

Researching Contemporary Wellness Cultures

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Researching Contemporary Wellness Cultures

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INVESTOR IN PEOPLE

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About the Contributors

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Edith Hill is an Associate Lecturer and Writer at Flinders University. Her research is concerned with online life narratives of health, illness and wellness, with a specific focus on YouTube, Instagram and TikTok. She investigated the ethics of representing children's health online, the role of health professionals in online spaces and health and wellness hoaxes. Her memoir in progress *Granny Squares* was recently shortlisted for the Deep Creek residency fellowship. She is affiliated with the Life Narrative Lab.

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Alexandra Smith is a medical anthropologist working across both the academic and health service spheres, with a focus on research in cancer, palliative care, the experiences of regional, rural and remote patient populations and an interest in the intersection of new materialism and feminist post-structuralism in comprehending bodies and body work. As a Postdoctoral Fellow at the University of Queensland, she is engaged in qualitative research currently focussed on medicinal cannabis, advanced cancer, palliative care, and patient experiences. She also works within the health service setting managing a clinical trials unit in a regional hospital, and engaging with patients and clinical staff to facilitate trial participation and clinical research opportunities.

Jay Daniel Thompson is a Senior Lecturer in Professional Communication at RMIT University. His research asks what ‘ethical online communication’ might look like, and how this might assist in mitigating digital hostility and networked disinformation to create safer online spaces for media professionals and consumers. Dr. Thompson is the co-author of two books, both published in 2022: *Fake News in Digital Cultures* (Emerald Publishing; co-authored with Professor Rob Cover and Dr. Ashleigh Haw, RMIT University); and *Content Production for Digital Media* (Springer Nature; co-authored with Associate Professor John Weldon, Victoria University). He is currently under contract with Routledge to write a sole-authored monograph about the ethics of journalistic reportage on conspiracy actors.

Justine Topham is a Sociology PhD student at Federation University Australia (Mount Helen). Her Honours thesis focussed on the transformation of diet culture into wellness, as observed in YouTube *What I Eat In A Day* videos. She has a keen interest in wellness, self-improvement and social media and how these phenomena construct and shape our everyday experience.

Introduction: Researching Contemporary Wellness Cultures

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This book presents research that grapples with contemporary wellness culture, ranging from COVID-19 conspiracy framings (Haw, Thompson and Cover; Smith, Clark and Southerton) to more nebulous invocations of wellness and wellbeing in medical care (Smith, A., et al.). The diversity of contributions to this edited collection reflects the complexity of contemporary wellness cultures, which makes it a rich site of sociological analysis but also a challenging phenomenon to define as it traverses conceptual and disciplinary boundaries.

Wellness has become a mainstream concept, a term easily and abundantly used in popular parlance. The term ‘wellness’ is a contemporary catch-all used to describe practices and discourses related to exercise, diet, ‘fitspiration’, mental health, sexuality and spirituality (Raphael, 2022). Increasingly ideas about, and indicators of, wellness are digitally mediated, and thus exist, in large part, outside of traditional medical settings. Given the increase in wellness advice and practice as a supplement to, or substitute for, mainstream health practice, it is crucial that we understand the role and impact of wellness on individuals’ health practices, and on conceptualisations of health more broadly. Incisive analyses and sociological understandings of how wellness functions as a concept in contemporary Western culture are needed to equip those who might consume, perform and ‘do’ wellness with the critical lens necessary to identify and perhaps circumvent the proverbial wolf in sheep’s clothing.

The idea of ‘wellness’ is now prevalent in much of contemporary society, and the value of the wellness industry is estimated at 4.4 trillion dollars (Raphael, 2022), growing from 3.7 trillion in 2015 (Blei, 2017). However, it is not without controversy. For example, Gwenyth Paltrow, founder and face of the GOOP wellness brand, was fined US\$145,000 for claims about their jade and rose quartz ‘yoni’ eggs which they claimed could balance hormones, increase bladder control and help regulate menstrual cycles (Helmore, 2017). Controversial Australian wellness figures such as Pete Evans (Baker, 2022a) and Belle Gibson

(Baker & Rojek, 2020) have also become the focus of intense media scrutiny and legal action. The COVID-19 pandemic laid bare the many contradictions and complexities of contemporary wellness culture. Wellness has assumed a level of cultural ubiquity precisely because of these contradictions and complexities, making it a fluid and adaptable set of discourses, beliefs and practices (Logan, 2017).

