Why Whole Health Starts With This One Question Transcript

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Opening on whole health and community

The culture right now is coming from a place of fear and scarcity, as opposed to joy and abundance. And when you come from fear in scarcity you start to stake out your territory.

I think what the opportunity is, is how can we, you're a huge leader in this, how we can truly synergize and align because really all boats do ride. I mean, some people will come through one door.

Some people come to another door, but if we're really building something collectively that is truly bigger than the parts, then we are going to transform.

Hello and welcome back to the Evolution of Medicine podcast. We are back at the Institute for Functional Medicine's annual international conference and we speak to leaders and innovators from across the spectrum who are bringing functional medicine to new and interesting places.

And if you've been watching this show for a long time, you know that Not only was my interview with Dr. Tracy Gournette last year part of the show that we created, but actually I recognized that it was probably the most interesting and validating and valuable conversation I had because you have done so much to implement so many ideas that are really important to me and that I think we just found a sort of a kinship in the world.

It was a mutual mutual fan club. Because I love your emphasis on community. Yeah. You know? Well, it's been really reawakened at this conference and I've had some incredible interviews where I just really see that one, the different ways in which this can be delivered in community, all different way is wide and broad and growing.

And that second, that if we really want to have a medical operating system that is built around function, we need to think about all the different ways that we could assess and build function because ultimately it's cool that found a way that it works and that when we do it through that system it is much better and we are proving out that that systems is better.

And yet for this to become to hit its potential, we need to find ways to do that. And that's been something that has been very enlightening for me at this conference and hasn't always been here.

Yeah, that is true. It's really been a great shift, I think, to hear the conversation be, okay, how do we do this? with the unhoused population? How does this look, you know, how do we shift these approaches to optimize, really optimize life as well as function?

Yeah. How do you do that where people live and work and play and not just think about it through, as a physician, when you think it about through the medical system?

And even if we get it right in the medial system, it's not gonna be transformative. It's only a part of the solution. Yeah It is not the whole solution and moving this into community and is got to be the foundation of it.

Whole health as a human-first paradigm

So it's kind of exciting. Another year has gone by. Yes, I know. We're getting older, James. You find yourself, in community with leaders who are finding new and interesting ways to take whole health out there.

I'd love for you to share some of those stories because it is always so inspiring to hear people who combine the will of wanting to do something different with a way of thinking that embodies the whole-health vision that you have.

Yeah. Well, you know, I think what is exciting is, and also tricky, so I'll talk about both if that's okay, about the term

whole health is getting adopted a lot of places, like I'm seeing it everywhere.

The paradigm shift from my perspective that really is the driver for the health outcomes that we've been seeing is really changing the dialogue to start with from a different place.

So we're starting not from just the disease body part or the medical condition, but the purpose, the person's sense of meaning and purpose, what they want their health for.

Really, those are deep questions. But when you can have a sincere shift in dialogue and help people explore that, then all of the lifestyle changes and all the other things are now intrinsically motivated because it's aligned with what matters to them.

So these are not easy things to do. Yeah. And I think it's exciting to see the term being used a lot. It's excited to other entities and communities and health systems saying, we're going to do that.

Are they really transforming or are they just using the terms? So I think the work for those of us that are in this field is to really kind of be like obsessed with the real transformation and the fidelity to that.

Otherwise things get co-opted, you know, where the turns are used, but the really transformation doesn't happen. So, I that's the phase that we're in.

It's a tricky phase, actually. This is what we're gonna do. Okay. I'm gonna install like a bat phone in my house, and you're going to call me and say, Hey, James, I see them saying whole health, but I know that they're doing this, this and this.

And then I'll make a video and we'll say hey, you know, whoever this is, like, we know this isn't whole house. You can't use that word. Whole health means this I will do that.

Like, It's interesting because we've had this same conversation. I had it, you know, here with the words functional medicine, right? Because ultimately, functional medicines mean something to someone.

