

THE EPOCH TIMES

# MIND & BODY

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# The Dying Art of Conversation

## Has Technology Killed Our Ability to Talk Face-to-Face?

Devices and apps can help us communicate around the globe, but they are blocking our direct connection to those nearby

MELANIE CHAN

Facetime, Skype, Whatsapp, and Snapchat, have replaced significant amounts of face-to-face conversation for many people.

These apps allow us to converse with each other quickly and easily—overcoming distances, time zones, and countries. We can even talk to virtual assistants such as Alexa, Cortana, or Siri—commanding them to play our favorite songs, films, or tell us the weather forecast.

These ways of communicating reduce the need to speak to another human being. This has led to some of the conversational snippets of our daily lives now taking place mainly via technological devices. So no longer do we need to talk with shop assistants, receptionists, bus drivers, or even coworkers, we simply engage with a screen to communicate whatever it is we want to say.

In fact, in these scenarios, we tend to only speak to other people when digital technology doesn't operate successfully. For instance, human contact occurs when we call for an assistant to help us when an item is not recognized at the self-service checkout.

And when we have the ability to connect so quickly and easily with others using devices and applications, it is easy to start to overlook the value

of face-to-face conversation. It seems easier to text someone rather than meet with them.

### Bodily Cues

My research into digital technologies indicates that phrases such as “word of mouth” or “keeping in touch” point to the importance of face-to-face conversation. Indeed, face-to-face conversation can strengthen social ties: with our neighbors, friends, work colleagues, and other people we encounter during our day. It acknowledges their existence, their humanness, in ways that instant messaging and texting do not.

Face-to-face conversation is a rich experience that involves drawing on memories, making connections, making mental images, associations and choosing a response. Face-to-face conversation is also multisensory: it's not just about sending or receiving pre-programmed trinkets such as likes, cartoon love hearts, and grinning yellow emojis.

When having a conversation using video you mainly see another person's face only as a flat image on a screen. But when we have a face-to-face conversation in real life, we can look into someone's eyes, reach out and touch them. We can also observe the other person's body posture and the gestures they use when speaking—and interpret these accordingly. All

Screen-based devices consume our attention while distancing us from the bodily sense of being with others.

“[We] forget how essential face-to-face conversation is to our relationships, our creativity, and our capacity for empathy.”

Sherry Turkle, professor of social studies of science and technology

these factors, contribute to the sensory intensity and depth of the face-to-face conversations we have in daily life.

### Speaking to Machines

Sherry Turkle, professor of social studies of science and technology, warns that when we first “speak through machines, [we] forget how essential face-to-face conversation is to our relationships, our creativity, and our capacity for empathy.” But then “we take a further step and speak not just through machines but to machines.”

In many ways, our everyday lives now involve a blend of face-to-face and technologically mediated forms of communication. But in my teaching and research, I explain how digital forms of communication can supplement, rather than replace face-to-face conversation.

At the same time though, it is also important to acknowledge that some people value online communication because they can express themselves in ways they might find difficult through face-to-face conversation.

### Look Up From Your Phone

Gary Turk is a spoken word poet whose poem “Look Up” illustrates what is at stake by becoming entranced by technological ways of communicating at the expense of connecting with others face-

to-face.

Turk's poem draws attention to the rich, sensory aspects of face-to-face communication, valuing bodily presence in relation to friendship, companionship, and intimacy. The central idea running through Turk's evocative poem is that screen-based devices consume our attention while distancing us from the bodily sense of being with others.

Ultimately the sound, touch, smell, and observation of bodily cues we experience when having a face-to-face conversation cannot be fully replaced by our technological devices. Communicating and connecting with others through face-to-face discussion is valuable because it is not something that can be edited, paused or replayed.

So next time you're deciding between human or machine at the supermarket checkout or whether to get up from your desk and walk to another office to talk to a colleague—rather than sending them an email—it might be worth following Turk's advice and engaging with the human rather than the screen.

Melanie Chan is a senior lecturer in media, communication, and culture at Leeds Beckett University in the UK. This article was first published on The Conversation.



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# I Don't Like Meditating Here's Why I Do It Anyway

When I meditate regularly, my health improves, stress drops, and problems seem smaller

JASON BRICK

As much as I loathe to admit it, I'm not a fan of meditation. It comes unnaturally to me, despite my 36 years of martial arts study and interest in self-improvement, health-hacking, and general enlightenment.

I realize this speaks poorly of me as a person, kind of like my opinions on aikido, jazz music, pumpkin pie, and “A Prairie Home Companion.” That I'm not fond of them doesn't mean they're bad, it means I'm not as good as I could be.

Worse yet, when I do regularly meditate, I find my life is better. Stress is lower, my health improves. I can focus more on my work, and am less likely to say things I regret to my friends, colleagues, and loved ones. Problems seem smaller. I seem bigger.

And I'm not alone. Over the past few decades, a host of research has supported the conclusion that meditation is good for us, and that we should all meditate a few minutes each day.

- Meditation has been found again, and again (and again) to reduce stress, with all the physical, social, and emotional benefits that it provides.
- Multiple studies have found meditation can reduce feelings of depression and anxiety.
- In 2003, researchers learned that regular meditation helped to boost immune function.
- Meditation can help control pain, according to several studies, including studies in 2016 and 2017.

That's just the tip of that particular iceberg. Bottom line: meditation is good for me, and for you, no matter how much we may or may not want to do it. Kind of like eating a vegetarian meal once or twice a week.

So, from one resistant but learning meditator to others, here's what I've learned about meditation and how to make it part of improving your life.

### You Don't Have to Just Sit Around

Non-practitioners sometimes imagine meditation to be boring—and perhaps if not done a certain way, it can be. But there's more than one kind of meditation available, so you can easily find one that suits you. Here are just a few alternatives:

- Walking meditation calms your mind when you focus on your strides rather than, say, focusing on your breath. Walking in a labyrinth is a centuries-old practice of contemplation common among many spiritual faiths, including Catholicism.
- Kata is the formal practice of martial arts, including tai chi. The motions of tai chi are so complex it becomes impossible to think of other things, allowing for profound meditative focus. Yoga offers similar benefits.
- Listening mindfully to music, especially music without lyrics, can produce the impacts of meditation by allowing you to be transported by the sounds, away from stray and extraneous thoughts.
- Daily task meditation is where you take the process of a task—like doing dishes, cooking a meal, or getting dressed—and focus on it the way a kung fu master might focus on forms.

Those are just a few examples, there are countless others from zazen to Falun Gong, Kundalini, breathing meditation and so on.

The point is there's a kind of meditation that works well with your needs, tastes, and general outlook. It's just a matter of finding the right match.

### Your Brain Might Mess With You

Meditating is supposed to be a quieting of the mind, where you think about nothing in particular (or nothing other than the actions of the

meditation). Then you can allow that background noise to filter out and let you rest. That's why exercise can be meditative: at a certain point, you're only able to think about the exercise.

But along the way, throughout each session of meditation, your thoughts are going to keep zooming in and trying to distract you. This happens all the time in the beginning, but here's a secret: It happens all the time to the masters, too.

The trick with meditation isn't to totally eliminate those stray thoughts. It's to let them pass through your mind without you grabbing hold of them.

In the first stages of learning, you'll fail a lot of the time. You'll be meditating for a while and suddenly realize you stopped somewhere along the way to think about your to-do list and what you're making for dinner that night.

Eventually, that will happen less and less, and you'll start distracting yourself by getting frustrated that the thoughts intrude at all. You will ultimately be able to let them pass through and over you without taking root, so you can continue your meditation for as long as you wish. Speaking of “as long as you wish...”

### It Doesn't Have to Be Very Long

Yes, I read the stories about Gichin Funakoshi (aka the father of modern day karate) meditating for an entire day while standing under a waterfall, and about retreats where people spend the entire weekend in some kind of trance. And probably, some of those stories are true.

But, no, they don't mean you have to meditate for hours to get anything out of meditation. The studies mentioned above had subjects

meditate for less than an hour, in most cases less than 15 minutes, and even those sessions resulted in significant improvements to physical, emotional, and psychological health.

