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Wholeistic Education^{TM}

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Running Head: WHOLEISTIC EDUCATION

Wholeistic Education™

by

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DISSERTATION

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Dedication

"Being deeply loved by someone gives you strength,

while loving someone deeply gives you courage."

– Lao Tzu

For Jessica, for giving me both strength and courage.

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Abstract

This dissertation introduces Wholeistic Education™ (WED™), an innovative, values-based, interdisciplinary pro-social theory that is the culmination of centuries of scientific and philosophical learning and exploration about optimal mental health and human development. WED is based on basic human nature and universal human rights, and so it applies to all variations of human society- racial, ethnic, religious, or otherwise. WED is a foundation theory to which any targeted implementation strategy can be applied. It is both a proactive strategy for seeking and maintaining health before a crisis arises in families, schools, and organizations as well as a treatment approach presented during times of distress, in therapy, schools, mental health agencies and treatment centers. To keep the scope manageable, this dissertation focuses exclusively on the application of WED with children, adolescents and families. In addition to introducing WED, this paper explains how WED is a logical and appropriate option for those in academia and policy that vocally seek alternative intervention approaches to manage the increasing need for effective and efficient mental health treatment. This paper begins with an explanation of three current theories in use with children, adolescents, and families, and explains how they inform WED and where they diverge. Chapter 2 explains the historical roots of the theory and Chapter 3 illustrates the approach in action through clear description and vignettes. Chapter 4 focuses on examples of WED currently in use, and alludes to future possible applications for WED theory. Chapter 5 concludes the project with an explanation of current evaluation and opportunities for future evaluation projects.

Keywords: adolescents, behavior, children, family, interventions, parenting, psychology

Wholeistic Education™

Wholeistic Education (WED) is the logical psychological approach for our time. In naming his theory, Walsh (2008) chose the word "Wholeistic" intentionally for two reasons: first as a reflection of his approach's inclusion of the "whole" of reality, and also to identify that WED is a discrete proprietary approach, not to be misunderstood as part of the larger holistic movement. This paper introduces WED, an innovative psychological intervention approach that is the culmination of centuries of scientific and philosophical learning and exploration about optimal human development. WED is implemented both as a proactive strategy for seeking and maintaining health before a crisis arises and as a treatment approach to guide those seeking guidance during times of distress. WED, as a theoretical construct, is appropriate for all humans across the lifespan and it is a suitable approach for individuals and small groups, such as families and offices, and large groups, including corporations and communities. To keep the scope of this project manageable, the concepts of WED are explained as they apply to children, adolescents, and families, a slice of the demographic for which WED is appropriate. Chapter 1 explains the status quo in mental health treatment of children and adolescents, focusing on the theoretical approaches presently in use with children, adolescents, and families and the directives from recent research projects that are informing the next wave of psychological treatment. The chapter continues with a discussion of the social and academic climate in the social sciences and an explanation of the pragmatic shift in progress toward interdisciplinary approaches that provide care for the whole person, rather than just one or two elements of a person's life. Chapter 1 concludes with sections that define the rationale and the objectives of this project.

Chapter 1: The Status Quo

The need for effective mental health treatments for children and adolescents seems to be steadily increasing. Current epidemiology reports indicate that one in five adolescents is diagnosed with a psychiatric disorder (Costello, Copeland, & Angold, 2011), and as of 1999, 21% of all children between the ages of 9-17 were at least minimally impaired by a mental health disorder (US Department of Health and Human Services, 1999). In 2000, the Surgeon General convened a conference on children's mental health to draw attention to the paucity of effective mental health treatment options and to increase awareness that mental health contributes to overall healthy child development. Since then, knowledge of human psychology has increased as a result of advances in neuroscience, primate research and randomized intervention trials. As Kazdin and Blase (2011) recently noted, "The remarkable progress has left in the background a key issue that is a major impetus for developing psychological interventions—namely, the goal of decreasing rates of mental illness and improving psychosocial functioning on a large scale (i.e., in society)" (p. 21). This is the problem this dissertation sought to address. The professionals involved in the Surgeon General's conference created an "Action Agenda" comprised of eight specific goals, the second of which is to "continue to develop, disseminate, and implement scientifically-proven prevention and treatment services in the field of children's mental health," (US Public Health Service, 2000). In keeping with this goal, this paper introduces Wholeistic Education, a model that has been developed, locally disseminated, and implemented and is now ready for evaluation and assessment by the broader psychological community. In the next section, I explain the historical and recent data that illustrates the problem at the center of this dissertation, and I identify WED's context by describing a few notable and widely-practiced interventions from different theoretical perspectives—including

behavioral, family systems, and cognitive-behavioral therapy—that are currently used to treat children and adolescents.

History of the Problem

Psychiatric research suggests that a variety of traumatic incidents that can happen during childhood increase the likelihood that children will experience a symptom of poor mental health, including anxiety, depression, and explosive anger (Goldstein, Buka, Seidman, & Tsuang, 2010). Many professionals in the field agree that this is a problem. In 2008, the National Health Interview Survey reported, "approximately 8.3 million children (14.5%) aged 4-17 years had parents who had ever talked with a health care provider or school staff about their child's emotional or behavioral difficulties" (Simpson, Cohen, Pastor, & Reuben, 2008, p. 1). The 2010 National Institute of Mental Health survey of American adolescents between ages 13 and 18 reported that 22.2% of teens have, or are currently experiencing, severe impairment and/or distress due to a mental disorder (Merikangas et al., 2010). Their findings indicated strong correlations between parental education and/or divorce and children who report experiencing impairment due to a mental disorder. They encouraged further study to investigate the complex relationship between child and adolescent mental disorders and socioeconomic, biologic, and genetic factors.

Once a child or adolescent has been identified as having a mental health and/or behavioral disorder, the child and his or her family are ushered into the often complicated mental health system which offers a variety of mental health treatment options, although access to them often depends on location and available information (US Public Health Service, 2000). The next section describes some of the most popular recommended treatments for a child, adolescent, or

family. Each of the following interventions is widely considered to be proven successful and is

well regarded in the mental health community at large.

      Behavioral therapy. Toward the end of the 19th century, scientists moved toward the

acceptance of "empiricism, a philosophical perspective that stresses the acquisition of knowledge

by means of objective observation and scientific experimentation" (Craighead, Craighead, &

Lliardi, 1995, p. 64). This movement provided the conceptual framework for creating a science

of behavior and was the epistemology for the new field of Behaviorism. Developed in the

United States by John B. Watson, Behaviorism changed the quest for psychological

understanding and empiricism by encouraging the development of objective and observable

experiments based on a simple linear model of stimuli and response (Craighead et al., 1995).

Classical conditioning, influenced by Ivan Pavlov's experiment with dogs in the 1920s, involved

discovery and control of involuntary reflexes and emotional states in response to positive and

aversive stimuli and began the movement to explain and control human behavior through

associations with positive and negative influences. In the 1950s, B.F. Skinner developed an

extension of the stimulus-response model, Operant Conditioning, a learning style in which the

individual deliberately changes his or her behavior as a reaction to positive or negative

consequences associated with different behaviors (Craighead et al., 1995). Behaviorism has

grown and changed over time, and a number of therapeutic models, including Wholeistic

Education, have incorporated certain tenets of Behaviorism into their interventions. Some

principles of Behaviorism, specifically the use of rewards and consequences to motivate

behavior change, constitute aspects of "conventional" parenting wisdom. Parents of children

who suffer from emotional and/or behavioral dysregulation at home or at school will most likely

receive a recommendation for a behavioral intervention (Kostewicz, 2010). Current behavioral

interventions create different strategies designed to observe, measure, and change behavior using structured systems of rewards or reinforcements and punishments or aversions. The two most common behavioral interventions consistently taught to parents or implemented by educators involve utilizing "timeouts" (Frimand & Finney, 2003) and establishing a token economy (Kazdin & Bootzin, 1972). Both are not in References section.

Timeouts were originally conceptualized as a temporary removal of a child from rewarding environments or situations until the undesired behavior ceased and a more appropriate behavior was adopted (Wolf, Risley, & Mees, 1964). Although initially intended as a way to give a child a "break" from over-stimulating environments, timeouts became widely used as a punishment strategy when parents and educators added a quantitative requirement to the period of isolation. An online example from a therapist affiliating himself with The Center for Behavior Therapy states, "The length of time out [sic] is one minute for each year of developmental age. For example, timeout would last 6 minutes for a 6-year old child," (Farb, 2000). In a later section, I explain more about the philosophical and pragmatic similarities and differences between timeouts and the use of restriction in Wholeistic Education.

The second common type of behavioral intervention involves implementing a token economy (Kazdin, 1982), an approach based on the theory of operant conditioning, which is commonly described as a system of rewards and punishments designed to positively reinforce desired behaviors while extinguishing or discontinuing undesired behaviors. Christopherson & Mortweet (2005) describe a token economy as "an organized exchange system in which conditioned reinforcers are earned and lost contingent on the individual engaging in or refraining from specific and clearly defined behaviors" (p. 30). At home or in school, a parent or educator using a token economy will positively reward a child or adolescent who is demonstrating

appropriate behavior with a chip, token, check mark, sticker, or other quantifiable object. Some

uses of the token economy system only provide the opportunity to earn positive reinforcers

(Kazdin & Bootzin, 1972), while others additionally recommend taking chips (or other

quantifiable objects) away when the child or adolescent does not behave in a manner consistent

with the conditioning principles being taught. The same, ubiquitous theory underlies both types

of behavioral interventions: that the child will seek out the reward and employ positive behavior

choices while attempting to avoid the negative consequences.

Family therapy. Family therapy as a treatment modality originated in the late nineteenth

century in the minds of psychological providers who realized that an individual's mental health

could be improved by appropriately addressing the physical and psychological needs of the

whole family, which would then end a child's symptoms (Clarkin & Carpenter, 1995). Family

therapy, like individual therapy, is a diverse field that covers a broad spectrum of treatment

philosophies. A notable difference in some family therapy models is the inclusion of community

and environment, in addition to the family, in creating the therapeutic understanding of the

client. These theories often cite Bronfenbrenner's Bioecological Model (Bronfenbrenner &

Morris, 2006) and use interventions designed to take all aspects of the client's life into account.

A parent seeking support for a child with mental health issues may receive a referral to work

with a family therapist and to participate in Structural Family Therapy, Brief Strategic Family

Therapy, Collaborative Therapy, or Multi-systemic Therapy.

Practitioners who use Structural Family Therapy, a theory based on the work of Salvador

Minuchin, encourage families to view a child's issues in the context of the family, and they

establish the treatment goal of restructuring the family system, rather than focusing on a specific

individual change (Colapinto, 1982). Colapinto describes therapeutic change in Structural

Family Therapy as "the process of helping the family to outgrow its stereotyped patterns of which the presenting problem is a part" (p. 9). This type of family therapy requires a therapist who can join the family, understand its imbalances, and create opportunities for family members to interact with each other in a different way.

Strategic Therapy bases its approach on the idea that a planned intervention by the therapist provides an effective strategy to help a family overcome a problem (Clarkin & Carpenter, 1995). Strategic Therapy focuses on the implicit rules that family members use to manage and control one another in an effort to meet family needs (Clarkin & Carpenter, 1995). A family in crisis might also be referred to a short-term family therapy model called Brief Strategic Family Therapy (BSFT), which combines principles from both Structural Therapy and Strategic Therapy (Szapocznik & Williams, 2000). The national registry of evidence-based programs and practices, a database maintained by the Substance Abuse and Mental Health Services Administration (SAMHSA), a branch of the U.S. Department of Health and Human Services, states in its summary that BSFT is a 12–16 week intervention model intended to avert, decrease, and address antisocial behavior and interactions in individuals demonstrating antisocial behavior, to improve prosocial functioning by increasing academic involvement, and to improve family dynamics by encouraging appropriate parental leadership and involvement. (Retrieved March 16, 2012 from http://nrepp.samhsa.gov/View Intervention.aspx?id=151).

Mental health professionals who do not identify themselves as structural or strategic therapists might begin working with a family in crisis using a non-authoritarian style of therapy such as Collaborative Therapy (Madsen, 1999) or Solution-Focused Therapy (Tohn & Oshlag, 1995). Both of these strategies view the family as the authority on its needs and encourage full participation of family members in the treatment process, including the creation of treatment

goals and the expectation of change in the treatment process. In contrast to Structural and

Strategic Therapy, these family therapy models are designed to empower the family to reconsider

its old expectations, re-imagine the future in a more positive and healthy way, and develop a plan

to make a healthy future a reality (Madsen, 1999).

Parents of children with long arrest histories and antisocial behavior may be treated using

Multisystemic Therapy (MST; Henggeler, Schoenwald, & Pickrel, 1995), a program designed to

treat the child, the family, the environment, and the community surrounding the family in hopes

of reducing long term antisocial behavior. MST uses a specialized approach for each client that

is designed to address the specific problems the client faces in each functional domain to reduce

the risk factors that will likely lead to recidivism (Henggeler et al., 1995). This process of

addressing the family and the other environmental issues in client interventions significantly

contributes to the effectiveness of MST.

Cognitive Behavioral Therapy. Cognitive Behavioral Therapy (CBT), an offshoot of

Behaviorism, encourages individuals to connect their thoughts and feelings to their behaviors.

The cognitive-behavioral movement began gaining strength in the 1960s when therapists started

questioning the lack of reflection on interpersonal relationships in the behavior change process.

Practitioners noticed that—in addition to relationships—clients' perceptions of their behavior

and its consequences seemed to play an important role in the clients' desire to make therapeutic

changes in their lives (Meichenbaum, 1995). Cognitive Behavioral Therapy offers a number of

interventions designed to ameliorate specific symptoms, which a pediatrician or mental health

professional may recommend to a parent seeking help for a child or family. These include Anger

Control Training (Lochman, Barry, & Pardini, 2003), Problem-Solving Skills Training (Kazdin,

2003), or Collaborative Problem Solving (Greene & Ablon, 2006), to name a few. A parent

might be encouraged to participate in a parent-training program designed to have the parent, rather than the therapist, act as the change agent in the family. Examples of these types of programs include self-help books such as "Helping the Non-Compliant Child," (McMahon & Forehand, 2003), and "Parenting Your Out-of Control Teen," (Sells, 2001). Parents concerned about potential emotional or behavioral issues in preschool-aged children may be referred to Parent Child Interactive Therapy (PCIT), an office-based treatment option that supportively teaches the parent specific skills designed for positive, non-confrontational parenting (Brinkmeyer & Eyberg, 2003).

When Simpson et al. summarized the 2008 National Center for Health Statistics data and highlighted the need for improved and expanded mental health care for children and adolescents, they indicated that the therapeutic status quo did not adequately meet the needs of children and families. They indicated that children with emotional and behavioral difficulties required access to a greater variety of treatment options, specifically psychotropic interventions and non-medication based treatments (Simpson et al., 2008). Wholeistic Education is one such model that can provide a response to these requests for innovative mental health treatment. This inclusive model combines theory and practice from the three empirically supported intervention domains discussed previously—behaviorism, family therapy, and cognitive behavior therapy—to help children, adolescents, and families work toward mental health.

The Social and Academic Climate

The research overwhelmingly shows that children and adolescents need help. The psychological community, divided as it is into theoretical camps (e.g., psychodynamic, behavioral, structural, cognitive, and humanistic, and many others), has created a number of theoretically isolated and empirically supported intervention models that have proven to provide

at least short-term mental health symptom reduction. Some psychologists and social scientists,

frustrated with the existing paradigms for psychological understanding, are looking for more

comprehensive and encompassing theories to help explain the complexity of human experiences.

In his attempt to define an overarching psychological theory, Henriques (2004) commented on

the state of the field when he explained that it has struggled to coherently account for the

complexities associated with being human and in the process has created a philosophical

quagmire of competing one-dimensional theories. Henrique's *Tree of Knowledge System* (ToK)

is an attempt to conceptualize human development and experience in one connected and coherent

philosophy. Wholeistic Education, like the Tree of Knowledge System, offers a

multi-dimensional approach. In addition, it provides a value-informed, culturally minded,

interdisciplinary approach to full human development, drawing on theory and methodology from

the ancient Greeks up through current cutting-edge developments in brain science, and it has

roots in the disciplines of education, psychology, philosophy, and evolutionary biology.

Wholeistic Education's interdisciplinary approach differs most notably from that of ToK

and other psychological theories in that the theory closely informs the practice. Walsh (1993,

2008, 2010, 2011) has invested more than 20 years researching and developing this theory of

optimum human wellness, and created an educational approach based on his research, designed

to operationalize the developmental goals and prosocial habits that he believes encourage

optimal physical and psychological health. Wholeistic Education is in use in New Hampshire by

WED Educators in multiple settings, including a residential treatment center and an intensive

outpatient program with two physical locations. Additionally, outpatient therapy providers

choose to teach WED, and parents have embraced WED proactively as their chosen method to

raise healthy children. This paper continues with a discussion about the current trends in

psychological and neurological research, explaining how WED fits in with this cutting-edge research and is a harbinger of the next generation of psychological and educational interventions.

Over the course of human history, historians recognize that multiple inventors, often with no knowledge of others, made many scientific discoveries simultaneously (Ogburn & Thomas, 1922). From pulmonary circulation and calculus to telephones, flying machines, and endorphins, many life- and society-changing innovations were discovered within a relatively short time period and informed the next wave of scientific, academic, and social investigations. Gladwell (2008) explained, "[all] scientific discoveries must, in some sense, be inevitable. They must be in the air, products of the intellectual climate of a specific time and place" (p. 56). If you consider new publications, a current issue "in the air"—to use Gladwell's term—is the understanding and application of the balance between genetics and free will. The New York Times Bestsellers list teems with treatises that explain in detail cutting-edge research illuminating the inner workings of the human brain and behavior. From the importance of habits (Duhigg, 2012) and cognition processing (Heath & Heath, 2010; Kahneman, 2011; Lehrer, 2009; Mlodinow, 2012) to understanding motivation (Pink, 2011) and willpower (Baumeister & Tierney, 2011), numerous individuals and institutions have compiled compelling data that increases our understanding of neurological processes and the complexities involved in human behavior and human change dynamics.

These recent publications explain important concepts; for example, Duhigg (personal communication, February 16, 2012) in his discussion of individual and group habit development states, "habits aren't destiny—they can be ignored, changed or replaced. But it's also true that once the loop is established and a habit emerges, your brain stops fully participating in decision making. So unless you deliberately fight a habit—unless you find new cues and rewards—the

old pattern will unfold automatically" (paragraph 20). Duhigg's explanation of habits is an example of one of many current authors promoting research and theory that is consistent with Wholeistic Education's approach. In addition to habits, cognition, motivation, and willpower, other themes are also "up in the air" these days, as evidenced by their repeated publication and discussion; these include community (Miller & Blanchard, 2011), dignity (Hicks & Tutu, 2011), love (Brooks, 2011; Levine & Heller, 2010), and morality (Boehm, 2012; Tancredi, 2010; Zak, 2012). These topics also resonate within Wholeistic Education theory, and although they succeed the development of WED, they lend credence to the concepts and philosophies that constitute the bulk of this dissertation.

I, along with others (Henriques, 2004), assert that the disciplines of psychology, education, and biology have been unnecessarily separated and compartmentalized, to the detriment of all. The understandable desire to simplify the therapeutic process has created a culture of atomistic intervention strategies designed to treat discrete psychological problems one at a time. Human physical and psychological development and human relationships are inherently complex and difficult to disentangle. Engel's (1977) creation and promotion of the Biopsychosocial Model reflects the difficulty researchers had with conceptual reductionism over 30 years ago; since then, understanding human development has only become more complicated. The need for cross-domain cooperation is so important that recently the National Institute of Health created the Interdisciplinary Research Consortia to fund projects with this initiative (https://commonfund.nih.gov/interdisciplinary/overview.aspx). As interdisciplinary scholarship spanning diverse fields becomes the standard rather than the exception, new theories increasingly incorporate both nature and nurture into their conceptual understandings (Barash, 2005; Genovese, 2007). Wholeistic Education exemplifies this recent trend.

The conceptual understanding of the complex interrelation of biology, psychology, and education has not yet trickled down into mainstream intervention strategies currently in use in the field of Psychology. Many current interventions, designed to help ameliorate specific mental health symptoms, have demonstrated effective short-term symptom reduction. Strategies frequently recommended to parents and educators by professionals are increasingly seen as short-term strategies that may increase temporary compliance but have a neutral to negative effect on overall improvement in prosocial behavior and long-term well-being (Berg-Nielsen, Vikan, & Dahl, 2002; Patterson, Debaryshe, & Ramsey, 1990; Pettit, Laird, Dodge, Bates, & Criss, 2001). WED is a useful supplement to short-term, symptom-focused interventions that address specific therapeutic concerns such as trauma, substance use, eating disorders, and school-based issues. For example, WED provides the foundation and framework for health in all aspects of life, while a targeted intervention teaches a specific skill, such as self-soothing, that encourages symptom reduction and ongoing healthy practice.

The next two sections reiterate the rationale for this dissertation and describe the project outline chapter by chapter.

Rationale

The goals of this paper are to introduce Wholeistic Education to the psychological community and to include WED in the growing body of interdisciplinary literature, presenting a consistent message to inform the next generation of psychological theory and practice. This paper explicates WED's development, implementation, and current and future applications. Many current therapeutic interventions use a reactive approach, describing and addressing mental illness and imbalance and focusing less on prevention (Kazdin & Blase, 2011). Wholeistic Education provides an alternative conceptualization of psychological treatment using

a proactive, prosocial, problem-solving approach to teach and model a comprehensive

framework for health. WED is a timely therapeutic approach, given the current climate in the

fields of psychology and public policy; WED's philosophy of creating and maintaining mental

health seems consistent with the future directions of the field and is offered here for

consideration by psychologists and mental health professionals.

Objectives

This introduction of Wholeistic Education as an alternative intervention approach for

working with children and adolescents includes clients who are experiencing behavioral

difficulties and those with a diagnosed mental disorder. WED is currently in use at a residential

treatment facility (RTC), an intensive outpatient program (IOP), and in outpatient settings,

including individual, family and group therapy. This paper aims to make the case that it is a

viable treatment approach that should be further assessed and adopted by programs, agencies,

and practitioners looking to update their therapeutic intervention model.

Chapter 2, the literature review, begins with an explanation of the ethical foundation of

WED by examining its four guiding principles: *Following, Non Violence, Dynamic Balance*, and

Faith. It then traces WED's origins back to their cultural, ideological influences and theoretical

underpinnings. This section defines and discusses the concepts of *True Holism*, *Human Nature*,

Parenting Ideal, *Ideal Education*, and *Developmental Goals*. As part of the theoretical

discussion, this section explains the philosophy underlying WED's methodology, focusing on its

concepts of Organic Wisdom, Educational Culture, and the theory behind the Behavioral

Guidelines. This section concludes with an explanation of the sources that influenced the

Educator Goal.

Chapter 3 translates WED's ideological and methodological philosophy into its daily practice, including specific examples of how the theory is operationalized. This section includes an explanation of the educator objectives, challenges, and attitude, as well as the specific technique of WED, including the pragmatic use of the Behavioral Guidelines in promoting health and contentment and the use of the four "Rs" to facilitate conflict resolution.

Chapter 4 begins with a discussion of the current uses of WED, focusing on its application at a residential treatment center, an intensive outpatient program, and in private practice with families. Each section explains any application issues and barriers to implementation, and is drawn from first-person interviews of individuals who currently teach WED in each setting. This chapter also touches on potential future applications of WED for both children and adults.

The final chapter, Chapter 5, is focused on the current and future evaluation of WED. The first half of the chapter describes the evaluation of WED in existing programs, focusing on the successes and shortfalls of these evaluations. The second half of the chapter describes the need for additional evaluation and lays out a basic plan for implementing an appropriate evaluation strategy to begin to develop a legitimate "evidence base" for WED.

Chapter 2: Historical Context

This review of relevant literature begins by exploring the philosophical groundwork that forms the foundation of WED theory. The links between the essential components of Wholeistic Education theory and sympathetic concepts of other educational theories are described. Some of these links are anchored in ancient teachings, including those popularly attributed to Lao Tse, Socrates, and various Native American cultures. Although much time has passed since their initial expression, these teachings remain as relevant and important to Wholeistic Education as they have been to others since their inception. Walsh points out that, despite the benefits of various psychotherapeutic methodologies, the very term "psychotherapy" was coined in the 1880s, and that humans have a much more reliable, time-tested option: education (J. Walsh personal communication, March 3, 2011). In a similar spirit, Kurt Hahn (1960), founder of Outward Bound, famously shared a story about his friend and mentor who, when asked about the need for originality in presenting his educational philosophy, said

> No, it is in education as in medicine. You must harvest the wisdom of a thousand years.
>
> If ever you come to a surgeon and he wants to take out your appendix in the most original manner possible, I would strongly advise you to go to another surgeon. (p. 3)

Although WED theory does "harvest the wisdom of a thousand years," it has also created a new and succinct interdisciplinary and holistic intervention method that operationalizes that wisdom in order to understand and realize the complex and dynamic nature of optimal human wellness in the modern world. Having provided this background, I now discuss the theory behind WED's methods, focusing on the theory behind the interventions. This review attempts to juxtapose the current beliefs in adolescent treatment with the intrinsic holism inherent in WED to make the case for its relevance in the discussion about raising and teaching healthy children. The next

section explores the origin of this philosophical stance by exploring the four tenets that make up the ethical foundation of Wholeistic Education.

Ethical Foundation of WED

Walsh (2008) reflects that, at the heart of any model designed to intervene and help others, lies the values of the author(s). While some models may not state these values explicitly, the underlying values make themselves known in the prescriptive rules of the intervention: the elements to focus on or to ignore, the measurable indications of health, and the therapeutic goals. Wholeistic Education prides itself on unifying "…group members around a set of behavioral guidelines as a foundation for a culture of connection, mutual support, and individual creativity" (p. 7). WED believes its guidelines are effective by "clearly defining, explicating, and demanding practice of minimally constraining behavioral standards based on basic human rights and expectations that reflect shared group values, and promote desired developmental goals (p. 20). The core values that define the ethical foundation of WED are (a) following, (b) non-violence, (c) dynamic balance, and (d) faith.

Following. Wholeistic Education is based on the fundamental belief that "the healthiest path is clearly marked for those who will follow" (Walsh, 2008, p. 8). Following is analogous to humility. Humble following helps remove the preconceived beliefs and assumptions that color every aspect of our daily interactions with others. Walsh states, "When following, one confronts one's often unexamined, but incalculably influential assumptions regarding progress, and the relationship of individual and group" (p. 9). WED does not promote or proselytize about any specific religion or religious practice. It does, however, encourage the thoughtful pursuit of personal fulfillment, nearly a universal impetus in all societies, without prejudice toward the following of Nature, God, or Spirit.

This fundamental belief in following is promoted and encouraged in both Eastern and Western philosophical and religious traditions. The seminal text of Taoism, the Eastern philosophical tradition, states that when following the Tao, "nothing is left undone" (p. 48). The Christian Bible asserts a similar sentiment in two discrete books: "Seek and Ye shall find" (Matthew 7:7, Luke 11:9). The underlying concepts of following, encouraged by WED, are humility and humble service.

Non-violence. Non-violence is a cornerstone of Wholeistic Education for several reasons, most importantly because in maintaining consistency with the principle of following, "WED avoids violating the natural flow of Nature (God, Spirit, etc.) in all its manifestations" (Walsh, 2008, p. 9). An example of a violation would be to divert a susceptible client or their loved one from their attempted path onto a foreign path at the insistence of the "helper." Pacifism is sometimes considered a synonym of non-violence, but this is inaccurate because Pacifism is defined as "the opposition to war or violence as a means of settling disputes…[and] 2**:** an attitude or policy of nonresistance" (http://www.merriam-webster.com/dictionary/ pacifism). Instead of complete opposition to violence, WED's concept of non-violence "promotes the action that provides the least amount of aggregate violence" (p. 9). This is an important distinction, because every situation has to be evaluated independently to determine the least harmful approach to all involved. With this in mind, no specific behavior is automatically discarded. If an individual has no regard for the life and health of others and is engaging in a heinous act, then it would be consistent with this principle to end the person's life, as the end of one life may protect countless others from experiencing harm. An example of this principle might be using lethal force to stop a school-shooting spree in progress.

A less dramatic and more common example is WED's concept of restriction (explained at length in Chapter 3) as a way to protect family and community members from the harm done by a member who does not exhibit the minimal behavioral standards expected by the group. Restriction is designed to respect the autonomy of the individual. Individuals may decide not to practice the behavioral norms of the group, but in doing so they must face the full weight and consequences of their decisions, which may include exclusion. Because an excluded member always retains the right to rejoin the group simply by practicing its behavioral norms the group does not punish the individual, the group is protected, and the least aggregate harm occurs to all.

Although it may seem counterintuitive, altruism is not always consistent with the principle of non-violence. Altruism is defined as**:** "1. unselfish regard for or devotion to the welfare of others, and 2**:** behavior by an animal that is not beneficial to or may be harmful to itself but that benefits others of its species" (http://www.merriam-webster.com/dictionary/altruism). This can conflict with the principle of non-violence, depending on the overall harm of the action to both the individual and the group; for example, if an individual acts in a way that incurs significant self-harm to ameliorate a minor harm for another. However, if an individual's altruistic act minimizes harm to all involved, this upholds the principle. Walsh (2008) explains,

> This definition (of non-violence) allows for the mystery of the unknown future and even the most paradoxically, apparently violent responses to specific circumstances. For example, it may be, under certain circumstances, perfectly consistent with the principle of Non-Violence to purposely injure (e.g., to prevent abuse of the innocent). But any harm, any offense, however relatively minor, when a less harmful alternative is available, is always inconsistent with the principle of Non-Violence. (p. 9)

Dynamic Balance. Dynamic Balance can best be understood as the combination of the

two concepts previously discussed: following and non-violence. Walsh (2008) describes

dynamic balance as, "the result of non-violent following" (p. 9). He further states that the

functional definition of dynamic balance is symbolized by the Chinese Taijitu (Yin Yang)

symbol. As individuals attempt to navigate the internal stimuli created from their physical and

non-physical wants, they will exhibit certain behaviors that encourage or prevent them from

actualizing their desires. Wholeistic Education theory is based on the belief that respectful,

dignified, responsible, compassionate, and perseverant behavior characterizes the dynamic

balancing of all physical and non-physical wants. WED is predicated on the belief that this

balance is possible under any circumstance, and "when sustained, this balanced behavior

produces the greatest sum of physical and non-physical health, and contentment, the condition

known in WED as Optimal Wellness" (Walsh, 2003, n.p.).

Faith. WED's final core value, faith, is presented as the primary essential element of

life. Faith is defined as: "1: a firm belief in something for which there is no proof, 2**:** complete

trust" (http://www.merriam-webster.com/dictionary/faith). Walsh (2008) explains faith's

importance in WED by stating,

> All rational thought leads to a point where one must either believe, or disbelieve in the
>
> absence of further evidences. An example of this is that despite never-ending debate on
>
> the sufficiency of available evidence, WED accepts and is influenced by the concept of
>
> Natural Selection. (p. 10)

Consistent with WED's other three tenets, embracing faith is not encouraged as a means of

control, nor is faith in any specific dogma promoted. Participants are encouraged to take

"accurate, rational measure" of the role of faith in their lives which allows them to benefit from

the positive aspects in embracing mystery while "avoiding the liability of rigidly held, unconscious conviction otherwise known as blind faith or denial" (p. 10). In this way, WED encourages individuals to maintain a natural curiosity and explore their deeply held beliefs without the common defensive posture that occurs when people perceive that their beliefs are under attack by others.

Following, non-violence, dynamic balance, and faith all underlie WED's conceptual framework. These components are interwoven in all aspects of Wholeistic Education theory, which is described in the next sections, beginning with its most essential element, *true holism*.

Theoretical Framework

All therapeutic models and approaches are built on a foundation based on the author's inherent belief system. This section focuses on the philosophical underpinnings of Wholeistic Education and describe the theoretical concepts that Walsh synthesized to support WED interventions. This section begins by describing the concepts of holism and atomism and explaining Walsh's answer to the fundamental choice between them. Next, this section focuses on the research that supports Walsh's views of human nature and human needs, two key ideas that heavily influence Wholeistic Education in practice. WED's parenting ideal and educational ideal are then discussed, as these concepts are the touchstones that WED educators use to evaluate their success with the approach. This section concludes with a description of WED's developmental goals, as they transmit the values of health that practicing WED promotes.

True holism. The quest to understand the universe and all matter within it (Ontology, Epistemology, and Cosmology—being, knowledge, and order) has created a theoretical conflict that in the West dates back to the 5th century B.C. Democritus is credited as the first to conceptualize the universe as atomistic; that when any matter is reduced, "stable atoms are the

basis of the phenomena" (Whyte, 1961, p. 5). This idea is often contrasted in western

contemporary scholarship with holism, which can be traced back to Aristotle's *Metaphysics*:

> To return to the difficulty, which has been stated with respect both to definitions and to
>
> numbers, what is the cause of their unity? In the case of all things which have several
>
> parts and in which the totality is not, as it were, a mere heap, but the whole is something
>
> beside the parts, there is a cause; for even in bodies contact is the cause of unity in some
>
> cases, and in others viscosity or some other such quality. (Aristotle)

The concept of the whole being greater than the sum of its parts has been famously adapted from

this early text and stands in opposition to the aforementioned theory of atomism. Atomism and

holism have been understood as dichotomous ontologies in Western philosophy. Instead of

choosing a side in the conceptual war between atomism and holism, Walsh's concept of true

holism accepts both theories as possible and embraces the paradox that seems inherent in the

mysterious origins of the universe. His proposition is that to be truly holistic, one should not

categorically reject anything. Walsh's true holism accepts all possibilities, including atomism,

and embraces this fundamental paradox.

WED is not an expression of any particular philosophy or collection of philosophies, but

rather it aims to represent Walsh's concept of true holism. Walsh explains that his early

investigation of holism focused on both Greek and Chinese holisms, and he decided that holism

could not be a total system of human beings because of its opposition to atomism. Overriding

the constructed paradox of holism and atomism, Walsh determined that it is through absorbing

the antagonism in the dialectic between holism and atomism that one can create a complete

ontology. To distinguish it from these other concepts of holism, Walsh coined the term

Wholeism, which he defines as "a super-dialectical and super-hierarchical philosophy and

methodology" (J. Walsh, personal communication, October 11, 2010). For example, in

traditional dialectics, two opposing beliefs are rationally contrasted to discover a shared truth. In

WED, all opposing beliefs are welcomed and shared; the "absolute truth" is not the goal, unless

by "absolute truth" we mean when seemingly mutually exclusive truths are held in equal regard.

WED endorses the exploration and the embracing of mystery.

WED conceptualizes hierarchy as it does paradox, as an often illusory and dysfunctional

construct. Any hierarchy gives some members of a community power and control over other

members of the community. To avoid those dynamics, healthy communities flatten their

hierarchical structure and embrace all members equally; "super-hierarchical" in this case reflects

the concept of embracing equality and avoiding the desire to label community members as

"above" and "below" other members, while accepting that some expressions of hierarchy are

natural and even beneficial, such as the relative esteem and pro-social influence of an especially

mature, self-actualized member.

The ancient Taoist teachings of The Tao Te Ching offer a close approximation of WED's

theoretical stance. Perhaps written in the 6th century B.C. by Lao Tzu, the first paragraph reads,

"The ways that can be walked are not the eternal Way" (Mair, 1990, p. 59). This sentiment is

largely reflected in WED; however, the use of the word "not" conflicts with WED's true holism,

which asserts that no element of an interaction can be summarily rejected. Walsh is not a

linguist and is not able to translate the original Chinese documents. As with all ancient texts, our

modern translations may not accurately represent the original document. However, Walsh

reinterprets that seminal Taoist line as, "The Tao that can be articulated is not *necessarily* the

eternal Tao" (J. Walsh, personal communication, October 11, 2010) and wonders if that better

reflects the author's intended meaning. Again, Walsh's purpose in WED is to avoid the

liabilities of dialectics and hierarchy because both inherently promote adversarial dynamics among community members. Adversarial dynamics, by their nature, undermine trust in relationships; in WED, trust is the primary component of education.

