# **National Expert Meeting on Qi Gong and Tai Chi**

## Consensus Report

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## Preface

In the final decades of the 20th century and the early years of the 21st, health promotion emerged as a complement to conventional medical interventions. Disease risk management, self-care, reduction of negative drug interactions, falls and injury prevention, stress management, holistic health care, and mind/body medicine are a few examples of these innovations. An integral part of this evolution of health care has been the growing importance of various forms of exercise modalities originating from Asia, including Qi Gong and Tai Chi.

Qi Gong and Tai Chi are practices involving movement and meditation based on ancient Chinese philosophies that are purported to promote mental and physical health, vitality, and longevity. Refined in Asia for hundreds of years as a means of promoting health and functional well-being, these practices are also revered for the cultivation of social and spiritual values.<sup>1</sup> In recent years, increasing attention in the West has focused on the benefits of Qi Gong and Tai Chi as forms of gentle physical activity for promoting health and well-being and as a moving meditation for stress management and disease risk reduction. There is growing evidence that Qi Gong and Tai Chi practices may be among the best forms of physical activity for diverse populations since these activities are low impact, low cost, and relatively easy to learn.

Tai Chi and Qi Gong may sometimes be associated with complex choreographed sets of movements or "forms." However, the essential components of Qi Gong are easy to learn and practice, and many modified forms of Tai Chi are more accessible and less complicated than the original complex movement forms imported from China.

Traditionally, Qi Gong and Tai Chi practice includes four major components:

- Body posture adjustment and gentle movement
- Meditation and purposeful relaxation
- Breath regulation practice
- Self-administered massage\*

These four essential components can be integrated in a multitude of different combinations, resulting in a wide variety of options ranging from very mild and slow to dynamic and vigorous, which can be practiced either walking, standing, sitting, or lying down. Once individuals have advanced through the basic components, the addition of partner activities such as "push-hands"\*\* can be added to the program.

<sup>\*</sup> Massage is primarily a Qi Gong practice.

<sup>\*\*</sup>Push-hands is primarily a Tai Chi practice.

## **Background to the Expert Meeting**

Much of the evidence about the effectiveness of Qi Gong and Tai Chi in the West has emerged from intervention programs of relatively short duration that were designed primarily for research purposes. Many issues must be addressed in order to translate findings from such research studies into effective community programs that can be delivered in senior centers, hospitals, faith-based institutions, retirement homes, and other community settings.

Part of the challenge is to develop effective, evidence-based programs that can be taught by appropriately trained instructors and disseminated widely in communities throughout the U.S. In order for large numbers of people to benefit from the Qi Gong and Tai Chi experience, it will no longer be feasible to depend exclusively on experts (often called masters) to deliver programs. Instead, lay leaders must be trained in the fundamental principles of Qi Gong and Tai Chi.

To foster greater access to the benefits of Qi Gong and Tai Chi, the Archstone Foundation provided funding to the National Blueprint Office at the University of Illinois, the National Council on the Aging, and the Institute of Integral Qigong and Tai Chi to convene a National Expert Meeting on Qi Gong and Tai Chi at the University of Illinois at Urbana-Champaign. The primary goal was to address the challenges of integrating Qi Gong and Tai Chi programs into the aging network and to identify the necessary components of an effective program to meet the needs of diverse populations with varying functional abilities.

Qi Gong and Tai Chi were introduced in the United States decades ago, yet there have been relatively few concerted efforts to examine how best to deliver these practices to the general public. Diffusing evidence-based best practices for Qi Gong and Tai Chi programs is no small task, since to date little attention has been focused on how best this can be achieved.



## **Critical Issues to be Addressed**

In November 2005, a panel of more than 30 nationally and internationally recognized experts in Qi Gong and Tai Chi, physical activity and aging, and biomedical research gathered to explore and recommend key strategies on issues related to providing accessible and widespread Qi Gong and Tai Chi programs. The participants, including older adults who practice Tai Chi, provided knowledgeable insight into the following challenging questions:

- What are the essential components of Qi Gong and Tai Chi programming that must be included to achieve meaningful benefits?
- What are the knowledge, skills, and abilities (KSAs) necessary to effectively lead Qi Gong and Tai Chi programs in the community?
- What unanswered research questions must be addressed to increase our understanding of the potential benefits of Qi Gong and Tai Chi?
- What are the best strategies for integrating Qi Gong and Tai Chi programs in the aging and other health care and social service networks?

