



Turun yliopisto
University of Turku



IN QUEST OF THE OPTIMAL SELF

Wellness consumption and lifestyle -
A superficial marketing fad or a powerful means
for transforming and branding oneself?

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The originality of this thesis has been checked in accordance with the University of Turku quality assurance system using the Turnitin OriginalityCheck service.

Cover: Miia Grénman

ISBN 978-951-29-7584-6 (PRINT)

ISBN 978-951-29-7585-3 (PDF)

ISSN 2343-3159 (PRINT)

ISSN 2343-3167 (PDF)

Painosalama Oy - Turku, Finland 2019

ABSTRACT

The current thesis discusses wellness consumption and lifestyle, both of which are embedded in current consumer culture and the mainstream consumer lifestyle in various ways. In this thesis, wellness is understood as a holistic and positive approach to health that emphasizes optimal health, self-responsibility, and illness prevention in reaching the “optimal self.” The global wellness industry is a relatively young economic sector that is growing at a significant pace. New markets are appearing with technological innovations and new consumer segments. The wellness trend is further strengthening the notion of “the self” and stressing the current era’s strong, individual centrality. Wellness emphasizes an entrepreneurial self and is best understood as a form of transformative consumption, a self-enhancing lifestyle, and a self-investment strategy.

The purpose of the current thesis is to enhance the theoretical and empirical understandings of wellness consumption and lifestyle in reaching the optimal self. To explore this purpose in more detail, the following research questions are posed: (1) How have conceptions and understandings of wellness evolved over the course of time, and how do these aspects reflect what is valued in life? (2) What is meant by the “optimal self,” and through which means is this kind of “self” pursued?, and (3) How are wellness and self-branding interconnected, and what is the logic of wellness branding? These themes are investigated through three different theoretical standpoints composed of positive psychology, marketing and consumer research, and sociology. Simultaneously, these standpoints offer three separate lenses (i.e., *kaleidoscopes*) with which to interpret the phenomenon.

This thesis represents a phenomenon-based research in a highly topical and rapidly changing marketing and consumer phenomenon. Due to its pragmatic nature, as a whole, the thesis applies a mixed-methods approach, but the individual research articles are based on either quantitative or qualitative methodologies. The research articles approach the wellness phenomenon from different perspectives using several datasets and analysis methods. Article 1 discusses wellness in the wellness tourism context by analyzing data collected through semi-structured interviews (n=22) administered to wellness industry representatives in 2013. Articles 2 and 3 address wellness in relation to fitness and meanings of physical activity by analyzing data as part of the large, nationally representative University Student Health Survey (n=4403) collected in 2012. Article 4 discusses wellness from a wider perspective and in relation to self-branding by conducting a series of focus group interviews both in the U.S. and in Finland between 2016 and 2017.

As a synthesis of the theoretical discussions and empirical findings, three main arguments are proposed. First, wellness has evolved from material and mere hedonic to increasingly involve immaterial and eudaimonic approaches—there has been a shift from *the pursuit of pleasure* to *the pursuit of meaning*. Second, the ever-increasing need to take care of oneself holistically and to transform oneself toward the optimal state echo the need for finding a balance—*balance is the “New Black.”* Third, the logic of wellness branding encompasses the creation of one’s optimal, balanced self while communicating that self to others—*wellness branding has become a new means of promoting the optimal self.*

The thesis’s theoretical contribution focuses on the relatively new research tradition of transformative consumer research (TCR) by reviving Aristotle’s ancient, principle ideas—living well, virtues, common good, balance, practical wisdom, and harmony—that are still valid and likely to be more topical than ever before. The thesis also contributes to self-branding literature by discussing wellness as a new means for self-branding. By introducing a concept—*wellness branding*—not previously addressed in academic literature, the thesis concludes that wellness branding involves branding the *good and healthy, true, balanced self.*

Managerial implications focus mainly on the changing consumer behavior as well as the various opportunities and challenges offered by digitalization. One of the major challenges regards how to brand products, services, and transformational experiences such that they align with consumers’ highly individualistic values and resonate with consumers’ authentic, true selves. In the future, the principles of wellness branding are likely to be adopted and employed further in both employer and employee branding. Thus, wellness branding may also facilitate profit for both businesses and their employees in a novel way.

With regard to societal implications, in addition to healthcare and health promotion, wellness practices have become an aspect of educational agendas and corporate wellness programs that maximize employee productivity and decrease the number of health insurance expenditures. Furthermore, wellness has received increasing attention in political discussions. Encouraging individuals to engage in preventative, holistic self-care practices not only promotes individual wellness, but benefits the whole society by decreasing healthcare expenditures.

Finally, regarding future research directions, the combination of ever-increasing digitalization, technological innovations, and novel, more diverse consumer segments entering the market—particularly Gen Z, the first all-digital generation—paves the way for various fascinating research themes.

Keywords: optimal self, wellness, wellness industry, wellness branding, positive psychology, hedonic well-being, eudaimonic well-being, transformative consumer research (TCR), self-branding, identity, consumption, lifestyle, self-care, transformation

TIIVISTELMÄ

OPTIMAALISTA ITSEÄ ETSIMÄSSÄ

Wellness-kulutus ja -elämäntyyli – Pinnallinen markkinointikikka vai merkityksellinen henkilökohtainen muutosprosessi ja itsensä brändäämisen keino?

Väitöstutkimus tarkastelee wellness-kulutusta ja -elämäntyyliä, joka on juurtunut länsimaiseen kulutuskulttuuriin ja elämäntapaan. Tutkimuksessa wellness ymmärretään kokonaisvaltaisena ja positiivisena terveystieteenä sekä aktiivisena toimintana, jossa korostuvat yksilön vastuu ja sairauksien ennaltaehkäisy, ja joka tähtää optimaalisen terveyden ja—optimaalisen itsen—saavuttamiseen. Globaali wellness-markkina on nuori talouden sektori, joka kasvaa huomattavalla vauhdilla. Uusia tuotteita ja palveluita ilmestyy markkinoille jatkuvasti teknologisen kehityksen ja uusien asiakassegmenttien myötävaikutuksesta. Wellneksessä korostuu nykyajan yksilökeskeisyys ja oman ”itsen” merkitys. Wellneksessä on pohjimmiltaan kyse ”itsensä” johtamisesta; se on muutokseen tähtäävän kulutuksen muoto sekä itsensä kehittämisen ja itseensä investoinnin strategia pitkällä tähtäimellä.

Väitöstutkimuksen tarkoituksena on lisätä wellness-kulutuksen ja -elämäntyylin teoreettista ja empiiristä ymmärrystä optimaalisen itsen saavuttamisessa. Tutkimus vastaa kolmeen tutkimuskysymykseen: (1) Miten käsitykset ja ymmärrys wellneksessä ovat muuttuneet ajan saatossa ja miten tämä heijastuu siihen, mitä elämässä arvostetaan?, (2) Mitä ”optimaalisella itsellä” tarkoitetaan ja miten sitä tavoitellaan? ja (3) Miten wellness ja itsensä brändääminen ovat yhteydessä toisiinsa, ja mitä wellness brändäämisellä tarkoitetaan? Näitä teemoja tarkastellaan kolmen teoreettisen keskustelun, positiivisen psykologian, markkinoinnin ja kulutustutkimuksen sekä sosiologian, näkökulmista.

Väitöstutkimus edustaa ilmiöpohjaista tutkimusta ajankohtaisesta ja nopeasti muuttuvasta markkinoinnin ja kulutustutkimuksen ilmiöstä. Käytännönläheisen luonteensa vuoksi väitöskirja kokonaisuutena hyödyntää mixed methods -menetelmää, mutta yksittäiset tutkimusartikkelit pohjautuvat joko kvantitatiiviseen tai kvalitatiiviseen tutkimukseen. Väitöskirjan neljä empiiristä tutkimusta tarkastelevat wellness-ilmiötä eri näkökulmista eri aineistoja ja analyysimenetelmiä hyödyntäen. Artikkelit 1 tarkastelee ilmiötä wellness-turismin kontekstissa ja aineisto koostuu wellness-toimialan edustajille (n=22) tehdyistä haastattelusta vuonna 2013. Artikkelit 2 ja 3 tarkastelevat wellnesstä osana laajempaa itsestään huolehtimisen kulttuuria, erityisesti liikunnan ja liikunnan moninaisten merkitysten näkökulmista. Aineistona käytetään laajaa kansallisesti edustavaa Korkeakouluopiskelijoiden terveystutkimusta 2012 (n=4403). Artikkelit 4 tarkastelee wellnesstä laajemmasta näkökulmasta ja suhteesta itsensä brändäämiseen. Aineisto muodostuu useasta fokusryhmä-haastattelusta, jotka on toteutettu sekä Suomessa että USAssa 2016–2017.

Väitöstutkimuksen teoreettisen keskustelun ja empiiristen tutkimustulosten valossa tutkimuksessa esitetään kolme pääväittämää. Ensiksi, wellness on kehittynyt materiaalisesta ja hedonistisesta itsestään huolehtimisesta yhä enemmän immateriaaliseen itsensä kehittämiseen—on siirrytty *nautinnon tavoittelusta merkitysten tavoitteluun*. Toiseksi, on havaittavissa kasvava kiinnostus omaa henkilökohtaista muutosprosessia ja optimaalisen potentiaalin saavuttamista kohtaan. Pyrkimys optimaalisen itsen savuttamiseen heijastaa tasapainon löytämisen merkitystä—*tasapainosta on tullut uusi statusarvo*. Kolmanneksi, wellness brändäämisen logiikka sisältää ajatuksen optimaalisen, tasapainoisen itsen rakentamisesta ja viestimisestä siitä muille—*wellness brändäämisestä on tullut uusi keino optimaalisen itsen esiintuomiseen*.

Väitöstutkimuksen teoreettinen kontribuutio suuntautuu transformatiivisen kulutustutkimuksen kentälle nostamalla esiin Aristoteleen keskeiset ja edelleen ajankohtaiset ajatukset—hyvä elämä, hyve, yhteinen hyvä, tasapaino, käytännön viisaus ja harmonia. Väitöstutkimus kontribuoi myös itsensä brändäämisen kirjallisuuteen tarkastelemalla wellnessistä itsensä brändäämisen keinona. Tutkimuksessa esitetään uusi käsite—*wellness brändääminen*—ja todetaan, että siinä on nimenomaan kyse *hyvän ja terveen, aidon, tasapainossa olevan itsensä* esiintuomisesta.

Tutkimuksen käytännön hyödyt keskittyvät kuluttajakäyttäytymisen muutoksiin sekä digitalisaation tarjoamiin mahdollisuuksiin ja haasteisiin. Keskeisenä haasteena nähdään se, miten brändätä tuotteita, palveluita, ja muutoskokemuksia, niin että ne heijastavat kuluttajien yksilöllisiä arvoja ja autenttista, aitoa itseään. Tulevaisuudessa on todennäköistä, että wellness brändäyksen periaatteita hyödynnetään myös työnantaja- ja työntekijä-brändäyksessä. Tämä luo uudella tavalla lisäarvoa niin yrityksille kuin niiden työntekijöille.

Wellness-ilmioilla on myös sosiaalista vaikuttavuutta. Terveydenhoidon ja terveydenedistämisen lisäksi, wellness-käytänteitä on alettu hyödyntää opetussuunnitelmissa ja yritysten hyvinvointiohjelmissa pyrkimyksenä edistää jaksamista ja parantaa suorituskykyä. Kokonaisvaltaisen hyvinvoinnin merkitys on saavuttanut lisääntyvää huomiota myös poliittisessa keskustelussa; itsestään huolehtimisen vaikutukset eivät jää vain yksilötasolle vaan välittyvät koko yhteiskuntaan alentuneina terveydenhoitokustannuksina.

Lopuksi, digitalisaatio, teknologiset innovaatiot sekä uudet kuluttajasukupolvet ja -segmentit—erityisesti Gez Z—ensimmäinen täysdigisukupolvi, tarjoavat mielenkiintoisia tulevaisuuden tutkimuksen yhdistelmiä.

Avainsanat: optimaalinen itse, wellness, wellness-markkina, wellness brändääminen, positiivinen psykologia, hedonistinen hyvinvointi, eudaimonistinen hyvinvointi, transformatiivinen kulutustutkimus (TCR), itsensä brändääminen, identiteetti, kulutus, elämäntyyli, itsestään huolehtiminen, muutosprosessi

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ORIGINAL ARTICLES

Article 1:

Grénman, M., & Rääkkönen, J. (2015): Well-being and wellness tourism – Same, same but different? Conceptual discussions and empirical evidence. *The Finnish Journal of Tourism Research*, 11(1), 7–25.

Article 2:

Grénman, M., & Rääkkönen, J. (2018). Taking the first step – From physical inactivity towards a healthier lifestyle through leisure walking. In C. M. Hall, Y. Ram, & N. Shoval (Eds.), *The Routledge international handbook of walking* (pp. 288–299). New York: Routledge.

Article 3:

Grénman, M., Oksanen, A., Löyttyniemi, E., Rääkkönen, J., & Kunttu, K. (2018). What moves higher education students? – The meanings of physical activity and their association with perceived well-being and the amount of physical activity. *Liikunta & Tiede*, 55(2–3), 94–101.

Article 4:

Grénman, M., Hakala, U., & Mueller, B. (2019). Wellness branding: Insights into how American and Finnish consumers use wellness as a means of self-branding. *Journal of Product & Brand Management* (forthcoming).

FOREWORD

“A man travels the world over in search of what he needs and returns home to find it.”

George Moore

I am sitting on a bench in one of my favorite places—Lake Littoinen—surrounded by sunshine and blue sky. I thought I would never reach the point in my life when my “little brown book” (to which I will return later) would be finally finished. My mind is blank but at the same time clear. A very wise person once advised that I tell my story; thus, I came here, my peace haven, to tell my story—my transformational journey.

This particular epoch, during which I have experienced the “enlightenment,” began merely seven months ago, yet my whole journey has been in progress for years. Now, looking back, I realize I have been on this path ever since I competed in gymnastics and later worked as an instructor in gym, aerobics, and aqua aerobics for more than a decade. The theme of my doctoral thesis originates—aside from the aforementioned events—from the year 2007, during which time I was writing my master’s thesis on the meanings of physical activity. This is also the point from which I henceforth express my sincere gratitude to the various individuals who have supported me along this journey.

First, I wish to thank the three following, deeply important people who have had a major influence on first my graduating with a master of science and later becoming a doctoral researcher. Professor Juha Panula, you were the one who got me thinking outside the box. Thank you for showing me a new, alternative way of seeing the world. Dr. Kristina Kunttu, you were already my mentor during my work on my master’s thesis, and you have remained that throughout my doctoral thesis. Without you and the support of the Finnish Student Health Service, I would have been unable to collect the research data and write my doctoral dissertation. Professor Pasi Koski, your perceptions about the meanings of physical activity sparked my interest in the research theme I chose for my thesis, and I thank you for sharing your insights with me.

Professor Rami Olkkonen, my supervisor and my supporting pillar: my deepest gratitude to you for believing in me all these years. You have always been encouraging and positive, and you were the one who guided me toward the philosophical thinking that I only understood years later. Professor Terhi-Anna Wilska, my supervisor and my friend: you have always been enthusiastic about my research, and you were also the one who sparked my interest in sociological thinking. I thank you for all your guidance.

Next, I wish to express my sincere gratitude to Professor Raija Komppula for reviewing my thesis and contributing constructively to improving the final outcome. I am honored to have you as my opponent. I also wish to express my gratitude to Dr. Hanna Vehmas for supportively and helpfully commenting on my work.

I wish to express my warmest gratitude to Professor Aino Halinen-Kaila for all the advice you have given me on this journey. Moreover, I wish to acknowledge Professors Elina Jaakkola, Pekka Räsänen, and Heli Marjanen for your valuable comments and discussions during these years.

Dr. Juulia Räikkönen, my previously long-lost friend, my currently dear friend and academic sister: we have grown and “sailed the seas of science” together. Without you, many thoughts would have been left unfinished and many interesting projects not started. I eagerly await what the future holds. Dos. Ulla Hakala, my friend and closet colleague in branding: I thank you for believing in my “crazy” thoughts about “wellness branding”. You have supported, encouraged, and helped me grow as a researcher as well as discover the field of branding. Dos. Outi Sarpila, my friend and colleague, you have been a source of motivation for me throughout the years. You set an example in determination, and I have always enjoyed our inspiring discussions.

Furthermore, I wish to thank my fellow doctoral students and colleagues both at the University of Turku—especially those at Turku School of Economics—and elsewhere for your encouraging conversations and collegial support as well as your important contributions to my work. I particularly wish to thank Mari Ketolainen, Anna Karhu, Dr. Samuel Piha, Dr. Mekhail Mustak, Jussi Nyrhinen, Dr. Anna-Maija Kohijoki, Meri Malmari, Otto Rosendahl, Henri Kemppi, Larissa Braz Becker, Dr. Henna Konu, Dr. Helena Rusanen, Dr. Petteri Ojala, Dr. Leila Hurmerinta, Kaisa Saastamoinen, Prof. Hannu Makkonen, Dr. Aki Koponen, Dr. Jukka Vahlo, Prof. Outi Uusitalo, Prof. Ilari Sääksjärvi, and Henna Rouhiainen. Additionally, I express my gratitude to Sanna Kuusjärvi, Auli Rahkala-Toivonen, Hanni Selin, and Jenni Heervä for all your support and help during these years. Thank you all.

I am privileged to have had the opportunity to collaborate with foreign experts. Dr. Albert Boswijk, one of my mentors, I am grateful for your opening my eyes and pointing me in the right direction by encouraging me to follow the philosophical thinking and red thread in my work—and so I did. Professor Barbara Mueller, I wish to express my sincere gratitude for our continuing productive collaboration beginning from international data collection to dissemination. Professor Lena Mossberg, I am grateful for all the fruitful discussions we have held over the years. You were the one who encouraged me to tell my story, and now I have.

I wish to extend my gratitude to the Foundation for Economic Education, Tekes (the Finnish Funding Agency for Technology and Innovation), Turun Kauppaope-tussäätiö, the Jenny and Antti Wihuri Foundation, the Turku University Founda-tion, Turun Kauppaseuran säätiö, Turun Kauppakorkeakouluseura, Turun kauppa-korkeakoulun tukisäätiö, and Vähittäiskaupan Tutkimussäätiö. Without your fi-nancial support, this thesis would never have seen daylight. In particular, I wish to express my gratitude and respect to Professor Sten-Olof Hansen for your visionary insight—for understanding and believing in my work.

A turning point in this transformational journey occurred last July. I was sub-boarding with my daughter, Alexandra, in Tammisaari—“the place” in my heart and soul. She was sitting at the sub board’s front while I was paddling and balanc-ing so as not to flip the board over when she asked me: “Mom, what is the grant for? Is it for writing the ‘little brown book?’” I thought a while and said, “yes, actually, it is for writing the ‘little brown book.’” That was the turning point: one right question posed by my daughter, somewhere in the archipelago while sub-boarding at sea under a clear blue sky. All the reading and mentoring suddenly made sense. The “essence of life” became a complementary topic in my thesis. In quest of the optimal self, it is about finding balance within oneself and with one’s surroundings; it is about finding a positive body-mind connection.

Dear family and friends, I think the printing of this thesis is what you have all been waiting for. No words can express what your support and encouragement has meant for me during this journey. You have always believed in me—even when I myself have not—and for that, I thank You. To my beloved husband, Henrik: with-out you, I would not be standing here as I am today. You have been my bedrock, and you have taught me how to believe in myself. For that, I honestly cannot thank you enough.

In loving memory of my father, I dedicate this “*little brown book*” to my two rays of light and loves of my life: Alexandra and Alma. Always believe in your-self—anything is possible.

Turku, 24th February 2019

Miia Grénman

1 INTRODUCTION

“The energy of the mind is the essence of life”

Aristotle

1.1 Consuming wellness

Health, well-being, fitness, nutrition, self-responsibility, holism, prevention, spa, pleasure, pampering, yoga, meditation, stress, mindfulness, exercise, process, technology, wearables, self-tracking, happiness, quality of life, balance, flourish, vitality, nature, tranquility, organics, business, buzzword, fad, etc.—concepts and terms related to wellness are many. Wellness is embedded in current consumer culture and the mainstream consumer lifestyle in various ways, as it is ubiquitous in media, retail, and everyday life. In the current thesis, wellness is understood and crystalized as *a holistic and positive approach to health, emphasizing self-responsibility and illness prevention with a focus on optimal health in reaching the “optimal self.”*

Today, “wellness” is a popular buzzword for the selling of a variety of products, services, and technologies, ranging from food to vacations, from spas to DNA testing, and from beauty to tracking devices (GWI 2018a; Kirkland 2014; Pilzer 2007; Miller 2005). Many innovations, be they products, services, practices, or even basic functions and needs, are sold in the name of wellness. The value of sufficient and good-quality sleep, as an example, is now understood as a key source of wellness—*“sleep well, live well”*—that can also be optimized in different ways, as “sleep” has been wellness branded.

Yet, wellness is more than a simple buzzword, marketing gimmick, or current fad. The origins of wellness are rooted in several intellectual, religious, and medical movements of the United States and Europe during the 19th century (Kirkland 2014; Miller 2005). The tenets of wellness can even be traced back to the ancient healing and medical practices of Asia, Greece, and Rome—the historical and cultural traditions of which have influenced the modern wellness movement (GWI 2018b; SRI International 2010). As a modern concept, wellness began gaining currency in the 1950s by focusing on holistic and positive aspects of health (Dunn 1961; see also Kirkland 2014; Miller 2005). Scientifically based preventive healthcare originated from the 20th century with an aim to improve well-being and quality of life (Bosshart et al. 2018; GWI 2018b).

Several physiological parameters of health can be measured. However, health as a broader concept, including body, mind, and spirit/soul, is more difficult or even impossible to measure due to its subjective nature; what exactly constitutes health is often a matter of interpretation (Bosshart et al. 2018; Kirkland 2014). Despite the various interpretations, health is commonly understood in terms of the absence of disease and the ability to both be active and live a good life (Bosshart et al. 2018). The brief historical development of wellness is presented in Figure 1.

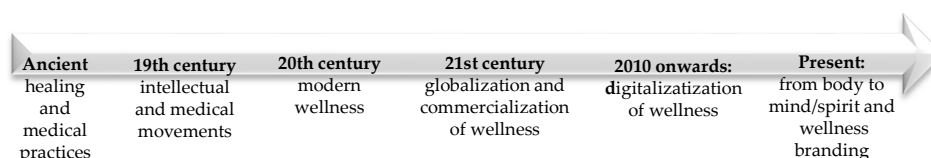


Figure 1. The historical development of wellness

Wellness refers to health on a continuum that is a dynamic and constantly changing process (Bosshart et al. 2018; cf. Dunn 1961). In line with the World Health Organization's (WHO 1948) definition of health, wellness relates to the entire person and represents more than merely the absence of disease; it extends significantly beyond the negative elements of illness and disease by concentrating on the positive elements of well-being, happiness, and quality of life (e.g., Seligman 2012; Seligman & Csikszentmihalyi 2000). Expressed on a continuum that extends from reactive to proactive approaches to health, wellness represents proactive behavior with the aim of optimal health by relying on one's maximum potential (cf. Travis 1972; Dunn 1961). In the current thesis, this approach is touched upon with the concept of the *optimal self*, which refers to *an individual's dynamic growth process with the aim of finding one's optimal state—i.e., the balanced self*.

In the context of consumption, wellness refers to the adoption of attitudes, activities, lifestyle choices, and consumption habits that enable the pursuit of optimal health (GWI 2018a). Wellness is about integrating a holistic health paradigm into one's life by making lifestyle choices and self-care decisions that will improve one's quality of life, such as getting an adequate amount of exercise and sleep, maintaining a healthy diet, taking care of one's physical appearance, maintaining vitality, dealing with stress, and responding to the first signs of illness (GWI 2018a; Pilzer 2007). In recent years, wellness has evolved into a large consumer industry, encompassing diverse sectors that enable consumers to incorporate wellness activities and lifestyles on a daily basis.

Today, the wellness industry plays a significant role in the global economy. According to Global Wellness Institute (GWI 2018a), the global wellness economy was worth \$4.2 trillion in 2017, representing more than 5% of the global economic output (ibid. 2018a). The wellness industry comprises several sectors, including

beauty and anti-aging, healthy eating, wellness tourism, fitness, and wearables. The largest sector is beauty and anti-aging, which covers various beauty care products and services worth over \$1 trillion. From 2015–2017, the global wellness industry grew by 6.4%, which is a rate nearly twice as fast as the global economic growth (ibid. 2018a).

Why does this all matter? Why has wellness evolved into a big business? And what can it offer for an individual? There are several powerful factors that have fostered the growth of the wellness industry: an aging population, the rising global epidemic of lifestyle diseases and stress, an increase in health-consciousness and lifestyle changes, technology overload, and anxiety regarding changes in healthcare and the economy (GWI 2017; Mintel 2017; SRI International 2010; Pilzer 2007). It has been stated that *“those who think they have no time for bodily exercise will sooner or later have to find time for illness”* (Bosshart et al. 2018, p. 38). Nevertheless, the curing of illness and disease becomes expensive and is ineffective in many ways. For example, the prevalence of adult obesity in the Western countries nearly doubled between 1980 and 2014 (WHO 2014). In the U.S. exclusively, healthcare costs associated with obesity were nearly \$150 billion, and the productivity loss of obesity-related absenteeism reached up to \$6.4 billion in 2008 (latest available statistics; Centers for Disease Control and Prevention 2015).

Wellness drives significant consumer spending and economic activities when compared to the global health expenditures that were estimated at \$7.3 trillion in 2015 (GWI 2018a). There is, however, a clear distinction between the healthcare sector and the wellness industry; medical treatments are prescribed by professionals, while the individual decisions associated with wellness are chosen. This voluntary aspect of wellness is a strong indicator that consumers are willing to invest in their own well-being, happiness, and quality of life. Wellness is a matter of individual choice—a conscious decision to promote one’s own health and well-being (Bosshart et al. 2018; cf. Bahl et al. 2016; Mick et al. 2012). It has been acknowledged that individuals who appear capable, fit, and strong are considered as remaining competitive (Bosshart et al. 2018; Lupton 2016). Accordingly, wellness is not only an individual value to strive for, but can also be considered an asset in both social and professional life.

In addition to individual well-being, there is an evolving, collective consciousness toward global well-being and the increasing threat to it. This can be particularly witnessed in the growing awareness among more educated and affluent consumers acknowledging that their choices carry meaning, purpose, and impact beyond their own individual fulfillment (GWI 2017; cf. Bahl et al. 2016; Mick et al. 2012). In line with this, consumers are increasingly seeking and valuing meaningful experiences that are rooted in authenticity and nature, thereby becoming connected to the well-being of others and the whole ecosystem (GWI 2017; cf. Huta & Waterman 2014; Mick et al. 2012).

