

The Lived Experience of Becoming a Holistic Nurse

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What is the Experience of Becoming a Holistic Nurse?

Sixty holistic nurses described how becoming a holistic nurse affected their personal and professional life. They shared all the thoughts, perceptions, and feelings they could recall until they had no more to say about the experience. This is their story:

Some of the participants in this study objected to the word “becoming” that was used in the question they were asked to respond to. They described holism as a core knowing that one awakens to or remembers. This core knowing exists long before professional development as a nurse, in fact one participant described her earliest memory of being holistic occurring at the age of three years. In this perspective, one does not “become” a “holistic” nurse, since one already is holistic, is whole. At the same time, other participants described holistic nursing as a continuous, expansive, “*awakening ever deeper*” process that increases the desire to know more. Out of respect to the participants of this study, the word becoming shall henceforth be used in the context of “the continuous journey of consciously remembering what already is.”

Participants described various events leading to the journey of becoming a holistic nurse. Many became disheartened with conventional nursing and/or the healthcare system through personal or professional experiences, and were on the verge of changing careers or had already left nursing. Some became interested in non-Western health practices through living or travelling in foreign countries. Others used complementary or alternative therapies successfully to treat personal injuries or illnesses. Personal growth events, such as contemplation of life after death, led some to explore holistic nursing.

Regardless of how nurses became committed to developing their holistic nursing practice, almost all described the process of becoming a holistic nurse as a deeply meaningful experience that affected all aspects, and all beings in the

nurse's life. The nurse's relationship to the profession of nursing changed, and the way participants defined nursing became far more expansive.

Respondents described a strong personal reconnection to the essence of nursing. One participant said, "*I have come to remember the profound beauty, sacredness, and meaning of nursing.*" Another participant relayed how holistic nursing theory connected the history of nursing with the future for her, revealing a timeless "heart" of nursing that will continue. The definition of nursing became all encompassing, as participants described practicing holistic nursing all the time, everywhere. As one stated, "*There is no difference between my personal and professional life.*" As such, holistic nursing was described as a way of being that is reflected through all activities. Some described becoming a holistic nurse as a paradigm shift, and as a result reported that they made all their decisions and choices in attunement with holistic principles.

Self care and self renewal was considered to be an essential first and continuing step in true holistic practice. One participant stated that self care was the foundation of her practice, another said, "*We can only offer to others what we have for ourselves.*" Accepting the necessity of self care and integrating self care into one's daily life was a significant challenge for many, that remains a challenge for some. In the process of making lifestyle changes to nourish self, participants felt more empathy for clients trying to make similar changes. Respondents reported that self care helped them to be healthy during stressful periods of their life, and their increased well-being was noticed and remarked upon by colleagues. Practicing self care was one important way that participants role-modeled holistic nursing to others. In the process, participants reported a deeper appreciation of nutrition, physical movement, and their physical body in general.

Participants became more aware of the power of the mind and how to use thought more effectively. Most gave priority to at least one of the following practices which resulted in clearer focus: self reflection, meditation, centering, prayer, living mindfully, and/or presencing. Nurses used thought to benefit themselves, for example, using affirmations as positive self talk. They also used thought to benefit others, the most common example being use of intentionality. Participants described how their perception expanded. They experienced

increased willingness to consider different viewpoints/options as well as to check their own motives/biases in situations. A few noted that practicing from one's highest intentions requires self discipline. Another noticed, "*I listen better.*"

Through increased self awareness and self acceptance, participants "came home" to the essence of self, resulting in increased self esteem and self confidence. Experiencing authentic self led to a more expansive self concept/self identity. As one nurse said, "*I am the same person, yet so much more.*" Creativity was enhanced.

In discovering authentic self, varied emotions were felt more intensely and at times were experienced as overwhelming and/or conflicting. In some cases, participants had to deal with their deepest fears and resistances. Fear, anxiety, and/or discomfort was experienced when the "shadow side" of self was revealed, or when old beliefs were being released before new knowing was clear or internalized. Most participants shared that focusing on holism was inspirational and provided hope. An overall increase in serenity was experienced, as well as more joy in life.

