

A PHENOMENOLOGICAL EXAMINATION OF WELL-BEING FROM A DIMENSIONAL
PERSPECTIVE AS EXPERIENCED BY MEDICAL ASSISTING STUDENTS AT A
COMMUNITY COLLEGE

A DISSERTATION IN PARTIAL FULFILLMENT
FOR THE DEGREE
DOCTOR OF EDUCATION
IN ADULT, HIGHER, AND COMMUNITY EDUCATION

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MUNCIE, INDIANA

JULY 2014

DEDICATION

I would like to dedicate this dissertation to God who led me to this place in my life. In addition, I dedicate this dissertation to my husband, Tom who has grown in this process along with me, and has been a constant source of encouragement. Also, this dedication is extended to our four amazing children Cole, Cale, Kasia, and Kalyn.

Without your support throughout this extensive process, I would have never been able to make it to the finish line. While my greatest honor in this life is the blessing of motherhood, the opportunity to reach this educational goal with each of you by my side has enriched the experience greatly. I hope that you will always stretch your imaginations, ambitions, gifts, and goals further than you believe possible, and that you will embrace well-being in all that you do.

ACKNOWLEDGEMENTS

I would like to thank my Chair, Dr. Roy Weaver for his leadership, support, and patience throughout this process. Dr. Weaver has been extremely encouraging in all aspects of this experience and has poured generous amounts of time into this endeavor. In addition, I want to thank Dr. Jane Ellery who spent countless hours guiding me and mentoring me through the wellness components of this dissertation. I would also like to extend my gratitude to the remainder of my committee members: Dr. Thalia Mulvihill, Dr. Roger Wessel, and Dr. Denise Seabert. I greatly appreciate the time, energy, and patience that each of you has given to me. I believe that the time I spent with each of you individually, and as a committee, has shaped me into a more effective educator and writer. Thank you for demonstrating such strong professional integrity.

I want to thank my colleagues at Ball State with whom I have had the privilege of learning throughout this journey. Each opportunity to interact with these incredible individuals proved to be a positive, enlightening experience. I also appreciate the expertise of the administrative staff of the Adult, Higher, and Community Education program and the resource staff at Bracken Library. The staff support was extremely vital in the various steps of this process, and I appreciate all that these individuals do to help students.

I also greatly appreciate the extensive support and encouragement that I have received from my many friends and colleagues at work. Finally, I want to say thank you to the students at this community college. I have the utmost respect and admiration for the many students with whom I have had the pleasure of meeting. Thank you for inspiring me to reach higher.

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CHAPTER 1: INTRODUCTION

An Introduction to Wellness

The first use of the word “wellness” is thought to have come from Archibald Johnston, the Lord of Wariston, who used it in a diary entry in 1654. The entry read, “I . . . blessed God . . . for my daughter’s wealnesse” (Miller, 2005). Johnston was expressing gratitude for the fact that his daughter was no longer ill. The term wellness was commonly used as the antonym of illness until the middle of the 20th century. Another historical example of wellness, from the perspective of lifestyle choice, comes from biologist Rene Dubos who shared the myth of Hygeia to help define wellness. Hygeia was the goddess of well-being and symbolized the idea that people could remain well if they lived a sane life in a pleasant environment. The Greek term Hygeia stands for “living well” or a “well way of living” and suggests that health is connected with the way we live and implies that health is largely an inner cause involving interactions of the mind, body, and spirit (Buchanan, 2000, p. 104). As medical research intersected with the mind, body, spirit, and environmental concerns, alterations in the way in which wellness and well-being were viewed began.

According to Dubos (1968), two major events occurred in the late 1800s and early 1900s that led to dramatic alterations in how people view health and well-being. First, the realization of how sanitary conditions and proper nutrition lead to improved health, and secondly, the identification of bacteria as a pathological cause of illness was discovered. Health improved as a result of both of these discoveries; however, treatment of disease became an emphasis instead of the interaction with the “whole” person with relation to his or her overall well-being.

As the overall objective to health care treatment began to change during this era of discovery, the definition of wellness was reconsidered as well. While a concrete definition is

difficult to ascertain, there have been several attempts made. Most of the attempts that have been made to define wellness have stemmed from the World Health Organization's (WHO) (1967) definition of health. WHO described health as being more than the absence of illness, and as maintaining a state of physical, mental, and social well-being (Adams, Bezner, Drabbs, Zambarano, & Steinhardt, 2000; Dunn, 1977). Prior to this definition in 1948, WHO defined health as "a state of complete physical, mental, and social well-being and not merely the absence of disease and infirmity" (Larson, 1999, p. 123). Dunn (1977) explained the idea that wellness is not just experiencing a lack of disease and defined high-level wellness as an integrated method of functioning, which is oriented toward maximizing the potential for which the individual is capable. He further explained that "it requires that the individual maintain a continuum of balance and purposeful direction within the environment where he is functioning and that wellness is a direction in progress toward an ever-higher potential of functioning" (p. 4).

As the context for which the word wellness is being used tends to determine how the word is defined, the evolution of the idea has fluctuated (Miller, 2005). For example, in the era of the 1950s, the term wellness was used in the United States to help with health promotion through a healthy, active lifestyle. Throughout the 1970s the wellness movement experienced growth with the use of the term wellness and was used in connection with not only lifestyle, but also medical visits known as wellness checks. The meaning of the word wellness has spread through a large network of individuals using the concept in various ways. As the wellness concept flourished, researchers in the field began to work toward more precise utilization of this idea of helping individuals establish healthy lifestyle goals, identify potential barriers to achieving these goals, and promote the actions required to make the goals a reality.

While there have been many proposed definitions of wellness, there is little consensus on one single definition of the construct. This situation remains the case where wellness models are concerned since each model contains various dimensions of wellness, as well as a degree of subjectivity in which the dimensions were built (Kelly, 2000). In addition, the perception of what wellness is, and even what wellness is not, leads to ambiguity in establishing a definition (Sarason, 2000). There does seem to be some level of agreement, however, about the nature of wellness. For example, most researchers tend to agree that wellness is multidimensional and synergistic in construct (Adams, Bezner, & Steinhardt, 1997; Ardell, 1977; Dunn, 1977; Hettler, 1980). In addition, it is generally agreed that wellness is a continuous process (Clark, 1996; Dunn, 1977; Lafferty, 1979; Lorion, 2000; Sarason, 2000; Sechrist, 1979; Teague, 1987).

One of the more recent definitions of wellness is from Anspaugh, Hamrickc, & Rosato, (2011), which states:

Wellness is an active process through which people become aware of, and make choices toward, a more successful existence. Wellness is a process rather than a goal. It implies a choice, a way of life. It is positive and embraces people's strengths. It promotes feelings of self-worth. It is holistic and encompasses the body, mind, and spirit. It symbolizes acceptance of you. It suggests that what you believe, feel, and do have an influence on your health. It directs people to achieve their full potential. However, it does not imply that we make the best choices in every situation. (p. 2)

Problem Statement

Community college students are often described as having unique, non-traditional educational and social backgrounds (Pascarella & Terenzini, 1998; Rendon, 2006; United States Department of Education, 2008), and they tend to face additional stressors more often than the

traditional college student. Among these stressors are financial, relational, social, educational, and occupational-related concerns (United States Department of Education, 2008). The community college student who has chosen to major in medical assisting enters into yet another potentially stressful environment.

Currently, the demand for medical assistants is growing at a rate of 31% which is considered a growth rate that is much faster than average (United States Bureau of Labor Statistics, 2012-2013). Therefore, a competitive, fast-paced curriculum of study is required. Program prerequisites, didactic and clinical competency expectations, and the progressively developing changes within the healthcare field can bring additional stress factors for the medical assisting student to consider.

Given the increasing numbers of students entering this stressful field, Rath and Harter (2010) emphasized the need for leaders to focus on individual well-being. The authors recognized that when leaders embrace opportunities to improve the well-being of others, they can actually create a more engaging environment, strengthen relationships, and improve organizational gains. However, when leaders choose to ignore the well-being of people, the confidence of those who follow them is diminished and growth within the organization is limited. People recognize whether or not meaning in their daily activities is present which impacts their health and well-being. For this reason, Fave (2007) agreed that encouraging leaders to use their natural talents as a way of enhancing well-being should be taken more seriously in the field of education. Community college students, as well as community college administrators, who embrace the notion of student well-being, can potentially increase the rate of success not only for medical assisting students attending a community college, but also for all community college students.

Anspaugh et al. (2011) suggested that the benefits of living a wellness-oriented lifestyle are important to full-time students who work each week, help with family responsibilities, and are attempting to maintain academic requirements. Potential benefits for students who choose to follow a wellness-centered lifestyle include:

- Increases energy level and productivity at work and school;
- Decreases absenteeism from school and work;
- Decreases recovery time after illness or injury;
- Supplies the body with proper nutrients;
- Improves awareness of personal needs and the way to meet them;
- Expands and develops intellectual abilities;
- Increases the ability to communicate emotions to others and to act assertively rather than aggressively or passively;
- Promotes the attitude that life's difficulties are challenges and opportunities rather than overwhelming threats;
- Acts from an internal locus of control;
- Increases ability to cope with stress and resist depression;
- Improves the cardio respiratory system;
- Increases muscle tone, strength, flexibility, and endurance;
- Improves physical appearance;
- Helps prevent or delay the premature onset of some forms of chronic disease;
- Regulates and improves overall body function;
- Promotes self-confidence;
- Delays the aging process;

- Promotes social awareness and the ability to reach out to, understand, and care about others;
- Protects against cognitive decline in older people; and
- Reduces symptoms of depression and improves mood. (Anspaugh et al., 2013 p. 2)

The benefits of holistic well-being for students with nursing-related majors, as well as other health-related majors, are also worth noting. Nursing professionals are expected to “take care of their patients’ physical, psychological, socio-cultural, and spiritual well-being” (Van Lingen, Douman, and Wannenburg, 2011, p. 396). Nursing-related professionals are also encouraged to act as role models to their patients and should consider their own well-being. These authors added that an ideal opportunity in which to provide training for holistic development of nursing science students is during the professional training period. Anderson (2007) agreed with this notion of teaching students about holistic approaches when she claimed students need to begin to embrace this idea during their training period to incorporate characteristics of holistic care into their philosophy of care and daily practice.

This study was completed in an effort to expand our understanding of the context that exists between community college medical assisting students and aspects of their well-being. Current research tends to focus mostly on the more traditional four-year college student well-being, or purely academic factors as predictors of student success. The problem being addressed in this phenomenological study was to examine the essence of life experiences related to dimensions of well-being experienced by medical assisting students attending a community college and to help fill this gap in the literature.

Statement of Purpose and Research Question

The purpose of this study was to examine the well-being experiences of community college medical assisting students from a dimensional perspective. For this study the following research question was explored: How is well-being experienced by some medical assisting students attending a community college from a dimensional perspective?

Significance of Study

Goal 2025, a report from the Lumina Foundation published in 2013, stated that by the year 2025 all American adults will have earned a postsecondary degree or credential. The percentage of Americans in 2011 with a two or four year degree was 38.7%, which reflects the loftiness of this goal (Lumina Foundation, 2013). Another area impacted by this goal is the long-standing reality that educational success is uneven in the United States. For example, the Lumina Foundation report was clear to point out the fact that low-income, first generation students, individuals of racial and ethnic minority groups, and immigrants have traditionally been underrepresented among college students and graduates. In addition, the report mentioned that college graduates tend to have better health, are associated less often with crime, are often more globally diverse, and typically more likely to participate in civic endeavors.

This study is significant in that it is an example of one approach to consider in achieving the goal set forth by the Lumina Foundation. Goals of well-being for community college medical assisting students could impact the overall aim of program completion and graduation. Anspaugh et al. (2011) explained that it is through this concept of optimal wellness that people are more likely to achieve their full potential. The goals of *Healthy People 2020* (United States Department of Health and Human Services, (2010) also support this idea of optimal wellness and

have set forth a vision for society in which all people will live long, healthy lives. The overarching goals for this vision include an improved quality of life across all life stages.

This proposed study is also significant as the results may provide valuable information about how to increase the success of medical assisting students. The number of programs available is limited and highly selective while the demand for graduates is increasing. For example, an increase of job openings for medical assistants of 31% from 2010 to 2020 has been projected. Medical assisting is rated as one of the fastest-growing occupations in the country (United States Bureau of Labor Statistics, 2012-2013).

Finally, this study is significant because it would make an important contribution to the literature. While there are several peer reviewed journal articles and scholarly books focusing on four-year college students and aspects of dimensional well-being, there are fewer sources available in this area that specifically target community college students. Additionally, there are no studies available concerning community college medical assisting students and well-being. The fact that so few studies of this nature have been conducted focusing on the two latter groups is a compelling reason that this research is significant.

Subjectivity Statement

Overview

Qualitative researchers should position themselves as they think through the process of reflexivity (Creswell, 2013). Reflexivity is a way in which the writer reveals biases, values, and other experiences. Creswell adds that reflexivity has two parts. First, the researcher discusses any experiences of the phenomenon being explored having to do with family dynamics, school, work, or other personal aspects such as these within the researcher's life. Secondly, past experiences that have shaped the researcher's interpretation of the phenomenon under study are discussed. This second aspect of the process of reflexivity is emphasized as being the core of

reflexivity as this explanation of the researcher's experiences can potentially contribute to shaping the findings, conclusions, and interpretations of the study.

Van Manen (1990) shared that in providing descriptions of lived experiences related to the phenomenon being studied that these very experiences could possibly be the experiences of others. In conducting a reflective statement of subjectivity, Van Manen explained that the researcher should attempt to describe experiences as much as possible in experiential terms and focus on specific situations or events. In addition, Van Manen encouraged Merleau-Ponty's (1962) recommendation of giving direct descriptions of experiences as they are, without offering casual explanations or interpretive generalizations. Janesick (2011) agreed that subjectivity is important in order to understand where an author is situated in the research. She added that subjectivity should be "acknowledged and understood" (p. 147).

My Statement

Although I was unaware of the concept as a child, personal well-being has made an evolutionary impact on my life for as long as I can remember. Therefore, it is important that I share my own history and lived experiences related to this particular phenomenon.

As a child growing up in a small, rural community comprised mostly of farmers and factory workers, a strong work ethic was enforced. I was constantly surrounded by people who worked hard, made a modest income, maintained active lifestyles, grew and procured most of the food that was consumed, socialized minimally, encouraged education somewhat, and promoted Christianity. The idea of varying perspectives or radical differences of opinion was not well tolerated by most people in the community.

The clearest memories I have of family dynamics that impacted my personal well-being were primarily aspects of eating, appearance, work, and relational issues. Food was a constant

concern as gardening was a major, daily emphasis. Choices concerning eating and physical appearance were also emphasized. In addition, how hard an individual worked was vitally important. Finally, relational tension existed most of the time.

I entered college at age 18 as a first generation, non-traditional student working to pay for my education. I was amazed, to say the least, with the new world in which I was discovering. There were so many exciting options, different varieties of people and opinions, so much to learn, and so many mistakes to make. It was also during this time frame of my undergraduate years in college in which I learned about personal choices, different perspectives, and that other cultures were not dangerous, but instead very interesting. I also remember learning about Maslow's Hierarchy of Needs (Maslow, 1943) where I first began to make a distinction between living by meeting basic physiological and safety needs, and living with the ambition of trying to reach higher toward unique relationships, higher self-esteem, and self-actualization. This was the first exposure I can remember that made me think about freedom toward achieving a more rewarding, effective, and joyful being.

After graduating from college, I began to work in a variety of health-related settings trying to apply all of the tools I had been taught to use in the field of nutrition and health. However, I soon learned as I entered into a graduate program that many of the recommendations that I was making, and even national guidelines that I followed, did not work optimally for all individuals. A reassessment of my own philosophical position of well-being was once again necessary. It was at this point when I realized that even with the best of intentions; I was limiting my personal well-being, and quite possibly the individuals who I was trying to help.

Before I fully embraced the idea of well-being as involving much more than just physical aspects, my experience of well-being was a lot like a tightly-tied knot. The folds of the knot

represented each component of well-being. The knot was tied so tightly that there was always tension and it seemed almost impossible to maintain the tightness of the knot. However, once I relaxed my expectations by discovering new ways of meeting the dimensional aspects of well-being, the knot stayed together but the components became much clearer and obtainable.

While I believe strongly that the ability to balance personal well-being is likely to change at various times throughout the lifespan, my past experiences have helped me to shape my present interpretation of well-being. My interpretation of personal well-being now reflects the idea of individuality and life circumstances. Well-being is not going to be the same for each and every person. For me personally, well-being no longer involves only the physical aspects. The essence of my personal well-being now involves making choices about how I choose to live each day given the circumstances of that day, while attempting to balance the various dimensions of wellness.

My background, experience, and passion for health, wellness, and students have sparked my decision to pursue this research study. The opportunity to explore the essence of dimensional well-being experiences of first-generation, non-traditional students in the health-care field may create learning opportunities for the participants, as well as enhance our understanding of how these individuals experience the phenomenon of personal well-being.

Definition of Terms

Dimensions of Well-being/Dimensional Perspective/Wellness – A variety of wellness-related paradigms which are based on self-awareness and responsibility (Murray & Miller, 2001).

Medical assisting students – Students who are seeking a certificate or associates degree that will enable them to practice as part of the allied health aspect of healthcare. These students are

prepared to perform administrative and/or clinical tasks in an effort to support the work of medical doctors and other health professionals (United States Bureau of Labor Statistics, 2012).

Well-being/Wellness – “The ability to balance each of the components represented within the wellness dimensions and an active process through which people become aware of, and make choices toward, a more successful existence” (Anspaugh et al., 2011, p. 2). For the purpose of this study, the terms well-being and wellness are used interchangeably.

Summary

In this chapter an introduction to the concept of wellness and well-being with a brief historical background was provided. The problem statement for this study focused on the unique needs of community college students, the demand for medical assisting professionals in the future of health care, and the potential benefits offered to students and health care professionals who choose to improve their overall well-being. In examining the well-being experiences of community college medical assisting students from a dimensional perspective, it was anticipated that the results might provide an important contribution to the research literature in this area, as well as valuable information about how to increase the success of medical assisting students.

CHAPTER 2: LITERATURE REVIEW

Introduction

A literature review is often written to summarize and integrate previous research about a specific topic being addressed, as well as to offer suggestions for future research (Merriam & Simpson, 2000). In the following review, literature related to well-being and wellness models, college and community college student well-being, and the well-being of medical assisting students is reviewed. An exhaustive search of the literature included using data bases such as ERIC EBSCOhost, Health Source: Nursing/Academic Edition, Medline (EBSCOhost), Academic Search Premier, PSYCARTICLES, PSYCINFO, and Webscience. Several subject searches were done using words, such as “community college,” “college,” “student,” “health,” “well-being,” “wellness,” “holistic,” and “lifestyle.” It was eventually noted that using negative terms such as “debt” and “social isolation” provided literature for review as well.

Focusing on community college students and dimensional wellness or well-being yielded very few articles or books of this specific nature. Instead, the result lists provided wellness-related topics such as alcohol consumption, smoking, and illegal drug use. Topics such as these do not specifically address the research purpose or question for this study. Therefore, to adequately address the research question and the purpose of this study, the literature available on this topic associated primarily with college students was reviewed. In addition, since there were no studies available focusing on medical assisting students and well-being, the literature reviewed for this study focused on nursing students.

Well-being and Wellness Models

In an attempt to guide individuals toward making positive choices that could impact their personal health and well-being, wellness models were developed. These models can serve as guides in planning for optimal well-being by offering ways of incorporating the dimensions into

lifestyles along with explanations about the benefits of each dimension or component (Anspaugh et al., 2011). The multidimensional aspect of wellness (Corbin & Pangrazi, 2001) is clearly represented by the various dimensions of wellness models in the literature. Several health and wellness experts have made a direct impact on the development and evolution of these models.

According to Jonas (2010), a pioneer in the study of wellness is Donald Ardell (1977), as he is credited for discovering the work of Halbert Dunn (1977). Dunn, a retired public health service physician is thought to be one of the first persons, if not the very first, to use the term wellness. In the 1950's, Dunn developed a concept in which he termed high-level wellness. This idea consists of an individual maintaining a continuous balance toward a purposeful direction with the goal of continuing to reach for even higher levels of wellness.

There have been several additional models of wellness developed over the years based on the idea that wellness is a continual process. In addition to Dunn's (1977) high-level wellness model, Travis and Ryan (1981) developed the illness/wellness continuum, with optimal wellness at one end of the continuum and premature death at the other. These researchers also created the wellness energy system model. Ardell (1977) expanded on Dunn's high-level wellness model by promoting the idea of adding dimensions to the existing model. For many years, the five dimensions model was the most common. This model includes the dimensions of social, emotional, physical, intellectual, and spiritual wellness, but has been developed slightly differently by many wellness pioneers (Adams et al., 1997; Crose, Nicholas, Gobble, & Frank, 1992; Greenburg, 1985; Hettler, 1980; Lafferty, 1979; Leafgren, 1990; Myers et al., 2000; Rath & Harter, 2010; Renger et al., 2000; Taylor, 1988). The Wheel of Wellness Model was developed on the basis of five dimensions as well, but for this model, the dimensions are referred

to as life tasks. These life tasks include spirituality, self-direction, work, recreation and leisure, and friendship and love (Myers et al., 2000).

The dimension of psychology was eventually added to the five dimensions of wellness, giving rise to the six dimensions (Adams et al., 1997) followed by the addition of an occupational dimension, and leading to the seven dimensions model (Croese et al., 1992; Hettler, 1980; Leafgren, 1990). Eventually, the environmental and financial dimensions were added, and the psychological dimension was removed. Other dimensions, such as social and emotional dimensions, were thought to encompass adequate psychological qualities of well-being, therefore, causing the previous psychological component to appear redundant (National Wellness Institute, 2010; Renger et al., 2000).

Ardell (2011) predicted that as the future of well-being is considered, it is likely that aging, the possibility of less success through conventional medicine, and an increase in a more global health-care approach will lead to what is referred to as the wellness cluster. Instead of dimensions, this model of the future is referred to as having nine core segments. These are predicted to include spa, complimentary/alternative medicine, healthy eating/nutrition and weight concerns, preventive/personalized health, medical tourism, wellness tourism, workplace wellness, fitness and mind-body concentration, and finally beauty and anti-aging.

In concluding this section on wellness models, Table 1 provides a summary of the models, key words associated with them, and the authors who developed them.

Table 1

Wellness Models, Associated Key Words, and Authors

| Name of Wellness Model | Associated Key Words | Author of Model |
|----------------------------|----------------------------|--|
| High-Level Wellness | Continual Balance | Dunn, 1977 |
| Illness/Wellness Continuum | Optimal Wellness vs. Death | Travis & Ryan, 1981 |
| Wellness Energy System | Optimal Energy | Travis & Ryan, 1981 |
| Five Dimensions | Balance of Dimensions | Ardell, 1977 |
| Wheel of Wellness | Life Tasks | Myers et al., 2000 |
| Six Dimensions | Balance of Dimensions | Adams et al., 1997 |
| Seven Dimensions | Balance of Dimensions | Crose et al., 1992; Hettler, 1980; Leafgreen, 1990 |
| Eight Dimensions | Balance of Dimensions | Renger et al., 2000 |
| Wellness Cluster | Future Model | Ardell, 2011 |

A Closer Look at Some Specific Dimensions

A key focus of the dimensions of wellness model is the idea that individuals are held responsible for their personal well-being. People are encouraged to become active participants in their health care and to take control of potential risk factors affecting wellness. Attaining optimal levels of wellness requires a continuous balance of specific components, which can include spiritual, social, physical, emotional, intellectual, occupational, environmental, and financial components (Anspaugh et al., 2011). Each of these components is arranged around the core of achieving optimal wellness. Individuals often discover that certain components are more easily achieved than others; however, striving to meet each of these is recommended since all of the components work together for optimal health and well-being. Following the guidelines

associated with various components of well-being can provide a path toward achieving the overall benefits of concurrent behavior modification.

Spiritual Wellness

Spiritual wellness is probably the most well-defined component in the literature, according to Roscoe (2009). Several authors have explored this idea and discovered spirituality to be a continual process of discovering meaning and purpose in one's life. Hettler (1980) defined spiritual wellness as more of a worldview that supports goals and leads to action, as well as the search for meaning, purpose, and understanding of existence. Taylor (1988) suggested that the spiritual aspect of wellness is actually the core of a person's existence that can integrate and transcend the other important areas of wellness. She went on to explain that if spiritual needs are met, people function freely with a meaningful purpose and identity. Another view is that spirituality consists of a positive perception of meaning and life purpose, while recognizing and accepting the potential forces between the mind and the body. In addition, this view includes achieving a sense of meaning and purpose in life with connectedness to self, environment, and a higher power (Adams et al., 1997).

Renger et al. (2000) described spirituality as the ability to find purpose, live a fulfilling life, give and receive love, joy, and peace, while being willing to help other people. Also, the ability to establish a relationship between the self, others, and the universe is mentioned. Similarly, Leafgren (1990) believed that recognizing meaning and purpose in life and appreciating experiences that are gained through involvement with religious groups, with other people, and even with nature are important aspects of spiritual wellness. Other authors suggested that spirituality is the appreciation of religious and spiritual history, satisfaction with life, purpose, and meaning, as well as considering beliefs about death (Croese et al., 1992).

The idea of holistic dimensions is yet another description of spirituality (Ingersoll, 1994, 1998; Westgate, 1996). Ingersoll (1998) described spirituality with 10 dimensions, including conception of the absolute or divine, meaning, connectedness, mystery, freedom, experience-ritual-practice, forgiveness, hope, knowledge, and centeredness. Westgate (1996) presented four dimensions of spirituality, including meaning in life, intrinsic values, transcendence, and spiritual community.

Anspaugh et al. (2011) also echoed many of the descriptions of this component of wellness, but added some additional aspects. These authors tend to identify with spirituality as a belief in some type of source of value that can transcend boundaries of the self, while also nurturing the self. Meaning and direction are given through spirituality, which leads to growth toward new challenges. In addition, a development of a strong value system and moral and ethical beliefs are formed. It was suggested that while spirituality can relate to religious beliefs, there is no expectation of adhering to a particular religious structure. They stressed that forgiveness is also strongly linked to this component.

Social Wellness

Roscoe (2009) explained that “social wellness encompasses the quality and extent of interaction with others and the interdependence between the individual, others, the community, and nature” (p. 218). She added that this component of wellness is essentially an effort toward balancing and integrating the interaction between an individual, society, and nature. Taylor’s (1988) beliefs about social wellness are similar. She explained that all of the abilities that enable an individual to function as a member of society belong in the social component of wellness. She stated, “We are constantly interacting with society, which brings to the forefront issues of dependence, independence, and interdependence” (p. 11).

There are several other views concerning social wellness. Hettler (1980), for example, stated that this component focuses on an individual and how the individual chooses to relate to other people, as well as the environment. A socially well individual, by Hettler's definition, is living at peace with other people and showing mutual respect, as well as actively promoting a healthy environment and community. Adams et al. (1997), on the other hand, explained that social wellness involves more of an interaction of people as opposed to an interaction with the larger community or environment. The amount of support given and received in social situations, as well as the value placed on that type of exchange, is how these authors defined this component of wellness. Similarly, Renger et al. (2000) believed that well developed social wellness consists of individuals interacting with little or no strife. Renger et al. (2000) also agreed with Hettler (1980) in that interaction with the social environment and community contributions leads to sound social wellness.

Leafgren (1990) shared that social wellness involves attempting to gain common gains with one's community through contributions, as well as keeping others' needs in mind. Similarly, Crose et al. (1992) emphasized social wellness as reflecting attitudes toward relationships and creating a history of significant associations with people. They mentioned not only giving, but also attitudes toward receiving help when needed as important aspects. Durlak (2000) also identified with social wellness as involving relationships with others, but added the importance of the idea of how well individuals handle socially charged problems, such as rejection, isolation, anxiety, and violence.

Rath and Harter (2010) explained that individuals who enjoy social wellness are surrounded by people who encourage growth and tend to invest approximately six hours daily

with their social network, in some form. They noted: “People with thriving social well-being have several close relationships that help them achieve, enjoy life, and be healthy” (p. 43).

Anspaugh et al. (2011) highlighted this ability to develop and maintain intimacy with other people and to share mutual respect, but expanded it by emphasizing the need to include people who have opposing opinions or beliefs. While close relationships or intimacy with others is important, the relationships are needed for developing strong support systems that can be used during difficult times (Ministry of Social Development, 2007; Tufts University, 2009). Also, social well-being means that people have a strong support system in which they can resort to during difficult times. Social relationships have consistently been found to correlate positively with a person’s wellness regardless of age.

Physical Wellness

Taylor (1988) indicated that everything associated with the body in any way is included within the physical component of wellness. She stated that any type of element having to do with the internal, external, inputs, and outputs involving the body is important to the physical well-being of individuals.

Physical wellness, according to Hettler (1980), involves the degree to which a person maintains and improves fitness, strength, and flexibility. In addition, Hettler mentioned the importance of maintaining a healthy diet, being able to increase awareness of body harmony, and seeking medical care when appropriate. Similar to Hettler’s views, Renger et al. (2000) presented the importance of physical fitness, diet, and medical attention when appropriate, as well as practicing preventative measures for early recognition of problems in order to achieve the most optimal physical wellness. Leafgren (1990) also shared the definition of physical wellness as involving physical activity and healthy dietary choices. In addition, Leafgren felt that

physical wellness should include the avoidance of unhealthy lifestyle choices, such as drug and tobacco use and excessive alcohol use.

Adams et al. (1997) differed in their definition of physical wellness. They viewed this component more as a subjective measure of well-being. Accordingly, an individual who perceives himself or herself as being physically well is then considered physically well. Roscoe (2009) contended that these authors never clearly defined what constitutes physical health.

Durlak (2000) viewed physical wellness as involving two separate domains. These domains are physical indices, such as muscle tone, lipid control, and vital signs, and secondly, behaviors such as eating choices and exercise levels.

According to Roscoe (2009), physical well-being is a continuous effort to maintain the most optimal level of physical activity, healthy nutrition, and lifestyle choices. In addition, physical wellness should focus on an individual moving toward personal physical well-being goals without comparing those goals or progress to others. Rath and Harter (2010) added that along with the physical activity and healthy nutrition elements, getting the recommended amount of sleep is also an important aspect of reaching optimal physical wellness. Anspaugh et al. (2011) agreed that physical health should be viewed as an investment in positive lifestyle habits overall.

Emotional Wellness

Taylor (1988) described the emotional component of wellness as the affective or feeling element of awareness. In addition, the author explained that people are encouraged to motivate themselves toward developing more flexibility in their behavior to optimize emotional well-being. Hettler (1980) extended Taylor's definition by emphasizing that social wellness involves being able to appropriately express and manage emotions. In addition, Hettler claimed that risks

and conflicts should be viewed as healthy opportunities in which individuals can develop their emotional well-being further. Also, emotional wellness means that a person is flexible, open to change, able to function autonomously if necessary, and is aware of his or her personal limitations.

Adams et al. (1997) viewed emotional wellness as a reflection of an individual's self-concept or self-esteem. Feelings of security and holding a positive self-esteem are examples of strong emotional wellness, according to these authors. Similar to Hettler (1980) and Adams et al. (1997), Renger et al. (2000) placed more of a focus on the individual's self-view, but also added to the definition of emotional wellness that one's level of anxiety, depression, well-being, self-control, and optimism should be considered when determining optimal emotional wellness.

Leafgren (1990) offered another view of emotional wellness. This author described this wellness component as the awareness and acceptance of feelings, the level of positive feelings toward life and about oneself, and how well individuals can manage their feelings and other behaviors that stem from those feelings. According to Crose et al. (1992), emotional wellness is focused on how people cope, self-awareness, self image, attitudes toward emotion, and psychiatric history.

Anspaugh et al. (2011) defined emotional wellness as "the ability to control stress and to express emotions appropriately and comfortably" (p. 4). In addition, being able to recognize and accept feelings without feeling defeated by failures, by having established strong coping mechanisms, describes high level emotional wellness.

Intellectual Wellness

The intellectual component of wellness is referred to as the mental dimension, according to Taylor (1988). Taylor explained memory, concentration, ability to focus, and decision-

making are all involved in this component. Hettler (1980) defined intellectual wellness as the degree to which a person engages his or her mind in activities that are creative and stimulating, as well as utilizes resources that can expand the mind. In addition, intellectual wellness includes a commitment toward lifelong learning and an effort to share the knowledge learned, therefore leading to a more satisfying life. Leafgren (1990) shared similar thoughts as Hettler (1980) concerning the intellectual component of wellness. Leafgren's theory includes the use of creative, stimulating activities as well as available resources to expand, improve, and share knowledge that has been gained. Crose et al. (1992) defined intellectual wellness as an individual's education and learning history, mental status, flexibility, cognitive style, and attitudes about learning.

Adams et al. (1997) claimed that the perception of being energized by some form of intellectually stimulating activity is a core element to meeting intellectual wellness. Rather than perception, Renger et al. (2000) defined intellectual wellness as a person's orientation toward personal growth, education and achievement, and creativity. In addition, Renger et al. believed that current events occurring locally and throughout the world, along with an overall lifestyle that embraced learning, are important for optimal intellectual wellness to be achieved.

Durlak (2000) described the academic domain of adjustment by including the need to develop talents and abilities, learn how to learn, and develop higher order thinking skills. He also suggested problem areas of intellectual wellness as including underachievement, test anxiety, and school dropouts.

Anspaugh et al. (2011) believed that the intellectual component involves the ability to learn information and be able to use that information appropriately for personal, family, or career

development. The authors went on to explain that this component of wellness means striving for growth, while learning to cope with new challenges.

Occupational Wellness

Hettler (1980) defined occupational well-being as achieving a level of contentment and feeling enriched as a result of work and also the degree to which individuals can express their personal values through their work. In addition, this component of wellness is reached when skills and talents are contributing to the community in some type of meaningful way through paid or unpaid work.

Leafgren (1990) and Crose et al. (1992) noted that a person's attitude about work, along with personal enrichment that is gained, is what defines occupational wellness. Crose et al. (1992) added that attitudes toward leisure time and work history and patterns, as well as establishing a balance between work and leisure, are important aspects of reaching optimal occupational wellness.

Rath and Harter (2010) referred to occupational wellness as career well-being. They claimed that people who have high career well-being look forward to going to work each day by using their strengths toward making progress. People with thriving career well-being tend to have a specific purpose in life and a plan in place to attain their goals. Typically, they are also influenced by enthusiastic individuals or they have friends with similar passions and goals.