This consensus report outlines the expert recommendations and outcomes of the National Expert Meeting on Qi Gong and Tai Chi. The intent of the Archstone grant and the conveners of this meeting is that these recommendations may be used to assist in the development, implementation, and evaluation of effective and cost-efficient community-based Qi Gong and Tai Chi programs and to leverage wide-reaching benefits for diverse populations.

## Benefits of Qi Gong and Tai Chi

There was a broad consensus that Qi Gong and Tai Chi programs provide numerous physical and psychological health benefits and contribute to the well-being of those who participate regularly. Research has shown that Qi Gong and Tai Chi participation reduces blood pressure, increases maximum oxygen consumption, increases immune function, and improves flexibility.<sup>2</sup> There is abundant empirical evidence that Tai Chi participants lower their fear and risk of falling<sup>3,4</sup> and experience an increase in lower extremity strength,<sup>5</sup> as well as movement confidence related to posture and balance.<sup>6</sup> The meditative and breathing practice aspects of Qi Gong and Tai Chi programs have been shown to reduce stress, anxiety, and depression, thereby improving overall quality of life.<sup>7</sup>

Although the research findings to date are both promising and encouraging, there is an evident need to expand the number and scope of clinical research studies in both Qi Gong and Tai Chi. Furthermore, there is a need to disseminate the findings to the medical and lay communities and to translate research programs into effective community-based programs.

## **Program Content and Structure**

Although there will inevitably be some variation across programs, the expert participants identified the essential components of most well organized and effective Qi Gong and Tai Chi programs.

#### **Course Content**

- **Dynamic body movements** that promote balance, flexibility, strength, and range of motion while sitting, standing, or walking
- Static standing postures that promote balance and concentration
- Static sitting postures that are the foundation to quiescent meditation
- **Breathing practices** that promote oxygenation, relaxation, and concentration and foster selfawareness
- Meditation practices fostered by deep and/or controlled breathing for concentration and focus
- Self-administered massage which accelerates natural healing mechanisms\*
- **Information about complementary and holistic health care** (e.g. natural healing, diet, longevity or vitality enhancement and philosophies that foster inner peace)

#### **Class Characteristics:**

- Group activities that provide ample opportunities for social interaction
- Interesting practices that are stimulating and provide fun and enjoyment
- Quiet environment for optimal meditation and movement practice
- Safe and supportive facilities to accommodate participants of differing physical activity levels

Ideally, group programs should be offered three or more times per week for about one hour each session. However, the expert panel recognized that many facilities schedule programs once or twice per week. Certain populations will need briefer interventions or carefully modified practice settings to accommodate a wide variety of disabilities and limitations. Individual daily practice is also strongly encouraged for at least 15 to 30 minutes on those days when group programs do not meet. Audio, video, and DVD programs for home practice may be helpful.

The expert meeting participants recognized that additional research studies are needed in order to provide more definitive recommendations regarding the frequency, duration, and intensity needed to attain specific health improvement outcomes, as well as to provide information on which methods support the goal of widespread diffusion.

## Adding Tai Chi and Qi Gong Elements to Existing Programs

Many of the components of Tai Chi and Qi Gong practice can be integrated into other physical activity programs such as walking, aqua exercise, and strength training provided that fundamental principles of Tai Chi and Qi Gong (i.e. movement, postures, breathing, and mind focus) are applied.

Selected Qi Gong and Tai Chi movements could be used for warm-up exercises or comprise a larger portion of an activity program combined with other exercises or mind/body practices. Combining meditation and relaxation practices with aerobic exercise provides a complete and well-balanced physical activity program.

The following six components could provide a foundation for either a typical Qi Gong and Tai Chi session or a shorter supplemental session to be integrated with other types of exercise, body/mind practice, or meditation. The length and order of the activities may be adjusted to suit the needs, interests, and limitations of the participants.

