Editor’s Desk: The Wellness Movement

The National Wellness Institute (NWI) will host its 40th Annual Wellness Conference in June, so this issue of The Art of Health Promotion (TAHP) offers a tribute to NWI by featuring thought leaders responsible for NWI’s extraordinary success. It is fitting for the American Journal of Health Promotion, which hosted its 25th Annual Conference this year, to offer recognition to another veteran leader of the wellness movement. And I was pleased to learn that my employer, StayWell, has the greatest number of speakers and participants of any organization having attended the NWI conference. We all grew up together! Siblings bringing with them cleverness, growing pains, latent madness, hard-earned wisdom, and lots of mutual respect.

Hubert Dunn, an MD and Chief of the National Office of Vital Statistics, published the book High-Level Wellness in 1961, soon after, writers and speakers like Bill Heltot, NWI’s cofounder; Jack Travis; and Don Ardell popularized Dunn’s concepts. I will be profiling Dr. Ardell and this era in a future issue of TAHP. For an in-depth chronology of who influenced whom in wellness, read “Wellness: The History and Development of a Concept” by James Miller. Miller’s article is available as a PDF at http://www.healthpromotionjournal.com/global/show_document.asp?did=aaaaaaaababjusb.

Building on this rich convergence of intellectuals and ideologies, NWI has achieved a unique blend of art and science, and attendees return often for personal renewal, professional skill building, and the chance to bask in an unbound wellness revival. As a statistician, Dunn undoubtedly appreciated the differences between research-based articles and the airing of opinions sans facts. Nevertheless, his writings seem to emanate from someone wanting to plant his mind in between the two and see what crops up. Maybe it’s their roots in the heartland of Stevens Point, Wisconsin, but that’s also the open harvest I’ve felt NWI loves to cultivate.

A fundamental difference between science journals and other media relates to the role of evidence as it plays steward to the advancement of knowledge. In newspapers or blogs, opinions, ideology, and journalistic fact finding commingle and readers navigate traffic accordingly. That the editor in chief of this journal, Dr. Michael O’Donnell, named his conference The Art and Science of Health Promotion reflects a discerning belief that a fidelity to science can coexist in a patch of ideas that also arise from social, spiritual, and philosophical underpinnings.

In this issue of TAHP, conversations between eight of NWI’s VIPs show how a multidimensional approach to wellness has long been a tenet. NWI conference participants pace headlong through inspiring speeches, community volunteerism, research reviews, sunrise hatha yoga, and expert panels. Like conference attendees, the leaders interviewed in this issue of TAHP traverse heartily between art and science, and no one is directing traffic because no one seems lost.

The NWI conference evokes the excitement of discovery, humility from things we can’t explain, and the expansiveness that comes from asking ethereal questions. A benefit of longevity is witnessing things come back around. In my closing commentary, I describe the growing semantics in our field about moving from wellness to “well-being.” I interview wellness leaders and ask whether we are going “back to the future.” At NWI 40 years of hosting a discussion about holistic health has edited thousands and left us in wonder that there is so much more to learn, and sometimes when history repeats itself, it is for good reason.

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to address the needs of a multicultural population, membership, and related constituencies. One of the stated missions of the MCC is to support the NWI in the achievement of its mission and foster inclusiveness to advance multicultural competency within comprehensive wellness best practices and service delivery. This cultural competency enterprise will be one of the major initiatives that will support the NWI's adherence to its stated mission and contribute a great deal to the continued growth of the organization and to the wellness movement.

THE MULTI-DIMENSIONS OF WELLNESS: THE VITAL ROLE OF TERMS AND MEANINGS

A Conversation Between R. Anne Abbott, PhD and William B. Baun, EPD, FAWHP, CWP

Bill Baun: What does wellness mean to you and how do you see it playing out in your work?

Anne Abbott: People still have many different interpretations of the term wellness. Wellness is a transformative process that reflects our choices through life challenges. We are always in motion, transforming energy, constantly changing as we try to stay in a balanced state of homeostasis. Wellness requires experiential learning, which is more than "earning" or "knowledge." One must experience the change, i.e., live through the challenge, vs. just understand theoretically. It is in action in our behaviors that allows our heads, hearts, and hands to align with our human value.

Wellness or well-being is multidimensional. Wellness requires a disciplined practice to become holistic through moving toward balance in all dimensions of wellness.

Bill Baun: Anne, I hear you, but in my world we have stopped using the term balance and now talk about effectiveness. Feeling I have to reach a state of balance can be very stressful, but working to be effective at the different dimensions of my life can be challenging and uplifting.

From a National Wellness Institute (NWI) standpoint, the challenges around worksite wellness center on the practitioner. NWI has always been about the practitioner. As an industry and as an organization, we must strive to keep the practitioner updated. Once practitioners enter the field, they are often bombarded with the day-to-day, and they lose the connection to the literature and best practices. If we as an organization are able to provide a learning community that keeps these practitioners engaged and updated, then we are doing our job and fulfilling our mission. We need to remind them of their skills and to use them, beyond just the doing of the job.

Do we need a common language in worksite wellness?