Human nature. The question of whether human nature is inherently selfish or altruistic has been the topic of scholarly discussion at least as early as Hellenistic Greece. As with Pinker (2002), it is Walsh's position that, contrary to centuries of debate, humans are neither engaged in a "war of all against all," to paraphrase Hobbes (1660), nor are we born noble beings, as claimed by John Dryden (1690), Lord Shaftesbury (1897), and popularly ascribed to Rousseau. Instead, Walsh asserts that humans are both the product and producers of societies that span both perspectives and who benefit most by the dynamic balancing of individuality and social adaptation. This philosophical tension was evident in the debate between Thomas Henry Huxley and John Dewey in the 1890s over the essence of human ethics, in which Huxley argued that ethics and morality are counter to human nature and must be worked at to mediate our amoral tendencies. de Waal (1996) writes, "Huxley had compared the relation between ethics and human nature to that between a gardener and garden, where the gardener struggles continuously to keep things in order" (p. 2). Dewey countered, "gardeners work as much *with* nature as against it" and added, "The successful gardener…creates conditions and introduces plant species that may not be normal for the particular plot of land, but fall within the wont and use of nature as a whole" (de Waal, 1996, p. 2).

Inquiries into the essence of human nature continue in biological studies. Two pioneers in this field, Richard Dawkins (1999) and Franz de Waal (1996, 2009), approach the question of human nature from slightly different perspectives. Dawkins addresses the genetic need for replication and, over time, the selection of genetic predictors that will most likely ensure survival

of the gene in the next generation. de Waal, a primatologist, uses his research with apes and chimpanzees to investigate which social capacities we share with other primates and which traits are uniquely human. Although Dawkins uses the word "selfish" throughout his book, he does not attribute sentient motivation to the genes and does not generalize the gene's attempt to reproduce as an indictment of human nature. Dawkins describes this biological process as follows:

> The fundamental unit, the prime mover of all life, is the replicator…Replicators come into existence, in the first place, by chance…Gradually, more and more elaborate ways of being a good replicator are discovered. Replicators survive, not only by virtue of their own intrinsic properties, but by virtue of their consequences on the world. These consequences can be quite indirect. All that is necessary is that eventually the consequences, however tortuous and indirect, feedback and affect the success of the replicator at getting itself copied. (pp. 264–265)

Dawkins' replicators are dynamic and context-dependent, meaning that the environment determines which replicators are successful and which are ineffective and thus fade away.

Dawkins' (1999) replicators are consistent with a theory in Evolutionary Biology known as the Environment of Evolutionary Adaptation (EEA), which was adapted from the work of John Bowlby (1969), in which he promoted the idea that "when a structure of a system is considered, the environment within which it is to operate must be considered" (p. 50). He went on to explain that the traits of a population in a biological system gradually evolve through reproductive success to exist in a certain environment, which he termed its "environment of *evolutionary* adaptedness" *[sic]* (p. 50). This is understood to refer to the premise that, over time, a population of organisms will show a change in mean values for particular heritable traits

that exploit advantages or solve problems inherent in its environment and help the population as a whole better exist under the conditions of its environment (J. Anderson, personal communication, February 20, 2011). Tooby and Cosmides (1992) describe the connection between replicators and the EEA in this way:

> Adaptations evolve [*sic*] so that they mesh with the recurring structural features of the environment in such a way that reproduction is promoted in the organism or its kin. Like a key in a lock, adaptations and particular features of the world fit together tightly, to promote functional ends. (p. 69)

Of course, many biologists will argue that adaptations do not evolve; instead, populations evolve through the process of natural selection. For the purposes of this paper on education, it seems sufficient to note that, despite the validity of criticisms of Dawkins, Cosmides and Tooby, and others, a reasonable conclusion can be drawn from all of the competing theories: The environment in which humans have evolved—for more than 100,000 years, or our hominid ancestors, who we may trace back millions of years—likely provides useful information about natural human needs and guidance on how to most healthfully fulfill those needs. The EEA is not a specific place or time period, and it does not refer to the identical environmental conditions to account for all adaptations found in the modern human. Walsh (2008) explains, "The EEA is the environment that human and human-like ancestors lived in for millions of years, and that provided the pressures of selection responsible for who we are today" (p. 11). He includes a discussion about the EEA in his explication of WED because he believes, "it is the basis for understanding human needs, and shows humans are cooperative *and* competitive, individualistic *and* communitarian, altruistic *and* selfish, etc." (p. 15).

Anthropologists recently discovered that some hominids began using tools 3.39 million years ago, during the epoch known as the Pliocene (McPherron et al., 2010). Although this may seem irrelevant to a discussion about psychological theory, WED theory includes the possibility that understanding the social and environmental conditions and demands on our earliest ancestors and our primate relatives provides insight into the types of environments and conditions to which humans are naturally suited. Human ancestors existed as Pliocene hunter-gatherers and then Pleistocene hunter-gatherers for three million years before Mesopotamia was established in 5,000 B.C. Some evidence suggests that, along with brain development and technological advances, social and cultural adaptations and exaptations (Gould & Vrba, 1982) occurred over time to favor those characteristics that benefited both the individual and the community. Primate researchers have found evidence that "we descend from a long line of group-living primates with a high degree of interdependence" (De Waal, 2009, p. 21). The EEA for interdependence may have developed in connection with increased cognitive functioning which allowed "humans to maintain larger group sizes, have higher awareness of ongoing conflicts, better abilities in attracting allies and building complex coalitions, and better memories of past events" (Gavrilets, Duenez-Guzeman, & Vose, 2008, p. 8). These prosocial adaptations may have provided an advantage to our ancestors and are potentially an integral part of our genetic makeup. As Pinker (2002) states, "Thus while conflict is a human universal, so is conflict resolution" (p. 58).

In addition to the desire to be part of or to belong to a group, the physiology of social behaviors offers insight into how this process works on a neurological level. The last decade of scientific inquiry into the biomechanics of relationships and attachment in both individuals and groups sheds light on the neurological processes that comprise the human social experience.

Inquiries into the physical pain of rejection (Eisenberger, Lieberman, & Williams, 2003), the neural activity associated with emotional support (Onoda, Okamoto, Nakashima, Nittono, Ura, & Yamawaki, 2009), the distress of peer rejection during adolescence (Masten et al., 2009), the consequences of being ostracized while in a group (Wirth & Williams, 2009) and the effects of ostracism, even over the Internet (Williams, Cheung, & Choi, 2000) have created an enhanced understanding of the neurology associated with socializing. Using a combination of brain imaging and self-reports, these inquiries and others have contributed to a robust data set that makes a convincing case for the use of social inclusion and exclusion as a means of shaping behavior. For our ancestors, research suggests that there was a selective benefit for those who were able to repair relationships within their group in order to continue receiving the benefits of the group. As one study explains, "social pain is analogous in its neurocognitive function to physical pain, alerting us when we have sustained injury to our social connections, allowing restorative measures to be taken" (Eisenberger et al., 2003, p. 292).

WED theory recognizes that discussion about human nature and inquiry about this genetic-environmental paradoxical mystery can turn into an endless philosophical argument to prove the competitive/cooperative nature of human beings. Instead, WED proposes that humans are both cooperative *and* competitive, and that throughout human evolution the replicators that have been most successful are those that thrived in social environments. De Waal (2009) provides supportive evidence from his primate labs and research:

> We are group animals: highly cooperative, sensitive to injustice, sometimes warmongering, but mostly peace loving. A society that ignores these tendencies can't be optimal. True, we are also incentive-driven animals, focused on status, territory, and

food security, so that any society that ignores those tendencies can't be optimal, either.

There is both a social and a selfish side to our species. (p. 5)

In addition to the impressive yet debatable scientific evidence that describes millions of years of

hominid evolution, increasingly rapid changes to the physical and social lives of humans over the

last 7,000 years reasonably suggests that humans, after evolving in relatively stable environments

for the vast majority of their evolution, may be now struggling to "keep up." Although 7,000

years spans a huge number of generations, by evolutionary standards it comprises a relatively

small amount of time to allow for adaptation to the modern, over-populated industrial world.

Wholeistic Education is grounded in evolutionary psychology and biology; if hominids lived for

millions of years with certain social and environmental demands on them, it seems logical to

attempt to recreate this environment for therapeutic and educational purposes.

Human needs. Although human behavior can be characterized by the constant flux of

cause and effect, WED theory views it as being motivated primarily by desire. Walsh (2010a)

states, "Whether desire to increase pleasure or avoid pain, physically or non-physically, now or

in the future, consciously or unconsciously, the fulfillment of desire is the cause to behavior's

effect" (p. 1). WED theory segments desire into three types: (a) needs, (b) wants, and (c) values.

This discussion begins with a focus on needs, which can be defined as, "the physical or

non-physical desires that fulfill the requirements of nature for the wellness of the organism"

(p. 2). Maslow (1943) famously defined his hierarchy of needs as "five sets of goals, which we

may call basic needs. These are briefly physiological, safety, love, esteem, and

self-actualization. In addition, we are motivated by the desire to achieve or maintain the various

conditions upon which these basic satisfactions rest and by certain more intellectual desires"

(pp. 394-395). Building on Maslow's work, Wholeistic Education theory identifies two main

types of needs: physical needs (e.g., breath, nourishment, sleep, and movement), and

non-physical needs (e.g., safety, bonding, identity, and esteem; J. Walsh, personal

communication, October 11, 2010). Human needs manifest as physical and non-physical

intrinsic desires without which the individual cannot maintain or achieve health or wellness.

In Wholeistic Education theory, wants are defined as physical or non-physical desires

which may or may not be required by nature or be in the best interest of the organism. Wants

can be natural and healthy, or they can be unhealthy, such as when they manifest as addictions

(e.g., substance use, self-harm, over and under-eating, gambling) or other forms of conditioned

pathology or violence. WED considers neediness—imbalanced and excessive need—as an

unhealthy habit that can be overcome with motivation, support, and practice. Because desire is

stimulated both by nature and pathology, the distinction of needs and healthy wants from

unhealthy wants is an obviously essential human priority (Walsh, 2010a, p. 2).

Wholeistic Education theory encourages following our healthy wants and avoiding our

pathological wants. This is termed *discipline*, referring to self-control and determination, rather

than punishment or enforced obedience. WED asserts that the cultivation of values promotes the

true focus on healthy wants. Walsh (2010a) explains:

> We view *values* as a third type of desire. *Values* are powerful in that they are consciously
>
> chosen desires, *and* a reflection of our non-conscious habits. They are the relative
>
> importance we place on things, and determine how hard we will work to achieve things.
>
> They guide us to fulfill our *needs* – as we understand them. *Values* are of immense
>
> value! They bridge the gap between nature and nurture, allowing us to choose who we
>
> will be. (p. 2)

Values also bridge the gap between individuals and the community they belong to. Values can be transmitted through culture, and communities can together work toward health or dysfunction, depending on the energy invested in creating and maintaining a healthy culture. This conceptualization of human needs begins with an obvious paradox: humans create culture, and culture creates humans. WED avoids the tautological dynamic inherent in conversations about cultural determinism by embracing the complex relationship between biology and environment. Gintis (2007) theorizes the connection between culture and gene expression, stating:

> Fitness in humans will depend on the structure of cultural life. Because culture is influenced by human genetic propensities, it follows that human cognitive, affective, and moral capacities are the products of a unique dynamic known as gene-culture coevolution, in which genes adapt to a fitness landscape of which cultural forms are a critical element, and the resulting genetic changes lay the basis for further cultural evolution. (pp. 1-2)

Culture, as influenced by human evolution, encompasses cognitive, affective, and moral capacities comingled with organic capacities. Culture is complex and, theoretically, as our ancestors developed prosocial adaptations, those adaptations that benefited the group also benefited the individual and were therefore replicated. Though liars and cheaters have enjoyed some evolutionary success (Trivers, 1971), individuals with the capacity for cooperation, fairness, retribution, and empathy may have been more successful in navigating daily life and surviving to successfully transmit their genes (Gintis, 2007). Similarly, Walsh (2008) argues, "Healthy groups require positive culture. The creation and maintenance of positive culture is principally the responsibility of parents (through leadership of families), and parent proxies (through leadership of extra-familial groups)" (p. 11). Values connect individuals. A family or

any group of as few as two members has the ability to create its own culture through WED's

parenting ideal, which is further explained in the next section.

Parenting ideal. Walsh (2008) believes that "ideal parenting begins with unconditional

positive regard (Love) for all members of the group." This "love energizes guidance toward the

dynamically balanced fulfillment of human needs as selected in the Environment of Evolutionary

Adaptation (EEA)," (p. 12). Walsh believes that the parenting ideal was selected for, in

evolutionary terms, and is also supported by the study of philosophy, psychology, anthropology,

and biology. As we are not the parents of our clients, the parenting ideal serves as a theoretical

cornerstone for the concept of the educational ideal.

Conflict between parents and offspring, specifically concerning the amount of parental

involvement during different phases of development, occurs in most sexually reproducing

species (Trivers, 1974). In biology, this conflict is framed as the pressure of the parents to raise

all their offspring in a way that most likely transmits the most of their genetic material to the next

generation, and for offspring to get as much from their parents as possible to ensure they pass on

their specific genetic material. Trivers (1974) explains that offspring must use "psychological

warfare" because they cannot compete with their physically superior parents (p. 257).

Wholeistic Education does not use a strictly biological view of parenting, but instead considers

this one of many complex pressures impacting the parent–child relationship. Human needs, as

understood through the lens of the Environment of Evolutionary Adaptation (EEA), likely

evolved with a foundational structure that balanced cooperation and competition, individualism

and communitarianism. Accordingly, ideal parenting emerges within the context of the family

culture and dynamically balances the health and evolutionary success of the child with the

promotion of the family's evolutionary success, using the means of maintaining the family's

shared language, customs, rituals, expectations, etc. By extension, Walsh (2008) understands

ideal parenting as that which best facilitates the fulfillment of human needs by promoting the

balance of prosocial adaptation with individuality. Ideal parents provide their children with

ongoing opportunities to practice how to have a healthy balance between the needs of others and

the needs of the self. The ideal parent is freed from the common anxiety of balancing the best

interest of the child and the best interest of the family as a whole, because both interests are

recognized as the same. Wholeistic Education teaches that parents' role is to transmit the

family's (and possibly the broader community's) values to their developing children; further,

parents provide love and support as their children explore and evaluate the values presented to

determine if they too believe the values are important and worth propagating. Dynamically

balancing needs—reflected in WED's parenting ideal—tells us that this is the basis of our work,

as described in the next section, the educational ideal.

      Educational ideal. Recognizing that we are not our client's parents, WED translates the

parenting ideal into appropriate professional methods that replicate ideal parenting while

respecting the natural limits of our professions. Where ideal parents are guided by love in their

interactions with their children, those in the helping professions are encouraged to apply Carl

Roger's (1957) theory of unconditional positive regard, which he describes as the central causal

element of an optimal therapeutic relationship. Unconditional positive regard in the therapeutic

context "means caring for the client as a *separate* person, with permission to have his own

feelings, his own experiences" (p. 243). Knowledge of Roger's method has become almost

commonplace in the field of psychology and provides a useful frame for understanding WED's

educational ideal.

In addition to the application of unconditional positive regard, WED's educational ideal draws much of its inspiration from the previously discussed concept of ideal parenting. Education, as it applies to WED, is best understood through its Latin root *educo*, meaning "lead out, draw up, bring up, rear" (http://www.latin-dictionary.org/educo).   Education can be considered a proxy for the parenting ideal. WED uses the term *education* intentionally for two reasons. First, education, as opposed to therapy, can be facilitated by anyone in any relationship (Walsh, 2008). Second, the term education reflects the belief that Wholeistic Education can be applied universally, avoiding the impulse to segregate the "sick" from the "not sick." The inclusionary nature of WED is consistent with a tradition of educational ideas beginning with Plato's Republic (trans. 1989), and including William Glasser (1969), Jerome Bruner (1996), A. S. Neill (1995), and Alice Miller (1981).

Ideal education, based on ideal parenting, attempts to avoid adversarial relationship dynamics, possibly biologically driven, by ignoring the impulse to punish or coerce to achieve a desired behavior. Ideal educators also attempt to continually provide a healthy environment that can be accessed by anyone interested in being healthy. Hahn (1965) expressed this important balance by saying: "We believe it is a sin of the soul to force the young into opinions, but we consider it culpable neglect not to impel every youngster into health-giving experiences, regardless of their inclinations" (p. 3). Similarly, WED encourages a philosophical stance of authority, rather than control. Walsh (2010b) provides functional definitions of the terms *control* and *authority*; he defines control as "…crude, hierarchical dominance," and authority as "…voluntarily granted influence" (p. 1). Although both control and authority involve people in "superiority- inferiority" (Fromm, 1994, p. 163) relationships, the fundamental difference between the two lies in how the inferior member perceives the intentions of the superior member.

One will only be given authority if that person is perceived as helping, supporting, and

encouraging the development of the other, only to the other's gain. Fromm (1994), Vorrath and

Brendtro (1985), and Kohn (2006) each comment on this phenomenon and further explain that

the lack of perceived exploitation is another essential component of authority. The subordinate

member must not feel controlled or exploited for the gain of the other. When that happens, the

relationship becomes adversarial and any information or advice offered becomes suspect.

        WED's theory of ideal education eschews adversarial relationship dynamics and

educators' urges to control or coerce children into behaving in a specific manner. Instead, ideal

educators use what may be the most effective behavior-changing strategy available to them:

group restriction. Humans are called gregarious animals because we are selected to live in

groups, likely because, for the majority of hominid evolution, an individual who was rejected by

the group could not survive. Frans de Waal (2009) observed this effect in the context of an

indigenous African culture he studied: "They work hard to reach decisions by consensus, and

fear ostracism and isolation more than death itself" (p. 25). In WED's parenting ideal, this

concept translates into the theory that a parent's role in the family is to both vigilantly defend the

family's values and to support the individual path of each family member. If a family member

ceases to act in healthy, prosocial ways, then the ideal parent should encourage the family

member to reconsider the unhealthy behaviors. If a family member insists on following an

unhealthy path, the ideal parent acknowledges the individual's autonomy and, while lamenting

the loss of the individual to the family, protects the health and well-being of the rest of the family

by removing the unhealthy influence from the family culture. The restricted family member is

still loved and respected and is reminded that he or she will be welcomed back into the family at

any time upon agreeing to commit to following the family's expectations. Using this strategy,

family members both support the individual and protect the group while ensuring that they do

not contribute to or enable a family member's unhealthy behaviors and habits. Maslow (1968)

described a similar process:

> In the normal development of the healthy child, it is now believed that, much of the time,
>
> if he is given a really free choice, he will choose what is good for his growth. This he
>
> does because it tastes good, feels good, gives pleasure, or delight. This implies that he
>
> "knows" better than anyone else what is good for him. A permissive regime means not
>
> that adults gratify his needs directly but make it possible for *him* to gratify his needs, and
>
> make his own choices, i.e. let him *be*. It is necessary in order for children to grow well
>
> that adults have enough trust in them and in the natural processes of growth, i.e. not
>
> interfere too much, not *make* them grow, or force them into predetermined designs, but
>
> rather *let* them grow and *help* them grow in a Taoistic rather than authoritarian way.
>
> (p. 198)

Maslow (1968) followed this passage with a disclaimer indicating that the simplistic nature of

this assertion has been "misinterpreted extraordinarily." He went on to explain the difference

between respect for a child and "total permissiveness, indulgence, overprotection, *giving* him

things, arranging pleasure activities *for* him, protecting him against all dangers, and forbidding

risk taking" (p. 198). Wholeistic Education's concept of ideal education shares Maslow's belief

that "love without respect is quite different from love *with* respect for the child's own inner

signals" (p. 198).

According to WED theory, ideal educators use their healthy, loving authority to impel

others to consider adopting the developmental goals (further explained in the next section) as

target traits they would like to cultivate and embody in their own lives.

Developmental goals. Once loving leadership has been established, a group must define shared values in order to create and maintain a positive culture. Hahn described the shared values that he wanted to encourage in his schools and programs this way: "the aim of education is to impel people into value-forming experiences…[sic] to ensure the survival of these qualities: an enterprising curiosity, an undefeatable spirit, tenacity in pursuit, readiness for sensible self-denial, and above all, compassion" (Outward Bound Inc., 2008). The word *values* is sometimes used interchangeably with the word *morals*. Wholeistic Education does not promote a specific ideology or attempt to conform to a stereotypically middle-class value bias; instead, WED encourages a return to innate, time-tested values similar to the ones described by Vorrath and Brendtro (1985), "anything that hurts a person is considered wrong, and people are assumed to be responsible for caring for one another. Caring means 'I want what's best for you'" (p. 21). WED's developmental goals are an expression of the values that Walsh believes healthy group members must encourage in each other. Walsh (2008) explains, "Expressing our shared values in culture is the natural way humans influence individual development to conform with the characterological ideals that embody those shared values" (p. 14). People who embody the developmental goals exhibit the characteristics of what WED considers healthy and balanced prosocial behavior. Each developmental goal is accompanied by a simple phrase that reflects its spirit and provides guidance for those who wish to embody the goals in their daily lives. "The Developmental Goals are comprised of five, culturally desired character traits: Respect—I stop to see the other as me, Dignity—I reflect balance, Responsibility—I care for my influence on all things, Compassion—I share joy and pain, and Perseverance—I commit to life" (Walsh, 2010d). These developmental goals, when embodied fully, encourage an individual to exhibit a healthy balance between self-minded and community-minded behavior. They are the inspiration for the

Behavioral Guidelines which are described at length in the Methodology section. Education,

from Walsh's (2008) perspective, focuses on the habitualization of the developmental goals,

because "In the absence of this accomplishment, even the most "schooled" person will not be

optimally healthy or content" (pp. 2-3).

Theoretical Application

This section describes the substructure underlying WED practice, building on the

previous section, which focused on the foundation of WED theory. Although still theoretical,

the concepts described here connect directly to the methodological elements of the approach.

This section begins with the concept of organic wisdom, which, along with true holism,

constitutes the most important concept to understanding WED. Next, the concept of educational

culture is discussed, along with its importance to the implementation of the approach. The

theory behind the Behavioral Guidelines, including the precedent of external rule sets, is then

explained, with a focus on why the guidelines are an integral component of WED. This section

concludes with an explanation of WED's educator goal: the singular philosophy that informs all

WED interventions.

Organic Wisdom. One can view WED as rooted in a number of its different concepts or

disciplines (practice, evolution, behaviorism, evolutionary psychology, humanism, etc.)

However, from a developmental standpoint, WED originates from Walsh's concept of organic

wisdom (Walsh, 1993, p. 47) based on his observation that healthy humans feel the same

pressure as other animals to balance the needs of the individual and the needs of the group.

Organic wisdom is the "essential, constitutional impetus that drives the fulfillment of needs

through motivating the dynamic balance of selfish and selfless behaviors" (J. Walsh, personal

communication, October, 1 2010). To use a Western analogy, organic wisdom is similar to the

concept of homeostasis, defined as "a relatively stable state of equilibrium or a tendency toward such a state between the different but interdependent elements or groups of elements of an organism, population, or group" (http://www.merriam-webster.com/dictionary/ homeostasis). The subtle difference between the two concepts is that organic wisdom specifically includes both physical and non-physical conceptual "interdependent elements" attempting to achieve balance. From an Eastern perspective, organic wisdom resembles Chi, defined as the "vital energy that is held to animate the body internally…" (http://www.merriam-webster.com/dictionary/chi). Walsh (2011) believes that *"Organic Wisdom* is both the source *and* goal of *True Education* [sic]"* (p. 12). As a keystone of WED, organic wisdom is consistent with the previously discussed genetic/environmental paradoxical mystery and is super-dialectical and super-hierarchical. In brief, organic wisdom is the belief that humans naturally seek out health and contentment, an instinctive process cultivated by love and support.

Educational culture. The word *culture* has several meanings; Wholeistic Education uses this definition: "The integrated pattern of human knowledge, belief, and behavior that depends upon the capacity for learning and transmitting knowledge to succeeding generations" (http://www.merriam-webster.com/dictionary/culture). The nature of culture has been researched and debated for centuries; notably, scientists have endeavored to explain culture and cultural transmission through primates (de Waal, 1996; Whiten et al, 1999), indigenous tribes (Geertz, 1973; Mead, 1935/2007), and children (Corsaro, 2005; Harris, 1998). This research has been deconstructed and analyzed by those seeking to understand the role of culture in human evolution and development (Bruner, 1996; Dawkins, 1999; Dennett, 1995; Pinker 2002; Vygotsky, 1978). In agreement with these scholars, Walsh (2011) explains, "Educational culture is produced when group members sufficiently practice the nominal rules of social interaction, i.e.

politely respect all, take responsibility for influence on all, and earnestly commit to wellness of all" (p. 12). These "nominal rules of social interaction," what WED terms the Behavioral Guidelines, are explained fully in the next section. WED uses the term *educational culture* to describe the manifestation of the previously described parenting and educational ideals, recreated in a community or group setting.

The pressure of group culture has long been recognized as an essential component to effectively raise and educate healthy children, by progressive educational leaders such as Dewey (1916), Greenberg (1995), and A. S. Neill (1995). Dewey states, "A being whose activities are associated with others has a social environment. What he does and what he can do depend on the expectations, demands, approvals, and condemnations of others" (p. 12). Walsh (2008) takes the concept of the social environment a step further, beginning with a definition of culture as …shared language, customs, rituals, expectations, etc." (p. 29) and then in

> …an apparent paradox, society, as a collection of individuals, is fundamentally guided by Organic Wisdom that operates through the individual to create culture—but in doing so, it also creates the cultural preservation systems that suppress individuation, and against which the individual must seek individuation. This paradox of Organic Wisdom is similar to something known as the mind-culture-mind tautology—biology has supplied us with the tools to transcend biology. (Walsh, 2011, p. 180)

This integration of individual interests and the cultural lever enables both prosocial adaptation and support for individuation and autonomy, thus allowing the individual to create the culture that creates the individual, a process Walsh (2011) describes as mind-nature-mind tautology or "holistic paradox" (p. 207). An example of this type of focus on individual and community balance has been documented by the Summerhill School, which was founded in 1921 in Suffolk,

England, by A. S. Neill. The school's website reflects: "Through its self-government and freedom it has struggled for more than eighty years against pressures to conform, in order to give children the right to decide for themselves. The school is now a thriving democratic community, showing that children learn to be self-confident, tolerant and considerate when they are given space to be themselves" (Summerhill School, 2004). In Massachusetts, the Sudbury Valley School, like the Summerhill School, incorporates a self-government component to the group culture experience. These schools utilize a community meeting style of governance where all members are equal and equally responsible for the wellbeing of the group. To handle conflict, Sudbury Valley School employs a randomly chosen judicial committee to investigate and preside over interpersonal complaints (Greenberg, 1987/1995). Both Summerhill and Sudbury Valley have excellent community-minded programs that engage the students and react to conflict, while promoting respect, responsibility, and integrity. Walsh, while strongly inspired by Neill, differs in that he promotes taking a proactive approach to creating and maintaining community culture. Walsh (2008) believes

> This is best done by: clearly defining, explicating, expecting, and demanding conformance to minimally constraining behavioral standards which reflect universally accepted basic human rights (Behavioral Guidelines), and supporting the private, creative, and unpredictable path of each individual's life through a predisposition of positive regard and avoidance of undue manipulation or influence beyond the Behavioral Guidelines.

Behavioral Guidelines. The desire to influence or control those around us is not new. Our primate relatives discovered that "when survival depends on mutual assistance, the expression of aggression is constrained by the need to maintain beneficial relationships" (de

Waal, 2000, p. 586). The development of social norms is an example of a primitive but effective

way to manage individuals and the inevitable problems that arise as group size increases

(Trivers, 2006). Like other elements of culture, social norms can be casually passed down

verbally from generation to generation, or they can be dictated by leaders and publically

displayed as a code of behavior for all to follow. The first known human behavior codes

originated in ancient Mesopotamia as the early rulers tried to organize their fledgling societies by

defining expectations (laws) and stating the consequences of violating those laws. The Code of

Hammurabi, written in Babylon between 1795–1750 B.C. (Horne, 1915), is perhaps the most

famous of these codes. This code provides insight into the behaviors and traits the king desired

in his subjects and how the society as a whole prioritized the code's components, including

kinship, family, individual ownership, economics, politics, religion, and justice, and others.

In contrast to Hammurabi's extensive code for all to follow, the Judeo-Christian tradition

provides the Ten Commandments, a voluntary behavior code which defines the religious

community's expectations for those who desire the benefits of its beliefs (Caxton, 1493). Unlike

Hammurabi's Code, which applied to all subjects, the Ten Commandments apply only to those

who choose to practice a Judeo-Christian religion and want to receive the benefits of that

worship. Hammurabi's Code and the Ten Commandments are both mandates given by those in

power to control the behaviors of followers. Like the social norms practiced by our primate

relatives, these social codes were likely essential to human survival. By "generating or

reinforcing connections among individuals, these mechanisms facilitate co-operative social

interaction because they require individuals to make 'commitments' to behave in ways that later

may prove contrary to independent individual interests… that when pursued can jeopardize

collective or shared interests" (de Waal & Flack, 2000, p. 3). When faced with the choice to

protect one's selfish interests or the wellbeing of the greater group, the social contract can tip the

scales toward prosocial behavior, by encouraging the individual to consider the consequences of

engaging in an antisocial action. Walsh (2011) explains,

> Behavioral expectations must be explicated (in black-and-white, on paper) to avoid the
>
> pernicious cycle of distrust, adversarial rebellion, control, distrust, etc., that is naturally
>
> stimulated when one feels one may be manipulated by rule-sets that are kept implicit in
>
> the minds of other group members. (p. 15)

Just as the other behavioral codes reflect the beliefs and priorities of their writers,

Walsh's (2008) Behavioral Guidelines transmit his concept of the "self-evident fundamental

personality traits that healthy humans seek in other humans" (p. 15). The Behavioral Guidelines

outline a set of healthy and prosocial behaviors that, when followed by all members, creates a

respectful, dignified, responsible, compassionate and perseverant society or group. The decision

to follow these guidelines is left up to each group member, allowing him or her to weigh the cost

of commitment to the group against the benefits gained from choosing group membership. This

concept of the control of the individual by the individual is well documented through history. As

young men, both George Washington (Toner, 1888) and Benjamin Franklin (Bigelow, 1869),

developed behavioral codes to help define and inform their daily actions. In this way,

commitment to the Behavioral Guidelines is both an individual and a group intervention. It is

often reassuring for group members who are considering making a commitment to following the

guidelines to know that the Guidelines apply equally to all group members, both adults and

children alike, and that each group member has an obligation to help the other members practice

following them. In addition, when other healthy community members are not around,

individuals can choose to follow the Guidelines for their own personal betterment. Like

Washington and Franklin, individuals who seek healthy living and healthy relationships can choose to follow the Guidelines in all situations, even if those around them are not committed to Wholeistic Education or to the Guidelines.

Walsh created the Behavioral Guidelines as a proactive way for a healthy group to clearly define the expectations of those who seek the benefits of group membership. The specific guidelines and their implications are discussed at length in Chapter 4. This clear definition of healthy behaviors is akin to the concept of target behaviors used in Behaviorism. Target behaviors refer to the definition of the desired behavior in observable and measurable terms (Baer, Harrison, Fradenburg, Petersen, & Milla, 2005). Although WED is not strictly a behavioral modality, the Behavioral Guidelines make observable and measurable the actions necessary to embody the developmental goals (respect, dignity, responsibility, compassion and perseverance). Each section of the Guidelines focuses on a single developmental goal, providing specific examples and clear direction for an individual who desires to follow this healthy path. The Guidelines are not a set of laws with consequences for disobedience; instead, they are a voluntary expression of basic human rights or expectations that healthy humans can practice in place of the unhealthy habits that may be part of their daily routine. The Guidelines define the habitual behaviors that encourage health and harmonious relationships and health, offering a pragmatic route to attaining both. One application of the Guidelines is a community or family that has adopted them as an organizational structure. In this application, the Guidelines are minimally constraining and promote freedom and independence through shared behavioral expectations. "WED unifies group members around a set of behavioral guidelines as a foundation for a culture of connection, mutual support, and individual creativity" (Walsh, 2010, p. 7).

Educator goal. Following in the steps of Hippocrates, WED admonishes educators to "First do no harm." WED considers any enabling of unbalanced or unhealthy behavior, encouraging the expectation of a "magic bullet" cure, or protection from responsibility for one's behavior as examples of well-intended but potentially harmful interactions. Walsh (2008) describes the goal of all WED educators, both familial and professional, as "facilitating the removal of resistance to Nature through the dynamically balanced fulfillment of needs" (p. 30). Walsh considers this concept the logical result of the belief in organic wisdom. Building on the belief that people naturally seek out health and contentment, the only goal of educators becomes to provide opportunities for students to transcend the barriers currently preventing them from following their naturally healthy paths. Unfortunately, a number of distractions can prevent students from embracing the need to do the hard work and practice. WED embraces values and methodologies from other psychotherapy programs (e.g., Cognitive Behavioral Therapy, Dialectic Behavioral Therapy, Trauma-informed therapy) but avoids modalities that include additions or distractions that may keep individuals from the difficult tasks of creating and practicing new healthy habits in place of the unhealthy habits that negatively affect their lives (e.g., rationalizations, justifications, avoidance, escapism, childish wish fulfillment). The next section explains how all these disparate theories come together and, when used appropriately, become a cohesive and effective treatment approach.

Chapter 3: Wholeistic Education in Practice

This chapter illustrates the pragmatic application of the previously discussed theoretical underpinnings by explaining the daily practice of WED, including WED's educator objectives, challenges, attitude, educational culture, the Behavioral Guidelines, and how to resolve conflicts using WED. This section includes vignettes from adolescent group therapy and family therapy that exemplify of some of these concepts in action.

Educator Objectives

Walsh (2010c) believes that a WED educator can do three things in a therapeutic capacity: (a) Model Healthy Relationship, (b) Provide Clear Reflection, and (c) Encourage True Focus. This section focuses on each skill individually and explains how it translates into therapeutic learning.

Model healthy relationship. Wholeistic Education is a relational approach and, like other relational models, it relies on the health and natural relational ability of the educator to be most effective. Parents and professionals can model healthy relationships simply by practicing the Behavioral Guidelines in relationship with others or leading by example. In doing so, they provide examples of healthy communication, conflict resolution, and the ongoing proactive problem solving that is inherent in daily life (Walsh, 2010c). For example, WED educators, when following the Behavioral Guidelines, politely greet and welcome everyone in the group or family (consistent with guidelines 1a.). The initial welcome is important; it acknowledges that all group members care for one another, and it sends the message that all members are valued equally. The initial greeting can also be a gateway for checking in and making sure that each group or family member is not struggling with something and requiring assistance. Many teens complain that their teachers and parents begin interacting with them with questions and demands,

such as, "Did you do your homework?"; "You need to do your chores before you watch TV or

go online"; or "What's wrong with you?" (in response to a teen appearing sad or upset).

Depending on the tone of voice, each of these statements can convey a critical message and

increase antisocial feelings of anger and resentment. Like teens, many parents feel used and

taken for granted and they complain that, as far as their kids are concerned, they are only a

chauffeur service and ATM. In our busy lives, with numerous demands on time and attention, it

becomes easy to cut out pleasantries and 'get right down to business,' but relationally, the initial

acknowledgement and connection helps family members remain focused on what WED

considers most important—the relationship.

Provide clear reflection. A group member provides clear reflection by lovingly telling

another group member what he or she is experiencing in the moment (Walsh, 2010c). The

purpose of providing clear reflection is to inspire all group members to become more

self-reflective. Group members should provide clear reflection in both positive and negative

circumstances. The most helpful reflective statements are presented with genuine humility, and

they describe the similarities or differences in a group or family member's stated values and

behavior. An example of this happens regularly in the adolescent group therapy setting. A

group member who regularly shared her concerns about being disliked by others and avoided at

school by peers would regularly interrupt the group in an apparent effort to outdo other group

members to gain status or attention. When this dynamic was noted, a WED educator providing

clear reflection would guide the group by clearly and compassionately sharing his or her

experience of the interrupting group member.   The WED educator would then check her

reflection with the experience of other group members and humbly question the interrupting

member about her intent and actions. This prosocial intervention, when done in a caring manner,

sends a message to the group. "As a leader and as a group there are three things we can do for each other, model healthy relationships, provide clear reflection, and encourage true focus" (Walsh, 2010c, n.p.). For clear reflection to have the most impact, it must be presented with humility and love. If the tone is angry or frustrated, or the reflection is presented in a demeaning way, then the intervention becomes embarrassing and undermining, which is antithetical to WED.