Despite critical media attention directed at these and other examples, there has been little impact on the momentous popularity of wellness practices and wellness-oriented consumer markets. In fact, ‘rational’ approaches that invoke scientific evidence to challenge or negotiate contested wellness claims have so far failed to quell the volume of wellness-related content and rate of consumption. We suggest this in part reflects the deeply embodied and affective investments that are easily made in the very idea of wellness in this particular socio-political and cultural moment.

In this collection, we seek to inhabit and explore the tensions that seemingly exist between the lived, bodily and sensory dimensions of wellness and the informational/educative focus of many interventions. This collection also explores the various ways and spaces in which wellness is constructed, produced, circulated and contested. The authors take up an array of conceptual and methodological perspectives to investigate the growing field of wellness practices and their entanglements with capitalist and industrial systems, and to interrogate the role of wellness as it is negotiated with and through popular discourse and conventional, Westernised notions of health and illness. In doing so, we hope to initiate an ongoing dialogue that incorporates multiple voices and perspectives and cultivate a corpus of work that maps, examines and seeks to understand the growth of ‘wellness’ as both a concept and a socio-political and deeply cultural embodied, affective practice.

What is Wellness, Exactly?

A considerable body of literature exists that invokes wellness as a social phenomenon, as a route to other social issues, like conspiracy, the alt-right and spirituality (see, e.g., Baker, 2022a; Heřmanová, 2022; LeClerc, 2022). This collection seeks to examine the specificities and granularities about what wellness is, what it does and how it manifests and is expressed through the minutia and mundanity of daily life and through our habits, routines and consumption practices. However, as Derkatch (2018, p. 134), points out, ‘wellness is always a moving target’, making it difficult to coalesce academic research in this area, let alone settle on a definition.

Historically concepts of wellness and attendant concepts of self-care can be traced back to organisations like the Black Panthers in the 1960s and 1970s to provide volunteer-led medical care to underserved black, urban communities (Baker, 2022b). This provides valuable context to Audre Lorde’s quote on self-care. In her book, *A Burst of Light*, Lorde (1988) describes self as a necessary, radical act, explaining that ‘Caring for myself is not self-indulgence, it is self-preservation, and that is an act of political warfare’ (p. 130).

In the fuller version of the quote, [Lorde \(1988\)](#) links her practice of self-care following her cancer diagnosis to her work in activism; she writes:

I had to examine, in my dreams as well as in my immune-function tests, the devastating effects of overextension. Overextending myself is not stretching myself. I had to accept how difficult it is to monitor the difference. Necessary for me as cutting down on sugar. Crucial. Physically. Psychically. Caring for myself is not self-indulgence, it is self-preservation, and that is an act of political warfare. (p. 130)

In seeking to define contemporary wellness practices, it is tempting to link them back to the radical, community-focussed and community-led formulations of the mid-20th century. While wellness practices remain forms of self-care, as with many other forms of community life they have been aggressively commoditised and neo-liberalism, recasting as individual solutions to individual problems. In this vein, author Rina [Raphael \(2022\)](#) argued that the large-scale adoption of wellness culture has been sold to us as the individual solutions to broad-scale social problems. As work hours intensify in the USA, the wellness industry has grown too. With continuous political and social upheaval, we have increasingly turned to wellness practices as a way of meeting the untenable demands of late capitalist society.

The sprawling nature of contemporary wellness cultures makes it difficult to pin down, as researchers such as [Baker \(2022b\)](#) have acknowledged. We encounter it in work and leisure places, outside of domains typically associated with health. Here, we turn to [Raphael's \(2022\)](#) definition of wellness,

At its most basic level, it's the active pursuit of wellbeing outside of the realm of medicine. It's more than just avoiding sickness; it encompasses prevention and maintenance: nutrition, fitness, sleep, community support, and stress management. It's the choices we make to feel better physically, mentally, socially, and spiritually. (p. 4)

Initially, wellness was conceived in opposition to the medical model of health and illness. As Dr John Travis, who established the first wellness centre in California in 1975 explained to *60 Minutes*, wellness is 'recognising that there is more to life than the absence of sickness; that health is not the absence of disease, it is an ongoing dynamic state of growth' ([Zimmer, 2010](#), n.p.). In rejecting the idea that an absence of disease is the marker of health, Travis sets the stage for the constant imperative towards self-optimisation, or enhancement that lies at the heart of many contemporary wellness offerings. In [Raphael's \(2022\)](#) definition, we can also see how wellness intersects with concepts of wellbeing. In many instances, the terms are used interchangeably, or alongside each other in ways that make it difficult to disentangle them. Frequently biomedical measures of wellbeing do not account for social and emotional wellbeing at all (see Smith et al., this volume). Generally speaking, wellbeing has been more comprehensively operationalised in the academic literature; psychological and sociological scholarship has developed measures to assess our sense of wellbeing, both mentally and physically. Such

measures may also assess how connected we are socially, how happy in our job and how meaningful we find it. We argue that measures of wellbeing assess our ‘state of being’. Wellness cultures, on the other hand, tend to be practices, things that can be packaged and consumed, in pursuit of a better self and body. However, increasingly wellness practices are being used as proxies for wellbeing, for example, in the workplace. As [Raphael \(2022\)](#) points out, the availability of wellness practices in the workplace does not necessarily correspond with employee wellbeing.