Participants reported holistic (as in affecting the whole person in all their aspects) personal and professional healing. This healing was described as an increased congruence between personal and professional life, right brain-left brain functioning, mind-body-spirit within and beyond self, and external actions matching internal values. One reported, "*I am in a new world because my love, my focus, my avocation, and my vocation are one.*" Nurses prioritized their time differently to reflect their values, and in some instances became aware of "hurrying less."

A deeper awareness of spirituality/sacredness was experienced within self, in others/relationships, in everyday common events, in nursing, and in the universe. Commitment to living from the concept that "we are all one and interconnected" occurred. A stronger love for nature/earth was experienced. Some discovered that they had everything they needed and felt deeper faith in the universe's capacity to provide. A greater trust in the unknown was developed through looking for meanings to unfold in events and relationships. Discovery of

meanings confirmed synchronicities, which were perceived to be a form of guidance.

Major changes in relationships occurred, including divorces and marriages. Participants released or transformed unhealthy relationships, and were open to forming new friendships/partnerships. Relationship changes were described as beneficial. In the process of becoming a holistic nurse, participants sensed others' energy fields more acutely, felt increased compassion and empathy for others, and generally valued others more. Nurses felt that they had become a better person in all their roles (parent, spouse, professional, etc.).

Participants described using mutual process and presencing with others, which facilitated a greater depth of interaction during which others were heard, respected, and advocated for as whole persons. Key characteristics of this mutual process/presencing included a non-judgmental attitude and the release of the need to control outcomes. One participant said, "*I allow the client to create their own healing process, regardless of what that means to me.*" Another noted, "*There is a distinction between the one-way therapeutic nursing relationship taught in nursing school, and the two-way holistic relationship.*" Participants remarked that through developing expertise in holistic nursing skills and modalities, professional effectiveness increased and professional scope of practice expanded. One said, "*I feel I have more to offer clients.*" Another noted, "*Being the environment and the process...is the most direct and successful catalyst to facilitating healing in others.*"

Participants received unconditional love, acceptance, honesty, humor, nurturing, encouragement, and support from others. Community with holistic professionals from varied settings of practice was experienced in a way that stimulated learning, felt like a homecoming, felt sacred, and encouraged long-term friendships. In the process of becoming, some participants compared themselves to other holistic nurses. The opportunity to share holism with faculty and colleagues stimulated a deeper commitment to integrity, and "walking one's talk." Most participants expressed gratitude for the process/growth, for guidance (internal and external), for holistic founders, and for current companions on the journey.

Participants felt personally and professionally validated. Holistic nursing theory provided the knowledge base (roots) to validate the professional scope of holistic nursing practice, in a way that transcended modalities/techniques. Personal and professional validation was also received from colleagues/faculty. Paradoxically, participants described how they became less dependent on others for validation as they learned how to use and trust their intuition more; and as they became attuned to authentic self. As one said, *“I want to live the truth, and then let someone confirm what I know.”*

Participants became more aware of their power to influence/make a difference in the universe. They became more proactive, assertive, and willing to take risks. They developed their voice and learned a vocabulary to express themselves more effectively personally, professionally, and publicly. A couple participants described how holism provided a foundation for caring, transformational leadership. Holistic nurses became role models and were actively sought out in professional and community circles as a resource. Awareness of interconnectedness and the “ripple effect” fed the desire of participants to share with/ assist others in a positive way. As one shared, *“My path is to be a blessing wherever I am.”* Having experienced a paradigm shift, many became eager to facilitate a paradigm shift for others.

Many participants expressed that it was difficult to live holistic principles in conventional nursing education programs and settings of practice. The challenge of living a holistic paradigm in a world that has not caught up continues for most. Some felt more patient, others felt impatient in response to others’ inability or unwillingness to accept holistic principles. “Living one’s truth” can be perceived by others to be threatening and/or can open up new professional opportunities. While some were able to integrate holistic nursing into their current settings of practice, many experienced increased dissatisfaction with nursing in traditional settings. The latter responded by creating private holistic nursing practices, departing from nursing altogether (as conventionally defined), or embarking on new nursing career paths. One reported, *“Now that I work at a Social Service Agency, people comment that I’m no longer nursing. I reply that once a nurse, always a nurse, and that I am a nurse of the future.”* Specific professional

opportunities that were embraced included developing and teaching holistic courses, writing books, collaborating with physicians/others to develop model programs, grant writing, pursuing more education in spirituality or modalities, organizational transformation, and sustainable development. A few noticed that they were travelling more. For some, holistic nursing affected how participants supported themselves financially, which prompted re-examination of beliefs/values where finances are concerned.

