasive education"—that is, a "pedagogical method that uses the learning environment to generate an adequate level of motivation to induce learning in groups of children, with minimal, or no, intervention by a teacher."

When Mitra shared his initial research and posited that a teacher was not necessary for learning to occur among children, his work was greeted with skepticism. So he kept upping the ante and refining his experiments to control for the objections, and his results remained the same. One of his major breakthroughs occurred when Mitra posed this question: "Can Tamil-speaking 12-year-olds learn the biotech of DNA replication by themselves on a street-side computer in English?"

Sure enough, the children learned this advanced material on their own, albeit slowly; they demonstrated 30 percent comprehension on a test of the complex material.

### **...But Encouragement From Grannies Helps**

Mitra decided at this point to see if adult support could improve the children's comprehension, so he enlisted a young woman to work with this group. He chose her because she had no prior knowledge of the subject matter the children were endeavoring to learn, and he urged her not to use classroom techniques when the children asked for help. Instead, he advised her to use "the method of the grandmother," which entails providing admiration and encouragement for the children's efforts, but not direct instruction. The children's comprehension scores on the test increased significantly after this addition.

Mitra's next project, the Granny Cloud, grew out of the hole-in-the-wall experiments. While contemplating the "method of the grandmother," Mitra asked some Indian children how they would use Skype, and they said they wanted British grandmothers to read fairytales to them. Mitra then appealed to the British public for help.

*The Guardian* reports that he quickly got 200 volunteers. "Many are retired teachers, who are now regularly on Skype teaching children in the slums," said Mitra. "The children are forming relationships with them, and the teachers, many of whom were upset at the thought of having finished their careers, have realized they're more important than ever."

The Granny Cloud led to further refinements that Mitra refers to as Self-Organized Learning Environments (SOLE) and the School in the Cloud. Mitra was awarded a million-dollar TED prize to further his work in 2013.

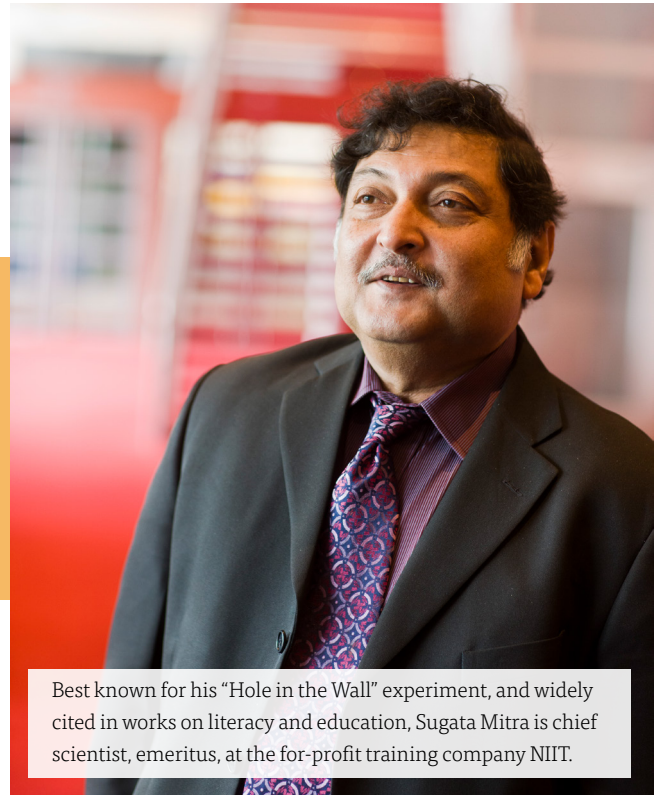
### **Mitra Disrupts Education**

Mitra's work has been criticized on the grounds that he worked with rural children to whom computer technology was new and enticing. Critics have posited that students more familiar with computers, who are already jaded and sated with the modern technology around them, would not respond with the same intrinsic motivation and excitement as the children in the village squares in India did.

Mitra is showing that this is not the case. He's using the TED prize money to make the School in the Cloud a hub for grannies to support their students and for people to create SOLEs wherever possible. A SOLE is an environment that "can exist anywhere there is a computer, Internet connection, and students who are ready to learn," according to the School in the Cloud's website, which describes the environments in greater detail:

*Within a SOLE students are given the freedom to learn collaboratively using the Internet. An educator poses a Big Question and students form small groups to find an answer. During a SOLE session students are free to move around and share information or to change groups at any time; towards the end of a session they have the opportunity to share what they learned with the whole group. SOLE sessions are characterized by discovery, sharing, spontaneity and limited teacher intervention.*

Mitra is careful to distinguish self-directed learning from SOLEs, as the latter requires an educator to pose the question and the group to work on it, whereas the former requires learners to pose their own questions and use their individual initiatives to learn the answers, but the two approaches mix well. SOLEs currently exist in India and the United Kingdom, and many more are being proposed and created. Some SOLEs are located within conventional schools, while others are operated in local community spaces.



