A brief summary of holistic wellness literature

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For over two decades I have worked in executive positions in health and social services. Issues always seemed to focus on the ‘negative’ rather the ‘positive’, or an ‘illness’ rather than a ‘health’ approach to living. As an alternative to this approach I have moved to a ‘wellness’ approach to issues which focus on the positives and assets of communities and life. This has involved reviewing the works of others on defining the dimensions of wellness. This has resulted in a changed lifestyle for me as an individual, and the concomitant reduction in the need to pharmaceutical medications.

Les Fosterg
I have had the pleasure of working for numerous years throughout Canada and Sweden in the area of health promotion, more specifically in settings approaches ie healthy schools, workplace health, and community youth development. My current research examines schools and surrounding communities and their influences on supporting children and youth to ‘stay in school’. These settings can dramatically shape the positive experiences and development of our children. The following work on the literature review of wellness and its constructs has personally renewed my commitment to the importance of positive interconnectedness within our environment/society and its influence on overall wellbeing.

Gord Miller

Summary
This article is a summary of current holistic wellness literature, involving online database keyword searches, additional searches for other studies, screening of abstracts, assessing the relevance to the review and integrating the findings. More than 300 journal articles, books and websites were examined or accessed to determine how wellness was defined and to find research and wellness models. A complete report and wellness mapping products can be found at www.geog.uvic.ca/wellness.

Background
In 2007, a critical review of wellness was conducted as a background paper to the development of The British Columbia Atlas of Wellness, to define ‘wellness’. Mapping provides an effective tool to examine geographic inequities in wellness as a support for the health promotion programme of British Columbia, Canada, and to help focus in on those regions which were the ‘best’ in the province on a variety of indicators so that other regions could learn from what could be achieved.

Introduction
Healthcare costs are escalating as people are living longer than ever before. Simultaneously, there is a growing interest and emphasis on wellness within Canadian, as well as other cultures, to examine the factors that make populations well. This article summarises wellness constructs from a holistic perspective and reviews definitions and conceptualisations of holistic wellness within current literature.

Wellness from a holistic perspective
In 2008, the World Health Organization stated that the dominant view of wellness is one that is holistic and includes both an absence of illness and a state of wellbeing. Traditionally wellness has considered only the absence of negative elements (illness and disease) whereas this newer
holistic perspective strives to recognise the presence of positive elements. The most common definitions of wellness create a framework that views individuals within a holistic perspective and consists of many dimensions. Human wellness includes, among other things, mind, body, spirit, and community interactions, and the many dimensions of wellness are all interconnected, whereas the healthcare system still has a tendency to approach them separately.

Conceptualising wellness
The term ‘wellness’ has evolved over the past couple of decades, being initially ascribed to programmes and circumstances aimed at helping alleviate illness or reduce health risks; for example exercise programmes to reduce weight gain. As research has evolved, the psycho-social aspects of health have revealed broader wellness ‘determinants’ or ‘assets’ at play and consequently the term ‘wellbeing’ as related to quality of life and life satisfaction has come to prominence. Yet distinguishing between ‘health’, ‘wellness’, and ‘wellbeing’ is tricky, because to many these terms seem to mean the same thing, or at least are viewed as being very closely related. Health allows an ongoing process of living well, though of course what ‘well’ means could be related to income, relationships, coherence, fitness and adaptability. So though there may be little essential difference between health and wellness, there are nonetheless objective ways of testing for the absence of disease (ie one version of what it means to be ‘healthy’). But no tests can capture the uniquely personal, subjective experience of what ‘wellness’ feels like to an individual. So in their efforts to clarify the definition, theorists have argued that wellness has to be accepted as subjective and that an accurate, unambiguous definition and measurement of the construct is very difficult to conceive of. Therefore ‘wellness’ is an umbrella term under which we can gather the multidimensional biological, psychological and social facets people’s lives. It may even be that when these dimensions align, it produces a sense of ‘harmony and balance’, and that in order to enhance it, it would be necessary to promote wellbeing across all the different dimensions (see Table 1) taking into consideration the socio-ecological factors, values and behaviours they embrace. Wellness in these terms can hardly be represented by a snapshot view but requires instead a ‘whole of life view’ involving ongoing processes of integration of awareness, learning and growth.