**The Lived Experience of Becoming a Holistic Nurse: The Themes
(from which the above description was created)**

<u>Themes</u>	<u>Characteristics</u>
1. Being and Becoming	1. We already are whole beings 2. Holism is a continuous, expansive process
2. Precipitating Factors	1. Professional burnout 2. Travel in foreign countries 3. Use of alternative/complementary therapies 4. Personal growth events
3. Re-valuing of Nursing	1. Rediscovery of meaning 2. Expansion of definition of nursing
4. Self Care	1. Essential first and continuing step 2. Involves lifestyle changes 3. Effect on self and others
5. Power of Mind	1. Adoption of reflective practice 2. Expansion of perception 3. Deliberate use of thought to benefit self and others
6. Discovery of Authentic Self	1. Requires self awareness 2. Increases self esteem, self confidence, self awareness 3. Results in more expansive self concept/identity 4. Enhances creativity 5. Reliance on intuition
7. Emotional Impact	1. Emotions felt more intensely 2. Emotions experienced as conflicting and/or overwhelming.

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| | <ul style="list-style-type: none"> 3. Confrontation of fears/resistances 4. Overall increase in serenity 5. Increased joy in life 6. Gratitude |
| 8. Healing | <ul style="list-style-type: none"> 1. Experienced holistically 2. Experienced as increased congruence 3. Re-prioritization of use of time |
| 9. Spirituality | <ul style="list-style-type: none"> 1. Synchronicities used as guidance 2. Increased connection to the sacred 3. Stronger love for nature, earth 4. Deeper faith in process 5. Realization of oneness and interconnectedness |
| 10. Changes in Relationships | <ul style="list-style-type: none"> 1. Mutual process/presencing 2. Became better person in all roles 3. Valued others more 4. Holistic development affected every being in nurse's life |
| 11. Validation | <ul style="list-style-type: none"> 1. Received from others 2. Experienced professionally through nursing theory 3. Less need for external validation |
| 12. Community | <ul style="list-style-type: none"> 1. Experienced with holistic professionals 2. Empowering 3. Fostered long term friendships 4. Stimulated deeper commitment to integrity |
| 13. Expressiveness | <ul style="list-style-type: none"> 1. More able to articulate holism and self 2. Increased assertiveness, proactivity, and risk taking 3. Resource and role model for others 4. Caring, transformational leadership 5. Increased desire to help others |
| 14. Paradigm Conflict | <ul style="list-style-type: none"> 1. Fluctuating levels of patience 2. Challenge of integrating holism in conventional settings of practice |
| 15. Professional Opportunities | <ul style="list-style-type: none"> 1. Current settings of practice 2. Private practice 3. New nursing career paths 4. Departure from nursing |
| 16. Miscellaneous Effects | <ul style="list-style-type: none"> 1. Increased travel |

2. Finances

Who Were the Participants?

Holistic Nurses: For the purposes of this study, a holistic nurse was defined as a registered nurse who had successfully completed the Certificate Program in Holistic Nursing.

Certificate Program In Holistic Nursing: The Certificate Program in Holistic Nursing (CPHN) referred to in this study was a national program taught by Seeds and Bridges, Inc., that was endorsed by the American Holistic Nurses' Association (AHNA).

2004 Update: The Certificate Program in Holistic Nursing and Seeds and Bridges, Inc. no longer exists, but served as the foundation for [The Birchtree Center for Healthcare Transformation](#), which offers a wide variety of holistic nursing development opportunities.

Gender: 59 females and one male.

Certification in Holistic Nursing: Thirty two (53%) were certified in holistic nursing, and 28 (46%) were not certified.