In a family setting, an example of providing clear reflection centers on healthy food choices. Many adolescents seem to undervalue the impact of the quality of food they ingest on the physical characteristics of their bodies and their energy level. A teen struggling with sleeping at night and waking up in the morning might benefit from humble questions about the amount of caffeine in foods and beverages the teen ingests and the potential impact this may have on sleep. These questions encourage self-reflection and, when not paired with an ultimatum (e.g., "You cannot have any more energy drinks."), allow the teen to consider what he or she values, and to adjust behavior voluntarily. Another example in the family setting involves issues of appropriate hygiene. Many teens in early adolescence seem oblivious or indifferent of the impact of their hygiene on others. A clear reflection to a teen with poor hygiene would be, "Hey, I don't want to offend you, but I just want you to know that today your body odor and bad breath are discouraging me from wanting to be too close to you, which is a bummer, because I care about you and like to spend time with you." By avoiding an embarrassing or undermining tone, the parent and teen can join together to solve the problem of the teen's hygiene. Poor hygiene that is offensive is then a group issue if it impacts the enjoyment of group spaces for others. It would be consistent with WED to calmly explain the concern and to seek a mutually acceptable solution to the problem. If a teen is unwilling to address the issue, then the WED

educator would lovingly reflect that the teen is free to choose not to follow the Guidelines. The

teen would be reminded that it is not only the right but also the duty of all group members to

protect the healthy practice of the Behavioral Guidelines, as these guidelines create the group

culture that they all benefit from. Any member's unwillingness to practice following the

Guidelines will be respected and honored, as no member is forced to follow them, but those who

are not committed must accept restriction from using group resources. The specific elements of

restriction are discussed at length in the upcoming section about the four Rs.

Encourage true focus. Educators who model healthy relationships and provide clear

reflection cultivate trust and respect. This trust increases the likelihood that those around them

will grant them authority. As discussed in the section about educator ideals, the concept of

authority, or voluntary granted influence, is key to successfully encouraging true focus. True

focus is the establishment and maintenance of specific plans for the practice of healthy behaviors

(Walsh, 2010c). WED educators encourage individuals, groups, or families to embrace the

concept of "practice" in their daily lives, as they work on replacing their less healthy and/or

self-destructive habits with more healthy, prosocial ones (Walsh, 2010c). By practicing

(following the Behavioral Guidelines), group members have the opportunity to experience their

best selves; and by encouraging true focus, WED educators become a resource for making

healthy choices and changes.

For adults and teens in a healthy relationship, opportunities for encouraging true focus

happen often, as adolescence is often fraught with unhealthy choices. An example of a common

discussion concerns the use of substances. An 18-year-old stated to the group that he had been

experiencing significant depression for "too long," and "he was sick of it!" He decided to take

matters into his own hands and purchased some methamphetamine to use over the weekend,

because he heard that the resultant high he would give him some relief. No WED educator

would endorse the use of such substances, and many adults would consider taking drastic

measures to prevent an adolescent from using such a dangerous substance. By avoiding the

desire to control the teen, the WED educator engaged him in a conversation about his thoughts,

feelings, and goals for the program and his life. The WED educator then asked questions,

encouraging the teen to explain the effect methamphetamine could have on meeting his goals.

Other same-age group members chimed in, expressing concern for the teen while acknowledging

that, ultimately, it was his choice. The teen was asked about his commitment to working toward

health, which he stated was still his desire, and he was encouraged to assess if his decision to use

substances aligned with that desire. The teen went home, and when he returned the following

day, he triumphantly shared with the group that although he was frustrated with the slow pace of

his treatment, he contacted the person from whom he bought the drugs from and got his money

back. The group shared their relief and support for his decision and commended him taking

responsibility for his choices. Because the teen had granted authority to the WED educators and

the group, when the group encouraged true focus, the teen was able to self-correct his decision

and receive the full benefit of his healthy choice.

Educator Challenges

Parents and professionals who aspire to be WED educators all face three challenges: to

"give up control to gain authority, neither punish nor enable imbalanced behavior, and avoid

adversarial dynamic" (Walsh, 2010b). Traditional parenting wisdom and some psychological

theories may oppose these views, as on the surface WED might seem to contradict the theory of

operant conditioning—that rewarding positive behaviors and punishing undesired behaviors is

the most effective way to shape human behavior. This maxim from behaviorism has permeated

many aspects of daily life and is often considered common sense, likely due to the number of

interventions based on this theory. Walsh (2010b) recognizes that, "reward and punishment may

be the only way very large groups (like cities and countries) can function," but he notes that for

smaller communities and families this strategy remains "ineffective and inefficient" (p. 1). The

educator challenges underlie all interactions and relationships, and they are crucial to

understanding the spirit and practice of Wholeistic Education. Each educator challenge, as well

as any background information needed to provide context, is described in this section and

followed by a prosocial example of WED educators embracing the challenge.

Give up control to gain authority. As explained and discussed in the section on the

educational ideal, WED educators must be able avoid the impulse to control others and rather

promote health in all possible outcomes. Some parents and educators struggle to embrace this

concept, because some of the possible outcomes, although healthy, are less desirable to certain

educators. Some adults have predetermined paths or fantasies for their children that they begin

forming when their children are very young and that become an integral part of their future

expectations; for example, graduating from high school, attending college, joining the military,

taking over the family business, or going to medical school. When an adolescent does not wish

to follow a predetermined path and prefers to explore a healthy alternative plan, parents may find

it difficult not to try to change the child's mind through passive-aggressive comments, coercion,

bribery, or punishment.

Giving up control and allowing individuals to explore their own volition is a difficult

proposition for most educators. Many parents state the fear that, if not controlled, their teens will

run amok and will ruin their chances for a successful future or get themselves into situations that

result in trouble or injury. This fear is not entirely unfounded; teens may very well get

themselves into just these types of situations, and the application of sufficient control may prevent this from happening for a period of time. However, in the long run, control is inefficient and ineffective. "The use of controlling techniques promotes an ugly configuration of mindless rebellion and deadening conformity, neither of which you would want for someone you love" (J. Walsh, personal communication, August 17, 2012). Volition, "the power of choosing or determining," (www.merriam-webster.com/volition), is essential to healthy human development because it allows an individual the freedom to take personal responsibility to choose the type of person he or she wants to be. When adolescents organize themselves in opposition to their parents, for example, they make decisions reactively, based on avoiding or rebelling against the feeling of control. When adolescents have the freedom to explore and bear responsibility for their actions, they can make proactive decisions based on their wants and values, rather than the desire to rebel. This is not a new strategy; Adler, Frankl, and others have promoted a similar technique called paradoxical intervention for over half a century (Dowd & Milne, 1986).

As explained in the section about the educational ideal, the fundamental difference between authority and control is the belief by the inferior member (in our examples, the child), that an adult has the child's best interest in mind and is not using or exploiting the child for personal gain. Although this distinction may seem inconsequential, in a relationship it can make all the difference. In Fromm's (1994) reprint of *Escape from Freedom,* he gives two examples to make this point, contrasting the authoritarian teacher-pupil relationship with the controlling slave owner-slave relationship. Fromm explains that, in the teacher–student relationship, the success or failure of the student to learn and achieve reflects on and is shared by both the teacher and the student. They work together and align their energy toward a common goal. In the slave–owner/slave relationship, the relationship is antagonistic; the slave works for the owner,

causing the owner to feel more successful and the slave to feel more exploited. The dynamics of

their relationship places them at odds with each other and working toward opposite goals (p.

163). On a spectrum ranging from authority to control, the teacher–pupil relationship is at the

extreme end signifying authority, while the owner–slave relationship is at the extreme end

signifying control. On this same spectrum, most parent–child relationships likely fall somewhere

in the middle, a combination of authoritarian and controlling interests. In order to honestly

embrace parenting with authority, the desire to give up control must come from within and

control must be given up voluntarily.

An example of this dynamic involves the ongoing struggle in many families about

homework and grades. Some parents engage in a nearly constant battle for ten months of the

year in an effort to improve school compliance and increase academic performance.   It is

WED's position that the conflict about homework and grades is between the child and their

teachers. Any effort by parents to force children to do homework creates a control dynamic that

draws children's energy away from their responsibilities and concentrates it on fighting their

parents' attempts to control them. For example, a teen has a significant long-term project for

history class, which will comprise a large percentage of her grade for the quarter. If her parent

knows that the child struggles with procrastination and often avoids homework until the night

before the due date, the parent might feel justified in beginning a daily questioning routine: "Did

you work on your project?" and "What did you do on your project today?" If the teen states that

she has not worked on it that day, the parent might respond by saying, "You can't go out with

your friends until you do some work on your project" or something along those lines. Many of

these conversations occur in the car or over the phone, and offer little to no actual accountability;

the parent does not actually know if the teen has done work on the project or not. Although these

are fair questions and a seemingly reasonable demand, they will likely make the teen defensive

and encourage her to be evasive or untruthful in future conversations in order to avoid being

controlled. Both of these reactions teach the teen strategies to manipulate situations to avoid

control, rather than helping the teen move any closer to completing the project before the last

minute.

A parent using WED would take a different approach. Both parenting styles have the

same goal of helping the child to do well in school. But the parent using WED encourages the

teen to seek help, if necessary, and this keeps the parent in the role of an authority. For example,

a parent learns of the long-term project and has a concern about the teen's historical difficulty

with procrastination. Using WED, the parent calmly shares this concern with the teen, "I see you

have a big project for history, and I know these types of projects are hard for you. Do you care if

you complete the project or not?" This question aligns the parent with the teen's goals and

encourages true focus. If the teen does not want to work on the project, then the parent might

inquire about the teen's thoughts about finishing high school and ask if another educational

program might be more appropriate. If the teen wants to finish the project, then the parent might

ask, "Do you have a plan for how to accomplish it?" and "How much time do you think you need

to devote to working on it every week to get it done in time?" If the teen has an idea for how to

finish the project on time, then the WED parent might offer to help flesh out that idea into a

written schedule. If the teen has no idea how to finish the project, then the parent might ask if

the teen wants help figuring that out, as it might help determine exactly what the project

involves. By asking these types of questions, the WED parent helps the teen activate her internal

motivation for the project; the parent becomes an ally, helping the teen meet her goal.

In this example, the teen learns to critically analyze her desires and her study skills to make a plan for successful completion of the project. The teen may determine that she needs approximately 20 hours to complete the project over the quarter. Using WED, and without having a pre-determined outcome, the parent can empower the teen to figure out the best way to complete the work. Some teens accomplish work best in short daily increments, while others require long periods of uninterrupted work time. The WED parent helps the teen learn to evaluate her preferred style and make a plan based on that knowledge. This helps the parent understands the teen's volition and avoid daily nagging conversations about the project. The teen, in turn, gains experience making plans based on her learning style, and she can now evaluate that strategy to see if it needs modification for future projects. The teen learns and practices the skills required to succeed in college and in the workforce. In addition, by using authority in place of control, feelings of love and gratitude—rather than hostility and resentment—arise because the teen believes her parent is working toward her interests, not against them (Fromm, 1994, pp. 163-164). This strategy does not encourage teens to avoid responsibility; it does the opposite. Instead of focusing on the issue (completing the project) the focus moves to the much more complicated task of teaching critical thinking and avoiding blindly following external directions.

Neither punish nor enable unbalanced behavior. The second challenge for a WED educator is to neither punish nor enable unbalanced behavior. Parents and educators commonly use coercion as a precursor to punishment, threatening children with future consequences or bribing them to encourage the desired behavior. Many parents express the belief that without punishment and coercion they have no power over their children and cannot parent them

effectively. This section defines coercion and punishment, details their pitfalls, and explains

why WED encourages its educators to avoid using them.

Merriam-Webster (2010) defines *coerce* as: "to restrain or dominate by force, to compel

to an act or choice, and to achieve by force or threat" (http://www.merriam-webster.com/

/dictionary/coerce). Coercion can be an effective short-term strategy for achieving a desired

behavioral outcome. However, research suggests that, in the long-term, coercion is detrimental

to children and increases their risk for future psychopathology (Berg-Nielsen et al., 2002; Bor &

Sanders, 2004; Hinshaw & Lee, 2003; Larzelere & Kuhn, 2005; Straus, 2001). Kohn (2006)

describes coercion this way: "Without regard to motive or context, past events or future

implications, the adult simply forces the child to act (or stop acting) in a certain way"

(p. 23). When adults use coercion as a behavior-management strategy, they replace the child's

will with their own. If a child does not willingly make a decision to act in a certain way, then it

follows that the child is not personally responsible for his or her behavior and does not learn

anything more than the effectiveness of applying coercion to attain goals. Kohn (1999) further

states that a "child who complies in the hope of getting a reward or avoiding a punishment is not,

as we sometimes say 'behaving himself.' It would be more accurate to say the reward or

punishment is behaving him" (p. 162).

Punishment, according to Kohn (2006), includes two elements: "it must be deliberately

chosen to be unpleasant…and it must be intended to change the student's behavior;" he goes on

to state, "Punishment makes somebody suffer in order to teach a lesson" (p. 24). Punishment,

like coercion, promotes the implicit idea that individuals with the most crude power have the

right to dominate and control others. Punishment, or the fear of it, effectively forces temporary

compliance, but it does not introduce or reinforce any positive, prosocial motives or values that

underlie the original behavior. In fact, once a digression becomes adversarial and a punishment

is applied, the child or adolescent's energy becomes completely invested in the conflict and in

resenting the punishment. Often, the underlying issue and the relational injury are not discussed

again; the focus instead moves to the duration and severity of the punishment.

The combination of coercion and punishment underpins many of the well-meaning but

potentially damaging strategies for child rearing, such as corporal punishment, level systems,

incentive-based programs, and infraction consequences. As described in Chapter 1, these

behavioral interventions are commonly utilized in both school and home-based therapeutic

interventions with children and adolescents. Many parents, schools, and caregivers adopt the

philosophy that children and adolescents who misbehave are most effectively addressed by

increasing external control through punishment (Christophersen & Mortweet, 2005). Ross

Greene (2001), offering an explanation for this common belief, explains, "Your interpretation

will guide your intervention. If you interpret a child's behavior as planned, intentional, and

purposeful … [then] popular strategies aimed at motivating compliant behavior and 'teaching the

child who's boss' will make perfect sense" (p. 14). Children and adolescents interpret the

implicit message behind parenting strategies and infer ways to act and react. It seems likely that,

when experiencing punitive and coercive techniques, they internalize the message that is gaining

control of a situation is the best way to attain power. Walsh (2010b) reflects,

>Isn't it ironic that as parents, educators, etc., we proudly proclaim our desire to help
>
>children become confident, independent, critically-thinking, and impossible to
>
>manipulate—unless it's us doing the manipulating!... Then we just want them to do as
>
>we say, just because 'we said so.' (p. 1).

WED does not promote the idea of having no consequences for behavior; WED's alternative conflict resolution strategy is explained in the upcoming section entitled "The Four Rs."

In keeping with the spirit of organic wisdom, WED educators believe that humans naturally seek health. If an obstacle prevents an individual from following his or her natural impulse to seek health, then a WED educator would want to compassionately gather information about the roadblock and offer support in working through the obstacle. Sometimes children and adolescents (and adults too!) choose to remain in unhealthy patterns, seemingly enjoying the conflict and drama, rather than taking steps to resolve the conflict. Consider this example: a three-year old had a predictable nap routine in the afternoon. Using WED, the child's parents previously worked with her to teach her responsibility for her moods and how to make healthy choices, including the afternoon nap. The nap compromise addressed the needs of the child, who wanted time to play, and the needs of the parents, who wanted the child to keep her dignity and avoid the afternoon and evening meltdowns that she had on days without naps. The child was not expected to sleep every day, but she had agreed to take a rest during the afternoon, which involved lying quietly in her bed for a short time. On most days, the rest time resulted in a nap, and the child was able to follow the Behavioral Guidelines for the rest of the evening. The spirit of following the guidelines is crucial, and with young children it is essential to reflect and monitor their spirit, not just their behaviors. When the child in our example displayed genuine effort to behave responsibly, such as by lying on her bed resting but not sleeping, her parents recognized that effort. However, if she refused the nap with a gleam in her eye, while obviously tired, they did not allow her to continue her disruptive behaviors, understanding that she was likely seeking negative attention or another secondary gain.

Most days, the child displayed a healthy spirit; she tried to rest willingly, because it was responsible to take a rest to avoid losing her dignity, which in turn helped the whole family have a better evening. When the family moved into a new home, after the initial transition ended, the three-year old began avoiding her rest time and would repeatedly come out of her room or refuse to lie quietly and let her body rest. She stated that she did not feel tired and did not want to rest any more. Consistent with WED, her parents listening to her concerns, suggested an experiment to see if she still benefitted from having an afternoon rest. They established the expectation that she make it until bedtime maintaining the level of dignity and responsibility she usually exhibits on rest days. For a few days in a row, the child did not have a rest, and she became increasingly irritable and dysregulated in the evening, often requiring a restriction from the family (the principles of restriction are explained in an upcoming section). It was clear to the parents and the child that she still required an afternoon nap, so they then needed to determine what benefit the child received by refusing her rest.

The parents realized that, in the new house, which they occasionally shared with extended family members, the mother felt pressure to keep the child quiet, and she unintentionally fed into the child's negative attention-seeking by allowing herself to be held hostage during rest time in her attempt to keep child from disrupting the relatives. The child had learned that if she avoided her rest time, then she would get her mother's undivided attention for the hour or so she was supposed to rest. Once they realized the dynamic at work, the parents made a commitment not to enable the child's unhealthy behavior, as negative attention seeking is not a prosocial or positive way to participate in a family. They talked with their daughter, helping her recommit to the spirit behind the rest time and the benefit it has for the whole family. They also reminded her and each other of the expectations for rest time, that if the child did not

choose to rest, she would be reminded and then restricted, regardless of the volume of her protests. No further enabling of the unhealthy habit would be tolerated. Following this intervention, rest time resumed without incident and became a healthy habit as it was in the former home. WED, which prides itself as a model of healthy development that is appropriate for all humans regardless of age, appeals to the intuitive way that humans prefer to interact with each other. WED eschews punishment and coercion and avoids hierarchical power structures that encourage power-over relationships.

Avoid adversarial dynamic. The third educator challenge is to avoid the adversarial dynamic that is embedded in much of the "common sense" parenting and intervention models aimed at working with children and adolescents. For example, this dynamic underlies the belief that children require discipline, in the punitive sense of the word, in order to behave. This sets up an implicit conflict between adults and children, promoting the idea that they have opposing goals and must work against each other to get what they desire. WED theory opposes this belief entirely. Using WED, adults and children approach all healthy goals approached together, as teammates. When asked, most teens identify personal goals that include succeeding in school and in extra-curricular activities and having a better relationship with their parents. Most parents have similar goals for their children, but in many families the conflict inherent in daily life obscures the goals and focuses the family's energy on reacting to elements of coercion and punishment.

To avoid the adversarial dynamic, a WED educator must first embrace the verbal and paraverbal message, "I choose to remain a loving, positive member of our group, and there is nothing anyone can do to change that" (Walsh, 2010b, n.p.). This means that, regardless of instigation or challenge by others in any environment, a WED educator commits to remaining a

dignified and prosocial model and attempts to avoid all opportunities to engage in a conflict or

fight. The underlying message is that the education of those in the group (or family) is always

more important than the content of any specific conflict. Therefore, emphasizing the opportunity

to model healthy relationships will most often supersede the outcome of a particular interaction.

In a similar spirit, WED educators can make the statement, "You can't make me fight with you,"

and by following the Behavioral Guidelines and practicing the conflict resolution skills (the

"Four Rs"), they can feel confident that they have the tools to avoid reacting to situations in ways

that encourage fighting.

   Consider the example of a young adult and her mother driving together to an appointment

in a nearby city. The daughter had anticipated this for over a month, and she had asked her

mother to accompany her because she felt insecure driving into the city alone. Historically, the

daughter had become emotional when lost in the city and required help to find her way home.

The daughter decided to drive, and she entered the address into the GPS device before leaving

the driveway. During the car ride, the mother, who knew the area well, told her daughter with

urgency to take a turn because she was going the wrong way, and then continued to try to direct

the daughter back to the route that led to the office building. The daughter became flustered,

both because the GPS directions conflicted with her mother's and because she the city traffic

made her anxious. Although both women shared the goal of finding the office and arriving at the

appointment on time, in the moment, the conflict over following directions escalated and turned

into a significant conflict that resulted in a multi-day restriction from each other.

   WED theory recognizes that humans have feelings and emotional reactions that tend to

appear during times of stress. In this situation, however, neither woman practiced avoiding the

adversarial dynamic; because they did not work as a team, the situation spiraled out of control.

The women could have avoided the adversarial dynamic by beginning the car ride with a

conversation about the expectations of the daughter regarding navigational help. For example,

the mother could have said, "I see you are putting the address in the GPS, do you want any input

from me about directions?" or "Are you concerned about finding the office? How can I best help

you with navigating there?" This conversation would have established the mother's role and let

her know if her daughter expected help with directions. During the ride, when the mother

realized the error in the GPS directions, she could have calmly let the daughter know of the

problem and asked her to find a safe place to pull over so they could discuss how to proceed.

This approach would have given the daughter a choice to either follow the GPS a bit longer to

see if it was following an unknown but efficient route or to pull over and discuss her mother's

concerns. Neither choice is inherently adversarial. If she pulled over, the daughter would have

avoided the emotional escalation involved with being lost and trying to process information

while driving, and both women could have remained on the same team and solved the problem

together. The problem was with the GPS and finding the office building, not with each other.

Avoiding the adversarial dynamic keeps conflicts triangulated away from group or family

members and focused on the actual issue. Engaging in adversarial dynamics unnecessarily pits

loving people against each other and often results in significant damage to interpersonal

relationships.

Educator Attitude

In concert with the previously discussed educator challenges, the guiding maxim for all

Wholeistic Educators is "Embrace all feelings, and guide all behaviors" (Walsh, 2008, p. 19).

This multi-level concept provides essential guidance for both the educator and the group

member. For the educator, embracing all feelings refers to accepting all emotions presented by

group members, regardless of any opinion that the feelings are dramatic, inaccurate, unfounded, or upsetting. Embracing does not mean agreeing or acquiescing to others' feelings; instead it involves a respectful acknowledgment that individuals are entitled to their own thoughts and feelings, and that these feelings are legitimate and valid. This is a test of giving up control, because when educators have truly given up the desire to control others, they can much more easily embrace all feelings, including those that are contrary to their own. In any relationship, when one party cannot or will not embrace the others' feelings, he or she send the implicit message, "It's my way or the highway." This message tends to increase feelings of alienation and disconnection and discourages any educational opportunity. The educational opportunity that is lost is the support stated in the second half of the maxim, 'guiding all behaviors,' which is operationalized as following the Behavioral Guidelines.

Group members can benefit from acknowledging that human emotions are inherently complex and not necessarily healthy or productive. WED, like Cognitive Behavioral Therapy, encourages focus on choosing healthy behaviors, despite the potential urge to do otherwise. This focus reflects the belief that individuals can choose to *be* healthy even if they do not *feel* healthy, a powerful idea that can provide hope and guidance to those entrenched in dysfunctional thinking-behavior patterns. Very few people will state openly that they desire to be unhealthy and willingly choose to increase the amount of suffering and misery in their lives. The WED educator, much like the clinician practicing motivational interviewing (Miller & Rollnick, 2002), helps individuals define their goals and values, make choices and decisions by taking into account all their feelings, and then choose behaviors or actions that align with their volition. If an educator avoids using or reflecting on this concept and skips to directing group members in what they "should" or "must" do, then the educator risks creating or enabling an adversarial or

dependant dynamic.

Opportunities to "embrace all feelings and guide all behaviors" occur regularly in group therapy, as many group members struggle with the impulse to self-harm. For example, a tall, slight group member with many innate skills and talents shared confrontationally that he was now choosing to skip meals and snacks to avoid gaining weight. He shared his dislike of his body and his determination to make himself attractive at any cost. He stated, somewhat dramatically, that he wanted to see his bones more clearly through his skin. Upon hearing this, most traditionally taught healthy adults have the impulse to lecture the teen on the dangers of malnutrition and to create a plan to physically prevent him from acting on his desires. However, these actions would likely have silenced the teen, confirmed for him that no one understands his perspective, and discouraged future conversation about the issue.

Consider this alternative approach, using WED theory: Because the group member faced no imminent danger, the group could spend time listening to the feelings that guided his decision. Group members asked him specific questions about his plan and encouraged him to explain the connection he feels between restricting calories and being attractive. He described feeling overlooked because he was not unique in any way and lonely because others did not seem to care about him or want to be friends with him. As the group validated the teen's feelings, he became less assertive and exhibited symptoms consistent with sadness and frustration. Group members continued by asking him questions about his music and educational desires, and he affirmed that both were still important to him, although difficult to focus on recently due do his pervasive sadness and loneliness. The teen then admitted that part of him wanted to hurt himself to show others how badly he felt and to elicit sympathy and concern from others.

After the group embraced the teen's feelings and identified the central problem

(loneliness), they focused their conversation on the next step of guiding all behaviors. They encouraged the teen to explain how losing weight would attract others to him, and during the conversation he stated that, though he fantasized that people would like him better, he was not positive that they would. The group then asked him to explain any potential short and long-term downsides to his plan. Other group members contributed their concerns with his plan, helping him realize the likely prospect that his decision would further decrease his motivation and energy level and impair his ability to function at school. He also decided that his decision might create long-term health risks and alarm his parents, which could result in an inpatient placement, potentially increasing the amount of rumors and gossip about him at school and in the community. The group agreed that this outcome would likely not help the teen feel less lonely.

At no point in the conversation did anyone tell the teen that he could not act on his plan; in fact, group members repeatedly asked if the conversation bothered him and reminded him that he needed to judge for himself the importance and usefulness of the ideas they discussed. The group then explored the teen's desire to get attention from others, even negative attention, and he identified his desire as an unhealthy impulse that violated the spirit of the Behavioral Guidelines. The group reminded him that he had the option of making a healthy choice, despite his desire to be unhealthy, and that he was responsible for the positive and negative consequences that would result from his choice. The group then agreed to move on to focusing the discussion on another group member. Following the group session, the teen shared a snack and laughed socially with his peers. In future groups, he explored the possibility of restricting calories, shared his experiments with nutrition and diets, and voiced his pride in controlling his desire to give in to his unhealthy thoughts.

Educational Culture

Chapter 2 presented the theory and research behind educational culture, as part of the conceptual frame underlying the practice of WED. This section focuses on the application of educational culture as an essential intervention approach. In WED, the term *educational culture* describes the manifestation of the parenting educational ideals as recreated in a community or group setting. Individuals develop in the context of culture, and it is difficult to detangle individuals from their culture, as it forms and informs most aspects of development (Pinker, 2002). Every family, school, company, place of worship, and other group in which people regularly interact has a culture, or a set of implicit or explicit expectations about how group members should act in certain situations. Group cultures exist on a spectrum of health (defined as encouraging healthy and prosocial behaviors from its members) ranging from toxic, as Goldman Sachs was described by a former executive (G. Smith, personal communication, March 14, 2012), to positive, such as at Google, which devotes a section of its website (www.google.com/about/ company/facts/culture) explaining the team-focused aspects of the company.

In almost all groups, the leaders intentionally or unintentionally encourage the development of group culture, because other group members naturally view those in authority as models of expected behavior (Chatman & Cha, 2003). Wholeistic Education promotes the concept of dynamic leadership, a leadership strategy that encourages the group to grant authority to the individual most invested in and successfully practicing the Behavioral Guidelines. The leader in a WED group is often, but not always, one of the adults and there is no expectation that the younger are less able to follow the guidelines and promote health to all group members.

Using WED, all members bear responsibility for the educational culture of the group, and the focus on the group culture is crucial to the overall teachings of Wholeistic Education.

WED educators understand the importance of balancing the needs of the group and the needs of the individual, a key element of WED. Through dedicated practice following the Behavioral Guidelines, group members experience the balance of self-focused and group-focused prosocial interactions and internalize strategies for managing their emotions and maintaining prosocial behavior, regardless of their internal experience. The following section explains the Behavioral Guidelines in detail and describes their contribution to prosocial development.

Behavioral Guidelines in daily practice. The Behavioral Guidelines (hereafter, "the guidelines") provide a "minimally constraining" environment "based on basic human rights" (Walsh, 2008, p. 14). WED's elegance lies in its appeal to the natural human desire to avoid being controlled, a notion that works with our natural inclinations, rather than against them. The guidelines are the pragmatic actions associated with exhibiting universally desired character traits, which WED refers to as the developmental goals: *respect, dignity, responsibility, compassion* and *perseverance*. The guidelines include five sections of broad statements that encompass a range of possible positive and negative behaviors and define the often implicit expectations of basic human decency. They do not offer a directive list of what not to do; instead, they provide advice and guidance for dealing with many possible situations and interactions. Above all, the guidelines focus on maintaining safety and creating positive human interactions.

When implemented properly, the guidelines serve as a tangible example of the commitment of members in a community or family. They create feelings of safety and security

and reduce the interpersonal anxiety associated with wondering how others will behave.

Children and adolescents may be introduced to the guidelines in many ways, such as being

admitted to a program or facility, or being born into a family with an established culture based on

following the guidelines. When educational culture is established and able to sustain itself, the

introduction of new members does not prove disruptive and instead is encouraged and embraced

by the group. A child or adolescent may also be exposed to the guidelines through an outpatient

professional who works with the family to teach WED's approach and create WED culture in

their home. This type of exposure presents more challenges, as the family does not have the

visceral experience of being part of a healthy community and recreating it in their homes; the

concept of the healthy family culture remains theoretical until all family members embrace the

guidelines and give up control and adversarial relations in order to implement them properly.

Initial commitment to WED. When introducing the Behavioral Guidelines to family or

group members, the group leader or parent should begin with a clear and explicit statement:

"These are our (my) behavioral guidelines. This is the world we (I) choose to live in. Everyone is

welcome here who commits to these" (Walsh, 2008, p. 14). In a program or family, introduction

to the guidelines commonly involves a conversation with a WED educator that addresses any

questions or concerns to ensure that all group members understand the commitment they are

making. Some families and groups choose to ask new members to sign a copy of the guidelines

to signify their physical commitment to follow them. All families and groups are encouraged to

post the guidelines in a central location (e.g., on the refrigerator) and to provide each member a

copy for their own practice and reflection.

On the surface, the requirement that group members commit to the guidelines may seem

a type of control that conflicts with WED theory. However, WED educators do not force group

members to commit to the guidelines; rather, they offer commitment to the guidelines as a means of gaining access to the group and the group resources. All groups and families have the right and responsibility to protect themselves from unhealthy influences. Individuals who refuse to try to practice the guidelines, which constitute basic interpersonal decency, will likely exert an unhealthy influence on the group. Therefore, commitment to following the guidelines exemplifies an individual's desire to be healthy and to be a healthy member of the group or family. If individuals do not want to be healthy, it is consistent with WED to allow them to follow their volition and pursue an unhealthy path, but they must do so without the help of the group resources. Walsh (2008) describes the lack of group resources this way: "This generally looks like a child, in an isolated space, without cell phone, computer, TV, music devices, or any other group resource aside from those necessary for safety and health" (p. 23). This illustrates the previously discussed educator challenge, "Neither punish nor enable unbalanced behavior," which discourages coddling and over-investing in those who refuse to commit to moving toward health.

Commitment to the guidelines honors individual autonomy while offering the committed, healthy group and family members a way to ensure they are protected from and not enabling others' unhealthy behavior. In addition, humans are genetically and culturally programmed to care about avoiding stigmatization, described as the "process of global devaluation of an individual who possesses a deviant attribute," and it is believed that "stigma arises during a social interaction when an individual's actual social identity (the attributes he or she can be proved to possess) does not meet society's normative expectations of the attributes the individual should possess (his or her virtual social identity)" (Kurzban & Leary, 2001, p. 187). In other words, humans are wary of and choose to avoid people whose actions indicate an unwillingness

or inability to maintain the minimal behavioral expectations of the group. The guidelines provide an explicit way that an individual can avoid being stigmatized by the group, regardless of other social attributes. In schools and other community settings, those who struggle with physical or social limitations are sometimes ostracized and mistreated. WED groups welcome and embrace all members who commit to following the guidelines, providing a clear road map to avoiding stigmatization. As soon as an individual commits to following the guidelines, he or she is welcomed into the community as a full member, with all the rights and privileges of other members.

The Behavioral Guidelines

The action of following the guidelines, rather than the awareness of why it is healthy to follow them, helps individuals create new healthy habits. Technically, the guidelines are a proactive determination of healthy human traits and behaviors. By practicing (following) them daily, an individual will inevitably create new prosocial habits. This approach avoids the need to quantify the level of belief or acceptance in group or family members. In fact, WED puts the focus entirely on behavior and avoids addressing the unknowable, unquantifiable element of belief. Individuals can choose to follow the guidelines and act in a healthy, prosocial way even if internally they feel antisocial and disconnected. This dynamic is regularly observed in group members who struggle with the intense destructive emotions associated with personality disorders. The guidelines offer relief and hope for these individuals; they feel unable to control their feelings, but they can control their actions by following the guidelines. The spirit, a key to the practice of following the guidelines, does not describe the spirit of one's beliefs. Instead, it describes one's desire to practice being healthy; the underlying feelings and beliefs are irrelevant. In this way, WED provides a clear path for all who choose health.

The guidelines are not meant to be a tool of control or manipulation. The goal is not to catch others violating the guidelines or to look for chances to point out others' shortcomings. The guidelines constitute a commitment that people make to choose health. If individuals state that they want to be healthy, then the group as a whole bears responsibility for assisting them during times of struggle and difficulty. When a family or group member acts in a way that violates their commitment to follow the guidelines, the other group members should respond with concern, rather than scorn or disapproval. When members experience distress, a healthy group or family considers ways to assist them—which might include leaving them alone and speaking with them when they feel calmer, or humbly questioning them about their feelings and offering assistance. To address interpersonal conflicts, group members can model healthy relationships by politely offering to listen to the individuals' concerns, whenever they feel able to share them. These actions send the following message to the distressed group members, "Your health and wellbeing is most important to me, and I will do whatever I can to maintain a healthy, loving relationship with you." Walsh describes the intrapsychic process as, "increase ego involvement during times of harmony, and decrease ego involvement in times of discord," (J. Walsh, personal communication, March 3, 2011).

The next five sections provide the text of the Behavioral Guidelines, theme by theme, and explain the spirit of each guideline and its importance to prosocial development. The Behavioral Guidelines are published in the handout *Positive Group Culture: An Introduction to Wholeistic Education* (Walsh, 2008, p. 16), included in the Appendix. This document is the source for all quotations in these sections.

Maintain an attitude of respect and dignity. The first section of the Behavioral Guidelines states: "Maintain an Attitude of Respect and Dignity." This section defines the

prosocial expectations for all interactions through three, seemingly common sense principles. Respect and dignity, two of the developmental goals, are reflected on in this section because it is difficult to discretely address one without affecting the other.

Politely greet, welcome, and acknowledge efforts of all others. The Behavioral Guidelines begin with this logical introduction, "Politely greet, welcome, and acknowledge efforts of all others." As previously explained, the act of welcoming and acknowledging others lays the foundation for future interactions. Saying "Hello!" when seeing someone again after an hour, a school day, or a vacation, or upon entering a public office building is a selfless action that transmits an individual's commitment to being a polite and caring group member (even if the group is society) and sends a message that we care for our relationship with others. Very young children, as soon as they can speak, can begin to practice this habit. Greeting all others politely is a prosocial skill that encourages an attitude of respect for all.

Occasionally, a group member might avoid or ignore this first guideline. For example, a man, feeling angry, storms into the house, avoids eye contact, and does not say hello to his family members. By doing so, he sends a message; he feels upset either by something that happened previously or by the family members he just ignored. This situation provides an opportunity for the family members to join with and support the man, with the goal of helping him maintain his commitment to following the guidelines—not chastising him for coming home upset or forcing him to say hello. When evaluating the situation, a family member can first reflect on the likely etiology of the man's distress. Based on his response, the family members may decide to allow some time to pass and let him deescalate before interacting with him, or they might recognize that his distress likely has nothing to do with them, leading them to follow and greet him, reflect that he appears upset, and humbly ask if he would like to talk, wants

support, or wishes to be left alone. By refusing the adversarial impulse, the upset individual has

the chance to quickly apologize for his actions and can reap the benefit of loving support.

