

Chapter 4

Meeting People Where They Are

My friend Cindy had gum disease. Gum disease begins when bacteria associated with plaque deposits on the teeth cause the gums to become inflamed. It starts out mild, but without treatment can lead to jaw bone damage and the loss of teeth. This condition can be corrected or improved by regular flossing. Sounds easy enough. Why would anyone lose teeth when the “cure” was so simple?

Cindy struggled with body care or even acknowledging she had a body. You see, Cindy, was severely abused as a child. Tortured, in fact. While many of the memories of the childhood incidents were only becoming conscious to her now, years after the fact, she knew down to her bones that having a body only brought pain and was not a good thing. This was etched into her as a child. Now as an adult she was learning that she could take care of herself and life in a body didn't need to be all pain. Still, caring for her body, since this wasn't modeled to her as a child, wasn't second nature.

When she found out about her condition from her dentist, it didn't look like she could really do much about it. She felt a little defeated. Flossing was hard work, especially the teeth in back. She was overwhelmed. On some level it may have even seemed better to not try, than to try and fail. Then the dental hygienist, in a moment of brilliance, asked if she thought she could at least do her front teeth. The front four teeth are easy to do.

The dental hygienist understood one of the reasons that people don't floss. It isn't easy. She was looking for a way to make the process easier. If Cindy didn't begin to floss, there was a good chance that her gum disease would progress and she would lose teeth. For some people the threat of teeth loss would be enough to motivate them to better oral

hygiene. However, there are many instances where people persist in acting in ways that don't benefit them for reasons that are not readily apparent. In Cindy's situation, it is easy to assume her childhood history may be the reason that dental hygiene may be particularly difficult for her to do.

The dental hygienist wasn't aware of Cindy's past, but she did stay present to the reality of today. She listened when Cindy explained why she didn't think she could do it. To insist that Cindy floss all her teeth would only lead to none of them being flossed. She didn't try to force the issue. What she did was devise a strategy that would make the process easier and reduce the loss of teeth. If Cindy could start flossing the front four teeth this would protect that area of the mouth from disease progression. Cindy agreed to try this positive action. She was empowered that it wasn't just all or nothing. There was something she could do for her own behalf.

As it turned out, Cindy was able to floss those four front teeth everyday. However, that wasn't the end of it. As Cindy put it, "Once I had the floss out and had finished the front teeth I attempted to do a couple more. Before I knew it I'd finished them all." One tooth at a time she flossed her entire mouth each day. When she returned to the dentist they were flabbergasted. They had never witnessed such a dramatic improvement.

Cindy explained to them that by meeting her where she was, instead of asking too much of her, she was able to do what had appeared to be impossible.

I first heard the concept of harm reduction articulated by Donna Odierna, an herbalist friend of mine that was knowledgeable about the needle exchange program in Berkeley. The needle exchange is "dedicated to the prevention of infectious diseases and to improving the physical, spiritual and political health of drug users." They do this, in

part, by collecting used syringes and needles and providing users with new apparatus. This is a radical act in a country that claims, “zero tolerance” for drug users. It is an act of compassion based on the understanding that many of us are compelled to act in ways that do not appear to serve us.

The program also provides information published by the Harm Reduction Coalition based in New York, including a 89 page pamphlet that explains how to insert a needle, why overdoses occur, and guidelines for mainlining coke or crack. Harm reduction is a refreshing acknowledgment of reality. The pamphlet begins, “...Lack of information makes it extremely difficult for people to make rational and informed decisions about using drugs. “Just say no” is an inadequate message to give anyone about drugs, but is especially dangerous for those individuals already using them. Drug users and those thinking about using drugs need unbiased, non-judgmental, reliable information about the desired effects and undesired risks of the drug(s) they are using or contemplating using.”

To simply insist that drug users stop using is asking too much of an addict and is based on the presumption that drug use provides no benefits. It is the same as asking the smoker with heart disease to quit smoking or the overweight person with diabetes to eat differently. Sometimes information regarding the damaging effects of their behavior is enough to get people to change, but many times people still can't change for other reasons. In addition, human beings are complex. Often times a behavior that appears unhealthy in isolation, may be providing health benefits when the overall picture is considered.

For instance, a relation of mine, Jim, used to be a daily pot smoker. Pot smoking took the edge off of life for him. At one point he decided to quit smoking marijuana. Jim had just gotten a job and was worried about doing his best. He wanted to be clean and sober, so he stopped smoking. Within a couple of days the internal pressure he felt had

increased dramatically. I talked to him in the middle of this and he was uncharacteristically chatty. I was planning a visit the next day and cut the conversation short by saying, "Hey, I'll be in town tomorrow, lets do this talking in person." Later that day, in a moment of complete overwhelm, he decided to kill himself by taking a bottle of sleeping pills. Lucky for me, Jim is a big guy with an unusual metabolism. Despite a dose that would kill the normal person, he woke up the next morning after the best sleep he'd had in a long time. We still joke about it in my family today, but it reminds me of just how little I know about cause and effect. Was the marijuana helping Jim maintain stability in his life? I have found it rarely makes sense for me to judge other people's actions.