Members of the American Holistic Nurses' Association: Fifty five (92%) were members and five (8%) were not members. Of the members of the American Holistic Nurses' Association, 39 (71%) reported they became members before starting the CPHN.

Modalities: Forty six participants (77%) indicated that they had learned one or more modalities prior to attending Phase I of the Certificate Program. The three most frequently listed modalities were Therapeutic Touch, Healing Touch, and Guided Imagery.

Highest Level of Nursing Education: 3% Doctorate, 32% Master's Degree, 30% Bachelor's Degree, 23% Associate's Degree, and 12% Diploma.

Highest Level of Non-Nursing Education: 3% Doctorate, 17% Master's Degree, 17% Bachelor's Degree, 5% Associate's Degree, and 58% Not Applicable.

Geographic Distribution: Northeast 45%, Southeast 28%, Midwest 15%, West 12%.

Number of Participants According to Year Graduated from CPHN: 1993-1, 1994-8, 1995-9, 1996-15, 1997-24, No response-1.

Age of Participants: Under 30 years- 2, 31 to 40 years- 12, 41 to 50 years- 22, 51 to 65 years-18.

Why Was This Study Important?

In the nursing profession and in the general population at large, much confusion exists about the definition of a holistic nurse, and how holistic nursing practice is the same or different from conventional nursing practice (Kolcaba, 1997; Sarkis & Skoner, 1987; Wardell & Engebretson, 1998). With the public's increased interest in holism and alternative and complementary therapies, educational programs for health care practitioners are actively seeking ways to weave information about holistic practice into their curricula. Traditional settings of practice have also become more receptive to holistic practice. The purpose of this study was to clarify the impact of becoming a holistic nurse on the nurse's personal and professional life, and to gain insight on what becoming a holistic nurse means.

An expanded search through CINAHL and Medline in 1998 yielded no studies about the lived experience of becoming a holistic practitioner, or about the lived experience of becoming a nurse. While at least one nursing book (Keegan & Dossey, 1998) consists of profiles of nurse healers, no attempt has been made to identify common themes that occur in nurses' lives as they consciously develop their holistic nursing practice. **2004 Update: Since the completion of this study, a search through CINAHL and ProQuest has yielded one additional study about the overall process of becoming a holistic nurse (Slater et al, 1999).**

To date (1998), only two research attempts (Dossey, Frisch, Forker, & Lavin, 1998; Estby, Freel, Hart, Reese, & Clow, 1994) were made to clarify the essence of holistic nursing practice from the nurses' point of view. Estby et al. (1994) conducted a descriptive, non-experimental study using the Delphi survey process with 17 expert holistic nurse practitioners to identify the principles of holistic health and care goals related to each principle. Dossey et al. (1998) conducted a quantitative survey of AHNA members entitled *Inventory of Professional Activities and Knowledge of a Holistic Nurse (IPAKHN)*. The survey was conducted by AHNA in collaboration with the National League for Nursing in 1996 for the purpose of creating a national certification exam in holistic nursing. It should be noted that both the above studies focused on illuminating the meaning of holistic nursing from a professional perspective, with relatively little emphasis placed on discovering the meaning of holistic nursing from a personal perspective.

The findings of my study appear to support the 17 principles of holistic practice identified by Esby et al. (1994). The findings of my study are difficult to compare with the findings of the study by Dossey et al. (1998), primarily because

the latter was a quantitative study organized around the steps of conventional nursing practice (assessment, client problems, outcomes, plan, implementation, evaluation). Participants in my study described nursing process as mutual process in which non-judgmentalness and letting go of outcomes was considered very important, so no attempt was made to have participants rank the importance of one aspect of holistic practice over another.

Lauterbach and Becker (1996) noticed some interesting outcomes in their experience of teaching self reflective practices to approximately 672 registered nurse/bachelor's level nursing students. The outcomes included increased awareness, increased depth and breadth of understanding, and expanded consciousness. Self reflective practice was woven together with self care, and through self care transformation in caring practices occurred. These observations appear to be congruent with the findings of my study.