But a few years ago or in the last decade, it became kind of a cool marketing gimmick. And so, function medicine is now on the other end because it was an emergent concept.

And because they gave space for it to emerge without saying this is exactly how it is, I think that allowed decades of progress to happen in a short period of time because of the emergent nature of how was delivered.

But now there's an effort and they've been talking about it here, which is essentially how do we create some standards for what functional medicine is because there is a lot of cowboy functional medicines.

And I don't think there so much cowboy whole health, but I there was a veneer of whole heath that gets printed on stuff that isn't really whole-health.

Very well said. I'll get the back phone. We should do it. No, no, we're definitely doing it, yeah. All right, so, you know, what do you think, I guess, What is the purpose of the veneer?

Well, okay, that's a great question. I think my observation is that people know that the current paradigm isn't working. And so there's no longer a debate about that, which is good.

That's progress, right? And everybody points to, and I it's good thing to point to as evidence that even just look at the dollars spent. in healthcare and then whatever the well-being market, whatever, the label for that is.

And you know this system isn't meeting the needs because look at what's happening. You know, people are going other seeking outcomes and solutions in other places.

So we know we have a problem. That's the good news. But the challenges of slapping the veneer on, you have real system change and you this is my passion, is hard.

Yeah, it's really hard to truly change a system. So how do we and that's my passion is like how Do we create a? System where these this is not on the outside trying to like just attach itself to the dominant paradigm But the dominate paradigm actually changes.

Yeah. It's aligned. That's hard work So I think that the near comes when people like okay if that is the new word we'll use that word and And then maybe we won't even have to change because the real paradigm, it's not evil.

It's just that systems are like, they do what they're designed to do, and they are going to try to protect the dominant paradigm once to stay the dominate paradigm.

So it is a way to kind of say, okay, fine, now you can leave us alone because we are doing it now. when they're not really. So the change is essential.

The truth is, it won't work, obviously, because you're going to get different outcomes by just slapping a different veneer on. It's important work. While I'm on a roll, I think what I am observing right now, which is interesting to me, is a little disheartening, but I see more infighting.

within what I will call the tribes of healthcare. So, you know, there's functional medicine, and there is integrative medicine. There's lifestyle medicine there.

You know there are all of these different… Longevity. Lungevity, it's all these difference tribes.

Guarding against veneer and tribalism

And that's good because there're many ways to kneel and kiss the ground, right? Yeah. And there's many doorways in, but it's not good if we're all fighting for, oh, no, we are the answer.

And I'm seeing that happen now. I think in general, it is because the culture right now is coming from a place of fear and scarcity as opposed to joy and abundance.

When you come from fear in scarcity, you start to stake out your territory. I think what the opportunity is, is how can we, and you're a huge leader in this, how we can truly synergize and align, because really all boats do rise.

Some people will come through one door, some people come though another door. But if we're really building something collectively that is truly bigger than the parts, then we're going to transform.

Then we'll get to the shared vision that we all have. But I think that's the place we are in right now. Are we going do that? Are going take the higher road?

Or are we just going spend our time trying to stick in our territory? Well, the economic priority for the last 20 years is to have your own name, because then you can have you own conference and your tribe and you build an organization.

But ultimately, this has been my dream since the beginning of the functional forum. I actually thought naively that when I called the show the Functional Forum, that I could convince people that a common language was needed for the implementation.

And that, when i saw functional medicine, I was like, This seems like a pretty good common acupuncturists and chiropractors and, you know, Ayurvedic practitioners and naturopathic doctors and realized like they had something in common, right?

They had all recognized the universal truth, but because they didn't have a common language, it was actually very

difficult for them to work in teams, to talk about what was going on with the patients.

And I saw that the functional medicine system could be that. Now unwittingly, I realized that I had chosen a team by calling it the Functional Forum. Isn't that so interesting?

And I didn't really know that, and I was a little naive to it because I'd just sort of done it and was like, oh, this seems like a good idea and sure I could convince everyone if I have this show.