Best known for his “Hole in the Wall” experiment, and widely cited in works on literacy and education, Sugata Mitra is chief scientist, emeritus, at the for-profit training company NIIT.

MITRA ADVISED HER TO USE “THE METHOD OF THE GRANDMOTHER,” WHICH ENTAILS PROVIDING ADMIRATION AND ENCOURAGEMENT FOR THE CHILDREN’S EFFORTS, BUT NOT DIRECT INSTRUCTION. THE CHILDREN’S COMPREHENSION SCORES ON THE TEST INCREASED SIGNIFICANTLY AFTER THIS ADDITION.

In fact, SOLEs are open to the public. Anyone is welcome to join the School in the Cloud and create a SOLE by downloading a free toolkit.

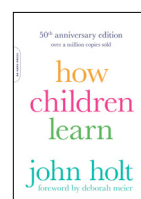
One of the most striking points Mitra makes about his experiment is how schools can be reconstructed into more social, welcoming institutions. If, as Mitra has claimed in a number of venues, “groups of children, with access to the Internet, can learn almost anything by themselves,” then the very nature of compulsory schooling—which is based on the assumption that children won’t learn anything important unless adults are heavily involved—is turned on its head. In fact, so is the very nature of learning. Mitra claims there could be “a future in which ‘knowing’ may be obsolete,” because the answer to any question is available on demand, online.

Psychologist and noodle expert Peter Gray, Ph.D., has written that Mitra’s work is better matched to the natural learning abilities of children than conventional schooling, since it leverages children’s innate curiosity, enables them freedom to play with technology (an activity that helps them become skilled at using it), and, most importantly, allows the natural sociability of children to facilitate the circulation of knowledge and skills to other children. Dr. Gray cites other research supporting Mitra’s point that “children learn more

together than alone...the segregation of children by age in schools prevents the diversity of pre-existing skills and knowledge that seems to be a key to self-directed learning from others.”

Though Mitra is using technology to disrupt education, he is careful to make sure that we understand that the children—and not computers or support staff—are creating and sharing knowledge.

As Dr. Gray writes, based on Mitra’s research, “We don’t need one laptop per child. Children learn more when they share a computer and learn from one another.”



Patrick Farenga continues the work of author/teacher John Holt, first as publisher of *Growing Without Schooling* magazine from 1985 until 2001, and now at the website [johnholtgws.com](http://johnholtgws.com). Farenga is also a founding member of the Alliance for Self-Directed Education. View article resources and author information here: [pathwaystofamilywellness.org/references.html](http://pathwaystofamilywellness.org/references.html).



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# My New Year's Resolution

By Kelly Brogan, M.D.



As a relative newbie to this whole “spiritual awakening” thing, I have still spent much of the past several years motivated by the carrot of victory. Of course, my opponent is no longer disease, germs, and pharmaceutical non-compliance. No...it has become ignorance, misinformation, and corporate industry (to keep the list short).

But I have still been deeply invested in being on the “right” side of the equation. Even as my own personal work has evolved, I recognize that I continue to struggle with a feeling of otherness when I encounter those who don’t intuitively understand why we shouldn’t be feeding our children GMOs, injecting them with foreign material, and medicating our way down the path of chronic disease. I have been on a desperate hunt for my people, for a safe haven of like minds, and in this process, even my own family and old friends have left me feeling exasperated and rageful.

### Stop Fighting to Win

When I learned about Charles Eisenstein’s work, however, something shifted for me. I began to see that as long as I was fighting anything—as long as I was *anti* anything—I was perpetuating the precise mentality, emotional terrain, and energetic foundation that led us all so far from the path of ancestral wisdom.

With this, I put down my sword. I went into deep meditation and committed to self-betterment and evolution. I took even more seriously the responsibility and honor of having your eyes on these words.

And I began to experience a flood of joy and gratitude. My heart cracked open. I continued to encounter challenges and sources of pain, but with them I felt the promise of a gift. Every time.

### My New Year’s Resolution... Are You With Me?

So, here’s what I am committing to in service of healing myself, you, and the planet.

I declare that I would rather heal than be right.

It’s that simple. Ask yourself—and be brutally honest—would you rather be right, or would you rather heal? Because often, if not always, being right is a misleading goal that keeps you stuck in suffering and misery. Up until very recently, I still wanted so badly to be right. If planetary healing were to come in a flash and the conditions of its arrival were to be that no one would ever “learn the truth” about the boys’ club of Big Ag, Pharma, Food, Business, etc. well...I wasn’t sure I would want *that* type of healing.

