

The Feasibility of a Holistic Wellness Program for HIV/AIDS Patients Residing in a Voluntary Inpatient Treatment Program

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jhn

Journal of Holistic Nursing
American Holistic Nurses Association
Volume 32 Number 1
March 2014 54-60
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10.1177/0898010113489178
<http://jhn.sagepub.com>

The purpose of this project was to examine the feasibility of an ongoing holistic wellness program in a residential facility treating persons with HIV/AIDS. The goal was to create a voluntary, four week holistic wellness intensive within the established inpatient behavioral health treatment program. Participants were given practicable holistic self care tools to effectively manage HIV related symptoms, general medical issues, addiction, depression, stress and anxiety. *The program incorporated evidence-based holistic activities including yoga, therapeutic dance, meditation, Reiki, and reflective journaling.* Narrative survey results and post-program evaluation support that an ongoing holistic wellness program within the existing treatment model is feasible and could have numerous potential beneficial effects. *This project clearly exemplified the ideal opportunity for holistic nurses to implement innovative holistic interventions within the current healthcare delivery system.* It is the author's observation that future studies with a larger participant group to further examine measurable benefits can lend valuable information and insight into the future development of holistic wellness programs for residential treatment facilities.

Keywords: *adults; health promotion; AIDS*

The relationship between HIV and complementary and alternative medicine (CAM) is a rapidly evolving area for research and clinical practice. Current studies link CAM and holistic self-care strategies in HIV and clearly support the connection between better health and quality of life.

It is known that between 70% and 85% of persons living with HIV engage in some form of complementary self-care. Current research revealed that 66% of HIV positive participants surveyed report routine use of psycho-spiritual interventions like meditation, faith healing, and/or visualization; and 49% indicate use of body therapies to manage HIV symptoms and improve overall health status (Borman, Uphold, & Maynard, 2009). Because of the intensity and frequency of CAM use revealed in the study, the authors recommend that nurses should be incorporating CAM-related patient education and safe complementary practices into a patient's plan of care (Borman et al., 2009).

An additional study discovered that of 24 HIV-positive participants surveyed in a behavioral-medicine program, 48% reported using body therapies like massage, Reiki, and acupuncture. Sixty-four percent reported engaging in some form of aerobic exercise comparable to yoga or dance, 54% engaged in prayer, and 32% reported using cognitive therapies (Nicholas et al., 2003). The study participants reported that they were living with HIV without

Author's Note: A very special acknowledgement and thank you to Florida Atlantic University nursing faculty member, Candice Hickman, MSN, RN. Her mentorship including her encouragement, patience, and feedback has been invaluable to the success of this project. I would also like to thank Broward House counselors and program cofacilitators, Omowale Sababu and Candice Rasa. Their unconditional support and collaboration truly gave life to this program. Please address correspondence to Vanessa Morgan, Florida Atlantic University, Christine E. Lynn College of Nursing, 777 Glades Road Boca Raton, FL 33431, USA; e-mail: vmorgan3@fau.edu

progression for longer than a decade and that perhaps this was directly related to the benefits of complementary therapies combined with behavioral-medicine support groups. The authors suggest future intervention studies utilizing complementary therapies within a behavioral-medicine framework to further investigate the role of behavioral medicine, complementary therapies, and quality of life in HIV/AIDS (Nicholas et al., 2003).

Project Purpose

The purpose of this project was to examine the feasibility of an ongoing holistic wellness program in a residential facility treating persons with HIV/AIDS. The program participants belong to a vulnerable local patient population with a range of medical and social challenges, including addiction, mental health issues, previous jail incarcerations, and homelessness, to name just a few.