The findings of this study have implications for every area of nursing practice. Only a few of the major implications will be covered here. The most persistent implication that had to be addressed in almost every part of this study was the lack of clarity in the definition of holism. Exactly when does one become a holistic nurse? After reading a book, attending a conference, taking a course, obtaining a degree, becoming certified? In fact, can this question ever be resolved, if one does not "become" a holistic nurse as some of the participants seemed to suggest? This was the immediate question that the researcher had to deal with in selecting a sample population. How the findings from this study will apply to other settings and populations will depend heavily on how holism is defined and practiced in those settings and populations.

While the findings from this study could illustrate any of the major holistic nursing theories (Parse, 1992; Rogers, 1992; Watson, 1988), the closest fit in the researcher's opinion occurred with Newman's Theory of Health as Expanding Consciousness (1994). Participants described repeatedly how becoming a holistic nurse was an expansive process in many aspects of their lives, including expansiveness of perception, self concept, definition as a nurse, and relationships. Self care was probably the most frequently mentioned theme in the protocols, which Newman clearly ties in with holistic nursing through holographic principles. Mutual process and presencing are also clearly described in Newman's theory. Additional, more in-depth research on how nurses expand their consciousness through holistic development could provide additional, valuable insights to Newman's theory.

One of the limitations of this study included the advanced age and years of nursing experience of the participants. On the other hand, considering the fact that the national nursing population is aging (with the majority age 40 and older), the sample population in some ways resembled the nursing population at large. While it is difficult to ascertain how much holistic principles are being woven into current nursing curriculum, many of the participants described clearly how they missed spirituality, self care, mutual holistic nursing process, and holistic nursing theory in their educational preparation as a nurse.

Nurse educators could advance the profession of nursing and transform educational settings through teaching, role modeling, and practicing holism.

Comparing the findings of a study on the lived experience of becoming a nurse

with the findings from this study might provide additional clarification on the differences and similarities of holistic nursing and conventional nursing.

Participants in this study described how they felt renewed love for their profession, and how their professional practice became more effective, as a result of learning holistic nursing. They also described how challenging it is to practice holistically in conventional settings. These findings have implications for nurse administrators in terms of creating environments that support holistic practice, and in terms of retaining a healthier, happier staff that would be less prone to burnout. If holistic practice is more effective, as the findings suggest, there are clinical implications as well that could be explored.

Most of the participants described how important “walking their talk,” “living their truth,” and “being” was in their healing practice. Most current research appears to be focused on measuring the results of “doing” interventions with clients. Perhaps in the future, nursing research could focus more on “being” modes of practice, such as presencing with others for example. If holistic nursing is a way of being as the findings suggest, then interesting ethical issues become apparent in terms of evaluating holistic practice. It is one thing to judge someone’s actions, quite another to judge someone’s character or consciousness...which could be of immediate concern in areas such as certification.

Update: The reader is encouraged to review Jackson’s recommendations (2004) for education, clinical practice, leadership, and research based on her study of the power and pitfalls of being a healer in a medical surgical environment.

How Was this Research Done?

A qualitative, phenomenological design was used in this study. The research plan was jointly approved by faculty members at the College of New Rochelle and the Seeds and Bridges Inc. Certificate Program in Holistic Nursing (CPHN) to ensure that it met ethical standards for research. The researcher is a certified holistic nurse, graduate of the CPHN, and was a student in the Master's Degree Program for Holistic Nursing at the College of New Rochelle during the time of the study.

The graduates of the CPHN were chosen as a purposive sample because the program was nationally focused and open to all licensed Registered Nurses since its inception. This particular program was the only certificate program in holistic nursing endorsed by the American Holistic Nurses' Association in 1998. (The [American Holistic Nurses' Association](#) has endorsed additional programs since the completion of this study, the reader is referred to their website for a listing). A written survey and consent form was sent to 265 graduates. Participants were asked to provide demographic data and to respond to the following probe: "Please describe how becoming a holistic nurse has affected your personal/professional life. Share all the thoughts, perceptions, and feelings you can recall until you have no more to say about the experience." A total of 65 surveys were received. Three were eliminated due to incomplete responses. The sample was closed at 60 usable responses, when participant accounts appeared repetitious and no new themes were emerging. This met the criteria of redundancy established by Lincoln and Guba (1985).