But healing is healing. Either we want it—whatever it takes—or we perpetuate the conditions that keep us mired in suffering and sickness.

What it often takes is a willingness to let yourself, as you know it, die. A willingness to allow layers and layers of your precious identity to literally burn up in the flames of transformation. We derive a sense of safety in a seemingly

dangerous world from knowing who we are—our jobs, our marital status, even our disease labels. We want to believe, so badly, that we will believe in non-belief. To let go of these tags feels like an existentially perilous venture.

And to love yourself, and all those who trigger you, throughout the process.

Piece of cake, right?

### The Love Revolution

Love. What does that word even mean?

You’ll note that I don’t use it often in my writing. To me, it has become an insipid placeholder for something far more meaningful. As spiritual teacher Matt Kahn says, “Love is not a feeling.” It is a container that supports and nurtures a process.

When you choose to love yourself, you treat yourself like you would a sometimes crying, sometimes cooing baby. You’re there for all of it. You support all of it. You say yes to all of it.

Kahn says that when you feel anger, judgment, or sadness, your heart is asking for more nurturance and support in letting those paroxysmal fits of ego pass through. Your heart is asking for more: love. In choosing to exercise self-compassion, you exit the vicious cycle of judging yourself for judging.

That resonates for me and my deeply felt belief that suffering and grief are healing when we embrace them.

### Try It Out...For 40 Days

I want you to imagine the liberating potential of this one simple commitment—releasing the need to be right. Think about the last time you felt frustration, pain, or anger. What if, in that scenario, you replaced some of the core drivers of that response with words like “I don’t really know” or “I’m sure there is more to the story than I’m seeing” or even words like “Yes” or “Good.” And then you simply let the feelings ride. Let them be. Let them rise and fall and perform their unique alchemy without resistance.

Here are some tips for not needing to be right:

**Get humble.** Thinking we are right comes from a place of certainty around our role on this planet. It comes from the belief that there is one objective truth, or one absolutely correct narrative. We know, however, that the observed requires an observer. There are multiple potential narratives running in parallel, all of which are true to someone, as the culmination of the myriad variables that led them to that moment.

Humility brings us back to an important state of wonder and curiosity. It spares us the carnage of ego-driven action and behavior. It is a path of greater ease, and, so it happens, the very opposite of dis-ease.

**Act, don’t react.** One of my favorite kundalini meditations is called “Act, Don’t React,” perhaps because I’m an Italian-Irish hothead by birth. The argument queen, I have a long history of slicing and dicing anyone, whether I even

# I DECLARE THAT I WOULD RATHER *heal* THAN BE RIGHT.

know the content of the debate or not. Never having a shortage of opinions or the fervor to go along with them, acting from a place of dispassionate humility has never been my thing. But it *needs* to be my thing, and yours—all of ours. We need to learn to sit with strong emotions and let them move through us before we turn them into the burned bridges of scorching e-mails, angry activist crusades, or misguided public policy. These days, when I get an activating e-mail (my inbox can be a house of horrors some days), I commit to non-response for 24 hours or until I can sit with the possibility of not responding at all (anathema to my fiery fingers!).

**Own it.** When we move beyond righteousness, we reclaim the parts of us that we are scattering all over our lives by simply taking radical responsibility for everything that comes our way. Stop. Blaming. Anyone. Move beyond victimhood and own your journey, as it will bring you where you need to go, even if it's to your knees. Some stubborn layers of ego take a lot to deconstruct. Trust me. We write our own stories, so if you choose not to dwell in the deep reservoir of badness, injustice, and indignation we inhabit when we are struggling, then the feelings will simply be what they are, instead of a new infrastructure for a story that we'll then be challenged to break down in the future.

**Love now.** Let's be honest. Being right never changed anyone's mind. Winning an argument was never the catalyst to meaningful change. The *unexpected*, however, can and does. When we get beneath defenses, we access each other's humanity. Surprise yourself and someone who has rubbed you the wrong way by offering them an apology, words of grace, or compassion. Matt Kahn asks us to bless our perceived threats in life. So I would say, "May the CEO of Bayer be blessed." Hurts a bit, but I can get with this, I think. Because I want to be the change, not just talk about it, and certainly not limit it because I'm too busy funding the war.