And, to whatever degree that happened, but this harmony and unification is the great challenge, of the next era. I would love to be in service of it, just tell me what to do.

Okay. I have some ideas after the show. Or just tell me, you know, tell after this show and you can only find out if you keep on listening. But I do think there are, the opportunity is, I think, there people who are bringing together like-minded leaders from the tribes to say, all right, let's be a part of this solution and we need to get you into those conversations.

Yeah. That'd be great. Well, I'd love to give you an example of, and to get your take on this because… Here's an example of something that I feel is not whole health, that kind of is masquerading as whole-health, and then some efforts to create wholehealth.

So, you know, one of the reasons why I saw functional medicine and thought, okay, well, look, this is part of common language, is that one the biggest things is the patient practitioner relationship.

And I recognize right from the beginning, there's a part in my thesis from beginning is there is something powerful that really happens when you come into you know, creative tension with another person, a healer of some sort that can allow you to go somewhere where you can't go by yourself.

There's a reflection, there's the question asking, There is the wisdom, all of that. So there is a patient practitioner relationship central, central.

If you take that out of a functional medicine experience, and you have the labs, then you had the supplements, but you don't have that human connection, my judgment is that that is not whole, right?

That there's not an opportunity for whole health there. However, what we have seen is, that there is a hunger to learn more about oneself. And we are such a limited way in which we learn each other.

I met a guy here from Japan, And he was telling me about the panel that everyone gets in Japan every year as part of the National Health Service. And the doctor I was sitting with was commenting how broad it is.

So there's been a lack of understanding of ourselves that turns into a massive consumer labs industry from nowhere, essentially, right? Because you are meeting a need of something, but without the sort of social fabric behind it, you have something that looks like whole health but is not whole-health.

And I had this conversation, we've been having this conversations over the last few years. full script to, you know, we have supported me over the years.

You know their commitment is, in some ways they started out as like supplement delivery, right? And now have labs included in it. But the thing that I think that they like to stand on is the fact that, they are facilitating, they are facilitating a relationship with a health professional.

And their point of view is that that is the foundation of medicine. I agree. That is a foundation in the whole health relationship. They have found a way through full script journeys to kind of give people what they want, which is more information about themselves, but connect it to a potential for a relationship with someone who could take them on.

They got 125,000 practitioners that have an account.

Patient-practitioner relationships and consumer labs

and I was trying to do the math to thinking like okay what would it take for each one of those people to stand up in their community to offer the people what they want but also give them an opportunity then to come into a relationship with a healer and i felt like you know I think as a V1 experiment of giving people what they want, but then, you know, back-ending it to what we need, that is a worthy experiment to see.

And, I'd just love to get your take on that because I know it's not, there's something about the patient practitioner relationship that I will be fundamental in, is fundamental, in whole health.

I don't know if it is the whole picture, it does add a lot of value. So I just want to take a minute to talk about the incredible mission partners that we have here at The Evolution of Medicine that have made this possible.

So first and foremost, I want thank Fullscript and FullScript Journey. Full script has been an amazing partner for 10 years. We only pick partners, that can help us achieve our vision and help you achieve your practice vision.

And Full Script have been incredible partner, for a decade, but their new offering journeys, this is why we called it The evolution of medicine journeys.

is allowing practitioners to combine the relationships that they have with the newest technology to sell direct-to-consumer lab testing and use it as a funnel to bring into your practice and it's a game changer for the whole industry.

So go to goevomed.com slash journeys and you can get started on building the journeys for your practices an optimal way into practice. We're going to have some conversations about it.

This is a Game Changer. Next, Genova. Genoa have been fans of the Evolution of Medicine for a long time. We're big fans with them and they now have a lot more specialty testing.

They have lot of more tools and it's a key part of understanding the body ecologically. So go to goeomed.com slash genova to find out more. Come on over here.

I want to show you about the other mission partners. If you've been following us for a while, you know that these are organizations that we trust, that add a lot of value.