According to Anspaugh et al. (2011), occupational wellness is "the ability to achieve a balance between work, school, and leisure time" (p. 8). These authors explained that occupational wellness can add focus to life and allow people to find personal satisfaction through any type of occupation.

Environmental and Financial Wellness

Renger et al. (2000) emphasized the idea of how individuals can impact nature and the community by participating in community programs to help create a cleaner environment. Roscoe (2009) shared the preceding perspective, but emphasized the importance of a reciprocal interaction with the environment and nature, work, and home. Similarly, Anspaugh et al. (2011) noted that environmental wellness is an individual's ability to encourage healthy ways of improving the quality of life in communities that can help to safeguard the physical environment.

Someone who is considered to have thriving financial well-being is satisfied with his or her overall standard of living. These individuals tend to manage personal finances in such a way that daily stress related to debt is eliminated. People with strong financial well-being invest in experiences and give to others instead of spending money solely on themselves (Rath & Harter, 2010). Fitzwater (2013) added that financial wellness involves working toward balance in how money is handled, understanding personal financial situations, caring about finances, and feeling comfortable with where money comes from and how it is spent.

College Student Well-Being

A major priority for administrators of college campuses is to emphasize the promotion of healthy behaviors according to *Healthy Campus 2010* (American College Health Association, 2004). LaFontaine, Neisen, and Parsons (2006) suggested that assessing health behaviors of college students should be the first step toward identifying strategies that could lead to a healthy campus. The authors claimed also that health professionals who promote healthy behaviors in college are likely to influence the behaviors of students over a lifetime.

Several studies have discussed the impact of factors such as alcohol consumption, smoking, and illegal drug use on the health and well-being of college students. However, there

is limited research describing the impact of multiple, concurrent behaviors on wellness in the college population (LaFontaine et al., 2006). For this reason, these authors decided to explore this gap in the literature by looking at wellness factors in first-year college students and exploring their wellness-related behaviors. In addition, the authors claimed:

by focusing attention on wellness behaviors of college students, health and education professionals can develop programs and activities to enhance wellness for college students, thereby impacting their success in college and assisting them in developing healthy behaviors that can be sustained over their lifetime. (p. 217)

In this study 1,008 first-year students (535 women and 473 men ages 18 to 20) enrolled in a required health-related course from a Catholic liberal arts college in the Midwest participated. Participants' wellness was measured using the Wellness Evaluation of Lifestyle (WEL), which is a 123-item survey using five point Likert-type scales (Myers et al., 2000). Descriptive and comparative statistics were used to measure wellness of the participants in the areas of love, sense of worth, exercise, spirituality, stress management, and nutrition. The results of the study revealed that these college students scored highest in the area of love and sense of worth and lowest in the areas of nutrition and stress management. LaFontaine et al., (2006) stated that implications from these finding could help to assist college students by addressing their needs and building on their strengths.

In another study, Pang (2007) identified the relationship between life satisfaction and wellness in 146 male and 189 female first-year Chinese students between the ages of 18 and 29 who were enrolled in a required health-related course. A questionnaire was given to the participants asking them about their demographics, satisfaction with family, friends, school, and living environment, and finally, a self-evaluation of their wellness concerning social, physical,

emotional, intellectual, and spiritual well-being. Results from the study confirmed that there was a positive relationship between life satisfaction and wellness in this population sample. Further, the results indicated that the students were most satisfied with their present status of friendship and least with their current living environment. The self-evaluation of wellness for this sample revealed that the weakest area reported was the physical dimension while the strongest was emotional. Within the discussion of this study, Pang mentioned that wellness is considered a personal aspect of an individual's life. However, the author added that having a proactive system available for college students would help to provide the necessary support toward achieving wellness.

In reflecting on the place of this study in the literature, Pang (2007) noted that even though there has been an increased interest in wellness over the years, very little related empirical research is available in this area. Pang explained that while there was information available about wellness behaviors, the emphasis tended to focus on the impact of specific areas such as smoking or exercise on wellness. Typically, the population samples in wellness studies involve adults, seniors, or individuals with special health problems while the wellness research involving college students is sparse. This study, therefore, contributed to the literature on the topic of multi-dimensional wellness.

Myers and Mobley (2004) explained that it has been over two decades since Hettler (1984) recommended that college campuses establish wellness programs to address personal and academic needs of students. The authors added that there was plenty of evidence available from studies supporting the long-term value of programs that offer "stress management, interpersonal relationship skills, nutrition, and career development" (p. 40). However, the authors claimed "few studies of student wellness exist" (p. 40). In addition, Myers and Mobley argued that there

have also been limited studies conducted about how to design a campus wellness program that could accommodate the different needs of traditional and nontraditional students. These authors, therefore, looked more specifically at a comparison of wellness between traditional and non-traditional college students. In particular, they examined how wellness of traditional and non-traditional undergraduate students compared with one another, as well as with non-student adults in relation to age, gender, or ethnicity.

The data collection technique used for this quantitative study also involved the Wellness Evaluation of Lifestyle (5F-Wel) instrument. Among the participants, 83% were of traditional college age (24 or under) and 14% were nontraditional age (25 and older). Fifty-seven percent were female, and 42% were male. Approximately 61% were Caucasian, 16% African American, and 19% other backgrounds. Eighty-six percent of the students were single, 8% were married, and 3% were separated, widowed, or divorced. Due to missing data, the numbers provided in the study do not add to 100% (Myers & Mobley, 2004). The results of this study indicated that both non-traditional and traditional students scored highest on the Social Self factor and both groups scored lowest on Coping Self. Further, these two groups of students scored almost the same in all of the categories measured. The non-student adults scored highest in the social self also and lowest in Physical Self. The overall findings of this study suggested that undergraduate college students experience lower wellness than non-student adults and traditional and nontraditional age students differ only slightly with aspects of wellness.

The results of this study suggested that college student success courses and campus wellness programs are a useful means of promoting greater wellness during the college years. In addition, the study provided strong support for paying attention to preventative and wellness interventions on college campuses and establishing programs that could meet the needs of both

traditional and nontraditional students. “Research based on holistic models that provide multidimensional wellness assessment can contribute to further understanding the needs of undergraduate students and to strategies for developing campus wellness and health promotion programs” (Myers & Mobley, 2004, p. 41).

In a similar study, Hermon and Davis (2004) studied the impact of age and maturity level on the components of a wellness model. A comparison was made between nontraditional students between the ages of 24 and 51 and traditional students between the ages of 17 and 23 on 16 wellness measures. The results indicated more similarities than differences between both groups of students. The conclusion from this study was that age is not a significant factor of differentiation of wellness levels. These results contradict the work of Hybertson, Hulme, Smith, and Holton (1992) who found that age and environmental factors do influence wellness. Older students participating in this study reported that less social support and fewer social relationships resulted in a negative effect on their wellness.

While health and wellness courses tend to maintain a strong presence in higher education represented by the number of courses offered in this area, Welle and Kittleson (1994) claimed that it is difficult to determine how serious students are about making changes in their lives as a result of taking wellness-related courses. The question of whether or not students believe that the concept of wellness models is important was explored. In addition, the researchers looked at how the students’ perceptions of wellbeing related to their actual current wellness levels.

Students enrolled in an introductory health and wellness course at Rocky Mountain College agreed to participate in the study. The participants included 45 females between the ages of 17 and 45 and 60 males between 17 and 44. Sixty-four percent of the participants were freshmen, 22% were sophomores, 9% were juniors, and 5% were seniors. Eighty percent of the

participants were Caucasian, 1% was African American, 2% were Native American, 4% were Hispanic, and 13% other (Murray & Miller, 2001).

Two surveys were distributed and collected during class time. The first survey was a three-part instrument assessed with a five-point Likert Scale that measured how students rated each of the six dimensions of wellness. Aspects of the dimensions rated by the participants included the current wellness level in each dimension, the effect of the wellness dimensions on overall wellness, and the amount of guidance and information needed to develop optimal wellness. The second survey that the participants completed was the Testwell Wellness Inventory – College Edition (National Wellness Institute, 1993). This survey instrument contains 100 questions with a five-point Likert scale that allows the participants to assess six subcategories of wellness: “physical, occupational, spiritual, social, intellectual, emotional, and finally overall wellness” (Murray & Miller, 2001, p. 8).

The results of this study revealed that student participants did not view all of the wellness dimensions as having the same effect on their well-being. For example, the emotional dimension was rated as having the strongest effect on wellness. The students rated the dimension of intelligence as the area in which the greatest amount of guidance and additional information was needed in order for them to understand how to go about meeting that dimension. Following the dimension of intelligence were the spiritual and emotional dimensions where guidance and information were needed. The social dimension was the area of wellness in which the students rated as needing the least amount of help achieving. In fact, the participants actually believed that this area of wellness affected their overall well-being least. The overall wellness levels of these participants were self-reported as moderate to high which indicated that they viewed their overall wellness positively. These findings support conclusions of another similar study by

Archer, Probert, and Gage (1987) who found that students' attitudes toward wellness were positive overall. Therefore, the author claimed that the study supports that Hettler's Wellness Model (1980) still holds promise for assisting college students achieve optimal wellness and further that the model seems to make sense to students.

The increasing numbers of wellness programs that have been created in higher education might suggest an improved quality of life and well-being of students. However, Hermon and Hazler (1999) countered that the numbers of research studies available on the overall effectiveness of these actions do not match the increase in programs. In addition, the authors shared that the limited amount of research that has been done tends to focus mostly on the physiological aspects of wellness and not on all of the dimensions. The concern is that other studies, such as those done by Archer et al. (1987) and Hybertson et al. (1992), found that college students believed that emotional and social dimensions of wellness were as important as the physical dimensions. For this reason, Hermon and Hazler (1999) conducted a study to determine whether or not students who adhere to a holistic wellness model report having a greater sense of psychological well-being than students who do not.

The sample for this quantitative study by Hermon and Hazler (1999) consisted of 155 undergraduate students enrolled in a large Midwestern university. The traditional college age group of 18 to 23-year-olds accounted for 49% of the participants, while the group 24 to 51 years old accounted for 57%. Eighty-two percent of the participants were Caucasian; 13% were African American; 12% were Asian or Pacific Islanders; 2% were Hispanic; and less than 1% were Native American. Seventy-one percent were single; 24% were married; 5% were divorced; and less than 1% was widowed.

The data were collected using the Wellness Evaluation of Lifestyle (WEL). This survey measured the subjective well-being of each participant by asking questions about how the participants adhered to a five factor wellness model. The five areas of wellness represented in the model include spirituality, work, recreation and leisure, friendship, love, and self-regulation (Hermon & Hazler, 1999). The results of the study indicated a significant relationship between adherence to a holistic wellness model by these students and aspects of psychological well-being. In addition, the dimensions of “self-regulation and work” and “recreation and leisure” respectively were the two that were rated as being the best predictors of a college student’s psychological well-being. The dimension that resulted in being least of a predictor of college student well-being in this study was love.

Implications from this study include the development of activities that can help students gain control of stress, intellectual and academic challenges, nutritional needs, and a sense of self worth. Further, Hermon and Hazler (1999) remarked that the holistic wellness model and psychological well-being can be linked to assessment, evaluation, and accreditation of outcomes in institutions of higher education. For example, Kiracofe, et al. (1994) indicated that university and college counseling centers should provide documentation of their intentions for meeting the needs of students for accreditation purposes. This illustration reflects Hermon and Hazler’s (1999) emphasis on the importance of proactive strategies for helping students reach optimal happiness and well-being.

Adams et al. (2000) offered a similar view on the importance of wellness dimensions in the lives of college students. These researchers noted that improving the quality of student life has been a concern of university administrators, educators and professional staff for a long time. However, they added that the emphasis of this concern tends to be on the students’ physical

health instead of developmental and behavioral types of health threats. In addition, the researchers argued that the spiritual and psychological aspects of well-being have been less represented in the literature. In support of focusing primarily on college students' holistic well-being, Grace (1997) suggested that more effort should be spent creating campus environments that emphasize communities of wellness instead of campus environments stressing only how to avoid disease.

Adams et al. (2000) explored this idea of creating communities of wellness. The authors conducted a quantitative study to evaluate the relationship between spiritual and psychological dimensions and to the overall model of perceived wellness. Surveys focusing on personal attitudes and perceived wellness were given to 112 undergraduate students enrolled in a health education class at the University of Texas at Austin. Ninety-six percent of the students agreed to participate in the study. Of these participants 81% were women and 19% were men. Eighty-one percent of the participants were Caucasian. Additional information about the participants' ethnicity was not provided. The participants ranged in age from 16 to 58. The results of this study support the idea that life purpose, optimism, and sense of coherence are related to individual perceived well-being. Therefore, the authors suggested as a result of this study that health professionals who develop wellness programs should include all aspects of wellness while also using information that supports ways of effectively developing college students' optimism and sense of coherence.

Hagerty, Williams, Coyne, and Early (1996) explored other interpersonal qualities of community college students that help to form the overall holistic well-being of individuals. These authors were interested in examining the relationships between sense of belonging and personal characteristics as well as selected indicators of social and psychological functioning in

men and women. The foundational aspects of this study were drawn from the claim that the nature of human interconnections with others and how those relationships are perceived can cause alterations in physical and mental health (Kohut, 1977).

A sample of 379 community college students participated in this study (Hagerty et al., 1996). Community college students were chosen as the target population because of the diverse nature of the students attending. Among the sample population were 59% female students, 41% male students, 64% White, 23% African American, 4% North American, 3% Asian, 2% Hispanic, and 4% other. In addition, the participants of this study were between the ages of 18 and 72 with a mean age of 26. Of this population, 69% of the participants were single, 22% were married, and 10% separated or divorced. Surveys emphasizing social support were distributed to community college students and returned upon completion. The specific areas of measurement included involvement in the community, attendance at religious services, loneliness, depression and psychiatric treatment, potential for considering suicide, anxiety, and general demographic information.

Results of the study (Hagerty et al., 1996) indicated that age, gender, marital status, education, and ethnicity have no significant relationship to the participants' sense of belonging. However, sense of belonging was related to social support. Income was shown to have an inverse relationship with sense of belonging for women in the lower socioeconomic group. Overall, sense of belonging is seemingly related more to both social and psychological functioning for women than for men. However, there was evidence in the findings suggesting that relationships are important for men as well. It was further concluded that sense of belonging remains a concept worth exploring further with regard to social and psychological functioning and how these impact behavior.

The departments of Nursing Science and Student Counseling at Nelson Mandela Metropolitan University in Port Elizabeth, South Africa decided to explore the holistic development of their undergraduate nursing students (Van Lingen et al., 2011). The purpose of this study was to determine the wellness profiles of the participants in the study, as well as the relationship between these profiles and the students' academic performance. A quantitative method was used for this study by distributing a data collection tool known as the Wellness Questionnaire for Higher Education (WQHE). The questionnaire used is based on the Six Dimensions of Wellness Theoretical Model of Wellness (Hettler, 1984). Dimensions included in this model are physical, career, intellectual, social/environmental, and emotional/spiritual. Previous studies conducted with the use of the WQHE have strongly suggested that students who scored higher scores on a measure of wellness also performed better academically when compared with students who obtained lower wellness scores (De Jager & Van Lingen, 2004; De Jager, Van Lingen, De la Harpe, & Kemp, 2002; De la Harpe & Kemp, 2002; Povey, 2003).

A convenience sample of nursing students was taken from this population. First year students comprised 179 members of the sample, 171 second year students, and 176 third year students. Participants were heterogeneous in terms of age, language, gender, and academic year (Van Lingen et al., 2011).

The results of this study showed that the mean scores for all of the wellness dimensions were reported as "good." The physical wellness dimension scores were reported as being consistently the lowest of the categories, which indicated that the students were reporting inadequate levels of exercise and nutrition while taking unnecessary health risks. Environmental wellness was the next lowest category reported by the participants. Social, emotional, and spiritual dimensions of wellness were consistently reported as the highest areas achieved (Van

Lingen et al., 2011). These results were consistent with a study conducted by LaFontaine, Neisen, and Parsons (2006), which indicated that nursing students scored the highest on the social dimension of the WEL and the lowest on nutrition. The gender, academic year, age, and language factors did not change the consistency of the results from the study by Van Lingen et al. (2011). Recommendations from this study included integrating wellness programs into nursing curricula as a way of sensitizing students to the important aspects that positive well-being has on them personally. In addition, it was noted an appreciation for wellness would likely enhance the quality of care provided professionally.

Well-Being of Community College Students

Student well-being has often been measured by how successful a student is, in terms of fulfilling academic requirements, such as passing courses and earning a degree. A report by ACT (2007) claimed that this view also applies to community college students. This report described longitudinal research that confirms the notion that the best preparation for college is academic in nature. However, it is also well-established by ACT that nonacademic factors play a role in achieving success in college. The most relevant nonacademic factors that fit this description, according to ACT, include individual psychosocial factors, such as how motivated a student might be, family influences having to do with education, social involvement, geographic stability, and career planning.

It has been recommended that one way of encouraging more use of nonacademic factors is for educators to monitor nonacademic student behaviors, such as absenteeism and missing assignments, for example, in an attempt to identify students who could be potentially at risk academically. This type of practice is recommended as a way to encourage students to re-engage and also to promote behaviors that are important to the success of future careers (ACT, 2007).

Ely (1997) agreed with this view, suggesting that most of the socialization of community college students occurs in the classroom. It was also noted that faculty can play a critical role in connecting with these students and helping them to feel like part of the campus in general. Longerbeam, Sedlacek and Alatorre (2004) echoed this idea of faculty impact, when they claimed that community college students have few faculty role models with whom to identify and can often end up feeling culturally and socially isolated. In addition, curricula that can incorporate active and collaborative learning methods are preferable to encourage social interaction (Ely, 1997).

Community college students are often encouraged to become involved in college activities and to become socially connected as an approach to enhancing psychological and social well-being. The intent, according to Rendon (2006), is to promote the social and psychological well-being of students. However, the author went on to explain that many community college students fit a profile of being low-income, first generation non-traditional students. These students will typically require validation before they can be expected to connect on a social level. Ely (1997), Longerbeam et al. (2004), and Rendon argued that faculty and staff of community colleges should take initiative and teach students about aspects of the college in which they are attending, as well as encourage these students to believe in themselves and to promote a positive sense of self. Rendon (2006) explained that while involvement does lead to college retention and student development, students must first feel a sense of validation before the social aspects can begin to form.

Other education experts (Greene, 1993; hooks, 1994; Osei-kofi, Richards, & Smith, 2004) have indicated that there is a great need among community college students to experience a transformation in teaching and learning practices. According to these voices, the principles of

the past should be challenged and restructured so that more students are included in the center of the teaching circle instead of potentially on the margins. This revised view involves student success by involving the whole person, including not only intellectual dimension, but also social, emotional, and spiritual dimensions within the curriculum and lesson plans. This theory of educating the whole person may result in students obtaining abilities, such as leadership skills, critical examination, compassion, and a sense of life purpose. In addition, improved retention and graduation rates have been noted when more of a focus within education involves this notion of addressing aspects of the whole person instead of purely academic factors.

While considering the community college student as a whole person, instead of just a student, addressing wellness on a community college campus can become as complex as the lives of the students who attend these institutions. This is particularly true, when considering the diverse demographics that are typically involved (Weidel, 1998). "Educators cannot assume that student development is the same process for all students or that the concepts that apply to a narrowly defined group of students will work equally well for others" (Evans, Forney, Guildo-DiBrito, 1998, p. 286). Weidel (1998) explained that present-day wellness concepts involve more than just physical and mental well-being. The author added that well-being encompasses the developmental stages and lifestyles in which an individual has experienced. When considering community college students, "the developmental paths for these students are very different than those for traditional college students" (p. 57). The varied demographics of most community college populations result in diverse and non-traditional characteristics and most of these students have had quite different wellness experiences. Weidel (1998) suggested that the first step to understanding the needs and complexities of community college students is to ask the students what their wellness-related needs and interests are. With this in mind, the author

stated that because many community college students are managing jobs, families, and households, they will likely express interest in wellness programs that will apply to their families. “One of the most important things to consider regarding wellness programs at community colleges is that they are very necessary and directly impact students during and after their education” (p. 59).

Well-Being and Medical Assisting Students

Holistic well-being is an important aspect in the lives of medical assisting students when considering the previously mentioned fast-paced curriculum, potentially stressful career environment, and the responsibility to model and teach aspects of wellness to patients and clients (Lang, 2009; Van Lingen et al., 2011). In addition, Anderson (2007) claimed that health care in the 21st century requires that skills be practiced on the cutting edge. The author added, “holistic approaches to care that are guided by what the literature refers to as caring ontology (caring philosophy) are on that edge” (p. 4). The philosophy of holism, which originated in 1930, emphasizes the importance of understanding an individual’s whole being instead of treating only specific aspects. Savage and Money (as cited in Anderson, 2007) agreed that understanding holistic concepts is important for health care in the 21st century. The authors added that this philosophy of holistic care is what weaves the technical skills of nursing and health providers with social science skills to enhance the humanity of both the nurse and the person receiving care. Within the contemporary health care arena, choosing to be a holistic nurse is a crucial step toward establishing a healing relationship with patients and clients.

Jean Watson, Dean and Distinguished Professor of Nursing, developed an important concept toward holistic health care known as the Science of Human Caring (Anderson, 2007). Watson’s theory of care (1988) focuses on looking at the whole human being, while attentive to

needs of the body, mind, and spirit. Anderson added that to truly be a caring person, as defined by Watson, students need to use those same principles of caring in all aspects of their own lives.

Anderson also made the following claim:

If you are caring, you look at the body, mind, and spirit of the person. If you are holistic, you are looking at the entire person. Both approaches look at how the environment affects the person and work with the individual to make the environment more healing.

(p. 12)

Approximately 148,000 new medical assisting job openings are expected from 2006 to 2016, an increase of 35%. In addition, an increase of 31% is expected from 2010-20 (United States Bureau of Labor Statistics, 2008c). The field of medical assisting is one of the fastest-growing occupations in the country. This employment growth has been driven by the increase in the number of clinics, group practices, and other health care facilities. Medical assistants are expected to perform clinical procedures well and have a strong knowledge base of the administrative skills (Lang, 2009).

The current demand for health care professionals is greater than ever before. As advancements in medical technology continue, this demand is not expected to decrease. Not only are medical assistants trained, credentialed, and expected to work at high levels of competency, they are also serving as leaders in many medical facilities (Lang, 2009). However, there is nothing to date in the literature focusing on the well-being of community college medical assisting majors or their awareness of wellness.

In reviewing the literature, there were no peer reviewed articles or books available concerning medical assisting majors, well-being of medical assisting students, or the well-being of practicing medical assistants. There were, however, articles addressing the types of positions

in which medical assistants typically hold, the training required, credentialing options, and the outlook of the demand for medical assistants in the future. In addition, there is a monthly publication that is available to members of the American Association of Medical Assistants that provides articles focusing on unique career experiences of medical assistants, upcoming events and meetings, and continuing education opportunities.

Summary

The review of literature was divided into five sections. In the first, well-being and wellness models were discussed. The objective of creating wellness models was for their use as guides for incorporating the various dimensions of wellness into individual lifestyles. By doing so, a number of researchers claimed that optimal well-being could more easily be achieved and maintained. In the second, a review of some of the dimensions that are often included in wellness models was provided, including spiritual, social, physical, emotional, intellectual, occupational, environmental, and financial wellness. Various arguments from researchers in the field of health and wellness were presented as well as descriptions of the suggested criteria for meeting each of these dimensions. While the experts tend to agree that each of these dimensions are important to include and balance for optimal well-being, there is also debate about what each of these dimensions represent, and how individuals can achieve them. In the third, college student well-being was examined. Studies reviewed focused on college student populations and their well-being and on a dimensional perspective of wellness. Overall, these studies of college student well-being resulted in positive relationships among life satisfaction, transfer of wellness concepts to others, academic outcomes, and accreditation outcomes. As a result, researchers consistently recommended incorporating wellness programs into college campus environments and curricula. In the fourth, well-being of community college students was discussed.

Arguments among Ely (1997), Longerbeam et al. (2004), Rendon, (2006), Green, (1993), hooks, (1994), and Osei-kofi, et al. (2004) encourage faculty and staff of community colleges to reassess strategies that are currently in place for meeting needs of community college students in an effort to help students integrate socially into the community college environment. Once student validation has been made and students are feeling socially connected with college, the prediction and hope is that academic goals can then be met. Weidel (1998) made suggestions in this section about simply asking community college students what they need as a way of potentially achieving student well-being. The author added that wellness programs are essential and directly impact students on community college campuses. In the final section, literature on well-being and medical assisting students was examined. Similar to the last section, while an absence of related literature on this population group was noted, the works of a number of researchers who have described the benefits of a holistic approach to well-being for this group were discussed.

CHAPTER 3: METHODS

Design Framework

The research design for this study is qualitative, in that the approach emphasizes a collection of rich text data in the most natural setting possible with the use of inductive thinking to understand the participants' point of view (Bogdan & Biklen, 2007). Qualitative research implements subjective methodology and the epistemological understanding of the qualitative researcher is that nothing exists independently of consciousness and experience, and that absolute truth is not possible, based on the premise that truth is subjective and under constant construction (Crotty, 1998).

To set the stage for the qualitative nature of this study, the following two definitions of qualitative research are worth noting:

Qualitative research begins with assumptions and the use of interpretive/theoretical frameworks that inform the study of research problems addressing the meanings individuals or groups ascribe to a social or human problem. To study this problem, qualitative researchers use an emerging qualitative approach to inquiry, the collection of data in a natural setting sensitive to the people and places under study, and data analysis that is both inductive and deductive and establishes patterns or themes. The final written report or presentation includes the voices of participants, the reflexivity of the researcher, a complex description and interpretation of the problem, and its contribution to the literature or a call for change. (Creswell, 2013, p. 44)

Denzin & Lincoln (2011) also offered important insight into qualitative research:

Qualitative research is a situated activity that locates the observer in the world.

Qualitative research consists of a set of interpretive, material practices that make the

world invisible. These practices transform the world. They turn the world into a series of representations, including field notes, interviews, conversations, photographs, recordings, and memos to the self. At this level, qualitative research involves an interpretive, naturalistic approach to the world. This means that qualitative researchers study things in their natural settings, attempting to make sense of, or interpret, phenomena in terms of the meanings people bring to them. (p. 3)

Qualitative research is holistic as it attempts to understand the whole picture of the social context being studied and focuses on relationships within subcultures (Janesick, 2011). In addition, Janesick explained that qualitative research is personal and refers to face-to-face interactions, is attentive to detail, and relies on the researcher as the research instrument. Qualitative research tells a story in narrative or poetic form and helps the reader to clarify insight and see the actual words of the participants. Creswell (2013) added that researchers conduct qualitative studies for many reasons. One reason that aligns with this study is to “empower individuals to share their stories, hear their voices, and minimize the power relationships that often exist between a researcher and the participants in a study” (p. 48).

For this study, qualitative methods were used. Qualitative methods are primarily used to account for student success (Rendon, 2006). Using a quantitative lens in this type of study would limit the ability of the researcher to capture the depth of the student experiences from the data obtained. A quantitative approach in this type of a study, according to Rendon, would objectify students and silence their voices, preventing a deeper analysis of the students’ perspectives. In contrast, a qualitative study will provide in-depth information for identifying key experiences that can later be quantified, if necessary. When conducting quantitative

research, the constructed research instrument guides the research; however, during qualitative research, “the researcher is the instrument” (Patton, 2002, p. 14).

Qualitative research involves a naturalistic context where the researcher actually enters the setting that is under study (Creswell, 2013; Hatch, 2002; LeCompte & Schensul, 1999; Marshall & Rossman, 2010). In addition, qualitative research takes the form of words or pictures as a rich descriptive type of research instead of emphasizing numbers as in quantitative research. Also, the research process is the focus as opposed to the identification of research outcomes (Bogdan & Biklen, 2007). Qualitative research is analyzed inductively by identifying themes from data collection instead of comparing the research outcomes to hypothesis that were established prior to the start of the research process (Hatch, 2002; Marshall & Rossman, 2010). Finally, meaning is an essential focus within qualitative research (Bogdan & Biklen, 2007; Creswell, 2013). Qualitative researchers are “interested in how different people make sense of their lives” (Bogdan & Biklen, 1992, p. 7). Merriam and Simpson (2000) claimed that a primary concern of the qualitative researcher is to attempt to determine how people make sense of their lives, what is involved in the process of this meaning making, and how people interpret what they experience.

The qualitative research approach used to guide this study was phenomenology.

Creswell (2013) offered the following definition of phenomenology:

A phenomenological study describes the common meaning for several individuals of their lived experiences of a concept or a phenomenon. Phenomenologists focus on describing what all participants have in common as they experience a phenomenon. The basic purpose of phenomenology is to reduce individual experiences with a phenomenon to a description of the universal essence. To this end, qualitative researchers identify a

phenomenon. The inquirer then collects data from persons who have experienced the phenomenon, and develops a composite description of the essence of the experience for all of the individuals. (p. 76)

Creswell (2013) added that phenomenology is popular in the social and health sciences, as well as in education. Van Manen (1990) described phenomenology as the study of the lived experiences of people from the perspective that these experiences are conscious ones. Moustakas (1994) added that phenomenology involves compiling descriptions of the essences of these lived experiences, not simply explanations or analysis. Essential themes are reflected upon as phenomenology is not just a description, but also a process of interpretation. The researcher interprets the meaning of lived experiences.

Research Site

With approval and support of the Dean of Health Sciences and the Vice President of Academic Affairs, the campus of a suburban community college founded in 1968 and located in the Midwest served as the research site for this study. Protocols for the study were submitted to the respective Institutional Review Boards at this institution and Ball State University and were approved prior to the inception of the study.

A statistical report from the community college outlined 33 degree programs to choose from in more than 80 specialty areas. Students may choose to earn a technical certificate, an associate of arts degree, an associate of science degree, or an associate of applied science degree. The region has experienced a 59% enrollment growth in the past five years. There are approximately 9,000 students enrolled in this community college region. Of this 9,000, there are 3,467 males and 4,888 females enrolled and 86% are enrolled as full time students. Further, 87% of these students are Caucasian, 9% are African American, 2% Hispanic, .5% Asian, .4% Native

American, 1.7% of multiple ethnicity, and 4% are registered as other/unknown. The largest proportion of students enrolled was in the age range of 20 to 24. Of the students enrolled, 75% were registered as first generation students.

At the end of the 2011-12 academic year, the Registrar's report indicated approximately 60% of the graduates from the School of Health Sciences in this region represented the medical assisting program. Medical assisting graduates led the School of Health Sciences in 2008, 2009, and 2010 as well. In addition, a Registrar's report for the academic year 2012-13 revealed that there were 600 students enrolled as medical assisting majors at this community college. Approximately 42 of these students planned to receive technical certificates, and 557 were working toward associate degrees.

Population and Sample

The population for this study included medical assisting students between the ages of 18 and 65 who were enrolled in the clinical component of the associate degree program at this community college. Clinical courses are taken prior to the final course in the program. A convenience sample was employed by identifying one class section of this component in which 12 students were enrolled. This approach was utilized because of the timeframe in which the study had to be completed and the availability of the group to be studied.

An invitation to participate in the study was extended to these students and a subsequent meeting was held on November 4, 2013 with 10 students who agreed to participate in the study. For this type of study, having 10 participants is an acceptable number. According to Creswell (2013), the number of participants in a phenomenological study can vary. In a study by Duke (1984), only one individual participated in the study. Polkinghorne (1989) conducted a

phenomenological study with 325 participants, and Riemen (1986) completed one with 10 participants.

At this meeting, a written consent form was shared with the participants. The form addressed aspects of the study including the terms of the study and expectations and rights of the participants. In addition, participants were asked to agree to participate in a semi-structured interview with the researcher lasting 60-90 minutes. They were given the researcher's contact information for any questions or concerns that they might have during the course of the study. Students who agreed to participate were asked to schedule a time for interviewing. In addition, each participant was asked to select a pseudonym to help ensure confidentiality throughout the study.

Data Collection

Semi-structured interviews were conducted for data collection during a mutually agreed upon time and location. Bogdan and Biklen (2007) explained that the semi-structured interview is open-ended and allows the participant to speak about the area of interest and then probes deeper for additional information that the participants might initiate.

The interviews were audio-recorded with the permission of the participants. The interview guide (see Appendix A) was used during the interview sessions to help guide the conversation. A panel of experts that included the Dean of Health Sciences, a Health Science Program Chair, and Health Science Faculty reviewed the questions on the interview guide. These four individuals made suggestions, and the corresponding revisions were then made to the interview guide questions.

Kvale and Brinkmann (2009) recommended using five to seven open-ended questions. Accordingly, the interview guide included seven questions. Another important aspect to

consider before implementing interview questions used in a qualitative study is pilot testing (Creswell, 2013). Through pilot testing, the researcher can refine the interview questions, address potential observer bias, and adapt research procedures. The interview questions were pilot tested by interviewing three college students using the questions written for this study. One of the students had recently completed the medical assisting program; the other two students were first-year college students entering the program. No questions were eliminated or added as a result of the pilot test; however, two of the questions were altered slightly to clarify the meaning of the questions.

Each interview session lasted from 50 to 90 minutes. Even though an interview guide was used during the interviews, participants were encouraged to describe their rich experiences beyond what the research guide questions suggest. Throughout the interview, the researcher kept field notes of what was seen, heard, or thought about to enable reflection on the interview process and results, a strategy recommended by Bogdan and Biklen (2007). During the interviews, participants were encouraged to share various forms of art such as films, music, or poetry. Van Manen (1990) noted that such information can be used in a phenomenological study as data.

Data collection, through the process of participant interviews, continued until the point of saturation took place. Bogdan and Biklen (2007) noted that qualitative researchers can determine when the point, at which the information becomes redundant, finishes the interview process or data saturation occurs.

The researcher transcribed each audio-recorded interview. Following the transcription, member checking (Lincoln & Guba, 1985) was done so that participants had the opportunity to review the transcript of the interview for accuracy and clarification. By revealing the data to the

participants, the risk of misrepresentation was decreased. In addition, since the overall objective was to improve community college student well-being, the data were kept as authentic as possible so that the participants' perspective and degree of sentiment remained genuine. As is the case with most conversations, grammar and sentence structure is rarely perfectly correct. However, the contributions of these participants were meaningful, valued, and respected and hold much higher value than the accuracy of grammar. Therefore, the transcriptions that were presented to the participants during member checking were verbatim and provided the natural conversations that took place (Clandinin & Connelly, 2000).

Within two weeks of the time each interview was completed, the participants received an email from the researcher requesting that they review the transcript for accuracy. The participants were asked to respond to this email providing any changes that were to be made within a two to three day time frame.