Some of the masters go one further, advising us to start with just one minute of meditation per day. That won't be enough to reap huge, long-lasting benefits, but it has two advantages:

1. You will succeed. Anybody can meditate for a minute, no matter how busy or distractible they are.
2. You'll be pleasantly surprised how much of a difference it makes for the next 10 minutes of your life.

I personally found those two factors combined to be an excellent motivator. Under the powerful motivation of immediate success and feeling the short-term impact of that minute, I committed more fully to learning how to meditate.

### Any 'Type' of Person Can Meditate

Meditation has shed the new age or “hippie” reputation it once had. Anyone can do it. Here's an incomplete list of groups that actively practice meditation or encourage their people to meditate regularly:

- professional athletes in the NFL, NHL, and UFC
- actors including Hugh Jackman, Clint Eastwood, and Arnold Schwarzenegger
- SEAL Team Six and other special forces branches of U.S. and worldwide militaries
- an impossibly long list of CEOs and entrepreneurs like Richard Branson and Elon Musk

If Randy Couture and the guy who plays Wolverine meditate, you can do it too. It only takes a minute—literally—and you can start today.

Jason Brick is a freelance writer and journalist who came to that career after over a decade in the health and wellness industry. This article was first published on Healthline.



There's a kind of meditation that works well with your needs, tastes, and general outlook.

# The Dividends of Practicing Patience

Learning to wait can ease your mind, improve your options, and uplift your outlook

## CONAN MILNER

Patience is the ability to wait. If that sounds easy, then you're fortunate.

When you're in a hurry, waiting can be especially frustrating. Unexpected wait time can feel as if the universe refuses to cooperate with your schedule, wasting resources you don't have with hassles you don't need.

But patience teaches a valuable lesson: when circumstances are beyond your control, it's time to shift your focus to what you can control. A patient mindset can give you the power to address obstacles and setbacks in the calmest, kindest, and most effective way possible.

If you lack patience, the wait seems even longer and more annoying. You may even say or do things you later regret.

What makes practicing patience such a pain is that we must put our agenda on hold to do so. And when we're focused on a goal, that's the last thing we want to do.

## Patient Achievements

According to Dr. Rob Bell, a sports psychologist and author of several books on cultivating mental toughness, to understand patience you have to put your goals in proper perspective.

A goal is just a motivator, says Bell. It gives you something to aim for, but obsessing over it won't lead you to success.

"A focus on winning doesn't lead to winning," Bell said. "You have to focus on the process, not the results. There are going to be setbacks along the way, but if we use our strengths and approach the problems that allow us to get better, the results will take care of themselves."

In other words, if you want to win, focus on the process of training and practice that will allow you to overcome the problems or shortcomings in your performance.

Yet so often we have it flipped. We're so driven by getting what we want when we want it, that we become intolerant of anything that gets in our way. We fail to use problems to elevate.

Bell says that, unlike our desire for a particular outcome, the process is something we can control. In the end, the process is all we have. That includes our mental reaction to each setback.

And focusing on the process is also more rewarding. A worker who does the job simply for the paycheck will not be as fulfilled as the one who tries to complete their duties well and finds meaning in the service they delivered to their company and clients.

That's because achieving the goal we've been striving for doesn't give us lasting satisfaction. So we need to find satisfaction in the effort to get there as well.

"Even though what we want is the results, it's not fulfilling. How we go about it, the passion we have for it, that's what's fulfilling, because that's what lasts," Bell said. "Even with sports, it's really about the relationships we build along the way. That's what matters."

## Gaining Patience Through Practice

Some people seem to have boundless patience, while others lose their cool at the slightest inconvenience. Luckily, practice can make patience.

According to Nickia Lowery, a licensed professional counselor and certified anger management specialist, nobody is born with patience. Our base instinct is to get our needs met. The ability to wait is a learned behavior.

"You have to be taught to be considerate of others and delay gratification," Lowery said. "If you are raised to always get everything you want, you likely will not be as patient as someone who has had to wait on getting their needs and wants met."

But patience doesn't just come from going without. You also need to embrace

setbacks with the right attitude—calm, relaxed (or at least restrained), and kind. Responding to loss with jealousy and spite won't lead to patience, but manipulative and coercive means to even the score.

"If you never received what you want, this may lead to feelings of resentment and rebellion, where you learn to take what you want or lash out in order to get what you want," Lowery said.

Lowery believes it's best to teach patience to children when they're young, but she says practicing patience at any age is bound to play a positive role.

## The modern world caters to our needs like never before.

"Imagine if you were able to just walk away with no negative feelings when someone does something to slight you," she said. "Imagine going through life just being happy and accepting of others."

## Age of Instant Gratification

Unfortunately, the opportunities for daily patience practice are getting harder to come by. According to Dr. Russell Thackeray, a licensed clinical psychologist specializing in patience, people become "hard-wired for immediate gratification" as a result of our convenience culture.

Thackeray describes how the modern world caters to our needs like never before. In the past, before we could order virtually anything we wanted over the Internet on a credit card, every aspect of life took more time. People were used to waiting because they had to. Today, a webpage that takes longer than five seconds to load seems like a small eternity. Even getting up to grab your credit card for an online order can seem like a hassle.

"I think we find it so hard to delay gratification because of the societal norms that are created," Thackeray said. "It reinforces this idea that we do not need to wait for anything."

Nobody wants to wait, but there can be value in being forced to do so. Obstacles may impede our plans for the moment, but they can also give us a chance to pause, reconsider, and reassess, leading us down roads we otherwise wouldn't have taken, and granting us ideas we never would have considered.

"We gain perspective and insight with patience," Thackeray said. "Building a product line, growing a company, building relationships—all require time to work and mature."

With enough patience, you can see every unpleasant moment as an opportunity to calmly observe, and consider your next move. In some cases, the best response may be no move at all.

"Sometimes things just need time to play out," Thackeray said. "However, patience should never be confused with procrastination or idleness—all of which have a lack of action within them but the intention and execution is different."

Meditation is a tried and true method of developing patience, but any opportunity we take to slow down and focus on the moment can contribute to this strength.

However, if we fail to practice, our patience won't grow. Whipping out your phone during tedious moments means you never have to wait—you always have a distraction to pass the time. But Bell believes our devices can rob of the lessons we need to cope with life.

"The way we improve our mental health is by learning how to handle adversity," Bell said. "If I never have to deal with it because I can distract myself all the time, then I'm not getting mentally healthy. I'm actually getting sicker."

## Patience Is Confidence

Patience is often compared to mindfulness. Both concepts ask you to focus on life in the moment rather than the agenda in your head.

But patience shares similarities with another concept: confidence.

According to Bell, people become impatient because they fear things won't work out.

"They believe that in order to be successful they need everything to go their way," he said. "But you show me any competent athlete and I'll show you someone who is patient. Because they are confident that success is still going to be there, they just don't know when it's going to happen."

But for many of us, it's hard to have confidence and trust the process when we don't see results right away. Trainer and fitness expert Kyle Hoffman says his clients often get upset when his diet and workout programs don't create changes fast enough.

"When this happens, they're quick to point fingers at me or give up altogether," Hoffman said.

If we lack patience, we may even be blind to the progress we've made, because it's not the dramatic change we envision. But according to Hoffman, the quickest way to help a frustrated client develop patience is to show them some evidence, no matter how small, that they are indeed on the right track.

"By giving them a small win that they can experience or see, it reminds them that every step of the process is necessary and better times are just around the corner," he said.

When you realize that a little outside encouragement can help with your own confidence, be sure to share this gift with others as they learn new skills.

## Growth Time

According to Donna Cameron, author of "A Year of Living Kindly: Choices That Will Change Your Life and the World Around You," we often get impatient when someone does something slowly or awkwardly. It's especially frustrating when they're doing something that seems ridiculously easy to us. Think of trying to teach your grandmother how to use the Internet.

"It's human nature that once we learn something, we often forget how hard it was to learn," Cameron said. "Once something becomes routine (driving a stick-shift or using new technology), we forget that it wasn't always ingrained in our brains or muscle memory, and we lose patience for those who are struggling to learn."

Sometimes we reason that it's easier to do things ourselves than to wait for a newbie to get it right. While that may be true, Cameron says the kind and helpful reaction is to stand by patiently, offer help if asked, and encourage the learning process.

