

The Need for Integrative Health Education: Shaping the Future of Holistic Healthcare

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Abstract

Integrative health, focusing on a holistic, patient-centered approach, is increasingly used and recognized as a complement to conventional treatments to enhance health and patient outcomes. This paper defines integrative health, reviews current practices and research, examines future trends, and advocates for incorporating integrative health into health-related academic curricula. Formal college education and ongoing training in integrative health are recommended to prepare prospective professionals to better and more effectively meet consumers' evolving needs while fostering sustainable healthcare practices.

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Introduction

Contemporary healthcare is exponentially embracing the concept of integrative health, a practice now widely adopted across diverse settings, populations, and situations worldwide [1-3]. The National Center for Complementary and Integrative Health [1] defines integrative health as the coordinated use of complementary health modalities alongside traditional medicine to achieve a holistic approach to care. These complementary modalities include therapeutic, non-pharmacological, and lifestyle interventions, such as food/diet eating patterns and stress management, which are often ignored by standard medical practices and may not be covered by health insurance [1,4,5]. This growing shift toward including integrative health reflects people's heightened awareness of the limitations of conventional medicine (e.g., side effects of medications and treatments, facility-based service care, etc.) and an emerging demand for more comprehensive, individualized care. Although not yet a mainstream practice, integrative health is valued for its patient-centered approach, aiming to support whole-person health, wellness, and well-being while addressing unique individual needs.

The terms and definitions of integrative health in previous research varied in their use, which made synthesis challenging [2,6,7]. Ng et al. [7] systematized this vocabulary and operationalized complementary, alternative, and integrative medicine by identifying 604 distinct therapies. With such a wide array of complementary health therapies available, integrating multiple modalities into healthcare practices, rather than using a single approach, was recommended to maximize the effectiveness and benefits of integrative health [1,8].

This paper discusses the definition and significance of integrative health in contemporary healthcare, its potential future trends and implications, and the imperative for its integration into academic curricula across various health-related disciplines.

Evidence-Based Practices and Research Gaps

The complementary health approach in integrative health primarily emphasizes *enhancing* individual *healing* processes and overall wellness rather than focusing solely on treating specific organs or diseases. Its application is rooted in evidence-based and evidence-informed practices, as well as the accessibility and affordability of complementary therapies. While prior research often concentrated on the effects of individual complementary health modalities on symptom management and clinical outcomes, recent evidence has

expanded the scope of practical application. This includes support for combining modalities and a broader focus beyond symptom management, such as promoting wellness and self-care [8-10].

The Society for Integrative Oncology-American Society of Clinical Oncology Joint Guidelines [8], for instance, provide scientific support for complementary interventions in managing symptoms such as oncology-related pain, anxiety, depression, and fatigue. These guidelines offer evidence-based recommendations for healthcare providers tailored to various pain categories (e.g., aromatase inhibitor-related joint pain, chemotherapy-induced peripheral neuropathy, surgical pain, etc.) and progression phases (e.g., active treatment, recovery, post-treatment).

During the global pandemic, complementary health approaches, such as dietary and vitamin supplements and herbal medicine, gained popularity among the general population to enhance immune function and mitigate the impact of limited access to healthcare [9,10].

However, the complexity of individual needs and disease states underlines significant gaps in research concerning unique populations (e.g., palliative care patients, pediatric oncology patients), therapies with inconclusive results (e.g., nutritional products, light therapy, energy healing, etc.), and combined models of complementary interventions [1,8]. Acknowledging the limited role of integrative health practice and continuously addressing these gaps are essential to establish reproducibility and further inform best practices.

The Need for Integrative Health Education in Academic Programs

Integrative health has been incorporated into American medical education over the past decade through initiatives by professional

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organizations and training programs, including residencies, school courses, fellowships, and certificate programs [11-13]. Despite advancements in professional medical education, there has not been a corresponding improvement in other academic healthcare disciplines, such as nursing. This is concerning, given the recognized need for expanded knowledge and training in these areas [3,14,15]. A survey study reported that nurses' use of complementary health therapies positively correlates with their knowledge, personal beliefs, and patient referrals [16]. Insufficient knowledge and/or skills in practice may prevent nurses and other healthcare providers from considering or adopting integrative approaches without formal education. This limitation hinders their ability to deliver holistic, evidence-based patient care effectively. Furthermore, the inconsistent integration of credit-based courses or reliance on limited topical training in academic curricula has raised concerns about professional development in current healthcare education systems, leading to uneven exposure across disciplines and practices.