- Warm-up (preparation)
- Body postures with or without movement
- Breathing techniques
- Meditation
- Massage\*
- Cool-down (conclusion)



\* For Qi Gong practice

## **Program Instructors**

Throughout history there has been much dialog within the Qi Gong and Tai Chi practice community about the training requirements and knowledge, skills, and abilities (KSA's) necessary for teachers to lead classes and practice sessions. The National Qigong Association has established a training standard of 200 hours for a Qi Gong and Tai Chi "teacher." At the National Expert Meeting on Qi Gong and Tai Chi there was consensus among the participants that there is a need to train lay leaders who would be able to provide older adults with access to introductory concepts and programs of Qi Gong and Tai Chi. They recommended that these basic-level lay leaders demonstrate the following minimum KSA requirements and competencies to teach Qi Gong or Tai Chi safely and effectively:

- Awareness and understanding of the connection between Qi Gong and Tai Chi philosophy and practices
- Basic knowledge of Qi Gong or Tai Chi movements and principles
- Ability to tailor programs for specific populations and limitations
- Enthusiasm for learning about and teaching Qi Gong and Tai Chi
- Leadership qualities
- Teaching and problem-solving skills
- Ability to empathize and connect with participants
- Creativity
- Safety knowledge (CPR and First Aid)

Additionally, lay leaders should have graduated from a formal Qi Gong or Tai Chi class taught by a qualified trainer.

Ideally, prior to leading classes or practice sessions, lay leaders should have practiced Tai Chi or Qi Gong for about six months in an institutional setting with a qualified Tai Chi instructor, or have received 20 to 50 hours of initial formal training from a recognized Tai Chi or Qi Gong organization. The experts were willing to concede that a short, high intensity weekend course (14 to 16 hours) with a clearly defined internship or practicum may substitute for longer formal training activities for individuals with prior knowledge in exercise/health and well-developed teaching skills.

Continuing education is particularly important for lay leaders to improve their skills and knowledge of Qi Gong or Tai Chi practice. Having an expert instructor who can serve as an ongoing advisor is ideal, however, materials such as toolkits, manuals, websites, and video courses are useful ways to help leaders advance their practice, teaching, and leadership skills. It was also recommended that lay leaders take additional short courses periodically to further develop their skills and understanding of Qi Gong or Tai Chi teaching and practice.

## **Instruction and Programs for Participants with Special Needs**

Qi Gong and Tai Chi programs can be beneficial for everyone including people who are chronically ill, frail older adults, and those with disabilities. When developing and initiating new programs, leaders should consider each participant's functional status, medical history, and fitness level. A self-evaluation form can be used to determine special needs. The class environment should be safe and supportive to accommodate all functional levels.

Creative leaders can find ways to involve adults with disabilities. The standing and walking Qi Gong and Tai Chi movements, breathing exercises, and meditation techniques can be easily adapted for participants in wheelchairs. In addition, these mind/body methods can serve as complementary therapy for people with chronic or acute illnesses and those experiencing pain along with pre- and post-surgical programs and rehabilitation from diverse injuries, disabilities, or infirmities. Lay leaders could benefit from working with or seeking the guidance of more experienced instructors in designing programs for people with special needs.



## The Diffusion and Dissemination of Qi Gong and Tai Chi

When new physical activity programs are introduced in various community locations, it is important that the programs be sufficiently rigorous to meet expectations and deliver the health outcomes that have been achieved previously in well-controlled research trials.

The Diffusion of Innovations Theory provides a useful framework for identifying and addressing barriers to diffusion of Qi Gong and Tai Chi practices in the United States. For most innovations, there are six characteristics that affect the rate and the extent of successful adoption by individuals, organizations, and communities.