She says that instead of getting impatient with a beginner, we should hold a space for them to grow. A few moments of our patience could soon reward us with more free time.

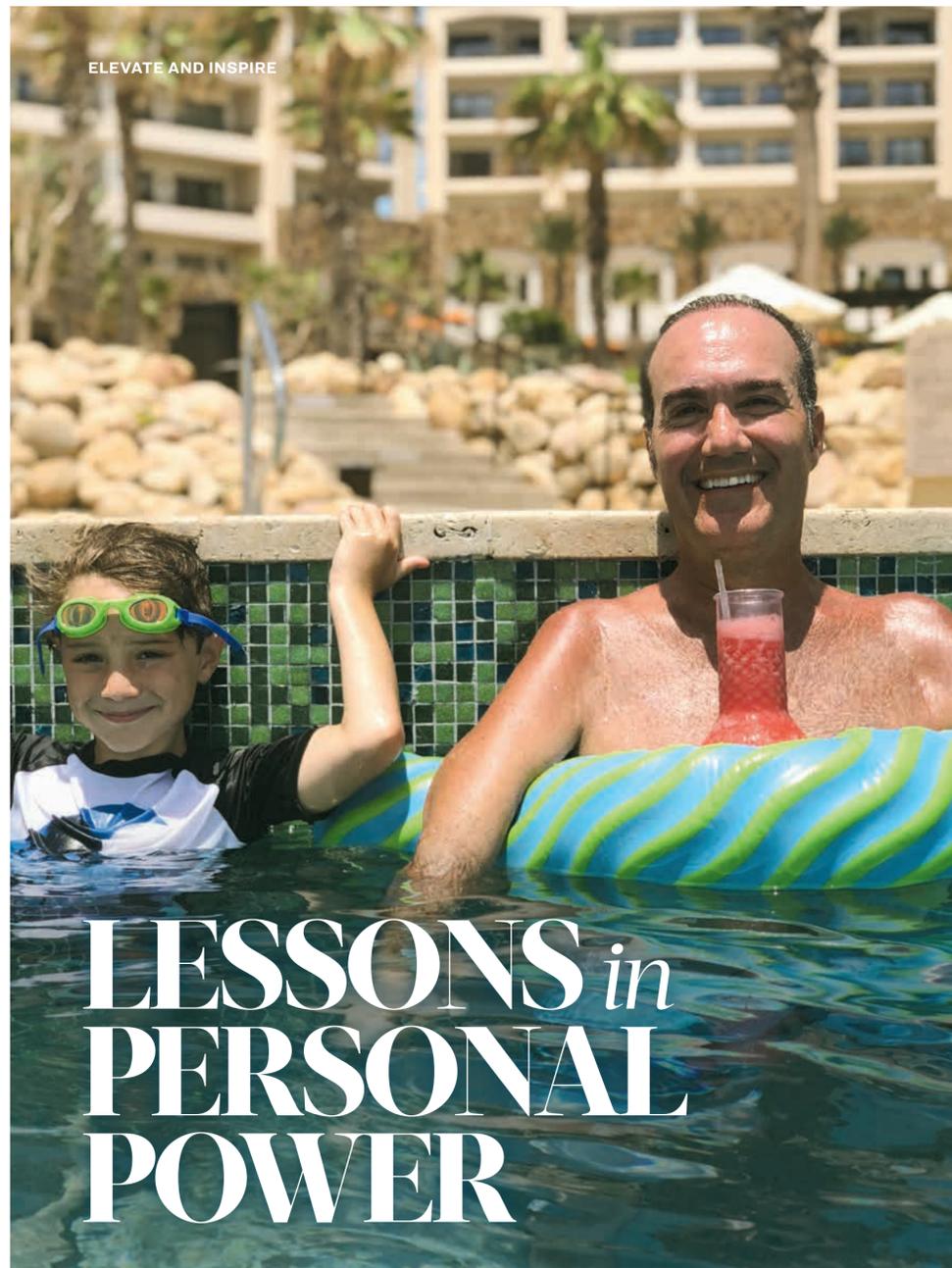
"If our work colleague, spouse, or child masters a new skill, they may be able to lighten our own load at some time in the future," Cameron said. "There are gifts in patience if we take the time to look for them."

## We gain perspective and insight with patience.

Dr. Russell Thackeray, licensed clinical psychologist

Patience is the ability to wait, but it doesn't take much waiting to harness this power. Cameron's tip to bolster our patience is to learn to pause. Giving yourself a little moment to consider your actions when you feel irritated can help you make better, more patient decisions.

"Think about what expressing impatience will gain you," she said. "Think about whether you are likely to regret uttering sharp words, and think about who you want to be and how you'd like this interaction to advance."



ELEVATE AND INSPIRE

# LESSONS in PERSONAL POWER

As taught to me by my brother Jimmy Ravenna over the last 4 1/2 years

## JONI RAVENNA

April 10th is National Siblings Day, so I thought I'd write about how I—someone who was afraid of her own shadow—have learned to be less afraid from my younger brother, Jimmy Ravenna.

Pound for pound, my brother has always been the most powerful person I've ever known. Not power in terms of controlling others or situations, but personal power, that ability to control himself and his reaction to life. In August 2014, his personal power was tested, when at the age of 44, he and his beautiful wife, Jenielle, and their young children learned that Jimmy had Lou Gehrig's Disease, aka ALS.

ALS kills the neurons that control voluntary muscles, leading to gradual paralysis. Eventually, the muscles break down, leaving someone with ALS unable to walk, talk, eat, swallow, or breathe.

For my brother, it began with some strange aches and pains coupled with dwindling strength. A pulled muscle in his arm? A pinched nerve? One doctor ordered surgery on a tendon, another doctor operated on a ligament. But months later, he couldn't move his thumb.

Since the diagnosis, our family has gotten together most Wednesdays to visit with Jimmy, and here's what I've learned.

## Upbeat Attitude

At one of our Wednesday gatherings, Jimmy told us, "This diagnosis couldn't have happened to a worse person." And we immediately understood what he meant.

Like most impossibly good-looking people, Jimmy's admittedly a little vain. It simply goes with the territory. "Have you ever seen so much as a piece of spinach stuck in these teeth?" he jokes, flashing his legendary smile. That smile charmed plenty of women into falling for him before he met the one true love of his life, his wife Jenielle. She chimed in and vouched for his meticulous grooming.

Of course, grooming seemed trivial that first year when we were all just trying to wrap our heads around a brutal diagnosis. In my brother's case, the ALS began in the brain as opposed to the spinal cord, leading the muscles in his upper body to fire inappropriately. To me, each twitch seems like an earthquake signaling the apocalypse.

"When the motor neurons aren't getting the electrical impulses, they seek them out," Jimmy explained. He became an expert in this bewildering disease that neurologists struggle to understand. All I know is that these strange, involuntary movements referred to as fasciculations are harbingers of things to come.

And yet Jimmy kept smiling. He cracked jokes, even as he struggled to wrap his hands around a sandwich and bring it up to his mouth. He never let fear or anger or frustration take root. "Your perception is your reality," he says and it became his mantra.

## Relationships

Jimmy knows that fear is the true enemy. He listens to meditation tracks to maintain mental well-being and buys tracks for the rest of us as well. He wants everyone to remain calm. It's helpful to us, yes; but it's also helpful to him. When he looks into our eyes, he doesn't want to see fear, because he knows that the mirror neurons in his own eyes will cause his brain to release a cascade of fear-inducing chemicals.

He also told his friends in those early months (and remarkably he still has dozens) that anyone who refuses to see him on a regular basis, won't be invited to visit near the end. He realizes that the disease progression is less jarring when witnessed incrementally.

Jim's always been popular and influential. But behind the movie-star handsome face and physique, there has always been something more, a kind of 'knowing,' even from the time he was little. As he got older, he conveyed this without trying.

My brother has self-confidence and self-esteem in spades. He has never relied upon others for approval or self-worth and he's not about to. He has the kind of quiet confidence we all secretly envy. It's part of what enables him to influence others and to trust his gut.

## Being Proactive

During the second year, Jimmy started getting more prepared for what was to come. He didn't need it yet, but on of those Wednesday visits, he asked our brother Johnny to lift the electric wheelchair that he purchased from the trunk of my mother's car so that we can get accustomed to him using it. He was determined to stay one step ahead of the disease.

