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Six Steps to Compassion: Practicing T'ai Chi in a Healthcare Setting

Hiromi Hangai Johnson

pronouns: She/Her

Hiromi H. Johnson started practicing T'ai Chi as part of a rehabilitation program following knee surgery in Japan. After experiencing the benefits and pursuing the martial art for more than 40 years, she feels that sharing T'ai Chi is her calling. She has also practiced Vipassana meditation and Japanese tea ceremony since 1978. In her spare time, she enjoys making silk scarves from vintage Japanese kimonos.

Kath Weston

pronouns: Agnostic

Kath Weston, a professor and anthropologist, survived graduate school by playing conga drums, training as an auto mechanic, and making wooden toys for children. She began studying T'ai Chi and became an accidental gardener while grieving the loss of a beloved aunt. For one of her books, *Traveling Light: On the Road with America's Poor*, she rode buses across the United States for several years.

**“It doesn’t matter what is happening.
What matters is how we are relating
to our experience.”**

–Tara Brach

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Note to reader:

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Exhausted nurses and doctors, their metabolism disrupted by long hours, rotating shifts, high-pressure working conditions, and emergency calls in the dead of night. Hospital administrators torn between the need to meet deadlines for grants that they know will impact the lives of patients and the need to restore themselves so that they can live to write another proposal. Stressed-out nursing and medical students, cramming for exams, coaxing their bodies into alertness with vending machine snacks, crashing after they reach the inevitable limits, then gearing up to start the cycle all over again. What if there was a way to do more than treat these symptoms of a healthcare system that too often compromises the well-being of its care providers? What if there was something deeper than palliative care available to calm and strengthen their bodies while simultaneously teaching them how to cultivate compassion?

In 2015, with the support of the University of Virginia School of Nursing, Hiromi Hangai Johnson, one of the authors, offered a Six-Step T'ai Chi course to serve medical care providers who confront these challenges daily. The weekly course,

located in the university's health complex, had a drop-in format. Its mission was to give care providers an opportunity to experience the benefits of T'ai Chi in a medical setting.

The opportunity to share T'ai Chi in a healthcare context was especially meaningful to Johnson, whose mother received a diagnosis of Stage IV breast cancer at the age of 66, had a mastectomy, and suffered side effects from chemotherapy. After her mother passed away in 1988, Johnson started practicing T'ai Chi seriously. With more than 30 years of practice under the guidance of several T'ai Chi Masters, she is now herself a Master in the Cheng Ming martial arts lineage, as well as the Founder and Director of the nonprofit Charlottesville T'ai Chi Center, where class participants can learn T'ai Chi and related internal martial arts and then go on to explore more advanced T'ai Chi techniques. She dreamed of being able to do something good for patients, doctors, and nurses like the ones who had worked so hard to ease the pain of her mother.

If you are reading this chapter because you have practiced T'ai Chi for years without thinking much about how it relates to compassion or healthcare practice, read on. You will get a glimpse of what happens during a Six-Step class session, gain a better understanding of how T'ai Chi can become a form of care for the caregiver, and learn more about how group T'ai Chi classes cultivate compassion. You will also encounter a discussion of T'ai Chi's potential to transform the high-pressure workplaces in which many medical professionals work. If you are a medical professional who has no idea what T'ai Chi is, that's fine, too. Even the most advanced T'ai Chi practitioners value "beginner's mind."

Welcome to Class

As the clock approaches 5:00 p.m. on a Wednesday, people begin to trickle into the Compassionate Care Room at the school of nursing. Meditation cushions, yoga mats, and blankets are stacked neatly in racks against the wall. Next to them is a

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sign of gratitude: “Thank you for using this space and taking time to reflect, rest, and care for yourself.”

Master Hiromi and the students bow to one another, in a gesture of respect deeply embedded in martial arts traditions. Even before participants make a circle and introductions begin, bowing establishes an orientation to others in the room. After introductions come warm-ups, supported by gentle verbal cues from the instructor. “Palm to the hip and from there up to the solar plexus. Push forward. When you finish the push don’t lock your elbow. You are still bending.” Then, during the double push: “Feel the rolling, like a wave.” Each warm-up is designed to do more than stretch the muscles while loosening and lubricating the joints. These slow movements coax bodies into stances that become integral to more formal T’ai Chi practice. Although teachers can lead warm-ups silently to help establish a peaceful atmosphere, especially after the movements become familiar, an instructor can also take the opportunity to remind participants to attend closely to themselves, much as they would attend a patient. “Weight shift, forward-back, forward-back. Spine turns. When you do the warm-ups, listen to your body. When you turn your spine, what are you feeling?”

There are many different T’ai Chi forms, each composed of a set series of movements. After a period of T’ai Chi Walking, a type of meditation, the Six-Step form practiced in this class begins.