[Purser’s \(2019\)](#) book *McMindfulness*, while focussed on the domestication of mindfulness into neoliberal modes of work and wellbeing also provides incisive critiques that are applicable to contemporary wellness cultures. In explaining how mindfulness has ‘depoliticised and privatised stress’ he emphasises that, ‘If we are unhappy about being unemployed, losing our health insurance, and seeing our children incur massive debt through college loans, it is our responsibility to learn to be more mindful’ ([Purser, 2019](#), p. 11). Likewise, wellness culture locates the problem within the individual, not society. [Raphael \(2022\)](#) identified the key domains of wellness culture as nutrition, exercise and stress management, all areas explored by the authors in this book. On the surface, this multi-dimensional approach to wellness seems to be more holistic than many Western approaches to health and wellbeing, considering the whole person. In reality, it often looks like an ‘unrelenting loop of maintenance’ ([Raphael, 2022](#), p. 5), disguised as self-care.

The language of enhancement, self-optimisation and continuous improvement has been embedded in conceptualisations of wellness culture from the beginning. [Dunn \(1959\)](#) who first coined and defined the term wellness defines wellness, or what he calls high-level wellness as ‘a condition of change in which the individual moves forward, climbing toward a higher potential of functioning’ (p. 447). Indeed, [Dunn \(1959\)](#) avoids defining an optimum level of wellness, but rather suggests there is a continuous upward trajectory that is both ‘open ended’ and ‘ever expanding’ (p. 447). He also lays the groundwork for the totalising whole person approach that has come to signify wellness culture, arguing that wellness encompasses the mind, body and spirit. In focussing on the individual as the site of high-level wellness activity the links between the individualisation of health and the yet-to-come self-responsibilisation of neoliberalism are established. The emphasis on being ‘better than well’ has resulted in an orientation towards health and wellness which [Derkatch \(2018\)](#) describes as ‘a state of incipient illness that requires careful observation and intervention’ (p. 139). The emphasis is on the preservation and maintenance of health rather than treatment for sickness, disease or disorder. Entangled with the potent neoliberal logics of the self-responsible individual wellness ‘goes from being a general idea of feeling good, to something that ought to do in order to live truthfully and righteously’ ([Cederström & Spicer, 2015](#), p. 6).

Why Study Wellness?

While its ubiquity as a concept and as a practice make it difficult to pin down, we argue it is important to study contemporary wellness cultures in their own right, not just as entry points to other social issues. For example, it is tempting to

contextualise the importance of wellness research by pointing to the wellness to alt-right pipeline or medical misinformation. While these issues are undoubtedly an important part of understanding the complexity of contemporary wellness cultures, we argue that studying wellness has much to offer our understanding of contemporary society. As Purser (2019) points out, the idea that we should each take charge of our own self-care ‘leave people reliant on self-governance to manage their stress and help them thrive’ (p. 30). The focus on the self redirects attention from the myriad of inequalities and injustices in contemporary society. Contemporary society is broadly neoliberal, and generally speaking the neoliberal impetus has been to diminish collective social structures to make way for markets (Bourdieu, 1998). As highlighted by Downing (this volume) companies have enthusiastically embraced wellness practices, specifically mindfulness as part of their brand and company ethos. Following from this is an emphasis on the individual as entrepreneurial, self-governing and self-reliant. It is these concerns our authors grapple with.

Wellness, Whiteness and Conspiracy Cultures

We have organised the book according to three broad themes. The first, *Wellness, Whiteness and Conspiracy Cultures* explores how wellness is also entangled with conspiracy and misinformation in complex ways, which also draw on processes of racialisation and whiteness to flourish. This section opens with Halahoff, Fitzpatrick and Rocha’s examination of (con)spirituality within wellness cultures. As highlighted elsewhere in this volume (e.g. Smith, Clark and Southerton), wellness practices are often associated with vaccine refusal. In exploring the links between holistic spirituality and wellness, Halahoff et al. draw important attention to how these beliefs are lived in practice. Contemporary wellness cultures often emphasise a contemporary (and again neoliberal) emphasis on the individual and their bodily sovereignty. They explore how wellness cultures map onto Durkheim’s dichotomy between the sacred and the profane. Rejection of vaccines is associated with keeping the body pure and pristine, logics that also flow through other wellness practices like clean eating. While some participants were strong proponents of bodily sovereignty and vaccine refusal, others emphasised the importance of community and care in their decision to get vaccination, describing (con)spiritualists as a noisy minority. Halahoff et al. take seriously the wellness movement’s (often legitimate) critiques of Western institutions like biomedical and agriculture. In this way, they resonate with the work conducted by Smith A. et al. who also highlight the need for an ontological shift within biomedical understandings of wellbeing.