The literature suggests that wellbeing comes under the umbrella of wellness. The dimensions of wellbeing reflect the interconnectedness of the person within their environment/society and as such pertain to the mind, body, spirit, emotions, meaning, behaviour, and social relationships. Using a holistic approach, promoting wellbeing essentially serves to improve health and wellness and as such, needs to be considered carefully within any wellness model. For example, this includes the conscious choice involved in taking responsibility for improving the quality of one’s life by adopting changes in various areas of lifestyle, resulting in a high level of wellbeing. The action of being well involves an ability to creatively adapt in all aspects of life resulting in an optimal level of functioning. Working on this literature review and the British Columbia Atlas of Wellness resulted in a re-thinking by the authors of their own lives. Much work in health has tended to focus on the negatives of health, while focusing on wellness has moved us personally to recognizing the positives.

Expanding the dimensions of wellness
With an aging population and the recent downturn in the economy supporting self-care in health among western societies has become a predominant theme in the literature and in government policies related to health. Qualitative research methods are being combined with traditional quantitative research approaches in order to better examine nuances of lifestyle. This involves investigating multidimensional factors affecting the choices people make about wellbeing, as well as the dynamic nature of wellness itself. The number of dimensions that interplay within the concept of wellness and the considerations within each of these dimensions has expanded from our first look at wellness for The Wellness Atlas, to include economic, cultural, and climate factors (see Table 1).

Dimensions of wellness identified in the literature
Physical wellness
This dimension is particularly relevant where cardiovascular fitness, flexibility and strength are concerned. Actions to improve physical wellness include maintaining a healthy exercise regime and diet and monitoring internal and external physical signs of the body’s response to events, including stress. This includes seeking medical care when appropriate and taking action to prevent and avoiding harmful behaviours (eg tobacco and excess alcohol use) and detect illnesses. Physical wellness, however, does not always correlate with one’s sense of

| Table 1 Past (pre-2007) and current (2007–2010) dimensions of wellness |
|------------------------------------|--------------------------------|
| Past review                        | Current review                |
| Physical                           | Physical                      |
| Emotional/psychological            | Emotional/psychological       |
| Social                             | Social                        |
| Intellectual                       | Intellectual                  |
| Spiritual                          | Spiritual                     |
| Occupational                       | Occupational                  |
| Environmental                      | Environmental                 |
| Economic                           | Economic                      |
| Cultural                           | Cultural                      |
| Climate                            | Climate                       |

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wellbeing: a person can have poor health but experience positive wellbeing, while conversely someone who is in objective terms physically healthy can nonetheless experience a poor sense of wellbeing.3

**Emotional/psychological wellness**

Explanations of emotional/psychological wellness primarily focus around attitudes and beliefs about self and life. They include the ability to develop a positive and realistic self-concept and a sense of purpose in life. In this regard of course, work-life often impacts on this sense of identity and self-esteem. A positive self-view and awareness of one’s feelings will in turn shape actions, relationships and autonomy. So too will having a personal developmental focus that includes notions of self-actualisation and a sense that aspects of the self develop as we mature. In addition, a capacity to cope with stress and maintain a positive attitude towards life and a certain optimism about the future seem to have a powerful bearing on emotional/psychological wellness. Conversely, feeling that life is out of control causes stress and impacts on social participation rates.