Everyone steps out to the left, feet shoulder width apart, finding unity in difference because “shoulder width” depends upon the body. Knees bend. Shoulders relax. Hands rotate in slightly until the “tiger’s mouth” between thumb and forefinger aligns on each side of the body. Arms begin to float steadily, softly upward until they reach the opening position. Together.

The next five steps unfold smoothly, symmetrically. The horse’s mane is parted, so to speak, in two directions, as open palms glide past one another, first to one corner, then the next, always coming gently back to the center between movements, maintaining balance. There is time for three repetitions of the entire form, enough to reinforce learning and allow everyone to sink deeper into the experience. Master

Hiromi guides the first round, then turns over the repetitions to participants who have come to class often enough to know how to do the steps themselves. These students work in pairs at the head of the group, synchronizing their motions and giving each other the confidence to lead.

The class accommodates students of all levels by positioning beginners in the middle of the group and more advanced students at the four corners. All six steps easily adapt for differently abled bodies. Students can complete the entire sequence while seated, remain in the middle of the group if they have trouble seeing or hearing, or receive instruction that uses simple analogies (“Throw the frisbee!”) to make things easier to grasp.

The Six Steps that comprise the form taught in the class are, in order:

- Beginning
- Opening T'ai Chi
- Part the Horse's Mane
- Play the Lute
- Kick with Heel
- Closing

These Six Steps incorporate the slow, flowing movements and even tempo characteristic of T'ai Chi, yet there is much more going on than learning new motions, or even the self-defense applications embedded within a form. There's a reason T'ai Chi constitutes an *internal* martial art. Its most profound effects—mental, physical, spiritual—happen in ways the eye cannot see. Martha Taylor, a nurse who began studying with Master Hiromi in 2013, originally decided to check out T'ai Chi as a way of addressing the chronic job-related stress she was suffering after decades of working as a hospital nurse. Martha entered her first class “feeling severe depression, hopelessness, overwhelming fatigue.” Sixty minutes later, she said, “I felt like I had been plugged into a charger overnight and I was ready to have a fabulous day.” Her experience is not unique.

Many people initially try T'ai Chi in order to “de-stress,” “get some exercise,” or “calm down,” then stay because they discover something more powerful. What is it about this centuries-old practice that allows even beginners to improve their health, connect more compassionately with the world, and feel restored, whether or not they go on to learn a more intricate long form like the 100 Steps cherished by the Cheng Ming lineage?

Wellness Benefits of T'ai Chi

It often comes as a surprise to beginners that they can work up a sweat and feel thoroughly refreshed after an hour of performing what looks (from the outside, at least) like very gentle, extremely slow movements. If all they know about T'ai Chi comes from films, or a glimpse of people practicing in a park, they arrive with questions. Does this really count as a workout? Is there any science to back up the claims about health benefits? And what's the point of moving like molasses?

T'ai Chi differs from fitness programs such as weightlifting that sculpt and tone bodies in ways that make it easy to mistake fitness for health (Wayne & Fuerst, 2013). From her perspective as a nurse, Martha saw T'ai Chi as a path to “creating future health instead of being at the mercy of it,” a form of preventive and *proactive* medicine, if you like. As a form of bodywork and self-care that doubles as a martial art, T'ai Chi finds inspiration in what has become codified as Traditional Chinese Medicine (TCM), which has its own distinctive take on how bodies work. “Ch'i” (“Qi”) is often translated into English as “energy” or “bioelectricity,” but as with many translations, these placeholders fall somewhat short.

In his highly influential book, *The Expressiveness of the Body and the Divergence of Greek and Chinese Medicine*, Shigehisa Kuriyama (1999) explains how different conceptualizations of physiology in Greek (“Western”) and Chinese medical practice historically led to radically different perceptions of universal bodily phenomena such as the pulse. Anatomical charts abounded in China, as in Europe, but those

charts did not view bodies through the lens of muscularity. Instead of realist depictions of liver and lungs derived from a European history of public dissection, the Chinese medical charts mapped a network of meridians that routed ch'i through the body (see also Beinfeld & Korngold, 2013; Kaptchuk, 2000).

T'ai Chi and Healing

Drawing on this legacy, T'ai Chi focuses on promoting ch'i flow, opening the joints, and dispelling stagnation along the meridians rather than building muscle, although muscles do strengthen considerably along the way. Practicing at a slow and steady pace provides a low-impact workout that strengthens the muscular, skeletal, and internal organ systems (Wayne & Fuerst, 2013). At more advanced levels, practicing slowly also improves reflexes and provides a strong foundation for responding quickly to life's challenges.

As interest rises in what the US National Institutes of Health call “Complementary and Integrative Medicine” (CIM), many hospitals and clinics have begun to offer CIM practices, including T'ai Chi, to patients and staff. “This development is in part a result of growing research on the effectiveness of a broad range of CIM healing practices,” write David Hufford and his coauthors (2015) in an article that explores barriers to the acceptance of biofield healing in “mainstream” healthcare. At the same time, researchers have begun to bridge the divergent views of the body described by Kuriyama with investigations of “the body electric”: molecular bioelectricity generation via ion channels (Levin, 2014), bioelectric signaling in gene regulatory networks (Pietak & Levin, 2017), and so forth.