He didn't make ALS his enemy. That was wise, because ALS can't lose, not while there is no cure. Instead, he made friends with ALS, charming and subduing it like I've seen him subdue adversaries twice his size in the past. And by doing so, he remains in charge.

By being pro-active rather than reactive, he maintains his ability to control the one thing he can't—his reaction. During that second year, he implemented other preemptive strategies to prepare for what was to come.

## Calm and Collected

We were outside having lunch in the third year. He couldn't hold a sandwich any longer and needed help to eat. A fly landed on his hand and I tried to shoo it away. The fly wouldn't leave. In typical fashion, in these situations,

the fly returns over and over as though trying to prove a point.

It was a battle of wills. Mine against the fly. I imagined this was upsetting to Jimmy, but when I turned up to see his face, he was just smiling patiently as if to say "Don't worry about it." He's concerned that I do not feel ill at ease. No fly is going to get in his ointment.

By the fourth year, Jimmy was never out of the wheelchair when I visited. He confided that in his dreams, he's always about three months earlier in terms of ability, which gives you an indication of how fast this disease progresses.

Amazingly, however, he is still handsome, funny, and in charge of the room. "You're rocking this ALS, bro," my brother Johnny tells him. "You're the only person in the world who can make ALS look cool," somebody else says.

"Eventually it's going to get real," Jimmy told us. He urged us to maintain practical expectations, though he remains hopeful. At that point, Jenielle was fighting to get him on a new drug called Radicava. Apparently, the medical community has designated Radicava so rarified as not to be 'lavished' on patients years into the disease.

Fortunately, Jenielle was successful and during the following Wednesdays, we found the progression slowing. No doubt, it's also Jim's own refusal to become pessimistic which keeps the progression at bay.

Many patients at that stage become heroin addicts, I'm told. But not Jimmy. "I want to be a good example for Jake," he told us, referring to his 9-year-old son.

Come August, it will be five years since Jimmy's diagnosis. Patients with ALS are typically said to survive two to five years from the diagnosis date but that thinking is changing.

"One of the most interesting and provocative areas in the field of motor neuron research is just how variable the disease can be," Jimmy's neurologist, Dr. Jeffrey Rosenfeld, told me by phone. "It's the focus of my research," he said.



(Left) Jimmy Ravenna with his son Jake in the pool at a resort in Cabo. The resort offered a chair with a crane that Jim could use to get in and out of the pool.

(Top) Jimmy with his wife Jenielle and son Jake in Orlando's Disney World a few months ago.

(Above) Jimmy and his family in Disney World. (L-R) Daughter Sydney, wife Jenielle, Jimmy, his son Jake, and daughter Cassie.

My brother has accepted his illness and found the ability to navigate it with a positive attitude and grace.

"It's my personal feeling that the most significant of all the disabilities that could result from the diagnosis is fear," Rosenfeld said. I immediately sense that Jimmy will be with us for a long time since he has slain the fear dragon from the outset and become better and stronger in these last several years in the only ways that really matter. His personal power grows.

Jimmy can still talk, though it's becoming more difficult, and he can still enjoy meals. He has someone who comes to help every day named Hector. And amazingly, with Hector's help, Jimmy did 84 squats last week. "Never again," he jokes. He also has a new special computer that is hooked up to his wheelchair which allows him to research online, make calls, etc. just using his eyes. The computer senses where on the screen his pupils are focusing, and it responds accordingly.

"I read about a property up in Arrowhead that's a great deal," he tells us with that Jimmy smile and renewed sense of purpose after so many months of not being able to access the internet on his own.

## The Miracle of Grace

The great Canadian philosopher Eckhart Tolle wrote, "There can be no suffering without resistance." My brother has accepted his illness and found the ability to navigate it with a positive attitude and grace. This has allowed him to mindfully shape his reality, to redefine it. And not a Wednesday goes by that he doesn't repeat his mantra, "Your perception is your reality."

Jimmy is at once helpless and yet all-powerful. He is strength in stillness. He is natural, defenseless, fearless, loving, and true. He is teaching the rest of us, who might be in less challenging situations, to kick fear to the side and do the same.

Joni Ravenna is a freelance writer specializing in health and wellness. Her articles have appeared in dozens of national and regional publications over the years. She is also a playwright and TV writer.

# Scandinavia May Not Be the Happiest Place on Earth

## After All



Narrow measure of well-being may not measure happiness as well as once thought

Scandinavia is supposed to be home to some of the happiest people in the world, but new research suggests that may not be true, even with beautiful places like the fishing village of Hamnøy in Norway.

ZIGGI IVAN SANTINI,  
SARAH STEWART-BROWN  
& VIBEKE JENNY KOUSHEDE

The Nordic countries are consistently ranked as the happiest countries in the world according to World Happiness Reports published since 2012. Because of this, other countries often look to them for guidance when it comes to nurturing the well-being of their people.

However, in our recent study, we found that people living in parts of southern Europe had higher mental well-being than those living in the north.

We used a scale which asks to what extent a person has felt good and functioned well over the past two weeks. "Feeling good" can mean feeling relaxed, optimistic, or energetic, and "functioning well" can mean being able to think clearly, deal with problems, and socialize.

We recently applied the scale in Denmark and compared the national mental well-being estimates of Danish people with people living in Iceland, Catalonia, and England. We found that people in Catalonia scored considerably higher on mental well-being than people in all three northern European countries—challenging the prevailing idea that places in northern Europe are typically happier than those in southern Europe.

In the World Happiness Reports, happiness is measured using Cantril's ladder of life evaluation. This asks people to rate how they currently view their life on a ladder scale in which zero is the "worst possible life for you" and ten is the "best

possible life for you." But such measures are strongly influenced by economic conditions and are poor proxies for mental health and well-being.

Research has shown that while life evaluation rises proportionately with income, emotional well-being—measured by an individual's experience of pleasant and unpleasant emotions—rises with income only to a certain point. If people are below a certain economic threshold, they are more likely to be emotionally unwell and have low life evaluations. Above this threshold, life evaluations continue to improve, but ratings of emotional well-being do not.

In other words, high income may buy better life evaluations, but this is not the same as positive mental health and well-being. A recent report also showed that inequalities in life evaluation appear to be rising in several places in Scandinavia and that a considerable amount of people in the Nordic countries appear to be struggling, contrary to what these countries are famous for.

The "happiest place in the world" label may therefore be misleading, given its rather simplistic focus on life evaluation. As our research shows, using more sophisticated measures of well-being can tell a different story.

### New Approaches to Mental Health

While there is widespread consensus that a "good" society is one that maximizes human well-being, how to measure and promote this is controversial. In the words of the philosopher Thomas S. Kuhn, "The answers you get depend on the questions you

ask."

There may be particular features of Catalanian culture and lifestyle that promote mental well-being more readily than in other places. It is now increasingly recognized that there can be "no sustainable development without mental health," so Catalonia's secrets might be valuable for learning more about what really matters for mental well-being.

So far, the conventional approach to mental health in Europe focuses on the treatment and prevention of mental illness, as well as efforts to destigmatize poor mental health. While these are valid, they are reactive and focus on risk factors for poor mental health rather than on how to promote and maintain positive mental health and well-being.

This approach does not account for the fact that mental health is more than just the absence of mental illness. To quote the medical historian Henry E. Sigerist, health is "something positive." The absence of pessimism does not automatically produce optimism, the absence of sadness does not automatically produce joy. So it goes with the entire spectrum of human thoughts and emotions.

Rather than just focusing on what causes and protects against mental illness, society must also consider the causes of positive mental health, and prioritize it.

Positive mental health and well-being are associated with better physical health, positive interpersonal relationships, and socially healthier societies. Positive mental health and well-being is, in other words, desirable in its own right and may further

help prevent common mental health problems occurring in the first place and help people during recovery from mental illness.

Promoting mental health and well-being throughout a population can mean encouraging active lifestyles, providing opportunities for people to interact and feel they belong within a community, or fostering a sense of purpose by contributing more to society or meaningful causes.

It can also include efforts focused on individuals, such as encouraging self-care and opportunities to hone personal and social skills and pursue creative endeavors. The combination of universal and individual approaches has proved important in many different settings.