Happiness is subjective. What makes one person happy may not have the same effect on another. Therefore self-rated scales are really the only way of conducting happiness studies because there is no objective way to measure how people feel. Subjective though it is, and although happiness cannot cure illness, it has been shown in healthy populations, people who claim to be happy live longer.4

**Social wellness**

Social wellness is broad in scope because it includes the interaction of the individual with others, the community, and nature. It includes the interaction (quality and extent) with, and support of, others, the community, and the social and natural environment. Besides the interactions of the individual, society, and nature, social wellness includes the motivation, action, intent, and perception of interactions. The importance of the social determinants when assessing health inequalities has been stressed in a recent report from the World Health Organization. This report stated that ‘being included in the society in which one lives is vital to the material, psychosocial, and political empowerment that underpins social wellbeing and equitable health’.2

**Intellectual/cognitive wellness**

Intellectual/cognitive wellness is the perception of, and motivation for, an individual’s optimal level of stimulating intellectual activity by the continual acquisition, use, sharing, and application of knowledge in a creative and critical fashion. This is for both personal growth and the betterment of society. Realising one’s personal potential involves cognitive processes and comprehension of life’s purpose. Education increases opportunities for income and job security, and gives people a sense of control over life circumstances. Low levels of educational attainment are less likely to lead to high levels of employment security and thus quality of life may be reduced. Functional literacy is also an indicator of health. Those with low levels of literacy are more likely to experience smoking, inactivity, obesity and poor diet. Some studies find a positive relationship between each additional level of education and subjective wellbeing, while others find that middle level education is related to the highest life satisfaction.

However, there is evidence that higher levels of education have a more positive impact in low income countries.4

**Spiritual wellness**

Spiritual wellness is probably one of the most developed and discussed topic in the literature. It is important to note at the outset that spirituality and religion are not synonymous and the two concepts, while overlapping, are entirely distinct from one another. The key aspects of spiritual wellness seem to be purpose and meaning in life; the self in relation to others, the community nature, the universe, and some higher power; shared community and experience; an inner resource that may give an individual a feeling of strength and become a guide to finding significance in life; and the creation of personal values and beliefs.5

**Occupational wellness**

Occupational wellness has been defined as the level of satisfaction and enrichment gained from one’s work, whether paid or unpaid, and the extent one’s occupation allows for the expression of one’s values. Occupational wellness includes the contribution of one’s unique skills, talents and services to the community and the level to which the individual views their work as rewarding and meaningful. Achieving a balance between occupational responsibilities and other commitments is indicative of the level of occupational wellness.5

**Environmental wellness**

Environmental wellness includes the balance between home and work life, as well as the individual’s relationship with nature and community resources, i.e. involvement in a recycling or community clean-up effort. Further, the importance of safety of food and water supply, infectious diseases, violence, ultraviolet radiation, air and water pollution, and second hand tobacco smoke also fall under this dimension. City planning can have an effect on human wellness. For example, green space in cities can have a positive effect on health by increasing opportunities for physical activity and also create feelings of relaxation and wellbeing. In addition, vegetation can improve air quality by removing particulates and pollutants.3 Many modern western urban environments have been referred to as ‘obesogenic’ as they discourage walking and the exercise and social interaction that comes with that activity.
Economic wellness
An analysis of wellness in relation to social capital within approximately 50 countries, examined income, employment, government effectiveness, family structure and social relations in order to assess effects of institutions and policies. Increased income inequality is associated with lower rates of economic growth and poorer health. Individuals attaching high subjective values to financial success have lower values for subjective wellbeing, even when their financial aspirations were met. Higher levels of subjective wellbeing are found not in the richest countries but among those who live where social and political institutions are effective, where mutual trust is high and corruption is low. Studies consistently show a large negative effect of individual unemployment on subjective wellbeing. Models which treat life satisfaction scales as a continuous variable, tend to find that the unemployed have significantly lower scores than the employed even when controlling for psychological variables.

Cultural wellness
Examination of cultural differences in wellness across a number of nations confirms that the cultural environment is an important factor, because there are substantial differences in subjective wellbeing between cultures.

Research has shown that developing countries have lower levels of personal wellbeing.

