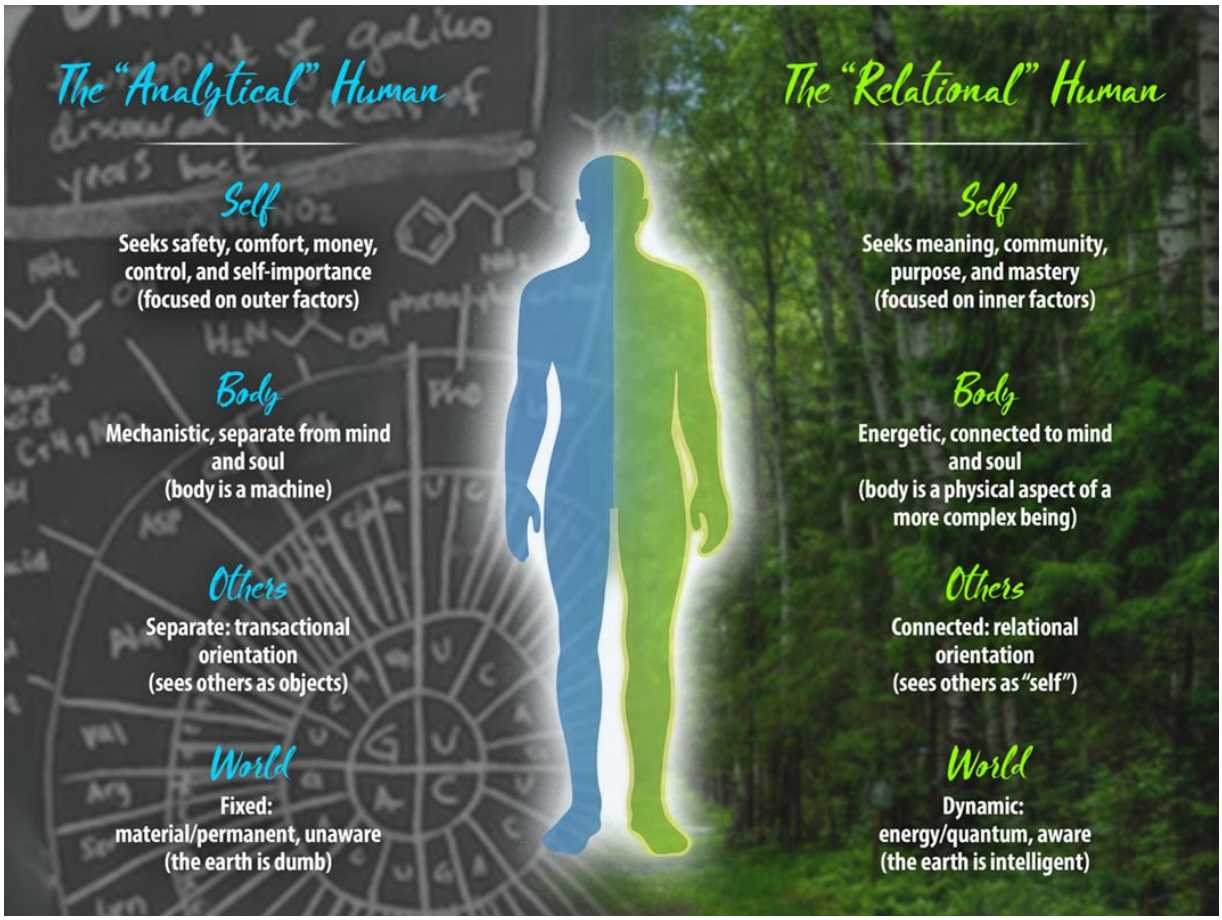
The Relational Human



Human beings are transitioning from an analytical way of being to a relational way of being. This chart illustrates that movement: from a worldview centered on control, separation, and mechanistic thinking toward one rooted in connection, meaning, and energetic interdependence. The analytical self organizes life around safety, certainty, and external markers of success, while the relational self seeks purpose, community, and inner coherence. In this emerging paradigm, the body is not merely a machine but part of a larger, integrated field; others are not objects but extensions of our shared humanity; and the world itself is experienced as dynamic, intelligent, and alive. This shift is a reorientation of our way of being.