There is still plenty to learn about positive mental health and how to promote it, and our results suggest people should not only look to the Nordic countries for guidance. Asking the right questions could enable a better understanding of what drives positive mental health, and how it can be promoted. While reducing poor mental health is necessary to make life bearable, positive mental health makes life worth living.

Ziggi Ivan Santini is a postdoctoral associate at the University of Southern Denmark, Sarah Stewart-Brown is the chair of public health at the University of Warwick in England, and Vibeke Jenny Koushede is a senior researcher at the University of Southern Denmark. This article was first published on *The Conversation*. This article was first published on *The Conversation*.



High income may buy better life evaluations, but this is not the same as positive mental health and well-being.

# The Amazing BENEFITS OF HUGGING

## According to Science

Hugs trigger the release of oxytocin with a cascade of emotional and physical benefits

Hugs are a powerful expression of trust and affection. They are also surprisingly impactful thanks to their effect on our emotions through the release of oxytocin. Here are 10 reasons why you need to hug every day.

### 1. Hugs Can Help to Treat Insomnia and Anxiety

Lack of sleep can create a long list of secondary health issues that can

disrupt the body's normal function, and increase the risk of serious medical problems like heart attacks. Studies have found that sleeping with weighted blankets helps insomnia and anxiety.

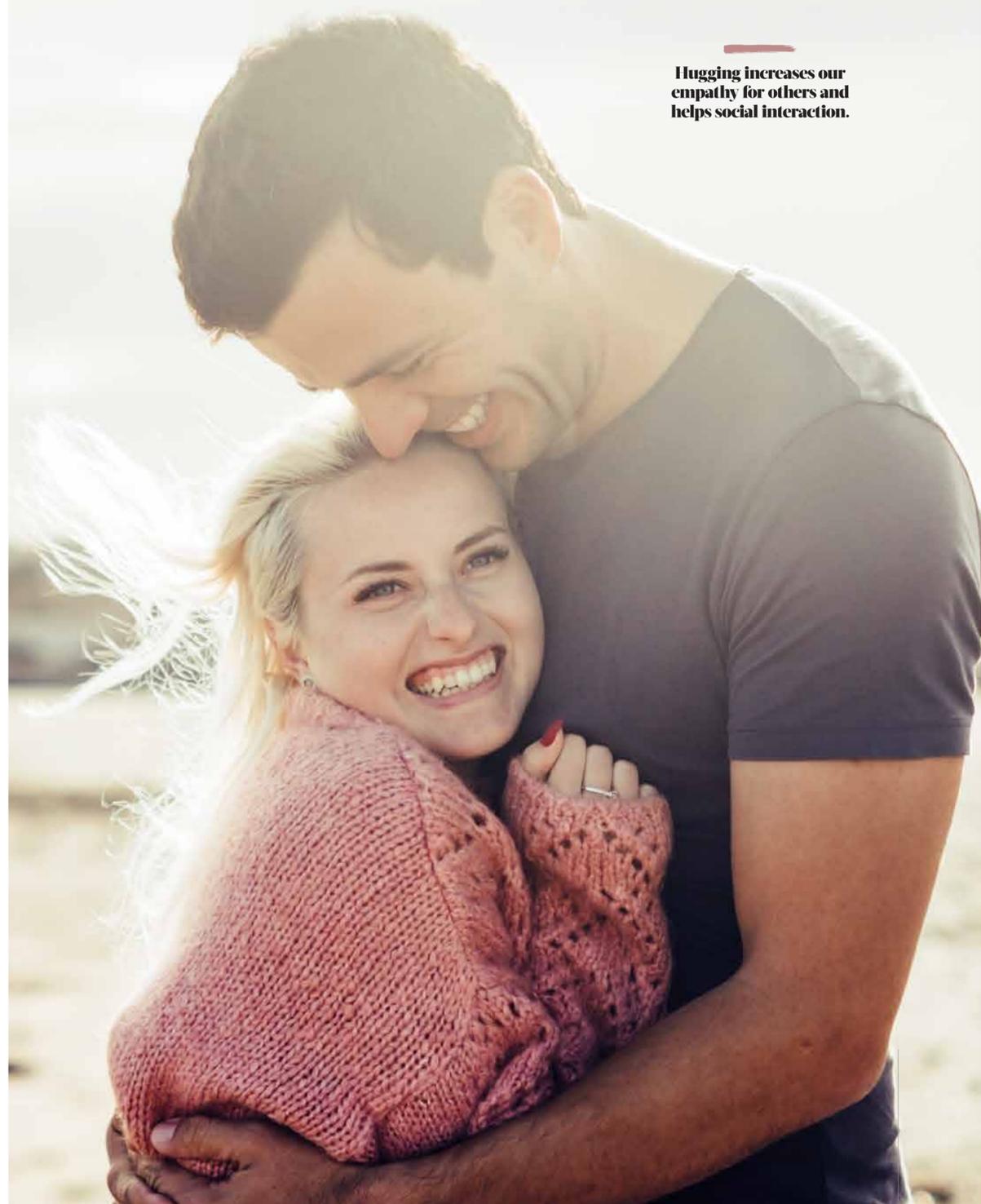
Weighted blankets are filled with plastic poly pellets and weigh between 15 and 30 pounds. They work by relaxing the nervous system via extra pressure—a form of deep touch therapy. Deep touch pressure is the type of surface pressure that is felt when we touch,

hold, or stroke others, or when we pet animals.

Basically, the blanket molds to the body like a warm hug. The body responds as if it is receiving physical contact, and the brain releases serotonin, causing the nervous system to relax. With the nervous system relaxed the body is able to fall into a deeper, more restful sleep.

*Continued on Page 9*

Hugging increases our empathy for others and helps social interaction.





ERMOLAEV ALEXANDER/SHUTTERSTOCK

Healthy adults with an average risk for heart disease receive no overall benefit from a daily Aspirin.

## Why Your Doctor May Be Ignoring Medical Science

Doctors are prone to bad habits, as much as anyone else, especially when their patients encourage it

### INDERVEER MAHAL

For decades, millions of patients have been taking a daily Aspirin in an attempt to prevent hearts attacks and strokes. But in March, the American College of Cardiology and the American Heart Association released guidelines declaring healthy adults with an average risk for heart disease receive no overall benefit from a daily Aspirin.

In simple terms, Aspirin, or acetylsalicylic acid, is now “low-value medical care.” The term has been coined to classify tests and medications that are ineffective and provide no benefit to a patient’s medical care. Instead, low-value care can actually expose patients to harm, shift the focus away from beneficial care, and result in unnecessary costs to the patient and the health care system.

Since entering medical school almost 10 years ago, and now as a practicing family doctor, I have noticed this ever-growing need to identify and move away from low-value medical care.

In the case of Aspirin, research shows that average-risk patients are exposed to higher risks of bleeding and led to falsely believe Aspirin is the best form of primary prevention.

In fact, the best protection is regular exercise, a healthy diet, and avoiding smoking.

#### Health Care Systems Slow to Respond

Convincing doctors to stop making a low-value care recommendation may be a slow and difficult task. History tells us doctor and patient expectations may be slow to respond to this new information.

It’s no secret that health care systems are slow to integrate new research into clinical practice. A landmark study from the early 2000s showed there is a time lag of 17 years before research is implemented into regular care.

**Clinical judgment and reasoning are increasingly being replaced by algorithms.**

Changing clinical practice also goes beyond integrating new information. It requires unlearning and forgoing outdated, ineffective clinical practices. And it’s this process that health systems particularly struggle with.

This partially explains why low-value health care continues to thrive—to the tune of \$765 billion of unproductive expenditures in the United States in the year 2013 alone.

#### Doctors Practice ‘Defensive Medicine’

Part of the challenge in unlearning is that it interrupts the status quo, both for doctors and patients. For instance, in previous decades, family doctors had all patients undergo a yearly physical exam and routine blood work. We thought this annual check would find diseases and make patients healthier.

Instead, research has shown annual exams are very low yield. They provide no health benefit for a large, healthy subset of our population.

But try convincing the doctors who invested years doing these exams—often booking patients in for longer, half-hour visits and believing they were providing a valuable service—to move away from this ingrained and fossilized method of medical care.