- Compatibility: The extent to which the practice or program is consistent with the needs, values, and past experiences of individuals and organizations
- Complexity: The extent to which individuals perceive the practices as easy to do and the extent to which organizations perceive the program as easy to adopt and implement
- Relative Advantage: The extent to which the practice or program is perceived as advantageous compared with other practices and programs
- Trialability: The extent to which people and organizations are able to try the practice or program before making a significant commitment of time or money
- Observability: The extent to which the benefits of the program can be observed by potential adopters
- Risk: The chance that it will do harm

Many barriers could potentially impede the process of diffusing Qi Gong and Tai Chi programs into communities and the aging network. Barriers identified in the expert meeting include:

#### **Barriers to Diffusion**

- Misinformation about the inherent complexity of Qi Gong and Tai Chi
- Perceptions that Chinese health enhancement practices are foreign, and therefore inconsistent with participants' past experiences, cultures, and values
- Incorrect assumptions that Qi Gong and Tai Chi are martial arts
- Perceptions that the practices are too unusual or esoteric
- Lack of public and professional knowledge and education about the health benefits
- Skepticism about the health benefits, especially by the medical community
- Need for additional controlled clinical trails to document the health benefits of Qi Gong and Tai Chi
- Difficulty in translating research into effective, tested programs
- Lack of a national resource network for compiling and disseminating information
- Over-reliance in the medical system on conventional health care solutions
- Shortage of qualified instructors
- Difficulty in reaching and meeting the needs of diverse populations of program participants
- Transportation and accessibility
- Cost considerations

#### **Strategies to Overcome Barriers to Diffusion**

The expert meeting participants recommended several strategies to overcome many of these barriers in order to help to integrate Qi Gong and Tai Chi programs into the aging network.

#### Marketing and Public Relations Strategies

- Publish articles about Qi Gong and Tai Chi in trade journals and magazines written for specific populations. Emphasize the remarkable history of Qi Gong and Tai Chi in China for thousands of years.
- Present information about Qi Gong and Tai Chi at professional conferences related to physical activity, fitness and wellness, medicine, and aging.
- Provide TV and radio programming about Qi Gong and Tai Chi for widespread distribution.
- Develop press releases and other materials for news media with information on Qi Gong and Tai Chi.
- Create a strategy to involve high profile citizens (entertainers, sports stars) and communicate their involvement to the media.
- Develop a clear and concise marketing message about the benefits of Qi Gong and Tai Chi programs for target populations including older adults. In addition, market the value of adopting these programs to community-based organizations.
- Highlight successful community Qi Gong or Tai Chi programs and provide participant testimonials for media use.
- Develop information about Qi Gong and Tai Chi for distribution at community health fairs and other local venues.
- Target and implement additional research and communicate the findings to the media and to health care professionals. Explain the benefits of Qi Gong and Tai Chi in Western terms.

#### **Community Strategies**

- Develop a "readiness" tool that helps organizations decide whether to adopt Qi Gong and Tai Chi programs. Identify barriers that may inhibit successful program adoption and strategies for overcoming these barriers.
- Develop a Qi Gong and Tai Chi toolkit for organizations and facilities to use in implementing new programs.
- Develop a network for lay leaders to gain easy access to information and to obtain technical assistance.
- Provide a system for supervision and mentoring of leaders to ensure program quality.
- Create a network of organizations that offer or plan to offer programs to share curriculum and teaching tools.
- Develop an online clearinghouse of programs and resources on Qi Gong and Tai Chi.
- Encourage program providers to partner with local health care organizations and services to publicize programs and provide information on Qi Gong and Tai Chi.

#### **Applying the Diffusion of Innovations Theory**

The most significant barriers that the experts identified relate to compatibility and complexity. Without question, Tai Chi and Qi Gong programs will always be available in their traditional format, and it is important to educate the public about the benefits of Qi Gong and Tai Chi. However, in the minds of many older Americans, Qi Gong and Tai Chi are often perceived as foreign and inextricably linked with Chinese culture. Accordingly, it may be worthwhile to present Tai Chi and Qi Gong programs translated in Western language, focusing on the four essential health practices. As mentioned previously, these practices include body posture adjustment and gentle movement; mediation and purposeful relaxation; breath regulation practice; and self-administered massage. Programs could be advertised as "gentle movement and meditation" as opposed to Tai Chi or Qi Gong.

Since older adults often perceive Qi Gong and Tai Chi as complex, difficult to understand, and difficult to perform, it is important to emphasize the simplicity and ease of both Tai Chi/Qi Gong and the four essential health practices as well as the fact that everyone can derive benefits from these practices, regardless of age or physical status. Finding ways for people to try a class, perhaps as a part of other physical activity programs, prior to committing to a full program will help spur adoption. The program adoption rate will accelerate if potential program users and organizations learn about others who practice Qi Gong and Tai Chi and who derive significant benefits from these practices.