The researcher used holistic principles of self care, self awareness, centering, intentionality, and the creation of sacred space in her approach to analysis of the data so that important essences could be extracted and synthesized with clarity. A modified form of Colaizzi's method (1978) was used to analyze the data. The participants' written descriptions (protocols) were collected and read to get an overall view of the phenomenon, then significant statements were extracted from the protocols in the order they were received. At this point the researcher noticed that later participants made similar statements to those of earlier participants, however the wording was more precise or there were additional shades of meaning. The researcher decided to include these similar statements and risk redundancy, rather than risk losing what could be important details in the formulation of meanings.

The researcher then reviewed all protocols and significant statements carefully to check for accuracy, making additions and comments as necessary in red pencil. The researcher purposely selected two protocols that were emotionally disturbing to her, and randomly selected three additional protocols. These five protocols with their significant statements were taken to a Master's prepared, non-nurse, human services professional for review. The reviewer commented that the researcher had included significant statements from personal events that occurred as a result of holistic choices, and felt that data from these personal events or "subsets" were not appropriate to include. Thus a paradigm conflict based on how one chooses to define holistic was discovered. The reviewer also noted that some statements were extracted from described events occurring "before" becoming a holistic nurse, and stated that these

statements were not technically a response to the research question and should therefore be excluded. Finally the reviewer noted that significant statements about the specifics of professional opportunities were missed.

The researcher reviewed the subsets in question and decided to include the data because it “rang true” to the researcher’s experience in becoming a holistic nurse. The researcher acknowledged that data from events occurring before becoming a holistic nurse was not technically a response to the research question, but decided to keep this data since it was clearly identified in the extraction process as “precipitating factors,” and many participants decided to write about these factors and obviously thought they were important. The researcher reviewed all protocols a third time to extract the missed significant statements about professional opportunities and any other subjects that were missed, marking these in blue pencil. A total of 325 significant statements were extracted.

The significant statements were then clustered into groups and subgroups, from which meanings were derived. The researcher ensured that all significant statements were accounted for in meanings, and reviewed protocols as necessary to ensure that significant statements were being interpreted in their original context. Some significant statements were applicable to multiple meanings. A total of 64 meanings were derived. The aggregate formalized meanings were then organized into themes, and an exhaustive description based on the themes and meanings was written.

Summary (Abstract):

This report describes a qualitative, phenomenological research study that was undertaken to illuminate the meaning of becoming a holistic nurse, and the effects of this lived experience on the nurse's personal and professional life. Written surveys from 60 graduates of the Certificate Program in Holistic Nursing were analyzed, revealing 16 themes and resulting in an exhaustive description of the phenomenon. The themes included being and becoming, precipitating factors, re-valuing of nursing, self care, power of mind, discovery of authentic self, emotional impact, healing, spirituality, changes in relationships, validation, community, expressiveness, paradigm conflict, professional opportunities, and miscellaneous effects. The process of becoming a holistic nurse was correlated with Margaret Newman's theory of Health as Expanding Consciousness.

The People Who Made This Research Possible:

All great endeavors are group efforts! First I would like to thank the participants of this study for their honest, detailed, and enthusiastic responses. I am grateful to the founders of the Certificate Program in Holistic Nursing, Veda Andrus, EdD, RN, HNC and Jane Yetter Lunt, MEd, RN, HNC and to my advisor, Barbara Joyce, PhD, RN for their mentorship and support. I also appreciate Mary White, MA for reviewing selected portions of this study. Maria McAdams, LVN inspired me to become a nurse and continues to be my best friend. Finally I wish to dedicate this study to holistic nurses everywhere in honor of their way of being in the world.

For More Information:

The original research report contains more information about the formulation of the research approach, the limitations and rigor of this study, as well as

appendices covering correspondence with participants (i.e. letter of introduction, consent form, and survey tool), the significant statements, and the meaning statements. Please feel free to contact me if this information would be useful to you.

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