Studies looking into the complexity of unlearning among physicians highlight the inherent shame and loss of professional self-worth that occurs when previous practices are abandoned and considered obsolete.

Even more powerful is the impact that removing previous practices can have on patients. Our culture places a strong emphasis on the mantra “more is better.” More exams. More tests. More procedures.

When doctors refuse to provide care that was previously considered beneficial and important, the pushback from patients can be strong. As a family doctor, I often inform my patients that I don’t do annual

checkups. Most are surprised and some become upset. I would be lying if I said I haven’t thought about just giving in to patients’ demands to give them comfort and make my job easier.

Complicating the matter, even more, is how overusing health services allows doctors to protect themselves against malpractice lawsuits. This is known as “defensive medicine.”

Clinical judgment and reasoning are increasingly being replaced by algorithms. The absence of testing and intervention is getting harder and harder to justify—a reflection of how medicine has morphed into an expectation of being “a perfect science, rather than an imperfect, but well thought-out art.”

But the cost of defensive medicine is staggering. On average, the American health care system spends \$46 billion on care centered around medical liability.

#### Aspirin Is Not the Best Option

Initiatives such as the international Choosing Wisely campaign are making efforts to try to curb low-value care by educating health care providers and patients on the drawbacks and harms of over-testing and medical misuse.

The campaign has issued numbered lists of low-value processes specific to each medical specialty. It aims to break the “this is how it’s always been done” culture that can overwhelm medicine.

Yet, despite the launch of the campaign in 2012, little change has been seen in the practice habits of physicians.

While the evidence is clear that, for many average-risk patients, Aspirin isn’t the best option in preventing heart attacks, convincing patients, doctors, and health care administrators of the same will be difficult.

The process of unlearning and disengaging from previous practices is hampered by a complex interplay of human emotion, individual expectation, legal liability, organizational structure, and simple inertia.

# The Amazing Benefits of Hugging—According to Science

Hugs trigger the release of oxytocin with a cascade of emotional and physical benefits

Continued from Page 7

A 2008 study published in Occupational Therapy in Mental Health showed that weighted blankets offered safe and effective therapy for decreasing anxiety in patients. These results were confirmed in a 2012 study published in Australasian Psychiatry, which indicated that weighted blankets successfully decreased distress and visible signs of anxiety.

#### 2. Hugging Reduces Fear of Mortality

As human beings, we all know that we are going to die someday. This can be very frightening for people with low self-esteem who feel like they are not living meaningful lives.

In a series of studies on fears and self-esteem published in the journal Psychological Science, researchers demonstrated that hugs and touch significantly reduce the fear of death and mortality.

In one particular study, participants were approached as they walked through a university campus and handed a questionnaire to fill out. Some of the participants received a light, open-palmed touch from the researcher as they were handed the forms, while others were not given any physical interaction.

The results showed that participants with low self-esteem, who received the physical touch, reported less death anxiety on the questionnaire than those who had not been touched.

Touch also appeared to act as a buffer against social alienation. Participants with low self-esteem demonstrated no noticeable decrease in social connectedness after being reminded of death, but only if they had received a light touch.

This research suggests that touch plays a beneficial role in providing comfort and reassurance to people who are depressed and dealing with the thought of their mortality.

#### 3. Hugs Can Decrease Food Cravings

We often eat for our emotions, rather than our hunger. In fact, the brain circuit that controls eating overlaps with the brain circuit that controls interpersonal relationships.

Eating sends oxytocin in the dopamine-rich areas of the brain, making us feel pleasure and relaxation. This helps explain why eating can be soothing and pleasurable. This also explains why we’re drawn to emotional eating; it mimics the same feelings of comfort we get from close friends and family.

But oxytocin is also released by physical contact and supportive interactions with other people. The release of oxytocin brings on feelings of trust and generosity. It also reduces stress and anxiety.

Improving our relationships, therefore, can have an impact on weight loss. By increasing the quality and closeness of our relationships, we increase the amount of oxytocin in our system and that reduces food cravings.

#### 4. Hugs Increase Bonding and Strengthen Relationships

Relationship expert Dr. Pam Spurr notes that the simple act of hugging can go a long way in keeping relationships healthy and happy.

For couples, hugging helps to bridge the gap between what happens in the bedroom and what happens in day-to-day life. It maintains the intimacy that occurs when making love and ensures that partners feel emotionally connected to each other.

A study reported in the Daily Mail suggested that hugs are more important for a couple’s happiness than sex. The article notes that hugging provides many benefits including stimulating our touch centers and our olfactory centers (the part of our brain responsible for smell). This is why the smell and touch of our partner make us feel loved and cared for.

Hugs also provide a form of communication separate from sex, which allows couples to feel close without draining their energy. When couples touch, they let down their guard and feel love and acceptance towards their partner. Touching and hugging is the

best way to maintain a strong emotional bond and connection.

#### 5. Hugs Improve Self-Esteem

Hugging boosts self-esteem, especially in children. Touch and smell are the two most important senses in infants, and a baby recognizes its parent by touch. From the time we are born, our family’s touch shows us that we are special and loved.

A young child’s brain needs a lot of stimulation to grow and develop. Physical touch is one of the most important stimulations that can facilitate child development.

This is demonstrated in observations of infants in eastern European orphanages that had limited physical contact. They usually suffered from impaired growth and cognitive development.

Researchers have found that when institutionalized infants received an average of 20 minutes of touch a day for 10 weeks, they subsequently scored higher on developmental assessments.

This association between self-worth and touch remains embedded within our nervous system as adults. Hugs remind us of the affection we received as babies and therefore connect us to our ability to self-love.

**Oxytocin is released by physical contact and supportive interactions with other people.**

#### 6. Hugging Causes Muscles to Relax

If you’ve ever had a massage, you know how relaxed it can make you feel. This is not just a mental sensation; massage causes muscles to unclench, the heart rate to slow, and cortisol levels to drop. Once that happens your body is able to relax and recharge, resulting in a happier emotional state and a heightened immune system.

Oxytocin, which is released into the bloodstream while hugging, helps the body to repair muscles more quickly. It does this by enabling fat in the body to be converted into energy and used for muscle repair. Healthy levels of oxytocin lead to better energy conversion, and therefore better muscle repair and muscle growth.

#### 7. Hugs Increase Empathy and Understanding

Oxytocin has other benefits too. When oxytocin is released into the body, it produces a feeling of empathy.

A study conducted by Jorge A. Barraza and Paul J. Zak tested the effects of oxytocin on 145 college students from the

University of California–Los Angeles. The students were randomly divided into three groups; one group watched an emotional video and played an ultimatum game which consisted of offering to share a fixed sum of money; the second group watched a control video and played an ultimatum game, and the third group only watched an emotional video.

The results showed that watching the emotional video increased oxytocin levels by 47 percent. Consequently, the participants experienced a change in empathy levels, as demonstrated in greater generosity during the ultimatum game.

The study illustrated how oxytocin increases empathy, even between total strangers. Just by hugging someone, oxytocin is released into the brain, triggering a feeling of empathy in our brains.

#### 8. Hugs Increase Happiness

A UCLA study of 236 people in 2011 showed that raised levels of oxytocin promote optimism and self-esteem.

As we hug and release oxytocin, our ‘happiness scale’ is raised. In fact, studies estimate that 50 percent of our happiness is genetic, 10 percent is affected by our environment, and forty percent is determined by how we are nurtured.

In a study conducted at Pennsylvania State University, students were divided into two groups. The first group was instructed to give or receive a minimum of five hugs a day over the course of four weeks. They had to hug as many different people as possible, and record the details. The second group, the control group, was instructed to record the number of hours they read each day, for four weeks.

At the end of four weeks, the hugging group had hugged an average of 49 times each and reported being much happier. Unsurprisingly, the reading group reported no changes.

#### 9. Hugs Are Great for Your Sex Life

Researchers at the University of Toronto Mississauga tested the correlation between post-sex affectionate behavior (kissing, cuddling and talking) and sexual and relationship satisfaction. The two-part study, published in the Archives of Sexual Behavior, used an online survey of 335 individuals, and a 21 day survey of 101 couples.

In the online survey, participants reported that on average they engaged in affectionate behavior after sex for a period of approximately 15 minutes. Couples in the second study were then asked to cuddle for longer than this period of time.