Confidentiality of Data

All data collected from the semi-structured interviews and any researcher's memos in paper form were stored in a locked cabinet in the researcher's home. In addition, any electronic data files were stored on a password-protected computer file for one year. Pseudonyms that the participant selects were used in place of the participants' real names to maintain confidentiality within the transcription process. Only the faculty dissertation advisor and the researcher had access to the raw data. Data that reveal the participants' real names, such as coding documents, were shredded.

Trustworthiness

Claiming the trustworthiness of any study is recommended (Creswell, 2013). Lincoln and Guba (1985) explained further that in a qualitative study trustworthiness adds "credibility,

authenticity, transferability, dependability, and confirmability” (p. 300). Wolcott (1990) added that seeking understanding captures the essence of what researchers tend to be seeking in a naturalistic setting. Creswell and Miller (2000) suggested that qualitative researchers should consider eight strategies for determining trustworthiness in a qualitative study. These include: “prolonged engagement in the field, triangulation, peer review or debriefing, negative case analysis, clarifying researcher bias, member checking, providing rich, thick description, and conducting an external audit” (p. 124). It is recommended that researchers engage in at least two of the recommended strategies to claim trustworthiness within a qualitative study. For this study, trustworthiness has been claimed by using five of the recommended strategies. These include: (1) prolonged engagement in the field by conducting lengthy audio-taped interviews with participants, (2) triangulation of many participant voices, (3) clarifying researcher bias within the subjectivities statement, (4) conducting member checking of interview transcripts, and (5) providing rich, thick description of the details surrounding the study. In addition, the steps that have been established for the data analysis of this study will be followed.

Data Analysis

Creswell (2013) recommended a simplified version of Moustakas (1994) method of analysis for phenomenological studies known as a modification of the Stevick (1971), Colaizzi (1973), and Keen (1975) method. Creswell noted that this particular method provides a practical, useful approach to the analysis of phenomenological data.

This analytic process began with the researcher’s full description of personal experiences of the phenomenon being studied. Creswell (2013) explained that while it is impossible to do entirely, this step is done with the intent of the researcher setting aside, or bracketing, personal experiences that could impact the study. The next step in the process involves developing a list

of significant statements by identifying statements within the interview transcripts about how the participants are experiencing the topic. The statements are to be treated as having equal value to the study. The list of statements should not repeat or overlap.

Once the statements have been identified, they are then grouped into larger units of information referred to as meaning units or themes. At this point, the researcher begins writing a description of what the participants in the study experienced with the phenomenon. This textural description describes what happened in the experiences of the participants and should include several examples. Next, a description of how the experience happened, or a structural description, is written. In this section of the analysis, the researcher reflects on the setting and context in which the participants experienced the phenomenon. Finally, a composite description of the phenomenon, which includes both the textural and structural descriptions combined, is written. This final composite is the actual essence of the experience and is, typically, a long paragraph that describes to the reader what the participants experienced with the phenomenon and how they actually experienced it.

The following steps describe the process that was used in analyzing:

1. A subjectivity statement describing the researcher's personal experiences with well-being was formulated.
2. A list of significant statements, which can be found in Appendix B, was developed and used to identify ways in which the participants experienced well-being.

Significant statements that repeated or overlapped in meaning were not used more than once. The initial list of statements was reduced to those common to all participants (see Appendix C).

3. The next step involved grouping each of the significant statements into larger units of

information. These larger units then became themes.

4. A textural description of what the participants in this study experienced was written next to illustrate the phenomenon of well-being. Along with this description, several examples of the shared experiences of well-being were included.
5. Next, a structural description focusing on how the participants' experiences of well-being happened was written. The description reflects on the setting and context of the well-being experiences shared by the participants of the study.
6. A textural-structural description was also written for each participant with the goal of identifying the essence of their individual experiences with well-being.
7. For the final step in the analysis process, a composite description of the textural and structural descriptions was written. This description provided the essence of the experiences of well-being that the participants experienced. The goal was to provide a written description of the well-being experiences of the participants, as well as how they experienced this phenomenon.

Summary

In this chapter the research methods for the study were discussed. Initially, a rationale for using a qualitative approach was outlined. In particular, the value of phenomenology as the method was explained. A description of the research site, population, and sample was detailed. The use of semi-structured interviews and how the data from those interviews were examined was described. The importance of confidentiality and trustworthiness was noted along with how these considerations would be met. Finally, a step-by-step outline of how data would be analyzed was described.

CHAPTER 4: FINDINGS

Introduction

Chapter Four begins with a description of the participants in this study and the interviews. Thereafter, each individual textural-structural composite description is provided. The process used to establish 94 significant statements, how these statements were reduced to 60, and how the eventual five themes emerged is explained. Next, a discussion of the level of well-being fulfillment is presented. Finally, composite descriptions of each participant, along with the themes that emerged from the data, are examined.

The Participants

Medical assisting students from a Midwestern, suburban community college comprised the population for this study. The inclusion criteria stated that students be between 18 and 65 and be enrolled in the clinical course for the medical assisting program. After visiting the students in their classroom, proposing the study, and inviting the students to participate, 10 students agreed to participate.

Table 2 provides an overview of the sample. Participants included one male and nine female White students, which is typical representation for this group. Ages ranged from 20 to 50, with four between 20 to 29 years; three between 30 to 39; two 40 to 49; and one 50 years. The average age was 33.9. All identified themselves as non-traditional students. Three worked part-time, while four worked full-time. Six had children. Four had two children, and two had three children. Eight were attending classes on a full-time basis.

Table 2

Participant Demographic Information

| Pseudonym | Age | Gender | Race | First-Gen. | Non-Trad. | Children | Work | Credits |
|-----------|-----|--------|-------|------------|-----------|----------|------|---------|
| 1. Rachel | 20 | Female | White | No | Yes | 0 | PT | FT |
| 2. Dexter | 38 | Male | White | Yes | Yes | 3 | FT | FT |
| 3. Shyann | 25 | Female | White | Yes | Yes | 2 | FT | FT |
| 4. Brooke | 38 | Female | White | No | Yes | 2 | FT | FT |
| 5. Lynn | 20 | Female | White | Yes | Yes | 0 | PT | FT |
| 6. Lily | 33 | Female | White | Yes | Yes | 0 | FT | FT |
| 7. Sarah | 45 | Female | White | Yes | Yes | 3 | No | PT |
| 8. Nikki | 21 | Female | White | Yes | Yes | 0 | No | FT |
| 9. Rue | 50 | Female | White | Yes | Yes | 2 | No | PT |
| 10. Lucy | 49 | Female | White | Yes | Yes | 2 | PT | FT |

Note: “P” represents part time student and “F” full time student. The participants are listed in chronological order of when the interviews took place. The participants chose the pseudonyms. All of the demographic data were self-reported.

The Interviews

The interview process for this study began with a scheduled date, time, and place to meet. The participants were provided with dates over a period of four weeks from which to select. They were also encouraged to select a time that would accommodate their schedules and other responsibilities. The participants could select daytime, evening, or weekend meetings. In regard to where the interviews took place, the community college granted permission for interviews to be conducted on campus or the participants could choose another mutually agreed upon public location in which to meet. Seven of the ten interviews were conducted in a classroom on campus, two were conducted in a student lounge on campus, and one was conducted in a local coffee house. Each location offered quiet, comfortable areas with adequate lighting. The interviews ranged between 50 to 90 minutes in length. Table 3 provides an overview of the interviews for each participant.

The semi-structured interview guide was followed during each interview. The order of how topics were discussed varied from participant to participant, however the probe questions were addressed at some point during the interviews. Each of the interviews included moments of emotionally charged segments in which the participants shared extremely personal information. Six of the 10 participants became tearful during their interviews when discussing relational issues, which altered their lives indefinitely. In some cases, the changes in the participants' lives that altered their personal well-being were positive, others unfortunately, were not.

All 10 of the participants demonstrated interest in providing data for this study. There were many encouraging statements made toward supporting the study as well as comments indicating their appreciation for a study such as this one. The potential for improving the campus environment and enhancing educational experience was important to these students. It

was also noted that the participants seemed honored that they were asked to participate in a scholarly study. Each of them asked to see a copy of the completed study.

Table 3

Overview of Interviews

| Pseudonym | Number of Interviews | Total Pages of Transcript | Duration of Interview | Location of Interview |
|-----------|----------------------|---------------------------|-----------------------|-----------------------|
| Rachel | 1 | 16 | 55 minutes | Campus |
| Dexter | 1 | 21 | 90 minutes | Campus |
| Shyann | 1 | 12 | 50 minutes | Campus |
| Brooke | 1 | 11 | 60 minutes | Campus |
| Lynn | 1 | 10 | 60 minutes | Campus |
| Lily | 1 | 12 | 60 minutes | Campus |
| Sarah | 1 | 21 | 80 minutes | Campus |
| Nikki | 1 | 12 | 80 minutes | Coffee Shop |
| Rue | 1 | 12 | 60 minutes | Campus |
| Lucy | 1 | 18 | 85 minutes | Campus |

Note: The participants are listed in chronological order as to when the interviews took place.

Individual Textural-Structural Descriptions

In the following section a brief introduction of each participant sets the stage for further description. Following the introductory description is a brief synopsis of each participant's textural and structural descriptions. This synopsis provides some of the key aspects that were extracted from each individual's textural and structural description regarding their well-being. The textural component alone describes exactly "what" happened to the participants in regard to their personal well-being. The structural aspect then describes "how" the well-being experience occurred (Creswell, 2013). Due to the potential for data repetition, the individual textural and structural descriptions can be found in Appendix C. The synopsis is then followed by a textural-structural composite description of each participant's personal experiences with well-being. The textural-structural composite of participants leads to the essence of the participants' perception of their personal well-being (Creswell, 2013). To show the progression from one component to the other, an illustration is provided in figure 1 of the movement from textural to structural, then to the textural-structural for Dexter, one of the participants. This illustration reflects the process followed in writing the three descriptions for each participant.

The first column provides a sample of Dexter's textural description. The textural description is used to illustrate what happened in the lived experiences of the participant concerning personal well-being. The majority of the textural description reflects the exact words that the participant has shared. The next column, a sample of the structural description, illustrates the progression of Dexter's textural description to his structural description. The structural description is an explanation of how the well-being experiences occurred. The setting and context of what happened is the focus of this description. Finally, the third column in the following example illustrates a sample of the textural-structural composite description of what

happened and how the phenomena happened. This passage leads to the essence of Dexter's experiences.

Figure 1. Illustration of Textural, Structural, and Textural-Structural Descriptions of Dexter

| TEXTURAL “What” | STRUCTURAL “How” | TEXTURAL/STRUCTURAL “Essence” |
|---|---|--|
| <p><i>We're a team. I want them all to succeed. It was that day. I mean it was almost like watchin the "Grinch." As soon as those little Whoos started to sing . . . I mean I went from being mad and you know, because I wasn't going to be the best at something, so it was like, it was almost like, this is my sister and she's got this! These classes have been a place to connect.</i></p> <p>(Dexter, p. 9)</p> | <p>He discovered through a series of events in certain medical assisting courses, that he was beginning to reach higher levels of confidence and that he felt more comfortable trusting people he had met. An experience in a phlebotomy class when he was unable to draw blood left Dexter with that all too familiar feeling of his confidence plummeting. However, when he witnessed that a classmate did achieve the goal of successfully drawing a blood sample, he realized that he was happy for that person and noticed that he actually felt like part of a team for the first time. He shared that many classes ended up being places where he felt he could connect and be part of a team of people with similar interests who all shared personal challenges.</p> | <p>Even though he was unable to accomplish this on his first try, he still felt happy instead of the more commonly felt jealousy of other people who seemed to succeed when he did not. This was a new experience because he always felt he had to be the best at what he attempted. His positive feelings about the other student's success had given him hope and encouragement to continue with his education. He hopes to maintain the friendships that have developed while he has been taking classes.</p> |

Participant 1: Rachel

Rachel is a single 20-year-old, Caucasian female who currently lives with her parents and brother. She appeared very neatly and professionally dressed in scrubs with her hair pulled back off of her face, wearing minimal makeup. She also seemed very bright and self-confident and spoke of positive aspects of the medical assisting program overall explaining that her primary reason for choosing medical assisting is because she likes the medical field and is a “people person.” Rachel maintains a full load of classes and works at a retail store 20-25 hours each week. She explains that her parents are very supportive of her education and pay for her educational expenses.

Brief Synopsis of the Textural and Structural Descriptions of Rachel

Rachel began sharing about how emotional stress has played a large role in the state of her current well-being.

Um, well, recently; well, not recently, but I think it was last October I had moved in with my boyfriend and that made my parents sad kind of. They were not ready to you know, let me go and do something like that and then we had broken up in January and I had to move back home and I wasn't very happy about it. I was just really, it really depressed me. I didn't wanna have to live with my parents again after that and I was really upset and I just couldn't focus on anything. My school work was going down the drain. I didn't want to go to work. I didn't want to do anything and that just that had a lot to do with well-being. I lost a lot of weight. I wasn't eating. I wasn't sleeping right. It was very stressful and they felt bad because, you know, they had sold all of my stuff. (Rachel, p. 7)

A routine annual visit to the doctor revealed physical issues new to Rachel. Not only had she lost a considerable amount of weight, but she was also diagnosed with high blood pressure, endured several types of tests, urged to change or stop the birth control method she was using, and prescribed anti-anxiety medications for the emotional breakdowns that she was experiencing. Rachel believes that these physical findings were all linked with the relational and emotional stressors that she was attempting to work through.

Textural-Structural Composite Description of Rachel

Rachel's perspective of personal well-being is described as how an individual feels at the beginning of the day. Her personal well-being was impacted greatly as she described relational choices that she had made in the recent past, which affected many of her days. One example that Rachel talked about had to do with her decision to move out of her parents' home and to move in with her boyfriend. This choice resulted in not only sadness for her parents, which in turn upset her, but was also a major disappointment to Rachel when she ended up breaking up with her boyfriend and moving back home. She explained how she was first of all upset about the breakup, but also didn't want to move back home with her parents who, in the meantime, had moved into another home and sold Rachel's bedroom furniture. This caused her to lose a sense of independence, and was inconvenient considering she was working and trying to maintain her grades in the medical assisting courses she was enrolled in at the time. Rachel admitted to not wanting to do anything at all as a result of these changes in her life. She felt depressed and sad. Her grades dropped dramatically, she found it difficult to sleep, and did not have an appetite.

During a timely routine visit with her doctor, Rachel was told that her weight had decreased quite a bit and that she had developed high blood pressure. The blood pressure elevation resulted in a battery of other diagnostic tests that revealed that Rachel's blood pressure

was likely being affected by her elevated stress levels, but also possibly by the birth control method that she was using. She explained further that there were no birth control methods that she could use which presented even more stress. It was eventually determined that Rachel was experiencing anxiety breakdowns and would likely benefit from anti-anxiety medications. She felt that the medication helped her to cope with the relational and emotional stress so that she can still do well in school. She also shared that had there been some type of counseling services available at the school she is attending that she would have tried talking with someone about her problems and try to learn how to cope better.

The area in which Rachel felt that her well-being was most fulfilled includes emotional because of the support she receives from her parents and friends. She also feels that she has a strong environmental well-being as a result of the people around her who support education. The well-being aspects that are least fulfilled according to Rachel include financial and social. She went on to explain that even though her parents pay for all of her educational expenses, the amount of money that it takes to drive to work and school leaves little money for extra things. As far as the social aspects of her life, Rachel explained that her friends are somewhat scattered everywhere, but also that she has no time for a social life. Her work schedule and class responsibilities take almost all of her extra time. She described her well-being as being very similar to an “ongoing stopwatch.” She explained that she is going constantly without ever stopping. She also finds a lot of similarity with her personal well-being in the television show “Teen Mom.” Rachel explained that the current episode is similar to her life right now only without the baby. She discussed further that the teen mom in the current episode focuses only on her baby, which is similar to how Rachel tries very hard to focus only on school. Rachel looks forward to the time when she can graduate from college and spend more time with friends

socializing in her spare time. For the present time however, she maintained that she was thankful for the opportunity to get an education and for all of the support that she has from her family.

Participant 2: Dexter

Dexter is a 38-year-old, Caucasian male who lives alone. He is divorced and has three children who he sees regularly. He works 40-50 hours each week in a facility for developmentally-disabled individuals. Dexter also attends college full time, taking 12-15 credit hours each semester. He credits his grandmother, who was a nurse, for inspiring him to work in the health care field. He also wanted to work in an area in which he could help people. He explained that he has always been interested in healthcare but that most of his work has, until recently, been factory work. Dexter appears very relaxed in shorts and a hooded sweatshirt and is clean and well groomed. He is friendly and enthusiastic throughout the interview.

Remarkable changes in his overall affect were apparent when discussing delicate matters of his past.

Brief Synopsis of the Textual and Structural Descriptions of Dexter

When asked if he could think of any personal experiences or situations that had impacted his well-being during the time he had been attending college, Dexter shared the following:

Yeah, ah, when I first started school, once I got into like my first time taking anatomy and stuff like that, I had a lot going on at home. I mean, I ended up being homeless for about a month. I basically just quit coming to classes and you know, obviously failed all of them. I was living in my truck just driving from parking lot to parking lot. I mean, I would really just sleep. I'm bipolar anyway and was not medicated at the time because I didn't have insurance. I didn't, I don't, have a huge group of, a close knit group of friends. I've always just been by myself and what couple family members I have. I guess

once you get to that place, it's a pride thing for me. I was embarrassed for what I was going through. So, I, you know, I just kept it to myself. Trust issues are one thing that I've always had because I've been burnt so many times by people that I did trust that it's hard for me to let somebody in. (Dexter, pp. 6, 7)

Hearing a certain song on the radio had inspired Dexter to make a decision to either end his suffering or get help. He chose to talk to his mother and to try to work through the difficulties. He described struggles in his past with alcohol and drug abuse and how these issues had led him to suicide attempts on two occasions.

As circumstances began to become brighter for Dexter after asking for help and trying to stay focused, he discovered that he had been placed on academic probation. Even though this is generally not a good place to be, Dexter felt relieved that he at least had another chance toward achieving an education. He discovered through a series of events in certain medical assisting courses, that he was beginning to reach higher levels of confidence and that he felt more comfortable trusting people he had met. An experience in a phlebotomy class when he was unable to draw blood left Dexter with that all too familiar feeling of his confidence plummeting. However, when he witnessed that a classmate did achieve the goal of successfully drawing a blood sample, he realized that he was happy for that person and noticed that he actually felt like part of a team for the first time. He shared that many classes ended up being places where he felt he could connect and be part of a team of people with similar interests who all shared challenges as well.

Textural-Structural Composite Description of Dexter

Personal well-being was described by Dexter as those factors that make you, you and include more than just factors having to do with health. As he went on to describe personal

struggles that he had endured, it became clear that his well-being had been challenged in many ways. A diagnosis of a bipolar personality disorder meant that Dexter needed to take medication daily to control this disorder so that he could function optimally. When he did not take the medication because of the lack of medical insurance to cover the cost, he found that he was unable to attend classes regularly, maintain a steady job, or maintain meaningful relationships. In addition, Dexter discussed how he had become addicted to alcohol and drugs and would rarely sleep from the manic phases of his disorder, and then eventually slept for long periods of time. While this life-style led to many closed doors and disappointments in Dexter's life, he was able to work through a series of events and enroll in courses in hopes of earning a health-care related degree. However, his first semester of college was somewhat of a disaster when Dexter found himself homeless and living in his truck. He explained how he slept most of the time because of his depression, drove from parking lot to parking lot, donated plasma for money, and would shower at the YMCA. This went on for a month before Dexter finally decided to ask his mother for some help and guidance. A song he had heard on the radio prompted him to seek help as the alternative was going to be to end his life, as he had actually attempted on two occasions in his past. Instead, he chose to try to work through these difficulties. Dexter was placed on academic probation after failing all of his courses the semester he was homeless. While that type of news is usually discouraging to students, Dexter shared that he was happy to have been given another opportunity to achieve an education.

Dexter explained with enthusiasm how many of his classes have offered him the opportunity to establish healthy relationships with other students who shared similar goals. Although it had taken some time, he feels comfortable and like he is part of a team now. He shared an experience that he had had in a phlebotomy course when a fellow classmate had

successfully drawn blood from another student. Even though he was unable to accomplish this on his first try, he still felt happy instead of the more commonly felt jealousy of other people who seemed to succeed when he did not. This was a new experience because he always felt he had to be the best at what he attempted. His positive feelings about the other student's success had given him hope and encouragement to continue with his education. He hopes to maintain the friendships that have developed while he has been taking classes.

When reflecting upon his personal well-being, Dexter believed that the two areas most fulfilled in his life right now are the social and emotional aspects. He felt strongly that being a part of the college classes in which he has been involved has encouraged his personal growth socially, which has also impacted him emotionally. As a result of attending classes, continuing to work through his personal challenges, and maintaining a positive attitude, Dexter has managed to greatly improve his ability to trust people, develop relationships, and improve his level of confidence, even though he admits to experiencing personal struggles from time-to-time.

As he continues to work full time, maintain a full load of course work, and manage to spend time with his family, Dexter feels extremely busy and compares his personal well-being to a spinning top. While the speed of the top does not necessarily change all that much, the constant motion represents a strong similarity to his well-being at this point in time. He also shared that there is significant symbolism, present in music that reflects his life and well-being. Music is tremendously important to Dexter and has actually helped him make important life decisions. He shared that he relates just about everything to music in some way. As far as his well-being at this time, two songs came to mind, including "Demons" by Imagine Dragons, which he explained is really more symbolic of where he was in life in comparison to now and "Counting Stars" by One Republic. The latter is a more positive version of his present well-

being and one that inspires hope. As Dexter continues to diligently work and prepare for a career in health care, he feels uncertain of where he will work, or the type of specialty area he will work in, but shared that he does feel much more connected and confident as a result of his experiences during college.

Participant 3: Shyann

Shyann is a 25-year-old, Caucasian female who is married and has three children. She is a full time student and also cleans houses three to four days each week, which she explains is equivalent to a full time job. Shyann seems to glow and appeared very clean and well-groomed in scrubs and had minimal makeup. She explained that she chose to pursue medical assisting as her area of study because she enjoys working with people and has had experience working as a home health aide in the past. She feels very comfortable working with the elderly population and explained that one of her major strengths is her ability to be a strong leader.

Brief Synopsis of the Textural and Structural Descriptions of Shyann

Shyann was asked if there had ever been an experience or situation in which she felt that her personal well-being was greatly impacted.

Like a little while ago, it's been a couple of months ago, my husband and I separated.

That was kind of hard but we worked everything out. My husband was overseas so I had the kids in school and thank God family that helped, but I think you just have to kind of keep going cause Lord knows if you stop, you just kind of get depressed and it just . . . I don't know; you can't focus enough to do anything. (Shyann, p. 6)

Adjusting to the reality of life here for her husband, as well as adjustments for Shyann and her children, presented challenges to each of them. Her children were a driving force in working out their marital differences. She indicated that she felt her children needed stability

and would, therefore, prefer to make the marriage work if at all possible. The father of her two older children is not a part of their lives, which she underscored, was difficult for the children to accept. For this reason, avoiding another major disappointment in her children's lives by keeping her family together is even more vital. The independence and level of responsibility that Shyann had developed, while essentially playing the role of a single parent, was altered when her husband returned. Day-to-day living was suddenly different which presented challenges for both Shyann and her husband. Even though they were able to work things out for the most part, a lot is required of both of them as they continue to adjust to the differences of being together as a family again.

Textural-Structural Composite Description of Shyann

Shyann's perspective of personal well-being is described as feeling happy, being healthy, and knowing that the details of life are going well. As she diligently worked daily to make sure that her children were taken care of, she was keeping up with her course work, and maintaining a schedule of cleaning homes for other people, Shyann discovered that she was not experiencing a high level of well-being.

After experiencing the estrangement of her older two children's father causing her to assume the role of a single parent, Shyann became accustomed to living independently and making decisions on her own. After she met her husband and they got married, they had a child and she discovered that having another parent in the home worked well as they were gradually able to establish a plan to divide the day-to-day responsibilities. Eventually, however, Shyann's husband had to leave to fulfill a military commitment for 12 months, returning, and then leaving again for 15 months. During these time frames, Shyann and her children had developed somewhat of a routine that they became used to following, and she began handling situations

independently. When Shyann's husband returned home after the second time of being away, the smoothness of her life and routine was altered and things became difficult within their marriage. She was not feeling happy or healthy, and the details of her life were not going well. As a result, Shyann and her husband ended up separating.

The idea of having yet another person who was important in her children's lives leave them was very difficult for Shyann to accept. The driving force then in saving her marriage was to provide stability to her children. She and her husband spoke with a family friend who was a counselor, and they were able to find ways of working through their differences but continue to adjust to the changes of her husband's return.

Shyann's fluctuating experiences of being completely independent and making all of the family decisions to having another adult in her life have played a significant role in her strong identity with her work and occupational well-being. This particular area of well-being in Shyann's life offers her not only an income to support her family with, but also independence, leadership as a trainer of other house cleaners; time alone, and another way of feeling useful. This is an area in which Shyann has been encouraged and told that she is doing a good job.

The other area of well-being in which Shyann feels is strong in her life is the area of spirituality. Her spiritual life has provided Shyann with strength as a single parent and encouragement to continue. She has found ways of incorporating spirituality into her life without necessarily having to attend worship services regularly. She maintains that she is very thankful for this force in her life.

Shyann hopes to improve upon the other areas of well-being. In particular, she hopes to make improvements in the area of physical well-being. Her busy schedule and responsibilities cause her to not make the healthiest food selections or get enough sleep daily. She compares her

personal well-being to a ball being passed around with the inability to stay in one place very long. She would like to stay, but she feels that she is the only one who can do what needs to be done so she has to be passed quickly to the next person. When reflecting on movies or characters that remind her of her well-being, Shyann recalls Will Smith in the movie “I Am Legend.” He plays a character who is always alone and the only person who can accomplish what needs to be done. Her experiences in which she has repeatedly been left alone to manage independently have caused Shyann to feel alone most of the time, but also to accept this as a normal way of life.

While she feels that her busy schedule could lighten after she completes her medical assisting degree, the idea of having extra time is somewhat unsettling to Shyann. If she does not have an extremely busy schedule that keeps her mind occupied constantly, she is concerned that she will be forced to reflect upon situations from her past and present that she does not feel she is prepared to cope. The idea of having a place to go on campus that was affordable to talk with someone about how to cope with unsettled feelings was very appealing to Shyann. She looks forward to new challenges, but also feels a sense of uncertainty toward her future concerning job changes.

Participant 4: Brooke

Brooke is a 38-year-old, Caucasian female who is a single mother. Her 17-year-old son, 14-year-old daughter, and 9-month-old granddaughter live with her. She is a fulltime community college student and has worked fulltime as a Certified Nursing Aid (CNA) for 13 years in a nursing home in the town in which she lives. Her interest in medical assisting was inspired from her work as a CNA and because she describes herself as a people person. She appeared neat and professional in scrubs and maintained a very relaxed demeanor throughout the

conversation. She did, at times, move her knee up and down nervously as she spoke, but for the most part seemed comfortable.

Brief Synopsis of the Textural and Structural Descriptions of Brooke

When asked to explain what personal well-being meant to her personally, she explained that she really just tried to go through life every day.

You know for instance my son, and what mood he's in on that day. It all depends on how my son wakes up. He has a lot of issues and we have child psychologists coming to the house and a social worker. I also have a counselor outside the house that I take him to because of his bipolar disorder. His days fluctuate. I have to deal with him in a different way than what I do with my daughter who's 14. I have to give more of my time to him. She's very helpful and understands. Whether we're gonna have a good day, or whether we're gonna have a bad day; you never know. With my granddaughter's mother still being so young and stuck in the drama stage, I mean, we deal with the drama from that you know give or take. (Brooke, p. 5)

Brooke recalls another certain incident having to do with her son that has impacted her well-being in many ways. Nine months ago, her son's daughter was born. She was only given a two-week notice that this was going to happen. While Brooke already felt emotionally and physically exhausted most of the time, this became a new focus. The unexpected birth of her granddaughter impacted Brooke's emotional, intellectual, financial, and spiritual well-being. Her son was afraid of being a father at such a young age, which added to her concerns. Her grades went down since she was forced to miss classes during that time frame. In addition, the birth of her granddaughter resulted in more financial expenses. The spiritual force in her life, however, helped Brooke during this time of change.

Textural-Structural Composite Description of Brooke

Brooke described her perspective on well-being as involving a combination of many different aspects. She explained that a combination of situations could occur in a day and how a person chooses to respond to them determines their well-being. As she talked about her 17-year-old son and his bipolar personality disorder, she described how her daily life and well-being are directly affected by her son's disposition when he wakes up in the mornings. After being misdiagnosed with ADHD, and then correctly diagnosed at a young age with a bipolar personality disorder, Brooke has maintained a very proactive attitude about getting her son the assistance that he needs to make his life as positive and productive as possible. Brooke explained that her son's father is a rehabbed drug addict and is not around to help her with their son. Not only is Brooke trying very hard to do all that she can for her son, whose behaviors are unpredictable on a daily basis, but she is also raising her 14-year-old daughter and a 9-month-old granddaughter.

Brooke explained that her daughter understands why Brooke must give more of her time to her son and that her daughter tries to help her. Her granddaughter was a complete surprise to Brooke when she discovered only two weeks prior to her birth that her son's girlfriend was expecting his baby. Although her son and his girlfriend are no longer a couple, Brooke shared that since she is the mother of her granddaughter that she is still in their lives. Brooke's strong feelings about family bonds and the security that those bonds bring her have helped her to accept these responsibilities with pride.

Along with her expanding family responsibilities, Brooke is also maintaining a full load of classes in the medical assisting program and working a fulltime job as a CNA. She enjoys learning and would like to become a registered nurse one day, which is partly due to the

inspiration of the nurses who she is working with. She finds her job to be very fulfilling and enjoys the social connection as well. Brooke explained that she has worked in this area for 13 years and therefore feels comfortable with what she is doing. With this in mind, it is not surprising that her most fulfilled area of well-being happens to be occupational. The area that is least fulfilled is social. Brooke explained that she does not have a lot of extra time for socializing, but that she views her children as her social life.

Brooke described her well-being as being similar to fireworks. Her son's unpredictable behavior often involves yelling and throwing objects which puts her in mind of fireworks. Since her daily well-being directly reflects her son's temper and disposition for that day, she never knows how she will spend her day or how she will feel until he wakes up. Brooke also described a song entitled "God Gave Me You" as being symbolic of her personal well-being. Even though her days can be stressful with the many responsibilities that she has, as well as the added stress of her son's bipolar personality disorder, Brooke expressed that she could not imagine her life without her children.

As Brooke spoke about her perspective on well-being and shared her personal experiences, she maintained that the way in which individuals respond to the variety of situations that are presented to them each day determines their personal well-being. She looks forward to continuing to work in the health care field as a CNA now, and hopes to work as a medical assistant or a registered nurse in the future. She plans to continue to keep her family relationships as strong and as stable as she can, and is uncertain about what her son will do in the future. She is firmly grounded in her faith and believes that God does not allow anything to happen to an individual in which they cannot handle.

Participant 5: Lynn

Lynn is a 20-year-old, Caucasian female who currently lives out-of-town with her boyfriend and her two dogs. She appeared very clean, well groomed, and neat in scrubs. Her hair was pulled back and she looked well rested. Her personality was energetic and she conversed with ease. Lynn maintains a full load of classes in the medical assisting program and works approximately 20 hours each week as a transporter at a hospital. She feels that her family and boyfriend support her educational endeavors and strives to be a positive example to her sister.

Brief synopsis of the Textural and Structural Descriptions of Lynn

When asked if she had ever experienced a situation that impacted her personal well-being Lynn talked about a time when her parents were experiencing marital problems.

In 2011 my parents were gonna go through a divorce and they got back together thankfully, but it would have been a big, nasty ongoing divorce. It started in August and I think he was messing around in July because during fair week, he just wasn't the same. He was home by Thanksgiving so it went on for about three months. I was in the middle of the whole thing. It was right when I started college in August. I know my emotional, physical, a bunch was tweaked. He cheated on my mom with his high school sweetheart so I mean and he was the one who contacted her on facebook and my mom found out through Verizon. He just wasn't himself. Sure enough, her number was there. My mom confronted him and he moved out and it was crazy. One night my boyfriend stayed with us at my mom's house cause there were no guys there; just me, my sister, and my mom. He was working in Muncie at the time and it was easier. Well, my mom and dad were trying to work things out so he was home for dinner and she called him while we were

eating. He left and my mom followed and they got in a big argument. Later on that night, we were in bed and, I'm sorry, but it's not like we are gonna do anything with my mom and my sister right there, but my dad was not OK with it. Well, he came over and told my mom he was gonna kill her and we were all right in the middle. Then, he got in my boyfriend's face and yelled at him because he was in my bed. The cops came and they were gonna fight for custody of my sister. It was just draining. (Lynn, p. 11)

A difficult time to say the least turned brighter when Lynn's parents ended up working through their differences and not divorcing. While she feels happy and relieved that they were able to stay together, Lynn is left somewhat confused as to why it all had to happen in the first place, and also with some resentment toward her father. She did add, however, that everyone involved including her parents, sister, and grandmother are more open now than before the conflict occurred. It was inevitable that they communicate and support each other if they were going to survive the type of ordeal that they were all forced to endure.

Lynn went on to describe how her family was a strong source of educational support for her. She explained that her grandmother is paying for all of her educational expenses otherwise; she would not be going to college. Lynn expressed pride in the fact that she is attending college and will soon graduate. This is even more exciting to her considering that neither of her parents went to college. She felt very strongly about setting a positive example for her younger sister to follow and believed that a college education was a vitally important part of that example.

Textural-Structural Composite Description of Lynn

Lynn's perspective of well-being was described as being good. She expressed joy and appreciation over how her life is working out in the way in which she had planned. Her plans included getting a college degree, making long-term plans with her boyfriend, and spending time

with friends. While she is currently taking a full load of course work and working 20 hours each week, Lynn still finds time to spend with her boyfriend who lives with her, as well as with her friends. Since the social aspect of her well-being is important to her, Lynn is appreciative that she is able to spend time hanging out with her friends and explained that while the social aspect of her personal well-being is important, it is a close second to being the area most fulfilled. She added that the aspect of her well-being that she believed was most fulfilled is emotional.