The wellness industry is a relatively young economic sector that is growing at an outstanding rate. New markets are appearing with technological innovations and new consumer segments. One of the major trends shaping the wellness industry—at present and in the future—is digitalization. Digitalization is transforming the world in many ways, enabling lifestyles with more options, and influencing habits, needs, and desires across many aspects of life (Bosshart et al. 2018; Lupton 2016; Ruckenstein 2014). The new opportunities presented by technology not only expand, but also create new, previously unknown needs. With smartphone applications and various tracking devices, measuring and tracing namely the physical parameters of an individual and his/her everyday life are becoming more commonplace activities (Lupton 2017; 2014). This supports the ever-growing interest in self-optimization. With the aid of digital technology—particularly the tracking and monitoring of devices—the body may be more frequently controlled based on measured values, as it can be transformed and improved in order for the individual to attain happiness and excellence (Ruckenstein 2014). New analytical tools are also opening up new dimensions of self-awareness (Bosshart et al. 2018; Lupton 2016).

1.2 Justification and positioning of the thesis

The theme of the current thesis originates from the year 2007, during which time I was writing my master's thesis on the meanings of physical activity. Even though I majored in marketing, I dived deeply into sociological discussions in order to understand how physical activity is related to individuals' identity, consumption, and lifestyle in relation to the forming of a significant aspect of consumer behavior. Years later, I returned to the meanings of physical activity as a doctoral researcher. Soon, however, I discovered that physical activity was bound to a much larger phenomenon: the wellness movement. The wellness trend had gradually started to emerge in Finland, at the time emphasizing the physical aspects of wellness. This led to the reframing of the research topic from mere physical activity to a wider wellness phenomenon, focusing on the *holistic care of the self and self-transformation with an aim of self-optimization*. During the research process, wellness has been evolving into a major consumption trend and consumer lifestyle, which is also reflected in the current thesis.

The thesis belongs to the discipline of marketing, and more precisely to its large sub-discipline of consumer research (MacInnis & Folkes 2010). The thesis is positioned in a rather novel field of transformative consumer research, which aims to enhance consumer well-being and quality of life (Mick et al. 2012; Mick 2006), and thus relates to issues that are socially meaningful and impactful. In the current

thesis, wellness is considered a context, a multifaceted phenomenon related to various aspects of life, and the search for a good life in terms of well-being, happiness, and quality of life. This, together with the long history of wellness, requires a multidisciplinary research approach. Accordingly, the current thesis also draws from positive psychology and sociology in order to interpret, understand, and explain wellness as a major consumption phenomenon and consumer lifestyle. The consumer centricity, consumer empowerment, and consumption relatedness are, however, reflected in the business orientation of the thesis and in the nature of its basic assumptions.

The requirement of a multidisciplinary research approach to wellness also leads to the identification of the first research gap. Wellness as a modern concept refers to holistic and positive health that first emerged in academic research in the late 1950s within health sciences (e.g., Hettler 1980; Ardell 1977; Travis 1972; Dunn 1959; 1961). The theme has also been touched upon in humanistic psychology (e.g., Rogers 1961; Maslow 1954), counselling (Myers et al. 2000; Witmer & Sweeney 1992; Sweeney & Witmer 1991), positive psychology (e.g., Seligman 2012; Seligman & Csikszentmihalyi 2000), and transformative consumer research (e.g., Mick et al. 2012; Mick 2006). The tenants of wellness extend, however, to ancient historical and philosophical discussions on conceptions of a good life and a life well-lived, which have been debated thoroughly since Aristotle's time (4th century BCE). Thus, the *first research gap* is related to the combining of fragmented discussions, theories, and concepts of various disciplines in order to create a more solid base for understanding the modern wellness movement.

The second research gap concerns the discipline of marketing and consumer research. The theoretical and empirical research on wellness consumption and lifestyle within marketing and consumer research has been scarce, although hedonic consumer research, experience marketing, and transformative consumer research (TCR) have covered some of its areas. Previous literature has been primarily empirical, and it has mostly focused on the commercial aspects of wellness by providing insights into the wellness industry for the development of the industry itself as well as for managerial purposes (e.g., GWI 2018a; 2017; GWS 2018; 2017; SRI International 2010; Pilzer 2007). Tourism literature has contributed to the theoretical and empirical understanding of wellness from both consumer and industry perspectives, indicating that wellness tourism is a significant and fast-growing segment of the global tourism sector (e.g., Smith & Puczko 2017; Konu 2016; Konu & Kompula 2016; Konu et al. 2010; Sheldon & Bushell 2009; Smith & Puczko 2009). Wellness tourism represents, however, a special form of consumption with distinct theoretical underpinnings, and therefore a wider and more general view of wellness consumption and lifestyle is needed. Thus, the *second research gap* addresses the need for a more robust theoretical understanding of wellness consumption and lifestyle—especially from a consumer's perspective.

The third research gap relates to identity, consumption, and lifestyle. These themes have been widely discussed within sociology by various scholars, who have emphasized the intertwinement of the body and the self (e.g., Sassatelli 2012; Shilling 2012; Featherstone 2010; Smith Maguire 2008; Bauman 2007; Giddens 1991). The discussions also relate to the notion of self-care, which is embedded in current consumer culture and is viewed upon both as a right and an obligation of an individual in his/her pursuit of health, well-being, happiness, and productivity (Lupton 2016; cf. Crawford 2006; Foucault 1986). With the advent of digital devices and software, self-tracking and self-monitoring practices have become more common in the act of transforming oneself toward the optimal state (Lupton 2016; Ruckenstein 2014). There is, however, a noticeable gap in the literature's addressing of wellness as part of the current consumer and self-care culture. Thus, the *third research gap* emerges from the lack of research relating wellness to identity and lifestyle construction—i.e., *wellness identity and wellness lifestyle*—and discussing wellness as an important means for transforming oneself.

Finally, the fourth research gap addresses wellness in relation to self-branding. Self-branding has increased significantly in popularity and has become a growing phenomenon (e.g., Pagis & Ailon 2017; Khamis et al. 2016; Manai & Holmlund 2015). The importance of self-branding is most effectively illustrated through the evolution in individuals' social and professional needs and desires. Having a strong self-brand can be an important asset in today's individualistic and increasingly digital world (e.g., Thompson-Whiteside et al. 2018; Gandini 2016; Hollenbeck & Kaikati 2012). Moreover, a strong self-brand is often regarded as more of a necessity in a competitive professional environment, where creating a favorable and compelling self-image as well as differentiating oneself from others are essential to success (e.g., Kucharska & Mikolajczak 2018; Thompson-Whiteside et al. 2018; Brooks & Anumudu 2016; Vallas & Cummins 2015). Despite the fact that both wellness and self-branding are trending across the world, self-branding has not been previously discussed in the context of wellness, and thus it offers a novel area of research. Furthermore, the *fourth research gap* deals with the combining of wellness with self-branding by introducing a new concept: *wellness branding*.

The disciplinary positioning of the thesis is depicted in Figure 2. Notably, the focus of the thesis is investigated through three different theoretical standpoints composed of positive psychology, marketing and consumer research, and sociology. Simultaneously, these standpoints offer three different lenses (i.e., *kaleidoscopes*) through which one may interpret the phenomenon: the first lens discusses wellness and its interrelatedness to the conception of a good life and human potential by adopting from hedonic and eudaimonic perspectives on well-being; the second lens provides understanding on wellness as a form of transformative consumption, self-enhancing lifestyle, self-investment strategy, as well as a means of self-branding; and the third lens relates wellness more closely to identity and lifestyle

construction. The main theoretical contribution of the current thesis is targeted to the relatively new research tradition of transformative consumer research (TCR) and to branding literature—more precisely, self-branding—by addressing wellness as a means for transforming and branding oneself toward the optimal state.

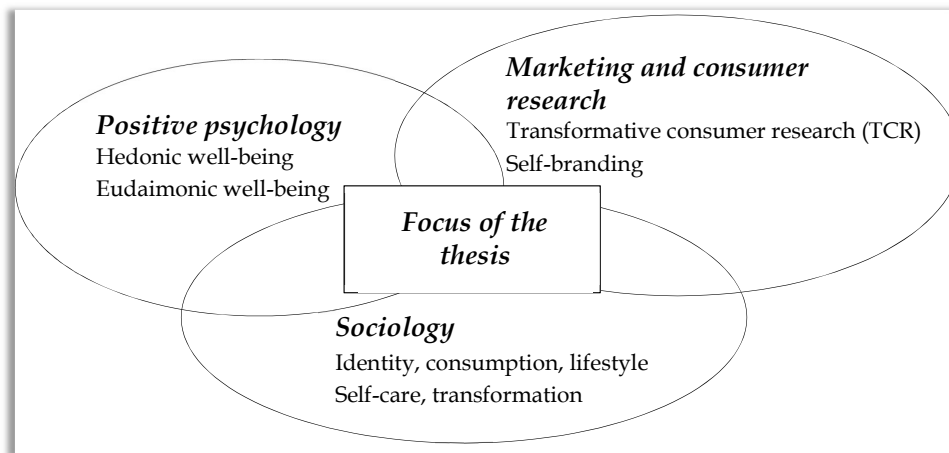


Figure 2. Positioning of the thesis

1.3 Purpose of the thesis

The thesis dives into the multifaceted wellness phenomenon by discussing wellness consumption and lifestyle as a powerful means for transforming and branding oneself. Based on the identified research gaps, the purpose of the thesis is to *enhance the theoretical and empirical understandings of wellness consumption and lifestyle in reaching the optimal self, thereby also illustrating the inner journey of the self*. To explore this purpose in more detail, the following research questions are posed:

RQ1: *How have perceptions and understandings of wellness evolved over the course of time, and how do these aspects reflect what is valued in life?*

RQ2: *What is meant by the “optimal self,” and through which means is this kind of “self” pursued?*

RQ3: *How are wellness and self-branding interconnected, and what is the logic of wellness branding?*

This aim is addressed by the theoretical discussions in Chapter 2 together with four research articles that approach wellness consumption and lifestyle from diverse perspectives (see Table 1). Article 1 discusses wellness in the tourism context and

in relation to well-being, Articles 2 and 3 address wellness in relation to fitness and meanings of physical activity, and Article 4 takes a wider perspective, covering multiple dimensions of wellness and additionally discussing it in relation to self-branding. The table below demonstrates how the theoretical discussions and research articles together contribute to the research questions posed in the current thesis.

Table 1. Articles, contexts, research themes, objectives, and contributions

<i>Article and wellness context</i>	<i>Research theme and objectives</i>	<i>Contributes to the research question(s) together with Chapter 2</i>
<i>Article 1</i> <i>Wellness tourism</i>	<ul style="list-style-type: none"> ▪ Discusses wellness in relation to well-being ▪ Examines how the concepts of well-being and wellness are defined within consumer and tourism research ▪ Analyzes how these concepts are understood and used within the tourism industry 	▪ RQ1
<i>Article 2</i> <i>Fitness and meanings of physical activity</i>	<ul style="list-style-type: none"> ▪ Discusses fitness (i.e., leisure walking) in relation to consumer culture and the wellness lifestyle ▪ Examines how perceived well-being, different life domains and personal goals, as well as the meanings of physical activity differ among individuals according to their level of physical activity 	▪ RQ1, RQ2
<i>Article 3</i> <i>Fitness and meanings of physical activity</i>	<ul style="list-style-type: none"> ▪ Discusses fitness and the meanings of physical activity in relation to current self-care culture ▪ Examines the meanings of physical activity and their association with both perceived well-being and the amount of physical activity 	▪ RQ1, RQ2
<i>Article 4</i> <i>Multiple dimensions of wellness; self-branding</i>	<ul style="list-style-type: none"> ▪ Discusses wellness in relation to self-branding ▪ Examines the theoretical basis of wellness as a means of self-branding ▪ Analyzes the shared meanings and personal sources of wellness 	▪ RQ1, RQ2, RQ3

1.4 Key concepts

The thesis's key concepts are briefly defined in Table 2. A more detailed discussion of the main issues and concepts is presented in Chapter 2.

Table 2. Key concepts of the thesis

<i>Concept</i>	<i>Definition</i>
Consumer culture	<i>Consumer culture</i> refers to a phenomenon in which consumption plays an increasingly important role in everyday life, particularly in relation to production (e.g., Sassatelli 2007; Ritzer & Slater 2001).
Eudaimonism/ eudaimonia (i.e. flourishing)	<i>Eudaimonism</i> , as a philosophical perspective of a good life, emphasizes the actualization of human potential and the pursuit of a meaningful life (e.g., Waterman 2008). <i>Eudaimonia</i> , as a conception of happiness, seeks to pursue authenticity, meaning, excellence, and personal growth (e.g., Huta & Waterman 2014).
Health	<i>Health</i> refers to a “state of complete physical, mental, and social well-being and not merely the absence of disease or infirmity” (WHO 1948).
Hedonism/ hedonia	<i>Hedonism</i> , as a philosophical perspective of a good life, posits that the pursuit of pleasure is the greatest good (e.g., Waterman 2008). <i>Hedonia</i> , as a conception of happiness, seeks to pursue happiness, pleasure, enjoyment, and comfort (e.g., Huta & Waterman 2014).
Optimal self	The <i>optimal self</i> refers to an individual’s dynamic growth process with the aim of finding one’s optimal state—i.e., the balanced self (own definition, see Section 1.1).
Positive psychology	“ <i>Positive psychology</i> is about scientifically informed perspectives on what makes life worth living. It focuses on aspects of the human condition that lead to happiness, fulfillment, and flourishing” (The Journal of Positive Psychology 2005).
Transformation	<i>Transformation</i> refers to a profound change of the self that features the body, mind, and/or spirit/soul to achieve better health and/or appearance, career success and/or social status, happiness, also a deeper meaning in and greater quality of life, personal growth, and productivity (e.g., Elliot 2013; Lupton 2016).
Transformative consumer research (TCR)	<i>Transformative consumer research</i> examines issues that are meaningful and important to consumers; it focuses on individual, societal, and environmental problems and opportunities related to consumer behavior and consumption with the goal of improving consumer well-being (Mick et al. 2012; Mick 2006).
Self-branding	<i>Self-branding</i> is a process that emphasizes an individual taking control of one’s authentic, true self, and the impression one makes when communicating that self to others (Grénman et al. 2019 [forthcoming]).
Well-being	<i>Well-being</i> refers to the balance of individual, subjective perceptions on a variety of positive and/or negative states (e.g., happiness, life satisfaction, functioning, and vitality); it is a component of an individual’s health that can also be objectively described and measured (Bosshart et al. 2018; Huta & Ryan 2010).
Wellness	<i>Wellness</i> refers to a holistic and positive approach to health, emphasizing self-responsibility and illness prevention with a focus on optimal health in reaching the “optimal self” (own definition, see Section 1.1).
Wellness branding	<i>Wellness branding</i> is a process of identity and lifestyle construction as well as self-promotion through various practices of wellness and different forms of self-branding, the goal being to create and brand one’s optimal—balanced—self (Grénman et al. 2019 [forthcoming]).

1.5 Outline of the thesis

The current thesis is an article-based dissertation comprised of a theory section and four research articles. Following the first chapter (*Introduction*), the thesis is divided into four parts. The second chapter (*Fascination with the self – Reflections of current consumer culture*) provides the theoretical background of the thesis and is divided into three subchapters. The first subchapter (*Wellness – A new paradigm of health*) illustrates the evolution of wellness by deepening the understanding of the phenomenon and its main notions from roots to present. Following the historical overview, wellness is discussed in relation to two major philosophical traditions: hedonism and eudaimonism, which are often juxtaposed as opposing perspectives on well-being and happiness and thus also provide two different kinds of philosophical and theoretical standpoints for understanding wellness and its interrelatedness to the conception of a good life. This is further strengthened by a discussion of the trajectory from hedonic consumer research to TCR, along with an analysis of how TCR has benefited consumer well-being, happiness, and quality of life on the individual, societal, and environmental levels.

The second subchapter (*A new era of wellness*) discusses wellness as a major consumption phenomenon and consumer lifestyle by addressing the inner journey of the self through sociological lenses. Thereafter, the focus switches to a description of the wellness industry's features along with the need for self-optimization and wellness digitalization, both of which reflect a new kind of self-care culture. The third subchapter (*Wellness extends to self-branding – Introducing a concept of wellness branding*) discusses how wellness can be used as a means to position and brand oneself as an advocate of holistic health. The chapter introduces a new concept of wellness branding and discusses its utilization in more detail by presenting “the logic of wellness branding.”

The third chapter (*Research strategy*) describes the research strategy in more detail, including the description of the scientific approach and methodological choices alongside the data and methods used. The fourth chapter (*Research findings*) presents each of the four research articles' main results, after which a synthesis of the theoretical discussions and the main findings from the research articles is presented and highlighted by three main arguments. Finally, the fifth chapter (*Discussion and conclusions*) presents the thesis's concluding remarks, including the theoretical contribution as well as managerial and societal implications. In addition, the thesis's limitations and suggestions for future research are presented.

2 FASCINATION WITH THE SELF – REFLECTIONS OF CURRENT CONSUMER CULTURE

2.1 Wellness – A new paradigm of health

2.1.1 The evolution of wellness – From roots to present

Wellness is a modern concept with ancient roots that captures something salient about the culture at each period of time. The term “wellness” emerged following World War II in the United States largely due to the changing context of disease and society’s health needs (Foster & Keller 2007; Miller & Foster 2010; Kirkland 2014). Wellness captures the sense that the era of combating diseases has given way to a wider perspective of coping and succeeding in today’s societies: living well, finding happiness, and discovering deeper meaning in life (e.g., Kirkland 2014; Ryan et al. 2006; Ryan & Deci 2001; Seligman & Csikszentmihalyi 2000). In other words, the possibility of fulfilling the basic needs in life has created the basis for a broader scale of focus on wellness. Furthermore, as the basic needs are fulfilled for the great majority of the population in the Western world, the criteria for a satisfactory life have changed over the years.

Current conceptualizations of wellness in the West emphasize integration, holistic approach, positive nature, and balance between the diverse aspects of life, which contribute to individual well-being, happiness, and quality of life (Miller & Foster 2010; cf. Lambert et al. 2015; Seligman 2012). The fascination with the relationship between body, mind, and spirit/soul, however, extends far back to the ancient civilizations of Asia, Greece, and Rome, whose historical and cultural traditions have influenced the modern wellness movement (GWI 2018b; SRI International 2010; Miller 2005). A detailed timeline of the evolution of wellness is illustrated in Figure 3.

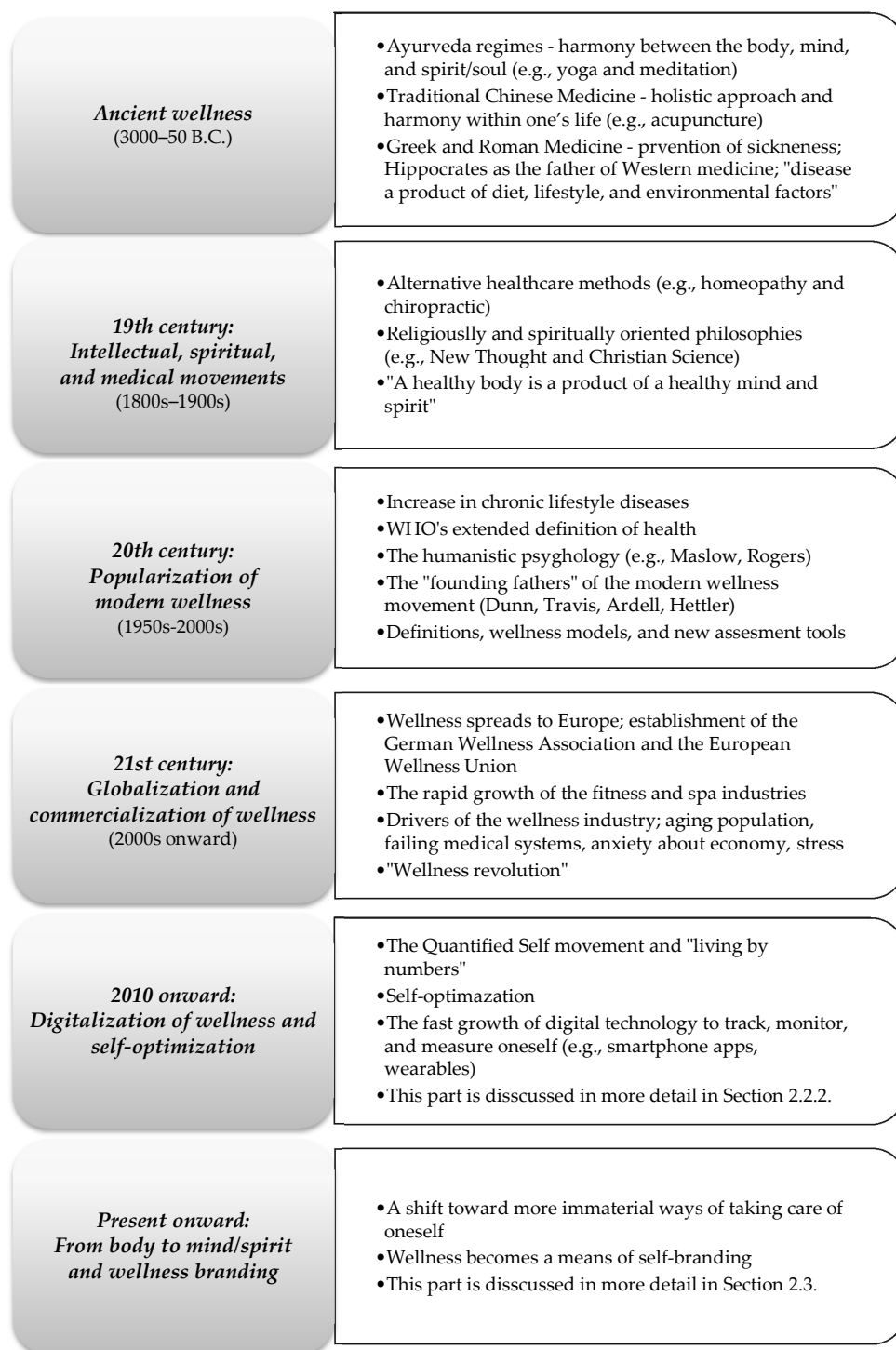


Figure 3. The timeline of the evolution of wellness

Ancient antecedents of wellness

The antecedents of wellness can be found in the ancient Indian (3000–1500 B.C.) holistic healing systems (e.g., Ayurveda) that aimed to create harmony between the body, mind, and spirit/soul. Ayurveda regimes were tailored to each person individually with the goal of maintaining a balance that prevents illness and contributes to a long and healthy life. The body–mind–spirit traditions and practices that originate from India include yoga and meditation (among others), which are also currently practiced more and more frequently in contemporary Western cultures. Traditional Chinese Medicine (3000–2000 B.C.), by contrast, is one of the oldest medicinal practices across the world. It has strongly been influenced by the ancient philosophies of Taoism and Buddhism, and therefore it has also applied a holistic approach toward achieving health through the cultivation of harmony within one’s life. Therapies that have evolved from traditional Chinese medicine, such as acupuncture and herbal medicine, are still commonly practiced and are also integrated to varying extents into current Western medical practices. (GWI 2018b; SRI International 2010).

While the Eastern antecedents of wellness can be considered holistic and integrative in nature, the West tends to be more dualistic by separating the mind and body. The roots of the Western antecedents of wellness can be found in ancient Greek (500–300 B.C.) and Roman (50 B.C.) medicine. Originating from the Greek physician Hippocrates, who can also be considered the father of Western medicine, the focus was placed on the prevention of sickness rather than mere treatment of disease. Hippocrates presumably argued that disease is a product of diet, lifestyle, and environmental factors rather than a punishment inflicted by the gods. This assumption was the total opposite from the earlier thoughts in Greek mythology, according to which there are two separate gods—one associated with illness (Panacea) and one associated with the prevention of illness (Hygiea) (Horton & Snyder 2009). Hippocrates’s view was later shared by the Romans, who had a highly developed public healthcare system that included public baths (among other elements) to promote healthy living. Common to all ancient practices and traditions is, however, that they emphasized a whole person and a harmonious approach as being necessary to remain well (GWI 2018b; SRI International 2010).

19th-century intellectual, spiritual, and medical movements

The modern wellness concept is also firmly rooted in several intellectual movements, spiritual philosophies, and medical practices that originated from the United States and Europe in the 19th century (GWI 2018b; Kirkland 2014; SRI International 2010). During this era, various alternative practices and techniques that focus on self-healing, holistic approaches, and preventive care, such as homeopathy, hydrotherapy, and chiropractic, were founded. Religiously and spiritually oriented

philosophies included “mind-cure movements” such as New Thought and Christian Science with an idea that one of the primary sources of physical health is one’s mental and spiritual state of being (GWI 2018b; Kirkland 2014; SRI International 2010; Miller 2005). The spiritual nature of disease and the power of the mind and spirit in combating disease were common in the U.S. and were referred to as the “religion of health-mindedness” (Miller 2005).

Although the traditional preventive and holistic approaches were later challenged by the modern, evidence-based medicine in the mid-20th century, some of these approaches have regained favor within the medical community as well as with the general public (GWI 2018b). Indeed, the philosophies and practices embodied in the 19th-century movements, which suggested that a healthy body is a product of a healthy mind and spirit, are considered precursors to the current understanding of wellness (GWI 2018b; SRI International 2010). Consequently, the strong tie between positive attitude, correct practices, and individuals’ own responsibility for health have remained an essential part of wellness (Kirkland 2014; cf. Ryan et al. 2006; Seligman 2004; Seligman & Csikszentmihalyi 2000).

20th-century popularization of modern wellness – Wellness as self-responsibility

The current Western understanding of wellness is strongly associated with the changing context of disease and, therefore, a need for a more holistic approach to health (Kirkland 2014; Foster & Keller 2007). The 19th-century successful public health reforms targeting water quality, personal hygiene, nutrition, and rising standards of living have greatly contributed to this change. Moreover, advances in medicine and technology—namely the use of antibiotics and vaccines—reduced mortality associated with infectious diseases (Miller & Foster 2010) and thus led a shift in disease profiles. Chronic and lifestyle diseases such as type 2 diabetes, obesity, heart disease, and some types of cancer became more common (ibid. 2010). When the life expectancy increases, diseases associated with lifestyle that encompass all aspects of an individual become more prominent and thereby also broaden the concept of health from the absence of illness to wellness (cf. Foster & Keller 2007).