The study concluded that couples who spent extra time together felt more satisfied with their sex lives and with their relationship. This level of satisfaction remained consistently higher, even three months after the original survey, indicating that taking time to share intimacy after sex reaffirms the emotional and sexual bond between a couple and makes it stronger.

#### 10. Hugs Teach Us to Give and Receive

Hugging is a reciprocal act; we give and we receive. In hugging, we recognize that there is equal value in giving and being receptive to comfort and



HEALTHY/ISTOCK

warmth. Hugs show us that love flows both ways. When we hug someone we are opening ourselves up to their energy field, and building a relationship of trust.

Virginia Satir, a famous psychologist, once said that we need four hugs a day for survival, eight

hugs for maintenance, and 12 hugs for growth. Now that you have the scientific proof of all the amazing benefits that hugging can provide, don’t delay—start hugging today!

This article was first published on NaturallySavvy.com

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Hugging is a reciprocal act.

# Outside Experiences

If you want happy, emotionally healthy kids, prioritize experiences over toys

JAY HARRINGTON

When you live in northern Michigan like we do, there's a strong sense of urgency when summer arrives. The season is short so we try to pack in as much sun and fun as we can, while we can.

Judging by the throngs of people at the beach, on the trails, out riding bikes, and on boats in the region, we're not the only ones who have rushed out to soak in what the warmer days have to offer.

One of the most satisfying (and exhausting) aspects of all of this summer fun has been watching our kids frolic in the great outdoors. They're wearing us out, but we wouldn't trade these days for anything. We know that they are enjoying important moments that will make a difference over the course of our lives together.

**Kids Crave Experiences Over Things, Too**

You've probably heard about the research that shows that adults derive more happiness from spending their money on experiences than they do on things. Unlike material possessions that are satisfying at first, but quickly lose their luster, experiences get better over time. Thomas Gilovich, a psychology professor at Cornell University, conducted a study in which he asked people to report their happiness with major material or experiential purchases. Initially, people rated them about the same. Over time, however, their satisfaction with material objects decreased while their satisfaction with experiences increased.

Gilovich explains that our experiences become a much bigger part of our identity than our possessions. "You can really like your material stuff. You can even think that part of your identity is connected to those things, but nonetheless they remain separate from you. In contrast, your experiences really are part of you. We are the sum total of our experiences," he said.

It turns out that the same inclination toward experiences over things holds true for kids. According to a recent study conducted by professor Cindy Chan from the University of Toronto, kids get much more out of an experience than they do from all of that stuff lining the toy store shelves that they clamor for, but quickly lose interest in. Research shows that memories born out of experiences form emotional "anchors" that give kids comfort during tough times. Experiences also promote brain development and help forge close bonds between family members.

This research really resonates with us. There is no doubt that our kids are more content and get along better with each other, and with us, when they are experiencing new things rather than playing with toys or watching TV at home. And it's not the size of the experience that matters—they seem to be as happy at a local beach as they are on a spring break trip to a new destination.

In our experience, the biggest factor in planning an activity that we can all enjoy is making sure that it takes place outside. The desire for an outdoor lifestyle is what led us to move to Traverse City in



SIMONRAE/UNSPASH

The magic and adventure of the great outdoors is a great (free) way to give your kids precious memories.

the first place. We wanted to provide our three young girls with an upbringing that involved as much adventurous time spent in nature as possible. Over time we've grown from a family that considered a trip to a local park an adventure, to one that hikes, camps, fishes, and skis together.

**Simple Ways to Create Outdoor Experiences**

Spending more time outside as a family is great, but it's not always easy. With all of the alternatives available to them, kids often resist the idea of a "boring" afternoon exploring with their parents and siblings. And it's not always easy for parents to find the motivation or energy to pull things together for a family outing on the weekend. Here are a few ideas to help plan more fun, active time outside.

**Spend 30 minutes during the week mapping out your outdoor family activities.**

**1. Schedule It**

Time is precious, and feeling the pressure of trying to plan something fun and adventurous while time slips away on a Saturday morning is not a good way to start the weekend. Just as you plan your shopping list, spend 30 minutes during the week mapping out your outdoor family activities. That way you can have a planned agenda, bags packed, and driving directions set in advance. Then you and your family can get out the door and off to your adventure with anticipation instead of stress.

**2. Create Something Together**

Some of the most rewarding time outside is spent building things with kids. For example, our girls look forward to planting a vegetable garden every spring, which pays outdoor dividends all summer as they take responsibility for tending to it. We've also built "sit spots" with our kids, which are special places in the yard for them alone. And we love building fairy houses in the wooded trails near our house. Creating something doesn't require a table saw, ladder and carpentry skills—it just means working with your kids on something simple outside that your kids care about and will consequently care for.

**3. Schedule Your Own Time**

If you're motivated to raise kids that love the outdoors, you probably love the outdoors yourself. It's important, therefore, to schedule your own time for outdoor recreation. It's obviously more difficult to find that time once you have kids, but it's necessary in order to stay motivated while nurturing your family's love of nature. Plus, it's good for kids to see their parents hurtling down the trail on a mountain bike, or cruising across the bay on a paddle board.

Jay Harrington is an author, lawyer-turned-entrepreneur, and runs a northern Michigan-inspired lifestyle brand and blog called *Life and Whim*. He lives with his wife and three young girls in northern Michigan.

# More Older Adults With Joint Replacements Recover at Home

Mounting research finds few patients require stays at rehabilitation centers after joint-replacement surgery

JUDITH GRAHAM

Older adults and their families often wonder: Where's the best place to recover after a hip or knee replacement—at home or in a rehabilitation facility?

Increasingly, the answer appears to be home if the procedure is elective, friends and family are available to help, and the patient doesn't have serious conditions that could lead to complications. This trend is likely to accelerate as evidence mounts that recuperating at home is a safe alternative and as hospitals alter medical practices in response to changing Medicare policies.

The newest data comes from a March study in *JAMA Internal Medicine* of 17 million Medicare hospitalizations of people from 2010 to 2016. All the patients were older adults and went home or to a skilled nursing facility after a medical procedure or a serious illness. Knee and hip replacements were the most common reason for these hospitalizations.

People who were sent home with home health care services demonstrated the same level of functional improvement as those who went to a skilled nursing facility, the study found. Patients were assessed on their ability to walk and get up and

down stairs, among other activities. Those who left the hospital were no more likely to die 30 days after surgery (a very small percentage in each group).

Overall, costs were significantly lower for patients who went home, while hospital readmissions were slightly higher—a possible signal that home health care services needed strengthening or that family caregivers needed better education and training.

"What this study tells us is it's certainly safe to send people home under many circumstances," said Dr. Vincent Mor, a professor of health services, policy and practice at Brown University's School of Public Health who wrote an editorial accompanying the study.

The new report expands on previous research that came to a similar conclusion. In 2017, experts from New York City's Hospital for Special Surgery published a study that examined 2,400 patients who underwent total knee replacements and were discharged home or to a skilled nursing facility for rehabilitation between May 2007 and February 2011. There were no differences in complication rates at six months or in functional recovery and patient-reported outcomes at two years.

"As a result of these findings, we are encouraging all of our patients to consider home discharge after TKA [total knee replacement]," the authors wrote.

The year before, researchers at New York University reported in *JAMA Internal Medicine* that from 2009 to 2012 and 2013-14, discharges to rehabilitation facilities fell from 68 to 34 percent for patients undergoing hip and knee replacements, from 71 percent to 22 percent for patients with cardiac valve replacement surgeries, and from 40 percent to 30 percent for patients who'd had spinal fusion surgery.

Instead, more people were sent home to recover. During this period, NYU Langone Medical Center assumed financial responsibility for "episodes of care" for joint replacements that include the post-hospital recovery period—a policy that Medicare is now promoting.

Diane Rubin, 67, who lives on Long Island, had a hip replacement at the NYU medical center in January. Before the surgery, she got a list of things she'd need to do to prepare for her recovery. Afterward, a nurse and physical therapist visited her at home regularly for about three weeks. "I was more comfortable recuperating at home and I've had absolutely no complications," she said.