The program was a collaborative effort involving the author, residents, and treatment staff from the Broward House in Fort Lauderdale, Florida. The goal was to create a voluntary, 4-week holistic wellness intensive within the existing Broward House inpatient behavioral health program. Participants would be provided with practicable holistic self-care tools to effectively deal with HIV-related symptoms, general medical issues, addiction, depression, stress, and anxiety. It was the hope and goal of the facilitators that this 4-week project might also serve as a preliminary template for the development of a more permanent, sustainable holistic wellness program for Broward House residents.

Background

The Broward House enterprise is Broward County's oldest and largest HIV/AIDS community service organization, serving over 6,000 women, children, men, and families living with or at risk for contracting the HIV/AIDS virus. Broward House offers a wide range of services, including assisted living, independent housing, medical respite, case management, client advocacy, HIV testing and counseling, inpatient chemical dependency treatment, mental health therapy, and support groups (www.browardhouse.org).

According to inpatient facility census reports, the Broward House residential behavioral health program serves between 25 and 28 clients per month. Residents are referred to Broward House from a variety of

community sources and undergo a thorough screening and admission process. A resident's length of stay averages between 4 and 6 months. Twenty-six clients were reported in residence and participating in the inpatient behavioral health curriculum at the time of the proposed holistic wellness project.

The existing inpatient program offers HIV positive persons focused medical and case management, addiction treatment, mental health counseling, support groups, employment assistance, and preparation for independent living. Broward House counselors detailed a behavioral health treatment model based on five levels. Each level is designed to progressively prepare residents for a self-sufficient lifestyle built on the foundation of sobriety. Level 1 is highly structured, involving six group activities a day, 7 days a week. Level 2 is a continuation of Level 1 expectations, including preparation for independent living and developing a recovery support network. Level 3 is a 6-day program and residents concentrate on growing their support network, along with advancing their preparation for housing and employment. Level 4 residents attend morning program activities Monday through Friday as they begin the final selection of housing solutions as well as attending work and school. Level 5 activities center on transition skills to self-sufficiency as residents begin the process of managing their recovery beyond Broward House.

Program and Participant Objectives

During the program planning phase, it was observed there had been specific efforts made by two inpatient counselors to integrate complementary self-care opportunities for residents. Due to each counselor's own job responsibilities and case load, consistently integrating holistic wellness practices into the current program has often been limited by time and the existing conventional treatment model.

Both counselors were invited to meet and discuss the proposal to facilitate a holistic wellness program as a voluntary 4-week intensive. From this meeting, the holistic wellness program and participant objectives were formulated. The first objective was for participants to remain sober from alcohol or drug use during the 4-week program and "level up" in accordance with established inpatient behavioral health program guidelines. Second, the participant's physical, mental, emotional, and spiritual status would remain stable and/or improve per Broward House

staff or self-reporting. The third objective was for participants to describe at least one personal benefit from the 4-week Broward House holistic wellness program.

Literature Review

During this initial meeting, the most appropriate complementary activities were agreed on, based on three key questions. What learned holistic behaviors would residents be most likely incorporate into their daily life? What are the existing holistic interests, practices, and strengths of the three facilitators? Finally, how would these holistic activities complement the existing behavioral-medicine framework?

After reflecting on these questions and discovering research evidence to support the chosen holistic activities; the program agenda was finalized to include yoga, therapeutic dance, meditation, Reiki, and reflective journaling.

Yoga

Yoga was facilitated by the Broward House counselor. Yoga is a classical practice of specific techniques and poses that dates back more than 5,000 years. In ancient times, the desire for greater personal freedom, health and long life, and heightened self-understanding gave birth to this system of physical and mental exercise, which has since spread throughout the world. The word *Yoga* means “to join or yoke together,” and it brings the body and mind together into one harmonious experience (www.american yogaassociation.org).

The latest research supports the benefits of yoga on mood, perceived stress, and quality of life in persons living with HIV. Seventy HIV-positive subjects received daily 1-hour yoga therapy sessions for 3 months. Results indicated a significant decrease in perceived stress and psychological distress and an increase in positive affect utilizing pre- and postprogram mood, attitude, and affect scales. Study authors concluded that yoga sessions benefited HIV seropositive patients in reducing psychological distress, and recommended larger randomized trials to validate these findings (Rao et al., 2012).

