

Healthy Teachers: Healthy Classrooms Background Material

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It is the purpose of this document to provide the reader with additional background and documentation on the research cited in the presentation “*Healthy Teachers: Healthy Classrooms*” and “*LOL: A Teenage Guide to Life*” by Dr. Robert S. Barwa.

In the past 30 years, medical research has begun to verify a link between “state of mind” and physical well being. In other words, medical science has verified that our attitudes and feeling have an impact on how often, and how seriously we become physically ill. Here are some of the more interesting study results.

Transfer of Emotional Energy

Work by Daniel Goldman (2005) and others has shown that moods are contagious. His research showed that “Emotions flow most strongly from the most powerful person in the room to others.” Goldman calls this our “neural Wi Fi.

Research indicates that schools that have programs to advance social-emotional learning decrease drop outs, violence, substance abuse unwanted pregnancies and boost test scores. (see research listed at http://www.edutopia.org/php/article.php?id=Art_678 and other sources).

Researchers using brain scans have found that emotional states can be transferred between individuals and causes actual physical symptoms of pain and depression (Eisenberger, et.al., 2003)

Attitude and General Physical Health

People who choose to be more positive emotionally are also physically healthier. They miss fewer days of work, make fewer non-routine visits to doctor’s offices (Dura, 1994, Okelo, et. al., 2004). They may even be able to fight off common diseases.

In a 2006 study, Cohen et. al. of Carnegie Mellon University found a positive correlation between a person’s positive emotional style (PES) and resistance to the common cold and influenza. The results were independent of virus-specific antibody, virus type, age, sex, education, race, body mass, season, and NES (negative emotional style). The researchers suspect that positive emotions stimulate enhanced regulation of an infection-fighting substance, interleukin-6.

Attitude and Heart Disease

Johan Denollet and Dirk Brutsaert (1998) of the University Hospital of Antwerp in Antwerp, Belgium found that people who exhibited “Type A” personality traits were far more likely to develop coronary disease. The study found that individuals who exhibited anger, hostility

and life stress, and those that felt anger but did not express it were particularly coronary prone.

Researchers at Johns Hopkins (Becker, 2001) found that "Positive attitude is the best prevention against heart disease." The study looked at 586 adults ages 30 to 59 with no symptoms of heart disease but whose brothers and sisters had been diagnosed with early heart disease.

In 2000, Janice Williams et. al. concluded from their study that, "Proneness to anger places normotensive middle-aged men and women at significant risk for CHD [coronary heart disease] morbidity and death independent of the established biological risk factors."

Dr. Laura Kubzansky, (2001) a Harvard Researcher, found that optimism, as evaluated by the way people explain events in their lives, was a protective factor against heart disease.

Beverly Brummett (2003), assistant professor in the department of psychiatry at Duke University Medical Center, reported to the American Psychosomatic Association in March 2002, that of the 866 heart patients she studied, those who reported experiencing positive emotions such as happiness, optimism and joy were 20 percent more likely to be alive after 11 years than those who often experienced more negative emotions.

Attitude also seems to have an impact on risk factors for the development of coronary disease, even at a young age. In 1986, Schneider et. al. conducted one of the first studies that identified anger as a causal factor in the development of hypertension (high blood pressure). In their study the researchers found that middle age subjects who reported a greater intensity of anger had higher blood pressure early in life and had a greater tendency to develop higher blood pressure late in life. Markovitz et. al. (1993) found similar results in a much larger study in 1993.

A study reported in the Journal of the American Medical Association in 2003 by Yan et.al. concluded that, "Among young adults, TUI [a measure of how people react to unfavorable situations] and hostility were associated with increase in the long term risk of hypertension."

Finally, in a study also reported in the Journal of the American Medical Association, Williams, Barefoot and Schneiderman. (2003) looked at a number of studies conducted over the past 30 years dealing with factors that influence the development of heart disease.. They concluded that, "subsequent research makes a strong case that . . . hostility is the one most reliably indicators of increased CHD risk."

Stress

We all know that we feel poorly when we are under extraordinary amounts of stress. Medical research has now found that there is a relationship between continued exposure to stress and serious physical illnesses. (Harvard Heart Letter, 2006)

In 2001 Reibel et.al. found that even 20 minutes per day of meditation can increase well-being and reduce physical symptoms.

Researchers at Harvard Medical School have also found evidence that stress reduces mental functioning, especially related to higher order thinking skills. (Harvard Mental Health Letter, 2005)

Several studies (Schneider et. al., 1986, Castillo-Richmond et.al. 2000), have found that reducing stress levels has a positive impact on blood pressure. Some studies also point to stress as a contributing factor to weight gain, lack of mental sharpness, and even skin blemishes. (Kaabat-Zinn et.al, 1998).

Longevity

Obviously, the reduction of health problems over time will increase longevity. Medical science is discovering that a positive attitude and a forgiving heart are not only linked to longevity, but have an impact on the quality of that longer life.

A 60 year study of a group of Catholic Nuns found that those participants who wrote optimistic journals when they were young lived markedly longer than their counterparts who wrote primarily negative statements. (Danner et.al., 2001)

Giltay et.al. stated in the conclusion of their 2004 study that, "Our results provide support for a graded and independent protective relationship between dispositional optimism and all-cause mortality in old age."

In a study of factors that influence the survival rates of cancer patients, Rosenbaum and Rosenbaum (1999) found that, "Recently, there has been a shift in health care toward recognizing this wisdom, namely that the psychological and the physical elements of a body are not separate, isolated and unrelated, but are vitally linked elements of a total system. Health is increasingly being recognized as a balance of many inputs, including physical and environmental factors, emotional and psychological states, nutritional habits and exercise patterns."

In the Ohio Longitudinal Study of Aging and Retirement published in the Journal of Personality and Social Psychology in 2002 Dr. Levy and her team concluded that, "people who had a positive attitude about their own aging lived an average of 7.5 years longer than those who had more negative attitudes. In this study, a positive attitude toward aging had a greater impact on survival than age, gender, socioeconomic status, loneliness, and functional health—all factors that were controlled for in the study. A positive attitude toward aging also seemed to favorably influence longevity more than low systolic blood pressure and cholesterol levels, lack of smoking, healthy body weight, and exercise."

Mayo Clinic researchers followed 447 people whose personality had been evaluated 30 years earlier. Those that displayed optimistic tendencies by the interview instrument had half the risk of early death than those that were classified as pessimistic or "mixed". In addition, the optimists reported fewer limitations, less pain, and more energy than their

pessimistic counterparts. (Maruta et.al. 2002) Dr. Toshihiko Maruta, lead researcher, indicated that the study, “confirmed our common-sense belief. It tells us that mind and body are linked and that attitude has an impact on the final outcome — death.”

Conclusion

So what can we conclude from this information? While we should continue to follow long established health advice to control our weight, watch what we eat, get plenty of exercise and rest, and continue to receive regular medical care, this research seems to indicate that we need also pay attention to our attitudes and feelings if we wish to remain in the best possible health. A prescription to love, laugh, and maintain a forgiving heart, and an optimistic attitude seem to be at least as important to good health as any pill our druggists may dispense. So here’s hoping you will always LIVE OUT LOUD!

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