This trajectory is also inherent in the World Health Organization’s (WHO) extended definition of health as “*a state of complete physical, mental, and social well-being and not merely the absence of disease or infirmity*” (WHO 1948), in which health is treated in a holistic and positive manner. The definition also captures the broad tenets of wellness on which many subsequent conceptualizations are based.

While this history illustrates the evolution and value of the holistic approach to wellness, it was not until the late 1950s that the concept emerged in its modern form, introduced by Halbert Dunn in his seminal article *High-Level Wellness for*

Man and Society—the basis of his better-known book *High-Level Wellness*, published in 1961 (Figure 4).

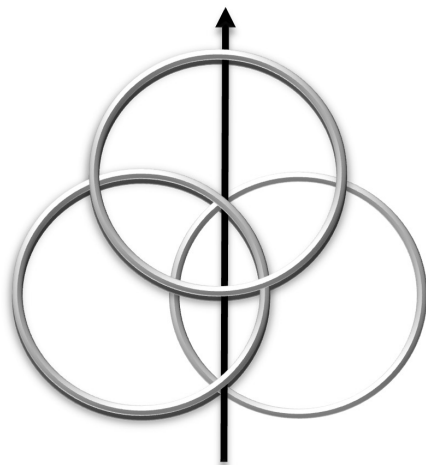


Figure 4. High-level wellness symbol by Dunn (1961)

Dunn was the earliest pioneer to define and use the concept of wellness rather than health to represent wellness as a positive state that extends beyond non-illness and *optimal human functioning* (Foster & Keller 2007; Miller 2005; cf. Huta & Waterman 2014; Huta & Ryan 2010; Ryan & Deci 2001). Dunn defined high-level wellness as

an integrated method of functioning which is oriented toward maximizing the potential of which the individual is capable. It requires that the individual maintain a continuum of balance and purposeful direction within the environment where he is functioning (Dunn 1961, pp. 4–5).

Dunn postulated that wellness is not just a single condition, but a continuum comprised of overlapping levels and dimensions of wellness among which individuals make active choices to move toward or away from their maximum potential (SRI International 2010; Miller 2005).

Dunn's thoughts were significantly influenced by several humanistic psychologists, such as Abraham Maslow and Carl Rogers (Lambert et al. 2015; Miller 2005). Akin to recognizing Dunn as the founder of the modern wellness concept, Maslow can be considered the founder of humanistic psychology (Lambert et al. 2015). He was the first psychologist to study excellence as a basis for defining the scope of human potential, and he introduced the term *self-actualization*. According to Maslow (1968), self-actualization involves making choices based on self-aware-

ness, growth, and self-responsibility. It represents the growth of an individual toward his/her fulfillment of the highest human needs (cf. optimal human functioning)—particularly those associated with meaning in life (ibid. 2015). Rogers (1961) also believed that individuals are inherently experiencing a state of full functioning—i.e., they are self-actualizing (ibid. 2015). However, in order to self-actualize, individuals must be in a state of congruence, which refers to the equivalence of an individual’s “real self” and “ideal self.”

Although Dunn’s work did not receive much attention initially, his ideas have been embraced and further developed by several scholars since the 1970s mainly in the U.S. The “founding fathers” of the actual wellness movement can be named John Travis (1972), Don Ardell (1977), and Bill Hettler (1984), all of whom have greatly contributed to the current wellness discourses by introducing their own definitions and models of wellness (SRI International 2010; Miller 2005).

Travis (1972) drew upon Dunn’s pioneering work by introducing a two dimensional illness–wellness continuum (Figure 5) that distinguishes illness and wellness as two entities and highlights the *responsibility of the individual* in achieving optimal health (i.e., high-level wellness) (SRI International 2010; Miller 2005). The treatment paradigm, such as drugs, surgery, or psychotherapy, brings individuals only to the neutral point (i.e., disease free), while the wellness paradigm helps them move beyond neutral to higher levels of wellness (SRI International 2010). Travis considered the reaching of wellness as being an ongoing process moving from disability, symptoms, and signs of illness toward higher-level wellness through awareness, education, and growth (SRI International 2010; Travis 1972).

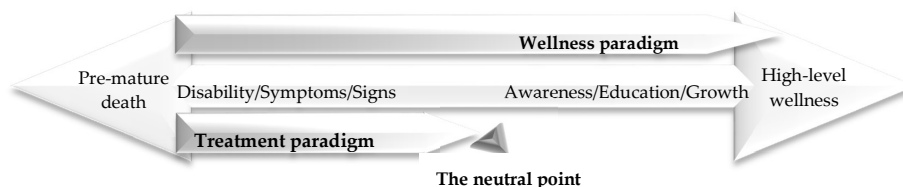


Figure 5. Illness–wellness continuum by Travis (1972)

Much like Dunn (1961; 1959), Travis (1972) emphasized wellness as a process rather than a static state nor simply the absence of disease by arguing that “*wellness extends the definition of health to encompass a process of integration characterized by awareness, education, and growth*” (cited in SRI International 2010, p. 75). However, he placed much greater emphasis on the self-responsibility of an individual to move toward high-level wellness than did Dunn (see Miller 2005).

Yet, it was not until Ardell’s work in the 1970s and early 1980s that wellness, as a term, became familiar to the wider audience (Miller 2005). Ardell (1977) defines wellness as

a choice to assume responsibility for the quality of one's own life. It begins with a conscious decision to shape a healthy lifestyle. Wellness is a mindset, a predisposition to adopt a series of key principles in various life areas that lead to high levels of well-being and life satisfaction. (cited in SRI International 2010, p. 76).

The life areas most closely associated with wellness include self-responsibility, exercise and fitness, nutrition, stress management, emotional intelligence, meaning and purpose, humor, play, and effective relationships. Based on these areas, Ardell introduced a circular model of wellness, which has since evolved several times (Figure 6). The current version of the model embraces three primary domains (physical, mental, as well as meaning and purpose) with fourteen dimensions of wellness or skill areas (SRI International 2010). Unlike Dunn and Travis, Ardell rejected spiritual aspects of wellness, focusing instead on physical, mental, and social dimensions (Miller 2005).

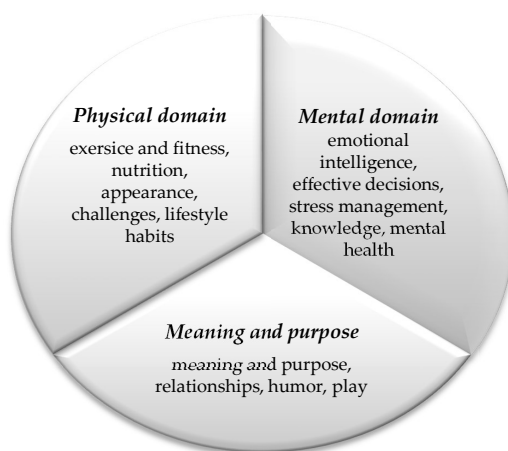


Figure 6. Circular model of wellness by Ardell (1977)

Hettler, also known as the founder of the National Wellness Institute in the U.S., defined wellness as *“an active process through which people become aware of, and make choices toward, a more successful existence”* (1984, p. 14). Hettler’s (1984) wellness model (Figure 7) is one of the most widely recognized and applied models with six interdependent dimensions: physical (the combination of exercise and eating habits), emotional (awareness and acceptance of feelings), social (contribution to environment and community), spiritual (the search for meaning and purpose in life), intellectual (creative and stimulating activities), and occupational (personal satisfaction and enrichment in life through work) (SRI International 2010).

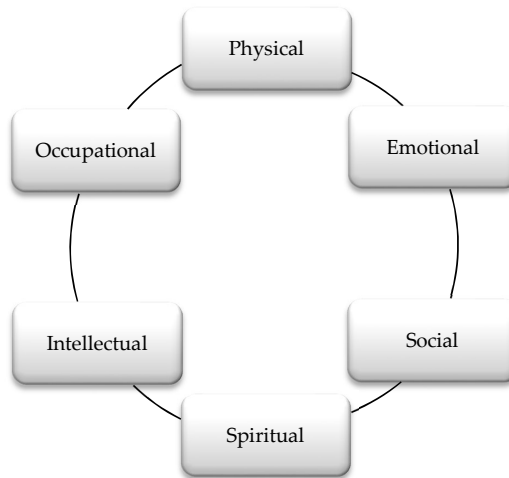


Figure 7. The six dimensions of wellness by Hettler (1984)

These main dimensions were later supplemented with environmental, cultural, economic, and climate wellness (e.g., Diener et al. 2009; Travis & Ryan 2004; Ryan & Deci 2001). Table 3 presents more detailed descriptions of the main dimensions of wellness and their definitions, summarized from the extensive literature reviews of Miller and Foster (2010) and Foster and Keller (2007).

Table 3. Dimensions of wellness and their definitions

<i>Dimension of wellness</i>	<i>Definition</i>
<i>Physical</i>	Physical wellness focuses on preventive and proactive practices/means for taking care of one's body, including physical activity, nutrition, self-care, and avoidance of harmful behaviors, such as inactive living, alcohol abuse, and smoking.
<i>Emotional/psychological</i>	Emotional/psychological wellness encompasses one's attitudes and beliefs toward the self and life (i.e., having a positive and realistic self-concept and a positive attitude toward life), as well as awareness and control of actions, feelings, and relationships. In recent years, emotional wellness has also been associated with psychological wellness, which refers to positive or optimal functioning and involves the fulfillment of basic psychological needs.
<i>Social</i>	Social wellness involves the degree and quality of interactions with others, the community, nature, as well as the motivation, action, intent, and perception of interactions.
<i>Spiritual</i>	Spiritual wellness stresses the innate and continual process of finding meaning and purpose in life as well as the presence of the self in relation to others, society, nature, the universe, and even some higher power.
<i>Intellectual</i>	Intellectual wellness refers to the degree to which one possesses the possibility to engage in creative and stimulating activities for purposes of personal growth and positive development of society.
<i>Occupational</i>	Occupational wellness describes the extent to which one can express values and gain personal satisfaction and enrichment from one's work, as well as one's attitude toward work and the ability to balance several roles.
<i>Environmental</i>	Environmental wellness includes the balance between leisure and work, as well as individuals' relationships with nature and global resources.

Over the years, several scholars ranging from health sciences to psychology have explored and defined wellness in different ways by also relating it to various alternative concepts, namely well-being, happiness, life satisfaction, and quality of life (e.g., Ryan & Deci 2001; Kahneman et al. 1999; Diener 1984). Despite rigorous attempts, there is still no universally accepted definition of the concept. Its necessity may even be questioned. The lack of a universally accepted definition of wellness is easy to understand based on historical, cultural, religious, and geographical differences as well as the constant social and political global changes, all of which affect the expectations and criteria for wellness. Furthermore, it has been suggested that the difficulty in definition is due to the subjective nature of the construct and the inherent, individual value judgment regarding what wellness is and what it is not (Miller & Foster 2010; Foster & Keller 2007).

Although many scholars have either developed their own definitions of the concept or modified existing ones, some key features are commonly shared. Wellness represents self-responsibility, a way of life, and a mindset; it is multidimensional and refers to a holistic approach toward health and the integration of the body,

mind, and spirit/soul. In addition, it is considered to be a continuum and a dynamic growth process toward optimal functioning—i.e., the optimal self. The development of wellness definitions, including the definitions introduced by the “fathers” of modern wellness, are presented in Table 4.

Table 4. Development of wellness definitions

<i>Year</i>	<i>Author(s)</i>	<i>Definition of wellness</i>
1961	<i>Dunn</i>	Wellness is an integrated method of functioning that is oriented toward maximizing the potential of which the individual is capable. It requires that the individual maintains a continuum of balance and purposeful direction in the environment within which he is functioning.
1972	<i>Travis</i>	Wellness extends the definition of health to encompass a process of integration characterized by awareness, education, and growth .
1977	<i>Ardell</i>	Wellness is first and foremost a choice to assume responsibility for the quality of one’s own life. It begins with the conscious decision to adopt a healthy lifestyle . Wellness is a mindset , a predisposition to adopt a series of key principles in various life areas that lead to high levels of well-being and life satisfaction.
1984	<i>Hettler</i>	Wellness is an active process through which people become aware of and make choices toward a more successful existence .
2000	<i>Myers, Sweeney & Witmer</i>	Wellness is a way of life oriented toward optimal health and well-being in which the body, mind, and spirit are integrated by the individual such that he/she may live more fully within the human and natural communities.
	<i>German Wellness Association</i>	Wellness describes an active and self-responsible strategy toward complete health that enables the subject to live healthily and productively as a result of scientifically proven actions, methods, and techniques; thus, wellness contributes to broad immunity against chronic illness and disease as well as the pursuit of happiness .
	<i>European Wellness Union</i>	Wellness stands for a practical philosophy of life , whose goal is the greatest possible physical and mental/spiritual well-being of the individual. A carefully cultivated environment is one of the major conditions: harmonious personal relationships, personal integration in economic and social life, and careful ecological behavior.
2017	<i>Global Wellness Institute</i>	The active pursuit of activities, choices, and lifestyles that lead to a state of holistic health .

21st-century globalization and commercialization of wellness

During the turn of the 21st century, a new paradigm of wellness emerged, and wellness became a global—although mostly Western—phenomenon. Some key global denominators have fostered the ever-growing need to pay more attention to wellness: aging population, the rising global epidemic of chronic lifestyle diseases such as physical inactivity and obesity, psychological issues related to, e.g., depression,

and increasing healthcare costs (GWI 2017; SRI International 2010). These factors have led to healthcare providers struggling to meet the increasing need of services as well as allocate resources and determine ways to increase preventive actions. Furthermore, increased stress in the workplace, technology overload, anxiety about the global economy and political climate, as well as environmental concerns have inflicted an additional mental load that decreases overall well-being (GWI 2017; Mintel 2017). All these powerful forces have encouraged the government and medical establishments as well as public and private corporations to focus more closely on prevention and preventative practices, thus taking the wellness movement more seriously (GWI 2018a; 2017; SRI International 2010).

From the U.S., the modern wellness concept first spread to Europe, where the German Wellness Association and the European Wellness Union were also founded (SRI International 2010). Along with the rapid global growth of fitness and spa industries from the beginning of the 1990s and an ever-growing number of celebrities, micro-celebrities, and self-help experts with an interest in self-actualization, living life to the fullest, improving one's self-image, as well as living and eating better gradually introduced wellness into the mainstream (SRI International 2010; Smith Maguire 2008; Pilzer 2007). In the era of wealth and abundance, wellness has become a major consumer lifestyle and an object of consumption. It has entered into various industries ranging from fitness and nutrition to beauty and wellness tourism, and has created a global multi-trillion dollar wellness industry that is also referred to as the "wellness revolution" (GWI 2018a; SRI International 2010; Pilzer 2007). Simultaneously, the concept of wellness has widened, and it has more often been discussed in relation to well-being, happiness, optimal or positive experience, life satisfaction, quality of life, and flourishing (e.g., Lambert et al. 2015; Seligman 2012; Ryan & Deci 2001; Seligman & Csikszentmihalyi 2000).

The use and understanding of the term "wellness" differs across countries and regions depending upon the varying cultural and historical traditions (e.g., SRI International 2010; Smith & Puczkó 2009). Furthermore, in many countries, there is no exact equivalent to "wellness" (e.g., *hyvinvointi* in Finnish), and thus, the English term "wellness" has been adopted for common use (e.g., Konu 2010; Konu et al. 2010). For instance, in the U.S., "wellness," as a word, is often understood as a healthy lifestyle, while in central Europe, wellness is associated with professional, high-quality services; in the UK specifically, it holds a slightly negative connotation (FTB 2008; 2005). It seems the way by which wellness translates into various languages is often a matter of cultural preference and different manifestations of health (cf. Kirkland 2014).

The Western understanding of wellness has been largely based on the theories and ideas that originated from the U.S. There, wellness has traditionally been related to general health, health promotion, and alternative medicine, while in Eu-

rope, wellness tends to be more associated with beauty, spas, and physical activities—even pleasure, indulgence, and luxury (Konu 2010; SRI International 2010). This has much to do with the European tradition of spa-going, bathing, as well as visiting sanatoriums and health resorts for both preventive and curative purposes (Miller 2005). Going to high-standard luxury spas has also had a social aspect in meeting individuals belonging to the same social class.

By contrast, in parts of Asia, many ancient spiritual traditions and healing practices, such as yoga and Ayurveda, are deeply ingrained into the culture and everyday life. Even though these practices are associated with wellness in the West, there is not necessarily mainstream recognition and use of the word in Eastern cultures. In fact, the modern word “wellness” is still a relatively new concept in Asia, although the traditions behind the concept are not (SRI International 2010). Similarly to Asia, “wellness” as a modern term is a relatively recent phenomenon in Latin America and not yet a mainstream concept. Furthermore, the region does not have the ancient wellness traditions that can be found in Asia, although parts of Latin America have a bathing tradition with hot springs particularly in the Andes region. Wellness in Latin America tends to be associated more with beauty and esthetical medical treatments rather than health and well-being in a broader sense (ibid. 2010).

2.1.2 Hedonic and eudaimonic approaches to wellness – Bridging wellness and positive psychology

Well-being is a complex construct consisting of optimal human experience and function (e.g., Ryan & Deci 2001). Since the beginning of “intellectual” history, there has been considerable debate regarding what defines “optimal experience” and what constitutes “good life” (ibid. 2001). Research on well-being has been strongly influenced by several sciences, including different fields of psychology (Lambert et al. 2015). There is currently a growing awareness that well-being refers to the balance of individual, subjective perceptions on a variety of positive and/or negative states, such as *happiness, life satisfaction, inspiration, awareness, a sense of meaning, functioning, and feeling carefree, as well as vitality* (Huta & Ryan 2010).

For much of the last century, psychology focused on mental illness, disorders, and psychopathology (Peterson & Park 2014; Gable & Haidt 2005; Ryan & Deci 2001). Following World War II, in particular, the focus shifted to the assessing and curing of individual suffering, thereby somewhat leaving the other two missions of psychology neglected: making the lives of individuals more productive and satisfying, as well as identifying and nurturing talent (Seligman 2002; Seligman &

Csikszentmihalyi 2000). Psychology became a science largely devoted to healing (ibid. 2002; ibid. 2000).

Since the beginning of the 1960s, a new paradigm of psychology emerged with an increasing focus on prevention and psychological growth (Ryan & Deci 2001). This shift was fostered by the World Health Organization's (1948) extended definition of health, and later the advent of humanistic psychology (e.g. Maslow 1968; Rogers 1961), which focused on human potential and addressed questions concerning what makes life worth living (Lambert et al. 2015; Peterson & Park 2014; Linley et al. 2006; Ryan & Deci 2001). The humanists began a movement toward more positive aspects of psychology that, in the 2000s, came to be known as *positive psychology* (Seligman & Csikszentmihalyi 2000).

Positive psychology – Focus on happiness and one's full potential

Positive psychology took off as an enhancement to mainstream psychology's emphases on negatively loaded features of the human mind (Nafstad 2015; Baumeister et al. 2013; Gable & Haidt 2005). The advent of positive psychology can be traced back to Martin Seligman and Mihalyi Csikszentmihalyi (2000), who came to realize that the scope of psychology is about not only disease, weakness, and damage, but also strength, virtue, and conditions that lead to high levels of happiness and/or civic engagement (Seligman 2004; Seligman & Csikszentmihalyi 2000).

The aim of positive psychology is to begin to catalyze a change in the focus of psychology from preoccupation only with repairing the worst things in life to also building positive qualities (Seligman & Csikszentmihalyi 2000, p. 5).

According to Seligman and Csikszentmihalyi (2000), positive psychology at the subjective level is about positive subjective experiences: well-being and satisfaction in the past, flow and happiness in the present, and hope and optimism for the future. At the individual level, it is about positive individual traits, including love, courage, interpersonal skills, aesthetic sensibility, forgiveness, future mindedness, and high talent. At the group level, in turn, it is about the civic virtues and institutions that move individuals toward better citizenship, including responsibility, nurturance, altruism, and work ethics (ibid. 2000). Accordingly, individuals should be conceptualized and understood such that they may cultivate their inherent potential for developing positive character traits and virtues (Nafstad 2015).

As human beings, individuals are interested in and motivated by fulfilling their optimal potential and achieving a pleasurable and meaningful life (Joseph 2015; Baumeister et al. 2013). It is now widely acknowledged that it is valuable to focus on what makes life worth living and what makes people happy, how the meaning

and purpose in life is found, and how one's maximum potential is achieved (e.g., Joseph 2015; Huta & Waterman 2014; Baumeister et al. 2013). The movement of positive psychology has offered and encouraged discussions and analyses to enrich human life and enhance human functioning (Nafstad 2015; Linley et al. 2006). It has also provided a common identity to scholars and practitioners interested in human flourishing and well-being (Joseph 2015). It has been argued that

Positive psychology is about scientifically informed perspectives on what makes life worth living. It focuses on aspects of the human condition that lead to happiness, fulfillment, and flourishing (The Journal of Positive Psychology 2005; cited in Linley et al. 2006, p. 5).

The roots of positive psychology as an accepted scientific field of optimal human functioning extend, however, to historical, philosophical, and epistemological discussions. Through conceptions of a good life and a life well-lived, two major philosophies have remained prominent: hedonism and eudaimonism. Both philosophies represent ethical philosophical traditions that are often juxtaposed as opposing perspectives on well-being and happiness (Lambert et al. 2015; Deci & Ryan 2008; Ryan et al. 2006; Ryan & Deci 2001). *Hedonism* emphasizes the pursuit of happiness and pleasure, whereas *eudaimonism* emphasizes the actualization of human potential and the pursuit of a meaningful life (Waterman 2008; Peterson et al. 2005; Ryan & Deci 2001). These two perspectives have been discussed by ancient philosophers for over 2,000 years as well as more recently by early psychologists such as Maslow. Much of the current *research on well-being* also addresses these perspectives, making the hedonic–eudaimonic distinction important in the context of positive psychology (Huta 2015). The two traditions have not only influenced the past and present understanding of well-being, but they have also given rise to different research foci and a body of knowledge that are divergent in some areas and complementary in others (Huta 2015; Deci & Ryan 2008; Ryan & Deci 2001).

Seligman (2002), the founder of positive psychology, drew from the hedonic and eudaimonic traditions and introduced the authentic happiness framework of well-being, arguing that there are three elements conducive to happiness: pleasure, engagement, and meaning. The pleasant life focuses on maximizing positive emotion, which can only be assessed subjectively. The engaged life regards the finding of a flow with an emphasis on strength and virtues. The meaningful life, in contrast, embraces the belonging to and serving of something that is greater than the self (Lambert et al. 2015; Seligman 2002). When introducing the *authentic happiness theory* as the foundation of positive psychology, Seligman (2002) considered happiness the topic of positive psychology, the measure of happiness as life satisfaction, and the goal of positive psychology to increase life satisfaction.

In 2011, he introduced a new understanding of happiness and well-being: *well-being theory*. As a substitute of happiness, the topic of positive psychology is well-being, the measure of well-being is flourishing, and the goal of positive psychology is to increase flourishing (Seligman 2012). Rather than three, the well-being theory consists of five elements: pleasure, engagement, meaning, positive relationships, and accomplishment (PERMA; *ibid.* 2012). The inclusion of positive relationships in the PERMA framework supported the idea that “other people” matter. Today, it is widely acknowledged that well-being can be attained through the promotion of well-being or happiness in others (Helliwell et al. 2018; Mick & Schwartz 2012, Mick et al. 2012; Peterson et al. 2005). Furthermore, accomplishment—a fifth element—was included as individuals pursued success, accomplishments, achievements, and mastery for accomplishment’s sake. Thus, the individual achieves his/her “achieving life” by applying his/her skills and efforts toward a specific and fixed goal. Notably, all these elements that contribute to well-being are pursued for their own sake, and they are defined and measured independently of the other elements (Seligman 2012).

Drawing on Lambert, Passmore, and Holder’s (2015) work on well-being orientations, the purpose of the next paragraphs is to paint an overall picture of the major orientations involved in positive psychology. The aim is to provide a rather simplistic framework of major philosophical traditions, theories, and concepts within positive psychology (Figure 8). While the current thesis acknowledges the influence of four distinct philosophical traditions to the evolution of positive psychology, utilitarianism and virtue philosophies are not discussed herein. It is also beyond the scope of the thesis to dive deeply into any of the specific theories or concepts that originated from the philosophical traditions, such as subjective well-being, humanistic theories, psychological well-being, self-determination theory, or social well-being. Instead, *the current thesis focuses on distinguishing between hedonic and eudaimonic approaches to wellness and identifying their main characteristics as traditions and orientations of well-being.*

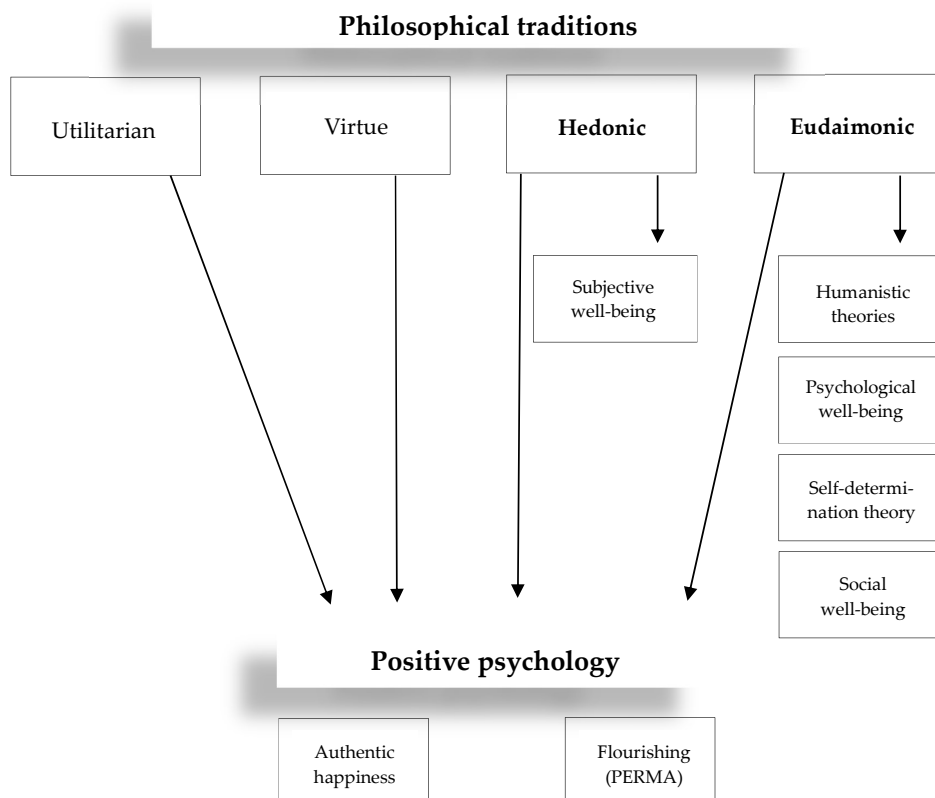


Figure 8. The cornerstones of positive psychology

Hedonic tradition – Happiness and pleasure

Hedonism as an ethical philosophy posits that the pursuit of pleasure is the greatest good. The doctrine of hedonism was first articulated by Aristippus, a Greek philosopher from the 4th century BCE, who argued that the goal of life is to experience a maximum amount of pleasure and that happiness is the totality of one's hedonic moments (Peterson et al. 2005; Ryan & Deci 2001). For Aristippus, the goal of life was pleasure—in particular, one's own pleasure—regardless of its source (Huta & Ryan 2010). He postulated that virtue was the least important of all possible contributors to a good life (Waterman 2008). Aristippus's early philosophical hedonism has been followed by many, and hedonism, as a view of well-being, has evolved from one's own physical pleasures into a broader focus on self-interests concerning both the individual and society as a whole (Huta & Ryan 2010; Waterman, 2008 Ryan & Deci 2001).