When promoting programs within local communities, consider that health care professionals can and often do provide referrals to local physical activity programs. The medical community may be skeptical about the benefits and safety of Qi Gong and Tai Chi programs. Therefore, health care professionals must be informed about the benefits of the four essential health practices and how these practices are compatible with evidence-based Western medicine.



Photo courtesy of http://www.worldtaichiday.org

## **Research, Outcomes Measures, and Program Evaluation**

As organizations and facilities begin to adopt Qi Gong and Tai Chi programs, evaluation will be imperative in order to assess the effectiveness of new programs and their impact on participants' health and well-being. Evaluations can include measures of health, social factors, biomarkers, quality of life, and satisfaction ratings.

Specific outcome measures for research and the evaluation of the effectiveness of applied programs may include:

- Mobility, strength, flexibility, and balance
- Activities of daily living (ADL's)
- Resting heart rate
- Blood pressure
- Breathing capacity
- Chronic pain levels
- Self assessment for physical and mental health
- Perception of stress
- Self assessment for sleep, energy, anxiety/depression
- Medication use
- Fear of falling and confidence levels
- Quality of life and well-being measures
- Class attendance and attrition rates
- Class evaluations

Since the range of purported benefits of Qi Gong and Tai Chi vary so widely, it can be challenging to select the outcomes on which to focus to measure the effectiveness of Qi Gong and Tai Chi programs. Focusing program evaluation on traditional exercise adherence and fitness outcomes is a sensible first step, since there is already strong support for the needs of older adults to increase physical activity levels. Later, program evaluation may graduate to examine markers of progress specifically tied to the physiological changes found in research.

Another focus of evaluation is establishing guidelines for the frequency and duration of practice necessary for achieving goals. Programs can be diverse in content and vary in intensity and duration; establishing guidelines for minimum practice will be the key to developing evaluation criteria for effective dissemination.

A lack of long-term studies of Tai Chi and Qi Gong program effectiveness creates a barrier to identifying appropriate tools for measuring program effectiveness. The meditative and spiritual aspects of Qi Gong and Tai Chi that comprise mind/body practice (programs combining exercise and meditation) are especially formidable to evaluate. Carefully designed qualitative research is necessary to identify meaningful outcomes measures.

In traditional Chinese medicine, the benefits of Qi Gong and Tai Chi and the mechanisms of their action are thought to emerge as a function of the life energy, Qi (Chi). There is a growing interest in the study of Qi or energy in medicine, and the National Institutes of Health have funded numerous studies that investigate the human body's "energetic" makeup and function. However, this aspect of research on Qi Gong and Tai Chi is still new and challenging, often requiring the development of innovative methods of investigation not previously explored in Western research.

## **Translating Research Models into Practice**

Interventions that were initially developed for research purposes will have to be modified if they are to be effectively implemented in community settings. In addition, there is a multitude of diverse Qi Gong and Tai Chi programming already extant throughout American communities and institutions that may be explored for best practices. The task to more widely and more efficiently integrate Qi Gong and Tai Chi will require input from a variety of constituencies including program developers, the sponsoring organizations, and end users. The experts suggested that one way to start is to solicit the support and assistance of organizations and agencies that reach a wide network of populations and communities and have the capacity to disseminate the program.

Community partnerships among organizations and agencies that serve older adults, health care providers, and exercise facilities will facilitate the sharing of information and help to address and overcome barriers. Involving schools and youth organizations in the partnership could provide important opportunities for intergenerational interactions that would add value to the physical activity programs and social interactivity.

The means of identifying highly successful programs and replicating their outcomes may include establishing and supporting community demonstration projects, identifying enthusiastic people who practice Qi Gong and Tai Chi (from classes at YMCAs, community centers, hospital wellness programs, faith-based health ministries, after-school programs, etc.) to serve as program "champions," and creating a step-by-step toolkit on how to implement a program at the local level.