A brief search of a major medical database such as PubMed will turn up scores of studies that have subjected the health claims associated with T'ai Chi to scientific scrutiny. *The Harvard Medical School Guide to Tai Chi* (Wayne & Fuerst, 2013) is another good place to begin. Some of these studies have small sample sizes or arrive

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at inconclusive results. Yet there is now enough evidence to support an emerging medical consensus that regular T'ai Chi practice can contribute significantly to health in a range of preventive, palliative, and curative ways.

One of the most widely studied health impacts of T'ai Chi concerns balance. A randomized clinical trial with 670 adults aged 70 or older found that a therapeutic T'ai Chi intervention reduced falls by 58% compared with stretching and by 31% compared with a multimodal exercise program (Li et al., 2018). Consistently positive results have encouraged primary care providers to recommend T'ai Chi to seniors as a method of fall prevention. Studies have also demonstrated T'ai Chi's salutary effects on a range of chronic conditions, from Type 2 diabetes to osteoarthritis (Wang et al., 2016; Yeh et al., 2009). One review of the literature found that regular T'ai Chi practice can lower blood pressure, allowing T'ai Chi "to serve as a practical, nonpharmacologic adjunct to conventional hypertension management" (Yeh et al., 2008, p. 845). Another study concluded that T'ai Chi improved renal and cardiac functions of patients with chronic kidney and cardiovascular diseases, possibly through regulation of lipid metabolism (Shi et al., 2014).

The range of research on T'ai Chi's health benefits has now widened to include documentation of enhanced motor function in Parkinson's patients (Yang et al., 2014), alleviation of insomnia in breast cancer survivors (Irwin et al., 2017), and improved exercise capacity and quality of life for patients with chronic obstructive pulmonary disease (Chen et al., 2016). T'ai Chi has yielded better results than aerobic exercise for people suffering from fibromyalgia (Yang et al., 2014) and proved more effective for treating cancer-related fatigue than physical exercise or psychological support (Song et al., 2018). Physical therapists have started integrating T'ai Chi into rehabilitation programs for arthroscopy patients and stroke survivors (Lyu et al., 2018). Some studies have noted that T'ai Chi offers an especially suitable form of exercise for patients with conditions such as cancer who might otherwise become too sedentary (Chen et al., 2016).

T'ai Chi as Care for the Caregiver

As evidence mounts for the targeted effectiveness of T'ai Chi as a medical intervention, more and more medical practitioners have begun to think of a basic 12-week T'ai Chi course as something they can dispense alongside pharmaceuticals. The title of an article in the *Journal of Transcultural Nursing*, "How to Prescribe Tai Chi Therapy," reflects this shift (Allen & Meires, 2011), as does a story run by the BBC under the headline, "Tai Chi 'Could Be Prescribed' for Illnesses" (BBC News, 2015).

Of course, the benefits discussed in the previous section could apply to anyone. Improved health and quality of life testify to the power of T'ai Chi as a form of self-care, but what transforms T'ai Chi into an especially dynamic form of care for the caregiver? First and foremost, T'ai Chi reacquaints medical practitioners with their own bodies after years of learning to subordinate their bodies' signals to the demands of healing others. Secondly, T'ai Chi's simple, low-cost requirements allow courses to be offered on-site in medical facilities, which in turn permits employees to drop in, "recharge," and return to work if necessary. Last but not least, T'ai Chi has the potential to help caregivers who find themselves struggling with clinical burnout, as they come to understand in an embodied way how compassionate awareness of self and other is inextricably intertwined. A few words from healthcare practitioners who have studied T'ai Chi with Master Hiromi will serve to illustrate these points:

"The work environment of a major medical center breeds dissociation with the body," explained Martha Taylor, the nurse quoted earlier in this chapter, as she zeroed in on one of the great ironies experienced by those who sacrifice their own health in the course of taking care of the health of others. Martha continued:

"There are intermittent periods of poor staffing and unpredictable shifts in patient census. Peak performers are identified as people who can work at max capacity for long hours without breaks . . . The toll that this stress takes on the health of hospital employees is monumental . . . Even though I went to the gym regularly and I ate a very healthy diet, I had significant hypertension."

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T'ai Chi gave Martha new tools to address the cumulative effects of years of work-related stress that treadmills, salads, and whole grains could not provide. Slowing down, noticing small shifts in her body's orientation, learning from sensations she had become habituated to brushing away, and that was just the start.