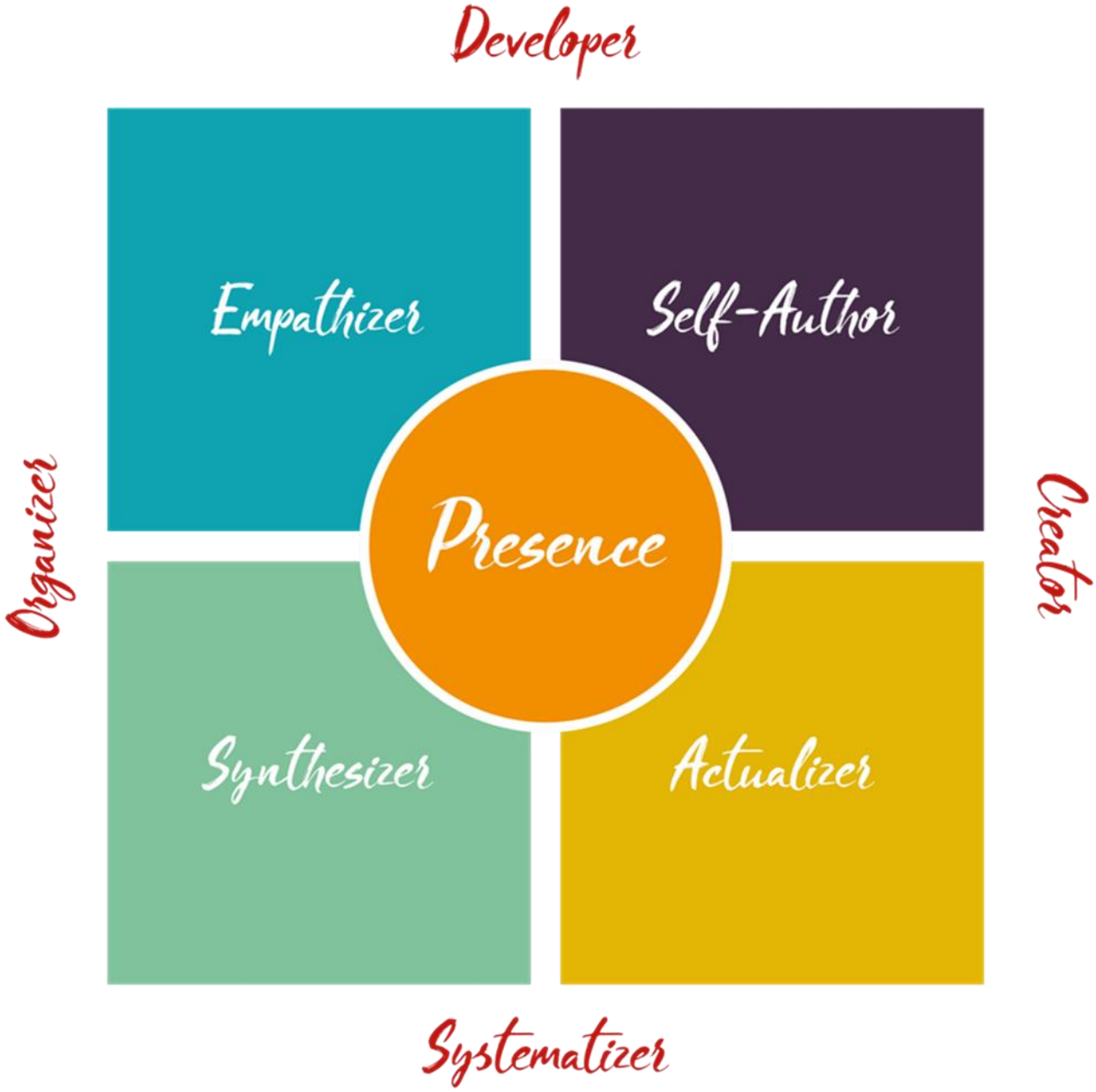
The Skills of the Relational Human

The relational human being possesses skills beyond those of the analytical human. They include a set of five interconnected capacities that shape how a person understands themselves, others, and the world. **Self-Author** reflects the ability to manage one's inner life, habits, and way of being. **Empathizer** captures the capacity to attune to people and living systems with sensitivity and care. **Synthesizer** represents the skill of making meaning—integrating information, perspectives, and patterns into coherent understanding. **Actualizer** is the ability to translate insight into purposeful action that creates desired outcomes. And **Presence** serves as the meta-skill that underlies them all: the ability to direct one's attention and consciousness with intention. Together, these capacities form the foundation of a relational way of being—one that is more connected, integrated, and responsive than the purely analytical mode.



An Explanation of Relational Skills

Let's examine the 5 skills above and add 4 more as a combination of two skill themes. For example, the "Developer" is a blend of the "Empathizer" and "Self-Author". Together, they form 9 core skills of the relational human being.



PRESENCE

- **Focus:** ability to put one's attention on one singular thing to the exclusion of other (less relevant) things
- **Circumspection:** ability to be aware of the wider context of a given situation
- **Being Present:** ability to maintain attention on what is occurring in the moment, excluding thoughts about the past and the future
- **Metacognition:** awareness of one's thought processes and an understanding of the patterns behind them

SELF-AUTHOR

- **Self-awareness:** metacognitive ability to observe oneself
- **Emotional regulation:** ability to recognize and manage one's emotional reactions
- **Internal locus of control:** orientation that your actions, choices, and effort shape your life outcomes
- **Discernment:** ability to intuitively perceive clearly and choose wisely

Example Applications:

1. Reflective Clinical Judgment
The ability to pause, observe one's internal reactions during patient encounters, and adjust behavior intentionally. This shows up when a student notices frustration, bias, or anxiety arising in a clinical moment and chooses a grounded, values-aligned response rather than reacting automatically.