Freedom Practice Coaching, I have been supported by them since the beginning. And so many of the issues that practitioners face in building a successful practice, scaling a success practice come down to having the right support with people who have done that.

Go to goevomed.com. Big boost marketing. Uli and his team are the best in the business when it comes to really understanding how to market your functional medicine practice.

Go to goevomed.com slash big boost and see how they can help you. And then what you're going to be hearing a lot about is the formation of clinical networks.

Ultimately, True Neura is our first effort at that, which is to build an integrated clinical network combining independent practices from across the country into a network that can reverse cognitive decline.

And if you go to goevomed.com slash Trinura, you can get a demo. You can see what it means to be part of an integrative clinical networks. That's mentorship, that's software, and that makes it easier for you to get incredible outcomes in a disease state where there are no other options.

So thanks to our mission partners. Let's get back to the content. That's very cool. And if I had my magic wand,

would I, to your description of meet people where they are and what they want, and then help be with them on a journey that takes them somewhere perhaps they didn't know they wanted.

And again, I come back to, from my perspective and also from the research and all the work that we did in the VA, the game changer in outcomes that you've seen, which are really impressive, clinical improvements and this other stuff, really started with that change in that conversation.

And when you're talking about people not only knowing themselves biochemically, but knowing themself spiritually. turning inward to explore what really brings them a sense of meaning in their life.

You know, the kinds of existential questions that often people don't reflect upon, because we're just trying to get through the day, unless or until they have a medical crisis.

How many cancer patients have told me that their cancer diagnosis was a blessing because they actually stopped and turned inward and figured out what mattered in life, and then reorganized their lives to be in alignment with that?

So, how do we do that without waiting for the cancer diagnosis? So if we took all those physicians or clinicians, and in addition to, oh, here's your panel and da-da-dah, we have this whole health reflection tool that's free and openly available, it helps people start to begin to think about what what matters to them in their life, their different areas of self-care, where they want to start.

So it's a great tool for helping people be in a different relationship with themselves. And then if the provider uses it, in different relationships with the providers.

When you're addressing things like behavior change and how you eat and move and relate to other people and yourself, you have such a difference pathway in because you understand where that person is starting from and they understand.

So I would love to hear that approach, that humanistic approach to the functional approach.

Mission partners and practice innovation

And we've heard that a lot in this conference. But to operationalize that would be very cool. Yeah, I think that does need to be operationalized. Part of what I experienced with going through the process of understanding the group visits is that There's something about information first that obviously is very palatable because people don't have information, but that human first is the thing that can really connect people into a healing process.

That's how I summarize whole health now. I can get concrete and say, here's the checklist, that essentially from my perspective, it's a transformation of a medicalized system to a humanized Yeah, that's pretty, pretty clear.

What are some of the green shoots that you see that are human-first projects that, you've had a chance to, like, witness being done? What's a green shoot?

Well, just, y'know, if you water something and the shoot starts coming out, eventually this'll be a tree, but like the grass root, the, uh, green chute of a thing.

Is that an English term? I thought that was English. No, I've never heard that term before. But it sounds cool. Yeah, you water the seeds and the green shoot comes out.

Okay, so we would call it grassroots. Grassroots, okay, got it. That's the translation. Well, we're seeing a lot of great, the VA has done a lotta work, but now what's cool is taking what we are learning and seeing, there's actually a hope that In this country, you know, we have land-grant universities who, like, have a big social commitment to give back to the community.

And there's a number of land grant universities with high-level leadership who are saying, let us help be an agent of change in the communities for Whole Health.

Virginia Tech, and we've been working with Virginia tech, they're taking a leadership role in this. Senior Vice President of Virginia Tech is interested in working with us to bring other land-grant universities together to start to say, how can we support communities in adopting this?

And what I like about that is it takes it out of just the medical and the health systems to a different level. So we're seeing that and making that happen.