As a series of practices that are often positioned in opposition to established orthodoxy. Wellness cultures can provide fertile ground for misinformation and conspiracy theorising to flourish. Haw, Thompson and Cover (this volume) highlight the entanglement of the digital and the materials in their explanation of misinformation and wellness cultures during the COVID-19 pandemic. They highlight the connection between wellness practice, COVID-19 misinformation and white supremacist attitudes, invoking concepts like ‘natural immunity’, which

ultimately produce and reproduce rhetoric about the ‘survival of the fittest’. These attitudes invariably map along classes and race lines, despite many wellness influencers at this time co-opting the language of social justice, a call back to the roots of wellness culture (Baker, 2022b). In addition to the naturalisation of white supremacist attitudes, wellness influencers peddled virus ‘cures’ to the public while eschewing vaccination and other evidence-based prevention strategies (Haw, Thompson, & Cover, this volume). However, as picked up by other chapters in this book (see Halahoff et al.), wellness cultures are not simply resistant to conventional medical practices. Rather they exist in a complex and at times contradictory relationship with Western medical practices; speaking to its gaps and failures. As a way forward out of the self-reinforcing loops that imbricate wellness and health mis/information Haw, Thompson and Cover suggest adopting a social ecology model that focusses on collective care in contrast present highly individualised strategies. As Halahoff et al. also find, wellness communities can and do emphasise mutual care and responsibility, de-emphasising and delegitimising the individual-level misinformation that often permeates wellness communities online.

Continuing the discussion on the relationship between healthism, wellness culture and medical misinformation, our (the editor’s) chapter delves into the notion of the ‘fit and healthy’ body and its role in fuelling COVID-19 vaccine hesitancy. The chapter examines how bodily ‘wellness’ became intertwined with vaccine hesitancy discourse. Public health information throughout the pandemic has emphasised the virus is more threatening to ‘vulnerable’ populations, those with pre-existing health conditions and older people (World Health Organization, 2023). However, the interpretation of this information through popular discourse has been filtered through the lens of neoliberalism. Analysing media discourse during the pandemic, this chapter explores the way that fitness, a ‘healthy diet’ and other wellness practices were frequently presented as protective against the virus. The mainstreaming of this narrative that individuals are responsible for their own susceptibility for the virus, and should manage this risk through wellness practices, also opened a significant gateway for vaccine hesitancy as right-wing vaccine sceptics readily took up these same logics. In this chapter, we argue that for many vaccine-hesitant people, the risk of the COVID-19 virus is weighed against perceived risks associated with vaccines, often fuelled by medical misinformation, and against belief in ‘optimised’ and ‘fit’ bodies that are seen to have a greater capacity to fend off illness.

Lived Wellness Practices

Not all wellness practices are subsumed by conspiracy cultures, they are also lived and shaped by the ontologies of biomedical knowledge, experienced through workplaces and shape our encounters with pleasurable practices. Firstly in this section, Alexandra Smith et al. aim to ground wellness and wellbeing discourse in a medical context, with their rapid review highlighting how the social is often left out of medical considerations of wellbeing. In highlighting how the social

dimensions are often left out of cancer care, Smith et al. underscore much of the lure wellness of cultures, which are often characterised by their care for the person, beyond their symptoms (Sointu, 2011). In order to bring the beneficial aspects of wellness culture into the biomedical system, much depends on being able to robustly measure wellbeing. However, as Alexandra Smith et al. highlight, these models are often Eurocentric, and individualistic, and adopt a dualistic approach to the mind and body. Alexandra Smith et al. emphasise that wellbeing in a cancer care context and beyond needs to advance beyond treating symptoms, where the social and emotional are treated as dependent variables of the physical. Picking on a thread that runs through many chapters in this volume, Alexandra Smith and colleagues, stress the importance of attending to embodied and sensory states in biomedical models of care that incorporate human and non-human actors. In theorising how such an emphasis might play out in the biomedical context, Alexandra Smith et al. call for an ontological shift in how wellbeing is conceptualised in a biomedical context. Such a shift is virtually important if biomedical approaches are to compete with the embodied, affective care given through wellness cultures and practices, even while such practice may include medical misinformation and be ultimately detrimental to patient outcomes.