Although Lynn is able to cope emotionally with the day-to-day stress in her life presently, she has not always felt that was an easy task to accomplish. Because of anxiety related to school work and the cheerleading competitions that she participated in while in high school, Lynn spent a lot of her time crying and finding it difficult to cope with her daily endeavors. After this went on for a while, her mother took her to see a doctor who diagnosed Lynn with an anxiety disorder and prescribed medication to help her cope with the details of her life. Lynn continues to take the medication and claimed that when she had tried to stop taking it in the past, she experienced headaches. She adds that she feels comfortable continuing with the medication.

The area of Lynn's personal well-being in which she believed was least fulfilled is the physical aspect. She shared that she typically sleeps a total of 14 hours each day and feels tired and unmotivated often with drowsiness in the afternoons. Since she has a history of sleep apnea, Lynn wonders if this might be a problem now as well. Along with her physical well-being, Lynn believed that she should exercise more often but does not feel motivated to do this unless she has someone to exercise with. Not having someone to exercise with at the exercise facility where she works causes Lynn to choose to avoid that activity.

Lynn shared that a fairly recent situation that impacted her well-being greatly involved the marriage problems between her parents. Having the stability of a two parent home offered security to Lynn. She liked the idea that her parents were not divorced when she heard her friends talk about how difficult it was when their parents divorced. She also felt a need to protect her younger sister from experiencing the confusion at home and the impending custody battle.

As the situation unfolded and her father spent time in another relationship, Lynn discovered that the pain that her mother, sister, and grandmother were experiencing was becoming unbearable. Not only was her immediate family struggling greatly with all of the relational chaos, but her father and her boyfriend had a very heated verbal argument during this time frame as well. As hurtful words and threats were exchanged during this feud, Lynn recalled how she has difficulty forgetting that scene and moving past it even though she has forgiven her father. Eventually, her parents were able to save their marriage and the family was reunited.

As Lynn seeks to discover a silver lining around this cloud in her life, she shared that her family has become more open as a result of going through that difficult time together. She is left bruised but healing, and is especially appreciative that everything appears to be back to normal. Lynn looks forward to her future and welcomes whatever it might happen to hold for her.

Participant 6: Lilly

Lilly is a 33-year-old, Caucasian female attending college as a fulltime student and works fulltime as a dialysis technician. She chose to study the medical assisting profession because she enjoys working in the medical field and wanted to sharpen her skills. Lilly appears slightly nervous, but very pleasant and is dressed professionally in scrubs with her hair pulled back and wearing no apparent makeup. She is married and has no children, but does enjoy her three dogs.

Her husband is encouraging and supportive of her education and career. When talking about the possibility of having children, Lilly's affect brightened greatly.

Brief Synopsis of the Textural and Structural Descriptions of Lilly

Lilly was asked if there was an object that symbolized or described her personal well-being.

No, not really. I mean I feel like I'm all over the place sometimes and I keep a lot of it up here instead of letting it out. It kind of feels like that game ping-pong. Some days I just feel like it's the same back and forth and always end up in the same spots. Sometimes I might get hit off the table so I can go home. It's like I get up, I go to work, and I come here. It seems to be a well oiled routine right now. Once I graduate, it will change, but I think it will still end up being a routine. (Lilly, p. 10)

Lilly works long hours at a dialysis unit, maintains a full load of classes in the medical assisting program, and still manages responsibilities at home. While her attitude is quite positive concerning this type of daily schedule, she added that she often feels that her overall well-being is similar to a game of ping-pong. She explained that the game just kept going and she would be like the ball being hit back and forth in the same spots for a long time. Eventually, the ping-pong ball would get hit off of the table, which meant she could go home. Lilly added that she was fine with a routine similar to a ping-pong game, but had hopes for some changes after she graduated from college.

Textural-Structural Composite Description of Lilly

Lilly believed that personal well-being was directly related to how an individual takes care of themselves and is therefore determined by how much time a person has to devote to their personal well-being needs. Her spare time is rather limited at the present as she strives to balance a full time job, a full course load at school, and responsibilities at home. While she feels

that she is learning a lot at the present time in her classes to meet the intellectual aspect of her well-being, and also liked the environment where she is able to learn and study, Lilly felt that the social and financial aspects of her life are lacking.

As she spoke of her feelings about social aspects of her life, Lilly emphasized that she is not comfortable socially and does not enjoy being in any type of leadership position. She explained that she preferred to be more of a follower and also that she enjoyed a routine without a lot of new information to have to process. Her naturally shy disposition as she described is possibly part of the reason that she feels the social part of her life is lacking, but she also shared that she felt insecure with her appearance. Lilly believed that people might be staring at her and noticing what she described as a lot of acne and skin blemishes. While this particular insecurity has improved since she was younger, she continues to struggle with her perception of her overall appearance and shyness.

One particular example of a time when Lilly felt that her well-being was compromised was during an English class that she was enrolled in a few years ago. She shared that when she first began taking college courses that she took only two at a time until she became used to the pace of college life. At the time she was enrolled in this particular course, she was still trying to become accustomed to college expectations. Lilly explained that the instructor's approach to teaching the class was not what she was used to or expected. She felt uncomfortable with this instructor's direct and rather rude approach and described other students who shared in her frustration. In a short time, Lilly then began to feel ill when having to go to that class and even after the class was over. She felt that her emotional and physical well-being was directly impacted because she became so upset and physically ill each time she had thoughts of this course. Intellectually, Lilly felt her self-confidence drop dramatically. She added that over time

she was able to move past the negative experiences associated with that course, but still feels that she learned nothing from the instructor. Overall, however, Lilly shared that her experiences in college have been positive.

Lilly described her personal well-being as being similar to a ping-pong game. She related that she felt like the ping-pong ball always being hit back and forth and ending up in basically the same spots. She explained that when the ping-pong ball gets hit off of the table and the game stops, she then is able to go home. Lilly shared that while she really likes a routine, she would enjoy having a few changes added to her current schedule. She looks forward to graduating from college in a few months and shared that she had been attending college since 2007 working toward an associate's degree in medical assisting. She has no plans to leave her current job, but looks forward to whatever might happen. While sharing that she and her husband have wanted children for the past 11 years, she hopes to have a baby soon as well.

Participant 7: Sarah

Sarah is a 45-year-old, Caucasian female student. She maintains a part time course load in college and does not work. She has always had an interest in the medical field, which has inspired her to study medical assisting. In addition, Sarah described herself as a "people person" and believed that she was able to read people well. Sarah appears very relaxed in jeans and a sweatshirt and wears very little makeup. She is a widow and lives with two of her four daughters.

Brief Synopsis of the Textural and Structural Descriptions of Sarah

Sarah began to share her feelings about students in college and how well-being plays a role in student success.

If someone sets out to go to school, and you lose your sense of well-being, it just all falls out the window. It's hard to find where to start to get it back. Where do you pick yourself back up? I think this is where a lot of people give up because once you feel defeated; you don't want to put your boots back on. Not all students have a support system. I think counselors or someone to just acknowledge the problems would help. If nobody verifies that you really do have a problem then you aren't even gonna care to fulfill an emotional side or a physical side or a spiritual side. If you think nobody cares, than you're just out of the program. If you have a legitimate problem, even a simple problem that amplifies, you're stress level gets too high and people just start throwing in the towel. Then you hit rock bottom. Trying to get back up from rock bottom is a very hard situation. (Sarah, pp. 17-18)

Experiencing the difficulties and uncertainties associated with her husband's chronic illness, Sarah began to exhibit the signs and symptoms of post-traumatic stress disorder. Because her husband's initial episode of severe heart problems presented quite suddenly, Sarah was compelled to make attempts to predetermine whether or not her daughters were going to be ill as a way of trying to control a situation before it happened. She described how she would randomly wake in the middle of the night to take her daughters' oral temperatures for no apparent reason. Behaviors such as this continued until she finally helplessly left her home and family, and move in with her mother. Sarah explained that she was so overcome by feelings of wanting to prevent illnesses and negative things from happening to her family that she was eventually unable to even be around them. After six months of existing alone in a dark room, Sarah admitted that she had become quite depressed and stopped eating. After her husband gave her no choice but to return home, she decided to go back in fear of losing her husband and

daughters. Soon after returning home, Sarah was able to learn how to cope with the feelings and emotions that she had been struggling with by talking with a psychologist. Sarah emphasized that without that intervention, she would not have been able to overcome the state in which she was living. Realizing that she could not control accidents and illnesses was the beginning of her lengthy healing process. For this reason, Sarah spoke adamantly and passionately about how strongly she believed that people who are experiencing difficulties in life need someone to talk with who can help them find coping techniques.

Textural-Structural Composite Description of Sarah

Sarah described her perspective of personal well-being as involving an individual's state of mind and how well they are being taken care of. This description of well-being aligns with the life experiences and lessons that Sarah has lived. She shared that she had decided years ago to accept circumstances and challenges as they presented in her life, while adjusting her mindset when necessary. In addition, Sarah has spent most of her life caring for people in various capacities.

Assuming the role of her mother's support system at a young age and helping to take care of her ill grandmother resulted in Sarah bypassing many aspects of her youth. In addition, she became a mother herself at the age of 19, and eventually had three more children elevating her level of responsibility even more. Sarah explained further that early in her marriage, her husband was somewhat irresponsible leaving her to take care of all of the needs of the children and the other family responsibilities involved. Eventually, her husband became ill without notice. After one heart-related surgery, the outlook was favorable that everything would return to normal including the family routine and her husband returned to work. However, Sarah was

unable to cope with this sudden change in her life and began having emotional problems as a result of post-traumatic stress disorder.

Sarah had always been able to control situations that occurred in her life up until this point. However, the sudden heart surgery that her husband underwent caused her to feel out-of-control. There were no expectations or a time of anticipation of this occurrence. Sarah and her husband were in their early 30s with four children at home. For the first time in her life, Sarah felt that she had no control or plan of action related to the situation. After a long period of difficult and unusual behaviors, Sarah ended up moving away from her family and into her mother's home. While she cared deeply for her husband and daughters, being near them became more and more difficult as she was constantly taking their temperatures and attempting other measures to prevent sudden illnesses or health-related problems to happen. During these six months of existence in a dark bedroom, Sarah became more depressed, did not eat, and did not talk to anyone other than her mother on occasion. Although she made attempts to visit her daughters, she would tremble and found that she was unable to return. After Sarah's husband eventually told her that it was time to make a decision, Sarah did return home to begin a slow, gradually climb to healing. Seeing a psychologist opened Sarah's eyes to the fact that she could not prevent accidents or negative occurrences from happening. While this was the very first step toward a peaceful, productive life, Sarah also learned coping mechanisms associated with anxiety prevention. She discovered that she was worth making some changes in her thought process. Within the next year, Sarah's husband died from his chronic illness. She described this time period as a time when she did only what she had to do. It was difficult to say the least. As she continued to work through her emotional difficulties, she eventually felt ready for a new chapter in her life and enrolled in college courses.

Sarah shared that her life is well balanced at the time and felt that the aspects in her life that were not strong, were not important to her. While emotional, social, intellectual, and environmental areas of well-being were strongest according to Sarah, the spiritual aspect was not relevant to her at the present time. She also explained that the occupational and financial components were yet to be seen, but she felt hopeful that those areas would improve once she completed the medical assisting program.

A white picket fence is symbolic of Sarah's well-being. She shared that she had always associated a white picket fence with success, contentment, and happiness. The poem that she wrote and shared tells the story best, but in essence, the white picket fence is more attainable to her now, and much clearer through what she described as new eyes. The song that Sarah shared as being similar to her personal well-being is entitled, "Don't Let the Sun go Down on Me" by Elton John. She feels strongly about doing frequent self-assessments so that she can continue to make improvements and adjustments, which is something that she believes this song describes. In addition, she shared that the song encourages a positive frame of mind. She explained that she hopes to be a positive influence on everyone she meets in life.

Sarah is looking forward to an even brighter future and shared a deep desire to give back what she has learned throughout her life. While she remains uncertain about what her future holds, Sarah hopes to find an administrative medical assisting position. However, she expressed even more of a desire to strongly encourage patience and client who she meets to embrace the resources available to them for strengthening their emotional well-being. Even with a positive attitude, strong mindset, and feeling as if someone cared for her, Sarah discovered that not all situations in life can be predicted or controlled. She did unveil, through her "new eyes" however, the amazing discovery of healthy, positive control techniques.

Participant 8: Nikki

Nikki is a single 21-year-old, Caucasian female who lives with her parents. She appeared relaxed in jeans and a hooded sweatshirt; however she did seem nervous at times with obvious shaking. Nikki has been interested in working in the medical field for several years, initially in nursing. She successfully completed a certified nursing assistant certificate during her senior year of high school, which further sparked her interest in health care. Upon discovering the academic challenges of the nursing program, she decided to focus on medical assisting for now with hopes of possibly pursuing a degree in nursing later. Nikki maintains a fulltime schedule of courses, but is not employed. Her parents are supportive of her education and support her financially as well although she does receive financial aid for her education. Although this interview went well, there was a fair amount of background noise, but limited distraction otherwise.

Brief Synopsis of the Textural and Structural Descriptions of Nikki

During a conversation about well-being dimensions, Nikki explained that she is not where she would like to be socially.

Like a lot of people right now in my clinical class; they have strong bonds with each other because they have other classes with each other or knew each other before. They have connections. I feel like I'm an outcast because I don't have those bonds. A lot of times, I catch myself, and this is a habit that I really have a problem with. I'm slowly trying to work on how to change myself from doing this, but, well, I have a really bad habit when I get that feeling of being out casted. I make up fictitious stories to try to fit in with people around me. I did that this semester with my clinical class. Like I made up a big huge story and I had it going for weeks. I knew it was all a lie and every day I had to

come up with new ways to keep the lie going so I more or less had to use a lie to cover up a lie. (Nikki, p. 10)

An important aspect of well-being that Nikki described as being important was emotional balance. The relationships that have been severed in Nikki's past have taken her to a difficult point in her life emotionally. She described how she has struggled to find peace and acceptance from these losses but shared that she continues to feel confused and alone. Not only is her emotional well-being lacking at the present time, but she also shared that she feels that her social life has been impacted negatively as well.

Nikki shared how she continuously felt that she does not seem to fit in with social circles in her classes. She explained that it is difficult for her to find common ground with people who she meets and has even gone to the extreme of making up stories in an attempt to be noticed and feel included in social circles. While this has proven to be a very extensive, exhausting approach to making friends, Nikki is appreciative that some of the students in one of her courses have recently approached her about her stories and tried to help her. She added that her lack of time also prevents her from enjoying more of a social life.

Textural-Structural Composite Description of Nikki

Nikki's perspective on well-being was described as including many things. The first aspect that she discussed was that of having emotional balance. In addition, she commented that she felt it was important to not allow personal issues to overlap with work or school responsibilities. As Nikki begins sharing about the relational struggles she had endured in her recent and distant past involving death and romantic break ups, it became clear that her emotional well-being was not in balance and she was having difficulty preventing her personal pain from overlapping with her performance at school. As she continued to speak of well-being

and areas she felt were strong in her life, she shared that spiritually she felt that she had grown as a result of the loss and pain that she had experienced. She is beginning to accept that things happen for reasons.

The recent death of a very close friend, the death of her grandfather when she was quite young, and the end of a relationship because of dishonesty contributed to very difficult situations in Nikki's life. Not only was her emotional well-being impacted negatively, but Nikki also experiences social-related struggles most of the time. She shared that she feels disconnected with other students on campus and never seems to bond with people in her classes. Because of her feelings of disconnect class after class, Nikki admitted to continuously making up various stories and then adding to them each class period as a way of getting attention and feeling as if she fit in. Eventually, a few students in one of her current classes approached her about her stories feeling confused, but also concerned for her. Nikki expressed that she trusted these students and felt very appreciative that they cared enough to talk with her. This was the first time anyone had directly questioned her fictitious stories and also her motives for creating them.

Nikki feels like a basketball in a basketball game. She shared that her well-being was a lot like the way a basketball would probably feel during a game. The constant dribbling motion in all different directions represented her busy schedule on a daily basis. She added that when she was thrown into the goal that meant that she had accomplished something and that made her feel good. However, that brief moment of accomplishment did not last very long until the dribbling began again. The movie *High School Musical* is another example given by Nikki that she felt was similar to her well-being. She described the relational drama, academic struggles, and social clicks as being the focus of the movie, which she felt represents her well-being fairly accurately.

The social experiences in Nikki's life are very limited which impact her emotional well-being as well. As she goes through the motions of each day, she is surrounded by other students who share many of the same goals that Nikki has. Many of them are close to her age, single as she is, and may even live with their parents. The only thing that is missing is a connection. Nikki struggles with finding the tools necessary to make a healthy social connection. She is very busy, feels challenged, and has experienced negative consequences to her social approaches in the past. In addition, she has experienced loss of people who she loved. This combination makes it difficult for Nikki to know where to begin with establishing healthy relationships.

Nikki looks forward to graduating from college and finding a job so that she can live more independently while strengthening her financial and occupational well-being. In the meantime, she continues to struggle from day-to-day socially, and therefore, emotionally. She remains uncertain as to how to improve this area of her life, but is openly anxious to learn about ways of developing strong, healthy relationships. Nikki expressed interest in counseling services and added that having that resource available on campus would be very convenient. She added that having organized study groups in the required program courses would be helpful as well.

Participant 9: Rue

Rue is a 50-year-old, Caucasian female who is married and has two middle-school-aged children. She explained that her husband and children are very supportive of her educational endeavors. Her reasons for choosing medical assisting as her major area of study were primarily because of the stability of the health care field, but also because she enjoys working with people of all age groups. In addition, Rue feels it is important to have a way of providing for her family if ever necessary. She spoke with a quiet but clear voice throughout the interview, was dressed professionally in scrubs with her hair pulled back, and wore minimal makeup. There was no

distraction until the very end of the interview when conversations in a nearby hallway could be heard.

Brief Synopsis of the Textural and Structural Descriptions of Rue

Rue began to share personal experiences that have impacted her life and well-being.

I lost my father, um, it will be 19 years now. I was 30 something. It wasn't expected at all. He had a heart attack. He had been a smoker and had emphysema. I feel emotional about it even still now. I proved my father wrong on several things. He said I would probably never accomplish anything with my life. I proved him wrong. He told me that before he died. I think it was because of the way he was raised. He was not treated very well so I think that kept with him growing up. He was thinking that maybe his child was going to be like that. He told me that I had proved him wrong before he died. (Rue, pp. 4, 5)

The challenges and barriers presented to Rue as a result of her shy personality have impacted her emotional well-being. Therefore, the emotional aspect of her life is weaker than she would like for it to be. While feeling shy and backward was difficult enough for Rue as a young girl, she also shared how her father had told her years ago that she would likely not accomplish anything in her life. This lack of parental support fueled her shyness and led to low levels of self-confidence. Even though Rue was relieved to hear her father tell her that she had proved him wrong just prior to his death, Rue shared that she continued to feel shy and experienced difficulty with public speaking and socializing in general. She added that speaking in classes and working with the public in the past had helped her to find ways of coping with her shyness.

Textural-Structural Composite Description of Rue

Rue describes her personal well-being as being based primarily on time management. Arriving late to a class or to an appointment is very difficult for Rue as she becomes quite overwhelmed with frustration. Another area in which she feels impacts her well-being greatly is how her family is doing. Rue explained that she could only feel as well as her family was. Her emphasis on family was evident in how she shared her educational expectations for her two children, and how she strives to be a positive role model in their lives.

As a child, Rue shared that her father did not express great expectations of her when he told her that she would likely not accomplish anything in her lifetime. While she already struggled with a shy disposition, hearing her parent say discouraging words such as those deepened her lack of self-esteem. When her father admitted prior to his death that she had proved him wrong and really had made accomplishments in life, Rue felt a sense of relief and happiness. However, the emotional imprints that were left from her father's degrading comments in her past continued to be vivid.

Along with Rue's attempts to improve the emotional, social, and time management aspects of her well-being, she also feels a need to strengthen the spiritual side of her life. She feels well established in her spiritual belief system of Christianity, but would like to find peace with some of the questions that remain in her mind about why people who she loves must suffer. Her intense desire to support the well-being of her family members makes it difficult for Rue to accept the fact that certain family members are not physically well. She shared that she plans to attend church services more often with her family in hopes of discovering peace. Since Rue does not believe that people should question God, she does not expect to find answers to her questions, but welcomes a sense of peace.

A word search was the object that Rue described as resembling her personal well-being at the present time. She explained that she felt that a word search was an excellent example of her well-being because she is actively searching for something new. She added that she might possibly be searching for some type of new direction. The musical, *The Sound of Music*, was also mentioned by Rue as reminding her of her well-being. In particular, the scene in which the family was forced to leave because of the onset of war stood out in her mind. She compared this scene with a time when she left her home state to follow her husband to where his family lived. Her desire to follow her husband wherever he went was something that Rue had no problem doing. She described the smoothness of the transition as being a result of her old fashioned way of thinking when it comes to family.

Rue is looking forward to graduating from the medical assisting program very soon and remains thankful for the opportunity to complete college. Continuing her education has been important to her in many ways. One of those involves being a role model for her children in hopes that they too will attend college after high school. Also, the completion of a college education is an accomplishment that will continue to help improve Rue's self-esteem and confidence level, as well as provides a means of financial security. Finally, success of any type will remind Rue that she really has accomplished something in her lifetime. Her search for a new direction remains uncertain, but hopeful.

Participant 10: Lucy

Lucy is a 49-year-old Caucasian female who is divorced and lives with her teenage daughter. She also has a son who is away at college. She is a full time student and works in an office part time. Lucy was casually dressed in black leggings, a sweater, and boots and appeared very neatly groomed. She spoke with confidence throughout the interview. Lucy chose to major

in medical assisting in hopes of specializing in the administrative aspects of the profession since she has a strong administrative background. She feels that her parents and children strongly support her educational endeavors.

Brief Synopsis of the Textural and Structural Descriptions of Lucy

Lucy began to share how her personal experiences with divorce, losing a lucrative family business, and home foreclosure had impacted her well-being.

I was lacking in self-confidence, I had been living in quite a bit of denial, and just; I was a mess. So, my first semester here was difficult and stressful and I managed to progressively put myself back together, but this past August, I felt ill and the doctors couldn't tell me what was wrong and I spent almost two months going through all kinds of testing. Everything in the book. What they finally led to at the end of September was a diagnosis of inflammatory arthritis, but in the course of all that testing, because they tried everything else, they decided to run tumor marker panels and the tumor marker panel for ovarian cancer came back elevated so they found a mass in my uterus which the only way they could determine if that was cancer or not was for me to have an emergency hysterectomy which I did at the end of October. There was no cancer so I've got medication now to get the inflammatory arthritis under control. Prior to that, I'd been diagnosed with fibromyalgia when I first came back and the doctor figured that all the stress was the trigger for that. (Lucy, pp. 5, 6)

Lucy's marriage ended soon after she relocated back to her home town. She and her daughter found a place to rent and her son went off to college. Even though the end of the relationship became legal, the disagreements did not. The stress of those conflicts as well as a completely different lifestyle led Lucy to feeling emotionally exhausted. Even though she was

working through a difficult time, Lucy enrolled in college and began taking classes two months after her relocation. In just a short time, she began to feel ill and after a series of examinations and tests, she was undergoing a hysterectomy and eventually taking medication for fibromyalgia. Not only was Lucy suffering from physical exhaustion from all of the emotional changes in her life, but she then found herself experiencing physical illness. Fortunately, Lucy was able to recover and continue with her education even though she had fallen behind in her classes. She was unable to work during the time of her illness and surgery causing even more financial stress.

Textural-Structural Composite Description of Lucy

From Lucy's point of view, well-being was described as having fulfillment in all areas of life. However, in reality, this was hardly true in her case. Her personal well-being was impacted greatly during a time that she described causing relational, physical, occupational, financial, intellectual, social, and environmental changes that she was attempting to adjust to just prior to enrolling in college courses. As she endured divorce proceedings, financial hardship, and losing her home, Lucy was feeling anything but completely fulfilled. Her personal well-being was compromised greatly as a result of all of these life-altering changes.

After finding herself more settled than she had felt in a while and enrolled in college, Lucy then became ill and consequently endured a battery of diagnostic tests and procedures. Eventually, she underwent surgery with successful results and was prescribed medication to help her with pain management. All of this could have been accomplished in a more timely fashion had Lucy had major medical insurance. While not completely healed from the difficult life experiences that she had already endured, Lucy was once again feeling the impact on her personal well-being.

Lucy shared that a strong force for her in dealing with difficult times and managing stress is her spiritual belief system. While all of the other aspects of her well-being were impacted in negative ways for several months, Lucy was grounded by her faith in God and was able to find peace and hope to push through the hardships and move toward a more positive place in her life. Watching the movie *Sweet Home Alabama* also encouraged her to search her soul for truth. Similar to a character in that movie, Lucy discovered that she was not where she needed to be and that her true success was not determined by where she lived, but rather by whether or not she was being true to herself. This discovery led her to the security and safety of her home town where Lucy believed she could truly feel happy, and at the same time, find success. She added also that her personal well-being was similar to a teenage child attempting to imagine a future, but unsure of what to expect.

The future ahead of Lucy is uncertain, but strangely exciting and she is thankful for being able to have learned from the difficult times that she had experienced. She felt strongly that the sense of belonging she had developed was the basis of all that she will accomplish. With this positive outlook, Lucy moves closer to completing her degree. She shared that she had always valued education and felt as if she had failed when she chose to leave college years ago to move out-of-town with her husband. As Lucy has managed to gradually redevelop each aspect of her well-being, the intellectual gap that she had described will also soon be filled.

Process of Establishing Significant Statements and Themes

The following process, based on the work of Stevick (1971), Colaizzi (1973), and Keen (1975) which was modified by Moustakas (1994), and then simplified further by Creswell (2013), was used for establishing the significant statements and eventually identifying the themes that emerged from those statements.

- Step 1: Data from each interview was transcribed within 48 hours of the interview session.
- Step 2: Audio tapes of each interview were reviewed a second time.
- Step 3: Field notes were reflected upon.
- Step 4: Member checking was completed.
- Step 5: Analysis process began.
- Step 6: Each transcript was read one time reflecting upon the interview experience.
- Step 7: Transcripts were read slowly two days later, while circling key words or significant statements that reflected the research question in orange.
- Step 8: The significant statements that were circled in orange were then listed under corresponding well-being dimension titles.
- Step 9: A list of the statements that were circled in orange was made that described the symbolic objects the participants mentioned as representing their personal well-being.
- Step 10: A list of statements was made that symbolized the participants' well-being through a movie, television show, poem, or song lyrics.
- Step 11: Two days after these lists were established, another reading of the transcripts took place in order to identify significant statements that were common to more than one participant.
- Step 12: A dark blue mark was made next to those significant statements that were listed under each corresponding dimension title that was identified in more than one participant transcript.

Step 13: All of the significant statements with a dark blue mark were then typed to create a combined list of 94 “Significant Statements.”

Step 14: A final reading of each transcript was then conducted to identify only those significant statements that stood out as common to all participants.

Step 15: The common statements were then circled with purple ink.

Step 16: A reduced list of 60 “Significant Statements” was then created.

Step 17: The reduced list of significant statements were then grouped into five larger units or themes: (1) relational aspects related to well-being experiences, (2) time management and well-being experiences, (3) appreciation for improved well-being, (4) uncertainty of new beginnings, and (5) hope for a future of balanced well-being.

Dimensional Findings of Participant Well-Being

The literature reviewed for this study was comprised of quantitative studies related to college student well-being and typically provided data reflecting the areas of well-being most fulfilled and least fulfilled by college students. Therefore, it is appropriate to consider this aspect of student well-being within this study as well.

The well-being dimension claimed as being most fulfilled by the majority of these participants tied between occupational and social well-being. Out of the ten participants interviewed, three said that their occupational well-being was most fulfilled and three claimed that the social aspects of their personal well-being were most fulfilled. Each of the emotional, intellectual, environmental, and physical well-being dimensions were mentioned as most fulfilled by one participant, while the financial and spiritual dimensions were not mentioned as most fulfilled by any of the participants.

The dimension of well-being least fulfilled at this particular time in the participants' lives was financial with physical as a close second. The financial dimension was reported by four of the participants as being least fulfilled in their lives at this time. Physical well-being was least fulfilled by three of the participants, two felt that they were least fulfilled socially, and one felt spiritually unfulfilled. There were no participants who felt that they were least fulfilled emotionally, intellectually, occupationally, or environmentally. Table 4 illustrates these findings.

Table 4

Dimensional Well-Being Ranked by Participants as Being Most Fulfilled and Least Fulfilled

| Well-Being Dimension | Most Fulfilled | Least Fulfilled |
|----------------------|----------------|-----------------|
| Emotional | 1 | 0 |
| Environmental | 1 | 0 |
| Financial | 0 | 4 |
| Intellectual | 1 | 0 |
| Occupational | 3 | 0 |
| Physical | 1 | 3 |
| Social | 3 | 2 |
| Spiritual | 0 | 1 |

The dimensions are listed in alphabetical order. Participant responses were taken directly from the individual transcripts.

Unified Composite Description with Themes that Emerged

Introduction

Moustakas (1994) identified the last process in phenomenological investigation as the synthesis of meanings and essences into “a unified statement of essences of the experience of the phenomenon as a whole” (p. 100). The composite descriptions of the participants represent how they experienced what they experienced with regard to their personal well-being as a group.

As detailed previously, textural descriptions were written that included the exact words of each participant in order to illustrate and provide specific examples of each participant’s lived experiences concerning their personal well-being. These textural descriptions were examined, reflected upon, and then used to compose a structural description for each experience. The structural descriptions represent how the well-being experiences that were discussed in the textural descriptions happened. The textural and structural descriptions for each participant can be found in Appendix D. From the textural and structural descriptions, a textural-structural composite description was then written for each participant. These textural-structural composite descriptions provided the meanings and essences of each participant’s experience. Although the exact words varied from participant to participant, a clearer picture of each participant’s lived well-being experiences was revealed.

The following section of this chapter represents the unified statements of well-being experiences of the participants as a whole. Each of these composite textural-structural descriptions is centered on a specific theme. Table 5 was constructed to serve as a guide in writing the composite textural-structural description of the participants as a whole.

Table 5

Emerged Themes as Related to Participants as a Whole for Composite Textural-Structural Description

| Participant | Relational | Time | Appreciation | Uncertainty | Hope |
|-------------|--|----------------|---|---------------------|-------------------------|
| Rachel | Boyfriend Parents Friends | Stopwatch | Education Family | Health | Time Money |
| Dexter | Family Divorce Children | Spinning Top | Past Experiences Class Bonding Confidence | Education Career | Better Life Security |
| Shyann | Husband Kids | Ball | Schedule | Career | Time |
| Brooke | Son Daughter Grandaughter Parents Co-Workers | Little Sleep | Children | Son Career | Son |
| Lynn | Parents Boyfriend | A Lot of Sleep | Life Grandmother | Career | Graduation |
| Lilly | Husband Dogs | Schedule | Progress Husband | Career | Graduation Baby |

Table 5 continued

| Participant | Relational | Time | Appreciation | Uncertainty | Hope |
|-------------|----------------|-------------|--------------|-------------|--------------|
| Sarah | Husb./Death | Pace | New Eyes | Career | Goals |
| | Daughters | | | | Positive |
| | Mother | | | | |
| Nikki | Friend/Death | Basketball | Spirituality | Career | Independence |
| | Family/Death | | | Social | |
| | Social Anxiety | | | | |
| Rue | Family | Huge Factor | Education | Career | Searching |
| | Father/Death | | | | |
| Lucy | Divorce | Urgency | Spirituality | Career | Child's Eyes |
| | Children | | Realization | | |
| | Parents | | | | |

Note. The participants were listed in order of their interviews. All of the information was self-reported.

Theme 1: Relational aspects related to well-being experiences

Each of the 10 participants expressed consistently strong associations between relational aspects in their lives and how those relationships impacted their personal well-being. These associations ranged from varying degrees of impact. In many situations the relational influence was positive and supportive; others were experiencing the reality of lost relationships; some were dealing with relational issues from their past; and in some of the participants' stories, they were

struggling with certain difficulties involved with relating to themselves. Therefore, a few of the participants suggested that their relational struggles were mostly with themselves. As the participants' shared their personal accounts of relational aspects related to well-being in their lives, they began to describe how their relationships had influenced other areas of their personal well-being. In all of the stories shared concerning relational aspects of well-being, emotional well-being was the area of greatest impact on the overall well-being of these participants.

Rachel shared that she became depressed during the time that she had moved away from her parents' home and in with her boyfriend only to end up moving back home. She explained, "It really depressed me; I didn't want to have to live with my parents again after that and I was really upset and couldn't focus on anything" (Rachel, p. 7). Rachel also explained how she misses her friends who seem to be scattered right now. Dexter felt embarrassed for situations relating to addictions that he had developed and struggled with. His relational difficulties involved learning how to accept himself. Shyann expressed emotional upset when trying to adjust to having her husband home after being gone for a long period of time. In Brooke's story she shared that her emotional well-being depended completely on her son. She added, "I never know how my son will wake up" (Brooke, p. 5). Lynn felt emotional upheaval during a time when her parents were contemplating divorce. Lilly, Nikki, and Rue all struggled with the emotional affects of feeling insecure socially and learning how to develop relationships. Sarah described an extended period of her life as feeling extremely depressed and not knowing how to find help. Finally, Lucy felt emotionally drained as she worked through the overwhelming changes associated with divorce, relocation, and financial challenges as a result of relational difficulties and leading to environmental and financial adjustments as well.

The participants began commenting about how many other aspects of their well-being also suffered. For example, Rachel, Dexter, Lynn, Sarah, Nikki, and Lucy shared that they began experiencing so much emotional stress that their physical well-being was compromised and in several cases led them to seek medical attention. Rachel, Dexter, Lynn, Sarah, Nikki, and Lucy all commented also that prescription medications for various stress-related medical problems were recommended to them.

In addition, many of the participants suggested that their grades had suffered affecting emotional well-being as a result of weak intellectual well-being. Rachel explained, “my school work was going down the drain” (Rachel, p. 7). Dexter added, “I basically just quit coming to class” (Dexter, p. 6). Lynn and Lucy talked about how the personal issues affecting their emotional well-being caused them to miss classes and how they fell behind. The students who were employed also shared that they were unable to work on certain days due to situations occurring that affected their emotional well-being therefore causing weakness in occupational and financial well-being as well.

In a few of the stories, the participants shared how the area of spiritual well-being had actually been enhanced by their emotional difficulties. Shyann, Brooke, Nikki, Rue, and Lucy found that experiencing emotional confusion and difficulty had brought them closer to their faith. Brooke felt strongly that “God won’t give you what you can’t handle” (Brooke, p. 11). Nikki searches to find peace with the loss of a close friend and feels that “I’m better right now spiritually” (Nikki, p. 3). Shyann, Rue and Lucy have always felt that their spirituality was an important force in their lives and find peace in that area of well-being as they struggle through relational changes.