Also, differences in goals and values between individuals, and between cultures, seem to act as specific predictors of subjective wellbeing. Our wellbeing, while it obviously depends to a degree on numerous life circumstances, is also greatly influenced by cultural factors and individual differences in attitude and temperament. For example, studies of a number of Asian cultures found that feeling in harmony with one’s family or community correlates strongly with subjective wellbeing, whereas in some western countries a person’s sense of independence and autonomy will be a stronger predictor. And norms for feeling positive emotions in any nation relate to the amount of pleasant emotions reported in those countries. Research has shown that developing countries have lower overall levels of personal wellbeing than in many Western and Asian countries. However, the relationship between wealth and wellbeing is far from direct, once people are above the poverty line, being richer does not mean being happier.

Climate wellness
It is hardly surprising that extreme weather (whether or not it is caused by climate change), is detrimental to subjective wellbeing whether directly or at the community level from disruptions to social and economic activities. Not only have environmental determinants been shown to negatively affect mental health, but the implications of climate change is also now causing emotional distress, for instance among Australian children 25% of those surveyed believed the world might end in the next few years. But there are less direct (and rather curious) examples of links between climate change and wellbeing: caring about the ozone layer is negatively associated with subjective wellbeing while caring about species extinction is positively associated with subjective wellbeing. It would appear that people who worry about ozone holes are less happy than people who worry about wildlife.

Summary
Recent wellness and wellbeing literature supports the holistic view of health. The self is indivisible and therefore the separable dimensions of wellness are in reality integrated facets of overall human functioning. Consequently, new measures and models of wellness and wellbeing emphasise that improvements in any one dimension are likely to positively affect the whole person.

The idea of physical wellbeing – the first wellness dimension to be developed – focuses on maintaining a healthy lifestyle and consequent fitness, flexibility and strength through the adoption of a healthy exercise regime and a good diet. Our understanding of psychological/emotional wellbeing has improved greatly, perhaps especially through notions of positive psychology and stress management.

Social wellness is necessarily broad in scope because it includes so many elements of interaction between the individual and others, the community, nature and work. It is clear that strong social networks both among family and friends as well as out in the community or at work, are protective of health and wellbeing. Social wellness will obviously bear some relation to individual characteristics, for instance a person’s communication skills and level of comfort when interacting with others in different settings or situations.

Intellectual/cognitive wellness relates to the acquisition of knowledge and intellectual activity. Acquired knowledge can be shared, used to develop one’s talents, and to fuel personal growth and meaningfulness of society. Good cognitive functioning, in turn influences behaviour (eg using information for changing health-negative habits to positive ones) thereby improving wellness overall.

Spiritual wellness may be found alone or within a community. The continual process of finding meaning and purpose in life, while contemplating and coming to terms with one’s place in a complex and inter-related universe is definitively a spiritual one.

Occupational wellness depends partly on being able to express values and gain personal satisfaction and enrichment from paid or non-paid work. It may depend on one’s attitude toward work and an ability to balance several roles; and the ways in which one can use one’s
skills and abilities to contribute to the community. *Environmental wellness* is a broad dimension that considers the nature of an individual’s interaction with the environment on a local, community and global level. The environment includes home, work, the community, and nature.

*Economic wellness* serves to help assess institutions and public policies and thus make them more accountable for inequalities in populations. Living in countries where there is confidence and trust in the political institutions, as well as high levels of meaningful employment also contribute to economic wellness. *Cultural wellness* has a substantial effect on subjective wellbeing. For example, people living in democratic and individualistic cultures (i.e. ones that emphasise freedom of choice and individuals’ needs) have higher levels of subjective wellbeing than those living in authoritarian and collectivist cultures (i.e. that emphasise duties, others’ needs and vast differences in status hierarchy). It is important that wellbeing measures be sensitive to adjusting for cultural norms. *Climate wellness* is a new area of research that examines the causal links between environmental change and human health and wellbeing. Extreme weather events (including heatwaves, floods, rain and snow storms and droughts) and sea level rise are anticipated to increase as a result of climate change. These ecosystem changes will greatly affect the wellbeing and health of the human and non-human worlds.

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**References**