JourneyDance™

Facilitated by the Broward House counselor, JourneyDance™ is a form of therapeutic dance that moves participants through deep, personal exploration into a loving, intimate relationship with body, mind,

and spirit. The “journey” takes dancers through various energetic centers in the body to release physical, mental, emotional, and spiritual “baggage” and allows for a deeper connection with their heart energy. No coordination, flexibility, or dance experience is required (www.journeydance.com).

In a 2004 study on the effects of both yoga and dance on perceived stress, affect, and salivary cortisol levels, a significant decrease in perceived stress and negative affect was seen in both groups. Positive affect was increased in the dance group over hatha yoga; however, salivary cortisol was decreased in the yoga group versus the dance group. It is theorized that the inverse trend in cortisol levels could be attributed to temporary physiological stimulation due to rigorous physical exertion in an African dance class (West, Otte, Geher, Johnson, & Mohr, 2004).

Meditation

Meditation of various types was facilitated in all activities by the three program coordinators. Meditation is defined as a state of heightened mental awareness and inner peace that brings mental, physical, and spiritual benefits. It is useful as a self-help technique that can be learned and practiced without adherence to any religion or philosophy (Pruett, Nishimura, & Priest, 2007).

Sixty-two people living with HIV were studied to evaluate the benefits of a yogic breathing and meditation intervention over a 15-day period. The Mental Health Index, the Medical Outcomes Study–HIV Health Survey to determine quality of life, and the Daily Stress Inventory together with in-person interviews were the tools used to verify success of the program (Brazier, Mulkins, & Verhoef, 2006). It is interesting to note that the quantitative data revealed an increase in the number of stressors and the impact of these stressors on one’s life for those in the breathing/meditation group. However, during the interview process, components emerged of the qualitative theme that described feelings of “being okay.” Themes also included an improved ability to manage everyday stressors. Study participants admitted they were experiencing emotions in greater depth. They were learning to “feel” everything, pleasant and unpleasant, with greater intensity (Brazier et al., 2006).

Reiki Healing Circles

These were facilitated by the project’s author. Reiki Healing Circles are gatherings that allow

people to experience Reiki Healing Touch therapy in a group setting. Reiki Circles are mainly intended to bring awareness to Reiki and help educate anyone who is curious to learn more (www.reiki.org).

Reiki Healing Touch is a Japanese technique for stress reduction and relaxation that may also promote physical, emotional, mental, and spiritual healing. It is commonly administered by “laying on hands” and is based on the suggestion that an unseen “life force energy” flows through us and is what causes us to be alive. If one’s “life force energy” is low, then we are more likely to get sick, and if it is high we are more capable of being happy and healthy (www.reiki.org).

Reiki Level 1 Certification Class

Facilitated by the author, this Reiki learning series was designed to equip participants with fundamental energy healing tools they can use to maintain physical, mental, emotional, and spiritual wellness throughout their entire life. Participants learned the following about Reiki. Basic energy healing concepts. What is “Usui” Reiki? How does Reiki work? What can Reiki be used for? The history of Reiki. How do I acquire Reiki energy? Learning and using hands-on practice. Learning Reiki self-treatment. How to give a standard Reiki treatment to others. How to “scan” the energy body. How to incorporate Reiki into daily life (www.reiki.org). Although participation in the holistic wellness program was voluntary, participants were required to attend all of the scheduled classes in order to receive a Level 1 practitioner certificate.