Psychologists who have adopted the hedonic tradition have commonly focused on a broad conception of hedonism including preferences and pleasures of both the body and mind (Ryan & Deci 2001). Kahneman et al. (1999) introduced a new

field of psychology in their volume *Well-being: The Foundations of Hedonic Psychology* by arguing that “*hedonic psychology...is the study of what makes experiences and life pleasant and unpleasant*” (p. ix). Here, they suggest that, within this paradigm, well-being and hedonism are essentially equivalent (Ryan & Deci 2001). The hedonic tradition defines well-being as happiness that is interpreted as the occurrence of positive affect and the absence of negative affect (Ryan et al. 2008; Ryan & Deci 2001). Consequently, hedonic psychology poses itself with a clear aim to maximize human happiness (Ryan & Deci 2001).

Modern psychological perspectives generally view hedonia as subjective happiness and the experience of pleasure (Waterman 2008). Accordingly, hedonia is most often defined in terms of pleasure, enjoyment, life satisfaction, happiness, and comfort, thus emphasizing positive emotions (e.g. Huta & Ryan 2010; Ryff & Singer 2008; Peterson et al. 2005; Seligman 2004; Ryan & Deci 2001). The concept of subjective well-being (SWB; Diener 1984) is also frequently used interchangeably with happiness (see Lambert et al. 2015; Baumeister et al. 2013; Deci & Ryan 2008). From this perspective, well-being is considered subjective, as the idea is that individuals should evaluate for themselves the degree to which they experience a sense of happiness—i.e., high levels of positive affect, low levels of negative affect, and a high degree of life satisfaction (Lambert et al. 2015; Deci & Ryan 2008; Ryan & Deci 2001). Although life satisfaction is not solely a hedonic concept, subjective well-being has been associated more often with the hedonic approach to well-being (Lambert et al. 2015; Deci & Ryan 2008).

Hedonic conceptions of well-being tend to focus on a specific outcome or end result, such as a certain mental state (happiness), positive feeling, or cognitive appraisal of satisfaction, thus referring to hedonia additionally as *a way of feeling* (Huta & Ryan 2010; Huta & Waterman 2010; Ryan et al. 2008). Huta (2015) has outlined several characteristics related to hedonia. It is a self-nourishing and self-care function that focuses on one’s *own needs and desires*, most *often in the present or near future*. It is the pursuit of what feels good, and it aims toward activities that are pleasant for the individual in question. And, finally, it is more fundamental in the sense that it often takes care of *immediate needs and desires*. Huta (2015) has also added that, although hedonia is paralleled with happiness, happiness cannot be directly commanded or inflicted. Thus, hedonia is about engaging in joyful and relaxing activities and attitudes that may yield happiness.

Eudaimonic tradition – Living well

Eudaimonism, as an ethical philosophy, aims to pursue a life of meaning, virtue, and excellence (Huta & Waterman 2014; Waterman 2008). The eudaimonic tradition derives concepts from Aristotle’s (4th century BCE/1985) philosophy of happiness and the notion of eudaimonia that are particularly articulated within his *Nichomachean Ethics* (Huta & Waterman 2014; Ryan et al. 2008; Waterman

2008). Similar to hedonia, the traditional definition of eudaimonia is “happiness,” although eudaimonia is typically contrasted with hedonia in philosophical discussions (Waterman 2008). Aristotle distinguished between happiness as the experience of pleasure (hedonia) versus happiness as good living (eudaimonia) (Ryan et al. 2008). He considered hedonic happiness to be a vulgar ideal that turned humans into slavish followers of desires (Peterson et al. 2005; Ryan & Deci 2001). He posited, instead, that true happiness (i.e., living well), entails one to identify his/her virtues, cultivate them, and live in accordance with them (Peterson et al. 2005).

This idea is also embedded in the term “eudaimonia,” which consists of two parts: “*eu*,” meaning “good or healthy,” and “*daimon*,” meaning “true self” (Huta & Waterman 2014). In this view, a good life or a life well lived requires the actualization of human potential and fulfillment of one’s true self—in other words, being true to one’s daimon (Deci & Ryan 2008; Peterson et al. 2005; Ryan & Deci 2001).

Erich Fromm (1981) has drawn from Aristotelian view and has concluded that optimal well-being requires the distinguishing between

those needs (desires) that are only subjectively felt and whose satisfaction leads to momentary pleasure, and those needs that are rooted in human nature and whose realization is conducive to human growth and produces eudaimonia, i.e. “well-being” (cited in Ryan & Deci 2001, p. 145).

Eudaimonia considers well-being as being distinct from happiness per se. Eudaimonic tradition believes that not all outcomes an individual values, even though they may be pleasure-producing, would yield well-being or promote wellness when achieved. Instead, well-being is defined in terms of the degree to which an individual is fully functioning (Ryan & Deci 2001). Consequently, the *pursuit of pleasure* (hedonism) and the *pursuit of meaning* (eudaimonism) are considered different roots to happiness (e.g., Huta & Ryan 2010).

Philosophers and psychologists who have followed the Aristotelian tradition also consider eudaimonia as objective rather than subjective, and therefore, they have translated eudaimonia as *flourishing* rather than *happiness*. Indeed, Aristotelian eudaimonia is not conceived of a state of feeling. It is *a way of living* that is focused on being intrinsically worthwhile through the pursuit of excellence and virtue (Ryan et al. 2008). Ryan et al. (2008) have concluded that

Aristotle’s eudaimonia is characterized as living well, and entails being actively engaged in excellent activity, reflectively making decisions, and behaving voluntarily toward ends that represent the realization of our highest human natures (p. 145).

Similarly, contemporary definitions consider eudaimonia as a way of living wherein an individual strives to be better by developing oneself through talents and the use of virtues. The uniting of eudaimonic emphases constitutes the premise that individuals should firstly develop what is best within themselves and secondly use their skills and talents to serve the greater good—e.g., the welfare of others (Peterson et al. 2005).

As Aristotelian view has been followed by many, there exists a multiplicity of definitions for eudaimonia. In a systematic review of psychological definitions of eudaimonia, Huta and Waterman (2014) have identified four categories the definitions fall into: (1) orientations, including, values, motives, and goals—i.e., the “why” of behavior; (2) behaviors, including behavioral content and activity characteristics—i.e., the “what” of behavior; (3) experiences, including subjective experiences, emotions, and cognitive appraisals; and (4) functions, including indices of an individual’s overall positive psychological functioning, mental health, and flourishing—i.e., how well an individual is doing. Eudaimonia has most often been referred to by terms such as growth, self-realization, self-actualization, development of one’s potential, function, meaning, purpose, authenticity, identity, personal expressiveness, excellence, virtue, engagement, interest, and flow (e.g., Huta & Ryan 2010; Ryff & Singer 2008; Peterson et al. 2005; Ryan & Deci 2001; Waterman 1993).

Huta and Waterman (2014) have also identified four core elements of eudaimonia that appear in most definitions: authenticity, meaning, excellence, and growth. *Authenticity* involves clarifying one’s true self and deep values, staying connected with them, and acting in accordance with them. Authenticity can be personally fulfilling and meaningful, although at the same time, it can be pursued as an end in itself. *Meaning* involves understanding a broader context, relating to it, and contributing to it. This broader context includes larger aspects of one’s life or identity, a purpose, and/or a long-term perspective. It also contains self-transcendence (cf. peak experience, flow) as a relevant aspect of eudaimonia.

Excellence encompasses the striving for higher quality and higher standards in one’s behavior, performance, accomplishments, and ethics—in other words, finding one’s full potential (the optimal self). *Growth* refers to actualizing what one feels is right for oneself, fulfilling one’s potential, and pursuing personal goals (personal growth, learning, improving, and seeking challenges, as well as maturing as a human being). Similar to excellence, growth requires commitment and effort as well as a growth mindset (Huta & Waterman 2014; see also Huta 2015).

While hedonia requires engagement in joyful and relaxing activities, eudaimonia often necessitates engagement in effortful and challenging activities. Although they may entail the production of negative affect in the short term, effortful pursuits often lead to greater overall well-being in the long term (Lambert et al. 2015). It has, however, been stated that, although eudaimonic activities contribute

to greater life satisfaction, greater meaning in life, increased positive affect, and greater potential to reach one's best self, they may be rather exhausting (Lambert, et al. 2015; Huta & Ryan 2010). According to Huta and Ryan (2010), the extreme following of eudaimonic principles often calls for hedonic activities for both rejuvenation and balance.

Combining hedonia and eudaimonia

The interest in the distinction between hedonia and eudaimonia is growing rapidly within psychology (e.g., Huta 2015). The interest is particularly strong among researchers studying well-being, happiness, and quality of life, as they have recognized that these traditions address fundamental issues regarding what makes a good life and what promotes human flourishing (Joseph 2015; Huta & Waterman 2014). Because these traditions overlap to some extent, Huta and Waterman (2014) have identified several challenges regarding the hedonia–eudaimonia distinction (see also Huta & Ryan 2010; Waterman 2008). One of the greatest challenges is the multiplicity of conceptual and operational definitions, particularly with respect to eudaimonia. The concepts have also been treated asymmetrically from time to time, as hedonia has been defined as a way of feeling (cf. experience), and eudaimonia as a way of behaving (cf. functioning). A further challenge is caused by the looseness with which the concepts are oftentimes discussed; eudaimonia has become a synonym for everything considered to be non-hedonic and even for the field of positive psychology.

Simultaneously with the evolution of wellness, the research focus has shifted from hedonistic well-being to eudaimonic well-being (cf. Seligman 2012; 2002). This shift has widened the scope of positive psychology to more persistently address questions related to meaning and purpose instead of focusing exclusively on happiness in the traditional sense of pleasure (Seligman 2012; Seligman & Pawelski 2003). Positive psychology has at times been criticized for becoming “happiology”; the shift of the research focus has, however, also provided a more profound basis for the whole field (see Joseph 2015).

Within philosophy, hedonism and eudaimonism are competing ethical theories that address questions of a good life, whereas within psychology, hedonic and eudaimonic concepts are compatible (Huta & Waterman 2014). According to several researchers, the pursuit of both hedonia (seeking happiness, pleasure, and comfort) and eudaimonia (seeking authenticity, meaning, excellence, and personal growth) ought to produce greater well-being than will the pursuit of merely one alone, as they both contribute to well-being in their own unique ways (e.g., Huta 2015; Huta & Waterman 2014; Huta & Ryan 2010; Peterson et al. 2005).

2.1.3 The trajectory from hedonic consumer research to transformative consumer research

The current consumer society is an outcome of a market economy and the dominance of neoliberalism during the 20th century, which emphasized the importance of free market, individual freedom of choice, utilitarianism, and the ever-increasing role of consumption in everyday life (Shankar et al. 2006). According to a neo-classical view, individuals maximize their utility through consumption derived solely from purchased goods and services (ibid. 2006). More consumption was assumed to translate into greater economic welfare and individual satisfaction (Mick & Schwartz 2012). Indeed, materialism, both as a personality trait and consumer value, was thought to generate well-being and happiness and lead to a better quality of life.

Today, a plethora of studies present a different view by concluding that the more materialistic individuals are, the less happy they generally feel (Helliwell et al. 2018; Bahl et al. 2016; Burroughs & Rindfleisch 2012). It is argued that materialistic well-being does not lead to subjective well-being (i.e., happiness) when the basic needs and a certain level of wealth have already been achieved (Helliwell et al. 2018; Shankar et al. 2006). This does not, however, mean that the role of consumption in individuals' lives has diminished, but rather that it has changed. Instead of longing for material goods and satisfying the material needs, individuals are seeking emotional and meaningful experiences as well as deeper meanings of life (Boswijk et al. 2013; Shankar et al. 2006; Addis & Holbrook 2001).

The paradigm shift in marketing and consumer research occurred more than three decades ago, when Holbrook and Hirschman (1982) presented their ideas of hedonic consumption (see also Hirschman & Holbrook 1982). Hedonic consumption stresses the emotional and hedonic preferences and appetites highlighting the importance of experiences for the formation of a good life and viewing consumption as a legitimate way to generate these experiences (Jantzen et al. 2012). According to Holbrook and Hirschman (1982), existing psychological paradigms were incapable of adequately explaining consumer behavior and experiences. By arguing that, at the time prevailing, the cognitive approach had neglected the important aspects of consumption (fantasies, feelings, and fun), they emphasized the hedonic aspects of consumption and reinstated consumer experiences on the theoretical agenda of marketing and consumer behavior (Jantzen et al. 2012; Carù & Cova 2003; Addis & Holbrook 2001). Since then, various new philosophies, theories, and methods have been introduced within consumer research.

The notion of experience has become a decisive element in understanding consumer behavior (Addis & Holbrook 2001) and has laid the foundation for a more general discussion on experience society (Schultze 1992), experience economy (Pine & Gilmore 1999), experiential marketing (LaSalle & Britton 2003; Schmitt

1999), and brand experience (Brakus et al. 2009). Experiences are not, however, a new research topic, as they have been discussed and researched thoroughly since the 1960s in different disciplines. This also brings challenges, as experiences are used diversely in different contexts and across various disciplines (Carú & Cova 2003).

Carú and Cova (2003) have exemplified the relatively distinct meanings of an experience in different areas. In *philosophy*, experience is understood as a personal trial, which generally *transforms* an individual. The accumulation of individual experience also accumulates knowledge—i.e., experience is gained when events that occur are translated into knowledge. In *social sciences* or, more precisely, in sociology and psychology, experience refers to a subjective and cognitive activity that allows an individual to *develop*. Experiences are considered part of *identity construction*, requiring personal involvement in order to take place. The experiences that are important for individual growth and development include “peak experiences” (Maslow 1964), “flow experiences” (Csikszentmihalyi 1975), and “epiphanic experiences” (Denzin 1992). In *anthropology*, experience is considered a way through which individuals *live* and *experience* their own culture; in other words, experience is something that *happens* to an individual. (Carú & Cova 2003; see also Konu 2016). All these perspectives emphasize the *eudaimonic nature of an experience*.

Carú and Cova (2003) have further noted that, in *management science*, there are two diverse ways to understand the notion of experience. *Consumer behavior* takes a more social science-based approach by considering experience a personal occurrence and thereby subjectively emphasizing emotions and senses. This occurrence may lead to the *transformation* of an individual in the event that the experience is defined as extraordinary. Also, in consumer behavior, experiences are seen as central elements in the *construction of the self* and *self-image*. In *marketing and management*, in contrast, experience possesses a more objective meaning and is mainly viewed as a type of offering to be added to existing products and/or services. Thus, in regard to marketing and management, experience has generally been considered memorable (Pine & Gilmore 1999), staged, and/or designed by the service provider, being more *hedonic in nature* (Carú & Cova 2003; see also Konu 2016; Rääkkönen 2014).

The importance of experiences has also been acknowledged in the marketing and management literature. The changing nature of customer involvement in value creation has led to a more recent paradigm shift in marketing: from service-dominant logic (SDL; e.g., Vargo & Lusch 2004) and service logic (SL; e.g., Grönroos 2006) to customer-dominant logic (CDL; e.g., Heinonen et al. 2010). Although this trajectory demonstrates the increase in customer centricity with regard to value creation within services, it nevertheless presents a perspective on business and marketing (Heinonen & Strandvik 2015).

The debates on experience, value, and value creation have evoked more profound questions regarding the nature of a *good life* and a *meaningful life*. What actually constitutes a good life is an important issue also present in consumer research. One of the key questions is: are material consumption and the quality of life interrelated, or is there a discrepancy between them? In addition, the current global and regional challenges concerning social, economic, political, and environmental issues have raised new concerns about individual and collective well-being (Bhore 2016; Mick et al. 2012; Mick & Schwartz 2012; Ozanne et al. 2011). In the 1970s, the promotion of consumer well-being had already been one of the founding principles of the Association for Consumer Research (ACR); now, four decades later, a scarce amount of research has actually been focused on evaluating the benefits gained by the consumers themselves (Burroughs & Rindfleisch 2012; Mick 2006). Over the past decade, there have been calls for a rebirth of research in consumer well-being and ethics of consumption. David Mick (2006) has stated in his presidential address:

... consumer behavior and the ideology of consumption have diffused across the world to every corner, to virtually every individual, to such an astonishing scale that living and consuming are more complexly interdependent than at any other time in human history. Both the serious problems and the genuine opportunities of consumption, for billions of people and other living entities, have never needed ACR and our collective talents more than now. (p. 1)

TCR is a movement within the Association for Consumer Research that emerged from the need to focus on issues meaningful and important to consumers. The research field examines various individual and societal problems and opportunities related to consumer behavior and consumption with the goal of improving consumer well-being (e.g., Mick 2006). TCR strives to “*encourage, support, and publicize research that benefits the quality of life for all beings engaged in or affected by consumption trends and practices across the world*” (Mick et al. 2012, p. 6).

TCR can be considered as benefitting and supporting not only consumers in particular, but also societies and the environment in general (ibid. 2012). This is currently highly accurate after the releases of the United Nations’ “Paris Agreement on Climate Change” (PACC) in November 2016 and the Intergovernmental Panel on Climate Change (IPCC) in October 2018. Climate change and global warming are affecting the well-being of individuals, communities, and the entire biodiversity at alarmingly growing rates. Consumer behavior has a decisive role in the decreasing of global warming (McDonagh et al. 2012; Assadourian 2010).

Many contemporary socioecological problems do involve consumption. Overconsumption has been reported to fuel a range of problems, such as rising obesity rates and other lifestyle-associated diseases, materialism and status aspirations, credit card misuse and debt, wide-scale substance abuse, environmental degradation, and decline in overall happiness (e.g., Mick & Schwartz 2012; Mick 2008). Underconsumption, on the other hand, is associated with major social problems, such as malnourishment, poverty and homelessness, illiteracy, and discrimination (e.g., Mick & Schwartz 2012; Ozanne et al. 2011; Mick 2008). However, there are opportunities for consumption that improve well-being and enhance the quality of life for a wide range of people. These opportunities include practices and activities related to sustainable consumption behaviors (e.g., sharing, recycling), donations and communal consumption, as well as preventive and healthy behaviors. Furthermore, other consumer activities that enrich positive individual and social development, such as physical activity, art, music, and hobbies, can be adopted (e.g., Mick 2008).

TCR has six core goals: (1) to improve well-being, (2) to emanate from the ACR and encourage paradigm diversity, (3) to employ rigorous theory and methods, (4) to highlight sociocultural and situational contexts, (5) to partner with consumers, and (6) to disseminate findings to relevant stakeholders. The current thesis is positioned, particularly, to the first goal of *improving well-being*.

According to Mick et al. (2012), consumer well-being refers to a state of individual flourishing that involves health, happiness, and prosperity (cf. positive psychology). It involves seven dimensions: emotional, social, economic, physical, spiritual, environmental, and political (cf. wellness). TCR and positive psychology have the same goal: to help one reach one's full potential and achieve a good life. At the early stage of its development, TCR was even proposed to be called "positive consumer research" (Mick 2006; cf. Seligman & Csikszentmihalyi 2000). Both movements provide tools for individuals to utilize their positive energy toward a favorable transformation. During the evolution of TCR and positive psychology, they have become generally accepted movements that focus on well-being, happiness, and the search for a good life. But, as Mick (2006) has presented, transformation through the concept of TCR refers more to issues

that are framed by a fundamental problem or opportunity, and that strive to respect, uphold, and improve life in relation to the myriad conditions, demands, potentialities, and effects of consumption (p. 2).

The promotion of both individual and collective well-being does not come without challenges. Accordingly, TCR seeks to improve well-being while maximizing social justice and fair allocation of opportunities and resources. In its current form, it approaches the eudaimonic tradition of *living well*, wherein individuals strive to

be better by developing themselves through talents and virtues and then using these virtues to serve the welfare of others (see Peterson et al. 2005).

Mick and Schwartz (2012) have proposed the question “*Can consumers be wise?*” drawing from Aristotle’s conception of practical wisdom. Wisdom is viewed as a superior, complex, and desirable form of knowledge. Aristotle (4th century BCE/1985) was among the first philosophers to distinguish different kinds of wisdom by separating the philosophical from the practical. Practical wisdom is essential for organizing the other virtues to pursue eudaimonia or, more precisely, to pursue flourishing and the common good. *Balancing* is a key metaphor in this discussion. It reflects Aristotle’s emphasis on the mean—in other words, wise solutions and behaviors that are not extreme and thereby also master large entities. Notably, not all interests and consequences are equally important. Finding the right balance is dependent upon one’s values as well as the relative importance of his/her various interests and the resulting consequences (Mick & Schwartz 2012).

2.2 A new era of wellness

2.2.1 *Wellness as identity and lifestyle construction – From consumer culture to self-care culture*

Consumer culture refers to a phenomenon in which consumption plays an increasingly important role in everyday life, particularly in relation to production (Sassatelli 2007; Ritzer & Slater 2001). The notion of consumer culture or consumer society originated from the U.S. in the 1960s and related to a larger shift in values and lifestyles on both societal and individual levels (e.g., Baudrillard 1998; Schultze 1992). Consumer culture emphasizes, first and foremost, individualism and freedom of choice, which are manifested through consumption (Bauman 2005; Ritzer & Slater 2001; Giddens 1991). Consumption choices are no longer solely dictated by social structures such as social class, but are also increasingly more so by lifestyles, which are considered material expressions of identities (Sarpila 2013; Wilska 2002; cf. Bourdieu 1984).

The dominant role of consumption in everyday life makes individuals’ identities and lifestyles also strongly intertwined with consumption (Lury 2011; Featherstone 2007; Bauman 2005). In this view, identities are neither unitary, fixed, stable, nor predetermined, but rather identities are dynamic and need to be assembled and reassembled as well as produced and reproduced (Shankar et al. 2009). By means of consumption, individuals express belonging to a certain group (i.e., their social identity) while simultaneously distinguishing themselves from others. In other words, consumption *empowers* individuals to “make up” their identity or whom

they wish to be through a variety of choices facilitated by the marketplace (Sassatelli 2012; Shankar et al. 2009; Campbell 2004).

Recently, it has been noted that consumer societies are more frequently representing *prosumer societies*, referring to societies within which production and consumption are intertwined and equally important (e.g., Ritzer & Jurgenson 2010). Similarly, the concept of *prosumption* (e.g., Ritzer et al. 2012) has been applied more specifically to reflect the mixture of participation in both production and consumption, particularly in reference to social media (e.g., Lupton 2013). Digitalization and the emergence of new technologies have further strengthened the notion of prosumption in current societies (Lupton 2017; Ruckenstein 2014).

Consumption has traditionally been associated with leisure—the complete opposite of work and responsibility—and with various sites of consumption (i.e., *experiencescapes*), offering pleasure, enjoyment, and/or entertainment (Lury 2011; Mossberg 2007; Sassatelli 2007; Bryman 2004). The commercialization and commodification of various goods and services have resulted in consumption and experience production becoming hybrid and more market based (Sarpila 2013; Lury 2011). The nature of consumption has also shifted from satisfying mere material needs to increasingly involving emotional experiences, including both bodily and mental pleasure, fun, joy, sensations, and symbolic meanings mediated through brands and popular media (Sarpila 2013; Lury 2011; Featherstone 2007). Moreover, consumption is one of the main sources of identity creation—the creation of the *self* (Shankar et al. 2009). Therefore, both material and symbolic consumption are considered to form an important part of the self, not only reflecting the individual's needs, but also his/her social status and personal goals in life.

According to several scholars, the body and the self are inextricably intertwined (e.g., Sassatelli 2012; Bauman 2007; Featherstone 2007; Giddens 1991). Akin to the body, the self is considered a project and a process that must be worked on through evaluation, modification, and management throughout life (Giddens 1991; cf. Shilling 2012). In addition, being a lifelong project, the self has an essential role in *performing the self* (cf. Goffman 1971). The image-driven service economy together with the rise of promotional culture (Wernick 1991), enterprise culture (Du Gay 1996), and, most recently, celebrity culture (Elliot 2011) and self-tracking culture (Lupton 2016) have accentuated the importance of performing the self, which is best accomplished through attention paid to one's health and physical appearance—in other words, self-care (e.g., Sassatelli 2012; Foucault 1988; 1986).

In current consumer culture, which can also be referred to as *self-care culture*, “health” is understood as a self-responsibility and an outcome of lifestyle choices that contrast with individual will and failure, while “physical appearance” is considered a marker of professional success and social status (Lupton 2016; Sassatelli 2016; Smith Maguire 2008; Crawford 2006). Improving one's health (vital appearance) and beauty (attractive appearance) has, indeed, become an obligation, which

is linked to an ideology of self-responsibility as well as a logic of status display (Smith Maguire 2008; cf. Lupton 2016; Crawford 2006). In current self-care culture, status is no longer only displayed through the possession and consumption of goods and services, but rather through the cultivation and performance of a variety of capabilities and mentalities that are considered to help create and convey the optimal self to others (e.g., Lupton 2016; Smith Maguire 2008).

Foucault's (1986) notion of the "care of the self" has been particularly influential in relation to transformational practices, such as meditation, yoga, and mindfulness. The care of the self refers to a set of practices and a way of life originating from the ancient times that focus on the body, mind, and spirit/soul (Lupton 2016). These practices are perceived as part of a self-reflexive project aimed toward managing and balancing the self (Foucault 1986; cf. Bauman 2000; Giddens 1991). Practices of the self are culturally and historically contingent in such a way that different eras stress different trends regarding how one should conduct oneself (Lupton 2016). Individuals are directed to "transform oneself," "develop oneself," and "return to oneself," and thus they also internalize norms about the appropriate and favorable behavior in society (Lupton 2016; Little 2012).