Another aspect of relational well-being that was emphasized by most participants was the importance of the well-being of their family members. This was expressed in various ways, but clearly confirmed that the overall wellbeing of the participants' grandparents, parents, children, significant others, and friends was a strong determinant of their own well-being. If loved ones were hurting in any way, that reality therefore impacted the participants' well-being.

Relational aspects in the lived experiences of these participants were powerful contributors to the strength of their overall well-being. Participants struggling with decisions made in the past, the health of family members, personal medical issues, and financial changes noted a direct effect on their personal well-being. Participants, who shared that their spiritual well-being had strengthened as a result of relational issues, admitted to turning toward spiritual resources as a means of helping them through difficult situations.

Theme 2: Time Management and Well-being Experiences

College students quickly learn to balance their time among the many important aspects of their lives (Weidel, 1998). The students participating in this study are no exception. A full schedule of classes, work schedule, and in many cases families and animals are areas in which these participants described as being their primary focus. Rachel shared that in her life right now, she feels like "an ongoing stopwatch. I feel like I always have something to do" (Rachel, p. 13). Dexter shared the same idea when he described that he often feels like a spinning top. "I mean, that's part of, you know, taking 15 hours of classes and trying to work 40-50 hours every week" (Dexter, p. 17). Shyann explained, "I feel like a ball being passed around and there's not enough time" (Shyann, p. 9). However, Shyann also shared that extra time would cause her to think about various situations possibly leading to unwanted anxiety. Lilly described that she feels like a ball in a ping-pong game because she keeps being hit back and forth in the same

spots. Nikki also explained that a ball in a basketball game being dribbled back and forth reminded her of her well-being right now.

Each of the participants emphasized how they struggled each day to meet the requirements of their classes, work the hours needed to pay their bills, and still meet all of the demands of a family. Some of the participants also expressed how much they missed friends from high school because there was not enough extra time to spend with anyone. Attending classes, working, and meeting family demands leave little time to socialize. In addition, many of the participants talked about how their friends have relocated to attend schools elsewhere.

Theme 3: Appreciation for Improved Well-Being

Many of the participants shared stories of how they arrived in this community college. While a few of them had chosen to attend soon after graduating from high school, a few more of the participants had experienced some difficult, trying times just prior to beginning. Still another small group felt that their overall personal well-being was weak during the time they attended classes. Regardless of how their college career began, they each expressed appreciation for having the opportunity to earn a college education, and for what they had learned about themselves either from an unrelated life circumstance, or through their experiences in college this far.

Rachel spoke many times about how important education was to her and how her parents have supported her financially and emotionally by paying for her education and encouraging her. Dexter is extremely thankful for the multiple chances that he has been given to live, for a more balanced life overall, and for the growth that he has experienced while in college. He shared a time in a class in which he realized that he was part of a team. “That’s when I realized that in these classes, it’s not about me, it’s about us” (Dexter, p. 10). Interestingly, as many participants

described how they struggled with their extremely busy schedules, Shyann feels great appreciation for staying busy. She explained how she would like to spend more time with her children, but added that if she has extra time that she might begin thinking about details of her past and claimed, “I don’t think I could cope with it all” (Shyann, p. 6). Even with the emotional stress that Brooke handled daily trying to find ways of helping her son who suffers with a bipolar disorder, she is thankful for her kids. She stressed many times, “my kids are everything to me” (Brooke, p. 11). Lynn also appreciated her family. In particular, she appreciates the fact that her parents were able to work out their marriage problems. Lilly expressed appreciation for a supportive husband who encourages her and is a friend. Lilly, Rue and Nikki appreciated overcoming social barriers in their lives recently. They would like to continue to find ways of feeling more comfortable socially. Rue, Sarah and Lucy have expressed appreciation for being able to see life through a new, improved lens. Rue continued to search, but felt stronger. Sarah and Lucy have both experienced different paths leading them to much clearer, healthier places in their lives.

Theme 4: Uncertainty of New Beginnings

Each participant described similar thoughts about what to expect after graduating from college. With a mixture of excitement and childlike anticipation, they explained that they are very uncertain about the type of job that they will be doing. The majority of the participants hope to work in a medical assisting environment, but some who already have jobs might choose to remain in those positions. Some of the participants feel comfortable in their current positions and enjoy what they are doing. Dexter has applied to the Surgical Technician program and hopes to be accepted and begin in the spring. Shyann also hopes to apply for the Surgical

Technician program soon. The remaining participants expressed interest in continuing their educations and eventually becoming nurses.

While each participant spoke of feeling joy as a result of being so close to graduating from the medical assisting program, they also indicated an element of fear. For example, Rachel, Nikki, and Lucy were all interested in pursuing a career in the field of medical assisting, but uncertain of which specialty area they want to explore. While they agreed that they feel that they have had adequate preparation from the program, they still felt uneasy about the first job. Rachel stated, "I'm not exactly sure of the type of medical assisting position I'm going to end up with" (Rachel, p. 15). Nikki echoed that same sentiment by sharing that she is not completely sure of which direction to take in the field either. Lucy shared her feelings of uncertainty by comparing them to the inexperience of youth.

Right now, I feel like a child almost. Because of all of the things that I thought my life would be and thought that I knew, I'm finding out I don't so I'm learning things all over again with a fresh set of eyes. Kind of back in those teen years where you're adult life is on the horizon and you're trying to figure out who you wanna be and how you're gonna get there. (Lucy, p. 15)

Dexter, Shyann, Brook, Lynn, Lilly, Sarah, and Rue have all expressed uncertainty in whether or not they are going to begin working in the medical field after graduation, or apply to a different program within the field of health care. Dexter and Shyann both hoped to become surgical technicians one day, Rue was considering physical therapy assisting, and Brook, Lynn, Lilly, and Sarah had ambitions to continue their education in the field of nursing.

Even with this apparent uncertainty, it was evident that the participants felt pride in what they had accomplished. Along with the uncertainty that they were experiencing, they also

realized that they now had options. The knowledge gained, job opportunities, and personal growth that each of them experienced seemed to have caused their feelings of uncertainty to shine a mostly positive light on their personal well-being.

Theme 5: Hope for a Future of Well-Being

As participants discussed their feelings of uncertainty toward their future, a sentiment of hope was expressed. The various ages, life experiences, and goals of the participants led to different ideas about what might possibly be ahead of them. However, a common thread in all of their stories was that of an element of hope.

One aspect of future hope in particular that all ten of the participants discussed was that of a much stronger occupational and financial well-being. A hope of having a secure job with a steady income was very appealing to each of them. Even with student loans to pay back in some cases, the participants looked forward to these areas of their lives improving. Rachel shared, “It will be worth it in the end when I have more money and can go out more” (Rachel, p. 15). Dexter expressed his interest in making more money to help offset the child support that he pays monthly. In addition, helping people, working in the medical field, and doing something enjoyable were all aspects that each participant hoped for. All of the participants explained how they enjoy working with people and hoped to make a positive difference in their lives. Rue claimed, “I like to laugh and have a good time. I think I could maybe change someone’s attitude that came in not feeling well” (Rue, p. 2).

In general, all of the participants were hopeful that they would graduate this spring. Lilly exclaimed, “I can see the finish line” (Lilly, p. 11). Lynn added that she is graduating in May. Lucy claimed, “I see the proverbial light at the end of the tunnel” (Lucy, p. 13). Rue shared that

she is “searching for a new direction to go to” (Rue, p. 10). All statements offering hope for a future of change.

Social well-being was also mentioned as an area in which the participants hoped to improve upon in their future. All of the participants had discussed their extremely tight schedules, which for the most part, caused the social aspects of their lives to be less fulfilled than before they had started school. Dexter, however, felt that his social well-being had improved as a result of his experiences in the medical assisting program. He continued that he had met friends who he planned to maintain contact with. He stated, “I can think of five girls that I couldn’t imagine not having in my life” (Dexter, p. 21). He added also that having additional time to spend with his family was important to him. Shyann also expressed the hope for additional time. She stated, “When there’s more time in the day to spend with my kids, things will be easier” (Shyann, p. 4). Nikki planned to continue working toward developing social skills so that she can feel more comfortable in social situations in her future. Each of the participants felt hopeful also that they would continue learning in the medical field with the required continuing education, and might possibly continue with other course work leading to a continuation of strong intellectual and occupational well-being.

A message of hope from Dexter, Sarah, Lucy, and Brooke was that of giving back what has helped to strengthen each of them in all areas of well-being. These three participants specifically stated that they had hopes of reaching out to other people regardless of the next path in their lives. With a perceived ability to see themselves, the world, and their futures much differently as a result of difficult circumstances, they hoped to reach other people who have similar needs as they once did. Brooke explained that there are times when “you just have to put people under your wing” (Brooke, p. 9). Sarah spoke about a difficult time in her life when she a

very hard situation” (Sarah, p. 18). Sarah finally saw a future that she had once only been able to imagine. Dexter shared, “I’ve tried to commit suicide twice in my life and I think that there was a reason that I wasn’t successful both times” (Dexter, p. 20). He added that his past experiences have helped to prepare him to reach out to other people. Dexter, Sarah, Lucy, and Brooke are seeing a future through “new eyes” that they each had obtained in different ways. These new eyes have empowered them to strengthen their overall well-being and to uncover reasons for leading others in the same direction.

Summary

At the outset of this chapter the participants and how they were interviewed was described. Textural-structural descriptions were then presented for each participant. The process used to establish 94 significant statements and then reduce the list to 60 was discussed. The themes that emerged and the process for identifying were examined. Next, a description of well-being dimensions reported by the participants to be most and least fulfilled was presented. Finally, a “universal description of the experiences representing the group as a whole” as recommended by Moustakas (1994, p. 122), was explored in relation to the themes.

CHAPTER 5: DISCUSSION

Introduction

The purpose of this phenomenological study was to examine the well-being experiences of community college medical assisting students from a dimensional perspective. The research question being explored for this study was: How is well-being experienced by some medical assisting students attending a community college from a dimensional perspective? In an attempt to recruit participants for this study, a classroom visit was made at which time the study was explained, and consent forms were available for students to read and sign. During this same visit students who were interested in participating in the study scheduled a time for a personal interview. Convenience sampling was employed and the inclusion criteria for the study required that the students were medical assisting majors, enrolled in the clinical component of the program, and between the ages of 18 and 65 years old. Ten students who met these criteria volunteered to participate in the study.

The perceptions of each participant, as well as the meanings they had gleaned from their experiences, were gathered through one individual interview. All of the interviews were semi-structured, using the open-ended probe questions that can be found in Appendix A. The participants' descriptions of their unique life experiences were collected and analyzed using a modification of the Stevick (1971), Colaizzi (1973), and Keen (1975) method of analysis (Creswell, 2013). After reviewing the data six times, significant statements were identified. This list of 94 statements was then reduced to 60 in an attempt to avoid any overlapping or redundant meanings. From the final list of significant statements, various themes emerged. However, only the themes that were common to each participant remained as the final emergent themes that would represent the essence of the participants' perceived well-being. The emerging

themes representing the essences of the lived well-being experiences included: relational aspects of well-being, time management related to well-being, appreciation for improved well-being, uncertainty of new beginnings, and hope for a future of balanced well-being.

Findings Related to the Research Question

As noted in the preceding section, the research question being explored for this study was: how is well-being experienced by some medical assisting students attending a community college from a dimensional perspective? The well-being experienced by this population of community college students who are majoring in medical assisting was explained in multiple ways. Each of the students participating in this study offered unique and personal stories about their lives, which included the people important to them. These stories involved situations that had occurred in the recent past that directly affected their well-being at the time of the interview. The conversations provided a snap shot of the participants' well-being as they perceived it in that moment.

The research question was addressed as the participants spent time explaining aspects of their lives and situations that impacted their well-being. These conversations led to five themes: relational well-being, time management and well-being, appreciation for improved well-being, uncertainty of new beginnings, and hope for a future of balanced well-being. When considering dimensional well-being, there were three students who stated that occupational well-being was most fulfilled in their lives and another three specified that the social dimension of well-being was most fulfilled. Reflecting back on those conversations, the participants who felt fulfilled in their current occupations had worked in those positions for several years and expressed that they felt comfortable with their job responsibilities and co-workers. They also shared that an option after graduating would be to continue with their current occupations with the possibility of

promotion. The participants who indicated that the social dimension of their well-being was most fulfilled gave examples of family as their primary social circle or found social satisfaction by attending classes. Four of the participants claimed that the financial dimension was the least fulfilled area in their lives due to the fact that they are paying for college or are unable to work very many hours. Others explained that expenses to support a family left little discretionary funds. The physical dimension was mentioned as a close second of the least fulfilled area of participant well-being. Three students admitted that their physical well-being was not fulfilled at the present time. The reasons stated for this were lack of time, not having a place to exercise, and little motivation. The participants look forward to a potential increase in income, as well as having more time to help improve the likelihood of regular physical activity.

Themes Related to the Literature Reviewed

Although there is a plethora of literature focusing on the well-being of college students who are majoring in other health care fields, such as nursing, those studies tend to be quantitative. Few studies incorporate the actual testimony of students as they describe their lived experiences. In addition, there are no scholarly books or articles concerning the well-being of community college students majoring in medical assisting. Therefore, the themes from this study are described below in how they relate to the quantitative findings of the studies reviewed. In addition, various theories are presented to clarify and support understanding of the themes.

It should be noted that themes 3, 4, and 5 likely emerged partly due to the qualitative nature of this study. There were a number of studies examined in chapter 2 related to themes 1 and 2. However, in explaining the research literature for themes 3, 4, and 5, there were no studies found that specifically talked about appreciation for well-being, uncertainty of the future, or hope for improved well-being.

Theme 1: Relational Aspects Related to Well-Being Experiences

Relational aspects of well-being experiences were strongly supported as a theme. Relational well-being was a predominant part of each conversation. Relationships were mentioned by each of the participants as contributing strongly to their personal well-being. While the majority of studies focusing on well-being and college students are quantitative in design, the findings from the surveys indicate similar results where relational aspects are concerned. For example, LaFontaine et al. (2006) found that the college students rated love and sense of worth highest in aspects that impacted their well-being. Pang (2007) asked college students to rate their well-being in terms of life satisfaction, and found that the majority of the participants felt that their emotional well-being was most fulfilled compared to other well-being dimensions. Meyers and Mobley (2004) and Murry and Miller (2001) conducted similar studies asking college students to rate the most fulfilled dimension in their lives. The findings from these studies support social well-being as the most fulfilled dimension. Haggerty et al. (1996) confirmed that social support was most important to the students in his study about dimensional well-being and Van Lingen et al. (2011) found that nursing students rated social and emotional well-being as most important to their success as nursing students. However, Hermon and Hazler (1999) found that relational aspects of well-being were not significantly important to the students in their study as they rated love, or relational aspects, as being the least important in predicting college student success.

Social support has been associated with decreasing the negative effects of stressful events on health. In addition, a strong social support system can enhance an individual's ability to cope with stressful situations (Lazarus, 1966; Lazarus & Folkman, 1984; Moos & Billings, 1982). Further, there has been very little theoretical explanation given as to why a relationship

providing companionship and intimacy lead to emotional and physical well-being, however, a correlation with self-esteem has been made (Bartholomew, Cobb, & Poole, 1997; Sarason, Sarason, & Pierce, 1990). When considering the students participating in this study, a correlation was also evident in this theme of relationships, self-esteem, and personal well-being.

Dexter shared that he felt embarrassed for what he had gone through and found it easier to pull away from other people. “Trust issues are one thing that I’ve always had because I’ve been burnt so many times by people that I did trust that it’s hard for me to let somebody in” (Dexter, p. 7). He added, “Confidence has always been one of my weakest points. I’ve had so many people tell me that I can’t do things that I believe it and I still struggle today” (Dexter, p. 9). Rachel shared many difficulties as a result of a relational breakup. She stated, “My school work was going down the drain and I didn’t want to do anything” (Rachel, p. 7). Shyann described a time when her husband was overseas and believed that the support of her family gave her the strength she needed to continue raising her kids. Brooke stated, “My kids are my social life (p. 8). Lynn felt more empowered now that her parents have been able to sustain their marriage. Lilly explained that she was able to get through math classes successfully because she found another student to work with. Rue shared that she feels strengthened when her family is well. Lucy stated, “After the divorce, I was lacking in self-confidence” (p. 6). Nikki shared that she felt like an outcast in many classes where she did not know other students, and believed that her performance in the classes was negatively impacted.

It is not surprising that relational well-being has emerged as a theme from this type of study. Remnants of emotional pain, lack of confidence, anger, and fear became evident during conversations with these participants. Many situations were described that connected in some

way to a relational issue. Regardless of whether or not the relational experiences were positive or negative, the participants expressed that their personal well-being was impacted.

Theme 2: Time Management and Well-Being Experience

Another theme that emerged from this study is time management and well-being experiences. The common thread among the participants was the fact that they had many commitments and responsibilities to balance on a daily basis. Maintaining course work, jobs, and family responsibilities became a challenge when trying to manage all of these equally important tasks within a 24-hour time frame. Aspects of well-being mentioned by participants that were impacted by time issues included time with family members, maintaining adequate nutrition, finding time for physical activity, and stress management.

LaFontaine et al. (2006) noted similar results from surveys in their study. They found that students in their study reported that adequate nutrition and stress management were least fulfilled in their lives. A study by Pang (2007), and also a study by Van Lingen et al. (2011) identified that the student participants rated physical activity as being least fulfilled. In a study by Hermon and Hazler (1999), the best predictor of college student well-being included self-regulation, work, and recreation and leisure.

Participants provided many examples of how time management impacted their well-being. Dexter stated, “I mean, that’s part of, you know, taking fifteen hours of classes and trying to work 40-50 hours each week” (Dexter, p. 16). Rachel and Nikki shared that they always feel that they are on the go. Brooke shared that she typically goes to school, directly to work, and finally home. Lilly explained that she never has “me time” (Lilly, p. 5). For Rue, time management was the most important area of her personal well-being. Lucy and Sarah shared

that although time management is a factor in their busy lives, they are able to balance multiple responsibilities more effectively than when they were younger.

Time management theory helps explain the participants' views. The theory emphasized that individuals spend time according to their needs. While balance is encouraged with time management, the theory described that people will manage their time depending on what their most prevalent need happens to be (McGraw Center for Teaching and Learning, 2014). In the case of the students participating in this study, a primary focus became completing the medical assisting program that required them to find creative ways of adding this aspect to schedules that were already quite busy.

Theme 3: Appreciation for Improved Well-Being

The theme of appreciation for improved well-being was strongly represented in each participant's stories. Regardless of whether the participant had made a poor judgment call in the past, became a victim, or suffered consequences of unknown origin, there was deep appreciation expressed for the knowledge gained as a result of what they had endured. The appreciation was extended to having the opportunity to get an education in an area in which they could empathize with individuals who might possibly be experiencing similar circumstances.

Rachel remains appreciative of the emotional and financial support she received from her parents. Dexter expressed great appreciation for the opportunities he has had to join positive social circles of friends who met in classes. Brook stated, "My kids are everything to me" (Brooke, p. 11) and felt appreciative that she has family. Sarah talked about a difficult time and stated, "I doubt that I would have much of an emotional well-being without that help" (Brook, p. 15). Nikki explained, "They cared enough to want to know the truth" (Nikki, p. 11) as she described other students in a classroom. Rue commented that her shy disposition has improved

and that she is appreciative of more confidence to speak in public. During difficult times in her life, Lucy noted, “The only thing that never wavered for me was my faith” (Lucy, p. 9).

Finding a positive approach to handling situations from the past, similar to some of the participants’ stories, is a fundamental aspect of Appreciative Inquiry (Cooperider, Whitney, & Stavos, 2008). The core of Appreciative Inquiry includes discovering what works for people, and that focus becomes the individual’s reality. According to this theory, people are more confident to go toward the future if they bring part of their past with them. This theory emphasizes positive aspects of the past being pulled forward for use in the future. For many of the participants, the positive lessons that were learned as a result of negative past experiences were extracted. This theory encourages experience as knowledge, which many of the participants look forward to offering.

Gratitude is another area that is strongly related to well-being and plays a role in appreciation. Wood, Froh, and Geraghty (2010) suggested that gratitude involves noticing and appreciating the positive in the world. In addition, gratitude has been correlated with autonomy, environmental mastery, personal growth, purpose in life, and self-acceptance. With this in mind, the appreciation expressed by the participants in this study is not only a positive reflection of their well-being, but will serve to improve their personal growth as well.

Theme 4: Uncertainty of New Beginnings

Uncertainty of new beginnings also evolved from the qualitative nature of this study. In many cases, the participants were viewing the next step of their lives through a much different lens than in the past. As explained previously, learning new ways of coping and living has brought an element of uncertainty to the forefront of their lives. In addition, the participants shared that they were uncertain about their next step after graduation. Many of the participants

are weighing the option of beginning a new career, or continuing with school. Brooke's uncertainty stems from the unknown disposition of her son on a daily basis. "You never know what kind of mood my son is going to wake up in" (Brooke, p. 10). Rue described her uncertainty at this point in her life as a word search. "I'm searching for something. A new direction to go, I guess" (Rue, p. 10). Lucy explained, "I feel like I'm back in those teen years when you're trying to figure out who you wanna be and how you're gonna get there (Lucy, p. 15).

The Uncertainty Reduction Theory (Berger & Calabrese, 1975) presents a way of managing uncertainty. The core of this theory is that since uncertainty is generally an unpleasant state, people are typically motivated to talk about their situation, which can lead to planning ways of dealing with the uncertainty. One other way people tend to reduce uncertainty in their lives, according to this theory, is by finding similarities with other people in similar situations. The possibility exists that the participants were beginning the process of uncertainty reduction as they began to talk about their feelings of uncertainty. However, the overall impression was that this particular uncertainty was exciting and welcome as the participants expressed that having options in life was positive.

Theme 5: Hope for a Future of Well-Being

Finally, each participant illuminated hope for a future of well-being. As each of the students discussed areas of well-being they would like to improve, the prevailing hope was to have more time available after graduation to focus on all of the areas of well-being. There was also excitement in their expressions as they shared their hopes of having a steady income, saving money, and making a difference in the communities where they lived. Dexter shared that with hope, "you're always reaching and there's always just a little more you can do" (Dexter, p. 20).

Lynn, Rachel, Lucy, and Lilly are looking forward to graduation. Lilly stated, “I can see the finish line” (Lilly, p. 11). Sarah shared, “I went from thinking I was never going to be able to have it, or achieve it, to where now it’s actually in my sight” (Sarah, p. 19).

Kaufman (2011) explained that hope involves the will to achieve a goal as well as various ways to get there. He added that Hope Theory suggests that people with hope have the determination to complete their goals as well as strategies available to them to reach the goals. With hope, people can approach their goals with a mindset and strategy toward success.

The themes that have been discussed in this section include relational aspects, time management, appreciation, uncertainty, and hope. Within each theme, there exists the potential to either provide support to students by offering power through positive experiences or discourage success by causing extra load for the students to carry. Following is an explanation of this concept of power and load as it is presented within the Theory of Margins.

Theory of Margins

Numerous insights have surfaced from this study concerning various aspects that have impacted the participants’ well-being. While a wide range of situations and circumstances were discussed and analyzed, a common thread among each theme that emerged was that of support available to the participants in relation to demands of their daily lives. Regardless of the nature of the demands the students experienced, the outcome was essentially dependent on the level of support that the participant had available to them.

In exploring and reflecting on the themes, McClusky’s Theory of Margins (1963) surfaced as a way of thinking about them. The Theory of Margins was developed in the 1960s and continues to be considered highly relevant for understanding the balance between motivation and barriers to adult learning. This theory is grounded in the notion that adulthood is a time of

growth, change, and integration in which one constantly seeks balance between the amount of energy needed (load) and the amount available (power). The theory states that margin is a function of the relationship of load to power. The theory has also been visualized as a formula with load as the numerator and power in the denominator; $\text{Margin} = \text{Load}/\text{Power}$ (Baum, 1978; McClusky, 1963; Main, 1979). McClusky made the claim that margin may be increased either by reducing load or increasing power. The load factors described in McClusky's Theory of Margin consists of an external and an internal load. The external load factors include tasks of life such as an individual's family, career, community responsibilities, and socio-economic status. The internal load factors include self-concept, goals, and personal expectations.

The combination of external resources and capacity available to a person make up the power factors aspects of the Theory of Margins. Power factors include family support, social abilities, economic abilities, resiliency, coping skills, and personality. The five specific categories of power include physical, social, mental, economic, and skills. The physical aspect of power factors involves strength, stamina, energy, and health. When load continually matches or exceeds power, and if both are fixed the situation becomes highly vulnerable and susceptible to breakdown. If, however, load and power can be controlled, and if a person is able to build a reserve (margin) of power, the outcome is that the individual will be better equipped to meet unforeseen emergencies and better positioned to take risks, engage in exploratory, creative activities and more likely to learn (McClusky, 1970).

Both load and power consist of internal and external factors (Merriam et al. 2007). These internal and external factors are very similar to the dimensions of well-being described in this study which include spiritual, social, physical, emotional, intellectual, occupational, environmental, and financial well-being. When considering the themes that have emerged from

the participants' experiences that describe their perceived well-being, Theory of Margins provides further explanation of how student well-being can impact the learning process. In addition, the theory suggests a model that could serve to assist college administrators and faculty with planning educational programs with the intent of assisting students in creating a margin by balancing load and power. This theory presents that a necessary condition for learning is access to and the activation of a Margin of Power. According to McClusky's theory, a crucial element in the process of learning is that of providing coping skills for maintaining a surplus of power (Hiemtra, 2002). The following framework, figure 2, illustrates this concept of Theory of Margins.

Figure 2. Suggested Framework for Planning Educational Programs Based on Load and Power Balances

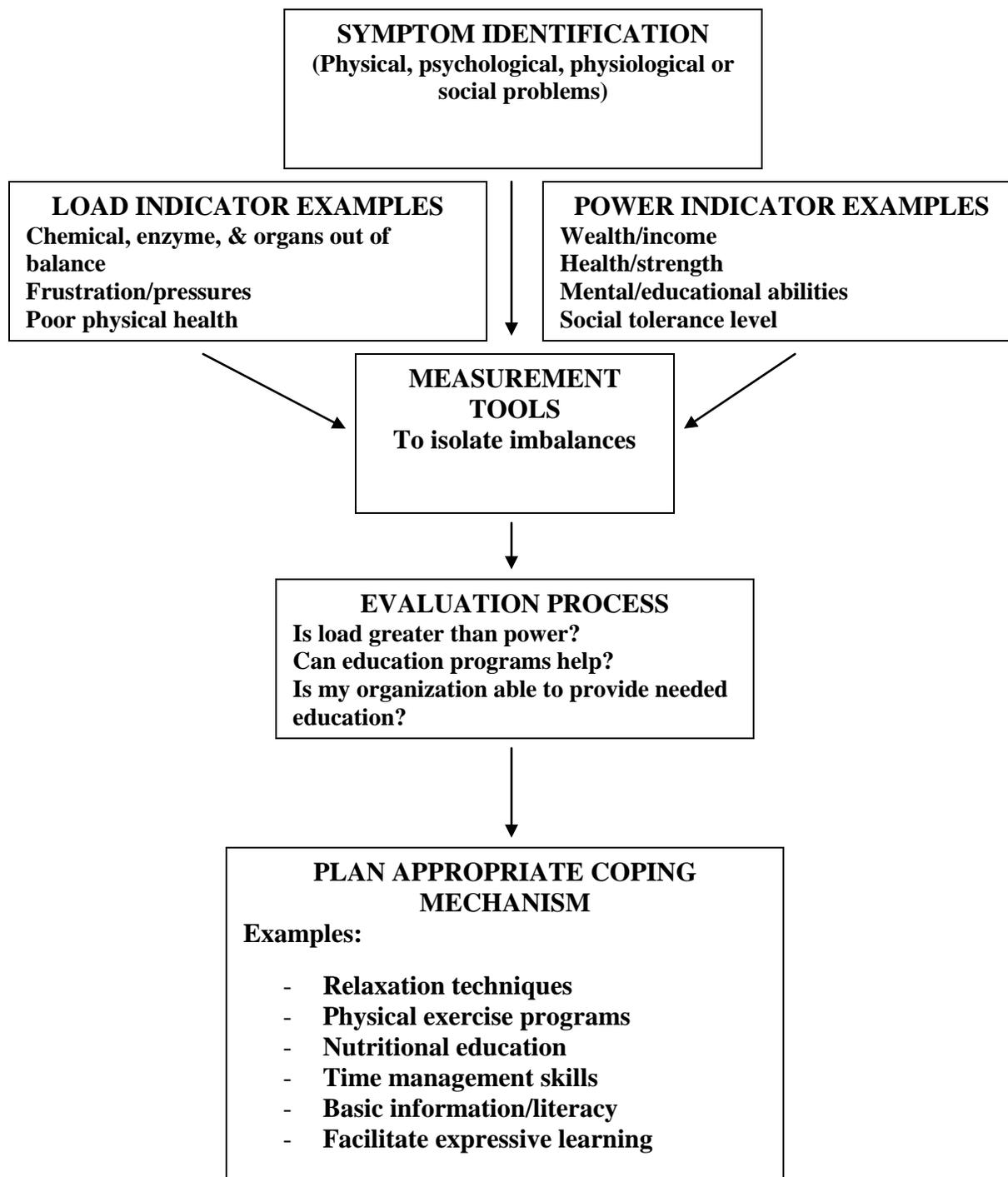


Figure 2. Refinement suggestions for measuring, evaluating, and planning programmatic responses to load and power imbalances. Adapted from "Howard McClusky and Educational Gerontology, the Encyclopedia of Informal Education" by R. Hiemtra, 2002, <http://infed.org/mobi/howard-mcclusky-and-educational-gerontology/>. Copyright 2002 by Roger Hiemtra/Hemisphere Publishing Corporation.

Recommendations for Practice and Future Research

Numerous insights have surfaced concerning the perceived well-being of the community college students majoring in medical assisting who participated in this study. These insights offer the potential to improve the future for community college students who struggle with establishing a margin of surplus power while attempting to balance their personal and scholastic responsibilities with what resources they have available to them. In addition, results from this study may inform planning by college faculty and administrators who have an interest in strengthening student well-being, as well as the campus environment. Finally, a number of topics for further research emerged.

Improving Practice

As mentioned previously in this study, a major priority for administrators of college campuses, according to *Healthy Campus 2010*, is to emphasize the promotion of healthy behaviors (American College Health Association, 2004). In addition, LaFontaine, Neisen, and Parsons (2006) suggested that assessing health behaviors of college students should be the first step toward identifying strategies that could lead to a healthy campus environment. The authors claimed also that health professionals who promote healthy behaviors in colleges are likely to influence the behaviors of students over a lifetime. Additionally, Hermon and Hazler (1999) remarked in their study of college student emotional and social well-being that the holistic wellness and psychological well-being of students can be linked to a more positive assessment, evaluation, and accreditation of outcomes in institutions of higher education.

Nearly three decades after Hettler (1984) recommended that college campuses needed to establish wellness programs to address personal and academic needs of students, Myers and Mobley (2004) concluded that there is plenty of evidence available that supports the long-term

value of programs that offer “stress management, interpersonal relationship skills, nutrition, and career development” (p. 40).

While the existing environment of the community college in which these participants attend is meeting their academic program needs, there is little direct support offered to students that can meet the many non-academic factors associated with student success. A report by ACT (2007) supported the importance of nonacademic factors claiming that aspects, such as psychosocial factors, play a role in overall student accomplishment, as well as academic preparation. Other education experts (Greene, 1993; hooks, 1994; Osei-kofi, Richards, & Smith, 2004) have made the claim that there is a great need among community college students to experience a transformation in teaching and learning practices. According to these voices, the principles of the past should be challenged and restructured so that more students are included in the center of the teaching circle. This revised view involves student success by involving the whole person, including not only the intellectual dimension, but also social, emotional, and spiritual dimensions within the curriculum and lesson plans. This theory of educating the whole person may result in students obtaining abilities, such as leadership skills, critical examination, compassion, and a sense of life purpose. In addition, improved retention and graduation rates have been noted when more of a focus within education involves this notion of addressing aspects of the whole person instead of purely academic factors.

Weidel (1998) made the claim that while considering the community college student as a whole person instead of just a student, addressing wellness on a community college campus can become as complex as the lives of the students who attend these institutions. Weidel added that the varied demographics of most community college populations result in diverse and non-traditional characteristics and most of these students have had quite different wellness

experiences. Recognizing the challenge, Weidel emphasized that “one of the most important things to consider regarding wellness programs at community colleges is that they are very necessary and directly impact students during and after their education” (p. 59).

Along with academic rigor, a goal of educating with overall well-being in mind is, therefore, recommended to strengthen college curricula, programs, and student outcomes. Projects, assignments, and assessment techniques could reflect dimensional well-being as a way of bringing awareness to the importance of this approach, thereby enhancing educational experiences of college students. According to the literature presented, educating faculty and administrators about ways of creatively including these types of holistic curriculum changes would be well worth the energy involved when considering the improved outcomes. Following are suggestions for creating a college campus that promotes not only academic support, but non-academic as well. While several of these recommendations emerged from the literature, in some cases, they resulted from observations made as a practitioner or from concerns expressed by the participants in the study. It is noteworthy that many of these recommendations are embedded in a long history of social justice discussion (Gordon, 1999).

1. Counseling services should be made available on campus to students attending this community college at no cost. Each of the participants interviewed in this study shared multiple concerns having to do with relational issues in their lives. The relational concerns ranged from serious problems having to do with family members to relational issues with themselves personally. These students explained that each dimension of their well-being was negatively impacted during these difficult times resulting in severe emotional, physical, and often times financial distress. The shared stories of these students revealed some deeply concerning situations; situations that were potentially life threatening in some cases. Each situation also

resulted in a direct affect on the students' academic progress. In many cases the participants described how their grades were negatively impacted or that they were forced to withdrawal or were dropped from courses. All ten of the participants stated that having someone to talk with confidentially on campus would have helped them tremendously in the past and would recommend this service for students in the future.

Psychological services are offered at most college campuses in an effort to encourage emotional and psychological well-being of students attending. In many instances, the programs available offer services of graduate students majoring in psychology completing intern hours. An arrangement such as this would serve the purpose of having a trained individual in the field of psychology for students to talk with offering them some type of direction.