When I am consciously attempting to meet people where they are I start by finding out what is important to them, not me. Drug use is something that I try to avoid. My first line of defense against illness is meditation, diet and exercise. Not everyone has the same values as me. My relation Jim, no longer uses marijuana and is under the care of a psychiatrist that prescribes psych medications to manage his mood. He is not satisfied with the results so far, but believes that there is a combination of drugs yet to be found that will balance his moods. I value the freedom we each have to make our own choices. Human beings are very complex. I can imagine there is more than one way to attain health.

I am reminded of a tale related to me by Phyllis Bala. As an energy worker she was sometimes called upon to do house healings. This is a process where stagnant or foul energy is cleared from a house to allow more pleasant spirits to settle in. I imagine the work of an interior decorator or a Feng Shui consultant is in the same vein. However, as a shamanistic herbalist her process involved a more direct interaction with beings from the other realms.

The story she tells is of some work she did in a client's sublevel

basement. While the rest of the house was clear and bright, people always got an eerie feeling when they entered this lower room. In hopes of shifting the feel of the space, the owners had called in Phyllis to see what she could do. I don't know the particulars of her method, but having participated in healing sessions with her I imagine she began by setting the space. This would include casting a circle, welcoming and greeting the directions and calling in beneficial spirits and entities to help.

In the story she relates, she tells about how she was drumming when suddenly she was moved from within to begin rolling a log on the floor. She pushed the log back and forth, back and forth. Faster and faster. Momentum was building. The ground was rumbling with the movement. Energy was building up. Finally from the ground popped the spirit of a great Indian chief. He related a story of a massacre at that spot. He spoke about how his spirit had been trapped there and that the rumbling had been the key to his release.

He told her then that if she had not provided the impetus that he would have been released in the next week or so because a tree next to the house was set to fall and shake the house and ground to release him. The owners followed up with an arborist and were able to remove the tree before it caused costly damage. As it turns out the house had been in eminent danger, since the tree had indeed shifted and was posed to fall.

While the tale is quite remarkable and it impresses on me the benefit of following one's intuition, it also reminds me that there is more than one way to the same goal. If Phyllis had not been around, the spirit would have been released by the tree and the owners would have marveled at how wonderful that sublevel space was after they remodeled. Anyone that knew of the chief would have just smiled.

The situation of having alternative paths to the same goal is mirrored in

the processes of the human body. If it is important to maintain a constant level of a factor in the body then this is usually accomplished by a variety of methods. Consider calcium. It is common for people to think of calcium in terms of bone health. Indeed 99% of the calcium in the body is stored in the teeth and bones. However, it is the 1% of calcium that is free that is biologically active.

Maintaining calcium at set levels is critical for life. Calcium plays a role in muscle contraction including the beating of the heart. It is an important signaling molecule within cells and is essential for the release of neurotransmitters and hormones. Calcium is also a cofactor in the blood clotting cascade. Without proper levels of calcium maintained inside and outside of cells, nerves would missfire, the heart wouldn't beat properly and severe dysfunction or death would result. Needless to say the evolutionary committee (as my colleague, Susan Wilson, so warmly refers to what other people call God) decided on a complex regulatory system for this parameter.

Plasma levels of calcium are set between 9 and 11mg/dl. If levels drop below 9 the parathyroid is stimulated to release parathyroid hormone (PTH). If levels rise about 11 the c-cells of the thyroid are stimulated to release calcitonin.

Calcitonin and PTH are both hormones that travel throughout the body. We know them to act on the kidney and the bones, but I'd speculate they probably have interactions with other tissues. I will describe what I know about them, but do not claim to know the complete story of their actions in the body. Unfortunately, much remains unknown to science.

Calcitonin is released in response to high levels of calcium. It acts at the level of the bone and the kidney to decrease bone breakdown (resorption) and increase calcium (and phosphate) excretion. Both these actions will serve to bring down plasma calcium levels.

PTH is released when calcium levels drop. It acts to increase plasma calcium by directly stimulating the retention of calcium at the kidney and increasing the rate by which bones are broken down. Calcium is released when bones are broken down and this serves to keep the pool of biologically active calcium adequate. In the hierarchy of things, proper thinking, breathing and heart beating are more important than standing erect; the bones will be sacrificed for more critical functions.