Katherine B. Hoffman, a participant in the Six-Step class, worked as a Grants and Contracts Administrator. One of the things she appreciated about the Six-Step class was its convenient location within the health system. That made it easier for her to integrate T'ai Chi into a demanding schedule in which filing grants on time translates into better outcomes for patients. In one instance, a little bit of T'ai Chi went a long way to help Katherine meet an important deadline:

“The day had been crazy, the deadlines were real. I was pressing on, tired, tight, anxious, as not enough was done and I needed to keep going until it was completed. It occurred to me I could run over and go just that one hour to the T'ai Chi class and come back. I followed the movements. . . The stress and tightness and head spinning with ideas evaporated. I was calm, quiet, and felt relaxed and solid as I returned to work. What a gift! I went back and on with what I needed to do. Everything was easier. I felt good. Work got done and submitted by the deadline.”

Rather than continue sacrificing her own health for the benefit of patients, she had discovered a way to support one by supporting the other.

For Thomas Ball, then a second-year physician resident, T'ai Chi had become an antidote to clinical burnout:

“T'ai Chi is a practice that contributes to my capacity to be present, to be aware of what is going on inside me and those around me, to focus and to stay resilient in the face of day after day in the hospital of caring for patients in severe mental and emotional distress. It helps me to resist the anger, burnout, and jadedness that can come from medical training and practice.”

It is this invitation to explore the integration of “inside me” with “those around me” that extends T'ai Chi's benefits well beyond better balance or cardiovascular health. Some might call it a bridge to compassion.

Cultivating Compassion, Sensing the Gap

Imagine a room where a group of people gather to practice T'ai Chi together. When they first enter the room, one by one, on a drop-in basis, they are not yet a group. Beginners, especially, often move to their own rhythm, forgetting to notice what others are doing, forging ahead when they think they remember something and later falling behind. The class goes on. Without really trying, people start to synchronize, moving at the same pace regardless of level of experience. As they sink into their bodies, a sense of community, an effortless orientation to others in the room, something peaceful and shared, emerges. How does this happen?

At times, teachers cultivate a foundation for compassion by giving verbal instructions. After a period of Walking T'ai Chi in the Six-Step class, for example, the instructor might say something like, “There is always some sort of sensation in your body, but you're just not noticing it. If you are being observant about yourself, that will affect other people.” In small but explicit ways, they call attention to the link between awareness of self and awareness of others, preparing students to understand why compassion cannot grow in the absence of a compassionate stance toward oneself. They also remind leaders in “the corners” to closely coordinate their movements. More advanced students are positioned at the corners of the group so that less experienced students will always have someone to follow as they turn. If the corners move at different speeds, it becomes confusing for people in the middle, who wonder which one to follow.

The pedagogical methodology of teaching by demonstrating and learning by following also helps integrate people into a larger whole. They soon find themselves moving in parallel, yet somehow as one. This cannot happen without setting aside all the things in a busy workday that lead to self-absorption in a particular set of tasks or problems. They enter a realm of quiet and respite where time is measured not in hours, minutes, or appointments, but in breaths. Breaths taken together.

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Compassion? Not yet. Or at best, a lesson in how fleeting compassionate engagement can be, and how quickly awareness can turn away from the open-hearted stance of compassion toward judgment. Once students begin to notice and value the difference attunement makes, they often find themselves becoming critical. “Hey, that person is going too fast/too slow!” they think to themselves. They may start to compare, congratulating themselves on knowing more than the next person or disparaging themselves for making mistakes. Such thoughts create subtle rifts in the form that distract other people and interrupt their own practice.

Skillful instructors will turn these moments, too, into occasions for growth and reflection: “Now that you have noticed judgment creeping in, how will you handle it?” They redirect students away from the competitive, agonistic stance to which students have become habituated, whether through medical training or other sorts of life experiences. They remind students that everyone is there to help one another learn. That includes instructors who pass down the art and its associated benefits in a spirit of compassion for their students and for generations to come. It is often said that a master does not just teach the form: A master shows students how to live.

Soft Overcomes Hard

Internal martial arts such as T'ai Chi work with the counterintuitive principle that soft overcomes hard. Unless the body is relaxed, it cannot effectively redirect the force of an attacker. Unless students can approach themselves compassionately, they will struggle to treat others with genuine compassion. As T'ai Chi practitioners discover more about their bodies during training, they yield to the inevitability of making mistakes *and* watching other people make mistakes. They contemplate what went wrong, gain clarity, and consider more effective ways to practice. They encourage one another. They learn to forgive themselves in order to move on.

Between any open-hearted moment and the rush to judgment there is a subtle gap, where one stance gives way to another. The transitional “spaces” between seemingly discrete movements in a T'ai Chi form mirror the sorts of gaps that constantly open up in the course of a day: gaps between thoughts, between emotional states,

between impulse and reaction, between people. Rather than trying to smooth over gaps by eliminating them, T'ai Chi helps people notice the gaps and draws attention to their productive possibilities.