2. Health care services should be offered to the students attending this college. Many students express that they have no health care insurance. However, there are programs within the college requiring students to obtain physicals, vaccinations, and other tests before they can continue with the program of study. In addition, students get sick like anyone else making it difficult for them to attend classes. It makes sense when there is a certified nursing assistant program, medical assisting program, nursing program, and a physical therapy program that offering students this type of service would benefit both the students needing the services as well as the students providing the services. While specific arrangements with physicians and medical interns in the area, stipulations, and supervision would have to be established, this type of service would offer great support toward well-being, educational opportunity, and hands-on experience. This service would essentially offer these students a way of meeting physical well-being needs as well as others.

3. Childcare should be available on campus. With the early childhood education program on this campus, like the health care service, this option for childcare would provide opportunities for students who are majoring in early childhood education to gain practical experience in the field. In addition, having this option available would alleviate many of the stressors mentioned by the participants in this study having to do with reliable, safe childcare for their children while they are in class. Certainly many important aspects of planning this service would need to be made which would include liability and safety issues.

4. The students attending this college should have access to a fitness facility on campus. Many students interviewed in this study discussed how having a fitness facility on campus would offer them the ability to save time while attempting to meet an aspect of the physical component of well-being. This service would serve as a convenient source of meeting many of the aspects of well-being including physical, emotional, and possibly others.

5. Dining options should be available to the students on this campus. The existing options for food and drinks on campus consist of a variety of vending machines. Arrangements for offering healthier dining options would have the potential of benefiting the students on this campus nutritionally and also offer a place to socialize and promote campus morale.

The perspectives shared by the participants of this study concerning their well-being experiences, along with the themes that emerged, influenced the recommendations made as a result of the study. For example, counseling services could have the potential to assist students with relational issues, time management, uncertainty, a continued appreciation for improved well-being, and future well-being goals. In addition, health care services, a fitness facility, and dining options could all empower students to achieve future well-being goals. Having available childcare on campus could certainly assist the students with the theme of time management.

These recommendations are intended for long-range planning and would require foundational research as well as administrative and financial support. However, if just one of these recommendations were made available to the students attending this community college, the surplus margin for the students could be widened offering them more power to handle their load of responsibilities. As mentioned previously, widening the margin of power for students can lead to improved well-being and enhance their potential for success (McClusky, 1970).

Opportunities for Future Research

This study has revealed well-being perceptions of community college medical assisting students and presents opportunities to explore this same research question in various ways. For example, using the exact study question, inclusion criteria, methods, and analysis technique used in this study with other population samples of medical assisting students would provide additional data that could be used comparatively. Also, talking to students with different majors would offer insight from students studying in different disciplines. In addition, this same type of well-being inquiry could be explored on four-year college campuses. Data from this type of study could possibly reveal the similarities and differences between two-year college students and four-year students concerning the question of perceived well-being. Using a different sampling technique other than convenience sampling such as random purposive could also broaden the diversity of the population group. Another opportunity to research the question of well-being in college populations would be to add a survey instrument for gathering data in addition to the semi-structured interviews. This mixed method approach of conducting a study such as this one would not only serve to describe more rich description offered from a qualitative study, but would also provide statistical data further generalizing the findings.

Similar studies focusing on college student well-being could be conducted at different times during the college career of the participants. Exploring how the participants of a longitudinal study describe their well-being during the beginning of their freshman year, and then interviewing the participants each subsequent year until graduation could offer insight into a timeline of how personal well-being is impacted in the lives of college students. This type of study would not only provide information about college student well-being, but could also be useful to educational administrators and faculty in planning programs and curricula.

This study has been conducted from a constructivist perspective allowing meaning to be constructed as data were collected and analyzed (Denzin & Lincoln, 2011). Exploring the concept of college student well-being through other lenses could contribute further into the investigation of the perceptions of student well-being. An example might be to approach a similar study from a feminist perspective with a focus on how well-being differs between female and male students. In this study, for example, the majority of the participants were female raising the question as to whether or not the findings might have been impacted because of a larger female representation. Another example might be to study sub-cultures within the culture of college students and how using a cultural studies approach impacts their well-being. The perceived well-being of college students of various ethnic groups, sexual orientation, and students with disabilities represent examples of the many cultural groups that could be included in a study concerned with college student perceived well-being. Conducting a study such as this from a different philosophical perspective asks not only about the participants' personal well-being, but also how gender and culture might possibly contribute to those findings.

The topic of well-being has been explored among college students, however the majority of these studies have been quantitative without descriptive stories of student's lived experiences.

In addition, few studies have focused on community college students. Finally, there are no studies available concerning the well-being perspectives of community college students majoring in medical assisting. Therefore, the opportunities for continued research concerning community college students, college students, and perceived well-being are numerous. In addition to the overall interest in college student well-being, an investigation into each of the themes that emerged from this study offers unique well-being topics for further research as well.

Limitations of the Study

Early in the study the researcher provided a subjectivity statement that described experiences related to well-being, the central concept in the study. Reflexivity was used, as recommended by Creswell (2013), to reveal biases, values, and other experiences. While serious thought and time was devoted to this effort, it is acknowledged that much of the reflexivity was contingent on accuracy of memory. As such, some biases, values, and other experiences may have been overlooked that affected how findings were interpreted. Generalizability was not possible, given the small size of the sample – 10 participants, the lack of diversity (all Caucasian and only one male), and the use of convenience sampling. In addition, the fact that the inclusion criteria were limited to community college medical assisting students, could limit the diversity of overall community college student perception. As with all phenomenological studies, the purpose is not to explain but to describe. In this case the lived experiences of the participants were described. The results are particular to these participants and therefore cannot be completely generalized to other students.

Conclusions

The perspectives shared by participants in this study have provided a foundational awareness of the essences of well-being from a dimensional perspective concerning community

college medical assisting students. Exploring student perspectives of well-being in this phenomenological study by listening to personal accounts illuminated the many student-related situations and concerns related to student well-being. Certainly the recommendations of counseling, health care, child care, a fitness facility, and dining options would enhance the campus of this community college, as well as improve the well-being of the students who utilize those services. However, the larger scope of concern for change is the notion that health and education would be most effective if presented as a collaborative approach. By connecting the process of learning with the quest for well-being and by organizing a curriculum that focuses on the development of the whole person, not just academics, the life skills of students may be strengthened. Changes toward a focus on the whole person may lead to better integration of health and social programs within education (Greene, 1993; hooks, 1994; Osei-Kofi, Richards, & Smith, 2004; Whole Child Symposium, 2014).

The experiences that the participants shared provided a snapshot of information suggesting immediate needs, as well as many opportunities for further investigation into the well-being of college students. Several recommendations for further research were made. More in-depth studies, with varied methodological approaches, and with larger population groups are needed. Future studies can be based upon the findings from this study, and could therefore expand the opportunities available for improving the well-being of students, as well as the educational environments in which they exist. These findings can also be used to inform educators about the importance of embracing the notion of educating students from a perspective that includes a non-academic approach. By studying the well-being of college students within a variety of educational settings, the difficult task of diminishing educational barriers and

increasing margins of power, can be fostered while empowering students to complete college and thrive within their communities.

Summary

In this final chapter, an overview of the study was first presented. Findings related to the study were examined in relation to the dimensions of well-being and to the literature. Even though there are no studies that focus specifically on community college medical assistant students, literature from studies of nursing and health students in 2-year and 4-year colleges was explored. Related literature was found and examined in relation to themes of “relational aspects” and “time management;” however, no studies were found in relation to “appreciation for improved well-being,” “uncertainty of new beginnings,” and “hope for a future of balanced well-being.” Theories in relation to the five themes were examined.

An overarching goal that the participants noted was to attempt to fulfill the various areas of well-being as often as possible. One way of illustrating how challenging it can be for students to balance responsibilities with resources available to them is to consider the Theory of Margins (McClusky, 1970). This theory was mentioned as a way of understanding how a student’s support system can greatly impact success during college.

The primary limitation of the study focused on the inability to generalize because of the use of convenience sampling and a small, homogenous group of participants.

Recommendations related to practice and to future research were outlined. For example, it was suggested that a variety of support services be put in place to enhance the experiences of students, such as: campus-based confidential psychological counseling services, health care services, a fitness facility, childcare, and dining options other than vending machines. Opportunities for further research were suggested that would essentially use the same study, but

with different participants meeting the same inclusion criteria. Some approaches suggested, included: research using a different sampling technique than convenience sampling and a much larger sample size so that more generalizable and diverse findings might result; including community college students majoring in other areas of study besides medical assisting; a comparative study between 2-year and 4-year colleges; a longitudinal study concerning college student well-being; and a mixed method approach to collecting data.

From analysis of the review of literature and findings, it was concluded that participants identified the financial dimension as the most challenging, while occupational and social dimensions as most fulfilling. Conclusions were also made suggesting that embracing learning and health together as an approach to education could enhance student well-being.

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APPENDICES

APPENDIX A

SEMI-STRUCTURED INTERVIEW GUIDE

Topic of Study: “A Phenomenological Examination of Well-Being as Experienced by Medical Assisting Students at a Community College”

Time of Interview:

Date:

Place:

Interviewer: Lynnea Melham

Interviewee:

Position of interviewee: Medical Assisting Student attending a community college

Brief description of study:

Community college students are often described as having unique, non-traditional educational and social backgrounds, and often tend to face additional stressors more than the traditional college student. Among these stressors are financial, relational, educational, and occupational-related concerns to name a few (National Center for Education Statistics, 2008). The community college student who has chosen to major in medical assisting enters into yet another potentially stressful environment when considering the competitive, fast paced nature of the program.

The purpose of this study is to explore community college medical assisting students' perceptions of their personal well-being when considering the various components of wellness. As a result, it is hoped that insight may be obtained for enhancing student learning and improving the educational environment. The components of wellness can include social, emotional, physical, spiritual, intellectual, occupational, environmental, and financial well-being and serve as an excellent example of non-academic factors in education. These components of

wellness, when balanced and maintained daily, can help to shape and promote optimal health and well-being (Anspaugh, Hamrick, & Rosato, 2011). Both community college educators and student development professionals can more responsibly and positively meet students' needs through an increased understanding of these wellness components and how they relate to students' experiences. In addition, there are no studies to date focusing on the well-being of community college medical assisting students.

Questions:

1. College students select their major area of interest for different reasons. Some students have always been interested in a specific field for example. Other students are motivated by a specific area of study because of the amount of money they can make after graduation. Explain your reasons for selecting medical assisting as your major area of study.
2. In the field of medical assisting, there are many aspects to consider when thinking about a typical day including the administrative side of practice, clinical aspects, and of course the social skills necessary for patient and colleague relations. Describe the qualities that you feel would make a medical assistant effective. Why are these important characteristics?
3. The idea of well-being can mean many different things to people. Some people might think of well-being as a way of describing how they are feeling on a particular day. Other people might think of well-being in terms of their level of happiness. Describe what comes to your mind when you think of well-being.
4. From your description of what comes to your mind when you think of well-being in the previous question, describe personal experiences you've had or situations that you feel

have impacted your personal well-being in some way. Experiences could involve taking exams, studying, family, money, health, free time, or relationships for example.

5. When you think of all of the factors that influence your well-being, describe the areas of well-being in which you feel you are strong, and those you feel could be better.
6. Community college students who I have worked with in the past would sometimes find that it was easier to share their feelings or experiences with me by using a tangible object to help relate to the situation. For example, one student who was struggling in math was trying to explain how they were feeling about the next step to take. This student said, “I feel like a sponge; I have all of this stuff soaked up inside me but I don’t know how to get it out during a test.” Describe an object that could symbolize what you feel about your personal well-being?
7. In the same way, it’s sometimes easier to relate an experience or feeling to something seen on television, on a movie screen, or words in the lyrics of a song. Describe a character, a scene in a movie or show, or a song that reminds you of your overall well-being?

APPENDIX B

LIST OF 94 SIGNIFICANT STATEMENTS

Well-being is how you feel when you get up in the morning.

Well-being is everything that makes you, you.

When I think of well-being, I think of how life is good.

Well-being is how I'm taking care of myself.

Well-being is a combination of a lot of things.

Well-being means a person is happy, healthy, and things are falling into place.

Well-being has to do with how you manage your life.

Well-being is your mind-set.

Well-being happens when mental and physical needs are met.

Well-being is balance in daily life.

Well-being is when all emotions are in balance.

Well-being is when everything flows.

Well-being is the whole package.

Well-being is when all the pieces are coming together.

My work is OK for now.

My work is stressful.

It's only part-time.

I'm not getting great pay.

My work schedule is flexible.

I work in the medical field.

I love my job.

I spend a lot of time studying.

My intellectual side has developed with classes.

Classes lead to friendships.

I now have a team concept.

I study at work.

I study between work and classes.

The nurses quiz me at work.

I need to be a good role model.

I like to learn.

School is challenging.

I'm starting to see the light.

It's chaotic at home.

I live with my parents.

I like family time.

My environment is supportive.

I like smaller classes.

My environment is unpredictable at times.

My environment is busy and hectic.

My environment is getting better.

I had a very dark environment in the past.

I have relational stress.

Most of my relationships are supportive.

I feel concern.

I've had to learn to deal with stress.

I've learned coping skills.

There have been deaths of close family and friends.

I've had several emotional breakdowns.

I'm taking anxiety medication.

Routine is important to me.

I don't get enough sleep.

I have high blood pressure.

I don't exercise because I don't have extra time.

My diet is off.

I had to give up my social life.

I'm very shy.

I struggle with my appearance.

I would like to learn how to be more social and outgoing.

There's no time for social stuff.

I'm not where I want to be socially.

I feel like an outcast in class.

My social life is better now.

I have help paying for school.

I have a lot of student loans to pay back.

I have to pay a lot of child support.

I pay for everything.

It's not so great financially right now.

I don't have a strong spiritual side.

Spirituality isn't important to me.

I don't believe we have a spirit.

God doesn't give you more than you can handle.

Church is up there on my priority list.

My spiritual side has improved recently.

You've gotta have faith.

I don't have a lot of time for church.

I have a strong need for God.

My well-being is like an ongoing stopwatch.

My well-being is like a spinning top.

A ping-pong ball during a game describes my well-being.

Fireworks are what I think of to describe my well-being.

Well-being is like the white picket fence.

I feel like a friken basketball being dribbled up and down a court right now.

I'm like a ball being passed around when it comes to well-being.

My well-being is a lot like a word search.

My well-being is best described looking through a child's eyes.

Pooh Bear is kind of like me and my well-being.

The show "Teen Mom" without the baby is like my well-being because they have to give up their social lives.

The song "Demons" is where I was, but now the song "Counting Stars" gives me hope.

My well-being is described in the song "God Gave Me You".

"I Am Legend" is a movie about being alone; that describes my well-being right now.

"Don't Let the Sun go Down on Me" kind of explains my well-being.

"High School Musical" because of the drama and the clicks is how I feel in class.

"The Sound of Music" when they had to leave in the middle of the night reminds me of how I had to leave my family"

The movie "Sweet Home Alabama" describes how my well-being has evolved.

APPENDIX C

REDUCED LIST OF 60 SIGNIFICANT STATEMENTS

Well-being is everything that makes you, you.

Well-being is how I'm taking care of myself.

Well-being means a person is happy, healthy, and things are falling into place.

Well-being has to do with how you manage your life.

Well-being is your mind-set.

Well-being happens when mental and physical needs are met.

Well-being is balance in daily life.

Well-being is when all emotions are in balance.

Well-being is when everything flows.

Well-being is the whole package.

I'm not getting great pay.

My work schedule is flexible.

I work in the medical field.

I love my job.

I spend a lot of time studying.

My intellectual side has developed with classes.

Classes lead to friendships.

I now have a team concept.

I study at work.

I like to learn.

School is challenging.

I'm starting to see the light.

It's chaotic at home.

My environment is supportive.

I like smaller classes.

My environment is unpredictable at times.

My environment is busy and hectic.

My environment is getting better.

I had a very dark environment in the past.

I have relational stress.

Most of my relationships are supportive.

I feel concern.

I've learned coping skills.

There have been deaths of close family and friends.

I've had several emotional breakdowns.

I'm taking anxiety medication.

Routine is important to me.

I don't get enough sleep.

I don't exercise because I don't have extra time.

I had to give up my social life.

There's no time for social stuff.

I'm not where I want to be socially.

My social life is better now.

I have help paying for school.

I have a lot of student loans to pay back.

It's not so great financially right now.

I don't have a strong spiritual side.

You've gotta have faith.

I don't have a lot of time for church.

I have a strong need for God.

My well-being is like an ongoing stopwatch.

My well-being is like a spinning top.

A ping-pong ball during a game describes my well-being.

I feel like a frickin basketball being dribbled up and down a court right now.

I'm like a ball being passed around when it comes to well-being.

The show "Teen Mom" without the baby is like my well-being because they have to give up their social lives.

The song "Demons" is where I was, but now the song "Counting Stars" gives me hope.

"I Am Legend" is a movie about being alone; that describes my well-being right now.

"Don't Let the Sun go Down on Me" explains my well-being.

The movie "Sweet Home Alabama" describes how my well-being has evolved.

APPENDIX D

TEXTURAL AND STRUCTURAL DESCRIPTIONS OF PARTICIPANTS

Textural Description of Rachel

When asked about personal well-being, Rachel stated, “Well, the first thing that comes to my mind would be just emotional state and how you’re feeling and how you feel about your life” (Rachel, p. 5). When asked to elaborate more on that point, Rachel explained, “It all just starts with how you’re feeling when you wake up in the morning (Rachel, p. 5). As the conversation continued, Rachel began sharing about how emotional stress has played a large role in the state of her current well-being.

Um, well, recently; well, not recently, but I think it was last October I had moved in with my boyfriend and that made my parents sad kind of. They were not ready to you know, let me go and do something like that and then we had broken up in January and I had to move back home and I wasn’t very happy about it. I was just really, it really depressed me. I didn’t wanna have to live with my parents again after that and I was really upset and I just couldn’t focus on anything. My school work was going down the drain. I didn’t want to go to work. I didn’t want to do anything and that just that had a lot to do with well-being. I lost a lot of weight. I wasn’t eating. I wasn’t sleeping right. It was very stressful and they felt bad because, you know, they had sold all of my stuff. (Rachel, p. 7)

Another critical experience related more to physical aspects of well-being. Rachel also talked about a visit to her doctor’s office for a routine physical when it was discovered that she had exceptionally high blood pressure.

Among all that stress with my boyfriend, and it's taken me a while to get over it, I had gone to the Dr. just, you know, for a normal check-up and I had really, really high blood pressure. So, they figured out that it was the type of birth control that I had been taking and so I had switched that and you know tried several methods like different pills, the shot, and those didn't work out so I had to go off that completely and I had to um get an EKG, stuff like that. I had to be put on blood pressure medicine for that so I can no longer take birth control because it messes with me. So that's kind of stressful, you know, something that you have to you know watch very carefully and be really careful with stuff like that. And then, I, among all of that, you know it put a lot of anxiety on me and so they put me on an anti-depressant medicine. That really helped me a lot. I felt overwhelmed with everything and I had several breakdowns. (Rachel, p. 9)

Rachel then began to share areas of wellness in which she felt she was personally most fulfilled, and areas least fulfilled. "I would say as of today, um, I know it probably wouldn't seem like it since the things I told you, but just my emotional and environment (Rachel, p. 11). She went on to explain that she receives a great deal of support from her parents and from her friends. As far as areas least fulfilled, Rachel explained that financial and social are lacking.

It's a lot of driving with work and school you know, and we live a lot farther from school than we did at our old house which uses a lot of gas and like I want to go do things, but I only make minimum wage and that takes a lot. I don't have as much money saved as I would like to do extra things. Since school takes up a lot of my time, I don't really have a lot of time to go out with my friends you know, or do things but that's OK; it will be worth it in the end. I'll be able to do more of

that when I have a good paying job when I'm done with school, but that's my focus right now just getting done. (Rachel, p. 12)

As the conversation continued, Rachel was asked to try to think of an object that could help her describe her personal well-being experiences presently.

This might sound a little weird, but I think kind of like an ongoing stopwatch. I feel like I always have something to do. I'm always busy; I'm always studying. I feel like I'm always going, just on the go. (Rachel, p. 13)

When asked about a movie, show, or song that could further describe her well-being, Rachel shared that the show "Teen Mom" was a good example.

"Teen Mom" without the baby is a good example. If you kind of subtract that, they're all trying to balance work, school, life etc. Mackenzie right now is a lot like me. She's going through what I went through with my boyfriend only with a baby to make things more complicated. She's had to give up her social life. I miss hanging out with my friends. (Rachel, p. 15)

Structural Description of Rachel

Rachel's decision to move out of her parents' home and in with her boyfriend was the trigger of relational and emotional upset. The decision initially upset her parents and caused her to feel sad and depressed as well. When the new living arrangements with her boyfriend failed to work out in less than one year, a new wave of emotional upheaval occurred. During this time frame, Rachel's parents had moved to a new home and sold all of Rachel's bedroom furniture; therefore, Rachel was sleeping on the sofa offering less than adequate quality of sleep. During all of this emotional, relational, and lifestyle change, Rachel was also trying to juggle a work

schedule and maintain classes. These responsibilities became very difficult for her, as she developed an attitude of not wanting to do anything at all, and her grades dropped dramatically.

A routine annual visit to the doctor revealed physical issues new to Rachel. Not only had she lost a considerable amount of weight, she was also diagnosed with high blood pressure, endured several types of tests, urged to change or stop the birth control method she was using, and prescribed anti-anxiety medications for the emotional breakdowns that she was experiencing. Rachel believes that these physical findings were all linked with the relational and emotional stressors that she was attempting to work through.

Rachel shared that even with all of the emotional and physical problems with which she had been dealing that she still considered the emotional aspects of her well-being as being most fulfilled in her life currently, because of the support that she received from her parents and friends while going through those difficult problems. In addition, she feels that her environmental well-being is strong because she is surrounded by people who support education which is her primary focus at the present time.

The relocation of Rachel's home now has resulted in her having to drive quite a bit further to work and school. Therefore, she considers her financial well-being to be least fulfilled, since she has to spend much of her money on fuel. Another area of well-being that Rachel finds least fulfilled is the social aspect. The fact that she has to work, go to classes, and spends a substantial amount of time studying leaves little time for socializing with her friends. She equates her personal well-being to an ongoing stopwatch because no one ever clicks the stop button as she is constantly busy. Rachel also felt that the show "Teen Mom" symbolized her well-being in many ways. She felt that she had to give up many activities that she enjoyed in order to be successful in college.

Textural Description of Dexter

Dexter explained that well-being to him is everything that makes you, you. “It’s not just your health, but I always thought of it as your health, your spiritual, mental, physical, things like that” (Dexter, p. 6). He explained that if he feels off in one area, it affects the others and thinks it would be difficult to have them all balanced all of the time. When asked if he could think of any personal experiences or situations that had impacted his well-being during the time he had been attending college, he shared the following:

Yeah, ah, when I first started school, once I got into like my first time taking anatomy and stuff like that, I had a lot going on at home. I mean, I ended up being homeless for about a month. I basically just quit coming to classes and you know, obviously failed all of them. I was living in my truck just driving from parking lot to parking lot. I mean, I would really just sleep. I’m bipolar anyway and was not medicated at the time because I didn’t have insurance. (Dexter, p. 6)

When asked why he chose to not tell anyone or try to get help, Dexter explained that asking for help was difficult for him.

I didn’t, I don’t, have a huge group of, a close knit group of friends. I’ve always just been by myself and what couple family members I have. I guess once you get to that place, it’s a pride thing for me. I was embarrassed for what I was going through. So, I, you know, I just kept it to myself. Trust issues are one thing that I’ve always had because I’ve been burnt so many times by people that I did trust that it’s hard for me to let somebody in. (Dexter, p. 7)

This lifestyle continued for a month according to Dexter. He described how he had to donate plasma for money and showered at the YMCA while also going there to get warm. When asked what the turning point was that got him from that point to now, he responded

I guess it came down to a decision that I was either going to take my life or I was gonna make my life and I, to be honest, I think it was a song I heard on the radio. I couldn't tell you what song it was but music, you know, music gets me through A LOT and I thought I'm not gonna be this guy in this song so I did go ask for help. I talked to my mom.

(Dexter, p. 8)

As we discussed how he finally asked his mother for help, Dexter explained that she was not surprised that he had been going through a difficult time because this had not been the first time that Dexter had experienced personal struggles. He shared that he has a history of drug and alcohol abuse. "I had been this way in Kansas City and tried to kill myself out there. It was either stay in that environment or be around what few people want to help me. I've actually tried to kill myself twice (Dexter, p. 8). He shared that his family is where he can go for help if he needed to.

When reflecting back on the time during which he was homeless, Dexter explained that he ended up failing all of his classes and was then placed on academic probation. He was actually happy; however, because that meant that he still had a chance. Even with another chance he explained that his confidence was low. When asked what might have helped improve his well-being between the time he spent homeless and now, Dexter expressed interest in counseling services. He explained that having had access to some type of personal counseling would likely have helped him to maybe move into a more positive direction sooner. He also

stated that he would use a facility like that on campus now as he struggles with various issues daily.

Confidence has always been one of my weakest points. I've had so many people tell me that I can't do things that I believe it and I still struggle today. Even in this class I think I can't do this and of course all of these girls tell me I have the highest grade in the class and to just shut up and do it. (Dexter, p. 9)

Dexter went on to explain that it has helped him in the past to voice his concern with confidence in certain areas so that he might possibly hear positive feedback from other people. He shared an experience in a phlebotomy class having to do with his confidence level.

No offense to any of the girls, but I thought I was the only guy so I was going to be the best and show them how it's done. At first, we had to do the dummy arm. I wanted to stick a real person and so one of the girls let me and the first time that I stuck her, I didn't get blood. I was ready to walk out of the class. I was like I can't do it, you know? I knew what I was doing. I knew where that vein was. I knew how far to push that needle in and then when I missed the vein, that's just when I went from level 12 confidence to like I don't know that I can do this. The instructor tried to calm me down. Then, I was ready to go out and punch the wall. One of the other girls in class went to draw on somebody and she got it the first time. Instead of being jealous, I felt pride; I was so happy. That's when I realized that in these classes, it's not about me, it's about us. We're a team. I want them all to succeed. It was that day. I mean it was almost like watchin the "Grinch". As soon as those little Whoos started to sing . . . I mean I went from being mad and you know, because I wasn't going to be the best at something so it

was like, it was almost like, this is my sister and she's got this! These classes have been a place to connect. (Dexter, p. 9)

Dexter stated that the areas of social and emotional well-being are most fulfilled currently in his life. He feels this way, largely because of the people he has had the opportunity to meet in classes, and the relationships that have developed. The least fulfilled areas of well-being in his life include spiritual and financial. "I've never been a spiritual person; it's just not my thing. I'm sure that if I had something that I believed in, it would be more important to me (Dexter, p. 15). He stated that his goal is to get everything else right. Dexter explained that the financial aspect of his well-being is low because of earning a low wage and paying child support.

When Dexter was asked if there was an object that could symbolize his personal well-being at the present time, he stated that the first thing that popped into his mind was a top because it spins and hardly ever slows down. "I mean, that's part of you know taking 15 hours of classes and trying to work 40-50 hours every week" (Dexter, p. 16). He added that he feels lucky if he gets four hours of sleep at night. As far as other aspects related to physical well-being Dexter shared the following:

I'm working on the physical because that's my release. That's another one that's right now right under the social and emotional. I try to get to the gym at least five times a week. That's my "me" time. That's when the world slows down for me. If I can get there at 5:30 in the morning, I try to. It's therapy for me. (Dexter, p. 17)

The idea of having a convenient place to exercise on campus was discussed. Dexter expressed great interest in that idea and added that just having basic exercise equipment could motivate many students.

Dexter was asked about a song, movie, or a television show that could symbolize his personal well-being.

I'm pretty sure that 80% of my brain is song lyrics. My theme song right now; just because I know who I am and where I was is "Demons" from Imagine Dragons. I mean, it's just, you know, I know that there's something dark inside of me. "Counting Stars" from One Republic is very positive and it's kind of how I feel. The song is about a guy and a girl and he thinks of all of the things that they can be so you know, instead of making up ways, instead of counting money to find the reasons, he starts counting stars cause you're never gonna stop counting stars. So, I mean it's, I love that song, you're always reaching and there's always just a little something more you can do. There's another reason why things are going good. (Dexter, p. 20)

"Demons" by Imagine Dragons

When the days are cold
 And the cards all fold
 And the saints we see
 Are all made of gold
 When your dreams all fail
 And the ones we hail
 Are the worst of all
 And the blood's run stale
 I wanna hide the truth
 I wanna shelter you

But with the beast inside
There's nowhere we can hide
No matter what we breed
We still are made of greed
This is my kingdom come!
This is my kingdom come!
When you feel my heat
Look into my eyes
It's where my demons hide
It's where my demons hide
Don't get too close
It's dark inside
It's where my demons hide
It's where my demons hide
When the curtains call
It's the last of all
When the lights fade out
All the sinners crawl
So they dug your grave
And the masquerade
Will come calling out
At the mess you've made

Don't wanna let you down
But I am hell bound
Though this is all for you
Don't want to hide the truth
No matter what we breed
We still are made of greed
This is my kingdom come!
This is my kingdom come!
When you feel my heat
Look into my eyes
It's where my demons hide
It's where my demons hide
Don't get too close
It's dark inside
It's where my demons hide
It's where my demons hide
They say it's what you make
I say it's up to fate
It's woven in my soul
I need to let you go
Your eyes, they shine so bright
I want to save that light

I can't escape this now
 Unless you show me how
 When you feel my heat
 Look into my eyes
 It's where my demons hide
 It's where my demons hide
 Don't get too close
 It's dark inside
 It's where my demons hide
 It's where my demons hide.

(Grant, A., Reynolds, D. C., Sermon, D. W., McKee, B. A., & Mosser, J. F., 2013)

Counting Stars by One Republic

Lately, I've been, I've been losing sleep
 Dreaming about the things that we could be
 But baby, I've been, I've been praying hard,
 Said, no more counting dollars
 We'll be counting stars, yeah we'll be counting stars
 I see this life like a swinging vine
 Swing my heart across the line
 And my face is flashing signs
 Seek it out and you shall find
 Old, but I'm not that old
 Young, but I'm not that bold
 I don't think the world is sold

I'm just doing what we're told

I feel something so right

Doing the wrong thing

I feel something so wrong

Doing the right thing

I could lie, couldn't I, could lie

Everything that kills me makes me feel alive

Lately, I've been, I've been losing sleep

Dreaming about the things that we could be

But baby, I've been, I've been praying hard,

Said, no more counting dollars

We'll be counting stars

Lately, I've been, I've been losing sleep

Dreaming about the things that we could be

But baby, I've been, I've been praying hard,

Said, no more counting dollars

We'll be, we'll be counting stars

I feel the love and I feel it burn

Down this river, every turn

Hope is a four-letter word

Make that money, watch it burn

Old, but I'm not that old

Young, but I'm not that bold

I don't think the world is sold

I'm just doing what we're told

I feel something so wrong

Doing the right thing

I could lie, could lie, could lie

Everything that drowns me makes me wanna fly

Lately, I've been, I've been losing sleep

Dreaming about the things that we could be

But baby, I've been, I've been praying hard,

Said, no more counting dollars

We'll be counting stars

Lately, I've been, I've been losing sleep

Dreaming about the things that we could be

But baby, I've been, I've been praying hard,

Said, no more counting dollars

We'll be, we'll be counting stars

Take that money

Watch it burn

Sink in the river

The lessons are learnt

Take that money

Watch it burn

Sink in the river

The lessons are learnt

Take that money

Watch it burn

Sink in the river

The lessons are learnt

Take that money

Watch it burn

Sink in the river

The lessons are learnt

Everything that kills me makes feel alive

Lately, I've been, I've been losing sleep

Dreaming about the things that we could be

But baby, I've been, I've been praying hard,

Said, no more counting dollars

We'll be counting stars

Lately, I've been, I've been losing sleep

Dreaming about the things that we could be

But baby, I've been, I've been praying hard,

Said, no more counting dollars

We'll be, we'll be, counting stars

Take that money

Watch it burn

Sink in the river
The lessons are learnt
Take that money
Watch it burn
Sink in the river
The lessons are learnt
Take that money
Watch it burn
Sink in the river
The lessons are learnt
Take that money
Watch it burn
Sink in the river
The lessons are learnt
(Tedder, R., 2013)

Structural Description of Dexter

The beginning of Dexter's college career was challenging, to say the least. As he entered into the general study courses with plans to major in some area of health, he finds himself homeless and living in his truck. The bipolar disorder that Dexter described is controlled with medication that he could not afford without insurance. As he basically slept and donated plasma in order to survive during a chilly autumn month of being homeless, Dexter was also failing the classes in which he was enrolled.

Hearing a certain song on the radio had inspired Dexter to make a decision to either end his suffering or get help. He chose to talk to his mother and to try to work through the difficulties. He described struggles in his past with alcohol and drug abuse and how these issues had led him to suicide attempts on two occasions. While he believes that his family is there for him during difficult times, Dexter finds it difficult to open up to people and ask for help because of negative experiences with trusting people in his past. He has struggled with relationships partly because of his bipolar personality disorder and drug and alcohol dependency. He has also avoided counseling because of the cost.

As circumstances began to become brighter for Dexter after asking for help and trying to stay focused, he discovered that he had been placed on academic probation. Even though this is generally not a good place to be, Dexter felt relieved that he at least had another chance toward achieving an education. He discovered through a series of events in certain medical assisting courses, that he was beginning to reach higher levels of confidence and that he felt more comfortable trusting people he had met. An experience in a phlebotomy class when he was unable to draw blood left Dexter with that all too familiar feeling of his confidence plummeting. However, when he witnessed that a classmate did achieve the goal of successfully drawing a blood sample, he realized that he was happy for that person and noticed that he actually felt like part of a team for the first time. He shared that many classes ended up being places where he felt he could connect and be part of a team of people with similar interests who all shared challenges as well.

As a result of these more positive experiences in his life, Dexter now feels that his social well-being is the most fulfilled aspect of his wellness. Although he felt nervous and uncomfortable initially, the classes have helped him to develop healthy relationships with people

and learn techniques and procedures that interest him. The emotional fulfillment has led to a strong social well-being as well, since he now has a circle of friends he feels he can trust. Dexter does not feel that his spiritual and financial well-being is fulfilled at this point in his life. The fact that he is not a spiritual person makes this component of well-being unimportant to him. Working many hours each week to pay child support is a factor in the lower financial well-being at this point in Dexter's life.

