An Indivisible Wellness

Sarah Easdon & Hayley Pankratz
MidAmerica Nazarene University Honors Program & Nursing Department, Olathe, KS

Research Questions

1. What is wellness?
2. How do geriatric patients in a retirement facility view their personal wellness?
3. What are the most important part of wellness in the lives of these individuals?

Background

Researchers have identified a complex mixture of what constitutes wellness. Meyers (2005) developed the Indivisible Self Model as a foundation for “mental health and counseling practitioners” (p. 277). There appears to be a hole in literature revealing use of wellness models to shape standard nursing care and there is certainly a gap in current practice of nurses regularly assessing all areas of wellness for geriatric patients. By exploring the use of The Indivisible Self Model to evaluate wellness of three geriatric participants, we hope to gain an understanding of how geriatric patients respond to questions regarding their wellness, which with future research may be used to better center their care on their top wellness needs.

A literature review of current research-based evidence gathered from the databases EBSCOhost and ProQuest provided the foundation for these case studies. From a local retirement facility with a wellness program, three participants were randomly selected from residents who volunteered to share about their personal wellness experience. Participants were asked general questions and given broad prompts, including “What does wellness mean to you?” and “Tell me about your current wellness experience.” Participant interviews were analyzed and common themes identified. Themes for each participant were categorized according to “The Invisible Self Model,” to gain a holistic view on each participant’s perception of their personal wellness.

Meyers and Sweeney (2008) report wellness to have an emphasis on the whole rather than the parts, but recognize the interaction between the parts and how they affect the whole. This is placed in a broader context as how geriatric patients respond to questions regarding their wellness, which with future research may be used to better center their care on their top wellness needs.

Methods

Demographics

Case 1: Participant A

- 45 years old
- Male
- Participation in facility wellness program

Areas of wellness most emphasized by participant during interview

- Physical—staying active, doing exercise, going outside, maintaining a healthy lifestyle
- Social—having good relationships, being involved in community
- Emotional—being happy, being able to express emotions

What does wellness mean to you?

- “Having a good life”
- “Keeping healthy, living a good life”

Case 2: Participant B

- 85 years old
- Male
- Participation in facility wellness program

Areas of wellness most emphasized by participant during interview

- Physical—social, physical, spiritual, emotional, psychological
- Social—having good relationships, being involved in community
- Emotional—being happy, being able to express emotions

What does wellness mean to you?

- “Being able to live my life without a lot of pain”
- “Protecting mental capacity”

Case 3: Participant C

- 70 years old
- Male
- Participation in facility wellness program

Areas of wellness most emphasized by participant during interview

- Physical—staying active, doing exercise, going outside, maintaining a healthy lifestyle
- Social—having good relationships, being involved in community
- Emotional—being happy, being able to express emotions

What does wellness mean to you?

- “Living simply”
- “Being able to think clearly”

Conclusions

Researchers can use these data to develop a better understanding of wellness and how it is perceived by geriatric patients. Future research could explore how using this wellness assessment model could be incorporated into standard nursing assessment for geriatric patients. It is plausible that by better understanding the deepest value to patients, nurses could provide more accurate patient-centered care to meet both physical and non-physical needs alike.

References