Another way to perceive the gap is by noticing that there is a difference between when you finish and when you actually finish. One thing ends before another begins, but in between there is that subtle pause, an opportunity, a rest, that might otherwise be ignored if a person is in a rush. Only by slowing down long enough to dwell in the gap between assumption and conclusion, for example, can medical practitioners recognize self-sacrifice as a misguided form of compassion that harms self and others alike. The way to move beyond burnout becomes clearer and the path begins to smooth out. Why should this be? Because the ability to sense that gap allows caregivers to direct a more truly compassionate question toward themselves: "Now that you have noticed self-sacrifice creeping in, how will you handle it?"

Learning to sense, or even provide, a gap is equally important for relationships with patients. Foster ways to maintain a sense of connection with patients during transitional moments such as shift changes and room transfers. Let patients finish their sentences and listen carefully. Think back to the feeling in the room during T'ai Chi class and remember how a patient's silence, too, can be filled with meaning. The nurse has to give the patient a space; then the patient will give the nurse the space to be a nurse.

What T'ai Chi Teaches About Patient Care

Hospitals and clinics are places for care and healing, but for employees they can also become conflict zones. Staffing shortages, unpredictable scheduling, multiple shifts, skyrocketing costs, increased paperwork, reduced consultation time, and the emotional burden of delivering news of a poor prognosis take their toll on staff and patients alike. AIIMS (All India Institute of Medical Sciences), a major hospital in New Delhi, began offering martial arts training to its staff as a form of self-protection from abuse when patients' relatives become frustrated, irate, and occasionally violent after coping with the effects of these sorts of conditions (Dutt, 2017). Because T'ai Chi teaches the body to relax in the face of conflict, it helps

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caregivers stay present, assess situations while remaining emotionally connected to themselves and to their patients, and make better decisions under stress. In this sense, even those who practice the art as a form of self-care rather than self-defense can benefit from its martial aspects.

It is this more subtle and expansive impact of T'ai Chi training that Thomas, the second-year medical resident, emphasized when he explained that T'ai Chi had taught him “principles about how to treat others, how to work, play, and live.” This final section introduces three key T'ai Chi principles—slowing down, humility, and patience—with a focus on how they can enhance compassionate care in medical settings.

Practice Slowing Down

In an episode of the podcast *Sincerely, X*, a medical professional speaks anonymously about how clinical burnout contributed to the death of one of her patients (Triff & Campbell, 2017). The patient was fed up with being in the hospital and determined to go home. It was clear to her, as his doctor, that he had not yet recovered. Hospital staff duly dispensed the warnings customarily given to patients when they check themselves out against medical advice, including an explicit statement that informed him that if he took this action, he might die. He went home anyway. Within 48 hours, he was readmitted to the hospital with a gastrointestinal bleed that progressed faster than he could be transfused, and in the course of things, he did indeed soon die. What was it about this situation that made the doctor feel she had, in her words, “killed” her patient, and how might the T'ai Chi principle of slowing down have altered an outcome that still haunted her years later?

Here's how the doctor herself came to see things, after she learned something about the emotional exhaustion and depersonalization that the World Health Organization calls clinician burnout:

A better version of myself could have caught the small thing that became the big thing that led to the hemorrhage. I could have had

the opportunity because that better version of myself would have engaged with him, heard him out, and tried to convince him to stay . . . I didn't exactly make a mistake in the usual sense of the word. I didn't ignore a vital sign or forget to order a medication. I just didn't try very hard. I didn't really try at all with this patient . . . I knew better. I just couldn't manage to care about him. It's a pretty fundamental thing to expect from a doctor: that the doctor who is taking care of you in the hospital or in the office will care *about* you, not just for you.

Somewhere along the way, “Dr. Burnout” had lost the ability to fulfill that trust.

People make mistakes, broadly conceived; that is one of T'ai Chi's first lessons. Humans even *need* to make mistakes to learn. To serve others effectively, they also need to develop a compassionate response to themselves when they fail. But as every nurse, doctor, and lab technician knows, mistakes in medical settings can be costly, life-or-death matters, with significant potential to harm. The podcast guest who sought refuge in anonymity was trying to draw attention to the fact that medical practitioners who convince themselves they are too busy to double-check things are not the only ones who represent a danger to those they serve. It can be just as problematic to lack the wherewithal to make the extra effort it takes to speak from the heart, as it were, to a recalcitrant patient.

Medical institutions have taken many steps to get their error rates down and educate staff about clinician burnout, but few have considered the potential of T'ai Chi to assist in this effort. To do T'ai Chi, you must be aware of your body, in order to guide your body with intention. Maintaining an alienated distance is not an option. This more contemplative side of the martial art has led some to dub T'ai Chi “moving meditation.” Insights bubble up that a person moving at breakneck speed would otherwise have brushed aside: “My stomach is gurgling. I guess I forgot to have lunch.” “Hmm, I saw that patient for 15 minutes, but did I really *see* that patient?” Slowing down trains people in a kind of focused, present attention that transfers to other areas of life.