Frequently in group therapy, group members report a growing dissatisfaction with the

relationships in their families. The root of this dissatisfaction is often the habit of taking each

other for granted and neglecting to recognize the contributions of those around them. For

example, many children and teens do not realize the effort required to come home after working

a full day, prepare dinner, and cleaning up after the family. Similarly, parents forget the amount

of stress inherent in a given school day and the self-control required to navigate it. Both children

and parents regularly indicate that they feel unappreciated by and resentful of their family

members. This first guideline helps remind all group members to take a moment to consider

others' efforts, and it encourages the habit of approaching others with compassion.

Calmly request space if emotionally overwhelmed, the second guideline, is probably the

most helpful guideline in teaching individuals and families to avoid conflict. Many families and

groups embrace this guideline first, because it promotes a physical change that provides an

obvious relief from the expected escalation of conflict. This guideline encourages individuals to

take personal responsibility for their emotional experience and recognizes the choice they have

to avoid interacting with others when feeling upset or overwhelmed. In practice, the concept of

taking space take two forms: (a) the upset individual can request space, or (b) a concerned family

or group member can humbly ask if the upset individual would like to take space, as he or she

appears upset. Consider the example of a father and daughter talking after school. The daughter

tells her father that a friend invited her to go on a trip with the friend's family the following

weekend. In response, the father says, "You have to tell them no. Next weekend is your

Great-grandmother's 90th birthday, and she will be upset if you don't attend." The daughter

bursts into tears and cries out, "That's so unfair!" This situation offers an opportunity for the

daughter to calmly request space. Recognizing her tendency to say or do something irrational

when she feels upset, the daughter could choose to tell her father, "I need to go take space to

think this through, and I will finish talking with you about it later." Alternatively, the father (or

another uninvolved family member), noticing that the daughter is becoming upset, could ask her

if she would like to take space to let her know he perceives her agitation and does not want to

instigate a conflict. In either situation, when a family or group member requests space, the other

group members should honor the request by ceasing all further discussion on the topic until an

agreed-upon point when they reconvene.

Taking space does not signify weakness; in fact, doing so encourages a number of

healthy behaviors. It reduces the impulse to have irrational conflict, deescalates potentially

volatile discord, encourages taking personal responsibility, promotes the development of

self-discipline, and fosters thoughtful communication and negotiation. Taking space helps all

those involved to recognize when a misunderstanding or disagreement arises, and it gives them a

chance to consider any changes and negotiations that may resolve the dispute.

The spirit of taking space is violated if it is used as an avoidance strategy. For example,

in the previous scenario, while taking space, the daughter might reflect on her disappointment at

missing her plans but also recognize that her absence would hurt her great-grandmother, and that

she might regret missing the celebration. Additionally, the daughter might consider asking her

father if any part of her plans can be changed or salvaged, such as by meeting her friend after the

party or moving the trip to the following weekend. The father, while taking space, might reflect

on the way he communicated the information to his daughter and decide he owes her an apology.

After seeing her disappointment, he may recognize that he could have told her about the party sooner, and he might consider ways he can cooperate with her to help her meet her needs as well as those of the family. It would be inconsistent with the guidelines for the father and daughter to avoid further talk about the conflict, as there is a legitimate concern between them that those seeking a healthy relationship would want to address to avoid hurt feelings or relational damage.

Apologize for any possible offense, including accidents. The third component of maintaining an attitude of respect and dignity concerns the apology. Apology is a critical element of Wholeistic Education. All humans in any type of relationship run the risk of intentionally or unintentionally offending or harming each other and a healthy apology begins the process of repairing any relational damage. This topic is so important that Walsh (2008) penned what he termed *The Apology Poster* (see Appendix) to be printed on the back of the Behavioral Guidelines and explain the elements of a healthy apology.

Some people may have been raised to view the act of apologizing as a sign of weakness or submission. Wholeistic Education takes the opposite view, promoting apology as a sign of character strength and prosocial development. Group or family members might find themselves in the position to apologize for a number of reasons, only one of which is accepting responsibility for wrongdoing. If a group or family member is offended by the words or actions of another member, it would be consistent with the guidelines for the offender to offer an apology, even if the offense was unintended, such as a joke or misunderstanding. Apologizing does not mean acquiescing; rather, it involves an effort to clearly state concern for the relationship and avoid the possible misunderstanding that any malice was intended. Other potential reasons for apology include unmet expectations, changes to previously agreed upon plans, and interrupting a group member to request immediate assistance. In a relationship

operating under a control dynamic, individuals may exert their power by forcing compliance and demanding unquestioning acceptance. Those using WED's approach recognize the innate dignity of each member of the group, and thus it is consistent with WED to provide an apology that recognizes their impingement and assures group members that they are not being taken for granted or exploited.

There are two types of apologies, sincere and *insincere*, and the difference between the two is cavernous. Even young children know when someone displays genuine remorse or merely says the word "sorry." WED theory does not aim to create a list of forced hollow interactions, but to teach healthy behaviors that will in time become habits to help navigate difficult and often ambiguous situations in a prosocial manner. The reason for the apology is not to placate the injured party or to offer absolution from responsibility; it is to earnestly express concern for and humbly attempt to satisfy the injured person. Walsh (2008) describes the three steps involved in an apology, "Understand what we did wrong, Say 'I am sorry,' and Make restitution" (p. 17). Recall the previous example of the father and daughter who argued over weekend plans. Upon getting back together after the daughter took space, the father might begin with the apology: "I see that you are really upset about not knowing that we made plans for you this weekend. I am very sorry I didn't let you know about the party when we began planning it, and I am sorry that you were excited about going away for the weekend and are now disappointed. Can you think of anything I can do to help make this better?" This action does not involve altering the father's expectations of his daughter; he still requires her attendance at the family event. However, the father's attitude has shifted considerably. He recognizes that he offended his daughter, that she has the right to consider autonomous plans, and he humbled himself to repair the relationship. The daughter will likely have a positive, conciliatory reaction

to this type of apology, thereby resolving the conflict. The daughter can accept the apology and begin a negotiation to meet her needs as well as those of her family.

Use language and body responsibly. The second section of the guidelines offers advice and guidance to those who desire to remain a positive and loving family or group member, regardless of the situations they face. Where the first section stresses the prosocial actions we can use with others, this section focuses on accepting responsibility for emotional and physical impulses and encouraging proactive behaviors that avoid the likelihood of rationalizing unhealthy reactive behaviors. Stated more simply, this section of the guidelines offers a road map to navigate emotionally charged situations that often escalate into conflict. The spirit of the first guideline in this section—using language and body responsibly—is for each individual to recognize the behaviors associated with emotional reactions and embrace the choice to avoid these behaviors, particularly when feeling internal pressure to act on them. This practice directly relates to one of the mottos often reflected to those learning Wholeistic Education: You can choose to *be* healthy, even if you don't *feel* healthy.

Avoid offensive words, including those of a racial, ethnic, religious, or sexual nature. This guideline provides another example of how WED's philosophy influences its practice. Wholeistic Education strives to teach the concept that individuals have freedom to speak their minds, as long as they do not offend or harm another group member. This guideline reflects the idea that it is prosocial and healthy to choose not to offend other people. Rather than prohibiting a list of specific words, which people may or may not find offensive, WED encourages groups and families to have clear and direct conversations about offensive and non-offensive language, and to encourage all family members to uphold the same language expectations.

Many families have different language standards for adults and children, and a common source of conflict and punishment occurs when children use prohibited words for dramatic effect. Wholeistic Education practice seeks to avoid attempts to control or regulate the words group members use, and instead uses the issue of language as an opportunity to practice healthy prosocial behavior. The spirit of WED encourages group members to choose to avoid those words known to be offensive, not because they will be punished for using them (external control) but because they do not want to offend the other group members (internal motivation). To take this notion one step further, some people do not actually care about offending others and may want to behave without regard for others' feelings. This is an antisocial habit, and if an individual feels this way and wants the benefit of the group resources, he or she can practice new positive prosocial behavior habits. Many people consider language and specific word choice a reflection of personal identity and do not appreciate the relational component of language. These people might miss opportunities to make positive impressions or prosocial connections with others because they push people away with offensive language. WED provides a clear reflection to all who wish to create and maintain healthy relationships: *avoid offending others*.

In the group therapy setting, each time a new group member is welcomed into the program, the group explains the guideline about avoiding offensive words and asks each group member to identify any words, in addition to the slurs prohibited in the guidelines, that they find offensive and that the group should avoid using. Most adolescents initially express surprise at the language policy; many do not find traditional "swear words" offensive and often enjoy using colorful language. Many times, new group members find words offensive because the words have been used to insult them in the past. The word *emo*, a commonly used pejorative referring to overly emotional or dramatic adolescents, is regularly on the list of offensive words, along

with the words *gay* and *retarded* when used to casually describe people or situations. After establishing the list of offensive words, group members will remind each other to avoid using them. If a group member uses a prohibited word, his or her commitment to the Behavioral Guidelines and the group becomes apparent. When the group reacts to the use of a prohibited word by reminding the individual that the word is offensive, he or she can quickly apologize to the group to demonstrate commitment and lack of malicious intent, at which time no further action is needed. If the offending individual does not take responsibility, avoids apologizing, or expresses indifference to others' response, the group member can be reasonably questioned about his or her spirit and commitment to following the guidelines.

Refrain from using language or body to intimidate or injure. This clear and logical guideline discourages resorting to verbal and physical aggression to solve problems or handle disputes. To provide clarity, this section begins with an explanation of what constitutes verbal and physical aggression. Examples of intimidating or injurious verbal aggression include raising one's voice, yelling, swearing, name-calling or other insulting comments, physical threats, coercive statements (e.g., "If you don't do (x), I will do (y) to you"), and doling out punishment.

Physical aggression includes the many potential ways of using one's body to intimidate or injure. Society prohibits overt physical aggression toward minors; it is illegal to hit, kick, or otherwise assault a child. Assault between two adults is also a crime, though one less severely punished than child abuse. Some families use spanking as a behavioral deterrent for younger children, which, although not legally sanctioned, is also not legally prohibited at this time. Some children and adolescents physically aggress on their parents, engaging in combative behaviors during conflict when they are prevented from achieving their desires. In addition to kicking and punching, people can use their bodies in many other ways to intimidate or injure, including:

slapping, grabbing, pushing, choking, restraining, and throwing objects. Individuals may also use indirect ways to intimidate, including blocking a door and preventing egress, punching walls, and destroying property. For all ages, verbal and physical aggression signifies a loss of dignity and emotional dysregulation. If parents lose control of their bodies when upset, they teach that physical aggression is an appropriate and acceptable way to handle anger or frustration. Children and adolescents constantly observe and infer from others' behavior what the group or family considers normal and acceptable.

It is inconsistent with the spirit of WED to allow anger to be communicated as verbal or physical violence, regardless of the circumstance. Those who choose to follow the guidelines recognize the inherent violence in these common behaviors and embrace the commitment to choose alternative actions during times of conflict. Following the guidelines provides the opportunity to approach all situations without resorting to physical and verbal violence. For the sake of clarity, this document deconstructs and explains each guideline separately, but in practice, the guidelines work together to direct behavioral choices. The next example reflects the use of two guidelines in action.

Consider the common example of a teen that stays out past his curfew and does not pick up his phone when his mother repeatedly calls. The mother understandably feels upset, fearing the worst—either a car accident or engaging in risky behaviors. If the teen were in an accident and ended up in the hospital, the mother's anxiety would turn into caring, concern, and sympathy for her son's misfortune. The mother would likely not exhibit anger in the hospital over her son missing his curfew; this infraction would become irrelevant. If the teen did not have an accident and came home late due to losing track of time, depending on a peer for a ride, or avoiding his curfew, the mother's anxiety would likely transform into anger. This emotional reaction is

understandable; the teen violated his mother's expectations, allowing for an angry outburst to be

rationalized and even justified. If the mother lost her temper and became physically or verbally

aggressive with the teen, she might feel better after releasing her pent-up anxiety. However, she

would likely miss the opportunity to discover whether or not her son was in distress, possibly

due to bullying, an assault, peer pressure to use substances, or other concerns. In addition to

losing the chance to providing support, a direct confrontation might create other, more

complicated problems. Some adolescents become angry or aggressive when confronted;

although this behavior is not healthy and should be addressed, in the most extreme cases the

police may need to intervene to deescalate the situation. Ultimately, the teen would get the

message that his mother feels upset, and the mother and son would go to sleep for the night.

WED theory asserts that, by following the guidelines, the mother and son could reach the same

conclusion in a prosocial way.

Most people revert to their habits during times of stress (Duhigg, 2012). Few situations

in life provoke more stress than the potential injury or loss of a child. It makes perfect sense that

these heightened emotions can become difficult to control. In order to have a healthy habit to

count on during a stressful time, individuals must work to develop the new habits during times of

low stress. The guidelines provide a structure for handling such a stressful situation. The next

example explains how the situation of the mother whose son returns home past curfew can be

resolved by following the guidelines.

The most important thing in any relationship is safety; the fact that the son returns home

unscathed means that he is physically safe. When her son entered the driveway, the mother

likely experienced a flood of emotions, including relief and then anger. When he walked in the

door, the mother may not have felt like being particularly polite. However, using WED, it is

appropriate for her to acknowledge her son's return home, show concern, and express relief that he is not injured. She might say, "Hi, honey, is everything okay? I'm relieved that you're home safe. I was really worried about you." This strategy does not initiate a conflict as soon as the son walks in the door. In addition to modeling healthy, prosocial behavior, this approach allows the son to seek support or help if something traumatic or upsetting happened while he was out. Adolescents can experience multitude of non-obvious injurious and challenges and will likely not seek much-needed support if their parents immediately provoke a conflict about curfew. Also, the son might want to spontaneously apologize and share a perfectly logical reason for coming home late without calling (e.g., "We got a flat tire and my phone fell in a puddle while I was helping change tire. When I realized what time it was, I tried to call, but my phone won't turn on"). If the son denied any injury or concern and the mother felt angry and likely to become physically or verbally aggressive, then it is consistent with the guidelines for her to calmly request space before discussing the situation further. The mother might say, "I'm glad that you are home safe, but I'm concerned about our lack of communication tonight. I don't feel ready to talk calmly or listen to your side of the story yet, so I am going to take space and go to bed. I would like to speak with you about what happened tonight in the morning, before we begin the day." By doing this, she sends a message about the priorities of the situation: Once safety is established, then personal dignity and relationship maintenance is paramount. As in the previous version of this example, the boy returned home, clearly experienced the message that his mother felt upset, and ultimately both the mother and son went to bed.

The next morning, after having time and space to cool off and think about the situation, the mother could calmly explain her concerns to her son. It is important to provide clear reflection, which includes the impact individuals have on each other. It is appropriate for the

mother to share the worry and fear caused by her son's actions, and to ask him for ideas for how

to avoid this situation in the future, such as by the teen using a friend's phone to call home. This

approach avoids the mother and son having a conflict about the curfew, which would result

likely in the son feeling controlled by her. The spirit of the conversation is about the son

behaving responsibly, coming home so his mother can settle down for the night, and finding

opportunities to help her not worry by letting her know he is safe. This type of conversation is

more difficult for the adolescent to complete satisfactorily if the same situation happens

repeatedly. If the son has previously missed curfew and not called home several times, then his

mother should question his spirit and commitment to being healthy and following the guidelines.

Wholeistic Education promotes following through with one's commitments. If the son does not

follow the guidelines for any reason, then, as a WED educator, the mother should refuse to

further enable his unhealthy behaviors.

Calmly ask for explanation of any confusion, disagreement, conflict or concern. This

guideline works in conjunction with the other guidelines in this section to ensure healthy

communication with other group or family members. In simple terms, it encourages individuals

to first make sure that they are, in fact, in a conflict before they react accordingly. This

guideline, much like the previous guideline about taking space, promotes remaining calm and

ensuring that perceptual or emotional distortions do not impact the situation. According to WED

theory, the desired outcome of all situations is for all group members to follow the guidelines

together, not for anyone to receive punishment or be taught certain lessons. If one family or

group member has a concern about another member, WED encourages the use of humble

questioning to ascertain the nature and severity of the situation.   This practice offers a number of

relational benefits, including: modeling appropriate emotional control, potentially avoiding

conflict over a miscommunication, avoiding escalation of a situation or instigating others to do

so, avoiding unfounded conclusions, and giving others a chance to address concerns immediately

to steer clear of any relational damage. Beginning with a calm question prevents the

misunderstanding that one member is "picking a fight" with another, and it stops the member to

whom the concern is addressed from avoiding responsibility by reacting or responding

negatively to the presentation of the concern.

Rushed conversations often lead to misunderstandings and conflicts, because one or both

parties involved react to a misperception. In a typical control-based environment, an adolescent

might become hostile or agitated if confronted with clarifying questions and avoid the

conversation, assuming it will end with a loss of privileges or similarly negative consequence. In

families that have established a WED culture, adolescents will expect these types of

conversations as part of the ongoing practice of working together and understand that they are

not sneak attacks or a passive-aggressive means of tricking them into anything. These

adolescents can instead take the conversations at face value, knowing that one family member

has a concern that needs to be attended to so that the family can continue working together.

Consider the following example: A child wakes up on a Saturday morning, and the day ahead

includes a birthday party for a friend at a local swimming pool and dinner with family friends.

The child acts restless and unsettled, does not eat much breakfast, and snaps at the parent who

offers him additional food. In this scenario, the parents might feel rightly offended by the child's

disrespectful behavior and react with a pejorative response, such as, "If you don't fix your

attitude, you are not going to the party." This understandable reaction might encourage the child

to change his behavior and avoid further incident, or it might fuel an already fragile child into a

crying fit or more verbal sparring. A parent following the guidelines would respond to this

situation by addressing the child's spirit by calmly and humbly asking about the apparent

conflict, such as by asking, "Did I hurt you or offend you this morning? Are you upset with

me?" By addressing the relationship, the parent encourages the child to make an internal

assessment of his behavior and choose a response. If he feels upset about something that is

fueling his negativity, he has a clear way to let his parent know without provoking further

conflict. If the child is not actually upset with the parent but responding to another stimulus, he

can explain that to his parent and offer an apology for his behavior. Both of these reactions

would provide a forum to address the problem without resorting to an argument. If the child

does not in fact feel upset with the parent, then the parent can ask him about the actual cause of

his distress and offer to help find a way to solve the problem. By using this strategy, the parent

refuses to engage in negativity and models healthy emotional regulation and problem solving.

This guideline also proves helpful in providing accountability for previously agreed-upon

actions without provoking a conflict. Consider the example of a teen that wanted a kitten and

agreed to take responsibility for its care. However, she avoided cleaning the litter box regularly

which caused an unpleasant odor in the house. The parent in this situation might begin nagging

the teen or bribing her by refusing to allow her to go out with friends until she had cleaned the

litter box. These understandable reactions might encourage temporary compliance, but both shift

responsibility for the kitten from the teen to the parent. Using WED, the parent would first

address the teen's spirit by asking about her commitment to her agreement, such as by saying, "I

have a concern I would like to talk with you about. Is this a good time?" When the teen agrees

the time is right, the parent might ask, "What is your understanding of the commitment you made

to taking care of the kitten?" The teen would then explain her understanding, which might be

accurate or under-represent the actual requirements. If she accurately reflects the commitment

she made, then the parent could humbly ask, "Do you think you are living up to that

commitment?" This puts the teen in a position to reflect on her behavior, without initiating a

conflict. The parent simply aims to gather information to assess the cause of the breakdown

between the parent's expectations and the teen's current behavior. If the teen states that she

believes she *is* living up to her parent's expectations, then the parent can explain the concern

about the negative impact the smell of the litter box has on the family space and ask for

suggestions to address it. If the teen states that she is not behaving in a way that is consistent

with their agreement, then the parent can ask if she is willing to recommit to the agreed upon

plan or if she is unwilling to meet their agreement and would like to find the kitten a new home.

In another variation of this scenario, the teen may respond to the question about her

commitment with an underrepresentation of the actual responsibility involved, such as by saying,

"I committed to feed and water the kitten when the bowls are empty and clean the litter box

when it is full." In this case, the parent can apologize for the misunderstanding and calmly state

the expectations for the healthy care of the kitten, saying, for example, "I can see we have

different expectations for taking care of the kitten. I'm sorry if I wasn't clear when we discussed

this earlier. My concern is about the litter box, specifically the smell of it when it's dirty,

because it has a negative impact on the family environment. Do you have any ideas about what

we should do?" By asking humble questions and calmly expressing the concern, the parent

maintains the confrontation while avoiding direct conflict. The teen cannot avoid responsibility

by arguing, because no argument exists. The parent sends the messages that problems and

concerns can be addressed by working together and that expressing concerns need not involve

anger. In this situation, the teen might ask for advice, such as by asking, "How often do you

think it needs to be cleaned to not be so smelly?" and make a commitment to clean the litter box

on a schedule, or the teen might give the parent permission to remind her when the litter box

smells, to encourage her to clean it more frequently. In both scenarios, the teen takes

responsibility for her commitment without the pressure of punishment or coercion. The

upcoming chapter about the "Four Rs" explains what to do if a situation continues to be a

concern following this type of calm conversation.

Proactively cooperate. The heading of the third section of the Behavioral Guidelines

sums up the spirit of Wholeistic Education, vigilantly look for and practice ways to help yourself

and others achieve health. Families and groups that proactively cooperate create an environment

that values and supports each member. The spirit of proactive cooperation requires cultivation,

as explained in game theory (Sanfey, 2007); social decision-making includes a conceptual risk of

being exploited. Proactive cooperation requires group or family members to commit to and have

faith that choosing to help others unselfishly will encourage others to help them in return. If

people try to get as much as they can out of others while doing the smallest amount in return,

resentment will most likely build in their relationships. The Behavioral Guidelines encourage

three strategies that promote a culture of proactive cooperation: "Seek opportunities to assist;

resist urges to embarrass or undermine; Gratefully acknowledge authority of leaders; and Treat

all members as teammates, regardless of personal feelings."

Seek opportunities to assist; resist urges to embarrass or undermine. By seeking

opportunities to assist others, group members send a message with their behavior that they are a

committed member of the group or family. Depending on the individual's age and resources,

assistance takes different forms. A two-year-old does not have many practical skills, but she can

offer a hug to an upset sibling or help find a lost favorite toy. A child can avoid interrupting a

parent on the telephone or remind a parent about an upcoming field trip at school. Teens who

drive can assist by leaving the family car with a full tank of gas, noticing when food items run out mid-week, and offering to pick items up on their way home. Initially, after reading this a parent or adult might think, "I provide assistance to my kids every day; I always follow this guideline." Parents are expected to take care of their dependent children by providing them with adequate nutrition, shelter, safety, and education until early adulthood, when providing this care becomes negotiable. The spirit of providing assistance, as a parent or adult, involves a balancing act; it requires finding ways to help the day run smoothly without enabling unhealthy or irresponsible behavior.

Since adult brains are more developed than child and adolescent brains, it follows that adults have increased access to higher level cognitive processing, including impulse control, judgment, and decision-making (Lenroot & Giedd, 2006). In these areas in particular, a parent or adult has many opportunities to either assist children or teens or to embarrass or undermine them. Consider the example of an early teenager who feels conflicted about plans for an upcoming school vacation, torn between wanting to visit her own family and wanting to accept an invitation to travel with a friend's family. The adolescent is moody and indecisive, unable to concentrate on anything besides alternating between one decision and the other. The parent, becoming frustrated and wanting an answer, might resort to name-calling or pejorative statements and might eventually either choose for the teen or reject both offers as a punishment for indecision. This guideline offers another way to handle this type of situation, through education. Emotional decision making is a difficult, learned skill, rather than an innate ability. Akin to potty training, parents may find it frustrating to teach, but once children learn specific triggers and practice certain behaviors, they will gain mastery of the skill over time. The guidelines remind individuals to resist urges to embarrass or undermine. Many times, when

those urges arise, people can most easily resist them by turning the situation into an educational experience rather than a power struggle. In the previous scenario, the parent awaiting an answer about how the teen wants to spend her vacation can offer assistance, such as by saying, "It seems like you are having a hard time making up your mind. You have two good choices that could both be fun, and I'm sure you don't want to let anyone down. Would you like some help thinking through your options? If you want, we can consider the pros and cons of each choice and see if that helps." By joining with the teen, the parent removes the adversarial dynamic from the situation and provides practical problem-solving skills the teen can then generalize to other environments, including school and peer interactions. Seeking to assist others helps each family and group member to feel important and cared about as necessary parts of the family unit or team.

Babies and young children are largely oblivious to the conversations of adults around them. They do not feel self-conscious and do not mind the intimate details of their lives being shared during playgroup and at family gatherings. As children grow and become more self-aware, they also become aware of adult conversations, specifically ones that involve them. Many children and adolescents find it embarrassing to have their medical issues or current school or developmental issues discussed openly with others in front of them. Additionally, the use of nicknames and pet sayings from early childhood, while acceptable in the family home, may become embarrassing and undermining when used in front of peers, relatives, or other adults. If adults remain mindful of this, they can check with their children over time and seek feedback about acceptable topics to discuss publically and topics the child finds embarrassing. Children and adolescents can also become particularly adept at using language to embarrass or undermine; language serves as one of the interpersonal weapons they can use in a conflict. Parents and other

adults can extinguish this behavior by modeling cultural norms that encourage and reward

proactive cooperation and assistance to others while firmly and clearly renouncing the use of

embarrassing or undermining behavior and denying in-kind retaliation.

   Gratefully acknowledge authority of leaders. In almost every group or family, some

members have more responsibility than other members. This guideline builds on the ideas

expressed in the section on educational culture, as it reflects the importance of acknowledging

the dynamic leader of the group at any given time. Many adolescents find it difficult to feel

grateful about a parent who curtails their desired freedom, an understandable reaction in a

traditional control-oriented relationship. In families and groups that use the Behavioral

Guidelines and avoid exerting control over each other, a dynamic emerges. In a WED family,

when a parent brings a concern to their children or denies an in appropriate or infeasible request,

the child or adolescent will likely accept the decision without complaint, so long as they believe

their parents are not exploiting them or attempting to control them in any way. This dynamic

exists because the child acknowledges that the parents, as group leaders, bear responsibility for

group resources and likely have more information about what is in the best interest of the group.

In instances involving substance use, for example, adolescents expect that their parents will be

unhappy to know that they are mistreating their bodies and putting themselves in potentially

unsafe situations. Social norms dictate that healthy, loving parents will attempt to prevent their

children from using substances. Many adolescents will easily grant this authority to their parents

and agree that, as a group leader modeling health to the family, the parent should address the

situation promptly and use the available resources to discourage further substance use.

   Treat all members as teammates, regardless of personal feelings. This guideline

encourages the concept that no conditions can justify antisocial or unhealthy behavior. Treating

members as teammates implies following the Behavioral Guidelines equally in interactions with

all members. WED theory maintains that it is an unhealthy habit to rationalize the mistreatment

of others under any circumstance, including restriction. In a peer group, this guideline addresses

the unfortunately common social practices of bullying members perceived as inferior and

slandering others during a quarrel; neither is ever acceptable. Also, this guideline reminds group

leaders of the importance of modeling this prosocial behavior both in the group and in broader

social contexts.

In families, modeling this guideline teaches children that emotional reactions do not

justify disrespectful or undignified treatment of others. Individuals can remain dignified and

respectful in their interactions even if they have a difference of opinion or feel frustrated,

offended by, or angry with another group member. This especially applies to divorced parents,

because there's often an adversarial relationship between the parents. Negative or disrespectful

treatment between divorced parents may contribute to the data indicating that divorce is a factor

correlated with severe impairment and/or distress due to a mental health disorder (Merikangas et

al., 2010). It requires practice and discipline to avoid the unhealthy urge to embarrass or

undermine others during a conflict. Families can also apply this guideline to the broader social

context of culture and politics by encouraging thoughtful exploration of opposing viewpoints and

ideologies while avoiding divisive, reductionist

name-calling or dehumanizing ridicule. Modeling respect for others' cultural and political

backgrounds encourages the thoughtful creation of personal beliefs while teaching children and

adolescents how to avoid the liabilities of blind faith, the importance of which was discussed in

Chapter 2.

Carefully attend to health and safety. The fourth section of the guidelines focuses on essential elements of health and safety that, if complied with, prevent more typical control-oriented rules. If all group or family members carefully attend to the health and safety of themselves and those around them, this reduces the likelihood that benign neglect will lead to accidents. Many parents understandably feel anxious about their children's health and safety; many children and adolescents seem quite cavalier about their health and safety, likely due to their underdeveloped prefrontal cortex that regulates impulse control, judgment, and decision-making skills. This can create a dangerous situation in which a parent sets overly restrictive rules as protection and the child or adolescent invests time and energy in finding ways around the parent's well-meaning rules. Unfortunately, children and adolescents then focus on how to get away with breaking a rule rather than any critical understanding of the rule itself. The Behavioral Guidelines provide suggestions for addressing the truly important health and safety issues common to families and groups, and they discourage the use of additional controlling measures without engaging in a negotiation with other group or family members.

Alert an adult to any physical pain or danger. This guideline seems self-explanatory at first glance. Legally and, most would agree, ethically, parents have responsibility for their children's health and safety, and adults in any care-giving role are responsible for those they supervise. Logically, then, adults should be notified of physical pain or danger so they can assess the threat level and make a decision about the best course of action. However, if an adult is prone to reacting emotionally, children and adolescents may avoid alerting the adult in order to prevent further problems. Children and adolescents sometimes have differing opinions as to which situations can be handled independently and those that require intervention by an adult. Conversations about these situations can help addressing this concern. Many parents would

experience a reduction in anxiety if they felt confident that they would be made aware of any

potential danger or threats to their child's health, and many children would benefit from the

validation of knowing their concerns would be appropriately addressed.

Physical pain or danger can refer to a number of tangible and intangible things. For

younger children, physical pain might mean bumps, bruises, or illness, and danger might be a

sharp edge on a broken toy or high-temperature bath water. For children who are babysat or

attend daycare, danger might mean corporal punishment, inappropriate touch from a caregiver,

or fear of aggression or mistreatment by other children. If children are confident that they can

report physical pain or danger concerning inconsequential issues without fear of reprisals,

retaliation, or being ignored, then they may feel confident in reporting issues of a greater

magnitude.

In addition to the potential health concerns related to puberty, adolescents face an

ever-expanding world of physical pain and danger, both self-inflicted and at the hands of others.

As children have more unsupervised time, the possibility of engaging in unhealthy behavior

increases. It would be extremely difficult and unpleasant for all involved to continue the level of

around-the-clock supervision for a child or adolescent that is expected for an infant. As children

grow, adults can teach and encourage them to take responsibility for their own health and safety,

including by early reporting of aggressive or bullying peers. Children and adolescents may

experience physical pain due to illness, injury, or assault, and they may experience suffering

associated with mental health conditions such as depression, anxiety, mood disorders, or trauma.

Bolger, Downey, Walker, and Steiniger (1989) reported their findings on the onset of suicidal

ideation in children and adolescents as beginning as early as age nine (p. 186). The National

Institute of Health reported in 2007 that 6.9 out of every 100,000 adolescents aged 15-19 years

old commit suicide (retrieved August 16, 2012 from: http://www.nimh.nih.gov/health/

publications/suicide-in-the-us-statistics-and-prevention/index.shtml). If more children and

adolescents alerted adults to the emotional danger they faced, these numbers could be reduced.

Self-harming behaviors such as substance use, cutting, eating disorders, and promiscuous sexual

behavior could also be treated earlier if children shared the impulses behind these behaviors,

rather than allowing them to grow into self-destructive habits. Alerting an adult to these types of

physical pain or danger requires a culture of openness and an expectation of sharing both joy and

pain.

   Control body movement such that self or others are not injured. Taken at face value,

this guideline seems straightforward. Except in extreme situations where the safety of others is

at risk, it is always a violation of the guidelines to injure another person, either accidently or

intentionally. If, for example, a boy accidentally injures another group member, a WED

educator should humbly ask him if he feels he is controlling his body to prevent others from

injury. If the boy desires to be a healthy and positive member of the group, then he would likely

offer an apology immediately. If injurious accidents happen repeatedly and seem due to

negligence, then the injured group or family members have the right to ask for a restitution plan

that addresses how these "accidents" happen, so they can be avoided in the future. For example,

a hyperactive boy jumps over the back of the family couch when sitting down, accidently kicking

the other person sitting on the couch. The boy did not intend to hurt anyone. After realizing he

kicked someone, he immediately apologized and the family moved on. If this same situation

happens again, then an apology would likely not suffice, as this would not provide assurance that

the offense will not happen again. Following the apology, the family should ask the boy if he

feels he is following the Behavioral Guidelines and if he has any ideas about what he could do to

prevent himself from kicking someone again. In this way, the family members join with the boy,

rather than embarrass or undermine him, and the family works together to solve the problem.

Once the boy suggests a satisfactory solution, the issue is resolved. If the situation arises again,

then the boy will face an increasingly difficult conversation to assure the other family members

he can remain in the group space with access to the group resources. The boy will likely

conclude that he should avoid jumping over the back of the couch when it is occupied, not

because he has to, but because he does not want to risk additional injury to his family members.

If someone is injured intentionally, then WED's conflict resolution strategy, the "Four

Rs," (explained in detail at the end of this chapter) should be employed. As in cases of

accidental injury, the WED educators' goal is not prevent injury of others through control or

coercive methods but to apply the healthy pressure of prosocial relationships to teach all

members that they may never injure others maliciously, despite their feelings and impulses. The

guidelines discussed previously— calmly request space if overwhelmed, refrain from using

language or body to intimidate or injure, and calmly ask for explanation of confusion,

disagreement, conflict, or concern—provide strategies to use during upsetting or emotional

situations that will prevent resorting to violence and, if aggressive behavior begins, will help

others to avoid retaliating or escalating the conflict.

A less straightforward application of this guideline involves cases of intentional

self-injury. Focusing on and maintaining the spirit, rather than the letter of the guidelines can

help effectively address suicidal ideation and self-harming behaviors. Wholeistic Education

never encourages any type of self-harm as an appropriate coping mechanism. WED does

concede that, in some cases, harm-reduction methods (Inckle, 2011) such as replacing more

dangerous behaviors with less dangerous ones or reducing quantity and severity without

extinguishing the behavior entirely can be consistent with the Behavioral Guidelines and reflect healthy practice. The most important aspect of WED is the commitment of each group member to healthy practice. A group member could relapse into self-harm when in distress without necessarily violating his or her commitment to following the Behavioral Guidelines. In this type of situation, the relationship between family or group members is essential. Parents often ask how to respond to situations like this, wondering if evidence of self-harm, a clear violation of the guidelines, is cause for considering the "Four Rs" and potential restriction. The answer is sometimes yes and sometimes no, and families or groups must rely on their intuition to decide. In families and groups that practice the guidelines, the leaders must maintain commitment to their own personal practice as well as that of the group. Leaders who lack personal commitment cannot effectively assess others' practice. An adolescent might engage in self-destructive behaviors to prove a point or to manipulate the family in an unhealthy way, but it is just as possible that the adolescent might engage in self-harm while maintaining commitment to the guidelines and reducing their self-destructive behaviors over time. The control and punishment dynamic, inherent in the desire to control frightening and unhealthy behavior through punishment or coercion, must not become the default option for handling difficult situations in a healthy family or group. When all members in a group or family display genuine teamwork, they possess more than enough information to make these types of difficult decisions.

An adolescent who struggles with depression and engages in superficial cutting and isolation should be approached kindly but firmly and asked, "Do you think that cutting and isolating yourself is a healthy and safe way to live?" and, "Are you willing to practice following the guidelines even though it is really hard?" If the adolescent is not willing to practice, then other external controls might become necessary, such as hospitalization or a therapeutic

residential program. Even group members suffering from significant mental health issues can

commit to practicing the guidelines in small ways. For example, a depressed adolescent can

agree that isolation is unhealthy and commit to coming out of his or her room once an hour for

five minutes to practice connecting with the family. Following through on this commitment

would constitute healthy practice.

