

INTRODUCTION: THE WELLNESS HEALTHCARE CONCEPT

Wellness is a holistic approach to counselling and healthcare that is globally very popular. A quick Google search will reveal the popularity of wellness coaches to work in various settings such as hospitals, clinics, schools, wellness centres and private practices. The National Wellness Institute promotes Six Dimensions of wellness: emotional, occupational, physical, social, intellectual, and spiritual. Addressing all six dimensions of wellness in our lives builds a holistic sense of wellness and fulfilment. This is in line with the definition of health, as defined by the World Health Organisation (WHO), as “a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity.”¹

This requires interdisciplinary systems training in the following way:

Emotional, and Intellectual, – based on counselling and psychology

Occupational, – based on management

Physical, – based on natural medicine that includes lifestyle counselling and herbalism

Social, – relationship counselling and

Spiritual.- involving meaning and purpose and connectivity.

Description

The occupational dimension recognises personal satisfaction and enrichment in one’s life through work. At the centre of occupational wellness is the premise that occupational development is related to one’s attitude about one’s work. Travelling a path toward your occupational wellness, you’ll contribute your unique gifts, skills, and talents to work that is both personally meaningful and rewarding.

The physical dimension recognises the need for regular physical activity. Physical development encourages learning about diet and nutrition while discouraging the use of tobacco, drugs, and excessive alcohol consumption. Optimal wellness is met through the combination of good exercise and eating habits.

The social dimension encourages contributing to one’s environment and community. It emphasises the interdependence between others and nature

The intellectual dimension recognises one's creative, stimulating mental activities. A well person expands his or her knowledge and skills while discovering the potential for sharing his or her gifts with others

The spiritual dimension recognises our search for meaning and purpose in human existence. It includes the development of a deep appreciation for the depth and expanse of life and natural forces that exist in the universe.

The emotional dimension recognises awareness and acceptance of one's feelings. Emotional wellness includes the degree to which one feels positive and enthusiastic about one's self and life. It includes the capacity to manage one's feelings and related behaviours including the realistic assessment of one's limitations, development of autonomy, and ability to cope effectively with stress.

Conclusion

The conventional biomedical model does not make provision for such a comprehensive approach, which is a pity because the human person is an integrated whole in which all aspects of existence are entangled and mutually influence one another. Hence, our contention is that real healing requires a total approach. Important to note that it does not interfere nor repudiate biomedical science as it is paradigmatically different and serves as an adjunct support to help and train people practice self-care. Wellness is a professional occupation that requires academic training, but it is a minimalist approach that complements modern medicine as a scientific modality that incorporates the natural healing system in a holistic health-promoting way. As such, it is not a disease-centred approach but a health-promoting, person-centred approach. We believe that a wellness programme can contribute to decreased need for drugs of surgery, and foster self-care by bringing awareness to people of high level wellness and hope for healing in the context of the tremendous escalation of chronic lifestyle diseases in modern society.

1 World Health Organisation. Constitution of the World Health Organisation as adopted by the International Health Conference, New York, 19–22 June 1946; signed on 22 July 1946 by the representatives of 61 States (Official Records of the World Health Organisation, no. 2, p. 100) and entered into force on 7 April 1948. In Grad, Frank P. (2002). "The Preamble of the Constitution of the World Health Organisation". Bulletin of the World Health Organisation. 80 (12): 982.