Leanne Downing explores the zeal with which employers have embraced the wellness movement and re-evaluates the affective dimensions of mindfulness within the context of the contemporary, neoliberal workplace. Guided by Lauren Berlant's concept of cruel optimism, Downing takes Google's Search Inside Yourself Leadership Institute as a case study and subjects it to a theoretically informed critique. Berlant's cruel optimism helps to articulate how and why individuals are often compelled to make emotional and embodied investments into particular social norms and pursuits that ultimately work against their own wellbeing. Downing's analysis highlights how this logic is at work in the persistent rhetoric of 'employee wellbeing' and accounts for the embodied and affective ways such messaging takes hold. Ultimately, the discursive deployment of such messaging works to frame employee experiences of dissatisfaction or stress as individual shortcomings and overlooks the broader socio-political and economic conditions that contribute to employee burnout. Doing so, argues Downing, assigns responsibility for wellbeing to the individual, who seemingly willingly undertakes a cruelly optimistic quest for wellness, and absolves employers of any responsibility for the conditions that might actively deter this pursuit.

Concluding our discussion of wellness practices is an innovative contribution from Naomi Smith et al. that delves into the entanglement of wellness practices, self-optimisation and neoliberalism. They introduce the concept of 'wellness washing' to describe the way that activities that are pleasurable have come to be reframed as virtuous through the language of 'self-care' and self-improvement. Wellness washing is an instrumentalising logic that refuses pleasure for pleasure's sake, instead redirecting pleasure towards more productive and 'morally good' ends. Naomi Smith et al. explore how neoliberal logics co-opt pleasure to redirect responsibility for health to the individual. Pleasure becomes yet another 'responsibility' and element of 'self-care' that one *must* engage in to be a morally good and healthy citizen. The proliferation of corporate wellness programmes

recommending ‘self-care’ as a remedy for stress demonstrates the way broader social problems impacting large groups become individualised as personal responsibilities (and failings). Naomi Smith and colleagues draw on two fascinating case studies, ASMR (autonomous sensory meridian response) and digital drugs, to explore how these practices have largely resisted wellness washing and to interrogate how they continue to occupy an ambiguous place between wellness culture and self-optimisation, where pleasure can be foregrounded.

The ‘Wellness Body’, Food and Diet Culture

Wellness cultures are materialised in and through bodies, and it is that materialisation which is the focus of this final section. To begin, Davies offers a rich and thoughtful exploration of how wellness practices are navigated at the everyday level in her chapter, focussed on Asian-Australian women. She offers detailed vignettes examining her participants’ encounters with wellness culture to examine how these women navigate digital platforms such as TikTok and Instagram, as well as their daily practices. Davies argues that wellness cultures and practices often depict their consumer as middle-class, white, thin and able-bodied, promoting an alienating feminine ideal for her participants. For Asian diasporic women the pervasive pressure to meet Eurocentric beauty standards can also become layered within wellness practices that are often obscured in the language of healthism. Davies’ chapter adds nuanced context to the everyday experience of wellness culture for Asian-Australian women: the assemblage of discourses, relations and material objects, which intersect with broader structural forces including gender, class and race. This chapter also refuses any binary thinking about wellness cultures as either wholly damaging or entirely helpful, instead tracing the messy paths participants forged through the wellness landscape. Some participants described drawing on wellness influencers for a closer connection to their cultural roots, others identified mental health influencers on social media as helpful and culturally resonant. For others, contemporary wellness culture was marked by white, thin bodies that represented the white Australian feminine ideal, feeding self-critique that had persisted since childhood. Davies’ thoughtfully explores the ways participants struggle with, resist, and internalise racialised gender norms through their wellness practices.

Exploring the flexibility and adaptability of wellness practices to respond to cultural shifts, Topham’s chapter explores YouTube ‘What I Eat In A Day’ (WIEIAD). The videos, which narrate the author’s diet choices throughout the day, have become a popular format across social media platforms. The format usually implies a relationship between the health of the creator and the food consumed throughout the day, with exercise and time of rising and sleeping also often included. Topham provides a thoughtful discourse analysis of the videos to examine how contemporary creators seek to position themselves away from restrictive diet culture. She compellingly argues that recent cultural shifts leading to a backlash against more obvious forms of caloric restriction have rendered overt dieting unpalatable to audiences. As a result, many WIEIAD creators will now emphasise a shift towards ‘healthy’ eating, what ‘feels’ good, and ‘clean’