

# The Integral Healer: The 4 Pillars of the Healer's Practice

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## Abstract

The scientific method has provided the 21st allopathic healer with many powerful and effective tools to combat disease. However, the management of technology does not equate with being a healer. The integral healer not only utilizes the power of the scientific method but also balances its application with compassionate intention and wise perspective. This article describes the characteristics of the 4 pillars of becoming an integral healer (competency, compassion, wisdom, and self-cultivation) and describes how each one of these pillars is vital to being a healer.

## Keywords

healer, wisdom, compassion, integral theory, healing

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## Background

The aim of this article is to propose the characteristics of an integral healer. This model that has direct applicability to modern health care and the appropriate application of technology in diverse and complex societal environments. This model is derived from the contemplative approaches to healing described in the perennial wisdom traditions. Supporting the development of the 4 pillars (compassion, wisdom, competence, and self-cultivation) described in this article could also enhance the resilience of modern clinicians and potentially reduce the current pandemic of burnout among health-care professionals. Each of the 4 pillars has distinct characteristics that can be fostered through a “noetic medical education” that would complement, and not detract from, training in the medical sciences.

Medical knowledge continues to grow at an exponential pace. A recent study reported that our factual medical database is doubling every 2 months.<sup>1</sup> The emergence of deep learning artificial intelligence will inevitably further accelerate the generation of this medical data and will produce a tsunami of factual information that will overwhelm even the most diligent clinician. Simply stated, we are becoming deluged in data. Unfortunately, this monocular preoccupation with objective facts has blinkered modern medicine to the

vital role of the healer in the application of this medical knowledge in the service of the healing process.

Some would argue that the concept of a healer is redundant to a future world that will be driven by digital algorithms—scientific facts applied without subjective knowledge or wisdom. Some might even argue that all we will need is medical navigators, not healers, who will guide patients through clinical pathways signposted by scientific data.

The unbridled ascendancy of the medical scientific method is exemplified by the fact there has been very little attempt by allopathic medicine (current conventional medicine) to explore the characteristics and personal and spiritual development of the healer. The goal of this article is to suggest the characteristics of an integral healer who will be vital to the caring and effective implementation of a medical science that is increasingly redefining our experience of what is possible. A failure to develop a consensus and education focused on these characteristics will result in an unbridled, even reckless

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medical future with unanticipated and disturbing consequences. We have enough scientific genius in our new medical science, but how will we develop a wisdom that is capable of containing our rampant scientific potential. The ancient myths have highlighted the risk of an unbridled science. Prometheus defied the gods when he granted humans the power of knowledge (science) to an unprepared human race. His fate was to be shackled forever to a rock where his liver (considered to be the source of creative thought and planning in Chinese medicine) would be eaten by crows during the day, only to regenerate during the night. Prometheus was eventually released from his torment through the compassionate sacrifice of Chiron (the mythological healer archetype). The implications of this myth for our present singular preoccupation with the intellect are obvious.

Our failure to rigorously examine the necessary characteristics of a healer can be understood through the integral framework.<sup>2</sup> In essence, we have transformed the scientific method into *scientism*, a philosophy that is built on the pillars of objectivity, materialism, reductionism, and empiricism.<sup>3</sup> There is no space within the scientism philosophical framework to explore the subjective first person, and interpersonal aspects of healing. This philosophical isolation is further entrenched by the dominant paradigm that has shaped Western medicine over the past 150 years, that is, the allopathic model that views medicine as seeking antidotes to disease and not pathways to promoting human flourishing. In essence, we have constructed a dominant medical paradigm organized around a philosophy fear-based scientism. The integral healer values and acknowledges the scientific method as just one aspect of a balance approach that recognizes the importance and synergy of including all aspects of the 4 integral quadrants (ie, the domains of scientific truth, first experience, culture, and ecology) that address both human disease and also support our inherent capacity for flourishing.

### Why Utilize the Integral Framework?

Building on the work of Georg Hegel, Sri Aurobindo, Jean Gebser, and Clare Groves, the contemporary philosopher Ken Wilber has described a comprehensive "cartography" of the great philosophical traditions' that attempts to understand to describe the expression and evolution of human consciousness.<sup>3</sup>

The integral model provides the healer with a framework for describing:

1. The scope and limitations of their treatment.
2. The patient's experience and perspective of their suffering.

3. An understanding and appreciation of the patient's movement toward healing (wholeness).
4. A multifaceted perspective of suffering that extends beyond scientific objectivity and includes the individual, ecological, and cultural manifestations of "disease."
5. An understanding of where the healer is located on his or her own journey toward healing and how this shapes their experience of the patient's suffering.
6. A framework for understanding the strengths and challenges of different health-care traditions and the recognition that no one tradition can claim a monopoly on truth.