In T'ai Chi, as in medical practice, details matter. A slight difference in the height of a block, the path of motion, or the angle of approach can render a move supremely effective or, alternatively, a weak version of self-defense. The same precision that makes all the difference for a surgical cut or accurate dosage is highly valued in the martial arts. Going slow allows people to notice the consequences of small details and make adjustments. Slowing down also allows details that are important—for reasons a student still does not understand—to cross the threshold of awareness. When an instructor reminds students to “turn your center,” experienced students turn the upper body around the axis of the spine, while beginners tend to turn their heads. It takes a while for beginners to notice they are not doing the same thing.

In the Six-Step class, people discovered to their surprise that time could go by rather quickly once they stopped rushing around. Settling into their bodies while noticing what was happening “inside” often meant that class was over before they knew it. Another common observation during T'ai Chi practice that translates readily into medical settings is that slowing down may not take as long as you think. It only takes seconds to pause long enough to encourage a patient to voice a concern or to look up from notes on a patient, connecting person-to-person instead of caregiver-to-chart. The alternative is to lapse into the disembodied state of alienation that “Dr. Burnout” learned to recognize only after she lost someone entrusted to her care. “I had stopped seeing patients as people,” she explained in the opening to her podcast. “They were just diseases and lab values, test results. And I thought, ‘What on earth is wrong with me?’”

The Six-Step class opens a door through which medical practitioners can begin to ask and answer that question. In the beginning, some students think they are moving slowly and grasping all the details when they are not. “This is the slowest I can go!” a student will exclaim as her instructor watches her zip quickly through the form. “How slowly do I have to move?” They may falsely believe that they have mastered a form once they can repeat the movements on their own, without needing to go deeper. Medical practitioners who cling to the illusion that technical competence equals a mastery of medical science, or that personal well-being can have no significant impact on patients, are afflicted with a similar kind of hubris. Hubris is what the second T'ai Chi principle, humility, seeks to address.

Practice Humility

At its root, humility is another instance of soft overcoming hard. In medical settings in the United States, humility tends to be undervalued and may be mistaken for lack of competence, or weakness. Yet without a certain humility, it becomes difficult to show gratitude and respect—for the instructor, the patient, the training, or oneself. People can feel the difference between working together in a manner that is superficially correct while everyone feeds their egos by treating others harshly, and working together in a manner infused with humility and respect. With humility, an interlocking set of medical specialties can coalesce into a whole that is greater than its parts, creating a more peaceful environment like the one established when people practice T'ai Chi together.

One way that T'ai Chi *dōjōs* (training spaces) foster humility and respect is by implementing a code of etiquette. At the opening of a class, everyone bows to a picture of the lineage founder, followed by bows between students and the instructor teaching the class, and again when students lead parts of the warm-ups. There is a deeper purpose to all the bowing that elevates it beyond mere formality. These routine gestures of respect draw a line between student and teacher that allows each to approach the other with compassion. Students are reminded not to presume to teach other students without authorization, like overeager medical students who have not yet qualified in their fields. Instructors are reminded that students appreciate their efforts. Respect gives both sides a little bit of space—another gap—so that knowledge can flow. It becomes easier to dwell in humility regardless of skill level.

Of course, it is important to honor achievements. Every Six-Step class ends with praise and a collective round of applause. But there is an important difference between taking pride in work well done and the kind of pride that seductively whispers, “You have finished your training. You are an expert now. You know more than the patient about certain matters, so you know more than the patient in all things.” The latter kind of pride puts people in jeopardy. It encourages caregivers to stop listening. It can trick them into treating test results with more respect than the patient.

Master Hiromi sometimes shares a story with her students about what her own teacher said to her after she learned the final step in a long T'ai Chi form. "When I finished the form, my teacher told me, 'Congratulations on reaching the gate!'" Finishing is beginning. The "same" procedures generate new things to inspect when practiced on another day. Without practice, remembering slides easily into forgetting, no matter how accomplished you are. That realization should be enough to keep anyone humble.

Practice Patience

In medical settings, it is tempting to conclude that the patient is the one who has to be patient. After all, it is the patient who waits for the nurse, the anesthesiologist, and the doctor, not the other way around. In compassionate practice, though, patience turns out to be an essential quality for caregivers. Who would ever get through nursing or medical school if they succumbed to the "compare and despair" syndrome of evaluating their own prospects in light of what others who came before them have already achieved? Who would ever stick with the training required to learn a 100-step T'ai Chi form? They must welcome and accept the fact that the journey takes time and becomes all the more interesting for it.