PTH also facilitates the conversion of Vitamin D into its active form. Active Vitamin D circulates and acts at the bones and kidney to ensure adequate levels of calcium in the blood. Vitamin D also stimulates the absorption of calcium out of the gut. Typically 20% of the calcium in our diets is absorbed without vitamin D. This rises to 80% absorption when vitamin D is active.

We don't just rely on one system to ensure adequate calcium for biological activity. We have at least three strategies. To keep calcium at a set point we manipulate how much we absorb from our diet, how much we put into our urine, and the continuous withdrawals out of and deposits into the storage pool of our bones.

While high or low levels of plasma calcium can lead to medical emergencies, these are not often experienced since the body has a functional system of regulating calcium. On the other hand, bone loss is a more common and real concern for many people. Supplementing calcium is a common action that many people concerned about bone loss take. Based on physiological analysis this may not be the most effective strategy for dealing with bone loss, unless a person's diet is lacking in calcium.

The reason for this is that calcium is carefully regulated in the body. This includes the absorption and excretion of calcium. It is true, calcium loading in the gut can lead to increased passive absorption of

calcium and a net disposition of new bone. Since ingestion of supplemental calcium is not a natural occurrence, I wonder about the other effects of such an action. To my knowledge, the disadvantages of calcium loading have not been investigated.

Ideally, one concerned with bone loss would act to stimulate the deposition of new bone directly. The most effective way to do this is via weight bearing exercise. Exercise that puts stress on the bones stimulates local bone deposition and appears to have a positive systemic effect on bone health by reasons that are not understood. In addition, hormones, such as estrogen, and drugs, nutrients and herbs that mimic these hormones or modulate them in the body can also have a positive effect on bone mass.

Other strategies to influence bone health focus on slowing down the resorption of bone. Bone can be spared by therapies that focus on alkalizing the body fluids if acidity is a problem. Some bone loss occurs when bone is broken down to release important buffers that help to keep the pH of the body within tight set limits. When the body fluids become acidic, bone break down is one of a variety of mechanisms that are used to restore the balanced pH. In addition, bone loss occurs under the influence of corticosteroids. While some people take these compounds as drugs to suppress their immune systems these compounds are also produced by the body naturally when it is under stress. Therefore, overall stress reduction can also positively impact bone health.

Here we see that bone health can be maintained by a variety of methods. Health benefits may be realized by increasing calcium intake, performing weight bearing exercise, reducing stress or taking genistein. Is there a right or preferred method? Yes, the best method is the method that the person that is concerned about bone loss adopts. It is also reasonable to not be concerned about bone loss and defer any action at all.

Harm reduction is about finding out where people are, providing accurate information regarding the consequences of their actions or inaction, determining what is important to them, and coming up with strategies that will allow them to meet their goals. Although a direct path may be judged on first estimation as the best way to go, if it is too steep, difficult or simply impossible it is not the best way at all.

This seems obvious, but still many people persist in suggesting that smokers just quit, that the drinker just stop drinking, and that people that eat sweets simply give them up. Many times the fastest way to the goal seems really long. However, when the road is pleasant and more easily traveled people will tend to keep to it instead of taking side roads or stopping along the way. Strategies for keeping the path to health interesting and easier to traverse include breaking the long path to the goal into smaller sections of road with measurable milestones.

This is what the dental hygienist did for Cindy. She got her to start on the path to gum health by suggesting she not focus on doing all the teeth, but only the front four. Cindy's intermediate goal was the front four teeth. This she felt she could do. If four teeth still seemed like too much it might have been suggested that she attempt it only one day a week instead of every day. The important thing is to set up realistic goals that can be easily achieved. Positive accomplishments of any kind contribute to overall emotional health which supports overall physical health.

Another strategy I use to create a healthier lifestyle is to focus on adding positive actions instead of modifying undesirable behavior. It is much easier to start doing a positive behavior than it is to release a behavior that no longer serves. I like to use an analogy to illustrate this point. Consider a dog like a big, happy Labrador retriever. This dog bounds up to you with a ball in its mouth. If you reach over to grab the ball, the dog will not let go. In fact, you may end up playing tug of war with the dog. If on the other hand you offer the dog a dog treat or

second toy the original ball will fall to the ground and you can easily pick it up and throw it away.

This is also true with toddlers. Try to take a toy from a toddler and they will be very unhappy. But give them another toy in exchange and they will usually part with the first toy happily.

This is my experience with bad habits. Lets say I find myself entangled in a relationship that is abusive or no longer serving me and I am really attached to this person. If I want to no longer see this person and tell myself, "Don't call them. Don't call them. Don't call them." with no other focus but on not taking an action that I don't really want to do, it will be hard to avoid not calling them. If on the other hand when I get lonely I tell myself, "I want to be around people that treat me well." and call instead of old friend that I am bored with, but who treats me well I can more easily avoid the contact with the person that is abusive.