Anne: We must have a common language. Terminology has been and remains one of the biggest problems in the implementation of wellness and health promotion programs. We need to have a clear understanding of what wellness and well-being are vs. health education, disease management, safety and risk management, public health, population health, and health promotion. We need clear definitions to be operational in implementing effective wellness programs, including the Affordable Care Act.

Bill: Anne, you are so right. Our stakeholders have a hard time understanding us and thus believing in us because we have not done a good job of standardizing our core terms. Return on investment (ROI), value of investment, and cost-effectiveness are also some good examples.

Are wellness ideas able to integrate with health promotion and benefits programs?

Anne: Wellness is about being well and has evolved into programming that creates personal well-being and a work culture that supports the health and well-being of individuals. Unfortunately, the health promotion and benefits form of wellness delivery systems splits efforts into bottom-line analysis, marketing, competition, capitalism, and behavioral economics. This environment, along with political ideology, has not helped us to be more collaborative with the other professional disciplines.

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Editor's note: See this Journal's blog page to learn more from Deborah Wilcox about a Coordinating Center of Excellence to assist with wellness and recovery services in community mental health and from John Travir on the Alliance for Transforming the Lives of Children.

R. Anne Abbott, PhD, FAACVPR, CWPH
Anne Abbott is a Professor Emeritus in Health Promotion and Wellness at the University of Wisconsin-Stevens Point. She was the recipient of a National Wellness Institute (NWI) Leadership Award in 2009, and currently serves on the NWI Board of Directors and the Board of Experts for publication of The Exercise Standards and Best Practice Reporter. See: http://www.uwsp.edu/PHID/Pages/facultyStaff/aabbott.html.aspx

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Bill Baun: What does wellness mean to you and how do you see it playing out in your work?

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Academic training programs have not helped to clear the confusion in terminology. In early '80s health promotion in co-
The multidimensional model of wellness: spiritual, physical, emotional, occupational, intellectual, social, and environmental.”

porate America actually moved away from the term wellness and the scientific community moved away from the term holistic.

Thankfully, the mid-'80s also brought about the University of Wisconsin–Stevens Point's (UWSP's) health and wellness degree program that moved away from the focus on physical well-being to a multidimensional model of wellness (spiritual, physical, emotional, occupational, intellectual, social, and environmental). I, with Drs. John Munson and Jane Jones, created this first health and wellness degree program (1986–89) around this multidimensional model. The idea was to address the complexity of the whole person. The program has served as the model for numerous other programs across the United States and abroad. Currently, NWI also follows this model, working collaboratively across wellness and corporate disciplines to cross-train wellness, multidisciplined professionals.

Bill: We are learning how to be better collaborators. Collaboration in the industry will require all of our leaders working together over time to create consistency of our wellness voice. Wellness professionals bring years of experience of not just worksite management, but knowledge in all of the wellness dimensions and human values. This is a strength and what NWI brings to the table, but it requires collaboration to bring these elements together for sustainable change.

What are the strengths of the multidimensional model in a worksite environment?

Anne: On the academic side, we found the seven-dimensional wellness model allowed us fewer constraints on designing a competency-based curriculum for entry-level professionals to meet varied employers' needs. The design also created a promotional and communication base that served as the foundation for the employee wellness programs on campus at UWSP. Employee wellness became our living laboratory for student learning in the health and wellness degree program.

In retrospect, we have found that being well is the common value that brings people together to be collaborative. Having a common value is the basis of collaboration, connection, community, and sustainability. Wellness has become transdisciplinary, in that it integrates and has brought multidisciplinary health professionals together with the consumer, business, and health benefits. Everyone wants to be well, including multicultural and multigenerational populations.

Bill: Anne, what's exciting now at NWI is that our board is focused on building a stronger multicultural and multigenerational membership. The global worksite wellness challenges we face will take wellness solutions developed by wellness professionals representing the diversity in our communities. NWI recognizes this need and is working toward a goal of more diversity! In fact, this year we will hold a Multicultural Academy at our national conference.

So where did NWI fit in all of this? What role does NWI have to play moving forward?

Anne: The early days of NWI conferences brought early leaders from many disciplines together from around the United States and the world and led to discussions that developed broader wellness concepts with practical applications.

Through NWI's convergence of many areas of wellness, from humanistic to clinical practices, holistic wellness was debated. Research concepts eventually emerged, and collaborative teaching/facilitation skills were developed and instituted. These events eventually defined the functional aspects of becoming well and the multidimensional aspects of wellness programs. By 1993, consumers caught on and demanded change in the medical system.

Bill: Anne, I love to hear the history. My first start in worksite wellness was at Tenneco where we had a multifaceted team (occupational health, wellness, employee assistance program, and safety) all working and reporting together. When I came to NWI there were few worksites represented, but it was an open culture that accepted individuals for who they were and what they brought to the group. I kept coming back not only because of my worksite friends at NWI, but because of the community that cared about wellness and me. I think NWI will always be the melting pot moving forward where people with different health and wellness backgrounds can share ideas.

How did NWI help to bring the concept of wellness into the mainstream?