Patience is also a key to developing the kind of rapport with patients that rests on more than an easygoing manner and a smile. By gaining a better understanding

In Real Practice

Anxiety is a serious mental health issue, and if you have not experienced it yourself, you most certainly know someone who has. Of the many benefits discussed in this chapter, T'ai Chi has also demonstrated effectiveness in reducing anxiety symptoms in nursing students. In the Dinani et al. study (2019), 64 nursing students were randomized into a group that received 40 minutes of T'ai Chi training, three times a week for 8 weeks. Compared to a control group, these students experienced a significant decrease in stress, anxiety, and depression; they also saw an increase in self-confidence. In the Mulcahy et al. study (2020), 63 BSN students were randomized into two groups prior to performing a simulation. The first group prepared for their simulation as usual; the second group practiced 30 minutes of T'ai Chi, following the movements shown in a YouTube video. The experimental group students experienced lower cognitive and somatic anxiety as well as increased self-efficacy and performance in the simulation.

of their internal states through T'ai Chi practice, people learn to pacify their own mental agitation and to respond patiently and appropriately to others without fear, anxiety, confusion, anger, or distraction. All those repetitions—of injections, incisions, and Part the Horse's Mane—yield more than the technical ability to perform a medical procedure or a T'ai Chi form when they cultivate patience.

Like humility and the capacity to slow down, patience grows best when tended. Master Hiromi takes the long view, determined to plant a seed of T'ai Chi every day, 365 days a year.

Closing Thoughts

You cannot force people to practice T'ai Chi, Master Hiromi says, but you can invite them. A few years ago, while shopping in an Asian grocery store in a nearby city, she heard someone calling her name. When she turned around, she saw a tall young man with a happy expression on his face. He looked shy, but Johnson could sense his enthusiasm. The man explained that he had attended a T'ai Chi workshop she gave at his high school. He still remembered the calming and meditative effect of the flowing movements. Although he had not practiced since, he said he planned to study T'ai Chi when the right moment comes. Johnson was impressed by his honesty and his positive attitude toward future practice. A seed of T'ai Chi she had planted was still there, waiting to germinate.

If one out of 365 people takes the first steps on the path of T'ai Chi practice, that is a big change in the world. If those first steps happen in a nursing school or a medical center, the ripple effects ensure that it will be a bigger change than most.

Key Points

- T'ai Chi is a form of Complementary and Integrative Medicine, an internal martial art, that can provide tremendous health and well-being benefits to healthcare workers who are busy and under stress.

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- The slow and steady pace of T'ai Chi practice provides a low-impact workout that strengthens the muscular, skeletal, and internal organ systems. Other physical benefits include improved balance and flexibility, reduced stress, and increased body awareness.
- Research indicates that T'ai Chi can be beneficial to patients suffering from chronic diseases, including hypertension, type 2 diabetes, and osteoarthritis, and can enhance motor function in patients with Parkinson's disease.
- T'ai Chi practice cultivates compassion. One way this learning occurs is through attunement to others in the group, moving together while fostering an awareness of any tendency toward judgment.
- T'ai Chi principles are particularly powerful reminders to healthcare professionals: slowing down, humility, and patience.

References

- Allen, J., & Meires, J. (2011). How to prescribe Tai Chi therapy. *Journal of Transcultural Nursing*, 22(2), 201–204. <https://doi.org/10.1177/1043659610395770>
- BBC News. (2015, September 18). *Tai Chi “could be prescribed” for illnesses*. <https://www.bbc.co.uk/news/health-34279190>
- Beinfeld, H., & Korngold, E. (2013). *Between heaven and earth: A guide to Chinese medicine*. Ballantine Books.
- Chen, Yi-Wen, Hunt, M. A., Campbell, K. L., Peill, K., & Reid, W. D. (2016). The effect of Tai Chi on four chronic conditions—cancer, osteoarthritis, heart failure and chronic obstructive pulmonary disease: A systematic review and meta-analyses. *British Journal of Sports Medicine*, 50, 397–407. <https://doi.org/10.1136/bjsports-2014-094388>
- Dinani, S. K., Mehrabi, T., & Sadeghi, R. (2019). The effect of Tai Chi exercise on stress, anxiety, depression, and self confidence of nursing students. *Jundishapur Journal of Chronic Disease Care*, 8(3). doi:10.5812/jjcdc.92854
- Dutt, A. (2017, May 3). Delhi: AIIMS docs learn taekwondo to defend themselves from kin of patients. *Hindustan Times*. <https://www.hindustantimes.com/delhi/delhi-sick-of-violence-by-kin-of-patients-1500-aiims-doctors-to-learn-taekwondo/story-MGGo29ttrNBnu6JttG8XIM.html>
- Hufford, D. J., Sprengel, M., Ives, J. A., & Jonas, W. (2015). Barriers to the entry of biofield healing into “mainstream” healthcare. *Global Advances in Health and Medicine*, 4(Suppl.), 79–88. <https://doi.org/10.7453/gahmj.2015.025.suppl>
- Irwin, M. R., Olmstead, R., Carrillo, C., Sadeghi, N., Nicassio, P., Ganz, P. A., & Bower, J. E. (2017). Tai Chi Chih compared with cognitive behavioral therapy for the treatment of insomnia in survivors of breast cancer: A randomized, partially blinded, noninferiority trial. *Journal of Clinical Oncology*, 35(23), 2656–2665. <https://doi.org/10.1200/JCO.2016.71.0285>

