

WELLNESS AS VIRTUE:
MORALITY AND THE PURSUIT OF HEALTH

ABSTRACT.The interest and participation in health promotion and wellness activities has expanded greatly in the past two decades. The “wellness revolution,” especially in terms of diet and exercise, has been affected by both scientific findings and cultural changes. The paper examines how a particular aspect of culture, the moral meanings of health-promoting activities, contribute to the pursuit of wellness. Based on interviews with 54 self-identified wellness participants at a major university, we examine how health can be a moral discourse and the body a site for moral action. The paper suggests that wellness seekers engage in a profoundly moral discourse around health promotion, constructing a moral world of goods, bads and shoulds. Although there are some gender differences in particular wellness goals, engaging in wellness activities, independent of results, becomes seen as a good in itself. Thus, even apart from any health outcomes, the pursuit of virtue and a moral life is fundamentally an aspect of the pursuit of wellness.

For more than two decades there has been a virtual explosion in interest in health promotion and wellness in American society. As defined by one advocate, “wellness is conscious and deliberate approach to an advanced state of physical and psychological/spiritual health” (Ardell 1985: 38). Wellness is usually defined in terms of changing one’s lifestyle and adopting health promoting behaviors (e.g., Knowles 1977; Coriel, Levin and Jaco 1986). Millions of Americans regularly engage in exercise, eat healthier diets (low-fat, low-cholesterol, low-salt), stop smoking, and control their weight. Government reports (USDHEW 1979; USDHHS 1991) have exhorted people to adopt healthier lifestyles in the name of health promotion and disease prevention. The widespread participation in activities deemed health promoting is unprecedented (Goldstein 1992). As Barsky (1988) notes, our society has become fascinated and, among some segments, preoccupied with the pursuit of health and wellness.

The concern with improving health has a long history in American culture. The notion of improving oneself through health actions, the idea of self as a project (Fellman and Fellman 1981), and the connection of moderation and self-discipline (e.g., Gunderman 1990: 285) were common themes in the last century and were reflected in health promotion. Whorton (1982) chronicles the nineteenth century “crusaders for fitness” who championed health and personal salvation through diet and exercise. Included are reformers like Sylvester Graham, Horace Feltcher, John Henry Kellogg,

Charles W. Post and Bernarr McFadden. These health crusaders made many powerful claims to health and exhorted people to change their lifestyle, especially by eating particular foods or adopting specified exercise regimens, in order to reinvigorate the body and the spirit. These movements attracted many followers, largely among the middle classes, although in the nineteenth century fitness participation was not as widespread as it is today. Since the 1880s the tolerance for body weight and fatness have narrowed, making obesity deviant and creating dieting and weight loss as pathways to body redemption (Schwartz 1986).

Contemporary analysts suggest that these health crusaders gave voice to the nineteenth century cultural anxiety about the specter of the loss of vitality in modern society (Whorton 1982; Green 1986). Green (1986) suggests health reformers could see signs of social debility all around and promoted health activities as a form of cultural regeneration. The shaping of the (middle class) individual was the way in which the whole society would be shaped (Fellman and Fellman 1981). A metaphysical line was forged between health and the vitality of the nation. Physical development was seen as recharging vitality, and perhaps more importantly, a step toward human perfection.

The determinants of the current “wellness revolution” are not necessarily obvious. In some cases, such as smoking, it is clear that reports like the Surgeon General’s (1964) report *Smoking and Health* and its subsequent elaborations had a direct impact on changing the definitions of smoking as a health risk, on increasing restrictions on smoking in public places, and on the significant reduction in the number of smokers. On the other hand, with exercise the causal connection appears much less clear. Jogging and aerobics participation increased rapidly in the 1970s (Goldstein 1992), but the most compelling medical research on the benefits of vigorous exercise came considerably after the exercise boom was underway (Paffenbarger, Wing and Hyde 1978; Gillick 1984; Paffenbarger, Hyde, Wing and Hsieh 1986). While nutrition is a long-time health concern, and cholesterol and fat have been implicated by medical evidence as risk factors for heart disease (USDHHS 1991), the emergence of “natural foods,” “health foods,” and endless “lite” preparations has outpaced the scientific evidence, less reflecting scientific findings, than a cultural interest in more “natural” foods, and new corporate strategies for marketing food products. The important point here is that neither scientific medical findings nor government reports on health promotion are sufficient to explain the emergence of the broad-based interest and participation in wellness-oriented activities.