  Wear activity-appropriate clothing. Like many of the other guidelines, this guideline

aims to encourage healthy practice through a spirit of self-respect and personal responsibility. In

families with adolescents, this guideline can potentially be misused as an implement of control.

The term *appropriate* is a loaded word; each person has his or her own idea of what constitutes

appropriate attire in a given setting, which may or may not be consistent with others around

them. Different generations and cultures have different expectations for member attire in

varying circumstances and, in each group, the community pressure to conform to the expected

dress code can prove overwhelming. This guideline focuses on safety and does not seek to

privilege one group's norms over another's. By wearing activity-appropriate clothing, group

members have a better chance of avoiding injury to themselves or others. If a member's clothing

raises a concern but does not create a safety issue, it does not violate the guidelines but may still

be discussed and possibly negotiated. Families and groups can best avoid conflict over

appropriate clothing by having ongoing conversations, during times of calm, about each group

member's understanding about what constitutes activity-appropriate clothing in different

situations. These conversations will likely change over time, to reflect age-appropriate norms.

  Many parents express frustration over teen clothing styles and the hyper-sexualizing of

children and teens through clothing. Many adolescents, when given the chance, will choose

unflattering, tight, or overly revealing outfits because they are made by a particular brand or are a

popular style in their peer group or desired peer group. Although undesirable by many parents, this does not usually pose a legitimate safety concern. Consider the stereotypical example, memorialized in many sitcoms over the last 30 years, of a father sitting on a couch yelling irritably to his teen-aged daughter something along the lines of, "You're not leaving the house dressed like that! Go back and change into something else!" Often, when the daughter returns to her room, she simply hides her preferred outfit in her bag to change into later, or she puts additional clothing over the offending item to create the illusion of compliance. The savviest teens avoid such interactions altogether by predicting which garments will prove contentious and preemptively hiding them from their parents. This unhealthy dynamic exemplifies mindless rebellion, one potential damaging outcome of a controlling environment.

In a family, each member might have a different understanding of what is appropriate in different situations. In the spirit of health, education, and teamwork, it is consistent with the guidelines to have age-appropriate conversations with children, even young children, about appropriate attire for different circumstances. Using WED, parents should allow children to choose their attire so long as it remains safe and non-offensive. Some safety concerns are physical, such as not wearing a helmet when riding a bicycle, while others are more theoretical, such as a teenage girl wearing a revealing micro-dress to an outdoor concert. Offensive attire might include T-shirts with slogans that incite violence, promote a group slur, or state overly sexual messages, or other clothing that promotes an affiliation with a gang or other offensive group. Encouraging open discussion with children and adolescents about their clothing choices and humbly questioning them about the messages or statements they wish to make with their attire can offer insight into the reasons behind their decisions. Also, if a parent or group leader is concerned or offended by a particular item or style and provides clear reflection, then by

avoiding exerting control over the adolescent, he or she has the opportunity to consider if that

item is truly consistent with his or her identity and can choose to comply with the parent's

request either to remain dignified or as a sign of respect.

In cold climates, a common control dynamic involves the wearing of jackets, hats, and

other warm outerwear. The compulsory nature of jacket wearing likely originates from a

benevolent impulse to help children and adolescents avoid discomfort. Sadly, that impulse

sometimes becomes distorted and results in an ideological battle between adults and children,

often promoting rebellion or conformity. This common conflict bears further exploration, as it

raises these key questions: Why, as adults, do we try to force children and adolescents to wear

jackets? And why do we become offended or, in extreme cases enraged, if they refuse to do so?

In the interest of children's health and education, it seems most appropriate to teach them to

check the weather, think about the demands of their day, and make their clothing choices

accordingly, as do most adults. Adults can help young children to intuit their insulation needs,

while older teens can likely make these choices independently. In their daily lives at school,

many adolescents move from one warm indoor space to another, with only brief outdoor

transitions to and from the car or bus. If a winter coat is not a battleground object, it can be

considered on a case-by-case basis. If an adolescent chooses not to take a coat and ends up

feeling cold, then he or she will likely wear more clothes or bring a jacket the following day. If a

family takes a trip to a place with unpredictable weather, the parents might choose to proactively

cooperate with their children by bringing them warm outerwear in case they need it. Another

common situation happens at school, because some schools require that all children have a full

set of winter clothes to play outside at recess. Some children naturally run warmer than others

and become overheated in snowsuits. These children may become drenched with sweat during

recess and feel uncomfortable for the rest of the day. Noticing this concern and joining with the child to find ways to address it models healthy relationships, sends the message that the child's needs are important, and encourages active and pragmatic problem solving. Most importantly, this strategy discourages children from seeking alternative measures such as "losing" their jacket or "accidently" leaving it at school.

Keep body properly groomed (e.g., daily bathing, teeth brushing, etc.). As explained in the section on providing clear reflection, proper hygiene is a group issue insofar as it impacts the group space. If a group or family member's shoe, clothing, or body odor offends others, then it is appropriate to reflect this to the group member and offer assistance, if necessary. Besides being aromatically offensive, poor hygiene can become a health concern if skin, hair, teeth and nails are not properly taken care of. People sometimes confuse cultural and societal expectations about style with hygiene; like activity-appropriate clothing, activity-appropriate hygiene merits regular discussion. Adults often present the concept of responsibility as a negative to children, such as by saying, "You are so irresponsible; you didn't put your clothes in the laundry!" Many children in group therapy express frustration over being told repeatedly that their behavior is not responsible, when in truth it is not compliant. When this happens, the concept of responsibility becomes synonymous with conformity, while in fact the two are completely different. This guideline offers the opportunity to teach responsibility pragmatically; by encouraging and modeling the healthy behaviors associated with proper grooming, adults can help children practice actual responsibility in an age-appropriate way.

Rather than creating a mindless routine, such as nightly bathing, parents can teach children how to think critically about their day to determine if they need to bathe in order to be healthy. Parents can also model the thought process they use in deciding their bathing schedules,

including morning vs. nighttime bathing and work vs. weekend. Some children naturally enjoy

water more than others, and they may opt for daily baths regardless of their need. Other

children, especially those with sensory issues, abhor the feeling of being wet or submerged in

water and will have aggressive meltdowns during bath time. If parents focus on the goals of

health and safety, not control, then they can easily replace the dogmatic ritual of nightly bath

time with a negotiated plan for proper grooming that takes the child's sensory issues into

account. In another common scenario, adolescents who are expression depression often lack the

motivation to maintain proper hygiene. Using the Behavioral Guidelines provides an excellent

opportunity for these teens to practice being healthy even if they feel unhealthy. If adolescents

commit to working toward health, they can be encouraged to establish and adhere to a hygiene

schedule, despite their desire is to stay in bed under the covers. This type of practice offers

tangible evidence of working toward health.

   Take good care of all furniture, equipment, facilities, and environment. The final

guideline concerning health and safety casts a wide net. This guideline reflects that all group

resources should be taken care of, because they belong to the entire group resource and should

not be damaged or ruined by one person. This guideline promotes daily opportunities to teach

and practice responsibility in a school, program, or family setting, and it increases the range of

responsibility to include both public and personal property. In a family that follows the

guidelines, the dwelling and all of its contents (furniture, belongings, utilities, etc.) are

considered a privilege, not an entitlement, of being part of the family. Parents can teach children

from a young age to show respect for the family by taking care of their personal environment,

and, as they age, the group environment. WED encourages all family members to share

responsibility for maintaining group spaces, so that each member understands the work required

for daily living. This happens most effectively when parents model desired behaviors and

establish a family culture that promotes respect for people and the environment. Situations may

arise in which family members disagree over what constitutes taking "good" care of resources.

Families should address these disagreements through calm discussion, working together to

negotiate a resolution.

Most children and adults intuitively understand the idea of caring for resources in their

own homes; for instance, few people would scrawl graffiti on the walls or mirrors of their

personal bathroom. However, this same intuition does not always apply to schools, residential

programs, or other group settings. Particularly in non-voluntary programs, there can be an

attitude of disrespect to "get back at" or show displeasure with those in charge. If students or

clients have little or no investment in the community or culture, then vandalism and neglect will

likely result. When all group members share a commitment to protecting the group resources,

those resources will remain in better shape and cost the group less in the long run. Adults can

cultivate respect for group resources by encouraging investment and pride in the environment;

they can accomplish this by making all members responsible for cleaning and maintenance and

by involving them in decisions about procuring additional group resources. When all members

vigilantly defend the group resources, then the culture will naturally promote healthy, prosocial

behavior while refusing to protect those who desire to aggress against the community.

Honestly give best effort. The fifth and final section of the guidelines begins with a

personal challenge. Individuals alone know for certain when they honestly give their best effort

or when they hold back physically or emotionally. Others might question, assume, or predict a

member's effort, but they can never know for sure. This guideline promotes a personal

investment in health, encourages all group members to assume that others are giving their best

effort, and reminds members to show compassion, not anger, towards others when distress

detracts from the effort they put forth. Individuals can fall back on this guideline during times of

stress or difficulty and use it to guide their course of action.   For example, many families who

participate in family therapy will bring a conflict to their session, seeking advice on how to

resolve it using the Behavioral Guidelines. Consider the example of a fourteen-year-old girl who

arrived at a family therapy session upset, stating that her mother was not following the

guidelines. Her mother had denied the girl's request to go out for the evening, unsupervised,

with a group of older male peers. The teen stated that her mother was controlling her and

thereby violating the guidelines. She sought assistance from the family therapist in convincing

her mother of her violation. In the ensuing discussion, the mother agreed that she had prevented

her daughter from going out. The mother also stated that she did not attempt to express her

concern and explain her reasoning, but responded to her daughter's request with a summary

rejection. Before delving into the specifics of the quarrel, the therapist asked both the mother

and daughter, "Did you honestly give your best effort last night?" This question is key because

parents often justify behavior based on the perceived danger of a situation or the personal

importance it carries. For parents using traditional control-oriented parenting, this would easily

qualify as such a situation and justify a unequivocal response of "No!" without further

conversation. This response makes sense if one believes that parents' job is to physically prevent

danger by controlling their children's behavior. Unfortunately, the message the adolescent

would likely learn from the interaction is to use more deception to get what she wants.

Using WED, the goal of parenting shifts from control to education, and an alternative

path becomes available. Because the adolescent brain is not fully developed, adolescents

frequently lack forethought and may undervalue risk levels in their decision making.   In the

current example, if the teen and her mother had honestly given their best effort, they each would

have made concessions as part of their commitment to being a healthy family member. As the

situation unfolded, the teen had opportunities to take responsibility for the unusual nature of her

request, calmly ask for an explanation of her mother's concerns, and gratefully acknowledge her

mother's authority. Her mother had a chance, before deciding, to calmly gather information to

validate the daughter's request and to seek an opportunity to help her daughter think through the

pros and cons of her appeal. This strategy requires avoiding impulsive reactions during times of

stress and conflict and instead taking the time to ensure that a prosocial, healthy educational

spirit is guiding the interaction. Returning to the current example, both mother and daughter

responded to the therapist's question by stating that they had not honestly given their best effort

and had therefore violated the guidelines. The remainder of this section explains the behavioral

manifestations of honestly giving one's best effort and applies each strategy to this example.

     Calmly communicate all perceived offenses. The first guideline in this section

recognizes two important aspects of honestly giving one's best effort: accurate self-assessment

and clear communication. By calmly communicating all perceived offenses, group or family

members first recognize an issue that offends them in some way and then share it with others to

determine if it stems from a misunderstanding or misperception. Self-assessment provides an

opportunity to acknowledge and address emotional reactions to conversations or situations in a

prosocial way, without relying on impulsive reactions that might unintentionally create conflict.

This guideline resembles a previous guideline—Calmly ask for explanation of any confusion,

disagreement, conflict or concern—in that both promote gathering information before reacting;

however, this guideline has the additional, specific purpose of encouraging offended individuals

to take responsibility for their feelings and communicate them calmly. This strategy may follow

the calm questioning of confusion or concern, or it may happen independently.   By calmly

communicating when one feels offended, the offender has the opportunity to address the

situation immediately through apology and/or explanation, and the momentum of a conversation

can move from conflict to conciliation and compromise.

In the previous example of a conflict over a teenage girl's evening plans, the mother and

daughter could have avoided engaging in conflict by recognizing and calmly communicating

their feelings of being offended. The daughter reported that she felt offended that her mother

vetoed her request to go out with her friends based on the friends' gender, without gathering any

additional information about them or their plans. The mother felt offended that her daughter

made a plan that differed from any other typical social engagement and tried to pass it off as a

routine situation. The mother also reported feeling offended that the plan arose at the last

minute, and that the daughter pressured her in an unhealthy way with her escalating voice and

behaviors. The mother recognized that, because she felt manipulated, she had reverted to her old

habit of control to address a situation that felt dangerous and uncomfortable. In this interaction,

the emotion-driven conflict dominated any opportunity for education.

Earnestly participate in just resolution of dispute. The second guideline in this section

reminds all who desire health to sincerely cooperate with others to resolve conflict, rather than

ignoring, avoiding, or allowing one person to get satisfaction while others suffer. In healthy

relationships, disagreements should not result in one person achieving a gain at another's

expense, with little or no emphasis placed on the educational value of the resolution.

Unfortunately, this type of relational pattern pervades many parent/child and teacher/child

interactions. Using the Hobbesian concept that human nature must be controlled, it makes sense

to enforce rules and unquestioning conformity, without investing time and energy to determine

the cause of a dissent or disagreement. However, using WED and embracing its directive to

"Embrace all feelings and guide all behaviors," adults seek to understand and honor the feelings

behind any dispute.

Returning to the previous example of the conflict over a daughter's evening plans, the

mother, when first asked for her permission, responded with an unequivocal "No!" which

prevented her daughter from leaving the house. This response violated the guideline to calmly

ask for an explanation of any confusion, disagreement, conflict or concern. Following that

interaction, the mother attempted to explain her reasoning. The daughter responded with

disrespect and avoidance, which also violated the guidelines but made sense due to the

interpersonal injury inflicted in the interaction.   Ultimately, when the daughter retreated up to

her bedroom for the night in a cloud of anger and resentment, the educational and relational

opportunity of the situation was replaced with increased suspicion and distrust.

If both family members were "earnestly participating in just resolution of dispute," then

the situation could have played out differently from the outset. When the daughter asked to

leave the house with older male peers, a request she likely knew would cause her mother concern

and lead to a dispute, she could have prefaced it by acknowledging its unusual nature validating

her mother's reluctance. The mother, in turn, could have refrained from an impulsive negative

response and instead initiated a discussion about her daughter's desires and her own safety

concerns. By using clear, Socratic questioning, the mother could have determined if the situation

was as dangerous as she initially perceived it, and she could have given her daughter a chance to

address her concerns and attempt to reach a compromise. If the mother and daughter could not

find an acceptable compromise, the outcome would stay the same as in the original

interaction—the daughter would stay home—yet the emotional and relational process for both

family members would differ drastically. Originally, both mother and daughter left the

interaction feeling angry and resentful. By working with her mother to reach a fair decision, the

daughter would have insight into the process her mother used to determine relative safety.

Although she would still feel disappointment, the daughter would likely harbor less anger, as it is

difficult to maintain anger at one whom clearly and lovingly attempts to act in one's best interest.

Put education, wellness of self and others, and responsibility to group ahead of

personal image and interests. The final Behavioral Guideline clarifies WED's philosophy of

dynamically balancing the needs of the individual with the needs of the group. Many people,

adults and children alike, find this balance difficult to achieve. If individuals regularly sacrifice

their needs to meet others' needs and wants, they may negatively impact their mental or physical

health and therefore violate the guidelines. Conversely, if individuals selfishly demand an

excess of group attention or resources, they too violate the guidelines. Many adults tend to have

difficulty with this guideline if they are susceptible to peer pressure, specifically if they make

demands of their children or themselves based on the desire to please or satisfy others. The

remainder of this section provides an example of each type of violation to help illustrate its

importance.

When individuals are too selfless and sacrifice their health in an effort to be efficient or

avoid conflict in their group or family, although their spirit might be noble, they violate the

guidelines by not modeling healthy behavior and by enabling other members' unhealthy habits.

For example, in some families one parent takes on the lion's share of the family responsibilities.

That parent often assumes all responsible for household chores, such as budgeting, shopping,

cooking, and cleaning, as well as child-rearing tasks such as transportation, school consultations,

extracurricular activities, behavioral issues, and homework enforcement. In many cases, this

parent also works outside the home. Many parents in this situation exist in survival mode, using all their energy to make it through each day. They frequently experience physical health issues due to the high levels of stress they experience daily, and they may, understandably, seek the path of least resistance to accomplish their responsibilities. When parents in this situation decide to manage their overwhelming workload by exerting control over all aspects of family life and removing group participation in daily tasks and problem solving, they martyr themselves and, in doing so, violate the spirit of the guidelines. Each member of a group or family is important to the group functioning as a whole. If one person takes on all responsibilities and determines all the rules and actions of the group, then the other members will have little or no investment in family relationships and will not receive prosocial education. Consider another common example: a child regularly speaks disrespectfully and aggressively to her parent, who either accepts the verbal abuse without comment or retaliates with disrespectful language and then ignores the incident, ultimately pretending that it never happened. The parent justifies these actions by stating he feels "too tired" to talk to his child. Each time the father pretends to ignore an incident like this, he builds up resentment toward his child and becomes more likely to react punitively to future incidents and develop an overall negative image of the child. The child, on the other hand, learns unhealthy lessons—that relationships are one-sided, and that there is no difference between healthy and unhealthy communication.

The counter-example to the previous scenario can be explained through the child in this family dynamic. It is important for children to feel like contributing members of their families. When parents manage children, rather than educate them, children often develop an attitude of entitlement. This attitude stems from children's unhealthy understandings of how relationships work and what they expect their parents to provide. Entitled children seem to lack understanding

of group resource management. They constantly expect more than their share of group resources and provide less than their share of the group investment, actions that contradict the spirit of the guidelines. It is true, children and adults contribute differently to group resources and that fiduciary responsibilities fall squarely on the shoulders of the adults. However, school-age children and teens can assume many other responsibilities associated with daily family functioning that can make an appreciable difference to their parents, such as waking up on time, using appropriate self-care and hygiene, asking for help with homework, helping to keep group areas clean, and taking responsibility for their belongings. Each of these tasks can also be performed by a parent, or argued over and then performed by a parent or a hostile child. In families committed to following the Behavioral Guidelines, if children did not attend to any of these reasonable tasks, then it would be appropriate to question their commitment to the final guideline—putting the needs of the family ahead of their personal image and interests.

A particularly challenging application of this guideline concerns situations when outsiders, who are unaware of or not committed to following the Behavioral Guidelines, enter into the family dynamic and apply pressure on parents to conform to traditional, control-oriented parenting styles. A common example occurs during the holiday season, when many extended families and friends get together and visit. Well-meaning relatives who believe in control-oriented parenting are often stunned and concerned about a parenting strategy that allows children a significant amount of freedom as long as they follow the guidelines. For example, in family therapy, a family shared their concern that their daughter stated she did not want to attend Christmas dinner. Initially, the parents wanted to force her to attend, explaining that they felt it rude for her to avoid the family meal. When the therapist encouraged the family to explore their real concerns about the dinner, the daughter indicated that she felt that her grandmother was very

disrespectful toward her, regularly making offensive statements about her hair and clothes in front of others that made her feel uncomfortable. The parents shared that if their daughter did not come to dinner, they would feel embarrassed and would face an uncomfortable inquiry and judgmental parenting advice from their relatives. Upon reflecting on the guidelines, the parents agreed that if they forced their daughter to attend the dinner, they would be violating the guidelines by putting their personal image and interests over her justifiable concerns. When the therapist advocated that the family try to find a compromise, the daughter asked if her parents would speak to the grandmother ahead of time and ask her to avoid making offensive comments. If the grandmother agreed, the daughter thought she would try to attend the family dinner, though she requested permission to go to her room if she became uncomfortable. The parents agreed to this compromise, thoughtfully apologized for the small-mindedness of some of their relatives, and affirmed their support for their daughter's individuality.

The spirit of the Behavioral Guidelines promotes that any situation can be worked through in a prosocial way, through calm conversation and willingness to compromise. The next section will explain in detail the conflict-resolution strategy that complements the guidelines, known as the "Four Rs."

The Four Rs; Resolving conflict with WED

The Four Rs—*Reflect, Remind, Restrict*, and *Reintegrate*—provide a framework for evaluation and action when group or family members acts in ways contrary to their stated commitment to following the Behavioral Guidelines. The Four Rs are a critical component of Wholeistic Education and serve as a sequential guide for addressing any conflict that arises. Walsh's (2008) "Basic Steps for Positive Cultural Leadership During Conflict" (see Appendix) is the section of "First Things First" that explains the Four Rs to parents. Group or family

members are encouraged to use the Four Rs whenever they have a concern about another

member's commitment to following the guidelines. As discussed in earlier sections,

commitment to following the guidelines is the non-negotiable expectation for gaining and

maintaining access to the privileges of a family or group, which all members have the right and

obligation to defend. Parents and group leaders who embrace WED agree not to punish nor

enable imbalanced behavior, and this commitment promotes only one option: to encourage

healthy behavior and refuse to support unhealthy behavior. Individuals make a personal choice

to commit to following the guidelines in order to be healthy and to receive access to the group

resources. If group or family members cannot or will not follow the guidelines for any reason,

the educator attitude reminds WED educators to begin by "Embracing all feelings, and guiding

all behaviors," providing the struggling member with the loving choice to practice following the

guidelines or choose restriction from the group until choosing to recommit. This section

explains each of the Four Rs individually, using a vignette to illustrate it in practice.

     Reflect. WED consistently encourages group members to avoid controlling others.

Many parenting therapeutic styles, including time-outs, grounding, and level systems, promote

the impulse to control others and embrace it as a key component. As previously stated, the WED

approach eschews seeking or maintaining control. The first of the Four Rs, reflect, helps

individuals avoid the controlling dynamic by advocating that concerned group members respond

to situations mindfully, not automatically. This first step of reflecting offers time for concerned

group member to evaluate two separate elements of the perceived wrongdoing internally. First,

they must determine if the behavior in question truly violates the guidelines. When reflecting,

individuals should consider their needs, wants, and state of mind, as these elements can affect

how people perceive the importance of a situation and the nature of a concern. For example, a

tired and hungry father who returns home after a long and stressful work day might immediately

feel overwhelmed by his child and a friend practicing their heavy metal guitar duet for the

middle school talent show in the family living room, causing him to feel entitled to demand that

they stop practicing immediately. If the father paused to reflect before reacting, he might

consider that, although loud and irritating, his child's behavior does not violate the guidelines.

The father might then acknowledge that, if he rushed into the living room to demand that the

boys stop practicing, his himself would be in violation of the guidelines. Following the

guidelines does not mean that the father must simply suffer and accept the current situation;

instead, he should employ strategies to avoid the adversarial dynamic while helping all family

members to meet their needs.

Stopping to reflect also gives people time to determine the appropriate, non-adversarial

course of action to follow to resolve the conflict. In this example, the father finds the noise of

the boys' music unbearable and feels that either it must stop or he must leave the house until they

finish. After pausing to reflect, he might calmly enter the living room, greet the boys, and ask if

he can speak with them. When the boys stop playing, the father could ask how long they have

been practicing and how much longer they hope to continue. By doing so, he gathers

information to help decide the best course of action. If the boys say that they began practicing

20 minutes ago and hope to continue for an hour, then he might share that he feels very tired and

sensitive to noise today and humbly ask if they know of another convenient place to practice for

the day.   If they can practice somewhere else, then the problem is solved; if not, then the father

might choose to go to the gym or visit a friend or neighbor, letting the boys when he plans to

return. If, on the other hand, the boys say that they began practicing about 45 minutes ago and

only want to play one more song, then the father might choose to take a shower or go for a quick

walk to help relieve his stress while accommodating the boys' desire to finish practicing. Because these interactions avoid the adversarial dynamic, once the boys realize that the father feels tired and stressed, they also have the opportunity to voluntarily cut their practice short or come up with another compromise that works for everyone. All of these outcomes are prosocial and maintain healthy relationships. If the father gave into his impulse by storming into the house and demanding the boys stop playing, he would have modeled an unhealthy, control-oriented dynamic. In that situation, the son would likely react with anger and resentment, feel embarrassed about being chastised in front of his friend, and leave the situation frustrated or hostile, instead of having the opportunity to feel compassion for his father.

Sometimes when reflecting about a situation, the behavior in question clearly violates the guidelines and must be addressed. Consider the example of an adolescent girl who told her parents she was sleeping over a friend's house, and then was brought home by the police in the middle of the night after being caught with a group of underage teens breaking into an abandoned building. After the police leave, the parents had the opportunity to reflect on the situation before interacting with their daughter. During their reflection, they determined that their daughter had, in fact, broken her commitment to following the guidelines by lying to them and engaging in unsafe and inappropriate behaviors in the community. They also decided that they felt angry with her and might not be able to have a conversation that did not devolve into an argument. Then, they moved into the next phase of conflict resolution using the second of the Four Rs, remind.

Remind. The spirit of the remind step is to lovingly help all group or family members follow the Behavioral Guidelines, regardless of the perceived severity of the situation. This step encourages concerned group members to tell other members when their behavior seems to

violate the guidelines and to inquire about their current commitment to following the guidelines.

The practice of the guidelines is non-negotiable, so the concerned members have a reasonable

interest in wondering if the offending member is actually committed to the group or family or

merely using their resources without healthy practice. By avoiding the adversarial dynamic and

not focusing on the content of the situation, the concerned members place the full weight of the

decision to be healthy on the member in question. This strategy also allows for other

information to be presented and taken into account in the understanding of the situation. When a

family or group engages in a conflictual situation, the most important elements are the

relationship and level of trust between the group or family members; the details of the infraction

are less important. Reminding members of their commitment has a further relational benefit; it

"displays a belief in, and expectation of, the person's capacity to accept responsibility without

further external guidance" (Walsh, 2008, p. 21).

In the previous scenario, when the parents moved on to the remind step, they wisely

chose to stay away from the adversarial dynamic, avoiding their desire to berate, chastise, or

preach.   Once they determined that their daughter was physically unharmed and did not require

medical attention, they decided to postpone further conversation until the morning, seeing little

benefit in pursuing a discussion in the middle of the night. Before heading back to bed, the

parents stated their concern plainly, without a passive-aggressive attitude, by telling their

daughter, "We are glad you are home safe, and have a concern that your actions tonight might

not be consistent with your commitment to following the Behavioral Guidelines. It is late, and

we do not feel able to talk about this now, but in the morning, we would like to follow up with

you and understand what happened, as we are very concerned."

The daughter's reaction to this initial reminder would give insight into her spirit and commitment to the guidelines. Her parents' loving support and avoidance of conflict applied healthy pressure on her and kept her focused on her behavior, rather than on reacting to a punishment or offensive words said in the heat of the moment, as might happen in more typical arguments. If her spirit was genuine and committed and she recognized her mistake, the daughter could immediately express remorse by taking responsibility for her behavior and apologizing for breaking her parents' trust and acting disrespectfully in the community. The daughter might then head to bed without further discussion, honoring her parents' request to speak further about the issue in the morning. In all likelihood, the following morning's discussion would be calm and contrite. The daughter would be able to go through the steps of an apology (as previously discussed) and work out an appropriate restitution with her parents. This interaction would hold educational value for the daughter; she would have to face her choices without the distraction of an argument. If she remained committed to healthy practice, she might draw on this experience in the future for internal support and motivation to avoid unhealthy situations, not because she has to or is afraid of being caught, but because she does not want to be unhealthy and damage her relationships. This is an example of true education.

If the daughter reacted to her parents' initial reminder in a negative or disrespectful way, such as by avoiding conversation, storming up to her room, or dismissing them with eye-rolling and verbal or body language that conveyed disrespect, then she would need to explain this behavior as well to repair her relationship and prove her commitment. It is consistent with the guidelines that, at this time, the daughter honor her parents' request for space. However, if the parents felt able to do so without losing their temper, they could humbly question the daughter's reaction; this would also be consistent with the guidelines. In this situation, they might ask,

"Why are you disrespecting us with your body language? Have we done something to offend you? If so, I am sorry. I am increasingly concerned that we are not practicing the guidelines. Do you think we are? Maybe we should take space and talk about this in the morning." This would apply additional healthy pressure to the daughter. Her parents have twice questioned her commitment to the guidelines, and she again has the opportunity to take responsibility for her actions and apologize, immediately diffusing the situation or she can agree to take space. Both responses would be positive, prosocial outcomes indicating a healthy spirit that is committed to practice. A third possibility is that she might again react with anger, negativity, hostility, or indifference; these responses all violate the Behavioral Guidelines and would then move the conflict into the third of the Four Rs: restrict.

Restrict. Restriction from the group provides a last resort when a group or family member remains unwilling to behave in a manner consistent with his or her commitment to follow the guidelines. Restriction is not a punishment; it is not synonymous with grounding and is not meant as a means of control. Walsh (2008) describes restriction this way: "It is a display of the group's respect for the autonomy of the dissenting member to choose not to practice The Guidelines, and simultaneously, a display of the group's non-negotiable commitment to practicing The Guidelines" (p. 23). Data indicates that control and coercion prove ineffective in creating long-term changes in individuals' unhealthy behaviors. When adults retaliate against an unhealthy teen with control-oriented violence (punishment or coercion), the teen then creates and fuels an interpersonal conflict and put his or her energy into fighting the punishment, rather than focusing on the initial digression. Restriction should not be done in anger but should be presented in the most calm and caring way possible, avoiding any impulse to shame or injure the restricted member, such as by name-calling or making pejorative statements. A restriction, as

discussed in the section "Initial Commitment to WED," involves a loss of access to group resources, which may include electronic devices, TVs, Internet, cell phone service, and, for some families, even electricity. Family resources also include group meal times, personal attention, and trust.

Although restriction may feel unpleasant to the restricted group member, it does not constitute a punishment because it can end as soon as the restricted group member recommits to following the guidelines. As explained in the section "Human Nature," humans are gregarious herd animals and feel distressed when ostracized from the group. Williams (2001) describes the four fundamental human needs that are "threatened or thwarted when one is ostracized" and goes on to explain that, when ignored, "our sense of connection and belonging is severed; the control we desire between our actions and our outcomes is uncoupled; our self-esteem is shaken by feelings of shame, guilt or inferiority; and we feel like a ghost, observing what life would be like if we did not exist" (p. 6). In a healthy restriction, restricted group members who feel these pressures can decide at any time to recommit to the group and reestablish their relationships, which would immediately reenergize their feeling of belonging. It would also reconnect their behaviors with their stated desire for health, minimize their feelings of shame, guilt, or inferiority through restitution, and reanimate them as active, important members of the group or family. Williams et al. (2000) describe in detail the historical and current role that ostracism plays in primate and human social behavior regulation. They cite examples of primitive groups such as primates and tribal peoples, as well as modern groups such as military academies, academic institutions, religious groups, the workplace, and interpersonal relationships (p. 748).

In the previous example of the daughter brought home by the police, the parents had reached the cusp of the third of the Four Rs, restrict. If, after a second reminder, the daughter

continued to present a hostile, aggressive attitude while refusing to take space and calm down,

then her parents would have evidence that she had abandoned her commitment to the guidelines.

They would then need to honor the daughter's right to not follow the guidelines while protecting

the family at the same time. Upon determining that a restriction is necessary, the parents would

simply and lovingly tell their daughter, "I'm very sorry, but you are restricted. I love you and I

hope you will choose to reintegrate with us soon. Please go to your room." At this point, no

further communication is necessary; the parents would ignore any additional communication

attempts and go to their room. If the daughter escalated further and became threatening,

aggressive, or physically violent, then it would be appropriate to seek the next level of restriction

by calling the police and crisis team who would determine the appropriate level of care at that

time. Although it may seem antithetical for a loving group or family member to call the police

on another member, this remains the only healthy option for a member who has lost control

completely. This action ensures that the member's unhealthy behavior is not enabled in any

way, and it allows the restricted member to feel the full weight of the natural consequence of his

or her actions.

     Reintegrate. Walsh (2008) explains, "Reintegration is every member's right" (p. 25).

Reintegrate, the final of the Four Rs, is the step of conflict resolution that recommits group

members to each other and to their shared commitment of following the guidelines. The desire

to reintegrate must begin with the restricted member, and he or she must request a reintegration

by calmly asking the group or the group leader for a reintegration meeting. The reintegration

process can easily fluctuate to accommodate developmental differences in children and

adolescents. For young children, reintegration happens when the child calmly asks to talk with

the restricting parent, apologizes to the parents, and agrees to practice working on whatever issue

caused the restriction. For older children, teens, and adults, the reintegration process follows

several steps and requires more effort to complete properly. The restricted member must first

request reintegration, becoming humble and vulnerable to the group or family. When the healthy

desire to reintegrate, reconnect, and return to good standing within the group or family becomes

more important than the anger or righteousness that fueled the initial conflict, then the

reintegration will likely succeed. If the reintegration is an attempt for the restricted member to

placate the group or group leader in order to have physical privileges reinstated, then the

reintegration will likely prove unsuccessful. The spirit of the restricted group member dictates

the success of the reintegration. If a restricted group member has a genuine committed spirit,

even if the member has been restricted numerous times for the same concern, he or she can

reintegrate without punishment, because punishment is antithetical to WED. The reintegration

process is time intensive and requires commitment and investment by all group members

involved. Figure 1 illustrates the breakdown of a reintegration meeting.
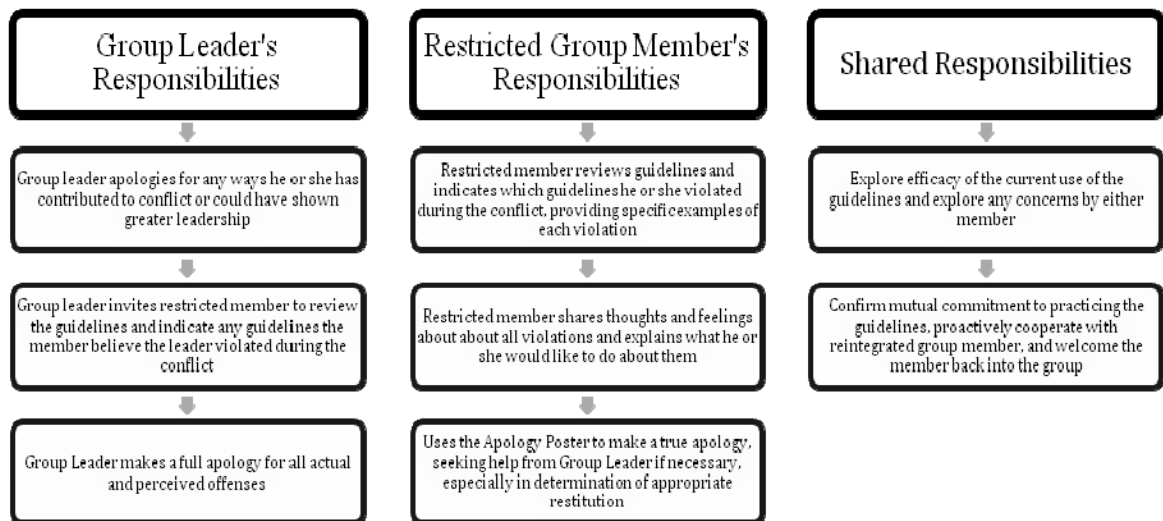

Figure 1: Elements of a Reintegration

Reintegration includes three elements. The first element addresses the parent or group leader's role in the conflict and models taking responsibility and making a healthy apology. This provides parents or group leaders the opportunity to recognize their own authority and encourage criticism by restricted group members. This process humbles the leader to the restricted member and sends the implicit message that he or she might have a legitimate concern about the leader that needs to be addressed. It is a sign of healthy leadership to encourage constructive criticism and embrace potential mistakes to help improve future leadership. Once all concerns have been addressed, the parent or group leader makes a full apology, including restitution, if appropriate.