- Kaptchuk, T. (2000). *The web that has no weaver: Understanding Chinese medicine* (2nd ed.). McGraw-Hill.
- Kuriyama, S. (1999). *The expressiveness of the body and the divergence of Greek and Chinese medicine*. Zone Books.
- Levin, M. (2014). Molecular bioelectricity: How endogenous voltage potentials control cell behavior and instruct pattern regulation in vivo. *Molecular Biology of the Cell*, 25(24), 3835–3850. <https://doi.org/10.1091/mbc.e13-12-0708>
- Li, F., Harmer, P., & Fitzgerald, K. (2018). Effectiveness of a therapeutic Tai Ji Quan intervention vs. a multimodal exercise intervention to prevent falls among older adults at high risk of falling: A randomized clinical trial. *JAMA Internal Medicine*, 178(10), 1301–1310. <https://doi.org/10.1001/jamainternmed.2018.3915>
- Lyu, D., Lyu, X., Zhang, Y., Ren, Y., Yang, F., Zhou, L. Zou, Y., & Li, Z. (2018). Tai Chi for stroke rehabilitation: A systematic review and meta-analysis of randomized controlled trials. *Frontiers of Physiology*, 9, 983. <https://doi.org/10.3389/fphys.2018.00983>
- Mulcahy, A., Holland, B., Gosselin, K., & Pittman, A. (2020). The use of Tai-Chi to reduce anxiety among nursing students undergoing simulation. *Nursing Education Perspectives*, 41(3), 183–184. [doi:10.1097/01.NEP.0000000000000495](https://doi.org/10.1097/01.NEP.0000000000000495)
- Pietak, A., & Levin, M. (2017). Bioelectric gene and reaction networks: Computational modelling of genetic, biochemical and bioelectrical dynamics in pattern regulation. *Journal of the Royal Society Interface*, 14(134). <https://doi.org/10.1098/rsif.2017.0425>
- Shi, Z.-M., Wen, H.-P., Liu, F.-R., & Yao, C.-X. (2014). The effects of Tai Chi on the renal and cardiac functions of patients with chronic kidney and cardiovascular diseases. *Journal of Physical Therapy Science*, 11, 1733–1736. <https://doi.org/10.1589/jpts.26.1733>
- Song, S., Yu, J., Ruan, Y., Liu, X., & Yue, X. (2018). Ameliorative effects of Tai Chi on cancer-related fatigue: A meta-analysis of randomized controlled trials. *Supportive Care in Cancer*, 7, 2091–2102. <https://doi.org/10.1007/s00520-018-4136-y>
- Triff, D., & Campbell, C. (Producers). (2017, July 19). Sincerely, X. [Audio podcast]. *Dr. Burnout*. Apple podcasts. <https://podcasts.apple.com/us/podcast/dr-burnout/id1238801741?i=1000390072745>
- Wang, C., Schmid, C. H., Iversen, M. D., Harvey, W. F., Fielding, R. A., Driban, J. B., Price, L. L., Wong, J. B., Reid, K. F., Rones, R., & McAlindon, T. (2016). Comparative effectiveness of Tai Chi versus physical therapy for knee osteoarthritis: A randomized trial. *Annals of Internal Medicine*, 165(2), 77–86. <https://doi.org/10.7326/M15-2143>
- Wayne, P. M., & Fuerst, M. L. (2013). *The Harvard Medical School guide to Tai Chi*. Shambhala Publications.
- Yang, Y., Li, X.-Y., Gong, L., Zhu, Y.-L., & Hao, Y.-L. (2014). Tai Chi for improvement of motor function, balance and gait in Parkinson's disease: A systematic review and meta-analysis. *PLOS ONE*, 9(7), e102942. <https://doi.org/10.1371/journal.pone.0102942>
- Yeh, G. Y., Wang, C., Wayne, P. M., & Phillips, R. S. (2008). The effect of Tai Chi exercise on blood pressure: A systematic review. *Preventive Cardiology*, 11(2), 82–89. <https://pubmed.ncbi.nlm.nih.gov/18401235/>
- Yeh, S.-H., Chuang, H., Lin, L.-W., Hsiao, C.-Y., Wang, P.-W., Liu, R.-T., & Yang, K. D. (2009). Regular Tai Chi Chuan exercise improves T cell helper function of patients with type 2 diabetes mellitus with an increase in T-bet transcription factor and IL-12 production. *British Journal of Sports Medicine*, 43(11), 845–850. <http://dx.doi.org/10.1136/bjism.2007.043562>