### Proposed Integral Definitions in Health Care

Health-care providers and our communities employ terms such as "heal," "healer," "disease," and "suffering" many times a day. However, most clinicians have had little opportunity to rigorously examine the definitions of these terms and their significance in the everyday practice of their work. Indeed, a review of one of the largest and most influential textbooks on internal medicine reveals no attempt to define the term healing.<sup>4</sup>

A full discussion of the derivation, definition, and application of these terms is beyond the scope of the article. Any "integral definitions" pertinent to healing must have utility within all domains, lines, states, and stages and not simply within the third-person objectivity of the current pathophysiological model. All definitions are consonant with the integral perspective that recognizes that human beings, like all sentient beings, are aligned with an evolutionary impulse toward interdependent wholeness.

*Disease:* "A loss of adaptive flexibility within a system."

*Suffering:* "Subjective distress generated by the experience of being out of balance."

*Healing:* "The movement toward wholeness and balance."

*Healer:* "An agent that supports the movement of the system toward wholeness."

*Health:* "The manifestation of optimum balance and connection within and across systems."

### A Profession or a Calling?

The work of the healer has always been challenging. As journeymen through suffering, the healer accompanies their patient as they navigate the inevitable crises of life. Given the nature of this task, it is important that the clinician has a clear understanding of their relationship to their work. Simply stated, does the clinician

approach their work as a job, a career, a profession, or a calling?

### Definition of a Profession

Professional activities essentially describe the specific social and environmental characteristics that define the nature and scope of a healer's activities within the community they serve. Each profession has implicit or explicit characteristics that are shaped by a hierarchical group that constructs a consensus on the identity, membership requirements, and code of ethics. As such, the healing professions typically provide constraints on the healer's activities and role within that particular community.

Professionals ... are usually distinguished by their specialized knowledge and training as well as by their commitment to provide important services to patients, clients, or consumers. Professions maintain self-regulating organizations that control entry into occupational roles by formally certifying that candidates have acquired the necessary knowledge and skills. In learned professions, such as medicine, nursing, and public health, the professional's background knowledge is partly acquired through closely supervised training, and the professional is committed to providing a service to others.<sup>5</sup>

This description of a profession has utility within the domain of objective science and administrative regulatory control, but provides little guidance in the ambiguous and idiosyncratic domain of subjective suffering experience. The integral healer is not blinkered by their professional affiliation but recognizes the specific knowledge, limitations, and strengths of each professional community. Recognizing that no professional group contains all necessary perspectives, the integral healer should navigate and build bridges that enhance interprofessional collaboration.

### Definition of a Calling

The integral healer experiences their work as a calling and not simply a professional identity.

A calling is a transcendent summons, experienced as originating beyond the self, to approach a particular life role in a manner oriented toward demonstrating or deriving a sense of purpose or meaningfulness and that holds other-oriented values and goals as primary sources of motivation.<sup>6</sup>

Although our ego may choose a particular profession, our calling is something we are drawn toward—called to

manifest our role within our community. In essence, our experience of medicine as a calling is shaped by our relationship to one another, and not simply the mechanics of our work. The integral healer understands their work through the lens of supporting the evolution of each individual within, across and up the domains of the integral framework. Our mission as a calling is motivated by a clear understanding of our intentions, our relationship to those we serve, and the nature of the knowledge that we have garnered through our training and life experience. As a calling, healing is a service to the greater evolutionary impulse toward healing.

The practice of medicine is an art, not a trade; a calling, not a business; a calling in which your heart will be exercised equally with your head. Often the best part of your work will have nothing to do with potions and powders, but with the exercise of an influence of the strong upon the weak, of the righteous upon the wicked, of the wise upon the foolish.<sup>7</sup>

—Sir William Osler FRS, FRCP

As a calling, the integral healer recognizes that their personal and spiritual development is vital to energizing and optimizing their work. The integral healer recognizes that their call to heal is both the source and the manifestation of their calling. This process supports the healer's own flourishing and also mitigates the experience of the burnout that has become an epidemic among contemporary allopathic healers.