The second element of reintegration involves investigating the restricted member's role in the conflict and encouraging a comprehensive exploration of all guideline violations and any thoughts and feelings the restricted member has about his or her behavior. This element culminates in a true apology, consistent with the Apology Poster part of Walsh's "First Things First" (Appendix), which includes three steps: knowing what was done wrong, verbally apologizing for it, and making restitution to help the injured or offended member feel confident it will not happen again. During this part of the reintegration process, the leader must maintain a loving, encouraging attitude. To teach humility and responsibility, leaders must avoid expressing hostility and condescension, which violate the spirit of the guidelines and likely will fuel further conflict. When discussing restitution, the group leader should help the restricted member think of ways the group or family can help the member avoid similar incidents in the future, such as by reacting differently, asking the member to take space earlier, and avoiding comments about sensitive topics. The leader should also refrain from making demands for punitive restitution, which would closely resemble punishment. The third element of the restitution involves two shared tasks: first, making sure that both the group leader and the

restricted member have no concerns about the application of the guidelines; second, confirming

both members' commitment to the group and to following the guidelines.

The reintegration process ends with the reintegrated group member being lovingly

welcomed back into the group or family. If, at any point in the reintegration process, either the

group leader or the restricted member appears to not follow the guidelines, then the process

should stop until all members agree they are committed to working together. The reintegration

process requires a commitment by all group members to humble themselves to the process and to

put the needs of the group ahead of their personal image or interests. Pragmatically, this entails

following through with the entire reintegration process and honoring all of the elements, even

when they prove difficult, to avoid missing or ignoring an important thought or concern.

In the scenario of the parents who restricted their daughter, reintegration would begin the

next morning with the daughter calmly asking one or both of her parents to have a reintegration

meeting. Both parents should take part in the reintegration, and they should prepare by talking

together about how the situation might have gone differently. In the meeting, after politely

greeting each other, the parent who feels most comfortable leading would start with an apology,

for example: "We are really sorry that the situation last night ended in a restriction. I apologize

for reacting to your returning home with anger. Specifically, I imagine that my body language

and demeanor conveyed frustration and blame, which might have contributed to our inability to

communicate appropriately." After this, the other parent could add any comments, so long as the

parent takes responsibility for his or her role in the conflict. The parents would then ask their

daughter to share her perceptions that either parent violated any of the guidelines. The daughter

might say, "Although the situation was my fault, I do think that you violated guideline 2b

'Refrain from using language or body to intimidate or injure,' when you glared at me when I

entered the house and continued to stare at me with your fists clenched and arms crossed. I also

think that you violated guideline 2c 'Calmly ask for explanation of any confusion, disagreement,

conflict or concern,' because you reacted with immediate anger,and did not ask me what

happened or for my side of the story. Those are the only concerns I have."

The parents would then respond with a genuine apology, such as by saying, "I hear what

you are saying, and I am really sorry. I did react with anger and convey anger with my body

before I checked out the story with you and made sure that you did not have an explanation. In

the future, I will try to remain curious and gather more information before taking a situation at

face value. If you notice I am jumping to conclusions without offering you a chance to explain

yourself, please let me know in the moment so I can practice." This type of apology signifies

understanding of the daughter's concerns and gives an example of restitution that will help avoid

the same situation in the future. Following the apology, the parents would offer an additional

opportunity to share any concerns about their leadership before moving into the next element of

the reintegration.

The parents might then say to their daughter, "Since you do not have any more concerns

about our role in situation last night, can you please review the guidelines and indicate any

guidelines you believe you broke last night?" The daughter would have a chance to read over

the guidelines and check each one against her behavior to determine her violations. In this

situation she might reflect, "Upon returning home, I violated each of the guidelines in the first

section, maintain an attitude of respect and dignity, because I did not greet you, I did not take

space when I was upset, and I did not apologize for my behavior or the stress on you for waking

up to a police officer bringing me home in the middle of the night. I also violated all guidelines

in the second section because I did not use my language or body responsibly; specifically, I used

offensive words, I raised my voice and got into your face and tried to intimidate you. I also did not try to calmly talk to you or explain myself; instead I had a temper tantrum. I violated guideline 3b, 'Gratefully acknowledge authority of leaders,' when I didn't listen and take space, even though I knew I was upset. As far as Section 4, when I chose to go out without your permission, I was not carefully attending to my health and safety. I know that it is dangerous to be out at night and I could have gotten hurt. I was not controlling my body movement so that myself or others were not injured (guideline 4b.) As far as section 5, I was not honestly giving my best effort, specifically because I did not put education, wellness of self and others, and responsibility to the family ahead of my personal image and interests." After this, the parents asked her to explain her thoughts about her violation. She might respond by saying, "I am embarrassed. I want to explain what happened last night so that you can understand and will believe me when I recommit to the guidelines. I know it was wrong to sneak out. I was not brave enough to say no when the boys showed up, and I was worried they would make fun of me if I refused to go along. I didn't want to go into the abandoned building with them, and I tried to convince my friend that we should go back to her house because we would get into trouble. I didn't know what to do, and I was scared, so I thought I would just wait and eventually they would get bored and we would leave. I'm very sorry for worrying you, and I'm also sorry for violating your trust."

At this point, the daughter has clearly stated her unhealthy actions, taken responsibility for them, and offered an apology. As the final step, she must offer restitution. In this case she might say, "For restitution, I accept that I have to rebuild your trust. I'll do this by not asking to go out with friends until you let me know that it is okay with you if I do. I'm embarrassed that I was pressured into doing something I knew was wrong. I'm wondering if we could create a code

word that I can text you in case I need help getting out of a situation like this. If I text you the code word, you could call me with an emergency that I have to return home for." The parents' reaction to restitution would depend on their belief in the daughter's sincerity. In this case, the restitution efforts would likely be sufficient, because the daughter has humbled herself, let her parents know that she recognizes her error, and recognized that she has a weakness that she needs help with. If the restitution seemed forced or disingenuous, then the parents would want to continue to discuss it until they reached a mutually agreed-upon solution.

Once they accept an appropriate restitution is established, the parents would ask their daughter, "How do you feel our family is doing overall in using the guidelines? Do you have any thoughts, ideas, or criticisms about how we are using them? Is there anything we as group leaders should do differently?" In the current example, the daughter has no concerns to discuss about WED implementation in the family, so they would move into the final step of the reintegration, "Affirming mutual commitment to practicing the Guidelines," (Walsh, 2008, p.25). This might begin with one parent saying, "I remain committed to following the guidelines. I am happy to work on creating our code word whenever you are ready, and I am delighted that you reintegrated with the family!" To this the daughter might reply, "I am committed to practicing following the guidelines. Thank you for your help during the reintegration." Following a successful reintegration, the daughter would immediately be considered in good standing, with access to the family resources and without lingering hostility.

This concludes the didactic examples of Wholeistic Education. The following two chapters focus on the current and future applications of WED and explain the data collection tools in use to examine and validate the efficacy of the approach. Chapter 4 describes current users of WED and explores the potential barriers to implementing WED in these settings.

Chapter 4: Current Applications of WED

Joseph R. Walsh conceptualized and developed Wholeistic Education over 30 years of therapeutic work and child raising. Over the last decade, Walsh's work has come more sharply into focus and he has influenced and inspired numerous educators, therapists, and community members through his implementation and daily practice of WED in his work and his life. Through his relationships, Walsh has encouraged agencies, companies, and families to implement WED as an educational model. This chapter explains three current applications of WED: a residential treatment center, an intensive outpatient program, and a proactive parenting approach used in a family of four. This chapter also describes barriers to the successful implementation of WED in each of these settings.

Nashua Children's Home

According to their website, Nashua Children's Home (NCH; www.nashuachildrens home.org), one of New Hampshire's largest residential treatment facilities, has served orphan, homeless, and at-risk children and adolescents in the greater Nashua, New Hampshire community since the early 1900s. NCH began its shift to WED in 2003, when Walsh, a Family Therapist at NCH, started his Wholeistic Youth Sports Education (WYSE) program, which applied the Behavioral Guidelines to a basketball and baseball group for NCH residents. Paul Wheeler, Assistant Program Director for NCH, describes the initial transition:

> In an attempt to move from a behavior modification system rooted in the constructs of time-out, [NCH] moved to adopting tenets of WED in January of 2008. Walsh had already incorporated the Behavioral Guidelines into the sports groups that he led at NCH. These sport groups often functioned very cohesively, often having a group size of one staff to ten kids. (P. Wheeler, personal communication, October 3, 2012).

Wheeler went on to explain that, following the success of the sports group, NCH began the slow

implementation process. Describing this process, Wheeler states, "This began with the use of the

Behavioral Guidelines on the younger girls' unit, a group composed of 11 latency-aged children

and a group of eight Residential Counselors (staff). As other staff began to be exposed to WED,

the demand for the use of the Behavioral Guidelines grew to the entire agency: three boys' units

and two girls' units."

Wheeler, a crisis care provider and a supervisor, went on to describe his experience

working with WED personally and his experiences training the agency staff who work directly

with the children and adolescents every day. According to Wheeler, "it took what became

known as a leap of faith that WED was a better way to educate children, youth, and families.

This leap of faith has been rewarded. One reward of implementing WED was the use of the

Behavioral Guidelines as a road map for staff who found themselves in situations where they

were having difficulty addressing maladaptive behaviors" (P. Wheeler, personal communication,

October 3, 2012). He attributes the positive changes to NCH to the physical implementation of

WED, specifically because, "the staff was able to use the Behavioral Guidelines as a way to

triangulate difficult discussions and work to resolve behavioral conflict in a joint approach. It

made dealing with behavioral interventions more of a team approach versus the staff assigning a

timeout and prescribing a consequence to a behavior" (P. Wheeler, personal communication,

October 3, 2012).

Wheeler further describes a "reward that seems directly attributable to the

implementation of WED, a sharp decline in physical crisis intervention" (P. Wheeler, personal

communication, October 3, 2012). NCH's Executive Director also noted this decline, saying,

"Since the introduction of the Guidelines, we've witnessed a precipitous decline in the number of

physical interventions required.... In 1998, there were 1400 (even) instances of physical restraint.

In 2010, there were 50 instances!! That represents a reduction of 96.4%.... I've got to believe

that it's primarily attributable to a shift in culture at Nashua Children's Home, evidenced by the

introduction and practice of the Behavioral Guidelines. It really is impressive" (Retrieved

September 29, 2012 from http://www.wholeisticeducation.com/ WEDWhatIsWED.html).

The physical intervention statistics are discussed in greater detail in the section of the evaluation

chapter that concerns evaluation at NCH. The next section addresses the barriers to

implementing WED and changing the long-standing culture embedded in Nashua Children's

Home.

      Barriers to implementation at NCH. Implementing Wholeistic Education is hard.

Working in a residential treatment center is also hard, and changing a culture while expecting the

culture to continue functioning at a high level is quite an undertaking. Although WED's ideas

are simple and accessible, they conflict with most people's concepts of adult/child interactions

and the "common wisdom" of child-care staff. Almost all who have been exposed to WED have

initial concerns about the wisdom or practicality of implementing such a model. Margie White,

a former employee at Nashua Children's Home described, "I remember being the supervisor on

the Younger Girls residence at NCH and being so scared thinking that there was no way it was

going to work, and it was all over simple control issues. Once I saw what it [WED] was like,

and how much sense it made I couldn't believe I ever even had those thoughts" (M. White,

personal communication, September 21, 2012).   The attitude of fear is a prevailing barrier for all

applications of WED. WED is a relational model and it initially requires invested individuals to

embrace and create the group culture, even in the face of dissent.

Wheeler explains the specific change-related challenges with the NCH community, he

noted that a dramatic adjustment was involved in "Changing from a model of prescribing timeout

to stated behavior in a hierarchical manner, to the premise that the Behavioral Guidelines would

be adapted in a nonhierarchical manner to which both staff and children would be accountable"

(P. Wheeler, personal communication, October 3, 2012). Despite WED's success in reducing

physical interventions at NHC, the agency, according to Wheeler, faces ongoing difficulties with

implementing WED. From a supervisory position, Wheeler works with some staff members who

struggle with the subtleties of WED and who seek a more "concrete model based on a timeout

consequence for each corresponding behavior," (P. Wheeler, personal communication, October

3, 2012). Wheeler expresses this dynamic and his understanding of the underlying cause as

follows:

> Staff needed to be trained and educated on the art of "embracing all feelings and
>
> redirecting all behaviors" and question based interventions versus direct statement based
>
> interventions. This is a subtle change that continues to prove difficult for staff, including
>
> those who never worked with a timeout based behavior modification model. As simple
>
> as many of the tenets of WED seem to be, the implementation often gets interrupted by a
>
> staff member's own mood or lack of resources (P. Wheeler, personal communication,
>
> October 3, 2012).

Direction Behavioral Health Associates, Intensive Outpatient Program

Direction Behavioral Health Associates (DBHA) is a partnership of mental health

professionals who came together to fill a niche in the community services available for

adolescents in Southern New Hampshire. This Intensive Outpatient Program (IOP) provides

three hours a day of therapeutic support, broken into three approximately one-hour periods of

time. DBHA opened its Nashua, NH location in January 2008 and a second site in Seabrook,

NH in August 2010. IOPs provide a level mental health care designed to provide individual and

family stabilization, preventing the need for inpatient hospitalization or acting as a step down for

adolescents recently discharged from an inpatient hospitalization. Since 2008, DBHA has

worked with over 1200 adolescents and families, and both sites have used Wholeistic Education

as the sole treatment model since their inception. In the IOP setting, the staff teach WED to

adolescents and their families, and the IOP provides long term family support in the form of a

parents' group that parents can attend free of charge, even after the adolescent moves on from

the program.

        Wholeistic Education as a treatment approach provides a foundation for both the

structural and philosophical components of the IOP. Three pragmatic examples illustrate the

importance of WED's influence on treatment. The first example is the voluntary aspect of the

program. Adolescents referred to the IOP are not obligated to attend the program; in initial

phone conversations with parents and prospective clients, the staff explains that they will not

force anyone to attend. During intake meetings, staff members ask adolescents if they are

attending voluntarily. If the teens express a willingness to participate and commit to the

program, then they will be admitted, so long as they meet the medical necessity to attend. If they

do not express a committed to the program or an interest in receiving treatment, they are offered

the opportunity to observe and gather information about the program to see if it might be

beneficial. If adolescents maintain an unwillingness to participate, then the staff discontinues the

intake procedure and encourages the family to return if the adolescent changes his or her mind.

This initial interaction sets the tone for the remainder of an adolescent's time in the IOP. WED

educators practice avoiding the adversarial dynamic, and the initial commitment by group

members to choose to attend the program prepares them for an active, rather than passive, therapeutic experience.

A second example of WED's influence on treatment in the IOP setting concerns confidentiality. Many adolescents in the program view the mental health community with distrust and suspicion and worry that practitioners are in league with their parents to control every aspect of their lives. In many settings and families, therapy and psychiatry is compulsory, and the information that adolescents share with mental health workers is not kept confidential from parents or educators and is shared without their consent. This discourages open and trusting conversations and perpetuates the adolescent's negative beliefs about seeking professional help (Rickwood, Deane, Wilson, & Ciarrochi, 2005). DBHA makes their confidentiality policy clear and explicit; all information that does not fall under the mandatory reporting laws remains confidential unless the adolescent gives permission to share it. When the clinical staff feels that an issue should be shared with a parent, they consult the adolescent, who in many cases agrees to share the information as they understand it furthers their best interest. This WED-informed strategy prevents the therapeutic relationship in the program from becoming adversarial.

A third example of WED's influence on the IOP program concerns the voluntary nature of the psychiatric and family therapy components of the program. The program as a whole is voluntary, as are its discrete components. The IOP clinical staff offers family therapy to every family and run two weekly parents' groups to teach WED to all interested caregivers. If an adolescent requests a family meeting to address an issue, the parents have the option to participate in a family session; the same holds if the parents make the request. Family therapy only happens if all members agree to participate in a meeting that involves sitting down and

working together to address the family's shared concerns. If family members have committed to

following the Behavioral Guidelines, and they are unwilling to participate in family therapy, then

the each member's commitment can be explored and addressed. DBHA expects that all family

members will follow the guidelines in family sessions, or else they will use the Four Rs to help

promote healthy choices or encourage restriction to protect the rest of the family.

Duncan Gill, MD, the DBHA Medical Director and owner (personal communication

September 28, 2012), describes his thoughts about implementing WED:

It has been an enormously successful model in our Intensive Outpatient Program, and I

think superior to most (if not all) alternatives we could have employed for a number of

reasons:

1. Most importantly, it provides an absolutely bare-bones but critical framework
for all the therapy that takes place here, with no extra frills or fat. It is a generalist
approach, appropriate to virtually all disorders and issues we deal with, allowing
us to employ the same model with kids as young as 11 and as old as 23, with the
wide range of issues that we see present here. I know of no other model better
suited for such a wide range of applicability. This is in sharp contrast to many
other models, which tend to be more effective with and sometimes even specific
to certain disturbances in functioning, personality types, and cognitive abilities.

2. At the same time, it does not limit one from appropriately employing certain
techniques or approaches (psychodynamic, cognitive-behavioral, etc.) approaches
within the context of this framework, giving it enormous flexibility.

3. It avoids the trap many types of therapies run into, particularly with
adolescents, of overprescribing certain techniques, behaviors, or ways of thinking.
There is lots of space for kids to be themselves, be independent (within the
framework), and do their own thing. Most group treatment models I have seen
run into trouble with teenagers because they are too pedantic, rigid, and don't give
kids the room to breathe. Kids are tired enough of being told by all other adults
what to do, they don't need to come to therapy and have the same experience.
That's like school all over again.

Barriers to implementation at DBHA. Many barriers to implementing WED in the IOP

setting mirror those in the residential setting and do not require reiteration. WED requires

practice and a commitment to health that some families, employees, or members of other groups are unwilling or unable to make. The families that experience the greatest success with WED are those that learn and practice it together. The nontraditional aspects of WED's approach turn some parents away from DBHA, possibly because the WED philosophy presents an affront to their parenting styles. As a voluntary program, WED acknowledges and respects each family's right and responsibility to act in what they believe is the best interest of their child, and WED encourages any families who do not feel comfortable with its approach to seek other professional help.

DBHA has also discovered that WED training for staff can pose a limiting factor in the agency's growth. As a relational model, WED depends upon the spirit of all staff members to ensure successful implementation and maintain the group dynamic. Staff members who lack commitment to WED are not merely ineffective but can be detrimental to the group culture. Constant vigilance over all group members, including staff, is needed for group maintenance. In addition to the regular supervision of staff members, *in vivo* coaching proves essential to avoid subtly reinstituting an adversarial or enabling dynamic. This need for intensive staff supervision presents a barrier to successful implementation of WED, because it places an extra burden on WED educators to continually assess staffing issues while maintaining exceptional clinical care for a high-risk acute population of adolescents.

The final barrier, explained by DBHA's Medical Director, is also addressed in the section of the evaluation chapter that concerns future evaluation opportunities. Gill explains, "In terms of problems, I'd say the only one is that it is not established as a standard treatment model, [it] does not have the 'evidence base' which can make it difficult to sell at times, particularly to insurance companies or agencies considering sending us kids" (D. Gill, personal communication,

September 28, 2012). Through clear explanation and illustration of WED, I hope to eventually

remove this as a legitimate barrier. To ensure WED's continued professional development and

application, WED educators must create the evidence base and increase the number of providers

fluent in WED theory and practice.

Wholeistic Parenting

Some people who learned WED through their work or by their acquaintance with Walsh

have decided to apply it as their parenting approach of choice. The Whites are one such family.

The parents, Chris and Margie White, both worked for Nashua Children's Home before and after

its transition to WED. They have four young girls, ages four, two, and twin infants. Chris and

Margie began using WED in their personal lives after learning it while working for NCH. They

were so impressed by WED's efficacy with the NCH residents that they chose to implement it as

soon as their children were old enough to communicate, between nine months and one year old.

Chris (personal communication, July 26, 2012) explains that he and his wife chose WED because

it resonated with their beliefs and they witnessed its effectiveness first hand. He explains,

"Being a WED parent is as rewarding as it is challenging at times. The benefit I see to the extra

work and self-reflection involved in this approach is manifested in my children's prosocial skill

development. Because the girls have practiced WED since birth, we are able to direct their

energy into learning, rather than constantly needing to redirect unhealthy or unwanted behavior."

Chris's wife, Margie, describes her experiences with WED as follows:

> As far as how it is for me to use WED with the girls, I love it. I see such a difference
>
> with my girls and all of my nieces and nephews, and our friend's kids too! I think that I
>
> am less stressed than those parents; it's the difference of using the guidelines instead of
>
> "what we say fight." It just makes so much more sense, and not just to me but the girls

too (M. White, personal communication, September 21, 2012).

Parents who use the guidelines often notice a difference between their actions and emotional well-being and those of some of their peers, who seem stuck in cycles of conflict based on ego-involvement and the controlling dynamic. An example of this concerns the common wisdom that two- and three-year-olds are inherently unreasonable, throw tantrums, and cannot exhibit self control; these traits are viewed by many as an unavoidable phase of child-development.

As the Whites have raised their girls using WED, they have collected many examples of the girls using WED and following the guidelines. Chris shares a story that contradicts the "common wisdom" about toddlers and preschool-aged children:

A recent event with my three year old that I am proud of happened recently when we were outside playing with the new pool that her sister received for her 2nd birthday. Both children were very stimulated and having a lot of fun, although it was obvious that the older child was struggling with the concept that the pool was given to her sister but expected to be shared with the family. My older daughter started to be possessive of the pool and I reflected then reminded her about being nice and sharing. I also reminded her that the pool was her sister's and she was sharing it appropriately, and not the other way around. My older daughter accepted this grudgingly and a few moments later began to play "splash me." The first time she did it seemed innocent, and I let her know my desire to remain dry. When she proceeded to do it again, and I reminded her that I did not want to get wet and that even though she thought it was funny, I asked her not to do it again. At this point, I noticed her spirit was a bit off and I questioned her about this. While asking her if she was trying to bother me, she again attempted to get me wet. As my eyes

widened, a clear sign that I am displeased/offended, she stopped herself and informed me

that she was "going to go take space and think about it," which is what is what we teach

the girls to do when they are upset to avoid becoming restricted. My oldest daughter

went away from the family and returned a few minutes later. Upon her return she

apologized for getting me wet and informed me she would not do it again. My daughter

then proceeded to play nicely with her sister for the rest of the evening (C. White,

personal communication, July 26, 2012).

Margie shares stories similar to her husband's, and both parents reflect openly about the

challenges and benefits they experience using WED with their daughters. The Whites and other

families using WED in early childhood illustrate the benefits of using WED proactively, before

any unhealthy habits, trauma, or pathology has time or opportunity to set in. The Whites see

WED as a full-time investment in the health of their family, and they both agree that, while

healthy practice is non-negotiable, it is not always easy. Margie describes another benefit of

WED: "Listening to them apologize to each other, give hugs and talk things out is priceless. It's

amazing how forgiving and kind they can be" (M. White, personal communication, September

21, 2012). The next section explores the difficulties and barriers to using WED in families.

Barriers to implementation in families. There is no easy way to parent children, and

WED is no exception. When asked about barriers to using WED, Margie White states, "As far

as barriers that may prevent others from wanting to implement WED, I think the only real

barriers are in our heads. It's just a matter of being willing to let go of being a controlling

parent" (M. White, personal communication, September 21, 2012). She goes on to illustrate an

example of dynamic leadership, the previously explained practice of allowing the individual

most invested in and successfully practicing the Behavioral Guidelines to have authority in a

given moment. "The hardest thing is having to think outside the box and being able to listen to

your three year old make more sense than you with something you would have thought made

such complete sense just seconds before. I can't even count how many times Anna told me I

wasn't being nice and pointed out that I was being a drama queen." Margie's example signifies

the humble expectation of 'practice' for all family members and the love inherent in WED

families. WED encourages all family members to work together to help each other interact in a

healthy manner. When a loving leader struggles, the other family members, instead of

instigating conflict, provide clear reflection. Young children are especially good at noticing

inconsistencies in words and actions. When encouraged to use this skill, they can be

instrumental in helping maintain a healthy family culture.

Future Applications of WED

This dissertation has explained WED's current uses in residential treatment, intensive

outpatient programs, and families. WED has many other potential applications for children and

families, as it integrates well with other specific educational or therapeutic strategies. In addition

to widespread use in individual therapy, WED may be applied in the following three settings in

the future. First, WED educators recognize the value in creating an interactive parenting group

that serves parents and their children from toddlers through kindergarten age. In such a group,

children and parents would interact with the other group members and learn and practice WED

philosophy in a caring and supportive environment. WED may also be used in a therapeutic

tutoring program to help students whose mental health issues impede their academic success in

school. Therapeutic tutoring using WED would attempt to remove the adversarial component

from education to help reengage students while working toward their stated goals. Finally, WED

could be applied in an in-school intervention by embedding a WED group in a high school to

provide daily prosocial practice for a select group of students. This program is currently in

active development and will likely be piloted in near future.

WED also has potential future application with adult populations, the most obvious being

individual and couples therapy. The guidelines provide a useful tool for relationship

management and conflict resolution; as more providers learn about WED, they may choose to

include it in their repertoire of treatment approaches. WED may also prove useful in industrial

or organizational psychology settings. Companies, agencies, universities, and corporations

would benefit from WED's overarching framework to help manage their many levels of human

resources. WED could be implemented in business settings to establish a healthy culture among

coworkers. Finally, WED may prove useful in the field of gerontology. Many facilities and

families that work with older adults struggle to maintain appropriate levels of respect and dignity

while maintaining safety. Implementing WED could help clarify some of these dynamics and

encourage prosocial treatment of older adults.

Chapter 5: Evaluation

Evaluation has been an evolving process for Wholeistic Education, as the evaluation has been linked to the programs and agencies that use WED, rather than focused on the approach itself. As WED becomes more self-sufficient, the need for independent evaluation grows exponentially. According to the W. K. Kellogg Foundation (2004) Evaluation Handbook, project-level evaluation includes three elements: (a) Context, (b) Implementation, and (c) Outcome Evaluation. A context evaluation for WED would investigate WED's relationship within the "economic, social, and political environment of its community and project setting," while an implementation evaluation would focus on the "planning, setting-up, and carrying out of a project, as well as documentation of the evolution of a project." The outcome evaluation for WED would involve a straightforward analysis of the "short- and long-term results of the project" (W. K. Kellogg Foundation, 2004, p. 20).

The first section in this chapter explains the current qualitative and quantitative efforts to gather evaluative information about WED and explains how these efforts fit into the three elements of project-level evaluation. The second section discusses the need for future evaluation of WED and lays out a possible preliminary plan to achieve it.

Current Evaluation

Nashua Children's Home. Wholeistic Education has been informally evaluated in both qualitative and qualitative terms since its implementation in 2008 at Nashua Children's Home. At NCH, WED has primarily been assessed through rudimentary outcome and context evaluations of specific elements of service delivery, such as physical intervention statistics and stakeholder assessment. NCH has tracked physical intervention statistics for more than two decades. Physical interventions, or restraints, are an unpleasant part of life for many children in

residential treatment facilities and the staff who work with them. Both before and after the

transition to WED in 2008, NCH has trained staff using the company CPI's nonviolent crisis

intervention model (retrieved October 1, 2012 from http://www.crisisprevention.com/

Specialties). Because other agency conditions (such as the intensive verbal de-escalation

training for staff during restraint certification classes) remained unchanged after its transition to

WED, the prevailing wisdom is that the steep drop in restraints after the move to WED and the

continued low levels of monthly restraints can be considered a quantitative measure of WED's

efficacy. In addition, New Hampshire's Division of Children Youth and Families (DCYF) and

the Division of Juvenile Justice Services (DJJS) together conducted a quality assurance and

performance review of NCH in 2009. This review concluded,

> NCH has significantly reduced the number of physical interventions that occur in the
>
> facility….DJJS has compared (NCH's) restraint data with similar programs throughout
>
> the state. NCH has demonstrated they are a leader in NH on reducing restraints with both
>
> their adolescent and latency age programs. NCH is to be commended for changing their
>
> culture in each of their residential units that facilitated these dramatic changes. (retrieved
>
> September 29, 2012 from http://www.wholeisticeducation.com/WEDWhatIsWED.html).

This circumstantial data suggests that implementing WED reduced physical interventions in the

residential treatment setting, although no conclusive determination can be made due to the lack

of external structure and consistency to the outcome evaluation process.

Similarly, with regard to context evaluation, the DCYF and DJJS review committee also

compiled survey data from NCH youth residents, their parents, and the NH state DCYF and

DJJS workers who referred the youths to residential treatment. This survey data focused on

more subjective components of the residential treatment program:

> The residents indicated the rules and discipline techniques were fair. They understood
> how to address a grievance....All of the residents indicated they were benefiting from the
> program....In summary, survey information provided by CPSW/JPPOs (Child Protective
> Service Workers/Juvenile Probation Parole Officers) and Parents was supportive. The
> themes tended to be positive and the ratings were exceptional. (retrieved September 29,
> 2012 from http://www.wholeisticeducation.com/WEDWhatIsWED.html).

Again, these findings provide indirect support for WED's efficacy, but they are not sufficient to make any specific claim about WED's effectiveness. Nashua Children's Home serves as an ongoing laboratory in which an evaluation team could properly investigate the elements of WED in action with this high-risk population.

Direction Behavioral Health Associates. DBHA has also compiled quantitative statistics and qualitative evaluations showing the general efficacy of the IOP. However, like Nashua Children's Home, evaluation has considered the program as a whole, rather than focusing on the treatment model, WED. DBHA has not focused on context or implementation evaluation, and at this time maintains a database of length of stay, readmission, and discharge statistics, collects subjective reports of client and parent experiences in the program and has begun administering the Behavior and Symptom Identification Scale (BASIS-24), a brief self-report measure that establishes symptom severity and level of functioning in six mental health domains, at intake and discharge. The Basis-24 is considered a valid and appropriate outcome assessment tool for mental health agencies. Again, none of these assessment measures provides specific data from which WED's efficacy can be judged.

Qualitatively, some of DBHA's testimonials speak more directly to WED than to the IOP as a whole. One example from Deborah O'Connor, a parent whose daughter participated in the IOP, states,

> When my daughter started at Direction she was at her lowest level of functioning. With the help she got, she is working, has friends, and is going to school. WED was the help she needed. It not only helped her; it helped me. The parents' group not only gave me support, but it helped me see things differently and gave me guidelines to help her on her recovery. They don't give you a book on how to handle kids; WED gave me that book. I can't thank them enough. They saved her life. (D. O'Connor, personal communication, September 28, 2012).

The ancillary data at DBHA, like that gathered at NCH, indicates that WED is an effective and appropriate treatment approach for use in a variety of clinical and non-clinical situations. The next phase of WED evaluation should focus on isolating the elements of WED from the systems they are currently being used in and assessing these elements to establish WED's level of efficacy.

Future Evaluation

The need for future evaluation of WED is paramount. One hope for the outcome of this dissertation is to increase the awareness of this unique and promising treatment approach and encourage an evaluation team to design and implement a multi-level assessment that will establish WED's validity and encourage more widespread adoption of WED in various settings. This section briefly outlines a potential strategy for just such an evaluation initiative, beginning with the first phase, planning.

Future evaluation of WED should involve the creation of a program logic model to guide

the assessment process. Walsh and his team should create a theory model that clearly identifies the theoretical constructs and the expected outcomes for treatment, which will help in the articulation of specific assessment opportunities. Once the logic model has been established, Walsh must then prepare for the evaluation process by identifying his stakeholders and determining the most appropriate type of evaluation team. A university research team, for example, might be willing to conduct an evaluation but might also have its own agenda. Hiring an outside team might incur a higher cost but result in an assessment more targeted to Walsh's desired outcomes.

Once the stakeholders and the evaluation team and goals have been established, the second step in the planning phase, "Developing Evaluation Questions," (W. K. Kellogg Foundation, 2004, p. 51), could begin. In addition to general outcome measures, potential specific questions include, "How is WED helpful? What is the necessary length of WED exposure to see functional gains? Is there a difference in efficacy with different populations? How much exposure to WED is required to successfully teach it to others?" The answers to these questions would provide Walsh with insight into increasing the successful implementation of WED in multiple settings.

The third step involves creating a budget for the evaluation. This step would require Walsh and the team to determine the relative importance of their questions and balance the needs of the evaluation team with the financial realities involved in creating a new approach without outside funding or resources. Once the budget has been established, Walsh would begin actively seeking the evaluator that meets his requirements. Walsh may decide to lead his own team or outsource the work; either way, the evaluator's role, responsibilities, and expectations must be established and agreed upon before any assessment begins.

The Kellogg Foundation describes the second phase of the evaluation, the elements of implementation, as involving three separate steps: "determining data-collection methods, collecting data, and analyzing and interpreting data" (p. 69). These steps will likely happen through a collaboration between Walsh and the evaluation team, taking into account the evaluation opportunities inherent in WED's current uses as well as potential applications (e.g., assessing feelings of well-being and behavioral regulation using WED parents vs. a control group of parents). Walsh will make the final decision, but both qualitative and quantitative information will likely be necessary to fully explore WED's efficacy. All three of these steps will require a collaborative effort between the WED team and the evaluation team to remain responsive to the stakeholders while making sure the information being gathered will answer the necessary questions to determine efficacy.

The third phase of the WED evaluation, the utilization phase, may involve disseminating the results of the evaluation through publishing and by using the data to improve WED delivery or implementation services. The evaluation will hopefully provide WED with credibility and an evidence base, allowing it to be considered a standard treatment model. This would remove a potential barrier identified in the IOP, which likely also applies to other settings. Additionally, once the evaluation is complete and the results published, WED will gain increased exposure to the psychological community, and practitioners interested in using WED may find it easier to incorporate into their desired settings.

As stated in the introduction to this dissertation, and as illustrated, WED is at the vanguard of best practices for psychological intervention. Wholeistic Education is the logical psychological approach for our time. This innovative psychological approach serves as both a proactive strategy for seeking and maintaining health before a crisis arises and as a treatment

approach for guiding individuals during times of distress. Proper evaluation will demonstrate

WED's efficacy for all humans across the lifespan and its usefulness in any setting in which a

group of humans would benefit from working with or relating to each other in a healthy way.

References

Altruism. (n.d.). Retrieved February 13, 2011, from www.merriam-webster.com:

http://www.merriam-webster.com/dictionary/altruism

Aristotle. (1994-2000). *Metaphysics: Book VIII, Part 6.* (D. W. Ross, Trans.) Retrieved

November 30, 2010, from The Internet Classics Archive: http://classics.mit.edu

/Aristotle/metaphysics.8.viii.html.

Baer, D. M., Harrison, R., Fradenburg, L., Petersen, D., & Milla, S. (2005). Some pragmatics in

the valid and reliable recording of directly observed behavior. Research on Social Work

Practice, *15*(6), 440–451. DOI: 10.1177/1049731505279127

Barash, D. P. (2005, April 1). B.F. Skinner, revisited. *The Chronicle of Higher Education*, pp.

B10-B11.

Baumeister, R. F. & Tierney, J. (2011). *Willpower: Rediscovering the Greatest Human Strength.*

New York : Penguin Press.

Berg-Nielsen, T. S., Vikan, A., & Dahl, A. A. (2002). Parenting related to Child and Parental

Psychopathology: A Descriptive Review of the Literature. *Clinical Child Psychology*

and Psychiatry, 7 (4), 529-552.

Bigelow, J. (1869). *Autobiography of Benjamin Franklin.* Philadelphia: J.B. Lippincott & Co.

Blanchard, K., & Miller, M. (2011). *The Secret of Teams: What Great Teams Know and Do.*

Berrett-Koehler Publishers, Incorporated.

Bloom, S. L. (1997). *Creating Sanctuary: toward an evolution of sane societies.* New York:

Routledge.

Boehm, C. (2012). *Moral origins: The evolution of virtue, altruism, and shame.* New York:

Basic Books.

Bolger, N., Downey, G., Walker, E., & Steiniger, P. (1989). The Onset of Suicidal Ideation in Childhood and Adolescence. *Journal of Youth and Adolescence. 18* (2), 175-190.

Bor, W., & Sanders, M. R. (2004). Correlates of self-reported coercive parenting of preschool-aged children at high risk for development of conduct problems. *Australian and New Zealand Journal of Psychiatry, 38* (9), 738-745.

Bowlby, J. (1969). *Attachment.* New York: basic Books.

Brinkmeyer, M. Y. & Eyberg, S. M. (2003). Parent-child interation therapy for oppositional children. In A. E. Kazdin & J. R. Weisz (Eds.), Evidence-based psychotherapies for children and adolescents (pp. 204-223). New York: Guilford Press.