In contemporary Western societies, there exists the expectation that an individual is responsible for managing his/her self in terms of his/her own health and well-being (e.g., Lupton 2016; 2014b). In particular, high-income societies promote self-responsibility as part of a governmental strategy. Members of society are to act out of their own self-interest, which is nevertheless aligned with the interests of society at large and thus reflects a common good (Lupton 2014b; cf. Mick & Schwartz 2012).

This is also in accordance with the definition of a "new paradigm of health"—a holistic concept of *wellness*—in which an individual is encouraged to be aware of and engage in self-monitoring as well as the adoption of healthy behaviors in order to prevent illness and disease (Lupton 2016). It has been suggested that the care of the self is an ethical project that requires self-awareness, self-improvement, and self-knowledge should one wish to become the "good citizen" who is responsible, capable, and self-regulated in his/her pursuit of health, well-being, happiness, and productivity (Lupton 2016; Elliot 2013; Smith Maguire 2008).

The pursuit of wellness can be considered one of the most salient practices in current societies. This is mainly due to the ubiquity of social media, powerful health promotion, and the individual and societal interest invested in the reinvention of the self and the body (Lupton 2016; Elliot 2013; Featherstone 2010). It has been presented that the current self-care culture promotes a transformation of the self such that the individual may achieve a wide range of positive goals in life, including greater health and/or appearance, career success and/or social status, happiness, a better quality of life, personal growth and productivity, as well as a deeper meaning in life (ibid. 2016; ibid. 2013; ibid. 2010). The self is perceived as

a form of capital to be both invested in and managed to produce the “optimal self” (cf. Sassatelli 2016; Bourdieu 1984). While once considered narcissist and vain, today, self-care is more of a duty.

2.2.2 *Wellness – A major consumption phenomenon*

From healthcare to wellness industry

Wellness as a consumption phenomenon started to gain more attention in the early 2000s. Economist Paul Pilzer (2007; 2002) was one of the first researchers to acknowledge the commercial significance of the wellness industry by referring to it as the “*wellness revolution*.” Pilzer defined wellness as an industry with various products, services, and businesses that focused on disease prevention and anti-aging—in other words, *vitality and aging*: the two entities among the major concerns of current Western societies (see also GWI 2018a; 2017). Pilzer (2007) also distinguished the wellness industry from the conventional healthcare sector, which he labeled “*the sickness industry*,” by presenting that the wellness industry is comprised of products and services that promote wellness rather than respond to illness, such as nutritional supplements, superfoods and juices, pesticide- and hormone-free foods, personal trainers, anti-aging therapies, and alternative medicine.

According to Pilzer (2007), healthcare is a misnomer because it actually focuses on illness. Healthcare is reactive: individuals become customers only when they experience health problems. Furthermore, he presented that the sickness industry’s products and services seek to treat diseases and cure illnesses—they are prescribed. In contrast, the products and services of the wellness industry are based on proactivity as well as preventive and voluntary behavior; individuals become customers in order to feel healthier, look younger and better, slow down the aging process, eat right, and exercise—all to avoid becoming customers of the sickness industry. Therefore, wellness is a matter of personal choice.

Notably, the emergence of the wellness industry occurred at the time of the emergence of experience economy (Pine & Gilmore 1999) and through the increasing interest in hedonic and experiential consumption. This was also reflected in the wellness industry; wellness, as a phenomenon, became mainstream through the growth of fitness and spa industries, representing new kinds of experiences—escapes with an emphasis on enjoyment, pleasure, and indulgence (cf. Lury 2011; Mossberg 2007; Sassatelli 2007). While the sickness industry mainly provided cures for symptoms and diseases, the new wellness industry offered various ways of taking care of oneself, enabling emotional, current, and increasingly transformational experiences that may feature the body, mind, and/or spirit/soul (cf. Lupton 2016; Elliot 2013; Featherstone 2010).

The principles of the wellness industry are illustrated in the framework describing health-related consumption (Figure 9; Grénman et al. 2019 [forthcoming]; cf. Grénman & Rääkkönen 2015; SRI International 2010). The framework is based on Travis’s (1972) two-dimensional illness–wellness continuum, which distinguishes between illness and wellness and highlights the responsibility of an individual to achieve optimal health through self-awareness, self-knowledge, and personal growth.

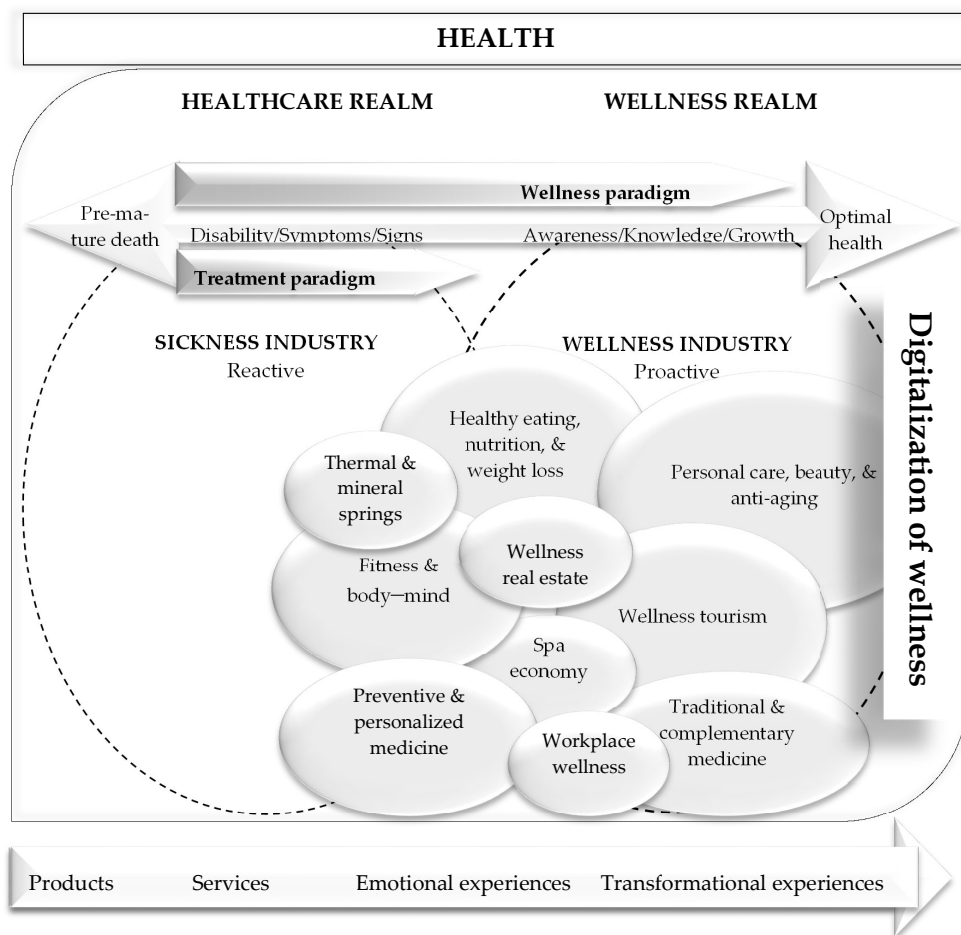


Figure 9. Wellness industry in relation to health-related consumption (Grénman et al. 2019 [forthcoming])

Since 2014, Global Wellness Institute (GWI) has published the “*Global Wellness Economy Monitor*” to measure the size of the global wellness economy. The wellness industry encompasses various sectors that enable consumers to incorporate wellness activities and lifestyles into their daily lives. According to GWI (2018a), the global wellness economy consists of ten sectors: (1) personal care,

beauty, and anti-aging, (2) healthy eating, nutrition and weight loss, (3) wellness tourism, (4) fitness and body–mind, (5) preventive and personalized medicine, (6) traditional and complementary medicine, (7) wellness real estate, (8) spa economy, (9) thermal and mineral springs, and (10) workplace wellness. While, in 2007, the wellness industry was estimated to be worth \$500 billion, today it has been estimated to form a \$4.2 trillion market, representing 5.3% of the global economic output (GWI 2018a; Pilzer 2007). From 2015–2017, the global wellness industry was reported as having grown by 6.4% compared to a 3.6% growth rate of the global economy (GWI 2018a). The wellness sectors and their definitions are presented in more detail in Table 5 (ibid. 2018a).

Table 5. Wellness sectors and their definitions

<i>Wellness sector</i>	<i>Definition</i>
<i>Personal care, beauty, & anti-aging</i>	Includes beauty and salon services (excluding spas), skin, hair, and nail care services and products; cosmetics, toiletries, and other personal care products; dermatology; pharmaceutical prescriptions for skin care; products and services that specifically address age-related health and appearance issues.
<i>Healthy eating, nutrition, & weight loss</i>	Includes vitamins and supplements, fortified/functional foods and nutraceuticals, natural and organic foods, health foods, sports nutrition, nutrition and dietary services, and weight loss/management products and services.
<i>Wellness tourism</i>	Wellness tourism refers to travel associated with the pursuit of maintaining or enhancing one’s personal well-being; includes all expenditures made by wellness tourists.
<i>Fitness & body–mind</i>	Includes gyms and health clubs, personal training, yoga, Pilates, Tai Chi, martial arts, and other body–mind practices; fitness and exercise clothing, fitness and exercise equipment, and digital wellness technology (e.g., wearable devices).
<i>Preventive & personalized medicine</i>	Includes medical services that focus on serving healthy people, preventing disease, or detecting risk factors (e.g., routine physical exams, screening tests, and even genetic testing). Personalized medicine applied to promote wellness using sophisticated information and data for individual, healthy clients. Includes medical services that focus on preventing diseases or detecting risk factors; health IT, such as electronic health records, telemedicine, and remote individual monitoring to provide tailored approaches for preventing disease and managing risk factors or conditions.
<i>Traditional & complementary medicine</i>	Encompasses diverse medical, healthcare, holistic, and mental- or spiritual-based systems, services, and products that are not generally considered part of conventional medical or healthcare systems (e.g., homeopathic, naturopathic, chiropractic, Traditional Chinese Medicine, Ayurveda, energy healing, traditional/herbal remedies, and supplements). The nomenclature for this sector is evolving alongside grow-

	ing consumer adoption of traditional/indigenous, complementary, alternative, and integrative medical practices outside the conventional/Western medical system.
<i>Wellness real estate</i>	The construction of residential and commercial/institutional (office, hospitality, mixed-use/multi-family, medical, leisure, etc.) properties that incorporate intentional wellness elements in their design, materials, and building, as well as their amenities, services, and/or programming.
<i>Spa Economy</i>	Refers to spas and the related cluster of sectors that support and enable spa businesses. The spa economy includes spa facilities, education of spa personnel (incl. therapists and managers/directors, both initial training and continuous education), spa consulting, spa capital investments, spa associations, and spa-related media and events.
<i>Thermal and mineral springs</i>	Encompasses the revenue-earning business establishments associated with the wellness, recreational, and therapeutic uses of water with special properties, including thermal water, mineral water, and seawater.
<i>Workplace wellness</i>	Includes expenditures on programs, services, activities, and equipment by employers aimed toward improving their employees' health and wellness. These expenditures aim to raise awareness, provide education, and offer incentives that address specific health risk factors and behaviors (e.g., lack of exercise, inadequate amount of sleep, poor eating habits, stress, obesity, smoking) as well as support and encourage employees to adopt healthier lifestyles.

Within a relatively short period of time, wellness as both a concept and practice has become more broadly understood and adopted around the world. Wellness is no longer about separate episodic activities, such as going to a gym, receiving a massage, or traveling to a spa destination. Instead, it has become an integrated part of everyday life through attitudes, activities, and choices one makes at home, at work, and/or when traveling; it has become a lifestyle (GWI 2018a). Three sectors have now been identified to be the most critically wellness-associated core spheres of individuals' daily lives: wellness real estate as the basis for lifestyle, workplace wellness, and wellness tourism (ibid. 2018a). It can be argued that there has been a shift toward a holistic wellness mindset. This is reflected in individuals' various daily routines and decision-making habits, food purchases and the way their food is cooked, the desire to mitigate stress and increase mental wellness, the urge to be physically active, growing environmental consciousness and aims toward closer contact with nature, the desire for self-actualization, and the search for happiness (GWI 2018a, Mick & Schwartz 2012).

Digitalization of wellness – Bridging wellness and healthcare

Today, the concepts of “self-tracking” and the “quantified self” have emerged in discussions regarding how to take better care of oneself and optimize one’s life (Lupton 2014b; Ruckenstein 2014). These concepts refer to the practice of gathering data about oneself on a regular basis and then recording and analyzing it to produce statistics associated with one’s bodily functions and everyday habits (Lupton 2014b; 2013). The tracking and analyzing of one’s own data is not, however, a new practice. Indeed, monitoring, measuring, recording, and analyzing various aspects of one’s body and life are practices that have been discussed since ancient times (Lupton 2017; 2016). People have been interested in their bodily functions and sensations, diets, body weights, drug usage, and exercise habits as part of maintaining and enhancing good health as well as preventing illness and disease (Lupton 2017; 2012).

Along digitalization, a wide range of new digital technologies has emerged into the wellness market, ranging from mobile and wearable digital devices to smart objects and facilitating self-tracking in novel ways (Bosshart et al. 2018; Lupton 2014b; Ruckenstein 2014). The ubiquity and widespread use of an array of apps, ranging from health and fitness to diet and weight control and from sleep and mood to sexuality and reproduction, also constitute an important genre of novel, digital wellness technologies (Lupton 2017; 2015). The practice of self-tracking with athletes, among the pioneers, has rapidly become a practice of the masses, thus creating a large commercial market. Over the past few years, the fascination with self-tracking and its implications for the concepts of the self, identity, social relations, and embodiment has also increased in popularity in sociology and other social sciences as well as in healthcare and health promotion (Lupton 2017; 2012).

The digitalization of self-tracking originates from the Quantified Self movement, and the term “*quantified self*” was invented by Gary Wolf and Kevin Kelly (editors for *Wired Magazine*) from California in 2007 (Lupton 2016). After observing behaviors among colleagues and friends using digital technologies such as wearable devices and apps in order to generate detailed personal information about their bodies and aspects of their daily lives, they noticed that a new culture of personal data was emerging (Wolf 2009). While in the past, the methods of quantitative assessments were laborious and somewhat arcane, they are now made easier by new analytical tools and tracking systems that are popping up at an impressive rate (ibid. 2009). Modern self-tracking offers an effective opportunity for individuals to understand their bodies, minds, and daily lives as a series of quantifications that can be examined and acted upon (Lupton 2014; 2013a; 2013b). As a metaphor, the Quantified Self does not only define a new numerical self, but also promotes a framework within which such a self operates.

Wolf and Kelly began organizing meetings (i.e., “show-and-tell” discussions) so that people interested in self-tracking could share their personal information and

experiences (Lupton 2013). They also established a website titled “The Quantified Self,” which is devoted to the movement and utilizes the slogan “*Self-knowledge through numbers*” (Lupton 2016; Wolf 2009). Following the publication of two articles—one in *Wired Magazine*, titled “Know thyself: Tracking every facet of life, from sleep to mood pain, 24/7/365” (Wolf 2009) and one in *The New York Times*, titled “The data-driven life” (Wolf 2010)—the term “quantified self” began to appear in the mass media. The interest in the concept and the associated movement has developed rapidly. The Quantified Self movement has, indeed, exerted increasing influence over the definition and practices of self-tracking, and the term has now entered the cultural lexicon (Lupton 2016; 2013).

The phenomena of self-tracking and the quantified self are, however, connected to a large phenomenon regarding individuals’ use of online technologies and associated computer devices—a shift from Web 1.0 to Web 2.0 and even Web 3.0. “Web 1.0” is characterized as the era of the World Wide Web, which has been accessible to the public since 1994 and focuses largely on the static knowledge provision to passive users (Lupton 2015; 2014a). The term “Web 2.0” has been used since 2004 to describe a shift from the “information web” to the “social web” and the current use of digital technologies. Web 3.0, in contrast, also called the “semantic web,” refers to “smart objects” that will exchange data with one another without any human intervention (ibid. 2015; 2014a).

Since then, a new range of technologies emerged that facilitated and encouraged users’ active participation. These technologies include mobile, wireless computers such as smartphones, tablet computers, and wearable sensor-based devices that allow connection to the Internet and social media platforms including Facebook, Twitter, Instagram, and YouTube in almost any location. The new digital technologies have given people the opportunity to create content and share personal data through, for example, status updates, which are highly valorized in the current era (Lupton 2015; 2014a). The drive toward sharing insights and aggregating data with others fits into the wider discourse of content creation and sharing that underpins various activities on today’s social media. Such activities have also been referred to with the term “prosumption” to describe the mix of consumption and production in regard to social media participation and interaction (Lupton 2013; Ritzer et al. 2012). Self-tracking is both about the consumption of the various devices and production of the data collected via these devices.

Lupton (2013) has claimed that quantifying the self is not merely about monitoring and measuring oneself; rather, it also involves communicating the self using visual or other materials based on one’s data in order to help others visualize and understand the patterns in the data as well as make connections to their own data in productive ways. Self-tracking is about *self-governance*; it is a practice that presents a version of the self and the body that one wants to achieve. This can be viewed as the qualitative or interpreted aspect of self-quantification—the ways in

which the numbers are interpreted and given meaning. As Lupton concludes, the “*quantified self*, in effect, is the *qualified self*” (ibid. 2013).

Self-tracking is an individualistic practice that focuses on one’s health, well-being, and productivity in order to produce the “better self.” It may also be viewed as a self-enhancing practice and strategy that positions the “self” as a responsible citizen, willing and able to take care of oneself (Lupton 2014b; 2013; cf. Foucault 1988). Self-tracking as part of the wellness lifestyle emphasizes self-responsibility and self-management. The self is viewed as a responsible, entrepreneurial self who actively tries to avoid ill behavior and attempts to govern the self by monitoring and managing one’s own health and other aspects of life (Lupton 2017; 2013; cf. Foucault 1988). The achievement of self-knowledge is important in regard to self-management, and the understanding of the patterns in one’s life represents the starting point for making changes to optimize one’s life (Lupton 2013).

Currently, self-tracking is shifting from mere voluntary self-quantification and self-care practice toward incorporation into many areas of social life and social institutions for additional reasons other than voluntary, involuntary, or even coercive reasons. Self-tracking plays an ever-increasingly important role, for example, in healthcare, in which the self-management of individuals’ health and emphasis on self-responsibility for preventing disease and pre-mature death are more and more frequently used (Lupton 2014b). The attempts to influence and change individuals’ behaviors are now incorporating the use of digital technology that is also referred to as “digital health” (alternatively, eHealth, mHealth, Health 2.0, or Medicine 2.0). Indeed, digital health has often been used to describe the various ways through which digital technologies can be employed in medicine and public health (Lupton 2015).

2.3 Wellness extends to self-branding – Introducing a concept of wellness branding

An entrepreneurial self and a new selfie culture

Drawing on the phenomenon of enterprise culture (Du Gay 1996), celebrity culture (Elliot 2011), and self-tracking culture (Lupton 2016; 2014b)—the current means of status-seeking, such as self-branding and micro-celebrityhood—reflect contemporary Western societies in many ways, particularly within the younger generations. The need to produce a better or optimal self, the obsession with celebrities, fame, and publicity, fleeting job security, the ideal of the authentic self, and the increased need for popularity on social media echo what is valued within today’s societies (Kucharska & Mikolajczak 2018; Kowalczyk & Pounders 2016; Marwick 2010).

Enterprise culture is understood in terms of the entrepreneurial self, which is self-regulating, entrepreneurial, and responsible because it embodies human virtues of enterprise discourse (Marwick 2010; cf. Lupton 2017; Du Gay 1996). Celebrity culture, in contrast, refers to the growing interest in the body and physical appearance, which are evaluated and benchmarked against those of celebrities (Khamis et al. 2016; Elliot 2011). It is believed that consumer culture requires individuals to take an instrumental attitude toward their bodies, to scrutinize themselves for imperfections, and to measure up to the ideal bodies presented in the media by models, celebrities, athletes, and “beautiful people” (e.g., Featherstone 2010).

Self-branding can be viewed as an example of both enterprise discourse and celebrity culture; it refers to a series of marketing strategies applied to an individual to create, position, and maintain a positive impression of oneself (Thompson-Whiteside et al. 2018; Marwick 2010; Shepherd 2005). More precisely, an individual adopts and internalizes advertising and marketing techniques to strategically create a perfected identity that is then presented to the audience (Gorbatov et al. 2018; Marwick 2010); however, this identity must represent an *authentic, true self* (cf. *daimon*). Each individual has an authentic set of talents, passions, knowledge, and skills that can be discovered through self-awareness, education, and growth. In an optimal situation, these characteristics are the building blocks for sustainable self-branding. Self-branding is herein understood as *a process that emphasizes an individual taking control of one’s authentic, true self, and the impression one makes when communicating that self to others* (Grénman et al. 2019; forthcoming; cf. Brooks & Anumudu 2016; Khedher 2014; Chen 2013; Schau & Gilly 2003).

The significance of self-branding is most effectively illustrated through the evolution in individuals’ professional and social needs and desires. A strong self-brand is considered an important asset in today’s individualistic—even self-centered—and increasingly digital world (e.g., Thompson-Whiteside et al. 2018; Khamis et al. 2016; Gandini 2016; Manai & Holmlund 2015; Hollenbeck & Kaikati 2012). Furthermore, a strong self-brand is often regarded as more of a necessity in a competitive, professional environment wherein creating a favorable and compelling image and differentiating oneself from others are essential to success (e.g., Gorbatov et al. 2018; Kucharska & Mikolajczak 2018; Thompson-Whiteside et al. 2018; Brooks & Anumudu 2016; Vallas & Cummins 2015).

Today, the responsibility of employment and careers has increasingly shifted from organizations to employees themselves, which has also led to the marketization of the self—i.e., the constant need that individuals expand their professional networks and engage in self-branding activities (Gorbatov et al. 2018; Thompson-Whiteside et al. 2018; Lair et al. 2005). It is argued that self-branding has become

the new in-demand skill for all professionals in addition to a device for self-promotion (Kucharska & Mikolajczak 2018). Many scholars have also identified self-branding as an aspect of identity creation and a form of self-governance, the latter of which empowers individuals to take responsibility for their own professional success (Brooks and Anumudu 2016; Gandini 2016; Hearn 2008; Lair et al. 2005; Shepherd 2005).

The ubiquity of social media and the social pressures created by its image-centric nature have further contributed to the significance of self-branding (e.g., Marwick 2015; Khedher 2014; Steinfield et al. 2008; Ellison et al. 2006). Facebook, YouTube, Instagram, Twitter, LinkedIn, blogs, and many additional social media platforms allow individuals to present themselves to a vast audience by emphasizing a self-identity that is assumed to be authentic yet marketable (Kowalczyk & Pounders 2016; Marwick 2010; cf. Lupton 2013; Wolf 2009). Notably, self-promotion on a wide scale would be a potentially impossible feat without an affordable distribution system (Khamis et al. 2016; Hollenbeck & Kaikati 2012; Marwick 2010).

In modern times, users regularly post life updates on social media—complete with Insta-worthy images—track their health and diet on apps, and spend billions on products and services to transform themselves and then convey these transformations to others (Khamis et al. 2016; Manai & Holmlund 2015; Labrecque et al. 2011). The current selfie culture is claimed to lead to self-documentation for consumption by others (Marwick 2015). Moreover, while photographs have always been a reflection of one's self-identity, they are now more commonly used as a means of displaying oneself to others (ibid. 2015).

Self-branding is both a *mindset*—which can be related to the self as a “marketable commodity” for professional and social purposes—as well as a *set of practices* with different means of self-branding (i.e., self-presentation, self-improvement, social integration, and social differentiation) (Marwick 2010; cf. Featherstone 2010; Bauman 2007). While self-branding represents a particularly overt form of self-commodification, in essence, it is about *identity and lifestyle construction* in addition to the ability to view the self as a *reflexive project* that needs to be *self-regulated* and *self-governed* (Marwick 2010; cf. Giddens 1991; Foucault 1988). Marwick (2010) argues that:

Although Web 2.0 ideology positions self-branding as a way to find personal fulfillment and economic success, it also explicitly instructs people to inculcate a self-conscious persona which positions self-promotion, visibility, and comfort with idioms of advertising and commercialism as positive, high-status virtues (p. 298).

The culture of Web 2.0 encourages an *entrepreneurial view of the self* and facilitates both identity and lifestyle construction as well as self-promotion by drawing on advertising and marketing tactics that can be applied to the self (Kucharska & Mikolajczak 2018; Gandini 2016; Marwick, 2010). In self-branding, the branded self is highly visible and continuously self-promoting such that it creates a new version of the entrepreneur (*the self*) known as one's performed identity. Accordingly, individuals define and promote themselves both *through* brands and *as* brands. In line with Lupton's (2013) notion of "*the quantified self is in effect the qualified self*" (p. 29), the branded self is considered to be qualified.

From impression management to wellness branding

Self-branding, in its current form, is a fairly recent phenomenon, yet the logic behind it is said to be rooted in Goffman's (1959) impression management and self-presentation concept. In his theory, Goffman (1959) implements a theatre metaphor through which individuals are perceived as actors attempting to produce and portray the most favorable impression (i.e., a performed identity) of the self to their audience. The idea of performance and *self-presentation* is that the body work, both verbal and nonverbal, is conducted first and foremost for others in a *face-to-face context* (see Thompson-Whiteside et al. 2018; Ellison et al. 2006).

The breakthrough in self-branding occurred in the late 1990s when Peters (1997) published the article "The brand called you" in the business magazine *Fast Company*, within which he addressed the personal brand's importance in a *professional context*. According to Peters (1997), individuals must construct and control their *professional identities* as well as create "*a sign of distinction*" in order to stand out in the labor market. At the time, self-branding was primarily considered a niche—a tactic used by professionals and celebrities alike to promote themselves (Kucharska & Mikolajczak 2018; Kowalczyk & Pounder 2016; Khamis et al. 2016; Labrecque et al. 2011). Since then, an understanding of the value of one's self-brand has remained the subject of significant discussion and further analysis (e.g., Vallas & Cummins 2015; Hearn 2008; Lair et al. 2005).

During the digital age and along with the advent of social media, self-branding has increasingly gained relevance not only for professional purposes, but also for creating and maintaining social relationships for the purpose of achieving *social integration*. Blogs and social networking sites such as Facebook, YouTube, Snapchat, Instagram, Tinder, and Twitter have made it possible for anyone to create a personal brand that reflects his/her *social identity* in an *online context*. Research has also followed this trend; within a relatively short period of time, a number of articles have been published on self-branding related to social media influencers (Khamis et al. 2016; Marwick 2015), the online dating environment (e.g., Ellison et al. 2006; Gibbs et al. 2006), social networking sites (Hollenbeck & Kaikati 2012;

Steinfeld et al. 2008), and online profiles (Labrecque et al. 2011; Schau & Gilly 2003).