As you know, we are working Southern California University Health Sciences. in training an amazing, amazing groups of people in getting a doctorate in whole health leadership so that they are positioned and ready to help drive change in the systems in which they were to really do that system transformation that we were talking about.

And SCU is now standing up. an institute for the advancement of whole health. So there are all sorts of, when you pull back and you look at what's happening, it's really encouraging to see these, what was it called, shoots?

Green shoots. Yeah.

Green shoots in whole health leadership

That's my new word, green shoots, and then again, I'm all about synergy, so when we can kind of connect those efforts now, and they can learn from each other, not just say, oh, that's nice, I'm glad you're doing your work, but what are you learning?

What's hard? what's not working? Where are the barriers? They start to share in a real operational level, then solutions become available that we couldn't have imagined otherwise.

Well, I think functional medicine, integrative medicine and lifestyle medicine is sort of like this sort mycelial layer that's underneath, but it's not really connected because of the sort staking out of it.

That's the stage we're in. I mean, that is the state we are in and I can think you and can help. Yeah, I think that that is the most important work because the other thing is, even though other countries have, let's say, the social fabric has not unraveled to such a degree, so they have better health outcomes because it's just a healthier society.

Correct. Because America has had this unraveling, it's forced innovation to show. And that's why you see that functional medicine is way further ahead here than any other country, but that is because they had the problem for longer.

break it to sort of rebuild it because ultimately, the rest of the world does follow the pharmaceutical first paradigm generally for medicine. It has become the general way of delivering medicine across hospitals and health systems across the World.

So there has to be a somewhat of a reevaluation. And I think we're just a little bit further ahead. The things that happen here permeate outwards. You can see that from this conference.

Think how many people I've met from so many different countries across The world who are coming here to understand how does the body work? how is the ecology of the body, you know, adjusted, and how can we adjust the medical, the way that we practice to actually facilitate whole health.

Yeah. Hear, hear. Breakthroughs come from breakdowns. They do. You got a breakdown to breakthrough. Well, for the people who are watching, I'd love for you to share a little bit more about the program because I'm very excited about it and it's in my future, all I can say.

I know it is. It's so exciting. When I was going through the application phase, and I hadn't written a resume for a

long time to work for myself. So I had to go back and think about, okay, what are all the things that I've done and how they fit into whole health?

And I said, Okay, well, put this, but this for this. Yeah, this is who I'm here to be. Yeah, thanks for asking. It's really exciting to me because when SEU had the idea of doing a doctorate, firstly, the initial idea was actually they wanted to do a Doctorate or they were exploring doing the Doctor in Integrative Medicine.

And I didn't know them at that point in time, this was two or three years ago. But somebody asked me to brainstorm with them and I'm like, I don't get that.

Like, again, we don t need another thing. another silo. And there's lots of great integrated medicine fellowship. I mean, I didn't get it. But I did say, you know, what I think is needed is the nation is calling for this transformation, right?

The National Academies report had just come out, and everyone's saying, yes, whole health. we need a true system transformation. And I'm looking at that going, who's going to lead it?

Like we were talking about, real system of transformation is very hard. It's a different kind of leadership than leading an established organization. then there's the issue of a lot of people don't even know what a whole health system really entails.

Like, how do you create a system that is actually designed to empower people and equip people? Our current system isn't designed for those core competencies.

So I was just saying, you know, I think getting a doctoral program going to to really support people in leading large system transformation to all health.

That would be interesting. And so SCU Health Sciences Center said, that sounds cool. Will you help us design that? So I dove into that and have had a ball working with Laurie Phillips and a bunch of our other faculty to co-create that curriculum.

which is across two years and four months, and it's a professional doctorate, so people can be in their lives and working full-time. We come together.

I was very keen on, we have to have some time together, you can't be an agent of change. if you yourself haven't had a transformational experience. So it's that human connection.

It's actually a parallel to what we're talking about in healthcare. Like, it can't just be transactional online. it has to be human. Embodied. And so we come together across the two years four times, two times each year.