How do physicians decide where to send patients? "In general, we tend to send patients to skilled nursing facilities who are older, sicker, more deconditioned after surgery, and who have no spouse or caregiver, fewer resources, and little social support," said Dr. Leora Horwitz, a co-author

Evidence mounts that recuperating at home is a safe alternative.



ALL PHOTOS BY SHUTTERSTOCK

of that study and associate professor of population health and medicine at New York University School of Medicine.

Though it's widely believed that people who live alone might not do well going home, last year researchers at The Rothman Orthopaedic Institute at Thomas Jefferson University in Philadelphia published research showing that isn't necessarily the case. At their institution, patients are assigned a nurse navigator who provides assistance before and after hip or knee replacements. Patients who lived alone stayed in the hospital longer and received more home health care services than those who lived with others.

When they recuperated at home, the Rothman Orthopaedics patients didn't have higher rates of medical complications, returns to the hospital, or emergency room visits than those who went to rehabilitation facilities. Nearly 90 percent of people who lived alone said they'd again choose a home discharge.

Dr. William Hozack, a co-author of the study and professor of orthopedic surgery at Thomas Jefferson University Medical School, acknowledged that patients who go to rehabilitation are probably sicker and more debilitated than those who go home, potentially biasing research results. Still, practices have changed considerably. Today, he and his colleagues send 95 percent of patients who get hip and knee replacements home to recover, instead of directing them to institutions.

People shouldn't underestimate how much help they may require at home, especially in the first few weeks after surgery, said Carol Levine, director of the United Hospital Fund's families and health care project, who has had two hip replacements. The potential downsides to going home include a greater burden on caregivers, the possibility that complications won't be identified as quickly, and that needs will go unmet if friends and family can't pitch in. It's also possible people won't follow through on recommended rehabilitation regimens. And outcomes may not be as favorable if services that support people at home aren't readily available

Utah's Intermountain Healthcare, a health system that operates 23 hospitals and nearly 170 medical clinics, is bringing an array of services—

palliative care, dialysis, primary care, and hospital care—into the home through its new Intermountain at Home program.

Recovering at home after a hospital procedure is also a focus, and Intermountain has created standardized procedures for hip and knee replacements over the past few years, according to Rajesh Shrestha, the system's chief operating officer of community-based care.

**Nearly 90 percent of people who lived alone said they'd again choose a home discharge.**

Every joint-replacement patient going home after surgery now gets a thorough assessment to determine the resources that are needed. A care plan is created and a case manager, usually a registered nurse, makes sure that physical therapy, durable medical equipment, and home health care are supplied. The case manager also coordinates postoperative care with orthopedic surgeons and makes sure that patients reconnect post-surgery with their primary care physicians. And a team of providers is available 24/7.

During the past few years, discharges to rehabilitation facilities have declined by half at most of Intermountain's Utah facilities, with no notable increase in complications or hospital readmissions, Shrestha said. During 2018, 85 percent of knee replacement patients and 88 percent of hip replacement patients went home after surgery, respectively.

At Kaiser Permanente, a health plan with more than 12 million members, a substantial number of patients who get elective hip and knee replacements are skipping a hospital stay altogether and going home the same day. In Kaiser's Southern

California region, same-day joint replacement home discharges now total about 50 percent, according to Dr. Nithin Reddy, who oversees joint replacements for the region. (Kaiser Health News is not affiliated with Kaiser Permanente.)

Kaiser Permanente has made this possible by introducing new protocols for pain management (opioids are used less frequently), altering anesthesia protocols (less general anesthesia and more regional anesthesia), reducing blood transfusions and hiring "total joint coordinators" (typically nurses) to help with the transition from the hospital to home, among other changes. All patients go home with home health care, receive two outreach calls the week after surgery, and get comprehensive handbooks that include checklists of what to do before and after surgery and common concerns to look out for.

"We have very robust discharge criteria: Patients have to have well-managed pain and be able to get in and out of bed by themselves and in and out of the restroom by themselves. And they need to be able to walk 50 to 75 feet unassisted, using a walker," Reddy said. "If they can't do those things, they aren't safe for a home discharge and [rehabilitation at] a skilled nursing facility would come into play."

Magdalena Ritayik, 66, one of the doctor's patients, had a knee replacement last September after cortisone shots stopped working and pain became a constant companion. Six years before, her husband had both knees replaced, separately, and stayed in the hospital three days each time. By contrast, Ritayik went home the afternoon after her surgery, only to find a nurse and physical therapist waiting there for her.

"The nurse went over all the medications when to take them and how much. The physical therapist showed me how to do bending and stretching with a chair in the living room and to raise [my leg] while I was lying on the bed," Ritayik said. "The first week you have to stay home. After the second week, I was walking almost like regular. A month after the surgery, I was at full extension and full bending."

Judith Graham is a writer for *Kaiser Health News*, which originally published this article.

## JAMIE GRUMAN

In days gone by, when our economy was dominated by agriculture and manufacturing, an employee's value was gauged by their inputs into the company. If they slacked off by not placing a bumper on a car fast enough, they were unproductive. And if they slept on the job, they were stealing time from their employers and could be fired.

Today, however, we live in what is largely a knowledge economy in which an employee's value is based on their outputs, not their inputs. This means their performance is often more about ultimate results and less about the hours clocked.

In the knowledge economy, we want employees to be alert, not just active; engaged, not just present. We want them to be focused on producing the highest quality outputs possible.

Sleeping on the job can make this happen.

**An Epidemic of Exhaustion**

According to the National Safety Council in the United States, almost 70 percent of employees are tired at work.

This level of fatigue is estimated to cost US\$410 billion annually in societal expenses. As I discuss in my latest book "Boost: The science of recharging yourself in an age of unrelenting demands", healthy adults need between seven and nine hours of sleep a night, but many of us don't get enough shut-eye.

Thirty-five percent of the population gets less than seven hours of sleep per night. Between 1985 and 2012 the percentage of adults in the United States who slept less than six hours a night increased by over 30 percent. And, compared to 60 years ago, today people get one and a half to two hours less sleep every night.

The ensuing sleepiness results in potential dangers both on and off the job. For example, about one in 25 drivers report having fallen asleep at the wheel in the last 30 days.

The problem is so bad that the U.S. Centers for Disease Control and Prevention considers inadequate sleep to be a public health epidemic.

**Workplaces Should Provide Nap Spaces**

Part of the explanation for this level of fatigue is that the boundary between work and home is blurring. Ninety-five percent of Americans now own a cellphone and 77 percent own a smartphone.

As a result of the ubiquity of communication technologies, employees can now be contacted any time

# Not Sleeping at Work? You Should Be **FIRED**

Fatigue can a productivity  
killer in our always-on  
knowledge economy

Naps as short as  
10 to 30 minutes  
can improve  
performance.

of the day or night, on or off the job. Research shows that 84 percent of employees report having to be available after hours at least some of the time.

This essentially puts employees "on call." And guess what happens when people are on call? They don't sleep as well.

So not only do societal trends reveal an overall reduction in sleep duration, technological trends that blur the boundary between work and home are intensifying our inability to get adequate sleep. This is tragic because work tires us out and sleep is one of the most important recovery mechanisms that exist.

To combat the epidemic of sleepiness, we should allow the blurring of the line between work and home to go both ways. If employees are going to be required to be available after hours, they should also be allowed to sleep on the job.

If employers are going to interfere with employees' leisure time and their ability to recover from their daily job demands, organizations should then provide opportunities for the needed recovery to occur at work.

**Naps Improve Performance**

There is a strong business case for this. Naps as short as 10 to 30 minutes can increase alertness, reduce fatigue and improve performance. Not only that, but recent research suggests that napping may be as effective as drugs at reducing blood pressure. That's means organizations that implement napping policies can save on health-care costs.

Many companies, such as Ben & Jerry's, Zappos, and Nike, allow employees to nap at work. I believe this trend represents the workplace of the future.

The idea that employees should not be allowed to sleep on the job is an outdated taboo from a by-gone era. It is a holdover from the days when an employee's value depended solely on his or her manual inputs.

In the modern economy, however, your value as an employee, manager, or executive often rests on your ability to produce desirable outputs. Tuned in organizations recognize that fatigued employees can't perform at their best. In essence, a tired employee is stealing performance from their employer.

In the modern economy, if you are tired and not sleeping on the job, you should be fired.

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