The trajectory of self-branding reflects various contexts and periods of time (see Figure 10), from the face-to-face contexts to the online contexts. It can be argued that the evolutions of wellness and self-branding share similar characteristics. Today, wellness can be considered a positive, holistic state of body, mind, and spirit/soul, considering that well-being represents both the individual and society. Self-branding, in contrast, was first presented as a primarily professional concept, but has now developed into a significant platform for social identity and integration. Investing in and communicating about both the vital and attractive *self* are important components of wellness and self-branding.

Therefore, we propose that the most recent context of self-branding is *wellness*, which is based on *wellness identity* and the importance of *holistic self-improvement* (see Grénman et al. 2019 [forthcoming]). This interpretation emerges from previous literature to illustrate the established role of self-care culture and the ever-increasing need to transform and brand oneself toward the optimal state to fulfill the demands and expectations of both oneself and society.



Figure 10. The trajectory of self-branding (Grénman et al. 2019 [forthcoming])

We introduce a new concept—*wellness branding*—and define it as follows:

Wellness branding is a process of identity and lifestyle construction as well as self-promotion through various practices of wellness and different forms of self-branding, the goal being to create and brand one's optimal—balanced—self (ibid. 2019).

Wellness branding extends beyond individual wellness practices related to physical, mental/emotional, social, spiritual, intellectual, occupational, and/or environmental dimensions of wellness that represent only what one emphasizes and

values in life for the benefit of either oneself or society. Wellness branding also surpasses self-branding, which mainly involves the self-promotion aspect—i.e., how one commodifies oneself and communicates a certain impression to others. In *wellness branding*, the wellness practices, emerging from individual choices that reflect intrinsic motivation and values, are projected outward during the process of self-branding. If the constructed wellness branding image meets the audience’s expectations and values, external gratification is achieved. As authenticity is an important feature of both wellness and self-branding, wellness branding deals with creating one’s *optimal, balanced self* and subsequently communicating that self to others. The logic of wellness branding is illustrated in Figure 11.

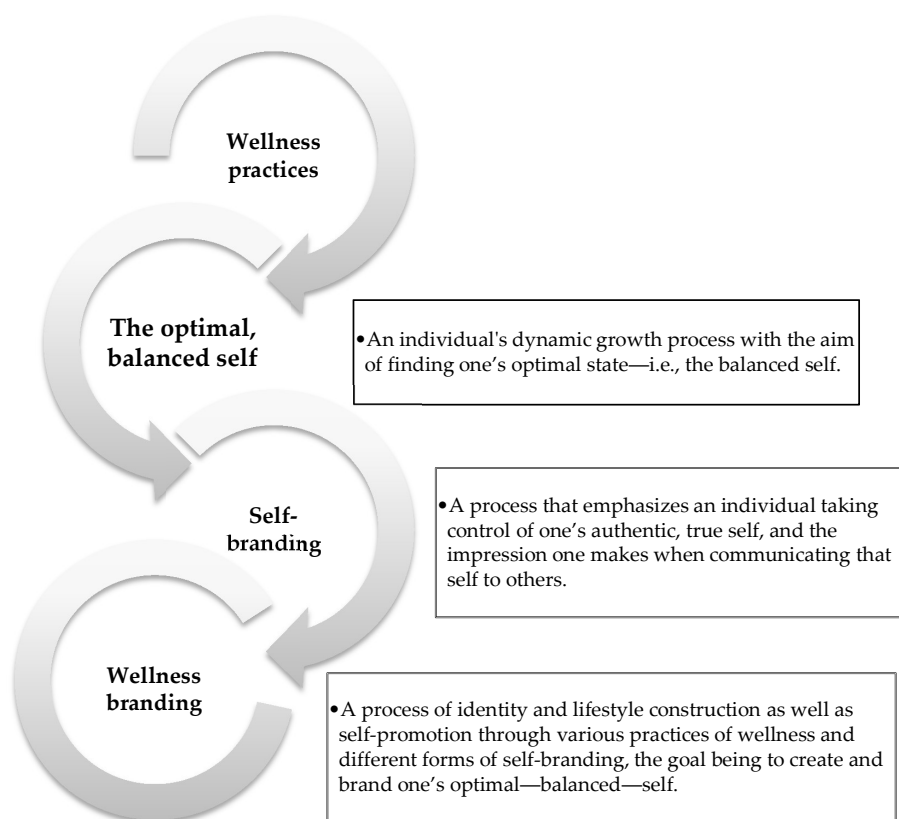


Figure 11. The logic of wellness branding (Grénman et al. 2019 [forthcoming])

3 RESEARCH STRATEGY

3.1 Scientific approach and methodological choices

In marketing, the positivist and interpretive paradigms have been profiled in terms of ontological and epistemological assumptions that have historically been associated with quantitative and qualitative research approaches (Bahl & Milne 2006). The philosophical assumptions that have been guided by positivist research involve an objective view of reality that the research seeks to measure and explain (ibid. 2006). Positivist research, being time- and context-free, also strives for generalizations (Williams 2007; Bahl & Milne 2006). The methods used in positivist research have been primarily quantitative. The philosophical underpinnings for interpretive research, by contrast, involve the assumption of multiple realities that are socially constructed with the purpose of understanding them from the perspective of those experiencing them (Bahl & Milne 2006). Unlike in positivist research, interpretive research is often time- and context-bound (Williams 2007; Bahl & Milne 2006). The methods used in interpretive research have been mainly qualitative.

Social science and business research have been dominated by quantitative research approaches (Eriksson & Kovalainen 2008). Quantitative research has often been characterized as dealing with explanation, hypothesis testing, and statistical analysis as well as the use of structured, standardized, and abstracted modes of data collection and analysis (ibid. 2008). Moreover, quantitative research is considered as being independent of the researcher, and thus it provides an objective measure of reality (Williams 2007). During the last decades, there has, however, been a shift toward more qualitative research approaches. Qualitative research is viewed as a holistic approach that involves discovery and yet is also more subjective in nature (ibid. 2007). It is considered to more efficiently enable the placement of focus on the complexity of social- and business-related phenomena, aiming toward understanding and interpreting reality as being socially constructed—i.e., produced and interpreted through cultural meanings (Eriksson & Kovalainen 2008). Even though quantitative and qualitative research methodologies are often contrasted, both possess a significant amount of internal variety, and thus straightforward comparisons tend to be inadequate (ibid. 2008).

To bridge the gap between the traditional dualisms of quantitative and qualitative methodologies, the past years have witnessed the emergence of the mixed-methods approach (Creswell 2014; Bahl & Milne 2006). Mixed methods are often

perceived as eclectic and pluralistic; they can be classified as having both quantitative and qualitative characteristics of research that can be conducted either sequentially or simultaneously (Creswell 2014; Bahl & Milne 2006). The mixed-methods approach also tends to be more pragmatic in nature and driven by the research question rather than constrained by paradigmatic assumption (ibid. 2006). Due to the fact that the approach uses both quantitative and qualitative methods, combines deductive and inductive reasoning, and is often pragmatic in nature, mixed-methods research does not often align itself with a single philosophy or reality (Creswell 2014; Bahl & Milne 2006); rather, the mixed-methods approach can be found in the continuum of pure positivist and pure interpretive paradigms, and thus it also draws on more than one philosophical or paradigmatic assumption (ibid. 2006).

In the current thesis, the wellness phenomenon is examined using both quantitative and qualitative methodologies. In social science and business research, it is common to use qualitative research as the first phase of study, which is then followed by a quantitative phase (Eriksson & Kovalainen 2008). In the thesis, however, this is not the case; qualitative studies do not serve as pre-studies for their quantitative counterparts. The thesis, as a whole, can be considered as applying the *mixed-methods approach*, but the individual research articles are based on either quantitative or qualitative methodologies. The choice of methodologies has been based on the problem-setting and research questions of each individual article.

In accordance with the more pluralistic and pragmatic nature of mixed-methods research and the notion that practically oriented business research often tends to draw on more than one philosophical or disciplinary root (Eriksson & Kovalainen 2008), the current thesis does not align itself with any single philosophy; although, with some caution, it unquestionably assumes many features of scientific realism that also accept epistemological relativism. More importantly, however, fueled by the emergence of the global wellness trend, the thesis applies a *phenomenon-based research approach* (also called “phenomenon-driven”), which involves identifying and creating knowledge on new or recent phenomena of interest (e.g., Alba 2012; Park 2012; von Krogh et al. 2012).

It has recently been presented that focus placed too strongly on theory (i.e., theory-based research [also called “theory-driven”]) is likely to “*prevent the reporting of rich details about interesting phenomena for which no theory yet exists*” (von Krogh et al. 2012, p. 278; cf. Pham 2013; Park 2012). According to Krogh et al. (2012), the purpose of phenomenon-based research is to capture, describe, document, and conceptualize a phenomenon in order to enable appropriate theorization and the development of research designs.

Several scholars have called for more phenomenon-based research to capture the rapidly changing real-world phenomena, such as specific trends, transformations, and evolutions from the local to the global level not only to observe, but

also to publish material in journals (e.g., Doh 2015; Pham 2013; Alba 2012; Park 2012). Within social science and business research, new phenomena that require explanations are constantly appearing (von Krogh et al. 2012). These phenomena are often interesting as such, and therefore, a profound understanding of the phenomena themselves must be obtained before theories may be developed or tested (von Krogh et al. 2012; Park 2012).

In marketing and consumer research, the evolution of wellness consumption and lifestyle is an example par excellence of a rapidly emerged, real-world phenomenon that has significantly shaped consumer behavior. However, the paradigms of marketing and consumer research have not been able to offer a single, solid theory that can fully explain this phenomenon. As a result, the current thesis has also adopted theories and perspectives from alternative disciplines in order to better understand this (to date) scarcely researched phenomenon. Indeed, phenomenon-based research is considered to represent an important, early phase in scientific inquiry (Pham 2013; von Krogh et al. 2012). Rather than formulating hypotheses or considering one theory as being superior to others, phenomenon-based research tends to build on exploratory work and yield data and research strategies that can be used in subsequent research (ibid. 2012). In other words, drawing on the multi-disciplinary approach that has also been applied in the current thesis, the description of the phenomenon can be considered the basis for further research and creation of the underlying theories later on.

Notably, phenomenon-based research often requires tolerance for proposing incomplete ideas for other scholars to complete, as the disputant has, to some extent, witnessed herself. Phenomenon-based work, however, has the potential to generate breakthrough knowledge and even reshape the scientific discourse (Pham 2013; Park 2012; von Krogh et al. 2012). Excellent examples of phenomenon-based research are the pioneering articles by Holbrook and Hirschman (1982) and Hirschman and Holbrook (1982) concerning hedonic consumption that, aside from shaping the nature of consumer research by encouraging innovative thinking, has laid the foundational basis for the Journal of Consumer Research's short manuscripts. Furthermore, these articles, along with their novel ideas, have provided a basis for the current thesis.

Research articles included in the current thesis approach the wellness phenomenon from different perspectives using several datasets and methods of analysis. Table 6 summarizes the methodological choices of the thesis by presenting the articles, the research questions, datasets, and methods of analysis for each of the four articles. In addition, the table provides background information on the articles in relation to their titles, authors, publication forums, and years of publication. The disputant is the corresponding author in all articles included in the thesis. The co-authors' contributions are described below.

Table 6. Summary of the research articles

	<i>Article I</i>	<i>Article II</i>	<i>Article III</i>	<i>Article IV</i>
Title	Well-being and wellness tourism – Same, same but different? Conceptual discussions and empirical evidence	Taking the first step – From physical inactivity towards a healthier lifestyle through leisure walking	What moves higher education students? – The meanings of physical activity and their association with perceived well-being and the amount of physical activity	Wellness branding: Insights into how American and Finnish consumers use wellness as a means of self-branding
Authors	Miia Grénman Juulia Räikkönen	Miia Grénman Juulia Räikkönen	Miia Grénman Airi Oksanen Eliisa Löyttyniemi Juulia Räikkönen Kristina Kunttu	Miia Grénman Ulla Hakala Barbara Mueller
Forum	The Finnish Journal of Tourism Research	The Routledge International Handbook of Walking	Liikunta & Tiede (article in Finnish)	Journal of Product & Brand Management
Year	2015	2018	2018	2019 (forthcoming)
Research questions	1. How are the concepts of well-being and wellness defined within consumer and tourism research? 2. How are these concepts understood and used within the tourism industry?	1. How can leisure walking be considered part of the wellness lifestyle? 2. How do perceived well-being and appreciation of different life domains and personal goals differ in relation to the level of physical activity? 3. How do the <i>meanings</i> of physical activity differ in relation to the <i>level</i> of physical activity?	1. How are the current discourses on health and appearance portrayed in the meanings of physical activity? 2. What is the association between the meanings of physical activity, perceived well-being, and the amount of physical activity?	1. How are the concepts of wellness and self-branding interconnected and how do they complement one another? 2. How do consumers perceive wellness and what kind of meanings do they attach to it? 3. Through which activities and practices do consumers pursue and consume wellness and why?
Data	Qualitative: Semi-structured interviews (N=22)	Quantitative: University Student Health Survey 2012 (N=9992/ n=4403)	Quantitative: University Student Health Survey 2012 (N=9992/ n=4403)	Qualitative: Focus group interviews (N=57)
Analysis methods	Content analysis	Descriptive; Principle component analysis; Analysis of variance	Descriptive; Principle component analysis; Analysis of variance; Logistic regression	Content analysis

In Article 1, the data was supported by the co-author, and the data was analyzed in cooperation with the co-author. In Article 2, the data was analyzed and the article was written in cooperation with the co-author. In Article 3, all co-authors contributed to the composition of the article, and the data was analyzed by the third co-author. Finally, in Article 4, the co-authors assisted with collecting data and composing the article.

3.2 Data collection and analysis method

3.2.1 *Semi-structured interviews*

Article 1 discusses wellness in the tourism context and in relation to well-being. The article examines how the concepts of well-being and wellness are defined within consumer and tourism research and then analyzes how these concepts are understood and used within the tourism industry. The fact that well-being and wellness have been widely discussed in tourism and leisure research—and that Nordic researchers have also been well represented in the frontline of this research (e.g., Björk et al. 2011; Hjalager et al. 2011; Konu et al. 2010)—led to this article's development in 2013.

The data was collected through semi-structured interviews conducted at the *Matka 2013* tourism fair in Helsinki (January 18, 2013). The data consisted of 22 interviews, of which sixteen were administered to tourism businesses and six were administered to destination marketing organizations (DMOs). The interviewees (N=22) were selected among the tourism fair exhibitors, which included a variety of national businesses and organizations working within the well-being and wellness tourism sector operating both in Finland and abroad.

Semi-structured interviews represent a qualitative data collection method through which the researcher or interviewer asks the interviewees a series of pre-determined yet open-ended questions. It is a research method between the unstructured and structured interviews that assigns the researcher more control over the themes discussed than do the former, yet simultaneously, more freedom than do the latter (Longhurst 2016). The use of semi-structured interviews is justified, for example, in the event that the interviewer has only one opportunity to interview someone or in the event that there is more than one interviewer collecting the data (Cohen 2006). The semi-structured interview frame provides instructions for the interviewers and enables the facilitation of reliable and comparable qualitative data (ibid. 2006).

The thematic interview frame was conducted by the authors of this article. However, due to the number of interviews and pressures associated with time, the interviews were executed by students participating in the advanced-level course “Tourism research and the future of tourism” at the Turku School of Economics at University of Turku. Notably, some interviews were concise and strictly followed the predetermined structure, while others were more discursive and also covered alternative themes. The interviews lasted approximately 30 minutes each. All interviews were tape-recorded and transcribed, producing a total of 23,143 words of textual data.

The interviews embraced five main themes with a number of questions and sub-questions. The interviewees were asked to consider the themes and answer the questions from the perspectives of their own tourism businesses and organizations, although the responses simultaneously reflected the interviewees’ own interpretations. The main themes involved: (1) well-being and wellness tourism as an increasing tourism trend, (2) conceptual clarity between the terms “well-being” and “wellness,” (3) wellness tourism products and services (at present and in the future), (4) wellness tourism customer segments (at present and in the future), and (5) the future of well-being and wellness tourism. The current study, however, focused on the following three themes using the following specified questions:

1. *Well-being and wellness tourism as an increasing tourism trend:* What are the main factors influencing the growth of well-being and wellness tourism? How significant is the booming trend for your business, operations, and/or destination?
2. *Conceptual clarity between the terms “well-being” and “wellness:”* Which term, “well-being” or “wellness,” do you use in your business, operations, and/or destination? How do you define and separate these terms?
3. *Wellness tourism products and services:* What kinds of wellness tourism products and services do you offer at present? Which of them are the most significant considering your business, operations, and/or destination, and why? What kinds of wellness tourism products and services do you intend to offer in the future?

In order to analyze the data, a content analysis method was employed. Content analysis is a widely used qualitative research method and one of the numerous modalities used to analyze text data (Hsieh & Shannon 2005). Content analysis focuses on the characteristics of language as communication by interpreting the content or contextual meaning (ibid. 2005). It is defined as a “*research method for the subjective interpretation of the content of text data through the systematic clas-*

sification process of coding and identifying themes and patterns” (Hsieh & Shannon 2005; cf. Williams 2007). According to Hsieh and Shannon (2005), content analysis utilizes three different approaches: conventional, directed, and summative, with key differences related to coding, origins of codes, and trustworthiness.

In *conventional* content analysis, codes are derived from data during data analysis. The researcher is usually able to gain a deeper understanding of the phenomenon by applying this approach. In *directed* content analysis, codes are derived from existing theory or prior research, and thus they are defined before and during data analysis. The researcher employing a directed approach is able to efficiently extend or refine existing theory. The *summative* content analysis, on the other hand, is fundamentally different from the other two approaches. Instead of analyzing the data as a whole, this approach analyzes keywords that are derived from the interest of a researcher or literature review and that are identified both before and during data analysis (Hsieh & Shannon 2005). The analytical process usually involves the following phases: formulating the research questions, selecting the sample, defining the patterns and themes, outlining the coding process and coder training, implementing the coding process, determining trustworthiness, and analyzing the results of the coding process (ibid 2005).

A directed approach was employed in this study. To examine how the empirical findings corresponded to the conceptual discussion in the literature, the data was analyzed during different phases that were primarily deductive in nature. In order to avoid research biases, the authors firstly analyzed the data individually based on the agreement of the themes and coding process. Thereafter, the themes were compared and combined in a mutual understanding.

During the *first phase*, the businesses and organizations were positioned within the well-being and wellness tourism industry according to the sector within which they operated—e.g., spas and hotels, tour operators and travel agents, and DMOs. During the *second phase*, the businesses and organizations were examined in relation to their wellness tourism products and services brought up by the interviewees—e.g., spas and treatments, activities and fitness, workplace wellness, wellness tours, nature, culture, and culinary. During the *third phase*, the data was analyzed by a comparison of the industry perspective—i.e., the understanding and the use of the terms “well-being” and “wellness”—with the theoretical framework. This resulted in some industry representatives viewing the terms in a similar manner, while others distinguished them from one another.

3.2.2 *Multivariate analysis*

Data

Article 2 and Article 3 discuss fitness and the meanings of physical activity from different perspectives. The data is part of the *University Student Health Survey*, collected in Finland in 2012 by the Finnish Student Health Service (Kunttu & Pesonen 2013). This nationally representative and broad survey on students' physical, mental, and social well-being has been administered every four years in cooperation with various health professionals since 2000. In 2012, the survey's focus was broadened with a more *sociological perspective* on the role of physical activity in students' everyday lives. It was conducted by the disputant and was also utilized in the current thesis.

The target population consisted of Finnish students aged 18–34 years who studied at academic universities and universities of applied sciences. The study population from the academic universities was derived from the register of the Finnish Student Health Service, and the study population from the universities of applied sciences was derived from the academies' own student registers. Altogether, the study population included 9,992 students, of which 53% were women and 50% were studying in academic universities.

The self-report survey was implemented as a postal questionnaire, but it was also possible to complete the questionnaire online. A reminder was sent once by mail, and four reminders were sent electronically. A total of 4,409 responses were received, as 2,040 respondents returned the questionnaire by mail and 2,369 completed the online questionnaire. After excluding non-replies ($n=6$), the final sample consisted of 4,403 respondents, yielding a response rate of 44% (women 52%; men 35%). With the exception of a slightly lower male response rate, the study population represented the target population quite sufficiently (women 63%; academic university 55%).

Measures

The measures involved four variables: (1) meanings of physical activity, (2) amount of physical activity, (3) perceived well-being, and (4) life domains and personal goals. In the questionnaire, these variables were approached with different questions. *The meanings of physical activity* were assessed with the question "How important are the following items for you when engaging in physical activity?" using a five-point scale ranging from 1= totally insignificant to 5= very important. This variable was formed through the application of alternatively similar classifications by Zacheus (2009), Lehmuskallio (2007), Seippel (2006), and Koski and Tähtinen (2005), which represent multi-item classifications developed to examine the various dimensions of meaning for physical activity. In the current articles, a combined version of these classifications with 54 items was used.

The amount of physical activity was examined with the question “How often do you engage in leisure time physical activity for a minimum of half an hour such that you sweat and become at least slightly short of breath?” The response options were (1) not at all/very seldom, (2) once a week/more seldom, (3) two to three times a week, (4) four to six times a week, and (5) daily (see Kunttu & Pesonen 2013).

Perceived well-being was evaluated with the question “How would you rate your current well-being?” using a five-point scale ranging from 1= very bad to 5= very good (see Kunttu & Pesonen 2013). This variable consisted of different dimensions of well-being that were approached with different sub questions, each of which utilized different response alternatives (five-point scale). *Physical well-being* was analyzed with the following four questions: “How would you rate your physical well-being?” “When buying food, do you consider its healthiness?” and “Have you ever dieted and lost a lot of weight?” Additionally, Body Mass Index (BMI) was calculated based on each respondent’s height and weight.

Mental well-being was assessed with the following four questions: “How would you rate your mental well-being?” “Have you recently felt constantly under strain?” “Have you recently been feeling unhappy and depressed?” and “Have you recently been thinking of yourself as a worthless person?” *Social well-being*, by contrast, was examined with the following four questions: “How would you rate your social well-being?” “How often do you spend leisure time together with friend/s?” “Do you feel that you belong to any study-related group?” and “Do you feel that you are lonely?” Finally, *holistic well-being* was analyzed with the question “How would you rate your holistic well-being?”

The appreciation of different *life domains and personal goals* was evaluated with two questions. First, the respondents answered the question “How well do the following statements describe you in general?” in regard to the statements “I am happy” and “I am satisfied with my life” using a five-point scale ranging from 1= totally disagree to 5= totally agree. Second, they answered the question “How important are the following life domains for you at the moment?” in relation to studies, leisure time, hobbies, friendship, standard of living/material well-being, health, social status in the study/work community, self-improvement, mental balance, and quality of life using a five-point scale ranging from 1= totally insignificant to 5= very important.

Methods

The articles utilized both descriptive and multivariate analyses. Descriptive analyses included comparisons of means and cross-tabulations. These methods are generally used to describe data and different variables, while the association between different variables is examined using multivariate analyzing techniques. The

current articles utilized principle component analysis, analysis of variance, and logistic regression.

Principal component analysis (PCA) can be used to firstly summarize the data by forming a smaller set of linear combinations (components) from the large number of original variables and secondly explain these variables in terms of their common underlying dimensions. Loss of information is minimized as PCA aims to retain as much variability as is present in the original variables (see Tabachnick & Fidell 2001).

Analysis of variance (ANOVA) can be used when the dependent variable is continuous to examine how the dependent variable is associated with different background variables whether they be independent or control variables. Simply put, ANOVA is a method that can be used to assess the extent to which the selected independent variables explain the variance of the dependent variable. Statistical significances between categories are indicated by the F-value, which indicates that the variation *between* the groups is significantly greater than that *within* the groups. The parameter estimates (B) indicate how much a group mean differs from the mean of the reference category. Statistical differences between means are also assessed using standard errors (SEs) (see Tabachnick & Fidell 2001).

Logistic regression, by contrast, can be used when the dependent variable is a categorical variable with two categories. The purpose of logistic regression analysis is to predict group membership. The results of the analysis are presented in the form of odds ratios ($\exp \beta$), which are the indicators of the change in odds resulting from a one-unit increase or decrease of the independent variable (see Tabachnick & Fidell 2001).

3.2.3 *Focus group interviews*

Article 4 discusses wellness from a wider perspective and in relation to self-branding by applying focus group research approach. The researchers collected the data by conducting a series of focus group interviews at San Diego State University in the U.S. and at University of Turku in Finland between 2016 and 2017. In total, twelve focus group sessions were conducted (six in each country) with four to six participants in each session (N=57). The university setting was chosen to assure as similar and homogeneous a research setting as possible in relation to the participants' levels of understanding and knowledge regarding both the phenomenon and the homogeneity of the groups (Belk et al. 2013; Catterall & Maclaran 2006). The groups were formed based on participants' age groups, ranging from 19–29 years, 30–49 years, and 50–68 years. The age varied from 21 to 68 years in the U.S. and from 19 to 61 years in Finland. Gender-wise, all groups were equally balanced.

Focus group interviews have been the most commonly used research technique in qualitative marketing research compared to, for example, individual, in-depth interviews that are often considered too time-consuming, difficult, or expensive to implement (Catterall & Maclaran 2006). In academic marketing and consumer research, by contrast, the use of focus groups has been less common. While the effect of group dynamics is considered to be the main drawback of focus groups, it is also considered to be the main strength, as it generates and enables new lines of thinking specific to the phenomenon (Hennink 2007; Catterall & Maclaran 2006).

Focus group interviews were conducted by the authors of this article. The interviewers guided the discussions by acting as moderators to ensure confirmability, dependability, and credibility (e.g., Daymon & Holloway 2010). The same thematic interview frame was used in all sessions. Even though wellness was understood and discussed in terms of holistic health, the discussions varied from one another to some extent, as discussants were encouraged to engage in free-floating discussions to render rich data (see Belk et al. 2013).

At the beginning of the sessions, the research phenomenon was briefly introduced to the participants. The sessions can be considered extended focus groups; prior to discussing the various themes of wellness, participants were asked to answer some questions related to their knowledge and understanding of wellness as well as the role it plays in their everyday lives. These preliminary questions were valuable icebreakers in terms of getting into the theme and subsequently generating and guiding the discussions. The questions also enabled the moderators to diminish the group effect and draw out minority opinions if/when needed (Belk et al. 2013). Altogether, the sessions embraced four main themes that all cover various questions and sub questions: (1) shared meanings of wellness, (2) sources of personal wellness, (3) wellness products and services, and (4) wellness technology. Two of these themes were discussed and analyzed in the current article:

1. *Shared meanings of wellness*: How do you define wellness? Who is responsible for wellness? How do people try to achieve wellness today?
2. *Sources of personal wellness*: How do you try to achieve wellness? Why do you try to achieve wellness? Have you noticed any changes in the ways people try to achieve wellness?