## **Unanswered Research Questions**

Although many research studies have documented the various health benefits of Qi Gong and Tai Chi practice, many questions still remain. Disseminating a new and innovative intervention such as Tai Chi and Qi Gong throughout the aging network is an ongoing process that will likely span several years or even decades as a growing number of organizations realize the value of such programs and Qi Gong and Tai Chi practices become more popular among people who derive their benefits.

The expert panel posed these research questions for future consideration.

- What are the optimal frequency, duration, and intensity for effective, evidence-based interventions?
- What are the long-term health effects of participation in Qi Gong and Tai Chi programs?
- How does participation in Qi Gong and Tai Chi affect chronic physical and mental disease conditions?
- What are the measurable biological mechanisms by which Qi Gong and Tai Chi deliver mental and physical health benefits?
- How do instructor training and qualifications affect program outcomes?
- What factors influence organization/agency adoptability?
- What are the health and social-care cost savings associated with these programs?

The meeting focused primarily on the needs of the 50+ population, however, it is very clear that Qi Gong and Tai Chi provide significant physiological, psychological, social, and spiritual benefits across the life continuum. Many of the findings and recommendations outlined in this document apply not only to older adults but to the general population as a whole.

## **Next Steps**

The panel of the National Expert Meeting on Qi Gong and Tai Chi has addressed the challenges of developing effective, evidence-based Qi Gong and Tai Chi programs that can be disseminated widely throughout the Western world. Their consensus recommendations are useful to assist organizations, agencies, and facilities in developing and implementing mind/body practice programs for their customers, constituencies, members, and residents.

As part of this project, in 2006 the National Blueprint Office will sponsor two community demonstration projects that will be charged with implementing a Qi Gong and Tai Chi program that is consistent with the Expert Meeting consensus findings and recommendations. These programs will be promoted as best practices in physical activity and social support programs for diverse populations. The curricula and program materials will be widely disseminated throughout aging, social services, and complementary medicine networks.

#### References

<sup>1</sup> Yang, Y. & Grubisich, S. A. (2005). *Taijiquan: The art of nurturing, the science of power*. Champaign, IL: Zhenwu Publications.

<sup>2</sup> Klein, P. J. & Adams, W. D. (2004). Comprehensive therapeutic benefits of Taiji: A critical review. *American Journal of Physical Medicine and Rehabilitation*, 83(9), 735-745.

<sup>3</sup> Wolf, S. L., Barnhart, H. X., Kutner, N. G., McNeely, E., Coogler, C., & Xu, T. (1996). Reducing frailty and falls in older persons: An investigation of tai chi and computerized balance training. Atlanta ficsit group. Frailty and injuries: Cooperative studies of intervention techniques. *Journal of the American Geriatrics Society*, *44*(5), 489-497.

<sup>4</sup> Li, F., Harmer, P., Fisher, K. J., McAuley, E., Chaumeton, N., Eckstrom, E., & Wilson, N. L. (2005). Tai Chi and fall reductions in older adults: A randomized controlled trial. *Journal of Gerontology: Medical Sciences, 60A*, 66-74.

<sup>5</sup> Christou, E. A., Yang, Y., & Rosengren, K. S. (2003). Taiji training improves knee extensor strength and force control in older adults. *Journals of Gerontology, Series A, Biological Sciences and Medical Sciences, 58*(8), 763-766.

<sup>6</sup> Kutner, N.G., Barnhart, H., Wolf, S. L., McNeely, E., & Xu, T. (1997). Self-report benefits of tai chi practice by older adults. *Journals of Gerontology, Series B, Psychological Sciences and Social Sciences, 52*(5), 242-246.

<sup>7</sup> Jin, P. (1989). Changes in heart rate, noradrenaline, cortisol and mood during tai chi. *Journal of Psychosomatic Research*, *33*(2), 197-206.