Anchored in: self-awareness + emotional regulation.

2. Adaptive Professional Identity Formation
The skill of consciously shaping one's professional "way of being" rather than absorbing norms uncritically. Students demonstrate this when they articulate what kind of clinician they want to become and make choices that align with that identity — even under pressure.
Anchored in: internal locus of control + discernment.

3. Values-Aligned Decision-Making
The ability to make clinical, academic, or interpersonal decisions based on a clear sense of personal and professional values. This includes choosing how to respond to ethical tensions, workload demands, or team conflict in ways that reflect one's principles.
Anchored in: discernment + internal locus of control.

4. Emotional Self-Management in High-Stress Situations
The capacity to regulate one's emotional state during acute clinical stress — e.g., during codes, difficult conversations, or high-volume clinical days. This is not suppression; it's the ability to stay present, grounded, and effective.
Anchored in: emotional regulation.

5. Constructive Response to Feedback
The ability to metabolize feedback without defensiveness, extract meaning, and integrate it into one's growth trajectory.This is a hallmark of self-authorship: seeing feedback as data, not as a threat to identity.
Anchored in: self-awareness + internal locus of control.

EMPATHIZER

- **Theory of mind:** ability to attribute mental states (beliefs, intents, desires, pretending, knowledge, etc.) to oneself and others
- **Interpersonal acumen:** ability to develop rapport and connection (transparency, vulnerability, empathy, trust)
- **Humanistic orientation:** applies humanistic/moral perspective to decision-making and action
- **Values diversity:** ability to be open to diversity of perspectives and understanding others' points of view

Example Applications:

1. Attuned Patient Perspective-Taking
The ability to accurately imagine and articulate what a patient might be thinking, fearing, or hoping for — even when it isn't explicitly stated. This shows up when a learner says, "I wonder if she's worried about losing independence," and adjusts communication accordingly.
Anchored in: theory of mind.