Bronfenbrenner U., & Morris P. A. (2006). The bioecological model of human development. In: R. M. Lerner   (Ed.) *Handbook of Child Psychology*. Vol 1. 6th ed. Hoboken, NJ: John Wiley & Sons, 793-828.

Brooks, D. (2011). The social animal: The hidden sources of love, character, and achievement. New York: Random House.

Bruner, J. (1996). *The Culture of Education.* Cambridge, MA: Harvard University Press.

Caxton, W. (1483). *The Golden Legend or Lives of the Saints.* Retrieved August 2, 2011, from http://www.fordham.edu/halsall/basis/goldenlegend/GoldenLegend-Volume1.asp#Mose

Chambliss, D. L., & Hollon, S. J. (1998). Defining Empirically Supported Therapies. *Journal of Consulting and Clinical Psychologyy , 66* (1), 7-18.

Chatman, J. A. & Cha, S. E. (2003). Leading by Leveraging Culture. *California Management Review.* 45 (4), 20-34.

Chi (n.d.) Retrieved August 12, 2011, from www.merriamwebster.com: http://www.merriam-webster.com/dictionary/chi

Christophersen, E. R., & Mortweet, S. L. (2005). *Treatments that Work with Children: Empirically supported strategies for managing childhood problems* (Fourth Printing ed.). Washington DC: American Psychological Association.

Clarkin, J. F., & Carpenter, D. (1995). Family Therapy in Historical Perspective. In B. Bongar & L. E. Beutler (Eds.) *Comprehensive Textbook of Psychotherapy: Theory and Practice.* (pp. 205-227). NY: Oxford University Press.

Colapinto, J. (1982). Structural Family Therapy. In A. M. Horne and M. M. Ohlsen (Eds.). *Family Counseling and Therapy.* Itasca, Illinois: F.E. Peacock. Retrieved March 19, 2012 from: http://www.minuchincenter.org/our_publications

Corrigan, P. W. (1997). Behavior therapy empowers persons with serious mental illness. *Behavior Modification,* 21, 45-61.

Corsaro, W. A. (2005). The sociology of childhood. Thousand Oaks: Pine Forge Press.

Costello, E. J., Copeland, W., & Angold, A. (2011). Trends in psychopathology across the adolescent years: What changes when children become adolescents, and when adolescents become adults? *Journal of Child Psychology and Psychiatry.* 52 (10) 1015-1025.

Craighead, W. E., Craighead, L. W., & Llardi, S. S. (1995). Behavior Therapy in Historical Perspective. In B. Bongar and L. E. Beutler (Eds.) *Comprehensive Textbook of Psychotherapy: Theory and Practice.* (pp. 64-83). NY: Oxford University Press.

Dawkins, R. (1999). *The Selfish Gene.* Oxford: Oxford University Press.

de Waal, F. (1996). *Good Natured, The Origins of Right and Wrong in Humans and other Animals.* Cambridge, MA: Harvard University Press.

de Waal, F. (2009). *The Age of Empathy.* New York: Three Rivers Press.

Discipline. (n.d.). Retrieved January 30, 2011, from www.merriamwebster.com:

http://www.merriam-webster.com/dictionary/discipline

de Waal, F.B.M. & Flack, J.C. (2000). 'Any Animal Whatever,' Darwinian Building Blocks of

Morality in Monkeys and Apes. Retrieved August 8, 2011, from http://tuvalu.santafe.edu/

~jflack/Publications_files/Moralitymain.pdf

Dennett, D. C. (1995). Darwin's dangerous idea: Evolution and the meanings of life. New York:

Simon & Schuster.

Dewey, J. (1916). Democracy and education: An introduction to the philosophy of education.

New York: Macmillan.

Dowd, E. T. & Milne, C. R. (1986). Paradoxical Interventions in Counseling Psychology. *The*

Counseling Psychologist. 14. 237-282. DOI: 10.1177/0011000086142002.

Duhigg, C. (2012). *The Power of Habit: Why We Do What We Do in Life and Business*. New

York: Random House.

Duhigg, C. (2012, February 16). How Companies Learn your Your Secrets. *New York Times*

Magazine. Retrieved from http://www.nytimes.com/2012/02/19/ magazine/shopping-

habits.html?pagewanted=all

Eisenberger, N., Lieberman, M., & Williams, K. (2003). Does rejection hurt? An FMRI study of

social exclusion. *Science*. New York: N.Y., 302(5643), 290-292.

Engel, G. L. (1977). The Need for a New Medical Model: A Challenge for Biomedicine.

Science, 196, Number 4286, 129-136. Retrieved January 16, 2012 from:

http://www.jstor.org/stable/1743658

Faith. (n.d.). Retrieved February 13, 2011, from www.merriam-webster.com:

http://www.merriam-webster.com/dictionary/faith

Farb, J. (2000). *Using Time Out Effectively.* Retrieved from: https://www.adda-

    sr.org/reading/Articles/farb-timeout.htm

Friman, P. C., & Finney, J. W. (2003). Time-out (and time-in). *Cognitive behavior therapy:*

    Applying empirically supported techniques in your practice, 429-435.

Fromm, E. (1994). *Escape from Freedom.* New York: Henry Holt and Company.

Gavrilets, S., Duenez-Guzeman, E. A., & Vose, M. D. (2008). Dynamics of Alliance Formation

    and the Egalitarian Revolution. *PLoS ONE, 3* (10), e3293.

Genovese, J. E. (2007). Evolutionary Psychology and Behavior Analysis: Toward Convergence.

    The Behavior Analyst Today. *8* (2) 187-195.

Geertz, Clifford (1973). The Interpretation of Cultures. New York: Basic Books.

Gintis, H. (2007). A Framework for the Unification of the Behavioral Sciences. *Behavioral and*

    Brain Sciences , 30, 1-61.

Gladwell M. (May 12, 2008). In the Air: Who says big ideas are rare? *The New Yorker.* p. 56.

    Retrieved July 18, 2012 from: http://www.gladwell.com/pdf/intheair.pdf

Gladwell, M. (2008). *Outliers: The story of success.* New York: Little, Brown and Co.

Glasser, W. (1969). *Schools without Failure.* New York: Harper & Row.

Goldstein, J. M., Buka, S. L., Seidman, L. J., Tsuang, M. T. (2010). Specificity of Familial

    Transmission of Schizophrenia Psychosis Spectrum and Affective Psychoses in the New

    England Family Study's High Risk Design. *Archive of General Psychiatry.* 67 (5),

    458-467.

Gould, S. J., & Vrba, E. S. (1982). Exaptation-a missing term in the science of form.

    Paleobiology, 4-15.

Greenberg, D. (1987/1995). *Free at last: The Sudbery Valley School.* MA: Sudbury Valley

    School Press.

Greene, R. (2008). *Lost at School: Why our kids with behavioral challenges are falling through

    the cracks and how we can help them.* New York: Scribner.

Greene, R. W., & Ablon, J. S. (2006). *Treating Explosive Kids: the collaborative problem-

    solving approach.* New York: The Guilford Press.

Greene, R. W. (1998). The explosive child: A new approach for understanding and parenting

    easily frustrated, "chronically inflexible" children. New York: HarperCollins Publishers.

Hahn, K. (1960). *Address by Dr. Kurt Hahn at the Annual meeting of the Outward Bound Trust

    on 20th July, 1960.* Retrieved January 14, 2011, from www.KurtHahn.org:

    http://www.kurthahn.org/writings/obt1960.pdf

Hahn, K. (1965). Harrogate Address on Outward Bound. *May 9, 1965 .* http://www.kurthahn.org/

     writings/gate.pdf.

Harris, J. R. (1998). The nurture assumption: Why children turn out the way they do. New York:

    The Free Press. p. 462. ISBN: 0-684-84409-5

Heath, C. & Heath, D. (2010). *Switch: How to Change Things When Change Is Hard.*

    New York: Broadway Book.

Henggeler, S. W. & Lee, T. (2003). Multisystemic treatment of serious clinical problems. In A.E.

     Kazdin & J. R. Weisz (Eds.). *Evidence-based psychotherapies for children and

    adolescents.* (pp. 301-322). New York: Guilford Press.

Henggeler, S. W., Schoenwald, S. K. & Pickrel, S. G. (1995). Multisystemic Therapy: Bridging

    the Gap between University- and Community-Based Treatment. Journal of Consulting

    and Clinical Psychology. *63*(5), 709-717.

Henriques, G. R. (2004). Psychology defined. Journal of Clinical Psychology, *60*(12),

1207-1221.

Hinshaw, S. P., & Lee, S. S. (2003). *Conduct and Oppositional Defiant Disorders*

(Second Edition ed.). E. J. Mash, & R. A. Barkley, (Eds.) New York: Guilford Press.

Hicks, D., & Tutu, D. (2011). *Dignity: The essential role it plays in resolving conflict.* New

Haven: Yale University Press.

History of the Ohio Teaching-Family Model. (n.d.). Retrieved 2010, 15-December from Ohio

Teaching-Family Model Association: www.otfa.org

Hobbes, N. (1994). *The Troubled and Troubling Child.* Cleveland, OH: American Re-Education

Association.

Hobbes, T. (1660). *Leviathan Chapter XIII: Of the Natural Condition of Mankind as Concerning*

their Felicity and Misery. Retrieved January 29, 2011, from http://oregonstate.edu/

instruct/phl302/texts/hobbes/leviathan-contents.html

Homeostasis (n.d.) Retrieved August 12, 2011, from www.merriamwebster.com:

http://www.merriam-webster.com/dictionary/ homeostasis

Horne, C.F. (1915). *The Code of Hammurabi: Introduction.* Retrieved August 2, 2011, from

http://www.fordham.edu/halsall/ancient/hamcode.asp

Inckle, K. (2011): The First Cut Is the Deepest: A Harm-Reduction Approach to Self-Injury,

Social Work in Mental Health, 9(5), 364-378.

Intensive Outpatient Frequently Asked Questions. (2010). Retrieved 2010 23-November from

Direction Behavioral Health Associates: www.directionbehavioralhealth.com

Kahneman, D. (2011). *Thinking, fast and slow.* New York: Farrar, Straus and Giroux.

Kazdin, A. E. & Blase, S. L. (2011). Rebooting Psychotherapy Research and Practice to Reduce

the Burden of Mental Illness. *Perspectives on Psychological Science. 6*(1) 21-37. DOI:

10.1177/1745691610393527

Kazdin, A. E. (2003). Problem-solving skills training and parent management training for

conduct disorder. In A. E. Kazdin & J. R. Weisz (Eds.). *Evidence-based psychotherapies*

for children and adolescents (pp. 241-262). New York: Guilford Press.

Kazdin A. E. (1982). The Token Economy: A Decade Later. *Journal of Applied Behavior*

Analysis. 15(3). 431-445.

Kazdin, A. E., & Bootzin, R. R. (1972). The Token Economy: An Evaluative Review. *Journal*

of Applied BehaviorAnalysis. 5(3), 343-372.

Kohn, A. (2006). *Beyond Discipline, From Compliance to Community.* Alexandria, VA:

Association for Suoervision and Curriculum Development.

Kohn, A. (1999). *Punished by Rewards, The trouble with gold stars, incentive plans, A's, praise,*

and other bribes . Boston: Houghton Mifflin.

Kostewicz, D. E. (2010). A Review of Timeout Ribbons. *The Behavior Analyst Today. 11*(2),

95-104.

Kurzban, R. & Leary, M. R. (2001). Evolutionary Origins of Stigmatization: The Functions of

Social Exclusion. *Psychological Bulletin, 127*(8), 187-208.

Larzelere, R. E., & Kuhn, B. R. (2005). Comparing Chld Outcomes of Physical Punishment and

Alternative Disciplinary Tactics: A Meta-Analysis. *Clinical Child and Family*

Psychology Review, 8(1), 1-37.

Lehrer, J. (2009). *How we decide.* Boston: Houghton Mifflin Harcourt.

Lenroot, R. K. & Giedd, J. N. (2006). Brain development in children and adolescents: Insights

from anatomical magnetic resonance imaging. *Neuroscience and Biobehavioral Reviews.*

30, 718-729.

Levine, A., & Heller, R. (2010). Attached: The new science of adult attachment and how it can

help you find and keep love. New York: Jeremy P. Tarcher.

Levitt, J. L., Young, T. M., & Pappenfort, D. M. (1981). *Achievement Place: The Teaching-*

Family Treatment Model in a Group-Home setting. Reports of the National Juvenile

Justice Assessment Centers. Chicago Univ., Ill. School of Social Service Administration

School. United States Depertment of Justice, Office of Juvenile Justice and Delinquency

Prevention.

Lochman, J. E., Barry, T. D., & Pardini, D. A. (2003). Anger control training for aggressive

youth. In A. E. Kazdin & J. R. Weisz (Eds.). *Evidence-based psychotherapies for*

children and adolescents. (pp. 241-262). New York: Guilford Press.

Long, N. J., Wood, M. M., & Fecser, F. A. (2001). *Life Space Crisis Intervention* (2nd Edition

ed.). Austin, TX: Pro-Ed.

Lord Shaftesbury. (1897). An Inquiry Concerning Value or Merit. In L. A. Selby-Bigge, *British*

moralists, being selections from writers principally of the eighteenth century (Vol. 1).

Oxford, http://oll.libertyfund.org/?option=com_staticxt&staticfile=show.

php%3Ftitle=2075&chapter=198043&layout=html&Itemid=27: Clarendon Press.

Madsen, W. C. (1999). *Collaborative Therapy with Multi-Stressed Families: From Old*

Problems to New Futures. New York: Guilford Press.

Mair, V. H. (1990). *Tao Te Ching.* New York: Bantam Book.

Martin, A., Krieg, H., Esposito, F. Stubbe, D., & Cardona, L. (2008). Reduction of Restraint and

    Seclusion Through through Collaborative Problem Solving: A Five-Year Prospective

    Inpatient Study. *Psychiatric Services. 59*(12), 1406- 1412.

Maslow, A. H. (1943). A Theory of Human Motivation. *Psychological Review, 50*, 370-396.

Maslow, A. H. (1968). *Toward a Psychology of Being* (Second Edition ed.). Cincinnati: Van

    Nostrand Reinhold Company.

Masten, C. L., Eisenberger, N.I., Borofsky, L.A., Pfeifer, J.H., McNealy, K., Mazziotta, J. C.,

    & Dapretto, M. (2009). Neural correlates of social exclusion during adolescence:

    understanding the distress of peer rejection. *Social Cognitive and Affective Neuroscience.

    4*(2), 143-57.

McMahon, R. J., & Forehand, R. (2003). Helping the noncompliant child: A clinician's guide

    to effective parent training. (2nd edition). New York: Guilford Press.

McPherron, S. P., Alemseged, Z., Marean, C. W., Wynn, J. G., Reed, D., Geraads, D., et al.

    (2010). Evidence for stone-tool-assisted consumption of animal tissues before 3.39

    million years ago at Dikika, Ethiopia. *Nature*, 857-860.

Mead, M. (2007). Sex and temperament in three primitive societies. New York, N.Y:

    HarperCollins.

Meichenbaum, D. H. (1995). Cognitive-Behavioral Therapy in Historical Perspective. In B.

    Bongar & L. E. Beutler (Eds) *Comprehensive Textbook of Psychotherapy: Theory and

    Practice.* (pp. 140-158). NY: Oxford University Press.

Merikangas, K. R., HE, J. P., Burstein, M., Swanson, S. A., Avenevoli, S., Cui, L., et al. (2010).

    Lifetime Prevalence of Mental Disorders in U.S. Adolescents: Results from the National

    Comorbidity Survey Replication- Adolescent Supplement (NCS-A). *Journal of the*

American Academy of Child and Adolescent Psychiatr , 49(10), 980-989.

Miller, A. (1981). *The Drama of the Gifted Child.* New York: Basic Books.

Miller, M., & Blanchard, K. H. (2011). The secret of teams: What great teams know and do. San

Francisco, Calif: Berrett-Koehler Publishers.

Miller, W. R., & Rollnick, S. (2002). Motivational interviewing: Preparing people for change.

New York: Guilford Press.

Mlodinow, L. (2012). *Subliminal: How your unconscious mind rules your behavior.* New York:

Pantheon Books.

Mohr W. K. & Pumariega, A. J. (2004). Level Systems: Inpatient Programming Whose Time

Has Passed. *Journal of Child and Adolescent Psychiatric Nursing. 17*(3). 113-125.

National Institute of Mental Health. (2010). *Suicide in the U.S.: Statistics and Prevention.* NIH

Publication No. 06-4594. Retrieved on August 16, 2012 from: http://www.nimh.nih.gov/

health/ publications/suicide-in-the-us-statistics-and-prevention/index.shtml

Neill, A. S. (1995). *Summerhill School, A new view of childhood.* New York: St. Martin's

Griffin.

Ogburn, W. F. & Thomas, D. (1922). Are Inventions Inevitable? A Note on Social Evolution.

Political Science Quarterly. Vol. 37, No. 1, 83-98. Retrieved July 18, 2012 from:

http://www.jstor.org/stable/pdfplus/2142320.pdf?acceptTC=true

Onoda, K., Okamoto, Y., Nakashima, K., Nittono, H., Ura, M., & Yamawaki, S. (2009).

Decreased ventral anterior cingulate cortex activity is associated with reduced social pain

during emotional support. *Social Neuroscience. 4*(5), 443-54.

Outward Bound Inc. (2008). *Chapter 2: Foundations.* Retrieved January 20, 2011, from Outward

     Bound Staff Manual: http://www.outward-bound.org/wiki/images/6/69/Chapter_2_-

     _OB_-_staff_manual_2008_.pdf

Pacifism. (n.d.). Retrieved February 13, 2011, from www.merriam-webster.com:

     http://www.merriam-webster.com/dictionary/pacifism

Patterson, G. R., Debaryshe, B., & Ramsey, E. (1990). A Developmental Perspective on

     Antisocial Behavior. *American Psychologist, 44*, 329-335.

Perry, B. D., & Szalavitz, M. (2008). *The Boy Who Was Raised as a Dog and Other Stories from*

     a Child Psychiatrist's Notebook. New York: Basic Books.

Pettit, G. S., Laird, R. D., Dodge, K. A., Bates, J. E., & Criss, M. M. (2001). Antecedents and

     Behavior-Problem Outcomes of Parental Monitoring and Psychological Control in Early

     Adolescence. *Child Development*, *72*(2), 583-598.

Pink, D. H. (2011). *Drive: The surprising truth about what motivates us.* New York: Riverhead

     Books.

Pinker, S. (2002). *The Blank Slate: The Modern Denial of Human Nature*. New York: Viking.

Pinker, S. (2006). The Blank Slate. *The General Psychologist, 41*(1), 1-8.

Pinker, S. (2010). *The cognitive niche: Coevolution of intelligence, sociality and language.*

     Retrieved February 18, 2011, from www.pnas.com: www.pnas.org/cgi/doi/10.1073/

     pnas.0914630107

Richards, A., Kurt Hahn. In J. C. Miles, & S. Priest, Adventure Education.

Rickwood, D., Deane. F. P., Wilson, C. J., & Ciarrochi, J. (2005). Young people's

     help-seeking for mental health problems. *Australian e-Journal for the Advancement of*

     Mental Health, 4(3) (Supplement), Retrieved from:

http://www.reachoflouisville.com/Roscommon/docs/

Crisis%20intervention%20articles/Young%20People's%20Help%20Seeking%20for%20

Mental%20Health%20Problems.pdf

Rogers, C. R. (1957). The Necessary and Sufficient Conditions of Therapeutic Personality

Change. *Journal of Consulting Psychology, 21*(2), 95-103.

Sanfey, A. G. (2007). Social Decision-Making: Insights from Game Theory and Neuroscience.

Science. 318, 598-602.

Sells, S.P. (2001). *Parenting your Out of Control Teenager.* NY: St. Martin's Griffin.

Sidman, M. (1993). Reflections on Behavior Analysis and Coercion. *Behavior and Social Issues.

3*(1-2), 75-85.

Simpson, G. A., Cohen, R. A., Pastor, P. N., & Reuben, C. A. (2008). *Publication & Information

Products: NCHS Data Brief.* Retrieved 2010 8-November from Centers for Disease

Control and Prevention Website: http://www.cdc.gov/nchs/data/databriefs/db08.htm

Skinner, B. F. (1981). Selection by Consequences. *Science. 213*(4507), 501-504.

Smith, G. (March 14, 2012). Why I am Leaving Goldman Sachs. Retrieved on July 26, 2012

from: http://www.nytimes.com/2012/03/14/opinion/why-i-am-leaving-goldman-sachs.

html?pagewanted=all#

Straus, M. A. (2001). New Evidence for the Benefits of Never Spanking. *Society, 38*(6), 52-60.

Szapocznik, J. & Williams, R. A. (2000). Brief Strategic Family Therapy: Twenty-Five Years of

Interplay Among Theory, Research and Practice in Adolescent Behavior Problems and

Drug Abuse. *Clinical Child and Family Psychology Review. 3*(2), 117-134.

Tancredi, L. (2010). Hardwired behavior: What neuroscience reveals about morality. Cambridge:

Cambridge University Press.

Tohn, S.L. & Oshlag, J.A. (1995). *Crossing the Bridge: Integrating solution focused therapy Into clinical practice.* Natick, MA: Solutions Press.

Toner, J.M. (1888). *Washington's Rules of Civility and Decent Behavior in Company and Conversation.* Washington D.C.: W.H.Morrison.

Tooby, J., & Cosmides, L. (1990). The Past Explains the Present, Emotional Adaptations and the Structure of Ancestral Environments. *Ethology and Sociobiology, 11*, 375-424.

Tooby, J., & Cosmides, L. (1992). The Psychological Foundations of Culture. In J. H. Barkow, L. Cosmides, & J. Tooby, *The Adapted Mind: evolutionary psychology and the generation of culture* (pp. 19-136). New York: Oxford University Press.

Trivers, R.L. (1971). "The evolution of reciprocal altruism." Quarterly Review of Biology 46: 35–57. doi:10.1086/406755.

Trivers, R. L. (1974). "Parent-Offspring Conflict." American Zoologist *14*(1): 249–264. doi:10.1093/icb/14.1.249.

U.S. Department of Health and Human Services. (1999). *Mental Health: A Report of the Surgeon General.* U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration, Center for Mental Health Services, National Institutes of Health, National Institute of Mental Health. Rockville, MD. Retrieved on March 23, 2012 from: http://www.surgeongeneral.gov/library/mentalhealth/chapter3/ sec1.html

U.S. Department of Health and Human Services. (2012). Substance Abuse and Mental Health Services Administration. *SAMSHA's National Registry of Evidenced Based Programs*

and Practices: Brief Strategic Family Therapy. Retrieved from

http://nrepp.samhsa.gov/ViewIntervention.aspx?id=15.

U.S. Public Health Service. (2000). *Report of the Surgeon General's Conference on Children's*

Mental Health: A National Action Agenda. Washington, DC: Department of Health and

Human Services. Retrieved March 23, 2012 from: http://www.surgeongeneral.gov/topics/

cmh/childreport.html

Volition. (n.d.). Retrieved May 24, 2012, from www.merriam-webster.com:

http://www.merriam-webster.com/dictionary/volition

Vorrath, H. H., & Brendtro, L. K. (1985). *Positive Peer Culture.* New York: Aldine De Gruyter.

Vygotsky, L. (1978). *Mind in Society* (14th ed.). Cambridge, MA: Harvard University Press.

W.K. Kellogg Foundation, (2004). *W.K. Kellogg Foundation Evaluation Handbook.* Retrieved

October 3, 2012 from: http://www.wkkf.org/knowledge-center/resources/2010/W-K-

Kellogg-Foundation-Evaluation-Handbook.aspx

Walsh, J. R. (2010a). Desire and the Source of Human Behavior. Unpublished Document.

Walsh, J. R. (2010b). Standard Talks: Three Educator Challenges. Unpublished Document.

Walsh, J. R. (2010c). Standard Talks: Three Educator Objectives. Unpublished Document.

Walsh, J. R. (2008). First Things First: An Introduction to Wholeistic Education.

Unpublished Document.

Walsh, J. R. (2006). An Introduction to Wholeistic Education. Unpublished Document

Walsh, J. R. (1993). Winning *Is* Everything: An Introduction to Whole-istic Youth Sports

Education. Unpublished Document.

Whyte, L. L. (1961). *Essay on Atomism: From Democritus to 1960.* Middletown, Connecticut:

Wesleyan University Press.

Whiten, A.; Goodall, J.; McGrew, W. C.; Nishida, T.; Reynolds, V.; Sugiyama, Y.; Tutin, C. E.

G.; Wrangham, R. W.; Boesch, C. (1999) Cultures in Chimpanzees. Nature, *399* (6737),

Jun 1999, 682-685. doi: 10.1038/21415

Williams, K. D. (2001). *Ostracism, The power of silence.* The Guilford Press.

Williams, K. D., Cheung, C.K., Choi, W. (2000). Cyberostracism: effects of being ignored over

the Internet. *Journal of personality and social psychology*. *79*(5), 748-62.

Wirth J.H., & Williams K.D. (2009) 'They don't Like our kind': Consequences of being

ostracized while possessing a group membership. *Group Processes & Intergroup

Relations*. (1), 111–127.

Wolf, M. K., Risley, T., & Mees, H. (1964). Application of operant conditioning procedures to

the behaviour problems of an autistic child. *Behaviour Research and Therapy. 1*,

305-312.

Zak, P. J. (2012). *The moral molecule: The source of love and prosperity.* New York: Dutton.

Appendix A

Permission to use Wholeistic Education's copyrighted documents

From: Joseph Walsh <joe@wholeisticeducation.com>

Date: December 6, 2012, 9:25:26 PM EST

To: Cerissa Desrosiers

Subject: Copyright Permission

Cerissa,

Please accept this letter of consent, allowing you complete freedom to republish my materials in

your dissertation.

Thank You,

Joseph R. Walsh

Principal Educator

WED Wholeisticeducation, PLLC

www.wholeisticeducation.com

Appendix B

First Things First

An Introduction to Wholeistic Education™

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Joseph R. Walsh, M.Ed. LCMHC

Wholeistic Education Principal Educator

Hello Educators!

Survival, Success, Maturity, Actualization, Enlightenment...

These are some of the terms we use to describe the goal of education.

How many of us achieve these goals?

Even if we are lucky enough to receive the best efforts of caregivers, years of schooling, and good fortune, we are so often "unfulfilled" or "harmful" to others or ourselves.

Wholeistic Education (WED™) offers a way to optimal health and contentment. Founded on an understanding of human nature and development, WED applies the ancient priority of true education: to raise up, lead out, rear to maturity, within the behavioral demands of society as expressed in culture.

In taking care of "first things first", WED provides a foundation on which more specific training objectives (e.g. academic, professional, artistic, spiritual, etc.) may be pursued without endangering the fundamental health and contentment of true education. Through my studies, and over twenty years of experience as a child, adult, and group therapist, educator, wellness counselor, coach, and parent, I have come to understand that full human development is the result of dynamically balanced pro-socialization and autonomy, which relies simply on healthy practice and habit formation, which is most efficiently and effectively promoted through culture.

This document can show you how Wholeistic Education may help you create and maintain a healthy, positive, educational culture. It provides a simplified, brief, introduction to WED without obscuring its defining qualities. It's meant to guide our initial discussion together, and if you wish, to help further your exploration of this subject.

Basic WED components:

1. The WED Proposition

"First Things First" – that saying summarizes the WED approach. To effectively practice WED, one must accept the WED proposition:

> *Education must first accomplish the habitualization of Respect, Dignity, Responsibility, Compassion and Perseverance (WED's Developmental Goals). In the absence of this accomplishment, even the most "schooled" person will not be optimally healthy or content.*

> *A great way to habitualize The Developmental Goals by practicing WED's Behavioral Guidelines©.*

> *With this foundation, a person may then healthfully pursue any other interest, discovering his or her best self and most healthy and content life.*

2. Implementation Process

We must avoid the distrust that results when people identify implicit (and what they will tend to perceive as subjective and manipulative) rule-sets. So, we start by openly identifying our desire to implement WED, and taking the time (maybe just a few minutes) to gather the group, present The Behavioral Guidelines and Apology Poster, and seek consensus (which is not necessary...our practice is our own and can be even more powerful in the absence of group support). After it has been affirmed that The Guidelines are merely normally desired decent behavior, they are officially adopted as the Group Ethic, posted in a visible place, and declared the non-negotiable practice of all members of the group.

3. Educator Objectives and Challenges

Then we explain our dedication to WED Educator Objectives: a) Model healthy relationship, b) Provide clear reflection, c) Encourage true focus, and Educator Challenges: a) Give up control to gain authority, b) Neither Punish nor enable imbalanced behavior, c) Avoid adversarial dynamic.

4. The Four Rs

Reflect, Remind, Restrict, Reintegrate – this is WED in action. While exceptionally simple, making a habit of The Four Rs can be very difficult. We present WED's Four Rs and discuss.

5. Dynamic Leadership

We genuinely stress how dedicated we are to our practice and how committed we are to following the leadership of whomever is best practicing The Guidelines at any given moment. Our spirit is felt and determines our potential success!

Some of the benefits of WED:

~ WED produces an educational culture that promotes all other educational experiences: school, psychotherapy, behavior modification, conflict resolution, academic/vocational training, sports, music, arts, wellness, adventure, etc.

~ WED is based on basic human nature and universal human rights, so it's compatible with all racial, ethnic, religious, or other group cultures. It avoids the endless debates over nature vs. nurture, science vs. religion, control vs. liberty, etc.

~ WED reduces conflict by pointing potential combatants away from ego-control struggles and toward the practice of its mutually accepted Behavioral Guidelines©.

~ WED's relatively simple, focused approach increases group efficiency -- less leadership and other resources are required to promote healthy growth.

~ WED is proven in multiple settings with widely varied populations, including severely traumatized, limited, personality disordered, and conduct disordered children and adults.

All of the WED Educators have been thrilled by our results with this approach, and are grateful for the opportunity to share it with you. We are really eager to learn from each other, for the benefit of everyone we may influence.

-- Joe Walsh

"Education is the ability to listen to almost anything without losing your temper or your self-confidence."

~ Robert Frost

Table of Contents

"There is a courtesy of the heart; it is allied to love. From it springs purest courtesy in the outward behavior."

~Johann Wolfgang von Goethe

- Group Mission and Ethic

To produce things and to rear them,
To produce, but not to take possession of them,
To act, but not to rely on one's own ability,
To lead them, but not to master them -
This is called profound and secret virtue.

~ Lao Tse

If our goal is true education, why not begin by stating that clearly and openly? Here's a good, sample

mission statement:

"The (Group Name – *remember, a group name can be just the two names of a married couple or other intimate dyad*) is committed to the education of every member, and the positive contribution of our group to the communities in which we live."

But how do we accomplish that? *Even under ideal conditions, true education and harmonious relations are such complex and difficult endeavors. We can find ourselves in a vicious cycle: the more difficult it gets, the more negative we feel, and so the more difficult it gets...But, there is an old Chinese saying, "Two people working separately do the work of two people, but two people working together can do the work of one hundred". If we work together in a spirit of loving support and teamwork, our groups can enjoy the immense benefits that only a positive, educational culture can provide!*

Some challenges seem so common and obvious that we can overlook the need to address them in a careful and direct way. People naturally think they have an adequate sense of what it takes to make a positive culture: simply be a "decent" person and all will be well. If this were all it took, we would not be searching for solutions to our chronic frustrations. WED offers a specific solution. ***WED unifies group members around practice of a set of behavioral guidelines as a foundation for a culture of connection, mutual support, and individual creativity.***

With our mission statement in mind, we may take the simple steps necessary for the implementation of

the WED approach:

- An ignoble aspect of human nature is that we are selected (through the process of biological evolution) to prefer implicit rule-sets. That is, we like rules, but we like to keep them to ourselves instead of out in the open. This is because by keeping our rules hidden in our minds and not explicated we may gain a survival advantage. That is, we may be able to have the rules apply more beneficially to us than others.

- The problem is that because we are selected to prefer implicit rule-sets, we are also selected to be very keen at identifying others who harbor them. The identification of implicit rule-sets in others induces distrust. That is because we recognize it as a sign others may seek to control us, against which we naturally rebel.

- So, *WED's Implementation Process* begins with the establishment of safety and trust through the open process of creating a *Group Ethic*.

- This is done by first presenting *The Behavioral Guidelines*© to the group (ideally this presentation meeting includes all members) for review and approval.

- After it has been affirmed that *The Behavioral Guidelines*© are merely the decent behavior desired by everyone, they are officially adopted as the *Group Ethic*, posted in a visible place, and declared the non-negotiable practice of *all* members of the group.

- At that point, WED's *Three Educator Challenges, Three Educator Objectives, The Four Rs,* and *Dynamic Leadership* are reviewed and affirmed as essential educational elements. (For a more complete explanation of WED's *Three Educator Challenges, Three Educator Objectives, The Four Rs,* and *Dynamic Leadership*, please see those sections in this booklet).

- From that point forward, practice of *The Behavioral Guidelines*© becomes the vigilant focus of the group culture.

Group Culture

"Neither a lofty degree of intelligence nor imagination nor both together go to the making of

genius. Love, love, love, that is the soul of genius."

<div align="right">~ Wolfgang Amadeus Mozart</div>

Technically, culture is the language, rituals, and network of mutual expectations of a given group. It defines the quality of environment in which our relationships occur. There is a great deal of published research in support of a cultural approach to education. (See especially Brunner, Vygotsky, de Waal, Johnson, Vorrath and Brendtro in "Selected Supporting Material")

Some of WED's basic ideas on creating and maintaining positive culture:

- <u>Healthy groups</u> rely on positive culture. The creation and maintenance of positive culture is principally the responsibility of parents (through leadership of families), parent proxies (e.g. teachers, therapists, etc.), and all members of intimate relationships.

- *WED's Parenting Ideal* is the theoretical construct at the heart of WED. It begins with unconditional positive regard (Love) for all members of the group. Love energizes guidance toward the dynamically balanced fulfillment of human needs as selected in the Environment of Evolutionary Adaptation (EEA).

- <u>Environment of Evolutionary Adaptation (EEA)</u> is the environment that humans lived in for hundreds of thousands of years, and that provided the pressures of selection responsible for who we are today. It is the basis for understanding human needs, and shows humans are cooperative *and* competitive, individualistic *and* communitarian, altruistic *and* selfish, etc.

- *WED's Educational Ideal* follows the example of its *Parenting Ideal*, dynamically balancing the promotion of pro-social adaptation with autonomy.

  - Ideal education focuses equally on individual *and* group actualization. By understanding the connection between the EEA, *The Parenting Ideal* and *The Educational Ideal*, we can free ourselves and our groups of the perceived conflict between working in the best interest of the individual *or* the group – we may recognize they are the same!

  - <u>Education</u> means to raise-up, lead-out, rear. It can be facilitated by anyone in any relationship.

For an expanded discussion on human nature, see especially de Waal, Ridley, Wright, Searle, Badcock,

and Johnson, in "Selected Supporting Material".

Simplified Summary: So, groups are most healthy that judiciously replicate, on all levels, the EEA as

Reflected in the Parenting Ideal and through educational practices that dynamically balance

promotion of individual autonomy with pro-social conformance.

- Humans are "gregarious animals" — groups are the <u>basic unit</u> of humanity.

- <u>Culture</u> = language, rituals, rights, network of mutual expectation. It is how we define, know, create and maintain our group. Healthy groups seek to promote the dynamic balance of social adaptation and autonomy through culture.

- Whereas humans are neither selfish nor selfless, but are both, culture is our way of tipping the scales in the direction of our healthy, shared <u>values</u>. Environmental *and* genetic, culture is indistinguishable from the individual. To devalue culture is to devalue an essential element of human nature, and reject a most powerful tool of healthy group leadership.

"Civilization itself is a certain sane balance of values."

~ Ezra Pound

Ultimately, nothing healthy can grow in unhealthy soil. Culture is the soil in which humans and

human groups grow. So, nothing can take the place of healthy cultural soil. And that starts with the

love of parents and/or the leadership of loving parent proxies.

Check-In
- *Questions/comments regarding Group Mission or Group Culture?*
- *General Questions/comments?*

Behavioral Guidelines

"... all moral culture springs solely and immediately from the inner life of the soul, and can only be stimulated in human nature, and never produced by external and artificial contrivances....Whatever does not spring from a man's free choice, or is only the result of instructions and guidance, does not enter into his very being, but still remains alien to his true nature; he does not perform it with truly human energies, but merely with mechanical exactness."