The 2011 study that explored the effects of Reiki sessions and training on residents at the Housing Works facility in East New York most closely resembles what was implemented in the Broward House holistic wellness program. What is noteworthy is that Housing Works does provide ongoing yoga, meditation, massage, and acupuncture in addition to its conventional medical services. The participant demographics, comorbidities, and facility services mirror those of Broward House. Of the 35 study participants, approximately 90% consistently attended Reiki sessions and/or training over the 3-year study period. Narrative results from participants included improved pain symptoms, decreased depression symptoms, enhanced ability to solve daily living problems, increased focus, feeling more grateful and hopeful, and an overall improvement in atti-

tude. The researcher even noted a marked improvement in the energy of the staff and facility, describing a more positive and peaceful environment (Mehl-Madrona, Renfrew, & Mainguy, 2011).

From these results, the researcher was able to conclude that Reiki sessions and training could be successfully implemented in a supported residential setting for people with HIV/AIDS. Nita M. Renfrew, the research associate and Reiki master profiled in this study noted, “The increased self-agency and self-efficacy of people who learned (Reiki) and how to offer sessions to others appeared to generalize to a positive sense of ability to move out into the world” (Mehl-Madrona et al., 2011, p. 49).

Reflective Journaling

Guided questioning and restructuring strategies were designed to aid the participants in examining the feelings and cognitions surrounding maladaptive health behaviors via interactive journaling binders (Proctor, Hoffmann, & Allison, 2011).

One hundred and eighty-three male inmates incarcerated in a local jail were studied to determine the effects of interactive journaling on criminal recidivism. There was a statistically significant impact on recidivism rates, with an observed reduction in criminal recidivism by 15% for the journaling group compared to the control group (Proctor et al., 2011). Interactive journaling was found to be a particularly appealing intervention strategy for use with local jail inmates because it required minimal interaction by clinical personnel and, most important, was time efficient.

Because a number of the Broward House holistic wellness program participants readily admit to previous and sometimes multiple jail incarcerations, this study was deemed applicable as one of the many social components with which a resident may be dealing in addition to living with HIV.

Participant Recruitment and Enrollment

Participants were recruited from announcements made in general group activity meetings and further individual discussion between interested residents and staff. Of the 26 Broward House behavioral health program residents, 13 attended the open program orientation meeting. Orientation lasted 45 minutes and involved explanation of the proposed holistic wellness activities.

Residents were also provided a program binder that included a weekly schedule and a reflective journal. Time was allowed for residents to ask questions and review the program agenda. On conclusion of the meeting, 10 residents chose to enroll and participate in the program. Enrollment involved residents verbalizing an interest and willingness to commit to the voluntary 4-week intensive in addition to the existing Broward House behavioral health program. According to the residents' own verbal report, half of the enrolled group had never engaged in any holistic practices prior to this project.

Program Schedule

Program activities and meetings took place over a total of 5 weeks. All six activities were scheduled Monday through Friday for 4 consecutive weeks and were designed around the established behavioral health program.

Week 1 began with the orientation meeting. Activities focused on the physical body and were intended to bring awareness to the body through yoga and dance, examining perceptions of body image, and providing tools to assist in managing physical symptoms through meditation and Reiki practice. Week 2 addressed the mental body as participants explored thought patterns, quieting the mind through expanded yoga, dance, Reiki, and meditation practices. Week 3 examined the emotional body through further intensifying of all program activities, including the Usui Reiki Level 1 attunement. During Week 3, participants also met with facilitators for a 30-minute mid-program discussion meeting to obtain feedback and answer any questions or concerns about the program. Week 4 explored the spiritual body through all activities, assisting participants in reconnecting with personal beliefs on spiritual practice and the connection to overall health and quality of life.

Results

According to self-reporting and verification from staff, all 10 participants either maintained or progressed to the next behavioral health treatment level. No reported drug or alcohol relapse was noted during the 4 week program.

An anonymous postprogram narrative survey was given to participants in order to gauge whether they

felt an improvement in their overall health and reported any benefits from the program. Survey responses consistently told of feeling calmer but with more energy, feeling physically stronger, sleeping better, feeling more physically stable, and generally feeling better equipped to care for themselves. Participants also expressed feeling more patient, having increased mental focus, and having more confidence in their own ability to address everyday issues as well as the physical symptoms associated with HIV.