### The 4 Pillars of a Healer

The focus of the 21st century allopathic medical student is to learn and assimilate enormous quantities of scientific medical information. Ironically, much of this information will eventually be proven wrong or inaccurate. Many years ago, Dean Charles Burwell captured this reality in his address to Harvard medical students when he said, "Half of what we are going to teach you is wrong, and half of it is right. Our problem is that we don't know which half is which."<sup>8</sup>

Although much of our current scientific fact will eventually be proven wrong or inaccurate, the scientific method has obviously unleashed remarkable and effective therapeutic tools that have greatly enhanced the well-being of the human race. The issue is not that the scientific method is wrong, the issue is that it is not sufficient to fully address the first person and social experience of human suffering.

Sir William Osler recognized the inherent limitations of third-person objectivity when he wrote: "Fed on the dry husks of facts, the human heart has a hidden want which science cannot supply."<sup>7</sup>

Four factors that provide the foundation for the integral healer's calling are as follows:

1. Compassion
2. Wisdom
3. Competence
4. Cultivation

It is important to recognize that each of these 4 pillars is vital to becoming an integral healer. The failure to develop one of more of these factors will result in a suboptimal healing practice.

Each of these 4 pillars is described as follows.

### *Pillar 1: Compassion*

Compassion is the most important and first necessary foundation for healing practice. The term compassion has become a buzzword in 21st America and is frequently employed by politicians, religious leaders, healers, and the general public to describe very different concepts. Unfortunately, this popularization has inevitably distorted the meaning of a term that was initially the purview of contemplative traditions. It is important to distinguish between compassion and terms such as empathy and altruism that describe a cognitive skill and caring behavior respectively. Compassion represents the healer's "North Star" that is the motivating factor for developing and manifesting healing practices. Furthermore, compassion assures adherence to the Hippocratic vow to: "First do no harm."

The word "compassion" is derived from the Latin word "compati," meaning, "to suffer with." Buddhist approaches define compassion as the intention to support the happiness of self and others. The Dalai Lama has defined compassion as: "An openness to the suffering of others with a commitment to relieve it."<sup>9</sup> In the Western psychological tradition, compassion has been defined as, "the feeling that arises in witnessing another's suffering and that motivates a subsequent desire to help."<sup>10</sup> A number of implications follow from these definitions that describe the compassionate healer's very deliberate and conscious decision to acknowledge and engage with their patient's suffering. Motivated by this shared experience of suffering, the healer is strongly motivated to develop the (medical) skills necessary to relieve this suffering.

Limited compassion can be intermittent (state dependent) and shaped by the context of the specific relationship. This is explained by research that has shown that the empathic bond between individuals is strongly influenced by factors such as hierarchy, physical relationship, expectation of outcome, and behavioral facilitators (such as physical touch).<sup>11</sup> The integral healer is equally

motivated to be of service to every patient, regardless of any factor that might make this challenging.

Neuroscience has demonstrated that compassion is a developmental skill that can be enhanced through specific training (such as compassion meditation). Indeed, sustained compassion meditation has been shown to produce distinct neuroanatomical changes in areas (including the insular, mesiofrontal, and anterior cingulate cortices) that mediate meta-relational experiences such as subjective emotional and physical distress, and empathy.<sup>12</sup> The integral healer works conscientiously to enhance their capacity for universal compassion, constantly monitoring for any situation that challenges this capacity. Compassion provides a touchstone against which all actions can be tested. Inhabiting a world of suffering, healers will inevitably face considerable challenges. The integral healers commitment to universal compassion will inevitably fuel great tenacity and fierce courage.

As an intention, the manifestation of compassion is an emergent property that is facilitated and supported by several important attributes that characterize the integral healer. These attributes essentially describe the capacity for affective balance that fuels the healer's ability to manifest their compassionate intention despite the challenges inherent to their work.

*Equanimity.* As journeymen through suffering, the healer encounters challenging and painful emotions experienced by their patients and themselves. Equanimity provides the foundation for navigating this terrain of suffering. The word equanimity is derived from the Latin *æquanimitas* (*æquus*: even; *animus* mind/soul) and describes a state or trait of psychological, cognitive, and physiological stability and composure that is undisturbed by experience of, or exposure to uncomfortable emotions, pain, or other phenomena.

Equanimity supports one's emotional, physical and cognitive stability in the face of challenging situations. Dysregulation in any one of these domains will distort our response and inhibit our capacity for compassion-centered intention.