2. Relational Presence in Clinical Encounters
The skill of creating a felt sense of connection — through eye contact, pacing, tone, and emotional attunement — even in time-pressured settings. Clinicians demonstrate this when they slow down for 20 seconds to truly "land" with a patient before diving into the agenda.
Anchored in: interpersonal acumen.

3. Humanistic Framing of Clinical Decisions
The ability to integrate moral, emotional, and human considerations into clinical reasoning. This includes naming the human stakes ("This decision affects her ability to stay at home") and balancing them with biomedical factors.
Anchored in: humanistic orientation.

4. Cultural Humility and Perspective Openness
The capacity to recognize one's own cultural lens, invite other perspectives, and adapt communication to honor the patient's worldview. This shows up when a learner asks, "How does your family usually make decisions about health?" rather than assuming Western autonomy norms.
Anchored in: valuing diversity.

5. Emotionally Intelligent Team Communication
The ability to read the emotional climate of a team, respond with empathy, and help regulate group dynamics.
Examples include noticing when a colleague is overwhelmed and offering support, or naming tension in a way that restores psychological safety.
Anchored in: interpersonal acumen + theory of mind.

SYTHESIZER

- **Interdisciplinary thinking:** ability to utilize a range of perspectives and approaches to handle issues
- **Recognize patterns:** Can see connections among disparate phenomena to create meaning and functionality
- **Big picture / little picture:** Can view issues/phenomena at different scales (tactical/strategic), including from an objective and systems perspective
- **Hold ambiguity:** ability to work with uncertainty to experiment and let emergent solutions develop

Example Applications:

1. Integrative Clinical Reasoning Across Domains
The ability to weave together biomedical data, psychosocial context, systems constraints, and patient values into a coherent understanding of a case. This shows up when a learner says, "Her uncontrolled diabetes isn't just physiology—it's transportation barriers, food insecurity, and caregiver strain interacting."

2. Pattern Recognition in Complex Clinical Environments
The skill of noticing recurring dynamics—clinical, interpersonal, or organizational—and using them to anticipate challenges or opportunities. Examples include recognizing early signs of team burnout, identifying workflow bottlenecks, or seeing diagnostic patterns across patient populations.

3. Zooming In and Out Between Micro and Macro Levels
The ability to shift fluidly between the immediate clinical task and the broader system context. A student demonstrates this when they manage a patient's acute issue while also naming upstream factors like clinic scheduling, insurance barriers, or population-level trends.

4. Working Productively With Uncertainty
The capacity to hold incomplete information, resist premature closure, and allow solutions to emerge through iteration. This is essential in ambiguous diagnostic situations, interprofessional collaboration, and quality improvement work.

5. Cross-Disciplinary Translation and Sensemaking
The ability to take insights from one domain (e.g., public health, ethics, engineering, psychology) and apply them meaningfully to clinical or educational problems. This shows up when a learner uses behavioral economics to improve patient adherence or applies systems engineering to redesign a workflow.

ACTUALIZER

- **Action orientation:** ability to courageously overcome resistance to initiate action
- **Mastery of will:** ability to focus on necessary tasks to envision and achieve a desired result
- **Stand up:** ability to affirm/enforce/advocate for principled behavior and action
- **Push through:** ability to persevere despite obstacles and setbacks

Example Applications:

1. Proactive Clinical Initiative
The ability to step forward—appropriately and safely—when a patient, team, or situation needs something done. This includes volunteering to lead a portion of a patient encounter, initiating follow-up on abnormal results, or taking responsibility for clarifying next steps in a care plan. It reflects the shift from passive learner to active contributor.

2. Courageous Advocacy for Patients and Colleagues
The skill of speaking up when something is misaligned with safety, ethics, or dignity. Examples include questioning a potentially harmful order, advocating for a patient's social needs, or naming when a team member is being dismissed or marginalized. This is the "stand up" dimension of your slide—principled action in real time.

3. Sustained Follow-Through on Complex Tasks
The ability to persist through administrative hurdles, clinical ambiguity, or emotional fatigue to complete essential work. This shows up in longitudinal patient care, quality improvement projects, and research responsibilities where progress requires steady, disciplined effort over time.