One program participant was placed in medical isolation due to a skin rash and was unable to complete the last week of the program. Medical staff reported that treatment of the rash was successful and the resident was reintegrated into the treatment community within 1 week. Despite being unable to complete all activities, this participant reported that he continued to utilize the tools learned and stated that he felt the program helped him gain a new sense of peace and the opportunity to learn new self-care skills.

Per participants' report, 3 of the 10 reflective journals were 100% completed. Others reported they were still working on their journals and intended to complete all of the guided questions. When asked if journaling should be incorporated into future programs, all of the participants agreed that the journal should be included. Participants were allowed to keep all written instructional materials including program binders for reference and future practice.

At the conclusion of the program, 9 of the 10 program participants completed the Usui Reiki practitioner training and received their Level 1 practitioner certification.

Evaluation

A postprogram meeting was scheduled during Week 5 to allow both facilitators and participants to process their thoughts and feelings about the program. Questions were asked during the meeting to engage conversation about the program and obtain feedback on ways to improve the process for the future.

Discussion revealed three main themes. Participants firmly believed that this type of program should be mandatory for all future Broward House residents. There was a suggestion that all residents can and should participate in offered holistic activities at a comfort level appropriate to each individual. Second, although participants felt the pressures of a more rigorous schedule with both treatment programs,

they stated that they felt empowered knowing they had acquired more tools they could integrate into their lives in a practical way. Third, participants requested that holistic activities be offered as an ongoing outpatient activity so they could remain connected to Broward House's holistic health-promoting initiatives.

Significance to Holistic Nursing

This project exemplified an ideal opportunity for holistic nurses to implement an innovative, community-oriented, tertiary prevention program within the existing health care delivery system. The abundance of nursing and medical research provided the foundation for evidence-based practice and supported the model of complementary therapy as well as each individual holistic activity. A need for holistic self-care intervention and education for this patient population was identified through continuous observation, demand from the affected population, and a willingness by the organization's staff to support and even cofacilitate the process. Nursing objectives were created with consideration of the costs, resources, and program activities needed in order to provide a solution to the need (Stanhope & Lancaster, 2010).

The nurse involved in a holistic wellness program for this patient population should be in direct partnership with the patients as well as community, faith-based, local university nursing holistic programs and AIDS support organizations to develop a solid holistic wellness plan and implement the most effective holistic interventions available. Goals for holistic self-care can be structured to help the patient adjust their day-to-day choices in order to maintain the highest level of functioning possible. Paying attention to the patient's culture, cognitive abilities, self-concept, and self-esteem will help the nurse determine which holistic self-care tools are the most practical to learn and utilize once the patient returns home (Stanhope & Lancaster, 2010).

A variety of different measures such as program records, patient surveys, attitude scales, community indexes, interviews, observations, and even diagnostic tests can be the most effective initial nursing indicators of program success and sustainability (Stanhope & Lancaster, 2010). Conceivably, a

focused nursing assessment and evaluation tool may need to be considered for this type of holistic program.

Recommendation

It is clear, based on research evidence, facilitator and participant feedback, and survey responses; that a more permanent, ongoing holistic wellness program within the existing treatment framework is feasible and would have numerous potential beneficial effects for the residents at Broward House. A pilot study with a larger participant group to further examine measurable benefits can lend valuable information and insight into future development of holistic wellness programs for residential treatment facilities.

It is the author's observation that developing a relationship with the local university holistic nursing program should be considered if this program is to remain sustainable. This relationship can offer guidance in constructing a grounded holistic clinical treatment model. A holistic wellness program created with Broward House treatment staff, nursing, administration, and other holistic practitioners can result in a framework that is uniquely qualified to serve as an agent of positive change for persons living with HIV.

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