It is important to distinguish equanimity from scientific objectivity. The integral healer does not relate to their patients as only their objective scientific data points, but consciously observes the experiential aspects of their engagement with their patient's subjective distress. The integral healer can therefore work skillfully with objective, subjective, and interpersonal data in developing an effective response to their patients' suffering. This is equivalent to the Stoic concept of *metriopatheia* which describes the ability is able to manage emotions, rather than suppress them (ie, *apatheia*). Equanimity therefore supports patience and consistency.

Teach us to care and not to care.  
TS Eliot's "Ash Wednesday"

Rather than experiencing themselves as being trapped by their reactions to their patient, equanimity allows the healer to experience a "spaciousness" that supports creative and skillful responses motivated by compassion, and not restrictive emotions. This supports the healer in moving from limited reactivity to an open reflectivity that supports the patient's movement toward wholeness (healing). Inhabiting this stable spaciousness, the healer is able to fully experience "joyful participation in the sorrows of the world."

Sir William Osler described the importance of embracing the full spectrum of human experience:

Medicine arose out of the primal sympathy of man with man; out of the desire to help those in sorrow, need, and sickness. Our fellow creatures cannot be dealt with as man deals in corn and coal; "the human heart by which we live" must control our professional relations . . . Nothing will sustain you more potently than the power to recognize in your humdrum routine . . . the true poetry of life, the poetry of the commonplace, of the ordinary man, of the plain toil-worn woman, with their loves and their joys, their sorrows and their griefs.<sup>7</sup>

Equanimity also provides the healer with the capacity for establishing and maintaining the personal and professional boundaries that are necessary for an effective and appropriate clinical relationship.

**Loving-Kindness.** Loving-kindness describes a persistent, unselfish, and unconditional tenderness and kindness toward others. It is best exemplified by the relationship between a mother and her child. Loving-kindness describes an open-heartedness that is not bound by the limitations of our own needs. Balanced by compassion, loving-kindness strives to support each individual's inherent capacity to flourish.

Sir William Osler captured the concept of loving-kindness when he stated, "To serve the art of medicine as it should be served, one must love his fellow man."<sup>7</sup>

The integral healer manifests a generosity of spirit that is not shaped by the limitations of self-centered motivations such as financial incentives or superficial praise. Driven by this internal motivation of loving-kindness, the integral healer will never give up their compassionate intention, even when the way forward appears uncertain. Loving-kindness therefore generates generosity and a deep commitment to never to give up.

Loving-kindness does not support or condone every action by another person. This would be enabling behavior. Rather, loving-kindness supports clarity of purpose that supports the genuine happiness of others. In this

way, loving-kindness will inherently support the positive attributes of the other person.

Just as a kind and loving mother would never harm her child, the integral healer will never consciously cause harm to their patients. This firm commitment is described in the Hippocratic oath, "First do no harm."

Loving-kindness should not be confused with an attachment to the outcome, that is, action driven by the needs of the healer to be recognized as an accomplished or caring person.

**Joy.** The work of healing must inevitably demand a focus on identifying and responding to the suffering of others. This focus can lead to a monocular preoccupation with the vulnerabilities of others and the belief that their happiness is dependent upon the healer's skills and expertise. This focus on the "pathology" of others will inevitably generate stress in the healer who becomes burdened with worry and responsibility for outcomes that are beyond their control. Although this sense of responsibility can be very distressing for the healer, they do experience the "reward" of feeling that they are vital and indispensable. This focus on the authority of the healer fails to acknowledge that the healer only facilitates the healing capacity of the patient, and is ultimately not responsible for the healing transformation. This attitude was captured by Hippocrates when he stated, "The physician treats, nature heals." This fosters the integral healer's attitude of humility and the recognition that they are simply a small part of some ineffable universal plan.

The integral healer experiences great joy when they witness the happiness of others. However, the integral healer acknowledges that they are simply the facilitator, and not the cause, of each person's inherent capacity for flourishing. This attitude not only empowers the patient but also releases the healer from the burden of unrealistic expectations they place upon themselves. Joy protects against the healer from developing arrogant pride that will inhibit humility.

Nothing will sustain you more potently than the power to recognize in you humdrum routine, the true poetry of life - the poetry of the commonplace, of the ordinary person, of the plain, toilworn, with their loves and their joys, their sorrows and griefs.<sup>7</sup>

—Sir William Osler FRS, FRCP

The experience of joy opens the healer to the beauty of life manifest in the power of spirit to not only overcome the challenges of life but also transcend them. The integral healer does not experience an elderly dying patient as a foul odor or a decaying body but rather as a human spirit that carries the markings of a hard life that has been lived with courage and hope. Therefore, rather than becoming burdened or overwhelmed by the suffering

they witness, the integral healer feels deep gratitude for participating in the fullness of life.