The challenging schedule of working full-time, maintaining a full-time class schedule, and attempting to spend time with his children has resulted in Dexter feeling similar to a spinning top because of the constant movement. Physical activity is a major part of his emotional well-being which is an area that Dexter tries to maintain consistency. The two songs that Dexter shared, as describing where he was and who he is now, also encourage him to stay on course and keep perspective of what is important. Because of the struggles that Dexter has endured and what he has learned from his experiences, he enjoys reaching out to other students and friends he has made. He feels that he can relate with many of the struggles that individuals go through and looks forward to opportunities to help others through his work in the health care arena.

Textural Description of Shyann

Shyann shared that well-being to her involved "happiness, health, and whether or not things were falling into place" (Shyann, p. 3). She elaborated:

That's just kind of how I see well-being. I mean, financially you're stable; it equals every part instead of. . . I don't know. I don't think you ever get balanced financially, but other than that one. You can set it up for yourself. The person and how they manage their life. Because if you're gonna be negative all the time, you're not ever gonna be

able to be balanced but the people who kind of just let life happen and go with the flow; I think they are more able to be balanced. (Shyann, p. 3)

The discussion about personal well-being and what that meant to her prompted Shyann to expand more on the idea of well-being in her life at the present time. She shared that she felt that occupational and spiritual were the two areas that were most fulfilled. She noted:

Um, I think occupational because I like my job and what I do, and when I started cleaning, my boss pretty much put me on my own. She could tell that I just really don't have any problems taking the bull by the horn. I don't really have any fears about doing things on my own, and I think she saw that so she started making me over other cleaners; like training. (Shyann, p. 4)

After Shyann explained how much she enjoyed her job cleaning houses, she talked about how she would likely always continue cleaning houses, even after completing her training as a medical assistant.

I mean, even if I go into like the medical field or whatever I'm going to do, I still see myself helping with the cleaning just because I enjoy it. I'm kind of OCD so when I get to go into somebody's house and do my own thing, I like that. You get away and it's kind of like how I de-stress like with exercise so when I can't, cleaning is my next best thing as weird as it sounds. (Shyann, p. 5)

Another area of well-being that Shyann felt was fulfilled in her life is spirituality. She shared the following:

Spiritual too, because I just don't think that you have to go to church like every single Sunday to be spiritual so I think I'm good in that one. I mean, basically, just praying and having the kids pray and kind of explaining to them about the whole like God thing is

what I try to do. I mean, there's so many different religions that it's hard to be able to tell your kids exactly what they are. I just feel like if you believe in God and you go to church every once in a while, I mean, I know people say you need to be saved and do all this stuff, but I never grew up going to church all of the time and with life being so busy, I just don't have time. I know that sounds bad but to take an hour and spend it at church . . . I mean, that's just how I feel. We do go, but not always. I think there is a higher power and things do happen and you just have to be thankful for it. (Shyann, p. 5)

Shyann added the following about areas of well-being in which she felt could be improved.

Um, the intellectual part maybe medium. Um . . . the rest of them are kind of just like I could probably be better on like the physical cause I don't have enough time to sleep or diet or get nutrition. I mean you just kind of; you let that happen with studying and work. You don't ever have time to eat or sleep it seems like. I chase three kids and clean houses so I get plenty of exercise! I think I'm pretty good on the social except that it just doesn't seem like you have a lot of time to, I don't know, if there was more time in the day, I could feel like I spend enough time with my kids or my husband or there just doesn't seem like there's enough time to always make everybody happy. (Shyann, p. 4)

As the conversation continued, Shyann was asked if there had ever been an experience or situation in which she felt that her personal well-being was greatly impacted. She shared that just a few months ago she and her husband separated.

Like a little while ago, it's been a couple of months ago, my husband and I separated. That was kind of hard but we worked everything out. My husband was overseas so I had the kids in school and thank God family that helped but I think you just have to kind of

keep going cause Lord knows if you stop, you just kind of get depressed and it just . . . I don't know; you can't focus enough to do anything. (Shyann, p. 6)

She explained further that her husband was part of the military and served as a fire dispatch/medic. Shyann indicated that she felt that his experiences, while he was gone, affected her well-being, as well as their children's.

I think kind of like with our separation he was a different person. Like before, it was just harder for him to get in the mind set again of being home and having kids. He was gone for so long and he didn't have to deal with it and then he comes back to the bills and reality and I don't tolerate a whole lot so it was either you fix it, or I just can't. He was gone twice. The first one was a year; this last one was 15 months. (Shyann, p. 7)

When asked if she had to adjust as well when her husband returned, Shyann stated, "Yeah, our son was one when he left so we have a bond that's kind of like inseparable. I have a boy that's 10 and a girl that's eight, and then our son (Shyann, p. 7). She added that it was very difficult for her children to adjust to the changes as well. Shyann was then asked if she felt that the separation caused more of the marital problems or the changes that accompanied her husband's return.

I think a little of both. It's hard because I'm so independent and I like things my way . . . not in a bad way, but I was just so used to that that it's hard to let somebody come back and like, oh, can you help me do this . . . like it's just so hard. It's a lot better than it was. I think it took . . . I mean . . . we had a really good friend who went to church and he was a marriage counselor so we sat down with him and we just kind of went through everything. It is kind of like a wellness, if you can even believe that, like what parts of your life are being affected and what do you need to change them? How are the kids in

it? The kids were supposed to be the main goal but they kind of just sit in the back when you fight so much and they're affected by it. That's the one thing that just tears me up. The counseling was kind of more like marriage counseling so the kids didn't get to talk to anybody. They talked to my mom or me, but still. (Shyann, p. 7)

As Shyann continued to talk about the family dynamics at her home and about her children, she shared also that she feels extremely close to all three of her children.

I'm really close with my kids. He kind of had a temper whenever he came back so they . . . the older two have a different dad who never is around and went to drug rehab if that makes any sense. He just doesn't care so this is really their dad. Our youngest, we share. It was hard for the older two to lose a dad again so they struggled with it. I really wanted to work it out cause you just can't have people in and out of kids' lives that you know, I can do what a guy is supposed to do but I can't really do it. You know what I mean ? (Shyann, p. 8)

When asked if there was anything that symbolized her personal well-being, Shyann described how she often felt like a ball. She explained that she constantly felt as if she were being tossed around from person to person.

I feel like a ball and there's not enough time. Everybody's passing it around so fast that you just can't be in their hands long enough, but I'm not necessarily wanting to go. Like I just can't be everywhere and I say it all of the time; there's just one of me and so many people. (Shyann, p. 9)

Shyann then explained that "I Am Legend" is a movie that reminds her of her own well-being.

Will Smith. He's kind of like by himself throughout everything. It's like, you know, he's kind of like by himself and he's the only one left who can find a cure that can save everybody and he's constantly going. I always feel like that. I'm going to school and trying to do better but sometimes it really does feel like I'm just on my own. When I'm trying to do homework or something, the kids are running around and they want to spend time. My husband is like, can't you do this? I'm like, I'm trying. (Shyann, p. 9)

As the conversation continued, Shyann was asked if she thought that she would ever want more space in her day.

When I do, I find something to fill it so I don't think I'm that type of person who can just sit. I always have to be doing something. Since I've started such a crazy, busy life to keep my mind occupied, I just can't. I'm afraid that if I do sit too long that I'm gonna start thinking about everything. I don't know if that would be bad, but there's so much I just don't think I could cope with it all. (Shyann, p. 10)

Shyann was asked if she felt that she would utilize counseling services if they were available on campus. She replied, "Absolutely" (Shyann, p. 8).

Structural Description of Shyann

Shyann's husband was away as part of his military career. His length of time away and return has impacted her personal well-being. She added that he had to be gone on two occasions; one for 12 months and another for 15. While Shyann wanted to be supportive throughout her husband's responsibility to be away, she admitted that it had become very difficult for her and for her children, and eventually resulted in a separation between her and her husband. She feels that when her husband returned from being away for so long that he was a different person. Adjusting to the reality of life here for her husband, as well as adjustments for Shyann and her

children presented, challenges to each of them. Her children were a driving force in working out their marital differences. She indicated that she felt her children needed stability and would, therefore, prefer to make the marriage work if at all possible. The father of her two older children is not a part of their lives, which she underscored, was difficult for the children to accept. For this reason, avoiding another major disappointment in her children's lives by keeping her family together is even more vital. The independence and level of responsibility that Shyann had developed, while essentially playing the role of a single parent, was altered when her husband returned. Day-to-day living was suddenly different which presented challenges for both Shyann and her husband. Even though they were able to work things out for the most part, a lot is required of both of them as they continue to adjust to the differences of being together as a family again.

Shyann described well-being as involving happiness, good health, and details of life working out as planned. She added that she believed that people could "set up" their well-being by the decisions that they make and the attitudes in which they maintain.

One of the areas in which Shyann described as being most fulfilled in her life was her occupation of cleaning houses. This happened to be an area of her life in which she was given additional responsibilities, that she enjoyed, and also where Shyann could find time to spend alone doing something that she perceived as being useful. While she obviously described many responsibilities at her home, with her children, as well as her class work, cleaning homes for other people offered her security and independence. Along with occupational well-being, Shyann added that the area of spirituality was also an area in which she considered fulfilled in her life. Although she does not feel that she is required to attend church services regularly, she believed that she had a rich personal relationship with her higher power in which she is thankful.

Shyann felt that other areas of well-being for her could be improved, but especially the area of physical. While she feels that cleaning and trying to keep up with her three children offers her plenty of exercise, she said that her diet is lacking and that she never gets enough sleep. Her reasons for not meeting these physical needs are directly related to her busy schedule of working, school, and taking care of her children. Shyann's demanding schedule reminds her of a ball being passed around a circle of people who she cares about; however, she had very little time to spend in each of their hands. While she would like to spend more time with her husband and children, slowing down enough to do so might cause her to think about details of her life that she feels would be very difficult with which to cope. Shyann feels that talking to someone about these types of things and finding healthy ways of coping would be helpful

Textural Description of Brooke

Brooke describes well-being as a combination of many things. When asked to elaborate more on what personal well-being meant to her personally, she explained that she really just tried to go through life every day.

You know for instance my son, and what mood he's in on that day. It all depends on how my son wakes up. He has a lot of issues and we have child psychologists coming to the house and a social worker. I also have a counselor outside the house that I take him to because of his bipolar disorder. His days fluctuate. I have to deal with him in a different way than what I do with my daughter who's 14. I have to give more of my time to him. She's very helpful and understands. Whether we're gonna have a good day, or whether we're gonna have a bad day; you never know. With my granddaughter's mother still being so young and stuck in the drama stage, I mean, we deal with the drama from that you know give or take. (Brooke, p. 5)

Brooke went on to explain further that her overall well-being is directly affected by how her son is doing on a daily basis.

Sometimes he wakes up and doesn't want to get out of bed. The weather plays a big factor with him. Sometimes he seems more down when it starts to get colder. He has cabin fever really bad and keeps to himself. There's no rhyme or reason and I just plan my day around that every day. He likes school when he goes. He's one of those kids that traditional school is just not for him. It just does not fit him and the schools aren't willing to accommodate either. I've fought, and fought, and fought with the school system. (Brooke, p. 6)

Brook appeared to be comfortable talking about her son and his situation. She noted that when he was five or six years old, he was diagnosed with attention deficit hyperactivity disorder (ADHD) only to find out that his condition was actually a bipolar personality disorder which has been diagnosed in individuals on both sides of her son's family. She said sadly, "We treated him for ADHD all of those years (Brooke, p. 6).

As the conversation continued, Brooke was asked about the possibility of other experiences or situations that had occurred and impacted her personal well-being. She shared that nine months ago her granddaughter was born.

Two weeks before she was born my son was like, mom, and I could tell by the tone. I just didn't want to believe him at first and then she called me crying and I had just dropped my son off at school and had to go back and get him cause she was in labor. When she was born, she had a little bit of an issue. The umbilical cord was wrapped around her neck so her O2 sats were really low and we ended up with a feeding tube for a little bit.

She just got caught in the pelvic bone and they didn't know the cord was wrapped. She was a little bit gray and they kept her for almost two weeks. (Brooke, p. 7)

When asked how the birth of her granddaughter affected her, Brooke responded:

I missed class. I had a very nervous child. He was scared to touch her at first. He thought she was too tiny. For as young as they are, they're very good parents. I'm proud of them. They're very excellent with her. She's the happiest little thing you've ever seen. I really didn't have anything for her when she was born so I had all of that stuff to get. (Brooke, p. 7)

Brooke added that she is paying for all of the baby's expenses. She explained that her well-being was impacted financially, emotionally, and intellectually. However, she added that there has been more joy as a result of her birth than anything. She shared that she relies on God to help her through life. "You gotta have faith. If you don't have faith then you don't have nothing" (Brooke, p. 8). Brooke shared that she looks to her faith regularly for strength and that spirituality is important to her.

The area of well-being in which Brooke feels she is most fulfilled is occupational.

I work with a great group of girls and I don't have to deal with the younger ones.

I'd like to go back for RN. That's a goal. I'm really happy where I work now so I would probably just want to keep working there. I'll sometimes find someone who somebody is giving a hard time and I'll just throw them under my wing. I worked at a nursing home and there was a whole group of old school girls there and they had their own way and I got stuck in a hall on third shift with 32 people to myself to take care of. I just prayed that they all slept. A girl came back from sick leave and when she came back, and she

saw them girls harassing me she was like, no, come on, so she threw me underneath her wing. They didn't think I did anything right. She helped me. (Brooke, p. 9)

Brooke shared that her social well-being was the least fulfilled right now. "I don't go anywhere. It's home, work, and school. My kids are my social life" (Brooke, p. 8). She smiles and acknowledges that that's fine with her.

When Brooke was asked to think of an object that she felt symbolized her personal well-being, she quickly responded that she would have to say fireworks.

Like I said, you never know what kind of mood my son is going to wake up in. You watch what you say and walk on eggshells. If he explodes it's like fireworks. He yells and throws stuff, but as far as me and my daughter's concerned, he doesn't hurt us. (Brooke, p. 10)

Brooke then shared that the song "God Gave Me You" by Blake Shelton is the song that best describes her personal well-being.

It just makes me think about what I've got. I could be like some people who have nothing. Um, I don't know what I'd do without my kids; I don't. My kids are everything to me, and my mom and dad. I feel God don't give you more than you can handle. There's days when my family's had to jump in and help. My son's dad is a rehabbed drug addict and he's not around much. (Brooke, p. 11)

"God Gave Me You" By Blake Shelton

I've been a walking heartache

I've been a walking heartache

I've made a mess of me

The person that I've been lately

Ain't who I wanna be
But you stay here right beside me
And watch as the storm blows through
And I need you
Cause God gave me you for the ups and downs
God gave me you for the days of doubt
And for when I think I lost my way
There are no words here left to say, it's true
God gave me you
Gave me you
There's more here than what we're seeing
A divine conspiracy
That you, an angel lovely
Could somehow fall for me
You'll always be love's great martyr
And I'll be the flattered fool
And I need you
Yeah!
God gave me you for the ups and downs
God gave me you for the days of doubt
And for when I think I lost my way
There are no words here left to say, it's true
God gave me you

On my own I'm only
Half of what I could be
I can't do without you
We are stitched together
And what love has tethered
I pray we never undo
Cause God gave me you for the ups and downs
God gave me you for the days of doubt
God gave me you for the ups and downs
God gave me you for the days of doubt
And for when I think I lost my way
There are no words here left to say, it's true
God gave me you, gave me you
He gave me you
I've made a mess of me
The person that I've been lately
Ain't who I wanna be
But you stay here right beside me
And watch as the storm blows through
And I need you
Cause God gave me you for the ups and downs
God gave me you for the days of doubt
And for when I think I lost my way

There are no words here left to say, it's true

God gave me you

Gave me you

There's more here than what we're seeing

A divine conspiracy

That you, an angel lovely

Could somehow fall for me

You'll always be love's great martyr

And I'll be the flattered fool

And I need you

Yeah!

God gave me you for the ups and downs

God gave me you for the days of doubt

And for when I think I lost my way

There are no words here left to say, it's true

God gave me you

On my own I'm only

Half of what I could be

I can't do without you

We are stitched together

And what love has tethered

I pray we never undo

Cause God gave me you for the ups and downs

God gave me you for the days of doubt
God gave me you for the ups and downs
God gave me you for the days of doubt
And for when I think I lost my way
There are no words here left to say, it's true
God gave me you, gave me you
He gave me you
(Shelton, B., 2011)

Structural Description of Brooke

The foundation of Brooke's daily routine and overall well-being is based on how her 17-year-old son awakens on any particular day. She is forced to begin each day with uncertainty because of her son's unpredictable behavior, a symptom of his bipolar personality disorder. In addition, Brooke also divides her time among her 14-year-old daughter, 9-month-old granddaughter, class responsibilities, and work. Never knowing exactly how her son will wake up, Brooke is aware that he might refuse to get out of bed, feel depressed and angry, or will hopefully wake up in a more positive frame of mind. Therefore, her day is determined by the disposition of her son. If he is doing well, Brooke feels well also. If her son is struggling on any given day, Brooke has a difficult day. Her emotional well-being can only be as fulfilled as her son's.

Brooke recalls another certain incident having to do with her son that has impacted her well-being in many ways. Nine months ago, her son's daughter was born. She was only given a two-week notice that this was going to happen. While Brooke already felt emotionally and physically exhausted most of the time, this became a new focus. The unexpected birth of her

granddaughter impacted Brooke's emotional, intellectual, financial, and spiritual well-being. Her son was afraid of being a father at such a young age, which added to her concerns. Her grades went down since she was forced to miss classes during that time frame. In addition, the birth of her granddaughter resulted in more financial expenses. The spiritual force in her life, however, helped Brooke during this time of change. She shared that she has experienced more joy than anything else as a result of her granddaughter's birth.

As a single mother and grandmother, Brooke finds strength through her faith. Faith and family are the two a driving forces in her life. Brooke maintains a full load of classes in the medical assisting program and works as a Certified Nursing Assistant (CNA) at a nursing home. As Brooke described her experiences at work, she shared that she enjoys her job very much. She feels successful there and likes to help other CNA's who are learning. She described a time when she was new and how a certain individual helped her. She feels a desire to help other coworkers in this same way. In addition to enjoying what she does as a CNA, Brooke is also experiencing a sense of encouragement from the people with whom she works and finds work to be a place where she can converse with other adults. It is not a surprise that the area of occupational well-being was the area in which Brooke felt most fulfilled. However, because of her extremely busy schedule, the area in which she feels least fulfilled is the social aspect of well-being. She described her children as being her social life for the time being, and likely finds a sense of social connection at work as well.

When asked if she could think of an object that described or symbolized her personal well-being, Brooke said that she would have to say fireworks. If her son did have a difficult day, she described his outbursts being similar to fireworks going off. His difficult days consisted of yelling loudly and throwing objects, which in turn directly impacted her well-being.

Immediately after describing the explosion that her son could cause on a day that was not going well, Brooke mentioned a song called “God Gave Me You” that she said also described her well-being.

Textural Description of Lynn

Lynn describes her personal well-being right now as being “good”. “Life is good, everything’s going as planned.” She added, “I love my life” (Lynn, p. 3).

I kind of feel like my emotional is the strongest right now. You know I’ve learned how to deal with stress and not to take everything to heart. It’s really stressful going everywhere. You know, here then work and everyday you just keep going, but I think there’s no point in stressing out. I mean everything comes and goes. I used to worry all of the time. I got put on medicine and then, I mean, I used to cry all of the time and everything and then they put me on that medicine, but I don’t really dwell on the medicine anymore. It’s like everything’s off my shoulders now. (Lynn, p. 4)

Lynn shared that the time period in which she cried a lot began during her years in high school. She added that the stress of school work and cheerleading competitions and practices seemed to overwhelm her.

I’ve thought of stopping it, in fact I’ve tried to but I get really bad headaches when I don’t take it. I might talk to my doctor. My mom’s the one who took me to the doctor. I didn’t want to go, but she knew something just wasn’t right. The boyfriend stuff and that whole high school, you know. (Lynn, p. 5)

Lynn then explained that after emotional well-being, a close second to being most fulfilled is the social aspect. She shared that she enjoyed hanging out with friends and with her

boyfriend. She then talked about an area in which she feels is least fulfilled and one she would like to work on.

The physical stuff because I sleep a lot. I sleep 14 hours every day. My mom thinks I might have sleep apnea because I used to have it when I was little. We looked up the symptoms and I have the day time drowsiness that was listed. I know that's not good for you. I'd also like to exercise more if someone would exercise with me. At the hospital there is a fitness center and it's only \$16 a month for two people. We live in Eaton and we don't drive here for that. I mean sometimes I go before work and walk on the treadmill or if it's slow. Only a couple of times though. In high school, I was active as a cheerleader and we conditioned for an hour before and after. Now I have to make myself get up. I enjoyed it then. (Lynn, p. 5, 6)

When asked if she had ever experienced a situation that impacted her personal well-being Lynn talked about a time when her parents were experiencing a lot of marital problems.

In 2011 my parents were gonna go through a divorce and they got back together thankfully, but it would have been a big, nasty ongoing divorce. It started in August and I think he was messing around in July because during fair week, he just wasn't the same. He was home by Thanksgiving so it went on for about three months. I was in the middle of the whole thing. It was right when I started college in August. I know my emotional, physical, a bunch was tweaked. He cheated on my mom with his high school sweetheart so I mean and he was the one who contacted her on facebook and my mom found out through Verizon. He just wasn't himself. Sure enough, her number was there. My mom confronted him and he moved out and it was crazy. One night my boyfriend stayed with us at my mom's house cause there were no guys there; just me, my sister, and my mom.

He was working in Muncie at the time and it was easier. Well, my mom and dad were trying to work things out so he was home for dinner and she called him while we were eating. He left and my mom followed and they got in a big argument. Later on that night, we were in bed and, I'm sorry, but it's not like we are gonna do anything with my mom and my sister right there, but my dad was not OK with it. Well, he came over and told my mom he was gonna kill her and we were all right in the middle. Then, he got in my boyfriend's face and yelled at him because he was in my bed. The cops came and they were gonna fight for custody of my sister. It was just draining. (Lynn, p. 7)

Lynn explained further that during that time frame when her parents were having relational problems that it was really difficult to do much of anything. She talked about how her grades began to drop and how she was unable to feel motivated. She felt like she was in the middle of the conflict most of the time as they made attempts to sort it all out.

He's pretty much back to normal now. They're happy. I mean, now we're getting along but I made him apologize to my boyfriend. I'll never forget it though. I mean, my parents were the only parents that hadn't gotten a divorce out of my entire group of friends and it was list like, I've seen them go through that and it's bad. It was hard to understand that my mom still loved him. I saw my grandma cry and I've never seen that happen. You know, my mom's mom. We just all got closer and now we're more open. (Lynn, p. 8)

When asked if Lynn thought she might have taken advantage of counseling services available on campus had they been available during that time she stated that she really didn't know if she would have or not. She felt that her family was able to talk through most of the issues. As the conversation continued with a focus on Lynn and her family, she shared also that

she feels that her family supports her in her educational endeavors and that her grandmother actually pays for all of her educational expenses.

If it weren't for my grandma, I probably wouldn't be in college. She really pushed me to go and I wanted to show her that I could prove everyone else wrong. I mean, my mom and dad didn't go to school; my grandma dropped out when she was 16 which back then, that was OK. My aunt didn't go back until she was 40. I have to be a role model for my sister. She's 14 and excited for me. (Lynn, p. 6)

Lynn shared that a character who reminds her of her personal well-being is Winnie the Pooh. She added, "Pooh Bear just kind of takes things as they come and enjoys life as it is" (Lynn, p. 9).

Structural Description of Lynn

The relational conflicts in which Lynn's parents experienced impacted her well-being greatly causing her to feel as if she were struggling in every area of her life. Over this three month period of time, Lynn felt as if her entire life was impacted as her motivation markedly declined. The timing of this relational upset could not have been worse as she was just beginning her first year of college classes in the area of medical assisting. Not only did the marriage conflicts involving trust issues affect Lynn, but she also found herself feeling as if she were in the middle of the situation. As she made attempts to try to understand and make sense of the details of the marriage and family upset, she also felt a need to try to protect her sister from the affects of what was happening between their parents. Not only did this involve her parents, but a dispute ensued between her father and her boyfriend one evening during this time period that has left Lynn with the inability to forget and move past the problem. She felt that the

problem between her father and her boyfriend could have been handled in a much more civil manner.

A difficult time to say the least turned brighter when Lynn's parents ended up working through their differences and not divorcing. While she feels happy and relieved that they were able to stay together, Lynn is left somewhat confused as to why it all had to happen in the first place, and also with some resentment toward her father. She did add, however, that everyone involved including her parents, sister, and grandmother are more open now than before the conflict occurred. It was inevitable that they communicate and support each other if they were going to survive the type of ordeal that they were all forced to endure.

Lynn went on to describe how her family was a strong source of educational support for her. She explained that her grandmother is paying for all of her educational expenses otherwise; she would not be going to college. Lynn expressed pride in the fact that she is attending college and will soon graduate. This is even more exciting to her considering that neither of her parents went to college. She felt very strongly about setting a positive example for her younger sister to follow and believed that a college education was a vitally important part of that example.

When asked about her personal well-being, Lynn described her personal well-being at the present time as being good. She explained that life is good and that her plans are all in place. While Lynn's description of her personal well-being is very positive, that has not always been the case. She shared details of her days in high school and how difficult it was for her to manage what she described as stress that she experienced with school work, social situations, and cheerleading competitions. The anxiety from these experiences became so much of an issue that she was diagnosed with an inability to handle anxiety and placed on medication to help her handle stressful situations. She continues taking those medications presently.

Lynn described the emotional and social aspects of her life as being the most fulfilled areas at the present time. She is able to take things as they come in life therefore leaving her with a feeling of a strong emotional well-being. She eventually described her well-being as being very similar to how Winnie the Pooh seems to view life. She explained that the character enjoyed life as it happened. Lynn went on to explain that she finds time to socialize with her friends and her boyfriend and also enjoys talking with the patients she sees at work where she transports patients at a hospital.

The area in which Lynn described as being least fulfilled in her life is the area of physical well-being. With a history of sleep apnea, she wondered if she might be experiencing those symptoms again. She shared that she sleeps 14 hours of the day on most days. She also felt that she should exercise more but would prefer that someone would exercise with her. There is an exercise facility available to her where she works, but Lynn explained that she seldom uses those facilities.

Textural Description of Lilly

When asked about personal well-being, Lilly stated that she believed that well-being had to do with how she took care of herself. She added, “It’s not so great right now” (Lilly, p. 5). After asking her to expand on her well-being at the present time, she talked about how her busy schedule was a factor in how she spent her time.

Well, I don't have the time to sit down and relax and take me time because when I get home, I have to do stuff at home and school work and then at work, it's just . . . I would probably spend a lot of extra time with my animals if I had it. I've kind of neglected them. Or, spend time with my husband. (Lilly, p. 5)

Lilly shared that she felt that the intellectual aspect of her well-being was the most fulfilled aspect in her life at the present time. “I would say that the classes are meeting the educational part, or intellectual” (Lilly, p. 5). She added that a close second would be environmental because she really appreciates the atmosphere that a community college offers.

The environment is good here too cause I like the smaller atmosphere here. I don't know how well I would do with a class of 50-60 students like at Ball State. I kind of like the smaller classes cause I like to know the teachers better. You feel like you can ask questions; maybe a silly question. Plus, you get to know your class mates too so you can always buddy up with them. My math class was that way. One of my first math classes I kind of buddied up with a girl and we went through all our math classes together and helped each other out. I probably wouldn't have gotten through the math but we both made it through. (Lilly, p. 5, 6)

Lilly was then asked to consider areas of well-being in which she felt were least fulfilled in her life at the present time.

I don't really have a strong spiritual. I mean I was raised in I guess a Christian home, but I don't go to church. I believe, but I don't go to church. I don't really have a strong spiritual side. I mean, I believe there's something higher but I don't feel like I have to pay every Sunday to go to church. I don't have to . . . does that make sense? Financial too. If I wasn't in school, then it would probably be better. I mean we're not doing bad considering it's just me and my husband. I get financial aid but not grants because we make too much money. I have to pay it back. (Lilly, p. 6)

When Lilly was asked if there was anything else that she would like to add about the area of well-being in her life, she added that she was not a very outgoing person.

I mean, I am once I get to know the person, but I would say that I'm not very social. I guess it's cause I'm shy. I don't know what other people are gonna think so I try not to . . . It was middle school and high school when it started. I mean, I had friends in high school; I just wasn't that social butterfly that a lot of people were. I would like to learn how to be more social and outgoing. (Lilly, p. 7)

As the conversation continued, Lilly was asked if she had every experienced a situation that she felt impacted her personal well-being.

Yeah, I had a class shortly after I started classes here. It was an English class and I had the worse teacher who is still here. I mean this person rode you hard. Nothing was perfect to him. My husband wouldn't let me drop it and wanted me to stick it out. I got sick every time I went to his class. I was just sick. I did not want to go to his class and I would get sick and I'd just . . . it was not fun. (Lilly, p. 8)

Lilly was asked if she could elaborate more on this experience during her college career.

The teacher was just very stern and any opinion you had the instructor would have something bad to say about it. The instructor just made you feel like you weren't college material. Like you weren't perfect! There were arguments in the class too because some of the students thought that they were right and the teacher thought that he was right and they just butt heads. It was not a fun semester. I ended up getting a D and had to take it over. My emotional, environmental, physical were all off. Like I said, I got sick everyday either before or after class. I just could not handle going to his class. (Lilly, p. 8)

After Lilly described the difficult English class that she had experienced during her time in college, she was asked if there were any other experiences that she would like to share. She responded that her appearance affects her.

The acne really bothers me. Especially because I'm always thinking people are judging me. I feel people stare and see acne, but they probably really don't. It's maybe just in my head. I've tried seeing a dermatologist, but it still bothers me. I think until I don't have a single one, it will bother me. It was probably more of my junior or senior year when it started. I was on Accutane which they finally took it off the market cause it's nasty stuff. It messed me up. Once I quiet taking it, the side effects went away. It helped the acne, but it's not worth it. I've gotten more comfortable because my husband tells me that it doesn't bother him. That helps. (Lilly, p. 9)

Lilly was then asked if there was an object that symbolized or described her personal well-being.

No, not really. I mean I feel like I'm all over the place sometimes and I keep a lot of it up here instead of letting it out. It kind of feels like that game ping-pong. Some days I just feel like it's the same back and forth and always end up in the same spots. Sometimes I might get hit off the table so I can go home. It's like I get up, I go to work, and I come here. It seems to be a well oiled routine right now. Once I graduate, it will change, but I think it will still end up being a routine. (Lilly, p. 10)

She was asked if she was happy with feeling like a game of ping-pong.

Yeah, once I get out of school I think I'll find my little nitch and be OK. I can see the finish line. I started back in 2007 with school and only did a couple classes at a time. The last couple of years, I've went full force. I hope to graduate in May and have a baby soon after that. We've tried for 11 years. (Lilly, p. 11)

Structural Description of Lilly

Lilly's frustration with an English course that she was enrolled in during her time in college negatively impacted her personal well-being. The thought of attending this particular class weekly actually caused Lilly to feel physically ill. She shared that she felt emotionally, physically, and intellectually drained from her experiences in the course. Not only did she end up receiving a grade that she did not like, she also felt that she learned nothing at all except for the fact that she was not a perfect English student. After some time had passed, Lilly was able to restructure her educational goals and continue with her program. It was apparent that this experience played a role in lowering her self confidence.

Even after a difficult class experience that obviously upset her, Lilly spoke highly of the college that she attends overall and enjoys the smaller class environment that is prevalent there. The lower number of students enrolled in each course made Lilly more comfortable with asking questions and meeting other students to work with. Meeting people and establishing friendships is somewhat of a challenge for Lilly. She shared that having a study buddy was paramount for her success in college, particularly in math courses.

Lilly expanded on the challenges that she faced when she was confronted with social interaction. She admits to being more of a follower than a leader and prefers to not be in positions in which she is expected to assert herself. This is one of the reasons that Lilly enjoys her present job. The dialysis unit where she works is completely detached from the hospital and therefore offers her continuity of people who she works with and talks with on a daily basis. She prefers not having to interact with people who she is not used to working with as well as people administrators and physicians. She continued adding that she is naturally a shy person and has

been since high school. Although she has friends, she does not consider herself outgoing and shared that she would like to learn how to be a more sociable person.

Lilly also spoke of another barrier, other than her shy disposition, that kept her from feeling comfortable socially. Her perceived appearance also concerned her. She spoke of problems that she had encountered with acne and how she feels that people stare at her focusing on her appearance. Even though she is not as concerned with this as she used to be, she continues to feel self-conscious about her appearance. Because of Lilly's shyness and concerns over her appearance, she considers her social well-being to be the least fulfilled presently. She added that the financial aspect was also not where she would like it to be, but felt that after she completed college, that would improve. One other area that Lilly shared about was that of spiritual well-being. She shared that while she believes and was raised as a Christian, she does not attend church because she believed that her spiritual well-being more accurately described as maintaining an inner peace. She was not exactly sure if that meant that her spiritual well-being was not met.

Intellectual well-being, however, Lilly explained is at the highest area of fulfillment in her life as a result of her decision to attend college. Lilly feels that all of the studying that she does helps to meet that component of well-being and enjoys being able to apply some of what she is learning to her job in dialysis. She also finds that the environmental aspects of her learning experiences in college are perfect for her because of the smaller, less formal classes. Therefore, her environmental well-being was considered to be another strong area as well. Lilly indicated that the environment in which she finds herself at home and at work are also educationally positive.

Lilly works long hours at a dialysis unit, maintains a full load of classes in the medical assisting program, and still manages responsibilities at home. While her attitude is quite positive concerning this type of daily schedule, she added that she often feels that her overall well-being is similar to a game of ping-pong. She explained that the game just kept going and she would be like the ball being hit back and forth in the same spots for a long time. Eventually, the ping-pong ball would get hit off of the table which meant she could go home. Lilly added that she was fine with a routine similar to a ping-pong game, but had hopes for some changes after she graduated from college.

Textural Description of Sarah:

When Sarah was asked her opinion of well-being, she replied, “Well-being would be, I think, your mind set.” Also, are you taken care of” (Sarah, p. 12)? She went on to explain her perspective of well-being.

Physical needs, I guess, run with emotional needs to me cause I think that people need to correlate like with a hug or a pat on the back like hey, how are ya doing today? You did a good job. I think that kind of feeds your emotions where someone’s actually interested; like they care. I feel like if you don’t get a physical need met that your emotional needs aren’t met either. That’s just the way I look at it. (Sarah, p. 13)

Sarah was then asked about areas in her life in which she felt her well-being was strong.