Anne: Having been developed through the UWSP Student Life Program and the YMCA camp influence, NWI became the "fun and feel-good group." As a young American College of Sports Medicine clinical exercise physiologist, I was skeptical. However, when I realized from my early days in hospitals that white coats could not answer many of my questions about why people change, coupled with my own transformational process, I came to a better understanding of what wellness was. I started seeking different models to integrate into cardiac rehabilitation that included alternative options that seemed to be working in the public and consumer markets. My patients became my teachers. I eventually hired UWSP's and NWI's Dr. Bill Hettler as a keynote conference speaker, attended a workshop with Elaine Sullivan and John Travis, and finally attended NWI's National Wellness Conference. As a result, I left a large hospital and urban life to move to rural Wisconsin and join the "fun and feel-good group." Subsequently, I became the new Director of Health Promotion and Wellness at UWSP and was charged with helping to develop a new profession.

Bill: In my early years at NWI it was very exciting to experience the personal development and the community that the conference offered. But as I grew, I also started to question why we did what we were doing on the worksite side. Why didn’t we use a more community or public health approach? This started my lifelong learning around developing cultures of wellness.

Later this passion for developing cultures of wellness eventually resulted in my collaboration on NWI's worksite certifications. We teach that "we don’t do wellness alone." Successful
wellness programs include bringing families, teams, and organizations together as supportive cultures. A culture of wellness is one that creates a community that shares a passion to be well, and the need to pass it on. It is self-sustaining. I truly believe that NWI’s reframing of its vision and mission has the opportunity to impact the whole world. 

Bringing wellness into the mainstream was about gathering the collective voices that were interested in topics such as worksite wellness. I started the Worksite Academy at the National Wellness Conference with George Pfeiffer because people were asking for more opportunities to collaborate. “When can we talk next?” We realized there was a community that wanted to be together more.

What role do data now play in our programs?

Bill: I keep wondering if data analytics is a good decision maker for humans or for health care. At times I feel like we have taken the “caring” dimension out of our programs. That’s what I have always liked about the NWI wellness model or the seven-dimension model you have used; they keep us honestly caring for one another. Data are very important in our programs, but at times programmers rely on the data more than on the intuitive data gained in the relationships or in really listening to the people we serve.

Anne: I think the reemergence of “human value” is the most important ingredient that makes ROI work. It is more about human values, not dollar values. Data can add objective information to help practitioners make impartial decisions to improve health and increase productivity. Also, data have given us some good evidence that affirms holistic wellness.

How has worksite changed? How we approach employees and people?

Bill: There is a transition that we are still in right now. For years we separated from everyone else because we (the wellness people) thought we were different and we thought that difference was important. We were the people who cared. We were on the outside. Then we worked hard to get on the inside through ROI and worksite wellness. Now we are in the third phase: total value. We are on the inside with business, but bringing care for the people. It is both about money and about how people value themselves at work. People who aren’t well have trouble having any value at work. It isn’t just about the money, it is how employees value themselves and how worksites values employees. We will still talk about absenteeism, presenteeism, and ROI, but the value piece is going to be huge, and that will sustain us. It puts in one place what is very important for business: Engagement. NWI is a really big part of that. I am excited about the change.

Anne: In the organizational and benefits area this has become known as value-based health benefit design. I am most excited about cross training this group to include the total concept of wellness as we have come to know it in NWI.

Is Wellness Going Back to the Future?

Paul E. Terry, PhD

When beliefs persist within a group for a long time, we call this “tradition.” In this respect, traditional wellness means the colorful interaction of mental, emotional, physical, spiritual, and, well, you would be hard pressed to name a dimension that has not found its way onto someone’s wellness wheel. I use the word “colorful” decidedly because if you Google the term “dimensions of wellness” using the images tab you will find hundreds of vivid palettes in homage to multidimensional wellness. By tradition, wellness has never been primarily about physical health. Nevertheless, the past year marks a growing interest, among wellness practitioners and employer sponsors of wellness programs alike, to “move from wellness to well-being” with a connotation that their efforts have been too focused on the physical. Though the term “well-being” has eluded anything resembling a consensus definition, anytime someone tries to define well-being, it sounds retro. It’s as if they drove their 1981 DeLorean back to 1959 to visit Halbert Dunn, the physician who coined the term wellness.

In this issue of The Art of Health Promotion (TAHP) we featured the remarkable 40-year journey of the National Wellness Institute (NWI) by hosting conversations between eight wellness leaders. To a person, these luminaries hold a holistic view of wellness, but they also allude to concerns that wellness has migrated to an emphasis on physical health and a discounting of the role of culture. I asked LuAnn Heinen, Vice President at the National Business Group on Health (NBGH), about this semantic shift. “I think wellness as it has long been defined was reframed and narrowed by the Affordable Care Act (ACA).” Heinen went on to explain how the ACA wellness provisions ratified incentives for improving health risks without addressing additional dimensions of wellness and the programs and policies that support them. Heinen stresses that improving employees’ physical health will remain a key strategy but that employee engagement and culture change are also of keen interest to employers.

In an article above, Brandon Hardie, Executive Director of NWI, interviewed NWI cofounder Dr. Bill Hettler. Reflecting