### **Principle Investigators**

Wojtek Chodzko-Zajko University of Illinois at Urbana-Champaign Roger Jahnke Institute of Integral Qi Gong and Tai Chi

#### **Steering Committee**

Lynn Beattie National Council on the Aging

Rita Chow National Council on the Aging

James Firman National Council on the Aging Karl Rosengren University of Illinois at Urbana-Champaign

Yang Yang University of Illinois at Urbana-Champaign

## **Roundtable Participants**

Lynn Beattie, M.P.T., M.H.A. Assistant Vice President, National Council on the Aging

Alyce Cheska, M.A., Ed.D. Former Department Head, University of Illinois Tai Chi Program Participant

Wojtek Chodzko-Zajko, Ph.D. Professor and Head, Department of Kinesiology and Community Health University of Illinois at Urbana-Champaign

Rita Chow, Ed.D, AHN-BC DIrector, National Interfaith Coalition on Aging, National Council on the Aging

Michael DeMolina Chairman, Board of Directors, National Qigong Association Director, Wisdom Traditions Wellness Center

Bill Douglas Founder, World Tai Chi and Qi Gong Day

James Firman, Ed.D. President and CEO, National Council on the Aging

John Fisher, Ph.D. Research Scientist, Oregon Research Institute

Kerrie Hora, M.S. Program Manager, Health, Behavior and Aging Active for Life National Program Office

Roger Jahnke, O.M.D. Director, Institute of Integral Qigong and Tai Chi

Jianye Jiang Capitol Kung Fu Association

Linda Larkey, Ph.D. Director, Cancer Prevention & Integrative Medicine Office University of Arizona College of Medicine

Fuzhong Li, Ph.D. Senior Research Scientist, Oregon Research Institute

Shin Lin, Ph.D., Professor of Cell Biology, Physiology, and Biomedical Engineering, University of California, Irvine Roseann Lyle, Ph.D. Professor of Health Promotion, Purdue University

Chae-Hee Park, M.S. Doctoral Candidate, University of Illinois at Urbana-Champaign

Jennifer Reich, M.A., M.S., N.P., A.P.R.N.-B.C. Nurse Practitioner Fellow, Beth Israel Medical Center

Tom Rogers, M.S. Vice President, Qigong Institute

Karl Rosengren, Ph.D. Professor, University of Illinois at Urbana-Champaign

Mildred Searcy Tai Chi Program Participant

Lisa Sheppard, M.A. Project Coordinator, University of Illinois at Urbana-Champaign

Susan Snyder, M.S. Director, Project Enhance, Senior Services of Seattle/King County

Michael Spezzano, M.S. YMCA of the USA

Peter Wayne, Ph.D. Director of Research, New England School of Acupuncture

Chi-hsiu D. Weng, Ph.D. Dean, College of Tai-chi, University of East-West Medicine

Jennifer Wieckowski, M.S.G. Project Manager, Partners in Care Foundation

Angela Wong-Douglas World Tai Chi and Qi Gong Day

Yang Yang, Ph.D. University of Illinois at Urbana-Champaign

Tricia Yu, M.A. Director, Tai Chi Center, Madison, WI

Robert Zeiders, M.D. Rheumatologist, University of Illinois College of Medicine

Weimo Zhu, Ph.D. Associate Professor, University of Illinois at Urbana-Champaign

## **Our Sponsor**

**The Archstone Foundation** is a private non-profit grantmaking organization founded in 1985, whose mission is to contribute toward the preparation of society in meeting the needs of an aging population. Through grants, the Archstone Foundation supports direct services to the elderly, improves the training of health and other service providers, informs policy and decision makers, and develops model programs.

## **Coordinating Organizations**

**The National Blueprint Office at the University of Illinois at Urbana-Champaign** provides support and assistance to more than 50 national organizations that partner in the National Blueprint Initiative to promote physical activity among America's older adult population. The National Blueprint Office works to advance the goals of the Blueprint through various projects and strategic priorities involving organizations, government agencies, and companies that advocate healthy aging.

**The National Council on the Aging** is a national network of organizations and individuals dedicated to improving the health and independence of older persons and increasing their continuing contributions to communities, society and future generations. Its 3,800 members include senior centers, adult day service centers, area agencies on aging, faith congregations, senior housing facilities, employment services, and other consumer organizations.

The mission of the **Institute of Integral Qigong and Tai Chi** is to diffuse the benefits of Mind/ Body Practice—especially Qigong and Tai Chi—by training teachers, conducting research, and educating the public. Traditional principles of health promotion and character building are carefully revered while creating accessible programming that allows benefits to reach all populations from children to seniors in faith-based institutions, businesses, social service agencies, hospitals, clinics, community centers, schools, the military, and the justice system.