Everything has beauty, but not everyone sees it.  
—Confucius

It is important to recognize that each of these qualities, that is, compassion, loving-kindness, equanimity, and joy are all intrinsic capacities of all human beings that can be fostered through specific practices (ie, self-cultivation). Buddhism describes these as the “4 Immeasurables” that are boundless in their scope.

### Pillar 2: Wisdom

Where is the wisdom we have lost in knowledge?  
Where is the knowledge we have lost in information?”<sup>13</sup>  
TS Eliot, *The Rock*

Although the word *wisdom* is employed so frequently in contemporary society, a review of English language dictionaries does not produce a consistent definition for the term. This lack of consensus indicates that wisdom describes a multi-dimensional concept that is best understood as the amalgam of specific components. The English word *wisdom* is derived from an Indo-European root *wede*, which means “to know” or “to see.”

These numerous and diverse characteristics subsumed under English definitions of wisdom share one commonality, that is, they describe wisdom as a deep understanding and application of what is most important to a positive life. This distillation highlights 2 manifestations of wisdom, that is,

1. *Sophia*—The intellectual understanding of what is important.
2. *Phronesis*—the practical application of this knowledge.

In practical terms, one could argue that *Sophia* describes the intellectual and objective scaffolding for describing a benevolent world. In contrast *phronesis* can be understood as the practical application of knowledge in the context of a world complicated by the messy complexities of individual and environmental idiosyncrasies.

The wise practical application (*phronesis*) of medical knowledge can be very challenging in the complex world of technology, pluralistic societies, professional guilds, and shifting societal trends. Ultimately, the wise integral healer should have both a deep understanding of ethics (what is important) as well as the ability to apply these principles in the context of the complex and ambiguous situations they encounter in their care of patients. In this regard, deontological (principal-based) approaches that

form the basis of contemporary bioethics may provide theoretical guidance but do not guide the clinician in what is the most compassionate or wise action in a particular clinical situation. Unfortunately, working within framework of principle-based ethics, clinicians therefore resort to invoking whatever principle will justify their intuitive sense of what will be most helpful to the patient.

The most important determinant of medical wisdom is the ability of the clinician to consciously understand the multiple perspectives shaping their patients’ subjective suffering. Each individual has a completely unique perspective of themselves and the world they inhabit. The work of the healer begins by understanding this perspective, and how it is shaping the person’s suffering. An inflexible perspective will result in dogmatism, arrogance, insensitivity, inflexibility, and devaluing—all of which are contrary to the healing process, and will even create suffering.

The only thing more dangerous than ignorance is arrogance.  
—Albert Einstein

Roger Walsh, MD, PhD, has written extensively on the topic wisdom and has provided a framework for understanding the concept of perspective based on an integral model. He writes,

Wisdom is a function of the capacity for taking skillful perspectives. Of course, wisdom is also much more than this capacity but will certainly include this capacity. I define a perspective or action as skillful to the extent that it minimizes suffering and enhances well-being for everyone involved, including oneself. So the hypothesis that wisdom is a function of the capacity for taking skillful perspectives implies that wisdom involves the capacity for looking at things in ways that lead to reduced suffering and enhanced well-being.

A perspective is a selective perceptual stance which results when awareness is filtered through and constrained by mental schemas and modes. A perspective therefore functions as a perceptual and interpretive framework which biases and limits perception (as well as subsequent interpretation, understanding, and responses).<sup>14</sup>

To work effectively with each person’s unique perspective (experience of their life), the integral healer must possess the capacity for postconventional thinking that includes the capacity to assume a perspective that is characterized by:<sup>14</sup>

1. *Open-Mindedness*: The ability to simultaneously hold multiple perspectives. The integral healer recognizes that no single perspective possesses a monopoly on

truth. Given this, the integral healer recognizes and acknowledges that all perspectives contain some aspect of reality that can bring value and support the healing process.