And that in-depth experience of being together is essential to this. But when I designed it or we all designed, James, I was like, you know, we might design it, but will they come?

Whole Health Leadership doctorate and closing remarks

We'll build it. Because it's the first degree of its kind in the country. It doesn't exist. And I want to just tell you what is so cool. When you join the degree, the people that have been attracted to are amazing.

And part of what's amazing about them is they are from a wide variety of professions and doorways in. You don't have to be a clinician. It can be an administrator or educator.

If you want to a change agent in this realm of whole health, then that's what it's attracting. We now have just started our fourth class, our forth cohort.

When you look at the projects and the transformational work these guys are doing, and you start to go back into

networking, you started to connect, like, all of the change that's happening in different domains and different sectors in, different parts of, the country and, and start you network that, it's very exciting.

It's so cool. I'm so excited about it. Yeah. That's a nice layer forming underneath and also coming up around at the same time. Yeah. Well, look, I want to share my excitement about it.

I'm super excited to be part of it, and I do feel like this is what I am here to do. And so I wanna thank you for creating it for facilitating it or learning.

Oh, for sure. You know, a lot of people who listen to the Evolution of Medicine podcast, they listen. When I started this, there were almost zero, you know, zero content about this topic or the range of topics we're talking about.

But the people who listen to this, who watch this. You know I know that there is an inkling inside many of them that they want to be this agent of change.

And some of then find themselves in private practice because they've had to do that in order to practice with integrity, and some of them are in health systems.

And when I spent time really trying to popularize the group visit, I saw the number of people that were in systems, And even here at IFM, there's a record number.

I think 40% of the attendees work inside health system right here, at this conference, which is a records. It's typically been very biased towards small practices, but this is happening here.

So if you are listening to this, How do people find out? How did they get in touch? Oh, yeah. Well, you can just Google it. It's on SCU Health Sciences, or just google Whole Health Leadership Doctorate.

That's the only one in the country. Amazing. Easy to find. Well, Tracy, thank you so much for leading it. And I look forward to many more opportunities to take this forward together.

Absolutely. I felt just through doing these interviews in the last couple of days, inspired, re-inspired to reconnect the diversity of opinion that's out there, the different ways of building function and assessing function.

the building of a common language and a comment infrastructure is exactly what's needed. It's part of the great reconnection that I think is necessary for society, for medicine.

And I'm really grateful to be on this journey with you. Me too, James. Okay. All right, so if you don't know about the history of Dr. Tracy Gordette, go and watch last year's episode.

We'll put it in the show notes. There's a whole history I didn't mention at the beginning. Friendly like that, we got into it, but there's the transformation of the VA, there is the creation actually of a program, the University of Arizona program with Andy Weill Fellowship, which a number of people that I've interviewed here are, you know, are seeing each other as graduates of that 15 years later.

It's so much fun. And it's amazing seeing how those people have gone out into the world and are leading, leading in their own way. Very cool. This has been the Evolution of Medicine podcast.

Thank you so much for tuning in. Hope this was inspiring. Please share this with a whole health leader that you know or an aspiring whole-health leader so that we can accelerate this evolution of medicine.

Thanks so for much tuning. We'll see you next time. So we are here asking practitioners about their practitioner journeys. And the reason why is because Journeys is a new product from Fullscript.

Journeys allows you to set up your own lab offerings as the top of the funnel. Give the patients what they want. They want to know about themselves and it's the easiest way to bring them into your practice.

We have all types of practices from across the country that are building their own unique lab panels for their unique practices, selling them to their community and acting as a great funnel into their practice is a massive innovation.

I think this will accelerate the evolution of medicine. You can go to goevomed.com slash journeys to find out more, set up your own journeys in half an hour and transform the health of your community.

Go get it. So that was the podcast. What an epic session. Thank you so much for tuning in to the Evolution of Medicine podcast, we'll be back again next week.

And thanks so