My daughter has a book called *Beautiful Oops*, by Barney Saltzberg. It's a cute flip-story with a deep message. Our

greatest moments of weakness and our deeply shameful errors are rich with potential for unimaginable creations. The most sacred and beautiful aspects of life are those which defy description and even narrative. There is no good and bad, no right and wrong, no opposing sides in these spaces of grace. If being right doesn't get us where we want to go, and if being willing to be wrong can liberate us to new potential growth, then let's get back to the business of getting quiet every day so that we can show up to this wild ride the best way we know how.

And, if I'm wrong about all of this...so be it. ;)

Here's to a phoenix year of radical radiance and the most unimaginable quantum leaps into spaces of personal and planetary healing. Thank you for all that you are personally doing to resonate this potential. 🍷



Kelly Brogan, M.D., is a Manhattan-based holistic women's health psychiatrist, author of the international and New York Times bestseller *A Mind of Your Own*, and co-editor of the landmark textbook *Integrative Therapies for Depression*. She completed

her psychiatric training and fellowship at NYU Medical Center after graduating from Cornell University Medical College, and has a B.S. from MIT in systems neuroscience. She is board-certified in psychiatry, psychosomatic medicine, and integrative holistic medicine, and is specialized in a root-cause resolution approach to psychiatric syndromes and symptoms. She is on the board of GreenMedInfo, Functional Medicine University, Pathways to Family Wellness, NYS Perinatal Association, Price-Pottenger Nutrition Foundation, Mindd Foundation, the peer-reviewed, indexed journal *Alternative Therapies in Health and Medicine*, and the Nicholas Gonzalez Foundation. She is medical director for *Fearless Parent* and a founding member of *Health Freedom Action*. She is a mother of two. View article resources and author information here: [pathwaystofamilywellness.org/references.html](http://pathwaystofamilywellness.org/references.html).

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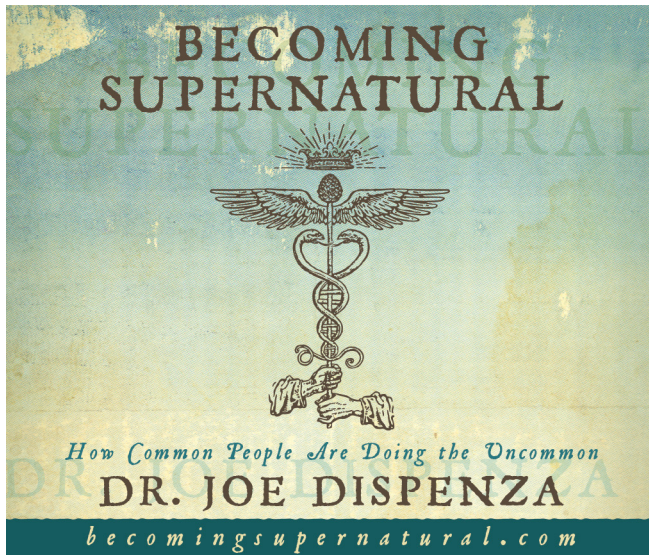
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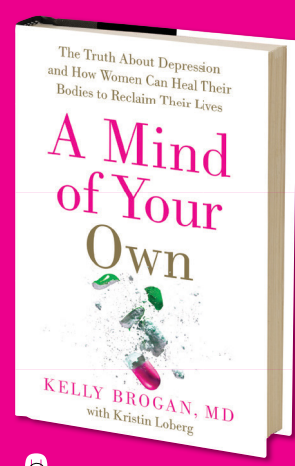
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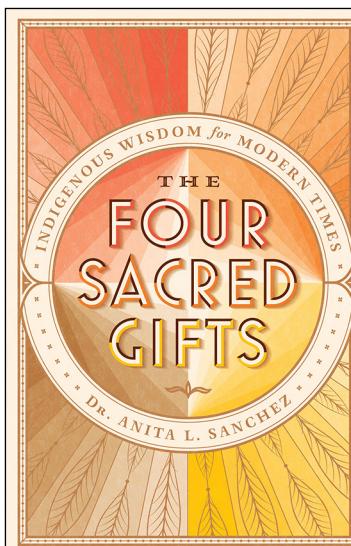
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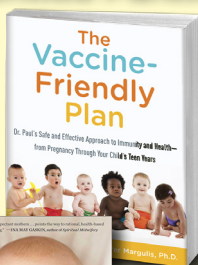
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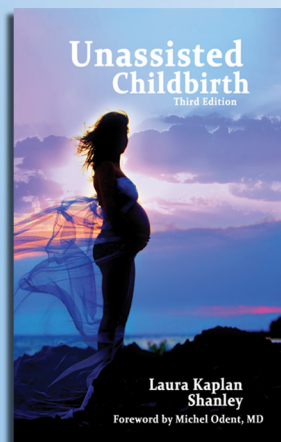


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