Positive action serves two purposes. First of all it is positive action. This means I am adding something I consider positive to my life. Second of all when I reach for something positive I can only grasp it if my hand is not full. In order to grab hold of the new positive action, I need to let go of the old behavior that doesn't serve me. If I am busy with new positive friends, behaviors, or substances than I simply don't have the time for the old stuff. While at first the old may have felt more comfortable and attractive, I find that as I experience the new, the old typically loses some of its appeal.

For many years I lived on what could be considered a white diet. I ate white tortillas with white cheese supplemented with white ice cream and chocolate chip cookies (for color). Perhaps it wasn't quite as extreme as I am depicting it, but I certainly didn't like taking the trouble to prepare vegetables. I was attracted to sugary food and since I didn't want to gain weight I would frequently consume sweets as my meals. I am completely amazed about how healthy I seemed to be on this diet.

Ten years ago I ended up with a chronic yeast infection. I tried herbs and soaks and everything that had worked in the past to no avail. I just couldn't get rid of it. I was also unwilling to change my diet.

The classical solution to chronic yeast infections is the elimination of all dietary sugar including fruit and fruit juices. The thought is that since yeast live on sugar, the elimination of sugar will “starve” the yeast. While this may be a practical solution on a clinical level, it didn't make sense from a physiological point of view. The levels of sugar in the blood are carefully regulated, just like calcium. Eating less sugar would not result in less sugar for vaginal yeast, since blood sugar levels are held fairly constant.

Regardless of the possible therapeutic benefit of sugar elimination, I was unwilling to let go of any of my white foods. A friend suggested I begin to eat kale. Kale is a leafy green vegetable, perhaps the darkest green of any vegetables, and a member of the same botanical family as broccoli. As far as vegetables go, I consider it the most vegetable of the vegetables.

I started eating steamed kale and my condition got better, but it didn't completely clear. I finally went to a medical intuitive/hands-on-healer that was able to identify the energetic cause of the infection and energetically restore my balance. I never changed my diet and the yeast infection went away. My sensitivity to energetic solutions is the reason that my primary health care provider is a medical intuitive/hands-on-healer. I don't seem to respond to other modalities such as herbs and acupuncture. There is more than one way to treat a yeast infection.

The fact that the simple addition of kale to my diet had such a positive effect stuck with me. In fact, years later when I wanted to make a positive change in my dietary habits, adding kale was my first step.

The rule was, “Everything else I want to eat is okay as long as I get my ½ bunch of kale a day.” It was a small, measurable step that I was willing to take.

I can now say that in the last **three** years I've had ice cream four times and cookies once or twice. In addition, on most days I eat the recommended amount of vegetables. That is about four to six servings of vegetables, with a serving being the equivalent of 1 cup of kale or ½ cup of bell peppers, carrots and other “solid” vegetables.

This change was accomplished by focusing on adding foods to my diet that I thought would benefit me. I never once swore off foods that I considered unhealthy, yet as time went on, those foods have lost their appeal to me.

In addition to a direct focus on food, I have also focused on my tendency to overeat. Eating when I'm not hungry is a bad habit of mine. It seems I am compelled to eat when I am agitated and transitioning between activities or tasks. Here again, I didn't try to change the undesirable behavior by insisting that I not eat during these times. Instead, I found other activities besides eating to do during transitions. Now, I call a friend or meditate when I am making transitions. Sometimes I even have my food planned out so that I am not trying to figure out what to eat during vulnerable times. I still don't like preparing food when I'm hungry and want to eat. I have solved that problem by cooking once or twice a week. Vegetables are kept sliced and ready to eat in the fridge. I also make a big pot of bean vegetable stew or lentil dahl once a week and freeze it in serving sizes.

Harm reduction is a compassionate way to approach health behavior changes. Components of this approach are

- Getting complete information regarding consequences of current behaviors.

- Appreciating the mystery of current behaviors and barriers to change.
- Clarifying personal values.
- Determining doable steps towards healthier behavior. Making an individualized plan.
- Taking action.
- Recognizing accomplishments and persisting.

I measure my success by looking at my life and determining if I am acting in alignment with my values. While I value eating food I consider healthy and maintaining a normal weight I value feeding myself when I am hungry and treating myself with love more. I find emotional and spiritual health are more important to me than physical health. Although, in my experience, one does seem to follow the other. Solutions are dynamic. When I feel like I've made no progress, I look back at a longer period of time. The ten year view of my eating habits is truly amazing and makes me wonder, "How did I get here?" It definitely seems like a miracle.