The sessions lasted from 70 to 90 minutes and were tape-recorded and fully transcribed, totaling 185 pages of verbatim transcriptions. All participants were guaranteed anonymity. As incentives, refreshments were served during the sessions. In addition, the U.S. students were given class credit for participation, while the Finnish students were given extra points on an exam.

Akin to Article 1, in the current article, the focus groups interviews were analyzed employing a qualitative content analysis or, more precisely, a directed approach. Analysis began with existing theory on the dimensions of wellness and other prior research findings that guided the initial coding (Hsieh & Shannon 2005). Throughout the analysis, the existing theory and data were compared and discussed jointly to validate and confirm the findings (see Belk et al. 2013). The analysis and presentation of the findings followed the order of the research questions, with the exception of the one question that was addressed based on the literature review.

The analysis was divided into two steps. In *Step 1*, the authors independently examined the transcripts to identify and code those text segments that were mainly deductive in nature and reflected main dimensions of wellness from the existing literature. Thereafter, based on the authors' independent analysis followed by joint discussions, a more thorough review of the transcripts was conducted to facilitate the development of subcategories for the most frequently mentioned wellness dimensions and to identify other major wellness-related themes. In *Step 2*, the sources of personal wellness—i.e., the activities and practices through which wellness is pursued and consumed—were analyzed to determine the fundamental reasons for wellness behavior and to incorporate more inductive reasoning.

4 RESEARCH FINDINGS

This chapter first summarizes the main findings from the research articles and then supplements them by reflecting the results from the thesis's theoretical discussions that are presented in Chapter 2.

4.1 Main findings of the articles

4.1.1 *Article 1: Well-being and wellness tourism – Same, same but different? Conceptual discussions and empirical evidence*

The first article discusses wellness in the tourism context and in relation to well-being. The purpose of the study is to examine how the concepts of well-being and wellness are defined within consumer and tourism research in the current literature. In addition, we analyzed how these concepts are understood and used consistently within the tourism industry. The empirical data was gathered through semi-structured interviews (n=22) among industry representatives from nineteen tourism businesses and six destination marketing organizations (DMOs) during 2013. This study contributes to RQ1 together with the theoretical synthesis conducted in Chapter 2.

The premise of this study was to shed light on the conceptual confusion related to the key terms “well-being” and “wellness.” This is one of the major challenges concerning the well-being and wellness tourism industry as well as academic research. Wellness seems to have become a *trendy marketing gimmick* and a *fashionable catchword* for marketing a wide variety of products and services with only little or nothing to do with wellness itself (SRI International 2010; Miller 2005; Mintel 2004). Furthermore, the inconsistent use of these concepts likely leads to misunderstandings, false expectations, and unsuccessful tourism experiences.

The literature review revealed certain similarities yet also clear differences between these concepts. Both refer to the balance of physical, mental, and social well-being and focus on maintaining and enhancing health and well-being. Well-being, however, is a wider concept; it is often associated with material and economic factors, such as the standard of living, subsistence, and education, but also with subjective aspects of happiness, life satisfaction, and quality of life. In con-

trast, *wellness* is more individual in nature, referring to individual *self-responsibility* and a *healthy way of living*. Specifically, in tourism research, well-being is associated with active enjoyment, such as fitness and personal training, while wellness is more related to *passive enjoyment* and *pampering* through beauty and spa treatments, for example.

The results of the study can be summarized into three main points, which also offer interesting managerial implications. *First*, the understanding of the similarities and differences between the concepts was surprisingly weak among the tourism industry professionals. Regardless of the tourism sector or the product and service offerings, the use of the concepts was inconsistent. Most of the interviewees were unable to define the terms nor make a clear distinction between them. Nevertheless, among the organizations, wellness was determined to be far more popular than well-being.

The reasons for the wide use of the term “wellness” can only be speculated, although it is probably considered a fashionable term based on its overuse in the commercial forums. However, the popularity of the term “wellness” among the organizations is a significant finding, as it contradicts the recommendations of the Finnish Tourist Board (FTB 2014; 2008; 2005), which aims to develop a common strategy and guidelines for marketing Finnish well-being tourism. This indicates that the message of the FTB has not yet filtered down into the industry. There seems to be a need to reassert the link between tourism research, marketing, and development organizations, as well as the actual well-being tourism service providers. The valuable, official strategy work does not reach its goal if it is not communicated and executed properly at the industry level. Furthermore, there seems to be a lack of understanding—even ignorance—regarding how important conceptual clarity is for the formation of tourists’ expectations and experiences.

Second, in relation to the literature review, only a few conceptual differences were addressed in the interviews. Well-being was understood as a wider concept than wellness, although the interviewees were not able to exactly specify how. Additionally, the contradiction between the passive and active role of an individual was mentioned. Well-being was related to physical activity, while wellness was related to passive pampering. However, the close *connection of wellness and fitness*, in turn, created confusion by bringing an active component to wellness. In addition, wellness was associated with *commerciality* and *marketing*, being part of the total offering and strategy. Interestingly, high quality and luxury were not addressed even though they are considered some of the main features differentiating wellness tourism from well-being tourism (FTB 2014; 2008; 2005). The role of experiences was not directly discussed, although it was brought up indirectly by the interviewees in discussions related to the constant pressure to develop new and innovative products. However, it may be recognized that, in marketing, wellness

communicates *high quality, luxury, and the promise of experiences*. This is an important managerial issue because using wellness as a mere marketing gimmick and/or a fashionable catchword without including its associated elements in the actual offering, whether they be products, services, or experiences, is likely to lead to false expectations and unsuccessful tourism experiences.

Third, the analysis offered insight into the product and service offerings of Finnish well-being tourism, which consists of the basic well-being offering “Finrelax®” and two specifically targeted offerings: “Health and fitness” and “Pampering” (FTB 2014; 2008). Interestingly, aside from relaxation, silence and nature, which are considered the basic elements of Finnish tourism industry, hardly came up in the data; only two respondents mentioned Finnish *saunas* and sauna services, which seem to be considered self-evident. However, saunas cannot be taken for granted, especially when foreign tourists are being targeted. Finnish *food* was not mentioned, although a few interviewees related culinary experiences to well-being and wellness tourism. By contrast, *products and services of “health and fitness” and “pampering”* were frequently addressed. In relation to the domains of well-being, the interviewees pointed out numerous products and services that enhanced physical and mental well-being. Instead, improving possibilities for social well-being was not directly addressed, but was brought up indirectly when customer types such as couples, families, and groups of friends were mentioned. In tourism, particularly, the social dimension is central and offers various business opportunities when combined with, e.g., culinary experiences such as food and wine tasting.

In sum, the results indicated that there is no commonly accepted agreement or practice with regard to using the concepts of well-being and wellness among different stakeholders within the tourism industry. In addition to discussion and communication between the FTB and the tourism industry, further research is urgently essential as it requires tight collaboration with the tourism industry. This work should be consistent and long-term, as temporal projects do not tend to have a long-lasting effect, but rather may mislead or even prevent the valuable development work of FTB.

4.1.2 Article 2: Taking the first step – From physical inactivity towards a healthier lifestyle through leisure walking

“I have two doctors, my left leg and my right...” (Trevelyan 1913)

In the second article, leisure walking as a representative of fitness is discussed in relation to consumer culture and wellness lifestyle. The purpose of the study is to examine leisure time walking as the first step from physical inactivity toward a

healthier lifestyle. We analyzed how perceived well-being, life domains and personal goals, as well as meanings of physical activity among Finnish students in higher education differed according to their level of physical activity. These associations were analyzed as part of a large University Student Health Survey (n=4403) conducted in Finland in 2012. This study contributes to RQ1 and RQ2 together with the theoretical synthesis conducted in Chapter 2.

The results indicate that engagement in leisure walking is positively associated with the perceived physical, mental, and social well-being of the respondents. In addition, there was a clear difference in several parameters between the physically active and inactive students: the physically active students appreciated more varying life domains (e.g., study/work, leisure time, hobbies), personal goals related to both *hedonic* and *eudaimonic aspirations* (e.g., happiness, life satisfaction, health, social status, self-improvement), and the meanings of physical activity. Remarkably, the differences between the inactive and the moderately active leisure walkers were larger than were the differences between the moderately and highly active. This indicates that even a small increase in the level of physical activity has considerable effects on health, although it also benefits other aspects of life by increasing *well-being*, *happiness*, *life satisfaction*, and *quality of life*. On the path from total physical inactivity toward a healthier and active lifestyle, leisure walking seems to be a good *first step*.

However, from the perspective of the wellness lifestyle, this first step is not enough. Only during the *second step*—i.e., from moderately active to highly active—did leisure walkers begin to represent an assimilation of the wellness lifestyle. The data revealed that, in addition to the amount of physical activity, additional practices of everyday life, such as *healthy eating habits* and *weight management*, illustrated the *self-awareness* and *self-interest* required to invest in a healthy lifestyle. Furthermore, the tightly intertwined entities of *leisure time*, *hobbies*, and *self-improvement* were valued more than were the traditional economic measures of well-being (i.e., the standard of living and material well-being). These results are in line with the current discussion on the importance of well-being, happiness, and quality of life (Uysal et al. 2016; Rosenbaum 2015) in regard to the pursuit of *a good and meaningful life*.

The experiential and transformational aspects of the wellness lifestyle were accentuated namely in the meanings of physical activity. The appreciation of the *body image* was signified through the importance of “appearance and fitness” and “physicality and excitement.” “Recreation and relaxation” and the “experientiality” of physical activity, by contrast, represented the *interior of the body*, placing emphasis on *self-enhancement*, *learning*, and *growth*. Furthermore, the importance of “regularity” among the highly active leisure walkers denoted that physical activity is a significant part of their lifestyles. This activity does not necessarily have

to be convenient, but rather, it should be a meaningful and desirable part of their everyday lives.

This brought us to the discussion on *wellness value*, which we have defined based on previous literature and the empirical findings:

Wellness value originates from the personal transformation toward a healthier lifestyle. It influences both a person's behavior and way of thinking and aims to achieve a good and meaningful life that is evaluated mainly by non-economic measures.

Personal transformation, such as adoption of the wellness lifestyle, cannot occur if it is not truly meaningful for the individual. This places *consumer centricity*, *empowerment*, and *commitment* in the spotlight, and accordingly changes the role of service providers (cf. Heinonen et al. 2013; 2010). A lifestyle change can only be initiated and supported—but not maintained—by the service provider, as it originates from the individual and is influenced by everyday choices. This is particularly evident in relation to wellness lifestyle, which emphasizes the proactive and central role of the consumer.

On the societal level, physical activity—and especially physical inactivity—is an important public health issue due to the growing number of lifestyle illnesses and increasing healthcare costs. Our results indicate that health is definitely one of the most appreciated values in life, but *health per se* is not sufficient in motivating individuals to engage in physical activity and adopt a healthier lifestyle. Thus, it is essential to understand not only the rationale and motivating factors, but more importantly, the emotional moving forces on which the value of physical activity is based. These forces need to be acknowledged and evaluated by public and private sectors aiming to promote health and healthy lifestyle. It is noteworthy to mention that, aside from the traditional managerial implications, marketing can also be harnessed to serve *societal purposes* and enhance the well-being of individuals, communities, societies, and ecosystems in a wider sense (cf. Mick et al. 2012).

4.1.3 Article 3: What moves higher education students? – The meanings of physical activity and their association with perceived well-being and the amount of physical activity

The third article discusses the meanings of physical activity and their association with both perceived well-being and the amount of physical activity undertaken among Finnish students in higher education. The purpose of the study is to analyze how the current discourses on health and appearance, which emphasize *self-responsibility* and the *notion of being fit* (Lupton 2016; Sassatelli 2016; Smith

Maguire 2008; Crawford 2006), appear in the meanings of physical activity. In addition, the purpose is to examine how these meanings are reflected in perceived well-being and the amount of physical activity undertaken by the interviewed subjects. Akin to the second article, the data was analyzed as a portion of a large University Student Health Survey (n=4403) conducted in Finland in 2012. This study also contributes to RQ1 and RQ2 together with the theoretical synthesis conducted in Chapter 2.

The results revealed a strong emphasis on the *health- and mind-oriented meanings*—in particular, pursuit and/or maintenance of health, a sense of well-being, joy, and improved physical fitness. In addition, achievement of balance, experience of success, escape from everyday life, relaxation, recreation, stress relief, and “me time” were highly valued. From the *appearance- and body-oriented meanings*, the most important aspects included physical strain, improved appearance, follow-up of one’s own progress, regularity of exercise, maintenance and/or loss of weight, and muscle mass/power gain. The same applied to the meanings emphasizing the *experiential and expressive nature* of physical activity, particularly fun and/or play. In contrast, meanings related to *sociability* as well as *competition and accomplishment* were determined relatively insignificant. Finally, meanings associated with *trends and status*, such as trendy outfits and/or gear, achievement of a trendy image, trendy sports, and a trendy and/or famous exercising facility, were considered the least important.

From the numerous meanings of physical activity, six meaning dimensions were formed and labeled as follows: (1) *sociability and play*, (2) *challenge and physicality*, (3) *revitalization and relaxation*, (4) *trends and status*, (5) *health and fitness*, and (6) *competition and accomplishment*. All these meaning dimensions were positively connected with the dimensions of perceived well-being. While sociability and play as well as revitalization and relaxation were most strongly connected with holistic well-being, trends and status were positively connected exclusively with physical well-being. The same positive connection applied to the amount of physical activity. The importance of challenge and physicality as well as health and fitness, in particular, increased when the amount of physical activity increased. With regard to gender differences, the meanings related to challenge and physicality as well as competition and accomplishment were more strongly associated with the amount of physical activity undertaken by men than that undertaken by women.

The results brought up interesting themes and shed light on the various meanings of physical activity as well as their association with perceived well-being. The contemporary Western societies promote self-care practices both as an individual right and as a self-responsibility (Lupton 2016; Smith Maguire 2008; Crawford 2006). Physical activity is considered to be one of the most powerful forms for *transforming the self*. The current self-care culture is full of *meanings*. Simultane-

ously, physical activity is constructed in relation to social structures and experiences that are articulated with other meanings and practices found throughout culture (cf. Koski 2008; Crawford 2006; Seippel 2006).

The results indicated that the most important dimensions of meaning were challenge and physicality, health and fitness, sociability and play, and revitalization and relaxation. The perception of physical activity as a *self-investment strategy* was reflected through the importance of both the *development of the body* and the *pursuit of mental balance*. The appreciation of physicality is not so much related to beauty (attractive appearance) as it is related to the current emphases on *being fit* (e.g., Sassatelli 2016). The meanings representing “being fit” were also emphasized more heavily as the amount of physical activity increased, and were most strongly related to perceived physical well-being. In addition, these meanings reflected *self-awareness* and *self-improvement* through the follow-ups of individuals’ progress and regularity of exercise.

According to the results, being fit was also considered to refer to mental well-being, thus emphasizing the *positive body–mind connection*. Physical activity was perceived as an important means for *life management*: to achieve balance, feel good, escape from everyday life, and have “me time.” This is in accordance with the notion of therapeutic leisure (Caldwell 2005). Physical activity and exercising in nature, in particular, enable possibilities for relaxation and recovery, as well as act as resources of meaningful experiences, joy, and play. Notably, the dimensions of meaning representing sociability and play as well as revitalization and relaxation were most strongly associated with holistic well-being.

By contrast, the meanings reflecting the “fitness hype” created by the commercial wellness market seemed to be not quite as meaningful to the students. The dimension representing trends and status was positively connected only with perceived physical well-being. This is somewhat surprising, as the commercial wellness trend has grown in popularity and has been addressed in both public discussions and academic research (e.g., Kajava et al. 2017; Lupton 2016).

To summarize, the results reflected the longstanding health promotion tradition stressing physical well-being. Furthermore, the importance of self-care was additionally brought up as a means to improve mental and social well-being. Physical activity, as a marker of active lifestyle and a means for social differentiation, was conveyed particularly through the meanings representing being fit. Adopting a healthy and active lifestyle necessitates, however, meanings that an individual finds positive and meaningful for oneself.

4.1.4 Article 4: *Wellness branding: Insights into how American and Finnish consumers use wellness as a means of self-branding*

The fourth article investigates the following two major phenomena that gained increasing attention in the early 2000s and are currently trending across the world: wellness and self-branding. Through a theoretical discussion of both wellness and self-branding, together with empirical findings derived from a series of focus group interviews (n=12) conducted in university settings in both the U.S. and Finland between 2016 and 2017, the purpose of this article is to examine how wellness can be used as a means of positioning and branding oneself. The phenomenon was addressed through the introduction of a new concept—*wellness branding*—and by identifying those wellness practices that are currently most valued. This study contributes to RQ1, RQ2, and RQ3 together with the theoretical synthesis conducted in Chapter 2.

Based on the theoretical discussion, it has been concluded that both wellness and self-branding represent current forms of *identity and lifestyle construction* as well as *self-promotion*, thereby reflecting the contemporary Western societies in many ways. The need to produce an optimal self, the obsession with celebrities, fame, and publicity, fleeting job security, the ideal of the authentic self, and the ever-increasing need for gaining popularity in social media echo what is valued within today's societies (e.g., Kucharska & Mikolajczak 2018; Kowalczyk & Pounders 2016; Marwick 2010). Another major aspect interconnecting wellness with self-branding has been determined as the *entrepreneurial view of the self*; the self is perceived as a *reflexive project* that must be self-regulated and self-governed in order for one to reach one's *optimal state* (Marwick 2010; cf. Giddens 1991; Foucault 1988).

With regard to empirical results, the most notable finding is that the wellness focus has advanced beyond the merely physical dimension—namely exercise and nutrition—to more focally involve emotional/mental, spiritual, social, and intellectual aspects. The need for *balance and positive body-mind connection, mindfulness, positivity, and happiness*, and the growing importance of *social ties for feeling happy* as well as *self-improvement and life optimization* emerged as fundamental reasons for wellness consumption and adopting a wellness lifestyle. All these elements emphasize a shift to significantly more immaterial ways of taking care of oneself. Moreover, they further strengthen the transformational nature of wellness and the increasing need for balancing one's life to reach one's optimal self.

In the article, we introduced a new concept—*wellness branding*—and define it as follows:

Wellness branding is a process of identity and lifestyle construction as well as self-promotion through various practices of wellness and different forms of self-branding, the goal being to create and brand one's optimal—balanced—self.

The logic of wellness branding encompasses the creation of one's optimal, balanced self while communicating that self to others (see Figure 12).

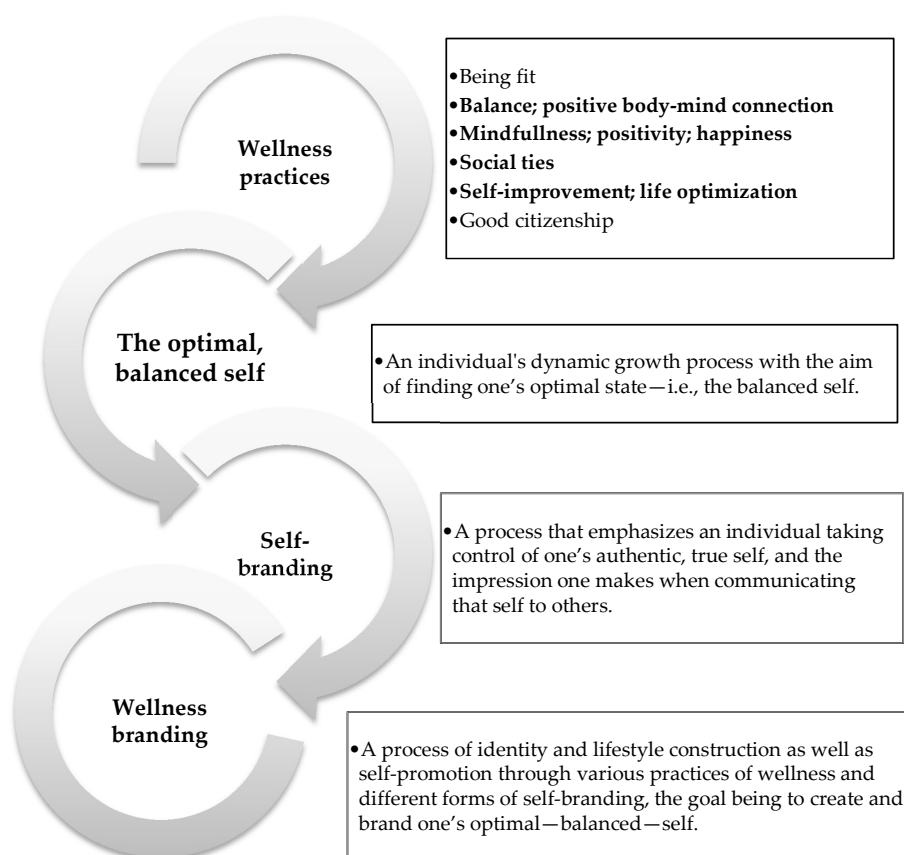


Figure 12. The logic of wellness branding complemented with wellness practices (Grénman et al. 2019 [forthcoming])

The core idea of wellness branding involves presenting a positive self-image that reflects the authentic self—healthy, capable, and fit image—as well as an individual's or a company's values. As concluded in the article, in addition to theoretical importance, “wellness branding” is a significant managerial issue because, in the future, the principles of wellness branding are likely to be adopted and employed further in both *employer branding* and *employee branding*. Thus, wellness

branding may also facilitate profit for both businesses and their employees in a novel way.

This article broadens the scope of self-branding to a new and timely context that remains unaddressed by the academic community. This article further adds to the consumer research literature—in particular, TCR—by discussing wellness as a *form of transformative consumption, self-enhancing lifestyle, and self-investment strategy* because it is an essential element of the current self-care culture. As for managerial implications, corporations should pay attention to consumers' various ways of taking care of themselves and the emergence of the new kind of self-care culture in which brands are loaded with various meanings and are consumed by consumers through *mental kaleidoscopes*. Our results indicate that wellness has evolved into a mindset, and wellness branding has transformed into a means of achieving and communicating that mindset to others. Therefore, it is essential that marketing and brand managers consider that, in addition to tangibles, they are actually selling mindsets. Corporations that can help consumers find their true, balanced selves are likely to achieve the greatest success in today's wellness market.

4.2 Synthesizing the theoretical discussions and main findings from the research articles

4.2.1 *From pleasure to meaning*

As indicated by the theoretical discussions on positive psychology, marketing and consumer research, and sociology as presented in Chapter 2, there has been a clear evolution in both wellness and the current self-care culture, both of which additionally reflect life values. Research interest in consumer well-being, happiness, and quality of life has expanded to discover what constitutes a good, meaningful life and what promotes human flourishing (e.g., Joseph 2015; Huta & Waterman 2014; Mick et al. 2012; Mick & Schwartz 2012). Similarly, individuals themselves are increasingly interested in and motivated by fulfilling their optimal potential and achieving pleasurable and meaningful lives (Joseph 2015; Baumeister et al. 2013).

Simultaneously, along with the evolution of wellness, the research focus on positive psychology has shifted from hedonic well-being to eudaimonic well-being, thus widening the scope of positive psychology to address more questions related to meaning and purpose rather than focusing exclusively on happiness in the traditional sense of pleasure (Seligman 2012; Seligman & Pawelski 2003). It has been noted, however, that combining the pursuit of hedonia (seeking happiness, pleasure, and comfort) with eudaimonia (seeking authenticity, meaning, excellence, and

personal growth) ought to produce greater well-being than will the pursuit of merely one alone, as both contribute to well-being in their own unique ways (e.g., Huta 2015; Huta & Waterman 2014; Huta & Ryan 2010; Peterson et al. 2005).

This same evolution can be observed in the shift from materialistic to more immaterial means of consumption and ways of taking care of oneself in many Western consumer societies. Several studies have presented that the more materialistic individuals are, the less happy they generally feel (e.g., Helliwell et al. 2018; Bahl et al. 2016; Burroughs & Rindfleisch 2012). This does not, however, mean that the role of consumption in individuals' lives has diminished, but rather that it has changed. Rather than seeking mere pleasure and satisfying material needs, individuals are seeking transformational experiences and deeper meanings in life. This development can also be observed in the trajectory of consumer research, which is gradually shifting from hedonic and experiential consumption (e.g., Holbrook & Hirschman 1982) toward transformative consumption, thus emphasizing flourishing and common good as well as consumer empowerment (e.g., Mick et al. 2012).

These theoretical conclusions are also supported by the research articles' key findings. In Article 1, wellness was mainly related to passive enjoyment, indulgence, and pampering (e.g., spas and beauty treatments), commerciality in terms of trendy marketing gimmicks and fashionable catchwords, as well as quality and luxury in general. In Article 4, by contrast, the current evolution of wellness was addressed by signifying that the meanings of wellness and perceptions of healthy living are gradually shifting beyond materiality and mere hedonism to increasingly involve immaterial and eudaimonic approaches. The findings emphasize the importance of emotional/mental, spiritual, and intellectual aspects of wellness, such as the need for balance and a positive body-mind connection, mindfulness, positivity, and happiness, the growing importance of social ties for feeling happy, as well as self-improvement and life optimization.

The hedonic (i.e., experiential) and eudaimonic (i.e., transformational) meanings were also touched upon in Articles 2 and 3, both of which discussed wellness in relation to fitness alongside the various meanings of physical activity. The importance of the body image was stressed through the appearance- and body-oriented meanings with an emphasis on health, fitness, challenge, and physicality. The body's interior was represented by the health- and mind-oriented meanings with a focus on revitalization and relaxation. Notably, in both body- and mind-oriented meanings, the emphasis was placed on self-enhancement, self-improvement, and personal growth, thereby strengthening the eudaimonic aspects of wellness. By contrast, the meanings reflecting the "fitness hype" in terms of trends and statuses created by the commercial wellness market—i.e., more hedonic-loaded meanings—seemed less important.

Finally, it was suggested in Article 2 that *wellness value* originates from personal transformation, which both influences an individual's behavior and way of

thinking and aims to achieve a good and a meaningful life in terms of primarily non-economic measures. However, in line with the theoretical discussions, it was concluded that personal transformation cannot occur unless it is meaningful for the individual, thus placing consumer centricity and empowerment in the spotlight. Personal transformation does not merely influence on an individual level, but rather poses broader societal-level influences.