To address these pressing needs, it is strongly recommended that integrative health principles be established as a core component of undergraduate education programs across all health-related fields. A competency-based curriculum may incorporate a combination of didactic education on key topics and resources, clinical training or simulation practices, and collaboration and communication across professional disciplines [15]. A formal academic course aims to develop foundational knowledge (benefits, risk, cultural and ethical concern), practical skills for implementation, the ability to educate and coach others, and a readiness to engage in collaborative relationships with clinicians, patients, and their families. Such an approach equips future healthcare professionals with the confidence to deliver integrative care effectively, enhances their ability to apply holistic care principles in clinical practice, and promotes comprehensive learning experiences that prepare them for diverse and complex patient needs.

Conclusion

Integrative health has demonstrated its potential to transform future healthcare practices, supported by growing research evidence. It offers individuals enhanced strategies and more choices to maintain, promote, and manage their health and well-being. This shift underscores the urgent need to formally incorporate integrative health into college curricula, academic programs, and clinical training through collaboration among professional fields. To attain this approach, strengthening knowledge and skills in complementary and integrative health is essential and imperative for cultivating effective, competent, and well-prepared healthcare professionals who can better meet consumers' evolving needs and foster sustainable healthcare practices.

Conflict of Interest

The authors declare no conflict of interest.

References

1. National Center for Complementary and Integrative Health (2021, April) Complementary, alternative, or integrative health: what's in a name? U.S. Department of Health and Human Services, National Institutes of Health.
2. Lee EL, Richards N, Harrison J, Barnes J (2022) Prevalence of use of traditional, complementary and alternative medicine by the general population: a systematic review of national studies published from 2010 to 2019. *Drug Saf* 45: 713-735.
3. Jong MC, Busch M, Baars EW (2019) Integrative medicine in Dutch curative and long-term healthcare centres: mapping the field. *Eur J Integr Med* 28: 14-19.
4. American College of Lifestyle Medicine (n.d.) What is lifestyle medicine?
5. Nahin RL, Barnes PM, Stussman BJ (2016) Insurance coverage for complementary health approaches among adult users: United States, 2002 and 2012. *NCHS Data Brief* 235: 1-8.
6. Bagot JL, Theunissen I, Mouysset JL, Wagner JP, Magné N, et al. (2021) Integrative health care: definition and examples of implementation in oncology in France. *La Revue d'Homéopathie* 12: e61-e66.
7. Ng JY, Dhawan T, Dogadova E, Taghi-Zada Z, Vacca A, et al. (2022) Operational definition of complementary, alternative, and integrative medicine derived from a systematic search. *BMC Complement Med Ther* 22: 104.
8. Carlson LE, Tripathy D, Zick SM, Balneaves LG, Lee RT, et al. (2024) The Society for Integrative Oncology-American Society of Clinical Oncology Joint Guidelines on integrative therapies for symptom management: overview and key recommendations. *J Integr Complement Med* 30: 596-601.
9. Dehghan M, Ghanbari A, Ghaedi Heidari F, Mangolian Shahrabaki P, Zakeri MA (2022) Use of complementary and alternative medicine in general population during COVID-19 outbreak: a survey in Iran. *J Integr Med* 20: 45-51.
10. Lam CS, Koon HK, Chung VC, Cheung YT (2021) A public survey of traditional, complementary and integrative medicine use during the COVID-19 outbreak in Hong Kong. *PLoS One* 16: e0253890.
11. American Board of Physician Specialties (2024) What is the ABOIM [American Board of Integrative Medicine]?
12. Maizes V, Horwitz R, Lebensohn P, McClafferty H, Dalen J, et al. (2015) The evolution of integrative medical education: the influence of the University of Arizona center for integrative medicine. *J Integr Med* 13: 356-362.
13. Cowen VS, Cyr V (2015) Complementary and alternative medicine in US medical schools. *Adv Med Educ Pract* 6: 113-117.
14. Hasler LME, Leggit JC (2018) Complementary and integrative health education in the medical school curriculum: an interest survey. *Med Acupunct* 30: 298-307.
15. Lunde A, Gunnarsdottir T, Busch M, van der Heijden MJE, Falkenberg T, et al. (2023) Integrative nursing in Europe - a competency profile for nursing students validated in a Delphi-study. *Nurse Educ Today* 126: 105807.
16. Geisler C, Cheung C, Johnson Steinhagen S, Neubeck P, Brueggeman AD (2015) Nurse practitioner knowledge, use, and referral of complementary/alternative therapies. *J Am Assoc Nurse Pract* 27: 380-388.