Sleep is one thing I don’t get enough of. I take naps. As far as food, I obviously don’t go hungry. (laughs) I wouldn’t say I would be the very best nutritional walking person. I don’t go hungry. I think I get all of my needs met basically. I have a very good support system. I have four friends and my mother. Her opinion is like, take it or leave it but she’s honest and if I’m having an emotional time, she understands. My boyfriend is more

of a reason for emotional problems (laughs). The financial stuff will get better and occupational doesn't apply. As far as spiritual, I don't think organized religion is anything other than a social setting. I don't have to choose to pay someone to tell me what a book says that I can read. I just don't do that. Um, I hope there's someplace else to go after we leave; that would be a great idea, but I don't think so. I think once you're done, you're done. Most any other species; when you die, you die. I don't think there's a spiritual. I just don't think we have a spirit. Religion is a subject that's very touchy. My boyfriend's catholic and they can go do what they want then repent. (Sarah, p. 13)

Sarah began to share more about relational aspects of her life. She spoke specifically about her experiences as a young girl as well as about at a time when her husband was still living.

My parents divorced when I was 13. I grew up fast helping my mom take care of my grandmother at age 17 and then becoming a teenage mom soon after that so I didn't do a lot of the things that kids do. I guess I did find time to go somewhere and get pregnant. (laughs) I had a lot of responsibility early and that has just continued with the struggles of being married to an irresponsible husband for a while and then having four daughters. I think that since my children are older and able to do a lot on their own now helps because they can kind of take care of themselves and I can do what I need to do as far as school purposes go. Actually, it was a, how do I want to say it? A lifestyle decision; my husband passed away seven years ago. I was comfortably living off of a social security death benefit and bad to say, time has elapsed and I'm gonna have to have some kind of income. He had a triple bypass when he was 34 and then died at 37. That first year I spent in some kind of, I don't know, la la land as they call it. Just functioned day-by-day,

did what I had to do. Um, a couple of years later, I focused on just basically taking care of the kids cause I still had three at home at the time .(Sarah, p. 1, 7, 12)

When Sarah was asked to describe ways in which she felt that her husband's illness and eventual death impacted her well-being. She shared that after her husband's first surgery, he went back to work and everything seemed relatively normal. She went on to say, however, that she experienced a break down commonly known as post traumatic stress disorder.

I would get up in the middle of the night and check all the kids for fevers. I mean just a weird, wacko. I think it just hit me out of the blue. It made me feel very out of control cause I didn't know it was coming. It was the fact that I wanted to know if something was going to happen again. It got so bad that I ended up moving in with my mother for about six months. I lived in a room and kept the door shut and I didn't function. I mean I was very . . . My kids were with him. He became more responsible. Actually, I called one day to see if I could visit with the children. I can't explain it, but I couldn't be around them. I couldn't walk through that front door. It was like I got so nervous. At the time they were 17, 14, six, and five. I knew they were taken care of. My body would have tremors and I wasn't eating. I ended up losing about 40 pounds. All I did was sleep in my depression. Finally, I called to see if I could see the kids again cause I attempted that a couple of times prior and failed. He said that if I came to visit that I had better be staying cause I can't do this no longer and he said that they weren't going to do it either. I thought he was threatening my marriage and I might lose the children. (Sarah, p. 13, 14)

Sarah explained that she was able to get some help after that difficult experience by talking with a psychologist. She shared that the psychologist taught her how to cope with stress and also taught her techniques that she could use when experiencing anxiety attacks.

They taught me that I can't control accidents from happening and I had to accept that fact. The counseling helped me with the emotional part so I would say that social and emotional are good. I doubt that I would have much of an emotional well-being without that help. (Sarah, p. 15)

When asked if Sarah would use counseling facilities on campus if those services were available, she stated that having those kinds of services would be very helpful.

It would be great, but I probably wouldn't now since I've been taught some coping skills. It would help though if people need help learning to cope with problems. The academic advising is good here. As far as emotional advising; like I saw one girl down in Health Sciences when I was waiting one day and she wanted to quit the nursing program. A lady talked to her and asked her what the problem was. She said that she just didn't think she could do it and then asked if she did quit, could she get back in at some point. The lady told her to hang in there. I don't think she really covered the girl's emotional state at that time. She was just pushing her to stay in the class but the girl was really just beside herself. She was outside the lady's doorway. Actually, everyone could hear. The girl was very distraught and she didn't sit down to talk about what her real issues were. She left the same way she came in, very upset. (Sarah, p. 15, 16)

After acknowledging Sarah's support of a counseling structure for students on campus, Sarah continued to emphasize her feelings about this need.

If someone sets out to go to school, and you lose your sense of well-being, it just all falls out the window. It's hard to find where to start to get it back. Where do you pick yourself back up? I think this is where a lot of people give up because once you feel defeated; you don't want to put your boots back on. Not all students have a support

system. I think counselors or someone to just acknowledge the problems would help. If nobody verifies that you really do have a problem then you aren't even gonna care to fulfill an emotional side or a physical side or a spiritual side. If you think nobody cares, than you're just out of the program. If you have a legitimate problem, even a simple problem that amplifies, you're stress level gets too high and people just start throwing in the towel. Then you hit rock bottom. Trying to get back up from rock bottom is a very hard situation. (Sarah, p. 17)

Sarah was then asked if she could think of an object that could describe or symbolize her well-being.

I would say, um, the white picket fence cause in my mind; the nicest houses have the white picket fence. Actually, I wrote a poem about a white picket fence for a class and it was like my goal in life to achieve the white picket fence. I mean I went through the scenarios of you know, daughter number one and then I had daughter number two and that white picket fence just kept getting further out of the grasp of what I was wanting to achieve. Then I had two grandsons what irony and then the white picket fence is now in the future I see. So, it's kind of like I went through these trials of life you know. I had four kids bestowed on me after being a widow and now I'm finally thinking I'm gonna get the white fence. I've always just pictured, even as a child that I wanted a house with a white picket fence. I went from I didn't think I was ever going to be able to have it or achieve it to where now it's actually in my sight. I can actually see a picket fence now where before I thought four kids, my God, I'm just . . . money is never going to be around to buy a white picket fence! It's very short, but it says a whole lot. (Sarah, p. 19)

Imagine My Future

I had already imagined my future you see
In 1985 a mother I would be
The first of my beauties for me
So the white picket fence will never be
I had already imagined my future you see
In 1988 daughter number two for me
Just as beautiful as the first you see
So the white picket fence will never be
I had already imagined my future you see
In 1995 would be daughter number three
She was just as beautiful as the others you see
So the white picket fence will never be
In 1996 daughter number four for me
Just as beautiful as the other three
So the white picket fence will never be
I had already imagined my future you see
Four kids in tow when tragedy struck me
Single from that point on I would be
So the white picket fence will never be
I had already imagined my future you see
With a new pair of eyes I can now see
The four beautiful daughters bestowed on me
So the white picket fence is in my future you see

I am imagining my future now you see
 I am going to college Hooray for me!
 So the white picket fence I can now see
 I am imagining my future now you see
 Now with two grandsons what irony
 In 2015 a graduate I will be
 The white picket fence is here for me
 (Sarah, 2012)

Sarah was then asked if there was a song or a movie that reminded her of her well-being in any way. She shared the following:

“Don’t Let The Sun Go Down On Me” by Elton John. The one line says “I always search myself because there’s someone else I see”. I can always make improvements and I don’t want someone to remember me in a negative way. I want to be a positive influence on everybody I meet actually (Sarah, p. 19).

Don't Let the Sun Go Down On Me Lyrics

I can't light no more of your darkness
 All my pictures seem to fade to black and white
 I'm growing tired and time stands still before me
 Frozen here on the ladder of my life
 It's much too late to save myself from falling
 I took a chance and changed your way of life
 But you misread my meaning when I met you
 Closed the door and left me blinded by the light
 Don't let the sun go down on me

Although I search myself, it's always someone else I see

Id just allow a fragment of your life to wander free

But losing everything is like the sun going down on me

I can't find

Oh, the right romantic line

But see me once and see the way feel

Don't discard me baby don't

Just because you think I mean you harm

Just because you think I mean you harm, oh

But these cuts I have, cuts I have

They need love

They need love, they need love to help them heal

Oh, don't let the sun go down on me

Although I search myself, it's always someone else I see

Id just allow a fragment of your life to wander free

Cause losing everything is like the sun going down on me

Don't let the sun go down on me

Although I search myself, it's always someone else I that see, yeah

Id just allow a fragment of your life to wander free baby, oh

Cause losing everything is like the sun going down on me

(John, E. & Dudgeon, G., 1974)

Structural Description of Sarah

One of the ways in which Sarah was able to accept and manage the many changes of her youth was to maintain an element of situational control. She did this by assuming a supportive role of her mother at the age of 13 when her parents divorced. A few years later, she helped her mother care for her ill grandmother until she passed away. Sarah became a mother herself at the age of 19 and explained how she was forced to be the responsible person in the marriage. As time went on, Sarah and her husband's family expanded to four daughters increasing her level of responsibility even more. When her husband became ill, Sarah embraced her tried and true technique of taking control of the situation.

Experiencing the difficulties and uncertainties associated with her husband's chronic illness, Sarah began to exhibit the signs and symptoms of post-traumatic stress disorder. Because her husband's initial episode of severe heart problems presented quite suddenly, Sarah was compelled to make attempts to predetermine whether or not her daughters were going to be ill as a way of trying to control a situation before it happened. She described how she would randomly wake in the middle of the night to take her daughters' oral temperatures for no apparent reason. Behaviors such as this continued until she finally helplessly left her home and family, and move in with her mother. Sarah explained that she was so overcome by feelings of wanting to prevent illnesses and negative things from happening to her family that she was eventually unable to even be around them. After six months of existing alone in a dark room, Sarah admitted that she had become quite depressed and stopped eating. After her husband gave her no choice but to return home, she decided to go back in fear of losing her husband and daughters. Soon after returning home, Sarah was able to learn how to cope with the feelings and emotions that she had been struggling with by talking with a psychologist. Sarah emphasized that without that intervention, she would not have been able to overcome the state in which she

was living. Realizing that she could not control accidents and illnesses was the beginning of her lengthy healing process. For this reason, Sarah spoke adamantly and passionately about how strongly she believed that people who are experiencing difficulties in life need someone to talk with who can help them find coping techniques.

Sarah shared that her life has been greatly enriched as a result of what she has learned from her past. She feels that being a middle-aged student has many advantages. One of which she described was that concerning her personal well-being because she feels more sure of herself and of where she is in life. She explained that her personal well-being is strong in areas that are important to her. In particular, she felt satisfied with the emotional, intellectual, social, and environmental aspects of her life. She added that having children who could take care of themselves gave her the freedom to focus on school responsibilities.

When describing an object similar to her well-being, Sarah immediately said that she had always thought of a white picket fence as a symbol of accomplishment, completion, or even perfection in some ways. Even as a small child, houses with white picket fences were among the best in her opinion. Sarah wrote a poem about a white picket fence entitled “Imagine My Future” for one of her class assignments. Sarah was able to express her many years of searching within the poem. Each time she felt that she was maybe a little closer to making the dream of having a white picket fence a reality, a new challenge would present and she would then be forced to refocus once again. Embracing the joyous changes, enduring the difficult times and finally learning how to live with peace has led Sarah to what she believes is a bright future. Sarah explained that she can now see a white picket fence in her future.

A song that Sarah felt was symbolic of her well-being is “Don’t Let the Sun Go down on Me” because the lyrics encourage people to constantly search themselves for what needs to be

changed, and always try to improve. Sarah added that this song makes her think of how important it is to her to be a positive influence on everyone she meets.

Textural Description of Nikki

When asked what well-being meant to her, Nikki responded that when she thought of well-being, many things came to her mind.

I think of like all of your emotions are in balance, you're getting a good amount of rest at night, and you're not trying to do too much in the day. You know, you're balancing out your time and using your time effectively. You're not letting your personal life affect your work or school life. (Nikki, p. 2)

Nikki was then asked if she had been able to find ways of not allowing her personal life to conflict with her experiences and responsibilities involving school.

I'm slowly finding ways to do that. It's not easy to do because sometimes personal life wants to overpower everything else. I'm finding ways to work through the personal emotions I have that come into play at school or work. It's not easy sometimes. (Nikki, p. 2)

Nikki's comment about working through her personal emotions led the discussion toward her perspective of her overall well-being at this point in her life. She shared that the most fulfilled areas in her life included physical, intellectual, spiritual, and environmental.

I feel that the physical is fulfilled because I'm getting at least eight hours of sleep a night and I'm not eating junk food. I'm getting exercise when I can; maybe two to three times each week. I either walk or use the gym. I think intellectual is mostly met through school and through the life experiences that I've had. (Nikki, p. 3)

The conversation from that point focused on Nikki's spiritual well-being.

I think a lot of the spiritual is being fulfilled right now because of the fact that I just lost a best friend of mine that was like a brother to me back in September. So, I'm still really dealing with the grief process from that but I feel like it's put me in more of a spiritual connection with believing that there is a reason why stuff happens and that there is a purpose for everyone's life and why their life is taken when it's taken. We just did everything together. We talked a lot and losing that really hit me hard. It still is hard today. He was on his way to work and had an auto accident. He was losing a lot of blood and they couldn't figure out where. They had to let him go. It was hard. I just cried for hours. He was 26 and had two sons; three and one. They will never know the type of dad they had or who he was. The spiritual has made me realize that there is a reason why things happen the way they happen and a reason why God chose to take him. Talking to his mom helps me because she is a connection to him. I've known him since I was one. We were always there for one another. We've always kept in contact. (Nikki, p. 3)

Another loss in Nikki's life occurred when she was much younger. She described a time when she would go to her grandparents' house every day after school and stay until her parents were able to pick her up after they finished at work. Her grandfather eventually became ill and passed away causing major changes in Nikki's life.

I would say that the death of my grandfather had even more of a toll on my well-being than my friend's death. That was hard because at the time he passed away, he was in a nursing home on a morphine drip from so much pain and suffering. He had been sick for years. I was 10 at the time he died and everyone left to get something to eat and I was alone when he died. I didn't know what to do and started throwing things. I felt like I

had lost half of my heart at that time. I completely lost focus at school and just gave up. As the years went by, I started to heal. Now that I've lost my friend, I have to go through that again. (Nikki, p. 4)

Nikki then began talking about her supportive environment at home and how her parents encourage her to talk with them about her problems and want her to do well in school. She added that areas that she hoped to improve included social, occupational, and financial. She explained that the financial and occupational well-being would likely be strengthened after she graduated from college and found a job that she liked. In the meantime, Nikki explained that she is not where she would like to be socially.

Like a lot of people right now in my clinical class; they have strong bonds with each other because they have other classes with each other or knew each other before. They have connections. I feel like I'm an outcast because I don't have those bonds. A lot of times, I catch myself, and this is a habit that I really have a problem with. I'm slowly trying to work on how to change myself from doing this, but, well, I have a really bad habit when I get that feeling of being outcasted. I make up fictitious stories to try to fit in with people around me. I did that this semester with my clinical class. Like I made up a big huge story and I had it going for weeks. I knew it was all a lie and every day I had to come up with new ways to keep the lie going so I more or less had to use a lie to cover up a lie. (Nikki, p. 10)

Nikki was asked if she enjoyed making up these types of stories and if she got the attention that she was seeking.

No, it was exhausting. I finally decided to stop because I became aware of what I was doing. I've done it so many times but I also had a couple of people in the class that

picked up on what I was doing because they had done similar things, or they could just tell by the way I was acting. They could tell through my body language. One of them messaged me on facebook and asked if there was anything I needed to tell them. They promised not to say anything to anyone else in the class about it. They cared enough to want to know the truth and I felt like I could tell them. I've done this pretty much every semester in a least one class but no one ever really paid attention to me. (Nikki, p. 11)

As Nikki continued to talk about her social experiences while attending college, she described a recent situation that she shared has also caused her a great deal of emotional anxiety.

There was one person in one of my classes who showed me the kind of affection that I had gotten from my grandpa. I really let that person in and felt that I could trust him entirely. I actually got into a relationship with him not knowing that he was married and had kids. We had seen each other over a month before I found out. I didn't know what to do. Should I back out of this and lose what we had or do I be the third wheel here and possibly break up a marriage? Because at that time, I was so selfish and wanted to be happy again instead of an emotional train wreck, I decided to be the third wheel and I caused three beautiful girls to lose their mother because he divorced their mother and I became like a mother figure to them. I didn't feel peace with the fact that I was letting my overall life goals slip away. It was likely to keep me from finishing college. (Nikki, p. 5)

When asked if there was an object that symbolized her well-being, Nikki explained the following:

At this point in time, I'd almost say I feel like a friken basketball cause I feel like I'm bouncing like all over the place. I mean I feel like, literally, somebody's just taking me

and dribbling me in a million different directions. Emotionally, physically cause I feel like I've got so much on my plate that I'm trying to deal with emotionally and physically. I'm trying to do everything I can to keep my mind of emotional stuff. It's like I'm trying to dribble away from the emotions by keeping myself busy, but then it's like somebody's just dribbling me backwards and it's like I feel like I'm being put through the goal when I overcome something. Like when I get over an emotional piece of baggage or whatever, or I get a good grade on a test I feel like I've scored at doing something but then it's like somebody's dribbling me again and now I'm everywhere. It doesn't last. The happy feeling about getting something good done in my life doesn't last. I immediately feel like I'm being dribbled again. (Nikki, p. 8)

Nikki was then asked if she felt that having some type of counseling or related services on campus would help her work through some of the emotional struggles she described.

I would have benefited from like tutoring for required classes. Maybe tutoring for clinical and stuff like that. I was really struggling mentally with everything going on and couldn't focus so maybe if there had been that tutoring there in those program classes, I could have been more focused. I just think that if I had the counseling and tutoring help, I would be doing a lot better than I am at the moment. It seems like for some reason that my school priority has slowly fallen because I have so much emotional baggage and I don't know what to do with it. (Nikki, p. 7)

Next, Nikki explained how a certain movie was symbolic of her personal well-being.

I know it sounds crazy, but I kind of think my life is playing out like "High School Musical" in a way. There's just so much emotional drama in that movie and so much back and forth between relationships and love and heartbreak. Struggles with homework

and trying to do what you want to do. I can sit and watch that movie and kind of say to myself that that's how I feel right now. It seems like the jocks are with the jocks and the drama kids are with the drama kids so you've got all of that social stuff happening.

(Nikki, p. 9)

Structural Description of Nikki

The death of Nikki's friend, who was like a brother to her, has caused her to experience a very difficult time over the past several months. She shared that this person was someone who she spent a lot of time talking with and who she had known since she was very young. While this event in her life has been extremely painful, Nikki shared that her spiritual well-being had become stronger. She shared that she has found peace in the belief that things happen for good reasons. Nikki went on to explain that when she was younger, she suffered another tragic loss when her grandfather died. This was even more difficult than her friend's recent death because her grandfather was like a parent figure to her and had become a part of her daily routine. In addition, she was alone with her grandfather when he died leaving Nikki feeling severely angry, confused, and alone. She has always felt supported and cared for by her parents, but losing her grandfather caused her to feel a type of loneliness that was new to her.

Nikki shared another situation involving relational suffering. After meeting someone who she felt she had a lot in common with and spending several weeks with them, she discovered that this individual was married and had a family. Feeling emotionally attached, Nikki wanted to try to make the relationship work even though she knew that it was probably not the best choice. Eventually, the relationship ended between her and this person when she was encouraged by her parents that it was not the best situation for her. In addition, the relationship had threatened to alter her plans to continue her education. Even though Nikki believed that she

did end up making the best decision, she still feels disappointed that that person is no longer a part of her life.

An important aspect of well-being that Nikki described as being important was emotional balance. The relationships that have been severed in Nikki's past have taken her to a difficult point in her life emotionally. She described how she has struggled to find peace and acceptance from these losses but shared that she continues to feel confused and alone. Not only is her emotional well-being lacking at the present time, but she also shared that she feels that her social life has been impacted negatively as well.

Nikki shared how she continuously felt that she does not seem to fit in with social circles in her classes. She explained that it is difficult for her to find common ground with people who she meets and has even gone to the extreme of making up stories in an attempt to be noticed and feel included in social circles. While this has proven to be a very extensive, exhausting approach to making friends, Nikki is appreciative that some of the students in one of her courses have recently approached her about her stories and tried to help her. She added that her lack of time also prevents her from enjoying more of a social life.

When asked if there was an object that symbolized her well-being, Nikki claimed that she felt like a basketball during a basketball game. She often feels that she is being dribbled in several directions every day. In addition, even when her goals are met for the day, the good feeling associated with meeting those particular goals lasts for only a short time until she is being dribbled again. In addition, the movie "High School Musical" reminds Nikki of her well-being. She explained that the emotional drama, relational problems, and social clicks are the types of things that she struggles with as well as the actors seemed to in that movie.

Nikki shared that having counseling available on campus along with tutoring would be helpful. However, went on to explain that she needed more than just the general education tutoring. She felt that she would benefit greatly if there were organized study groups in some of the required courses.

Textural Description of Rue

When asked what Rue's idea of well-being consisted of, she explained that time management came to her mind.

I don't know if that relates to well-being or not. That's one of my biggest issues is time management. I have a hard time trying to fit everything into the day to do what I need to do. That's always been the biggest issue for me. I'm always punctual. I try to always be on time. That's just a big issue for me personally. I guess my well-being would be based on time management. I just get overwhelmed feeling. (Rue, p.2)

Rue was then asked to describe what would happen if she did arrive late to a class or an appointment.

Since I've been going here, I think I've only been late one time. Drives me crazy! I just apologize. I can't believe I'm late. I try to think why I'm late and it's usually my child. I try to step aside from everything and take a deep breath. I just want everything to flow.

(Rue, p. 3)

She added that being late for reasons related to her children do not tend to bother her quite as much.

School is a priority, but it's always gonna be family first. I know church is up there. Family is very important to me. I have family 700 miles away so my family is my

husband's family right now locally. My mother was diagnosed with Alzheimer's this summer so she moved in with my brother and his wife in Kansas. (Rue, p. 3)

Rue then began to share personal experiences that have impacted her life and well-being. *I lost my father, um, it will be 19 years now. I was 30 something. It wasn't expected at all. He had a heart attack. He had been a smoker and had emphysema. I feel emotional about it even still now. I proved my father wrong on several things. He said I would probably never accomplish anything with my life. I proved him wrong. He told me that before he died. I think it was because of the way he was raised. He was not treated very well so I think that kept with him growing up. He was thinking that maybe his child was going to be like that. He told me that I had proved him wrong before he died. (Rue, p. 5)*

As the discussion continued about relationships and their impact on personal well-being, Rue began to share about when her grandfather passed away. She shared that she was very close to him when he died and felt that going through that upset her emotionally for quite a long time. She then spoke of areas of well-being that she hopes to work on strengthening.

Having good health is important to me but it's not as good as it used to be. I used to run all of the time but I can't seem to get my old bones to go out there and do it. Just finding someplace to run I guess. I'd rather go outside than in a gym. (Rue, p. 7)

She also spoke of her spiritual well-being.

I had little issues with trying to understand why my father-in-law has been really ill. You know, why God is . . . it's just hit him all at once. I'm planning to go back to church. We've all decided that. We have gone, it's just been in the last six months kind of up and down. We're trying to understand why things are going on with my mom too. You're

never to question, and I try not to. It's all important, but like I said, family's important.

If your family's not happy, you're not gonna be happy and you have to be. (Rue, p. 11)

Rue added that even though the emotional aspect of her well-being is still not where she would like for it to be, that it has improved. She spoke of how her shy personality has been a barrier socially causing her emotional difficulties as well.

I think that class has helped and when I worked retail. I had to actually approach people and talk to them. I would have never done that before. I'm surprised I'm actually sitting here talking with you. That's why I say I'm not as shy as I used to be. Granted, I get up in class and give research paper reports, but I am a nervous wreck! When I worked retail, I was an assistant manager back in Kansas so I'd have to get up in front of all my associates. I tried to make it fun for them. (Rue, p. 8)

As the conversation about well-being continued, Rue was asked if she could think of an object that could symbolize her personal well-being. She responded, "I guess maybe my well-being could be kind of like a word search right now. I'm searching for something; a new direction to go to I guess" (Rue, p. 10). Rue also shared that a certain scene in the musical "The Sound of Music" reminded her of well-being.

The scene when they had to leave the country. I had to leave my home state of Kansas and come here cause this is where my husband was gonna be. He was in the military at the time and then he got out and worked for the same retail store I did. He was a medic in Desert Storm before I met him. He's originally from here, and I'm a little old fashioned. I'll go wherever my husband goes. I picked up my pieces and I left. (Rue, p.

11)

Rue was asked if she would benefit from counseling services on campus or any other types of student service related to well-being. She explained that while she would consider using fitness facilities on campus, she would probably not seek counseling since she prefers to deal with personal issues herself.

Structural Description of Rue

The challenges and barriers presented to Rue as a result of her shy personality have impacted her emotional well-being. Therefore, the emotional aspect of her life is weaker than she would like for it to be. While feeling shy and backward was difficult enough for Rue as a young girl, she also shared how her father had told her years ago that she would likely not accomplish anything in her life. This lack of parental support fueled her shyness and led to low levels of self-confidence. Even though Rue was relieved to hear her father tell her that she had proved him wrong just prior to his death, Rue shared that she continued to feel shy and experienced difficulty with public speaking and socializing in general. She added that speaking in classes and working with the public in the past had helped her to find ways of coping with her shyness.

Rue explained that an important aspect of well-being from her perspective is that of time management. Feeling organized and having a peace about how the day is flowing are ways in which Rue can measure how successful her day is going. Therefore, when Rue feels that she is not on schedule, she feels emotionally, intellectually, and socially weak where her personal well-being is concerned. She added that if time management is not where she feels it should be because of a situation having to do with her children, she is less upset. She shared that her family is her only other priority above her school responsibilities. Areas of well-being in which Rue would like to improve upon include exercising more often like she had in the past, and

attending church services more frequently with her family. She feels strongly about her Christian faith, but does admit to questioning God for the way her family members are suffering with illness.

When asked if she could describe something tangible that could symbolize her personal well-being, Rue explained that her well-being at the present time was a lot like a word search. She added that she feels as if she is searching for a new direction in life. She also explained that the scene in the musical “The Sound of Music” when people had to leave in the middle of the night reminded her of when she had to leave her home town with very little time to prepare. She added that she would follow her husband wherever he went.

Textural Description of Lucy

Lucy was asked what came to her mind when she thought of the word well-being.

Well, it means kind of like the whole package. In my mind it means, um, that you're in a place in life where you're happy with what you're doing and all of the pieces are coming together. It's not just about your career or your education. It's family, it's friends, it's being at peace with where you are; reduced stress as much as possible. Those kinds of things. (Lucy, p. 4)

As the focus of the conversation on personal well-being continued, Lucy began explaining how the past year had been the most difficult time in her entire life. She shared that her personal well-being had been impacted greatly on many levels.

You're catching me at an interesting time in my life. When I moved here from Michigan, I had spent the last two years in a very difficult situation in my marriage and on top of that, due to the recession, we lost our family business and had to file bankruptcy. We lost our home to foreclosure. Just about every stressful event that could have happened other

than a death; relocation, loss. We had a family music store. It was great at the time, but my X-husband couldn't let go of it at the right time. So, things really fell apart. I came back here and it was actually his suggestion that we come back because his parents in Michigan were aging and I would not have the support system there. He has just never been a hands-on dad. For a period of about six months, he, I don't know if it was losing everything, but kind of had a little break and was, I don't know how else to term it but he kind of terrorized me. He threatened to have me arrested and charged with kidnapping. It was incredibly stressful and so that was two months before I was to start school. (Lucy, p. 4, 5)

Lucy then began to share how her experiences with divorce, losing a lucrative family business, and home foreclosure had impacted her well-being.

I was lacking in self-confidence, I had been living in quite a bit of denial, and just; I was a mess. So, my first semester here was difficult and stressful and I managed to progressively put myself back together, but this past August, I felt ill and the doctors couldn't tell me what was wrong and I spent almost two months going through all kinds of testing. Everything in the book. What they finally led to at the end of September was a diagnosis of inflammatory arthritis, but in the course of all that testing, because they tried everything else, they decided to run tumor marker panels and the tumor marker panel for ovarian cancer came back elevated so they found a mass in my uterus which the only way they could determine if that was cancer or not was for me to have an emergency hysterectomy which I did at the end of October. There was no cancer so I've got medication now to get the inflammatory arthritis under control. Prior to that, I'd been

diagnosed with fibromyalgia when I first came back and the doctor figured that all the stress was the trigger for that. (Lucy, p. 6)

Lucy explained that she believed that almost all areas of her personal well-being were impacted as a result of all that she had gone through. She went on to share that there is one area that she felt never faltered.

The only thing that never wavered for me was faith. I grew up very active in church with my family and I can honestly say that if it weren't for that, I'm sure that I wouldn't be where I am today. That's part of my support system as well. The emotional was really bad; physical too. When I moved back here, I actually had lost about 30 pounds. With fibromyalgia, I couldn't exercise anymore. I was struggling and gained it all back. That was really frustrating for me. I wasn't sleeping. (Lucy, p. 9, 10)

Lucy added that she felt that her social well-being was strong and liked the flexibility of her occupation right now. She would, however, like to strengthen areas of her financial and physical well-being. In addition, Lucy explained how completing a college degree will fill a gap in her personal well-being that she has felt for a long time.

I left Ball State years ago in the 80's but I think that was something that had always been in the back of my mind as a failure for me. My husband transferred and I went with him. In Michigan, my adult friends were all career women and college graduates. Even if some of them were no longer working, they still had that and it was . . . I would be lying if I said that it didn't bother me when someone would ask where did you graduate from college? I looked at it as a personal failure even though by the time I left my job I was making money that a lot of my friends in high school who had degrees didn't. (Lucy, p. 7, 8)

When asked if there were any student services related to well-being that she felt would be helpful to have on campus while attending college, Lucy shared several ideas.

A fitness facility would be great since I can't afford anything else and I just moved into a new condo with no fitness center. A facility here that we could use as students would be amazing. It does not have to be a state of the art gym and I honestly don't think that students I know would complain about what we had if we had something at all. Also, I know we don't always have a lot of extra money to spend in college, but the option might help to have a place to get something to eat other than a vending machine. I think also from talking to a lot of people that a lot of students here don't have health insurance so the psychological counseling would be great as well as the fitness. (Lucy, p. 14)

Lucy was asked if she could think of an object that symbolized her well-being in some way.

I am not a visual . . . but in terms of my well-being, or what I call the whole package, in a lot of ways right now I feel like a child almost. Because all of the things that I thought my life would be and that I thought I knew, I'm finding out I don't, so I'm learning things all over again with a fresh set of eyes and so a lot of times I almost feel like, not a little child, maybe like I'm kind of back in those teen years where your adult life is on the horizon and you're trying to figure out who you wanna be and how you're gonna get there. So, in a way I think more than an object, I feel I'm kind of back at that place.

(Lucy, p. 15)

When asked if there was a song, movie, or character that she thought of when thinking about her personal well-being, Lucy shared that music is a strong passion of hers and how she relates many things in her life to music.

I'm a music freak! Take anything, but don't take away my music. I play piano and flute; singing is what I did growing up and a lot of my adult life. There isn't one song. I think I have like 5000 songs on my iPod and it's an eclectic mix of everything. Music . . . you can tell where I am emotionally by what music I'm listening to but in the past years, there has definitely been one character in a movie that has resonated with me and that was the movie "Sweet Home Alabama"; Reece Witherspoon's character. Um, I know Muncie's not necessarily small town, but when I was in Michigan and I watched that movie and it was kind of an escape for me and there was one line in the movie where Jake says to her, "You can have roots and wings". I felt like I couldn't wait to get out of my hometown. At that time it was a smaller town than it is now, and I wanted to be independent and I was moving to Cincinnati which just seemed huge. When I lived in the suburb of Detroit, I thought I would never want to come back home. It wasn't until I watched that movie that it kind of tugged at something inside me that really I wasn't the big city girl. I could appreciate some of the stuff there, but home to me is where I could almost never go to the grocery store without seeing someone I knew, um . . .that was a sense of safety and security (tearing). That's why that character resonated with me because Mel thought for a long time that it had to be one way or the other and was almost a little bit ashamed by her small town and finally, she realized that she could strike a balance, be true to herself, be successful, be a strong confident woman and so I feel that way. (Lucy, p. 16)

Lucy was then asked if she thought she would be more likely to fulfill her well-being if she could find a way to strike a balance.

Being in touch with yourself; being who you are at your very core in your soul sets the very tone for everything else. If you aren't comfortable with who you are, if you're not at

home in your own skin, if you don't know what makes you tick and what you need; what gives you that sense of belonging and security than you're just banging your head against the wall. I mean, wherever you are. (Lucy, p. 17)

Structural Description of Lucy

The devastation that Lucy experienced as a result of a divorce, losing a family business and experiencing home foreclosure created a long journey of weak emotional well-being. She shared that not only was her emotional well-being affected negatively by these major life-changing events, but that every area of her life had been impacted greatly other than the spiritual aspects. Even though she felt herself struggling with emotional pain, social changes, physical pain, and financial needs, she was continuously comforted by her faith in God which has been the spiritual force in her life since she can remember.

Lucy's marriage ended soon after she relocated back to her home town. She and her daughter found a place to rent and her son went off to college. Even though the end of the relationship became legal, the disagreements did not. The stress of those conflicts as well as a completely different lifestyle led Lucy to feeling emotionally exhausted. Even though she was working through a difficult time, Lucy enrolled in college and began taking classes two months after her relocation. In just a short time, she began to feel ill and after a series of examinations and tests, she was undergoing a hysterectomy and eventually taking medication for fibromyalgia. Not only was Lucy suffering from physical exhaustion from all of the emotional changes in her life, but she then found herself experiencing physical illness. Fortunately, Lucy was able to recover and continue with her education even though she had fallen behind in her classes. She was also unable to work during the time of her illness and surgery causing even more financial stress.

Lucy shared that during the two year span of time when these dilemmas in her life were occurring she was able to learn many valuable lessons about life and about herself. She shared that one of those valuable lessons involved her realization of how much she missed the familiar surroundings of her home town and how she discovered that she could be successful anywhere as long as she was content with who she was. Lucy made this connection while watching a movie entitled "Sweet Home Alabama". The main character in the movie made a similar discovery after making some difficult choices. Lucy shared that her well-being at the present time could also be described as being similar to how a teenager might see the world. She explained that the way in which she sees her future now is vastly different in the way that she had in her past. She shared that she is seeing her life through a different lens.