4. Intentional Prioritization Under Pressure
The capacity to focus attention and energy on what matters most in a busy clinical environment. Learners demonstrate this when they triage tasks effectively, avoid getting lost in low-yield activities, and maintain clarity about the purpose behind their actions. This is the "mastery of will" element—directing effort with intention.

5. Transforming Insight Into Actionable Change
The ability to take a reflective insight ("I tend to shut down when I feel uncertain") and turn it into a behavioral experiment ("In my next patient encounter, I'll name my uncertainty and ask for guidance"). This is where self-authorship meets actualization—closing the loop between awareness and embodied practice.

CREATOR

- **Design thinking:** ability to apply an aesthetic perspective authentic to oneself and appealing to others
- **Innovation:** ability to conceive of new and novel ways to approach an issue
- **Medium mastery:** Has an intuitive and technical understanding of the medium used in the creative process
- **Co-Creation:** ability to employ intuition and vision in an iterative, creative process

Example Applications:

1. Designing Patient-Centered Educational Tools
The ability to translate complex medical information into clear, accessible, visually intuitive materials—handouts, diagrams, scripts, or digital tools. This shows up when a learner creates a simple visual explaining heart failure zones or develops a culturally attuned diabetes action plan.
It reflects *design thinking* and *medium mastery*.

2. Innovating Clinical Workflows or Learning Processes
The skill of identifying a friction point in the clinical or educational environment and proposing a novel, workable improvement. Examples include redesigning a pre-rounding template, creating a new handoff structure, or developing a micro-teaching tool for peers.
This is the "innovation" dimension—creative problem-solving grounded in real needs.

3. Crafting Meaningful Patient Narratives
The ability to shape patient stories in ways that honor complexity, highlight key themes, and support shared decision-making. This includes synthesizing a patient's lived experience into a narrative that guides the team toward more humane, holistic care.
It reflects *co-creation* and *aesthetic perspective*—the art of telling a story well.

4. Experimenting With New Approaches to Communication
The capacity to try new conversational strategies—metaphors, analogies, visual cues, or reframing—to help patients or colleagues understand difficult concepts. This shows up when a learner uses a metaphor to explain insulin resistance or adapts their communication style to match a patient's learning preferences.
It reflects *medium mastery* and *creative iteration*.

5. Collaborative Creation in Interprofessional Teams
The ability to engage in generative, iterative teamwork where ideas evolve through shared input rather than top-down direction. This includes co-designing care plans with nurses, pharmacists, social workers, and patients, or co-building a QI project with peers.
It reflects *co-creation*—creativity as a relational act, not a solo performance.

DEVELOPER

- **Developmental awareness:** ability to understand the stage of development in another and what that person needs for growth
- **Teaching orientation:** ability to communicate with the objective of promoting awareness and learning
- **Life is a class:** ability to contextualize life experiences as opportunities for growth
- **Lead by example:** ability to teach through one's authentic way of being

Example Applications:

1. Assessing Learner Developmental Stage
The ability to read where a learner is cognitively, emotionally, and professionally—and adjust expectations accordingly. This shows up when a resident recognizes that a first-year student needs scaffolding and modeling, while a senior learner needs autonomy and reflective challenge.
It reflects the *developmental awareness* described in your slides.

2. Coaching Through Questions Rather Than Answers
The skill of using inquiry to promote insight, not just information transfer.
Examples include asking, "What patterns are you noticing?" or "What options are you considering?" rather than giving the solution outright. This embodies a *teaching orientation* that cultivates growth rather than dependence.

3. Transforming Clinical Moments Into Learning Moments
The ability to frame everyday clinical experiences—successes, errors, tensions, surprises—as opportunities for reflection and development. A clinician demonstrates this when they pause after a difficult encounter and say, "What did you learn about yourself in that moment?"
This is the "*life is a class*" dimension of your theme.

4. Modeling Professionalism Through Authentic Presence
The capacity to teach through one's way of being—how one handles uncertainty, conflict, compassion, and boundaries. Learners absorb far more from how clinicians *show up* than from what they say.
This is the "*lead by example*" element in your slide.