~ Bertrand Russell

So, loving leadership is the first step toward positive culture, and then comes defining shared values. Next we must effectively express those values in culture. Expressing our shared values through culture is the natural way humans influence individual development to conform with the ideals that embody those shared values. These ideals are WED's "Developmental Goals". WED's Developmental Goals manifest in what we call the "Behavioral Guidelines".

In summary:

- The Behavioral Guidelines are a unique component of WED. They are the central promotional component and most reliable measure of the proliferation of our shared values.

- They Reflect our developmental goals: RESPECT, DIGNITY, RESPONSIBILITY, COMPASSION, and PERSEVERANCE – terms that are used for their comprehensive simplicity.

"Perseverance and spirit have done wonders in all ages."

~ Gen. George Washington

Three major reasons for the effectiveness of the Behavioral Guidelines:

1. *The Guidelines explicitly reflect universal human rights/expectations. Behavioral expectations must be explicated (in black-and-white, on paper) to avoid the vicious cycle of distrust, adversarial rebellion, control, distrust, etc., that is naturally stimulated when one feels one may be manipulated by rule-sets that are kept implicit in the minds of other group members.*

2. *The Guidelines, while minimally invasive or constraining, are clearly defined, and their practice is non-negotiable for all group members.*

3. *The Guidelines provide an active, unifying "rallying point", like a map, with real, useful benefits in our daily lives.*

(GROUP NAME) MEMBERS ALWAYS:

1. **MAINTAIN ATTITUDE OF RESPECT AND DIGNITY.**

    a. Politely greet, welcome, and acknowledge efforts of all.
    b. Calmly request space if emotionally overwhelmed.
    c. Apologize for any possible offense, including accidents. *

2. **USE LANGUAGE AND BODY RESPONSIBLY.**

    a. Avoid offensive words, including those of a racial, ethnic, religious, or sexual nature.
    b. Refrain from using language or body to intimidate or injure.
    c. Calmly ask for explanation of any confusion, disagreement, conflict or concern.

3. **PROACTIVELY COOPERATE.**

    a. Seek opportunities to assist; resist urges to, embarrass, or undermine.
    b. Gratefully acknowledge authority of leaders. **
    c. Treat all members as teammates, regardless of personal feelings.

4. **CAREFULLY ATTEND TO HEALTH AND SAFETY.**

    a. Alert an adult to any physical pain or danger.
    b. Control body movement such that self or others are not injured.
    c. Wear activity-appropriate clothing.
    d. Keep body properly groomed (e.g., daily bathing, teeth brushing, etc.).
    e. Take good care of all furniture, equipment, facilities, and environment.

5. **HONESTLY GIVE BEST EFFORT.**

    a. Calmly communicate all perceived offenses.
    b. Earnestly participate in just resolution of dispute.
    c. Put education, wellness of self and others, and responsibility to group ahead of personal image and interests.

*See Apology Poster
**See *Dynamic Leadership*

Apology

Apology is about caring for each other. It is about reminding each other that even though we did something wrong; we want to have a good relationship. The closer we are, the more important it is for us to remind each other of that. If we live together, it is very important. Mistakes and wrongdoing are a natural part of being human. That makes apology something everyone must do.

To apologize, we need to do three things:
1. **Understand what we did wrong** - accurately, without describing it "as nothing" or as "the worst thing in the world"
2. **Say "I am sorry"** - and really mean it!
3. **Make restitution** - which is how we attempt to "repay" whomever we hurt, and fix or replace whatever we damaged

We can do the first two steps by ourselves, so we may find them easy. The third step is often very difficult, because if forces us to try to satisfy whomever we may have hurt. So, in a way, they have some control over us. This can make us feel afraid, sad or angry.

But it's hard to really apologize when we feel afraid or angry. Because, when we feel that way, we think of ourselves first, and try to protect ourselves, and don't focus enough on others. Even if we try to apologize, when we are feeling sorry for ourselves, we usually blame someone, or something else for what we did. But, if we blame anyone or anything else, even just a little, we are not really apologizing.

If when we do something wrong, we can be strong, and really think of others, and really apologize, we can feel good about ourselves and know that we are an irreplaceable part of our healthy positive group.

"True remorse is never just a regret over consequence; it is a regret over motive."
~Mignon McLaughlin

"A stiff apology is a second insult.... The injured party does not want to be compensated because he has been wronged; he wants to be healed because he has been hurt."
~ G.K. Chesterton

Check-In
- *Questions/comments regarding Behavioral Guidelines?*
- *General Questions/comments?*

Educational Leadership and the Behavioral Guidelines

"I doubt that we can ever successfully impose values or attitudes or behaviors on our children—certainly not by threat, guilt, or punishment. But I do believe they can be induced through relationships where parents and children are growing together. Such relationships are, I believe, built on trust, example, talk, and caring."

~Fred Rogers

Mindful of our mission statement, our leadership rationale must always be "the education of every member" of our group. This is best achieved through the creation and maintenance of a positive culture, and is especially important in times of conflict!

- In our reward-and-punishment society, the <u>key leadership challenge</u> is moving from a "control" (crude, hierarchical dominance), and "punishment" (retaliatory violence) model, to an "authority" (voluntarily granted influence), and "natural consequences" (Restriction from group) model.

- Sometimes we use the word "consequence", or "discipline" when what we are describing is really "punishment". To punish is to injure in retaliation or retribution. <u>Punishment always connotes violence</u>. Therefore, it is antithetical to our positive group values.

"Even if we take culture as the ultimate framework, we can admit that the transference of ideas through symbols – the definition of culture – is itself motivated by some desire to do so."
~ Jerome Bruner

- <u>Violation</u> of The Behavioral Guidelines should first result in the provision of support (Embrace All Feelings, Guide All Behaviors – WED's overarching motto), and ultimately result in practice of The Guidelines or Restriction: restricted access to, or safe separation from the group and group privileges until commitment to practicing The Guidelines can be reconfirmed. To do more than that is to move from natural consequences based on respect for the autonomy of the individual and righteous defense of the group to proactive violence.

- In its original Greek, <u>discipline</u> had little to do with the forced, often punishing conformance to an external rule with which it is associated today. A healthier concept of discipline is as it was originally conceived, to describe the <u>voluntary</u> pursuit of personal development through the vigorous exercise of body and mind, and the <u>internally</u> directed avoidance of unhealthy influences.

- <u>Restriction</u> from the group reflect its respect for the autonomy of each member, *and* its natural right to protect its healthy, positive culture from negative influence. If handled properly, even physical restraint (by medical personnel or police – not by a group member) can be an expression of positive group culture and appropriate leadership. It's essential for all members to know through the actions of all others that they are safe.

As we have discussed, the success of Ideal Parenting, and its proxy, Ideal Education, as manifest in the

proliferation of our desired Developmental Goals can be best accomplished by educational leadership

that accommodates natural, individual impulses toward both selfish and selfless behavior. In practice,

this is done by balancing two educational elements:

1. Clearly defining, explicating, and demanding practice of minimally constraining behavioral standards based on basic human rights and expectations that reflect shared group values and promote desired developmental goals. To this end, WED Leaders constantly declare:

"These are our (my) Behavioral Guidelines, this is the world we (I) choose to live in.

Everyone is welcome here who commits to these."

2. Supporting the private, creative, and unpredictable path of each individual's life through a predisposition of positive regard and avoidance of undue manipulation or influence beyond the Behavioral Guidelines. To this end, WED Leaders constantly declare:

"We (I) are (am) not here to control you. We (I) are (am) here to help you be whoever

you are. Through our shared commitment to practice of The Behavioral Guidelines, we

can help each other discover, and become our best selves."

In a healthy group, educational pressures progress in stages. Although the ways we pressure each

other (non-verbal prompts, Reminders, criticisms, complaints, Restrictions) are numerous, we mustn't

get lost in the details. Instead of attempting to apply frustrating, excessively complicated systems or

methods, WED's Guidelines allow us to keep it simple. Our fundamental, governing question is always:

"Are we practicing the Guidelines?"

Basic Steps for Positive Cultural Leadership during Conflict

"It would be possible to describe everything scientifically, but it would make no sense; it would

be without meaning, as if you described a Beethoven symphony as a variation of wave

pressure."

~ Albert Einstein

So, now let's look at WED in typical action. These basic steps provide an outline and reference points that apply to virtually all situations in which conflict or potential conflict requires positive cultural leadership. You can remember them as the "Four Rs": Reflect, Remind, Restrict, Reintegrate.

1. **Reflect**. First, ask yourself if the perceived wrongdoing should be addressed.

    a. Is it really wrongdoing? Has a Behavioral Guideline really been violated? Sometimes our own state of mind leads us to be more critical than we should be. **Remember: Never seek control, never punish, always avoid adversarial dynamic, and stay positive! Remind yourself first of your own commitment to practice of the Guidelines and leading by example.**
    b. Wrongdoing that is not malicious or intentional is sometimes best ignored, at least temporarily.

        Ex. You notice a group member referring to another as "Stupid" (this could be someone speaking to you). You feel an immediate urge to criticize the name-caller. After some Reflection, you realize that you're still angry at the name-caller for something he/she did previously. It seems to have been said in jest and without any obviously intended offense, so perhaps the name-calling is relatively harmless. You decide to let it go and monitor the situation.

    c. On the other hand, never ignore behavior that you believe reflects a person's unhealthy habit, even if on the surface the behavior seems trivial. **Remember: WED is about replacing less healthy habits with more healthy habits. This occurs through discontinuing the practice of unhealthy habits and mutually practicing The Guidelines! We must lead by example!** Use this Reflection time to Remind yourself of that (Remind yourself before Reminding others!). You want to respond (choice-based), not react (impulse-based), so that you may avoid introducing control, inducing distrust, or participating in an adversarial dynamic.

Ex. Although the word "Stupid" is relatively mild, and there seems to be no obviously intended offense, you believe that in this instance, the use of the term may represent some real disrespect, and attempt to embarrass.

2. **Remind**. If you believe the wrongdoing should be addressed, Remind – that is, lead yourself and the group, back toward the "mind of the group practice" as described in the Guidelines. **Remember: resist any urge to control by openly criticizing, lecturing, or ordering. Instead, use humble questions**:

    Ex. "Sorry to interrupt, I don't want to be a bother, but I thought you might have hurt (group member) by calling him/her, stupid. What do you think? Is that avoiding offensive language like it says in our Behavioral Guidelines (2.a.)?"

    a. This implies a gentle suspicion of wrongdoing (or depending on your tone and body language can be an outright criticism). But most importantly it displays a <u>belief in, and expectation of, the person's capacity to accept responsibility</u> without further external guidance. It <u>triangulates</u> the discussion, turning it toward The Guidelines and away from a potential adversarial dynamic between you and the person you are questioning (i.e., ego-conflict).

    b. Any genuine and sufficient expression of responsibility (including apology where appropriate, see Apology Poster) should be <u>praised</u>, and attempts should be made to <u>ease discomfort</u>.

        Ex. "Oh, that's ok, it's not really a big deal. I'm really glad you are so able to practice The Guidelines. Is there something you'd like to do to help make things better?"

    Reinforcing this healthy practice will make it more likely to become a habit. You may ask the name caller if he/she believes he/she should apologize, but <u>be careful</u> not to undermine the name caller's success by continuing with a critical tone. Even if this the millionth time we've gone over the same issue, we must remain positively hopeful in the potential growth of each group member!

    c. Any *appropriate* rejection of the implied wrongdoing should be <u>praised</u>, and either accepted (with apology, if your implication may have been offensive), or <u>politely explored further</u>.

        Ex. "Oh, thanks for explaining it to me so politely, now I get it. I'm sorry if I seemed too critical."

        Or

        "Well, thanks for talking to me about this politely, but I still don't understand…can you help me?"

By always expressing your concern only with reference to The Guidelines, in a way consistent with The Guidelines, and in the form of <u>humble questions</u>, you reduce the ability of the accused to displace attention from his/her behavior to yours, and thereby reduce the possibility for ego-conflict. This does not mean that you may never show your emotion. In fact, it is important to be <u>genuine</u>. When, in the course of questioning the behavior of another, your behavior possibly strays from The Guidelines, it is an excellent opportunity to <u>model</u> responsibility, apology and <u>self-forgiveness</u>.

> *Ex. "I'm sorry if I've offended you. I feel like I'm getting frustrated and not practicing The Guidelines as I should. I promise to do better. Can we please continue?"*

d. Any *inappropriate* reaction to the implied wrongdoing should be met with a <u>refocus on the inappropriate reaction</u> to your question. In this way, we never allow the historic "facts" of the dispute to become more important than our practice <u>in the moment</u>. **Remember: Our priority always remains practicing The Guidelines.**

> *Ex. "Why are you speaking to me with that tone (or ignoring me, or giving me that angry look, etc.)? Have I done something to offend you? I'm sorry if I have. I'm just concerned you may not be practicing The Guidelines. Can you please help me understand?"*

Until there is a resolution of the ego-conflict resulting from the reaction to your reasonable question – until you "get on the same team" – a successful resolution of the original issue is highly unlikely. Remember to keep triangulating focus with The Guidelines, both in review of the behavior of yourself as well as others.

e. If you believe the dissenting member will not presently commit to practicing The Guidelines, there must be a temporary separation. The dissenting member should be <u>calmly</u> asked to remove him/herself to a safe location <u>until sufficient resources are available</u> to further review the conflict. Alternately, the leader may choose to remove him/herself (and any other members of the group) away from the dissenting member if appropriate (safe, non-enabling of the dissenting member, etc.). If the dissenting member will not separate voluntarily, they may be <u>required</u> to go to a safe location, like a resource room, or bedroom.

3. **Restrict**. If a dissenting member will not separate voluntarily, or when required, or sufficiently proves his/her non-commitment to practicing The Guidelines, he/she must be Restricted. The consequences of this choice are that he/she looses access to the group and may not expect group privileges or resources (other than those necessary for safety and health). **Remember: Restriction is not punishment! It is a display of the group's respect for the autonomy of the dissenting member to choose not to practice The Guidelines, and simultaneously, a display of the group's non-negotiable commitment to practicing The Guidelines.**

a. As <u>calmly and lovingly</u> as possible, simply state that the dissenting member is "Restricted" and must go to a separate place from which he/she may not access the group or enjoy any group privileges. This is a place selected by and prepared by adult group leader(s). This generally looks like a child, in an isolated space, without cell phone, computer, TV, music devices, or any other group resource aside from those necessary for safety and health. (Yes, all of those things are virtually always group resources. Even if some of those items may have been gifted to the child, or they have bought them with their own money, it is highly unusual for a child to have paid for the electricity needed to run them. Also, trust is a group privilege, and the use of these entertainment/escapist devices may, in some cases, be rightly considered of questionable influence, especially in light of the dissention). Remember, <u>this is not a punishment</u>, though it will likely feel punishing to the Restricted member. (This is primarily due to the intolerable nature of Restriction deeply encoded in the human brain from hundreds of thousands of years of evolution as a gregarious animal. That is, humans are naturally selected to feel intolerant of Restriction due to the fact that in the EEA, Restriction nearly always meant death. Secondarily, Restriction feels punishing due to the unpleasant nature of being deprived the group's special, material provision). <u>Restriction is a display of the group's respect for the autonomy of the Restricted member</u>. Seeing how we are not seeking control, we must allow members to choose to reject The Behavioral Guidelines. However, The Guidelines have been adopted by the group as non-negotiable, so if one chooses not to practice with the group, <u>the group has not only the right, but the duty to protect itself from the potentially negative influences of the Restricted member's unwelcomed behavioral practices</u>. Also, in order to promote the greatest educational benefit, the Restricted member must be allowed to feel <u>the full weight and consequences of his/her decision</u> to leave the group. When Restricting someone, it can be hard to avoid punishing. Red flags include taking just one or several "privileges" or other items away, or setting a time limit on the Restriction. Again, remember, <u>punishment is antithetical to WED!</u> By removing all, instead of some group resources, we are simply conserving all resources within the group and providing the Restricted member the most complete and realistic information with which to consider his/her decision to leave the group; <u>we are avoiding enabling as well as punishing</u>. We prove our commitment to not punishing by readily accepting the Restricted member back into the group as immediately as practically possible upon his/her genuinely expressed recommitment to practicing The Guidelines (Reintegration – the fourth "R"). There must be no minimum time-limit. (In an adult group, the person Restricting the other may have to leave the setting and demand not to be contacted until the Restricted member is recommitted to The Guidelines).

b. If the member refuses to move to a separate space, or is in other ways non-compliant with Restriction, he/she remains Restricted. Other members do their best to <u>ignore</u> him/her, <u>deny all group privileges and resources</u> (again, excepting where safety and health is concerned). If his/her behavior becomes threatening, he /she may need to be physically escorted to and/or restrained in a safe place. (For all but the most physically unimposing and very young, this is a job for the medical personnel or police…remember, physical intervention is virtually always a violation of our commitment to avoid control, and adversarial dynamic!)

c. If at any point, the dissenting member shows a genuine commitment to practicing The Behavioral Guidelines, he/she should <u>receive a Reintegration meeting as soon as practically possible. Remember, we are never to punish or seek to control – only to care for each other – which we accomplish through the maintenance of our positive culture.</u>

Important discussions about the facts and meaning of the conflict can always be addressed in the future.

d. Make sure to communicate that the <u>separation is not punitive, is hopefully temporary, and that you look forward to the opportunity to Reintegrate the dissenting member back into the group as soon as possible</u>. We may temporarily close a door on group members, but they need to know that they hold the key!

e. The dissenting member should be expected to <u>voluntarily seek reintegration</u> by appropriately asking for a Reintegration meeting. Ideally this occurs with the entire group, but more often, for practical reasons, with the appropriate leader(s).

f. If the person with whom you are in conflict is another adult, voluntarily separate (to whatever degree possible, while attending first to your responsibilities). Seek mediation/counseling from an appropriate source if the conflict persists.

4. **Reintegrate.** Reintegrate the Restricted member, and celebrate their return. **Remember: Reintegration is every member's right. Its function is only to confirm the Restricted member's genuine commitment to practicing The Guidelines.**

a. In preparation for the reintegration meeting, think about how you could have shown greater leadership. Begin all meetings with a genuine apology. After all, <u>improved leadership may prevent any particular conflict</u>.

b. Ask the Restricted member to review The Guidelines first to explore and indicate any ways leaders and others may have violated The Guidelines. <u>Go slowly and carefully! Strong leaders invite criticism</u>! Help with the exploration and stress how important it is for leaders to understand their potential mistakes so they can be better leaders. Take as much time as necessary to fully exhaust the Restricted members feelings of mistreatment. <u>Make a full apology</u> for any possible wrongdoing.

c. Then in a way consistent with The Guidelines, ask the Restricted member to review The Guidelines to explore his/her own potential violations. <u>Gently ask for specific examples</u> of violations (who, what, where, when, how, etc.).

d. When the exploration is complete, gently <u>inquire about what the Restricted member feels and thinks about these violations</u> and what they may like to do about those thoughts and feelings. If necessary and appropriate, gently introduce the idea, and prompt toward apology.

e. Discuss and assist in the process of true apology (see Apology Poster). Focus especially on an <u>effective plan of restitution</u>.

f. Explore the possibility of better application of The Guidelines. <u>Invite questions</u>, comments, criticisms, and any other thoughts and feelings.

g. Finish by <u>confirming mutual commitment to practicing The Guidelines</u>, take any other appropriate course of action (e.g., assist with restitution), and welcome the member back into the group in the most appropriately warm and loving way.

Check-In
- *Questions/comments regarding Educational Leadership, Basic Steps?*
- *General Questions/comments?*

Of course, every situation is different, but the "Four Rs": Reflect, Remind, Restrict, and Reintegrate

provide a roadmap to keep the group practicing and on its positive cultural track during times of

stress.

Core Values

To thine own-self be true; And it must follow, as the night the day. Thou can'st not then be false to any man.

~ Shakespeare (Hamlet.)

At the core of any assistance model are the values of its author(s). Those values are embodied in the

model's philosophy and methodology.

At the core of Wholeistic Education are the following four principles. They comprehensively

communicate the ethical foundation of WED.

Following

Wholeistic Education is based on a fundamental faith that the healthiest path is clearly marked for those who will follow. In the Christian Bible it is written, "Seek and Ye shall find". In an Eastern tradition sympathetic with WED, one is encouraged to follow the Tao, through which "nothing is left undone". Following is akin to humble service.

Following in this way causes us to question our most fundamental cultural assumptions. It demands we continuously rediscover our world ontologically, epistemologically, cosmologically, theologically, ethically, and aesthetically – that is, with regard to being, knowledge, order, spirit, right-and-wrong, and beauty. When following, one confronts one's often unexamined, but incalculably influential assumptions regarding progress, and the relationship of individual and group.

Following the direction of Nature, God, or Spirit, in some form, is common to the pursuit of personal fulfillment in all societies. WED encourages the thoughtful embracing of this impulse in its participants.

> "The goal of life is living in agreement with nature."
>
> ~ Zeno

Non-Violence

Another way of stating and expanding the above principle, WED avoids violating the natural flow of Nature (God, Spirit, etc.) in all its manifestations. WED is especially sensitive to its influence on those who are vulnerable, like clients, and their loved ones.

Non-Violence here is not meant as pacifism, conscientious objection, passive-resistance, asceticism, altruism, selflessness, or any other specifically defined rule-set other than this: the action which contributes to the least amount of aggregate violence. This definition allows for the mystery of the unknown future and even the most paradoxically, apparently violent responses to specific circumstances. For example, it may be, under certain circumstances, perfectly consistent with the principle of Non-Violence to purposely injure (e.g., to prevent abuse of the innocent). But any harm, any offense, however relatively minor, when a less harmful alternative is available, is always inconsistent with the principle of Non-Violence.

Dynamic Balance

In WED, dynamic balance is the term that describes the result of non-violent following. Encompassing all physical and non-physical needs, and dynamic, as symbolized in the Chinese Taijitu (Yin Yang symbol), this balance is possible under any circumstance. WED recognizes and celebrates this balance as manifest in respectful, dignified, responsible, compassionate, and persevering behavior. When sustained, this balanced behavior produces the greatest sum of physical and non-physical health, and contentment; the condition known in WED as Optimal Wellness.

> "The best and safest thing is to keep a balance in your life, acknowledge the great powers around us and in us. If you can do that, and live that way, you are really wise."
> ~ Euripides

Faith

Faith may be considered the first essential element of conscious life. All rational thought leads to a conceptual terminus at which one must decide to either believe or disbelieve, in the absence of further evidence. WED embraces the mysterious nature of life as it embraces the ubiquitous nature of faith. In so doing, it encourages participants to take accurate, rational measure of faith's particular manifestations in their lives, so that they may reap the benefits of faith, while avoiding the liabilities that accrue when one is controlled by rigidly held convictions (be they conscious or unconscious) – what we rightly criticize as "blind faith" "rigidity", "dogmatism" or "denial".

"The Tao that can be articulated is not necessarily the eternal Tao."

Check-In
- *Questions/comments regarding Core Values?*
- *General Questions/comments?*

"The Tao that can be articulated is not necessarily the eternal Tao."

Selected Supporting Material

Here are some important sources of support for the WED approach. Just contact me for many more.

A User's Guide to the Brain John Ratey

Aikido Kisshomaru Ueshiba

Art, Mind and Brain Howard Gardner

Bright Air Brilliant Fire   Gerald Edelman

Darwin's Dangerous Idea Daniel C. Dennett

Escape From Freedom Eric Fromm

Everyman's Talmud Abraham Cohen

Evolution, Creationism, and Other Modern Myths Vine Deloria, Jr.

Evolutionary Psychology Christopher Badcock

***Getting it Wrong from the Beginning* Kieran Egan**

***Good Natured* Frans de Waal**

Hakomi Therapy Ron Kurtz

How the Mind Works Steven Pinker

In Search of Memory   Eric R. Kandel

Leadership James Burns

Life's Solution Conway Morris

Lingua ex Machina William H. Calvin, Derek Bickerton

Man's Search for Meaning Viktor Frankl

Mind and Nature Gregory Bateson

Mind in Society L. S. Vygotsky

On Becoming a Person Carl Rogers

Our Enemy the State   Albert Jay Nock

Positive Peer Culture   Vorrath and Brendtro

Season of Life Jeffrey Marx

Sexual Personae Camille Paglia

Summerhill A.S. Neill

The Act of Will   Roberto Assagioli

The Agile Gene Matt Ridley

The Art of Loving Erich Fromm

The Bhagavad Gita: The Song of God Swami Prabhavananda

The Bodhisattva Warriors Terence Dukes

The Culture of Education Jerome Bruner

The Drama of the Gifted Child Alice Miller

The Education of Little Tree Forrest Carter

The Evolution of Human Society *Alan Johnson*

The Great Tao Dr. Steven T. Chang

The Meaning of the Holy Qur'an Abdullah Yusuf Ali

The Moral Animal Richard Wright

The Mystery of Consciousness John R. Searle

The New International Version Holy Bible HarperPrism

The Origins of Virtue Matt Ridley

The Quest for Consciousness   Christof Koch

***The Rise of Anthropological Theory* Marvin Harris**

***The Selfish Gene* Richard Dawkins**

***The State of the Union* Albert Jay Nock**

The Tao of Pooh Benjamin Hoff

The Tao Te Ching: The Definitive Edition Lao Tse, Johnathan Star

Establishing and maintaining a truly educational group culture can be hard work, but it is rewarding.

To be great leaders, we face the most important and noble challenge: we must give without the

expectation of receiving. But by making and maintaining a positive group culture, we <u>can</u> make life

easier, and much more rewarding! Good luck, and remember:

"Model Healthy Relationship"

"Provide Clear Reflection"

"Encourage true focus"

"Give Up control to gain authority"

"Neither punish, nor enable imbalance"

"Avoid adversarial dynamic"

"Embrace all Feelings, Guide all Behaviors"

"Practice the guidelines"

Check-In and Farewell
- *Questions/comments regarding Sources?*
- *General Questions/comments?*

Thank you for meeting, and your commitment to helping others. For more information,
including consultations and seminars, please contact joe@wholeisticeducation.com
and visit www.wholeisticeducation.com .

Appendix C

Standard Talks Outlines:

Developmental Goals

Joseph R. Walsh, M.Ed., LCMHC
Principal Educator, Wholeistic Education™ (WED™)

The success of *Ideal Parenting*, and its proxy, *WED's Ideal Education*, is manifest in the

embodiment of *WED's* five, *Developmental Goals,* which are a simple, yet comprehensive list

of culturally desired character traits:

Respect – To respect is to "re-see" or reconsider. Naturally, we recognize the differences in things as a way of making a manageable order out of our countless perceptions. However, the development of respect enables us to see beyond differences to connecting similarities. This is especially useful in human relations. On a spiritual level, we may even to get to the point where it's not necessary to see differences, and all may be seen as one.

Dignity – When we behave in a dignified manner, we earn respect from others and from ourselves. Hierarchical, domineering or elitist attitudes can be mistaken for dignity. WED encourages the development of a dignity that reflects a balance of healthy self-esteem, but at the expense of no one else.

Responsibility – When we lovingly respond to the needs and healthy wants of our environment and ourselves, we are acting responsibly. It's important to distinguish this from "reaction", which, although sometimes necessary, is not thoughtful and is in most cases excessively impulsive.

Compassion – It is not enough to simply speak of our love and concern for others. We must develop our impulse to join with others in all of the good and bad aspects of life.

Perseverance – Sometimes, despite our best efforts and even without apparent reason, life is difficult. In those times, we simply need to keep putting one foot in front of the other.

Practicing *The Behavioral Guidelines* best facilitates the embodiment of the Developmental Goals. Because practice generally begins with thought, *WED* provides affirmations and attaches those affirmations to colors as aids in our thought-practice.

WED's Respect affirmation: *"I stop to see the other as me."* We write this affirmation in red, which is associated with "stopping", and as a reminder that despite our most troubling, apparent differences, "We all bleed red".

WED's Dignity affirmation: *"I reflect balance."* We write this affirmation in blue, which is associated with the beautifully balanced, regal, and life-giving qualities of water: oceans, lakes, rivers, and other, awe-inspiring things, like the image of earth from space.

WED's Responsibility affirmation: *"I care for my influence on all things."* We write this affirmation in green, which is associated with our historic interdependence on the fertile land, as well as the efforts of today's "green movement" of ecological responsibility.

WED's Compassion affirmation: *"I share joy and pain."* We write this affirmation in orange, which is traditionally associated in some cultures with the vibrant, joyous, yet humble service of monastic life.

WED's Perseverance affirmation: *"I commit to life."* We write this affirmation in yellow, which is associated with the all-embracing, seemingly infinite, life-giving power of the sun.

"The Tao that can be articulated is not necessarily the eternal Tao."

Appendix D

Standard Talks Outlines: Three Educator Challenges

Joseph R. Walsh, M.Ed., LCMHC
Principal Educator, Wholeistic Education™ (WED™)

- Social relationships are governed by what psychologists call "differential reinforcement." That is, society attempts to control the behavior of its members by rewarding the behaviors it wants more of and punishing the behaviors it wants less of. Because this approach is so woven into the fabric of daily life, we generally take it for granted…it seems "natural."

- Reward-and-punishment may be the only way very large groups (like cities and countries) can function (a questionable idea). But, for small, human-sized groups, like families or schools, reward-and-punishment is very ineffective and inefficient. This is because humans are selected by evolution to seek liberty and to reject control.

- A *WED Educator's* first, great, challenge is moving away from a "Control" model to an "Authority" model. We define Control as crude, hierarchical dominance. Control invariably results in some ugly mix of mindless rebellion and deadening compliance (Fromm used the term "irrational authority" for our "Control" – which he said results in sado-masochism—and the term "rational authority" for our "Authority"). Interest in Control is largely delusional—we cannot effectively and efficiently Control others while promoting their fullest development. We define Authority as voluntarily granted influence. It requires respect for the autonomy of the individual. Not attempting to Control others encourages them to let down their defenses and grant Authority, opening up to educational guidance. Note: Isn't it ironic how we proudly proclaim our desire to help people become confident, independent, critically-thinking, and impossible to manipulate – unless it's us doing the manipulating! Then we just want them to do as we say, just because "we said so".

- A *WED Educator's* second, great, challenge is to neither punish nor enable imbalanced behavior. *Punishment* is retaliatory violence and so is antithetical to the unconditional Love of the *Ideal Parent/Ideal Educator* and the *Core Principles* of *WED*. The simple, honest message of punishment is *"you have hurt, now you will be hurt."* Violence begets violence, and so this approach is not only unethical, but ineffective. When someone does not practice *The Behavioral Guidelines*© of the group, they need our Love and support—but we must also be careful not to enable their imbalance. Following *WED's Four Rs*, we first *Reflect* on our perception and practice, and prepare ourselves to gently *Remind* the person of our mutual commitment to practice *The Guidelines* (using

questions!). Then, after sufficient attempts at reminding are made, we may be forced to *Restrict* a member from the group. Now, it is true that we know *Restriction* will feel punishing to the restricted member (Note: For hundreds of thousands of years if you were restricted from the group, you died…so, *Restriction* is deeply encoded in the human brain as intolerable. This is why humans are what anthropologists call "gregarious animals"). We are relying on the internally punishing feeling of *Restriction* to help the restricted member consider their natural need to be a positive member of a group—but *we* are not doing the punishing. *Restriction* is the group's way of respecting an individual's autonomy to decide whether to practice with the group or not, fulfilling its duty to promote the pro-socialization of each member, and protecting the group as a whole from negative influence, while affirming that practice of *The Guidelines* is non-negotiable for all members. *Restriction* should result only in safe separation from the group and group privileges until commitment to practicing *The Guidelines* can be reconfirmed. To do more than that is to move from loving, natural consequences to violence. If handled properly, even physical restraint (by EMT or police – not by a group member) can be an expression of positive group culture and enlightened leadership. Finally, when it can be believably confirmed that a restricted member is recommitted to practicing *The Guidelines*, they must be *Reintegrated*. Remember, we are not interested in punishing—only practice! Note: for a more complete explanation of *The Four Rs*, please see the booklet, *Positive Group Culture: An Introduction to Wholeistic Education*™ or the book, *First Things First: An Introduction to Wholeistic Education*™

- A *WED Educator's* <u>third, great, challenge</u> is avoiding adversarial dynamic. We must model our commitment to practicing *The Guidelines* by avoiding any impulse or inducement to fight. Our verbal and paraverbal message must be "I choose to remain a loving, positive member of our group, and there is nothing anyone can do to change that".

- A couple of notes: In its original Greek, discipline had little to do with the forced, often punishing conformance to an external rule with which it is associated today. A healthier concept of discipline is as it was originally conceived, to describe the *voluntary* pursuit of personal development through the vigorous exercise of body and mind, and the *internally* directed avoidance of unhealthy influences. Also, sometimes we use the word "consequence", or "discipline" when what we are describing is really "punishment". To punish is to injure in retaliation or retribution. Punishment always connotes violence. Therefore, it is antithetical to *WED Core Principles*.

"The Tao that can be articulated is not necessarily the eternal Tao."

Appendix E

Standard Talks Outlines: Desire and the Source of Human Behavior

Joseph R. Walsh, M.Ed., LCMHC
Principal Educator, Wholeistic Education™ (WED™)

If we are to assist in the education (maturation, actualization, etc.) of others or ourselves, our first question may be, "what is the source of human behavior"? After all, parents, educators, counselors, coaches, and even friends are, on a basic level, people who assist in shaping behavior.

Contrary to the old saying, "practice makes perfect", practice actually just makes "permanent". So, the behaviors that we repeatedly engage in, whether healthy or unhealthy, will "become us". Simply stated, stimulus-response cycles are established and encoded in our brains and bodies through repeated behaviors, be they physical or non-physical. We call these repeated behaviors "practice". Whether intentional or not, after sufficient repetition these cycles become habits. In some cases, very few repetitions are necessary, e.g. smoking cocaine; in other cases, very many repetitions are necessary, e.g. mastering the cello.

By meeting the three WED Educator Objectives: 1) Modeling Healthy Relationship (by embodying WED's Developmental Goals: Respect, Dignity, Responsibility, Compassion, and Perseverance), 2) Providing Clear Reflection (by lovingly and courageously facing and articulating our experience), and 3) Encouraging True Focus (by gently urging discipline to the pursuit of healthy goals as they become evidently desired), we may help discover our best selves, and harness the beneficial power of practice. Simply put, by practicing healthy behaviors we will replace less healthy habits with more healthy habits and ensure maximal health and contentment; what we call Optimal Wellness.

Understanding first this question of human motivation helps us choose the best approaches to influence the behaviors of ourselves and others. Most importantly, it may also increase the likelihood that our actions will be consistent with our most noble aspirations.

WED views human behavior as motivated primarily by desire. Whether desire to increase pleasure or avoid pain, physically or non-physically, now or in the future, consciously or unconsciously, the fulfillment of desire is the cause to behavior's effect.

We talk of three types of desires: needs, wants and values. We define needs as physical or non-physical desires that fulfill the requirements of nature for the wellness of the organism. Wants are defined as physical or non-physical desires which may, or may not be required by nature, and which may, or may not be in the best interest of the organism. So, in addition to natural, healthy wants, wants manifest as addictions, and other forms of sickness or violence. We call this excessive or imbalanced feeling of need as "neediness".

Accepting that desire is the source of behavior, and that desire can be healthy or unhealthy, the distinction of needs and healthy wants from unhealthy wants may be our first priority. This is where a helper, by Modeling Healthy Relationship and Providing Clear Reflection, can be so useful. Then, if we can accomplish this, we may practice following of our healthy wants and avoiding our unhealthy wants – what we call discipline. Encouraging True Focus on healthy wants is the function of values.

We view values as a third type of desire. Values are powerful in that they are consciously chosen desires, and a reflection of our non-conscious habits. They are the relative importance we place on things, and determine how hard we will work to achieve things. They guide us to fulfill our needs – as we understand them. Values are of immense value! They bridge the gap between nature and nurture, allowing us to choose who we will be.

- *WED* values are its *Core Principles: Following, Non-Violence, Dynamic Balance, and Faith*, which are embodied in its *Developmental Goals: Respect, Dignity, Responsibility, Compassion,* and *Perseverance*, and manifest in its *Behavioral Guidelines* – which form the foundation for *WED* practice.

"The Tao that can be articulated is not necessarily the eternal Tao."