2. *Cognitive agility*: The integral healer exhibits the ability to generate creative responses and is not straight-jacketed by predetermined algorithms.
3. *Meta-cognitive capacity*: The ability to hold a higher order perspective that creates a space where the healer can make decisions that are flexible. Motivated by their desire to understand any situation from multiple perspectives, the integral healer is always curious and eager to explore new ideas and acquire new skills.
4. *Integrative capacity*: The ability to not only adopt multiple perspectives, but also to recognize relationships between these perspectives, and integrate them into a higher order synthesis. This enables the healer to view things in a larger context, and the ability to move from a micro to a macro perspective, that is, being able to see both the trees and the forest and vice versa. The integral healer is able to move from one domain (ie, the integral 4 quadrants) and recognize the importance of addressing not just the patient's disease (as defined by a scientifically derived pathophysiological model) but also recognizes the importance of addressing the first-person experiential, cultural and ecological aspects of human suffering. The integral healer recognizes that all human suffering is a metaphor for imbalance in systems beyond just the physical domain. This integral perspective is reflected in the shamanistic saying, "First heal, the community, then the person, and then the disease".
5. *Trans-perspectival awareness*: This describes the capacity of the integral healer to work effectively with intuitive insight.

And yet we only knew how each loss of one's viewpoint is a progress and how life changes when one passes from the stage of the closed truth to the stage of because it embraces every point of view . . . a truth great enough to deny itself and the open truth—a truth like life itself, too great to be trapped by points of view, pass endlessly into a higher truth.

—Sri Aurobindo

### **Pillar 3: Competence**

All healing traditions require that their practitioners master certain clinical skills. The modern healer must master an avalanche of scientific fact and most will need to develop the technical skills to perform increasingly complex procedures. Regardless of their tradition, healers must exhibit state-specific intermittent

performance excellence in their technical skill set, as well the sustained attributes described under compassion and wisdom.

Individuals who exhibit intermittent performance excellence suggest that they exhibit the following "flow" state characteristics:<sup>15</sup>

1. Intense and focused concentration on what one is doing in the present moment.
2. Merging of action and awareness.
3. Loss of reflective self-consciousness (ie, loss of awareness of oneself as a social actor).
4. A sense that one can control one's actions, that is, a sense that one can in principle deal with the situation because one knows how to respond to whatever happens next.
5. Distortion of temporal experience (typically, a sense that time has passed faster than normal).
6. Experience of the activity as intrinsically re-warding, such that often the end goal is just an excuse for the process.

Although it may be obvious how these characteristics might manifest in an expert surgeon doing a complicated procedure, one can also appreciate how similar characteristics will support any clinical interaction. Motivated by compassion and wisdom, the integral healer works diligently to develop their clinical competency sets. However, the integral healer recognizes that their work extends beyond intermittent state performance mastery.

### **Pillar 4: Self-Cultivation**

All healers must develop competence in a specific skill set, typically derived from a lineage or professional group. However, the integral healer recognizes that these skills will be most effective when delivered by a healer who manifests their own well-being across different lines, stages, and states. The integral healer recognizes that they are both the prescriber and the facilitator of transformative change. Given this, the integral healer recognizes that they are the facilitators of their patients' evolutionary impulse toward wholeness. However, they recognize that they can only support the transformative healing of their patients up to the healer's own level of development.

Therefore, in addition to acquiring specific skills sets, the integral healer recognizes that self-cultivation is vital to their work. This self-cultivation can be viewed as a "noetic education" that describes an education of the heart, and not simply an education of the head (cognitive line). An education that develops our "gnosis," our way of knowing ourselves, and our ways of relating to one another.

The foundation for a noetic education is a calm self-awareness and the ability to maintain a clear and stable awareness with our external relationships. Simply stated,

the noetic education supports the healer's ability to "see things as they really are." Coming from a place of "wise mind/heart" the integral healer manifests clarity on the nature of their patients' suffering, and the most effective and necessary remedies to relieve their suffering. This clarity enables the healer to flexibly and consciously choose the nature of the remedy—within which domain (quadrant), line, stage, and state. Furthermore, with the permission of their patient, the integral healer consciously should chose at what level there are working with the patient, that is,

- (i) Work on the patient (procedures and symptomatic medicines)
- (ii) Work with the patient (interpersonal therapies)
- (iii) Work through the patient (transpersonal approaches).

Working in this flexible and conscious way, the integral healer is able to provide more effective, compassionate, and personalized care that extends beyond the limited and rote algorithms provided by professional guild. Having said this, the integral healer is able to recognize and acknowledge both the strengths and limitations of their own development and skill sets. Given this, the integral healer works collaboratively with other healers who have different skills and personal characteristics necessary to addressing the idiosyncratic needs of the patient. In this way, the integral healer supports the emergence of collaborative, nonhierarchical, and respectful integrative health-care teams.