5. Giving Feedback That Builds Capacity, Not Compliance
The ability to offer feedback that strengthens a learner's self-awareness, agency, and long-term growth—not just their short-term performance. This includes naming strengths, identifying growth edges, and co-creating next steps in a way that preserves dignity and motivation.
It reflects the Developer's role as a *growth catalyst* rather than a judge.

ORGANIZER

- **Organizational awareness:** ability to manage and grow networks through understanding of social systems
- **Community catalyst:** ability to communicate via a narrative and other modes to motivate the community toward purposeful action
- **Team building:** ability to design systems to build a sense of trust, belonging, and teamwork
- **Culture shaping:** ability to influence and transform the culture of an organization or community

Example Applications:

1. Reading the Social and Organizational Landscape
The ability to understand how power, communication, workflow, and culture operate within a clinical or academic unit. Learners demonstrate this when they notice informal leaders, anticipate how decisions ripple through the team, or understand how clinic flow affects patient experience.
This reflects the *organizational awareness* described in your slides.

2. Facilitating Team Cohesion and Psychological Safety
The skill of helping a group feel connected, respected, and able to speak openly.
Examples include inviting quieter voices into discussion, naming shared goals, or helping reset the tone after tension.
This is the "*team building*" dimension—creating the conditions for trust and belonging.

3. Coordinating People and Processes for Effective Care
The ability to align roles, tasks, and communication so that patient care moves smoothly.
This shows up when a learner clarifies responsibilities during rounds, organizes follow-up tasks, or ensures that everyone understands the plan.
It reflects the Organizer's instinct for *network management* and *process alignment*.

4. Mobilizing Groups Through Narrative and Purpose
The capacity to articulate a compelling "why" that motivates others toward action—whether in a QI project, a community health initiative, or a student-led effort.
A learner demonstrates this when they frame a project around patient dignity, equity, or team well-being in a way that energizes others.
This is the "*community catalyst*" element—using narrative to move people.

5. Shaping Micro-Cultures Through Everyday Behaviors
The ability to influence the tone, norms, and values of a team through consistent, intentional actions. Examples include modeling respectful communication, celebrating small wins, or reinforcing inclusive practices.
This is the "*culture shaping*" dimension—leadership expressed through presence, not position.

SYSTEMATIZER

- **Systems thinking:** ability to see how parts connect within a whole
- **Causal understanding:** ability to understand why things happen – how causes lead to effects
- **Process orientation:** ability to manage processes to achieve desired results
- **Objectivity:** ability to see things as they are—free from personal bias, emotion, or preconceived judgments.

Example Applications:

1. Mapping Clinical and Organizational Systems
The ability to visualize how people, processes, information, and resources interact across a care environment. Learners demonstrate this when they understand how scheduling affects throughput, how documentation affects billing, or how interprofessional roles intersect in patient care. This reflects the *systems thinking* dimension in your slides.

2. Identifying Root Causes Rather Than Surface Problems
The skill of distinguishing symptoms from underlying drivers. Examples include recognizing that frequent no-shows stem from transportation barriers, or that medication errors arise from workflow design rather than individual mistakes. This is the "*causal understanding*" element—seeing why things happen.

3. Designing and Refining Processes for Reliability
The ability to create or improve workflows that reduce variation and increase clarity. Learners show this when they streamline handoffs, develop checklists, or redesign rounding structures to improve efficiency and safety. This reflects the *process orientation* described in your slides.

4. Using Data and Metrics to Guide Decisions
The capacity to interpret clinical, operational, or educational data without bias and use it to inform action. This includes reviewing quality metrics, analyzing trends, or evaluating the impact of a change. It embodies the *objectivity* dimension—seeing things as they are, not as one wishes them to be.

5. Anticipating System-Level Consequences of Local Actions
The ability to foresee how a small change in one part of the system affects other parts. Examples include recognizing how adjusting clinic templates affects nursing workload, or how a new teaching practice influences patient flow. This is advanced systems thinking—understanding ripple effects.