To answer the first research question, it can be argued that wellness has evolved from materiality and mere hedonism to increasingly involve immaterial and eudaimonic approaches. Thus, it can be argued that a shift from *the pursuit of pleasure* to *the pursuit of meaning* has occurred.

4.2.2 Balance – The “New Black”

As indicated by the theoretical discussions presented in Chapter 2, there is an increasing need to take care of oneself holistically and to transform oneself toward the optimal state in order for one to achieve one’s full potential and meet the demands and expectations of both oneself and society (e.g., Lupton 2016; 2014b). In current Western societies, the care of the self is considered a self-investment strategy of positioning the self as a responsible citizen (i.e., “good citizen”) who is willing, capable, and self-regulated to take care of oneself (Lupton 2016; Elliot 2013; Smith Maguire 2008; cf. Foucault 1988). What was once considered narcissistic and vain is currently considered more of a duty.

The pursuit of wellness is considered one of the most salient practices in current societies with the aim of “transforming oneself,” “developing oneself,” and “returning to oneself” (Lupton 2016; Little 2012). It has been suggested that the current self-care culture promotes a transformation of the self (i.e., a profound change of the self) to achieve greater health and/or appearance, career success and/or social status, happiness, a better quality of life, personal growth and productivity, as well as a deeper meaning in life (Lupton 2016; Elliot 2013; Featherstone 2010). The self is perceived as a form of capital to be both invested in and managed to produce the “optimal self” (cf. Sassatelli 2016; Bourdieu 1984).

The optimal self is defined as *an individual’s dynamic growth process with the aim of finding one’s optimal state—i.e., the balanced self*, which also illustrates the inner journey of the self. Finding balance—a harmony of body, mind, and spirit/soul—seem to have become ever more important (e.g., Mick & Schwartz 2012).

These theoretical conclusions are additionally supported by the research articles’ key findings. Article 2 revealed that, only after attaining to a certain amount of physical activity, the leisure walkers began assimilating to the wellness life-

style—i.e., holistic practices of everyday life. These self-enhancing practices include, for example, healthy eating habits, weight management, several hobbies, engagement in active leisure, and an overall interest in improving and developing oneself, all of which illustrate self-awareness and self-interest toward healthy living.

In Article 3, fitness and physical activity were portrayed as one of the most powerful forms of transforming the self and were also depicted together as a self-investment strategy through both the development of the body and the pursuit of mental balance. “Being fit” has become a status symbol in modern societies, which was also emphasized in the findings. Notably, this refers to both physical and, increasingly, mental wellness, thus emphasizing the importance of a positive body-mind connection. Fitness and physical activity were also jointly perceived as an important means for life management; finding balance, feeling good, escaping from everyday life, and having “me time” were particularly emphasized in this context.

Similarly, the findings from Article 4 indicate the same trend: wellness has moved beyond mere physicality to increasingly encompass emotional/mental, spiritual, social, and intellectual aspects. The fundamental reasons for wellness consumption and lifestyle were determined as the need for balance and positive body-mind connection, mindfulness, positivity, happiness, social ties, self-improvement, and life optimization. All these motives further strengthen the transformational nature of wellness and the increasing need for balancing one’s life in order to reach one’s optimal self.

To answer the second research question, it can be argued that the optimal self encompasses finding one’s optimal state—i.e., the balanced self—and reflecting upon the inner journey of the self. Furthermore, finding balance has evolved into a key means of reaching the optimal self. Thus, it can be argued that *balance is the “New Black.”*

4.2.3 Wellness branding – A new means of promoting the optimal self

As indicated by the theoretical discussions presented in Chapter 2, the current means of status-seeking (e.g., self-branding) reflect contemporary Western societies in many ways, particularly with the younger generations. The need to produce the optimal self, the obsession with celebrities, fame, and publicity, as well as the ubiquity of social media echo what is valued in today’s societies (e.g., Kucharska & Mikolajczak 2018; Kowalczyk & Pounders 2016; Marwick 2010). Although self-branding represents a particularly overt form of self-commodification, in essence, it is about identity and lifestyle construction as well as self-promotion based on the authentic, true self. Moreover, it involves perceiving the self as a reflexive

project that must be entrepreneurial, self-regulated, and self-governed in order for one to reach one's optimal state (Marwick 2010; cf. Giddens 1991; Foucault 1988) and thus become intertwined with the core of wellness.

This theoretical conclusion is also supported by Article 4, within which it was proposed that the most recent context of self-branding is wellness, wherein self-branding is based on wellness identity and holistic self-improvement. A new concept—*wellness branding*—was introduced and defined as follows: “*Wellness branding is a process of identity and lifestyle construction as well as self-promotion through various practices of wellness and different forms of self-branding, the goal being to create and brand one's optimal—balanced—self.*”

To answer the third research question, it can be argued that both wellness and self-branding represent current forms of identity and lifestyle construction as well as self-promotion, and share an entrepreneurial view of the self. The logic of wellness branding, in turn, encompasses the creation of one's optimal, balanced self while communicating that self to others. Thus, it can be argued that *wellness branding has become a new means of promoting the optimal self.*

5 DISCUSSION AND CONCLUSIONS

5.1 Theoretical contribution

The current thesis investigated the multifaceted wellness phenomenon by discussing wellness consumption and lifestyle as a powerful means for transforming and branding oneself. The purpose is to enhance the theoretical and empirical understandings of wellness consumption and lifestyle in reaching the optimal self and thus illustrate the inner journey of the self. Wellness was investigated in relation to various theoretical discussions—i.e., the conception of a good life and human potential, a form of transformative consumption, self-enhancing lifestyle, and self-investment strategy, an element of identity and lifestyle construction, as well as a new means of branding oneself. Accordingly, this thesis also drew from three theoretical standpoints comprising positive psychology, marketing and consumer research, and sociology.

The thesis represents a phenomenon-based research approach on a highly topical and significant marketing and consumer phenomenon (wellness consumption and lifestyle) that has long-term and substantial effects on all individual, societal, and environmental levels. Characteristics of phenomenon-based research as well as the prior knowledge and understanding on wellness consumption and lifestyle have been very limited. Therefore, wellness was investigated and interpreted through three different lenses, all of which accumulated the understanding. The phenomenon-based research approach can be considered one of the main contributions of the current thesis. Relying on existing theories and hypotheses would not have been an optimal manner of approach toward understanding and explaining the newly emerged and rapidly evolving real-world wellness phenomenon. Instead, a multidisciplinary, mixed-methods, and pragmatic approach was chosen to shed light and create new understanding of wellness.

Wellness can be considered an example par excellence of a wider, ongoing societal and economic transition (Figure 13) that is currently in effect in the Western societies (Boswijk et al. 2013). This transition can be approached from the perspectives of both consumers and service providers. The former appears as a shift in consumer behavior from materialism to experiential consumption and onwards, thus pursuing self-actualization and deeper meanings in life. The latter, in contrast, can be seen as a shift from traditional means of value creation from goods-dominant logic to service-dominant/service logic and customer-dominant logic onwards

to social marketing, which acknowledges the wider societal meanings and responsibilities of marketing management.

	1950s	1970s	1980s	1990s	2000s	2010s	2020s	2030s
CONSUMER PERSPECTIVE								
<i>View:</i>	local	global	context	transformation				
<i>Captive idea:</i>	prosperity/modernity	experience/explore	self-actualization	integration/meaning				
<i>Quest:</i>	modernizing one's life	trying new lifestyles	realizing one's passion	striving for harmony				
<i>Effect:</i>	industriousness, family life	work hard, play hard	development of talents	balanced living				
<i>Skills:</i>	efficient productivity	experimental openness	creative thinking	embracing transformation				
<i>Approach:</i>	follow cultural codes	break social taboos	follow dreams and aspirations	ethics and codes, empathy				
BUSINESS PERSPECTIVE								
<i>Focus:</i>	product/service	experience	creativity	meaning				
<i>Economic impetus:</i>	manufacturing driven	marketing/brand driven	people/network	global responsibility driven				
<i>Qualities:</i>	physical products, passive-receptive	emotions, interactive	life tools, co-creative	ethical, inclusive				
<i>Value proposition:</i>	delivery of commodities	delivery of experiences	fulfillment of human potential	ethical, meaningful value				
<i>Offering specificity:</i>	mass market available	targeted accessible	personalized, co-creative	socially meaningful, sustainable				
<i>Approach:</i>	persuade to purchase	engage, entice	empower participation	promote social inclusion				

Figure 13. Societal and economic change in Western societies (Boswijk et al. 2013)

In the current thesis, the three theoretical lenses formed a *kaleidoscope* through which this evolution was examined and interpreted. Wellness consumption and lifestyle were discussed through the shift from (1) hedonic to eudaimonic approaches to wellness, (2) hedonic consumer research to TCR, and (3) materialistic consumer culture to more immaterialistic self-care culture. Through these perspectives, the theoretical contribution of the thesis focused on TCR and self-branding literature with a goal of reviving Aristotle’s ancient principle ideas—living well, virtues, common good, balance, practical wisdom, and harmony—which still remain valid and are currently likely to be more topical issues than ever before.

The thesis contributes to TCR literature by discussing wellness as a form of transformative consumption, self-enhancing lifestyle, and self-investment strategy. The main aim of TCR is to examine various individual and societal problems and opportunities related to consumer behavior and consumption with the goal of improving consumer well-being (Mick et al. 2012; Mick 2006). However, wellness as a holistic, positive, and preventative practice related to consumption and lifestyle has not previously been addressed in the TCR literature. In the current thesis, the following definition of wellness was proposed: *wellness refers to a holistic and positive approach to health, emphasizing self-responsibility and illness prevention with a focus on optimal health in reaching the “optimal self.”*

The notion of the *optimal self* is rooted in the ethical, philosophical tradition of eudaimonism derived from Aristotle (4th century BCE/1985). The fundamental idea of the philosophy is that true happiness equates to *living well* and requires that one identifies one’s *virtues*, cultivates them, and lives well in accordance with those virtues. Moreover, individuals should develop what is best within themselves and then use these virtues to serve the *common good*, such as the welfare of others and society (cf. Mick et al. 2012; Peterson et al. 2005). A good and meaningful life is pursued through authenticity, meaning, excellence, and growth that all aim toward the realization of one’s optimal potential.

In the current thesis, the optimal self is defined as *an individual’s dynamic growth process with the aim of finding one’s optimal state—i.e., the balanced self*. The optimal self is, thus, based on a combination of body, mind, and spirit/soul which is surrounded by a continuum of energy and development (Figure 14; cf. Dunn 1961).

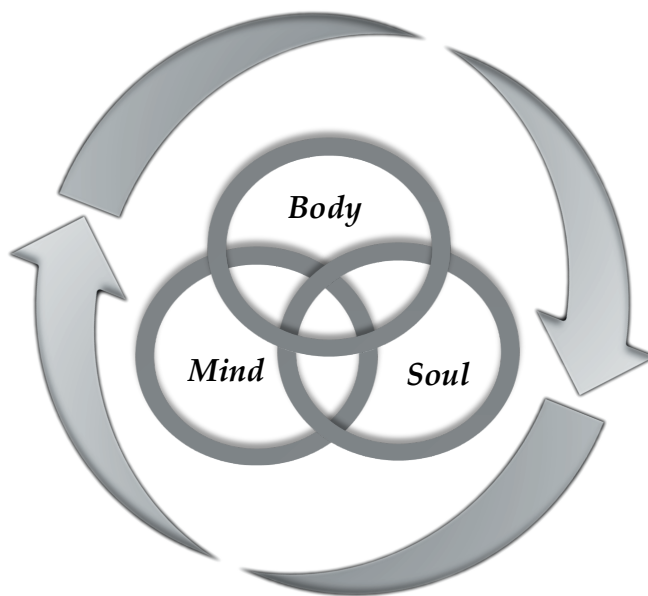


Figure 14. A schematic representation of the optimal self

This leads to the key notions of the current thesis (*balance* and practical wisdom), which are also focal in the current era and are challenged by various economic, societal, and environmental dilemmas. In response to the question “*Can consumers be wise?*” as proposed by Mick and Schwartz (2012), “*yes*” is appropriate only if the consumers can be educated to be wiser either by themselves or by society, if they have the right values, and if they are motivated and keen on learning new things. Only through these aspects may consumers be considered wiser and capable of conducting better judgments, decisions, and behaviors.

The consideration of wellness as a form of transformative consumption, self-enhancing lifestyle, and self-investment strategy mirrors *practical wisdom*. It *empowers* consumers to make conscious decisions concerning the adoption of healthy behaviors by favoring less materialistic consumption or making more sustainable consumption decisions. By becoming aware of and engaging in self-enhancing and sustainable practices, consumers have the opportunity to construct an identity that serves not only their individual purposes, but also the common good. However, pursuing the *harmony* of the body, mind, and spirit/soul requires practical wisdom regarding goals, personal expectations, and consumption practices. A holistic, practical understanding of wellness is needed to prevent an extreme, narrow scope of efforts causing unwanted effects on general well-being.

The current thesis also contributes to self-branding literature by introducing wellness as a new means and context for self-branding. To summarize the previous literature regarding the interface of wellness and self-branding, it was determined that both wellness and self-branding represent current forms of identity and lifestyle construction as well as self-promotion based on the *authentic, true self*. Moreover, both wellness and self-branding take an *entrepreneurial view of the self*; the self is seen as a reflexive project that must be self-regulated and self-governed (Marwick 2010; cf. Giddens 1991; Foucault 1988). In the current thesis, self-branding is defined as *a process that emphasizes an individual taking control of one’s authentic, true self, and the impression one makes when communicating that self to others*.

The thesis presents a trajectory of self-branding by reflecting different contexts of self-branding across multiple periods of time. It is contented that the evolutions of wellness and self-branding share similar characteristics. Today, wellness represents a holistic, positive state featuring body, mind, and spirit/soul, thus acknowledging the well-being of both the individual and society. In contrast, self-branding has evolved from a professional context—stressing professional identity and social differentiation—to an online context emphasizing increasing social identity and social integration. Investing in and communicating about a vital and attractive self are essential features of both wellness and self-branding.

Based on the above, it can be argued that the most recent context of self-branding is *wellness*, which is based on *wellness identity* and the importance of *holistic*

self-improvement. This interpretation emerged from the previous literature pointing out the increasing role of self-care culture and the need to transform and brand oneself toward the optimal state to fulfill the demands and expectations of oneself and of society. A new concept—*wellness branding*—which has not been previously addressed in the academic literature, is introduced in the current thesis as follows: *wellness branding is a process of identity and lifestyle construction as well as self-promotion through various practices of wellness and different forms of self-branding, the goal being to create and brand one's optimal—balanced—self*. The logic of wellness branding, as illustrated in the thesis, encompasses the creation of one's optimal, balanced self while communicating that self to others.

To combine and summarize the theoretical contribution regarding wellness, eudaimonia, and wellness branding, what is actually being wellness branded is the “*eu*” and “*daimon*”—*the good and healthy, true, balanced self*.

5.2 Managerial implications

The managerial implications of the current thesis culminate into an understanding of how the booming wellness industry and the societal and economic transition shape consumer behavior as well as how service providers can respond to these changes. Here, the managerial implications are summarized into changing consumer behavior, digitalization, and business opportunities offered by wellness branding.

The changes in consumer behavior from materialism to immaterialism and from the pursuit of hedonic to increasingly eudaimonic experiences illustrate the progression of value creation from products to services and from emotional experiences to a more profound transformation of the self. The emergence of the experience economy (Pine & Gilmore 1999) and the wellness revolution (Pilzer 2002) started gaining ground two decades ago in the U.S. Back then, both phenomena were mainly based on hedonic and experiential consumption, emphasizing enjoyment and pleasure as well as emotions and sensations, as previously predicted by Toffler (1980) during the 1970s. As a response to the experience economy, service providers invested in customer service and esthetic experiencescapes; in the wellness industry, this phase was illustrated by various indulgence-based services focusing mainly on passive pampering, such as spa and beauty treatments.

Today, the experience economy's competitive advantage is increasingly moving toward the *transformation economy*—i.e., the *economy of meanings*. In addition, the global wellness industry has evolved to its next phase, within which hedonic experiences are no longer sufficient in and by themselves. This has also become evident through the various meanings of physical activity presented in Arti-

cles 2 and 3 as well as through the various meanings of wellness presented in Article 4. Rather than being an object of consumption and a receiver of value, the consumer now must be considered the subject of consumption and must actively embrace personal transformations.

Additionally in line with the research articles' findings, many current wellness trends are rooted in authenticity, nature, and the search of the inner self. "Sauna reinvented," "Silence," "The future is mental wellness," "Mushrooms emerge from underground," "A new era of transformative wellness travel," and "Wellness meets happiness" are examples of the current and future wellness trends predicted by the Global Wellness Summit (2018; 2017), all of which echo the strive for harmony and the pursuit of balanced living. In the ever more affluent Western societies, *the basics* have become the core value (cf. Maslow 1954). One of the major managerial challenges regards how to brand products, services, and transformational experiences such that they align with consumers' highly individualistic values and resonate with consumers' authentic, true selves.

Digitalization and the possibilities of new technologies are transforming the world in many ways namely by shaping the wellness industry. It has been argued that we are entering an era of the *technologies of the self* and are moving toward techniques for controlling one's body, thoughts, and behaviors (Bosshart et al. 2018; Lupton 2016; cf. Foucault 1988). The opportunities presented by technological advances have expanded and created new, previously unknown needs. Body, mind, and spirit/soul are being decoded. One of the major trends in future wellness involves a shift from "Buddhism to data Buddhism," referring to a metaphor in the wellness industry for any service inspired by Eastern philosophies and doctrines of a *good life* (ibid. 2018). Transformational practices such as yoga, meditation, and *mindfulness* aim to achieve peace of mind and the *true self*. The ever-increasing importance of the true, balanced self is also emphasized in the current thesis.

Today, the understanding of wellness has broadened to cover, rather than health exclusively, the additional desire of well-being, happiness, and quality of life (e.g., Seligman 2012). This shift is based on an improved standard of living and changes in consumer behavior, stressing the importance of individual choices and lifestyles as well as the growing interest in the self. This has extended the scope of the wellness industry, although it has simultaneously presented new challenges; the industry's reactions to new requirements, such as data-driven self-enhancement, are insufficient; the industry itself needs to be *proactive and positive* (cf. Bosshart et al. 2018). This calls for innovativeness and open-mindedness, the development of unique products and services, and the creation of new brands with deeper meanings, all of which should feature high-tech insight.

The other major trend shaping future wellness is "data selfies." As presented in the thesis, we are living in a *selfie culture*. With smartphones and social networking sites, the self-portrait (i.e., *self-image*) has become one of the dominant forms

of communication. It has even been argued that how we present ourselves online is who we are (Bosshart et al. 2018). In the future, these outward self-images will be supplemented by the addition of new data from individuals' inner lives, collected from various sources and measured through various aspects of our lives—from physiological aspects to moods and emotions. Digital technology does not only showcase individuals' physiological or emotional statuses, but enables the long-term follow-up of a number of parameters that may assist in improving oneself.

The idea of the “data selfie” mirrors that of *wellness branding* as proposed in the current thesis. While the traditional photo selfie is static, the data selfie is considered *dynamic*. Moreover, while the photo selfie has often been viewed as selfish and narcissistic, at least to some extent, the data selfie tends to reveal the *true image* of an individual. Digital data is meant to provide a true reflection of the tastes, longings, and activities specific to an individual, thereby enabling the observation of oneself from a range of diverse perspectives (ibid. 2018). The core idea of both wellness branding and the data selfie is to present a positive self-image reflecting the true self. In the majority of cases, this implies a healthy, capable, and fit image that reflects the values of an individual or even a company. As contended in Article 4, wellness branding is an important managerial issue because, in the future, the principles of wellness branding are likely to be adopted and employed further in both *employer branding* and *employee branding*. Thus, wellness branding may also facilitate profit for both businesses and their employees in a novel way.

5.3 Societal implications

The societal implications of the current thesis can be captured in the changing nature of the wellness industry, healthcare sector, and digitalization. While the wellness industry was considered to be different from the healthcare sector (i.e., the sickness industry) in the early 2000s (Pilzer 2002), today, these sectors are no longer considered opposites, but rather interdependent elements. Digitalization and the advent of new technologies are bridging wellness with healthcare in various ways and at impressive rates.

As described in the thesis, self-tracking, in its current form and as an outcome of digitalization, has increased in importance during recent years. Self-tracking emphasizes self-responsibility and self-management. The self is viewed as a responsible, entrepreneurial self who actively tries to avoid ill behavior and attempts to govern the self by monitoring and managing one's own health and other aspects of life (e.g., Lupton 2017; cf. Foucault 1988). Gaining self-knowledge (i.e., practical wisdom) is important for self-management, as understanding patterns in one's

life is the starting point for making changes in order to optimize one's life (Lupton 2013).

Self-tracking, as a self-governance practice, is currently advancing toward broader public arenas. The concept of "*patient engagement*" has frequently been used in reference to individuals—or patients—undertaking self-monitoring and self-care practices using digitalized devices (Lupton 2015). For example, individuals with chronic illness, such as diabetes, high blood pressure, or mental health problems, can use mobile self-monitoring devices and apps to engage in self-care (Lupton 2017). Self-tracking has also been connected with preventative medicine and health promotion as part of preventing disease that is believed to be lifestyle dependent (Lupton 2014a; 2014b; Swan 2012). This may, however, create black and white attitudes and, accordingly, individuals who participate as responsible citizens are able to demonstrate their adherence to these ideals, while individuals who neither have the same opportunities nor possess the same health literacies may be regarded as failing to achieve their optimal or best selves.

In addition to healthcare and health promotion, self-tracking has become an aspect of educational agendas and corporate wellness programs to *maximize employee productivity* and *decrease the health insurance expenditures* (Lupton 2016; 2013). Furthermore, the potential to promote self-tracking as self-responsibility and preventative practices has received increasing attention in government policies. Encouraging people to engage in preventative, holistic self-care practices not only promotes individual wellness, but benefits the whole society by significantly *decreasing healthcare expenditures* (Lupton 2013).

Today, there is growing evidence that vitality and longevity, often considered main goals in life, are greatly influenced by external factors such as socioeconomic status, education, access to healthcare, and the physical environment in which an individual lives. These external factors together with the wellness industry form a "*wellness ecosystem*" that nurtures the wellness lifestyle and longevity (GWI 2018a). However, one of the major concerns associated with wellness behavior is the increase in *social inequality*. Wellness, whether referring to products, services, experiences, or mindsets, may not be available to and/or affordable for everyone. If individuals are not provided for and supported by their employers, communities, or states, their participation in self-care and adoption of the wellness lifestyle will become dependent upon each individual's education and economic resources in most cases. This will increase social inequality and is likely to also increase divergences in the profiles and frequencies of lifestyle-associated illness.

5.4 Limitations and suggestions for future research

During the research process of the current thesis, the wellness phenomenon has evolved at a significant pace and has further strengthened the idea that wellness consumption and lifestyle are phenomena worth investigating. However, this has also raised some challenges. The lack of a solid theoretical basis on wellness consumption within marketing and consumer research has resulted in constant external questioning and an internal need to justify the significance of the research theme. For a young scholar, it would have been easier to choose a topic with a longer research tradition, collect a single dataset, and analyze it using a methodology based on certain ontological and epistemological assumptions.

However, since the beginning of my research, I have been fascinated by the emerging wellness phenomenon that has been expanding in scale and scope and has been considerably affecting consumer behavior. Becoming acquainted with phenomenon-based research that focuses on significant and rapidly changing real-world phenomena encouraged me to continue with the chosen track. In addition, the multidisciplinary research cooperation and the ever-increasing call for more phenomenon-based research from scholars within different disciplines further strengthened my decision.

The phenomenon-based research approach raises some limitations that should be taken into consideration. As the phenomenon-based research is usually pragmatic and driven by research questions rather than by theoretical assumptions, a mixed-methods approach is often applied. Similarly, in the current thesis, the practical nature of the research topic and the proposed research questions required the use of a mixed methods approach. Therefore, the thesis as a whole can be considered as leaning on a mixed-methods approach. Even though each of the individual research articles followed a single methodology—either quantitative or qualitative—the variety of methods is bound to result in certain methodological incoherence regarding the whole thesis.

The current thesis also represents a Western perspective on wellness, which is generally characterized by a highly individualistic and consumption-centric view. The data collection took place in Finland and in the U.S., both of which represent affluent, high-income Western societies. Therefore, the data contributes knowledge on wellness in the Western world, yet they cannot be generalized globally. However, the ancient origins of wellness rooted in the Ayurveda practices and traditional Chinese medicine are discussed in the thesis. The Asian ideas of holistic practices and the harmony of the body, mind, and spirit/soul have become more popular than ever before in the Western world, which has also been reflected in the current thesis.

Another major limitation concerns the university setting of empirical data collection. Three of four research articles utilized datasets, either quantitative or qualitative, which were collected among university students and staff members in Finland and in the U.S. This is likely to result in a somewhat biased view on wellness consumption and lifestyle. Education, in particular, is often related to improved awareness of and interest in wellness practices as well as the care of the self (cf. Lupton 2016; Smith Maguire 2008). On the other hand, these well-educated informants are likely to be situated at the frontline of the wellness movement, as they are the healthy and wealthy future wellness consumers.

Regarding the future research directions of wellness consumption and lifestyle, there is a considerable lack of existing research on the cultural differences that consider the premises and practices of wellness consumption and lifestyle. The booming, outbound tourism from China and other Asian countries namely calls for more research regarding how wellness is understood and interpreted in Asian cultures as well as what kinds of products and services respond to the needs of Asian wellness tourists. In a wider sense, more research concerning how the current wellness ideology and practices, such as K-beauty, influence the Western wellness market is additionally needed.

Furthermore, the combination of ever-increasing digitalization, technological innovations, and novel, more diverse consumer segments entering the market gives way to various fascinating research themes. In the wake of Millennials, another intriguing consumer segment is currently emerging. Generation Z, referring to individuals born in the late 1990s—and already representing one-fourth of the US population (Woo 2018)—is the first all-digital generation having grown up with social media and the pressure to look “Insta-worthy” (WM 2016). These young consumers are obsessed with celebrities, fame, and publicity as means for providing them with the best possible impressions of themselves; at the same time, however, these individuals are extremely keen on presenting their authentic selves to others. The data selfies of this ethnically diverse and socially progressive consumer segment is likely to truly adopt the idea of wellness branding and, rather than present the superficial self, promote the good and healthy true self.

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Annales Universitatis Turkuensis



Turun yliopisto
University of Turku

ISBN 978-951-29-7584-6 (PRINT)
ISBN 978-951-29-7585-3 (PDF)
ISSN 2343-3159 (PRINT) | ISSN 2343-3167 (PDF)