Unfortunately the vast majority of allopathic medicine (derived from the Latin "allo" for opposite and "pathos" for suffering) is focused on attempts to address and remove negative (pathological) factors and ignores the vital importance of identifying and cultivating positive factors that are necessary to supporting wellness and transformation. This inevitably results in patients identifying with their vulnerabilities and not their remarkable strengths.

The modern allopathic clinician is typically educated to believe that personal sacrifice and the denial of their own needs and personal distress is the greatest gift they can offer their patients. This puritanical perspective inevitably fuels shame and "professional burnout." A noetic education is founded on the cultivation of internal and external resources that are described in the integral model. However, development of the first person domain is the most important and necessary foundation for the personal and spiritual development of the healer. The integral healer must first develop a capacity for "self-awareness" in order to identify and monitor where they are on their journey. The development of this meta-awareness is promoted by specific contemplative practices that facilitate insight and stability, and the

enhancement of specific attributes such as compassion, equanimity, loving-kindness, and joy (described earlier in this article).

There is nothing that remains difficult if practiced.<sup>16</sup>  
—Shantideva

Having established their capacity for meta-awareness, the integral healer consciously evaluates and cultivates the resources available to them that will enhance their ability to flourish (and support flourishing in their patients), that is,

1. Their natural talents.
2. Their learned skills.
3. The resources available to them.
4. Their passions and interests.
5. Their character strengths.

The integral healer actively evaluates and supports their resources within all domains. This includes their physical well-being, social and cultural support systems, political and regulatory contexts, and first-person consciousness.

Although it may be obvious how these characteristics might manifest in an expert surgeon doing a complicated procedure, one can also appreciate how similar characteristics will support any clinical interaction. Motivated by compassion and wisdom, the integral healer works diligently to develop their clinical skill sets. However, the integral healer recognizes that their work extends beyond intermittent state performance mastery. In order to engage with all aspects of their work, the integral healer recognizes that they need to maintain a consistent mastery over all aspects of their personal and professional lives. This requires that the healer identify and align with the core values that stem from their compassionate intention to support the happiness of themselves and others.

The compassionate intention of the healer must be consciously coupled with core virtues that assure and amplify the benevolent application of this intention. These virtues can be fostered and enhanced by contact with role models who embody them. This highlights the importance of maintaining and respecting our lineage of healers who have embodied these virtues and who provide role models for the next generations. Unfortunately, allopathic medicine pays almost no respect to its progenitors, and engenders very little reverence for its elders who are often considered "out of date" or even "scientifically inept." This highlights the importance of professional, cultural and environmental factors in fostering or inhibiting pro-social virtues. Hierarchical fear-based systems are antithetical to the work of healing and create a flywheel of scarcity, greed, aggression, and



suffering. This is particularly concerning given the power that emerging scientific discoveries are unleashing. The personal and spiritual development of the 21st century healer must be adequate to contain, even constrain, the unleashing of these capacities by individuals who may be motivated by an arrogance that is the most dangerous form of ignorance. The wise leader recognizes their role in creating a safe community space that allows healers to support one another in manifesting their compassionate intention, rather than encouraging ego-driven competitiveness.

The Buddhist Mahayana tradition teaches the 6 virtues (perfections) that describe the ideals of human character that should be cultivated in order to lead a meaningful and compassionate life that is of benefit ourselves and others. When combined with the 3 other pillars of compassion, wisdom, and competence, these 6 characteristics provide the vehicle for the healer to manifest skillful means in their actions.

The 6 ideal characteristics are as follows:

1. *The perfection of generosity:* This can be understood as the willingness to give up material goods and also not be motivated by pride or selfishness. The integral healer is therefore humble and not motivated by personal and material gain. Free from these attachments, the integral healer operates from a place of boundless possibilities that can support creativity and transformation. The integral healer recognizes that by giving of themselves they are also supporting their own happiness. In this way, generosity is not self-sacrifice but is enlightened action. The integral healer experiences joy in their work as they recognize that their work is a remarkable privilege that allows them to align with the boundless compassionate energy of a universe seeking to express itself through each sentient being. When the healer is part of a generous community of healers they support one another as a mother would support her child—fostering each healer’s ability to follow their shared calling.
2. *The perfection of morality:* This can be understood as adherence to a set of principles that guard against harming others or self. Living in accord with these principles will assure that the healer does not harm others (“first do no harm”) and also cultivates positive resources within themselves. Initially, the novice healer may need this rule based (deontological) ethical code of practice. However, through their self-cultivation, the integral healer comes to recognize that ethical rules are a means, and not an end. With time and the sincere “practice of healing,” the integral healer moves from restraint as their primary motivation, and is motivated more by their genuine heartfelt drive to be considerate of others (ie, virtue based ethics). This shift allows the integral healer to do no
- harm, but also to work skillfully (phronesis) to address the most significant determinants of their patients suffering.
3. *The perfection of tolerance:* This is akin to equanimity—the capacity for *imperturbability* in the face emotions, physical distress, and external challenges. Maintaining this equipoise the integral healer establishes a solid ground upon which to evaluate and respond to any situation. This also allows the integral healer to see the “big picture” and consider the long-term consequences of any action or decision and not become reactive. The integral healer recognizes that suffering is an inevitable aspect of human experience. Knowing this, tolerance (equanimity) provides a space that is capable of containing all aspects of human experience, suffering, joy, beauty, and hope. The integral healer therefore works with their patients to heal *through* their suffering, and not away from it.
4. *The perfection of energy:* Healing and the development of healing skills demand sustained energy that must be enthusiastically generated and courageously applied. The healer must therefore cultivate their physical and mental energy. Unfortunately, most conventional healers toady neglect their own well-being, and unwittingly diminish their ability to facilitate healing. The integral healer recognizes how physical, psychological, social, and environmental factors impact their vitality and works with their healing community to optimize these factors.
5. *The perfection of attention:* The modern healer is inevitably surrounded by multiple distractions that can pull their attention away from what is most important to their work, that is, to be fully present. Just as the healer has optimized their cognitive skills (such as memory and logical reasoning), they should also optimize their ability to stabilize their attention. The failure to do this will result in behavior that is distractible and/or dull and not supportive of what is most important to their work. Healers must be able to hold a safe and stable space within which their patients can find respite and safety to explore uncharted pathways through their suffering. Contemplative traditions offer detailed and rigorous pathways for optimizing our attention. Just as the healer develops competence in technical procedures, they should also develop mastery of the technology of attention. This means assigning time to contemplative practices under the guidance of teachers who are familiar with the terrain of subjective consciousness. Ultimately, the integral healer recognizes that the work of healing itself is the contemplative practice—healing as craft and not simple technology.

Every nail driven should be as another rivet in the universe, you carrying on the work.<sup>17</sup>  
—Henry David Thoreau

6. *The perfection of clarity*: Wisdom essentially describes the ability to “see things as they really are” and not distorted by our cognitive and emotional limitations. The central importance of wisdom as a pillar of healing has been discussed in this article. The integral healer recognizes that objective “facts” generated by the scientific method offer just one aspect of reality. They are simply one manifestation of a larger reality that is expressed by an evolutionary consciousness that expresses itself through the myriad lens of nature. Ultimately, the humble integral healer recognizes the limitations of their own perspective and is powerfully motivated by compassion that constantly strives to “clean their own mirror of consciousness” so that they can better service their patients. This clarity of wisdom cannot be constructed by human intellect and resides in the human heart that reflects are connection to all sentient beings. This is reflected in the ancient Chinese symbol for healing that includes 2 shamans dancing above the harmony of music contained within the human heart. The integral healer works to balance the genius of the intellect with the wisdom of the heart.

## Concluding Remarks

The role of healer has never been easy. It never will be. The integral healer recognizes that simply acquiring intellectual proficiency is insufficient to becoming a healer. The integral healer must undergo a psychological, spiritual, and physical transformation if they are to become journeyman through their patients’ suffering. In this regard, the current crisis in clinician burnout is deeply disturbing. Perhaps our clinicians are the “canaries in the social mine-shaft” who are manifesting the deep societal malaise of our consensus contemporary consciousness that has become an existential wasteland. The unbridled application of technology has heightened our sense of isolation and disconnection from what is most important, that is, our shared experience of being connected to a community of spirit: Becoming something that extends beyond the limitations of our personal vulnerabilities and a community that enriches our resiliency. The integral healer recognizes that human flourishing, and not simply the eradication of disease, is the ultimate destination for the both the healer and the healed. The most important gifts that the integral healer has to offer are hope, determination, and trust in a compassionate universe that will ultimately bring us all home.

Ars longa, vita brevis “Ars longa, vita brevis, occasio praeceps, experimentum periculosum, iudicium difficile” “The art is long. Life is short” ‘life is short, the art long, opportunity fleeting, experiment treacherous, judgement difficult’. Hippocrates Aphorisms.

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