It seems likely that medical-scientific and socio-cultural factors both contribute to the emergence of wellness. While it is possible to point to

scientific research or government reports as precursors to the recent wellness phenomenon, they are only a part of an explanation. It is much more difficult to identify the cultural factors which underlie the widespread concern about and participation in wellness activities.

The purpose of this paper is to examine how a particular aspect of culture, the moral meanings of health-promoting activities, contribute to the pursuit of wellness. After reviewing the relationship between morality and health, I analyze data from a sample of college students to identify the moral meanings of wellness activities. I then suggest how these moral meanings contribute to the pursuit of wellness.

MORALITY AND WELLNESS

Morality and health are often linked. Words like health and wellness have a positive moral valence while disease or illness have a negative valence. We see this in the common usage of terms like a healthy or sick society. The medicalization of deviance, which turns moral problems into medical problems, also exemplifies a conceptual connection between morality and health (see Conrad and Schneider 1992). But medicalization does not necessarily change the moral evaluation of the behavior. Deviant drinking (or alcoholism) evolved from sin to moral weakness to disease but retained a negative moral value, albeit modified. Health promotion, on the other hand, may create a "new health morality" (Becker 1986) – not smoking, vigorous exercise, low-cholesterol and low-fat diet – based on individual responsibility for health and lifestyle change. Here new behavioral norms are presented as guides to healthward conduct. Like medicalization it fuses behavioral and medical concerns, but the process is different. Medicalization proposes biomedical definitions for social problems; health promotion (or "healthicization") proposes behavioral or lifestyle changes for previously biomedically defined events (e.g. heart disease). One turns the moral into the medical; the other turns health into the moral. (Conrad 1987) Both, however, illustrate the cultural link between health and morality.

Several analysts have pointed to the relation between moral meaning and the pursuit of health and wellness. Whorton (1982) shows how 19th century health reformers like Graham and Kellogg clearly linked physical and moral health, seeing hygiene as a sign of improved morality. By controlling the temptations of the appetite and body, humanity could enjoy the wholesome fruits of nature and God. Whorton terms the nineteenth century health reforms of weight training, vegetarianism, special health foods, body-building, and exercise and physical education, as "hygienic religions." The

overriding belief was that "hygiene might be expected to exalt the individual's moral character" (Whorton 1982: 6). The nineteenth century health movement was at least as much about moral regeneration and secular salvation as it was about health improvement.

In a study of contemporary definitions of health, Crawford (1984: 76) concludes that "health is a moral discourse, an opportunity to reaffirm shared values of a culture; a way to express what it means to be a moral person." More recently, in a study of the lay constructions of health, Backett (1992: 261) reports:

First, it was evident that healthiness was defined on moralistic grounds by respondents. This not only involved moral judgements about "good" and "bad" behaviors, but also could readily slip over into judgments about "good" and "bad" individuals.

Specifically in terms of overweight, Nichter and Nichter contend (1991: 256) that weight, dieting, and health are tied together with a moral fiber. Dieting can be depicted as virtual battle between good and evil.

Concordant with the ritualistic nature of the wellness syndrome, forces of good (slimness) and evil (fatness) are pitted against each other in a morality play which takes the form of getting into shape.

In short, health and health-promotion behaviors are frequently depicted as the good while disease and putatively disease-producing behaviors are seen as bad. The morality of health certainly has many gray areas, but the boundaries are often drawn as if they were black and white.

Gillick (1984) presents an important and penetrating analysis of the connection between morality and wellness. Focusing her analysis on exercise, she shows how the popular interest in running (and by extension aerobics) expanded from the narrower concern for cardiovascular improvement to a more generalized concern with well-being. She argues that the widespread appeal of jogging and exercise in the 1970s was not improved health per se but rather a means for personal and social redemption. Gillick (1984: 383) contends that:

... the enduring interest in fitness reflects a profound conviction on the part of the educated, affluent segment of America that good, clean living is at the heart of individual and societal health.

She argues that in a society as morally ambiguous as ours there are few commonly accepted ways of individual moral action. The pursuit of fitness and wellness has become a path of individual and moral action. To pursue health and fitness for yourself and society are unambiguous goods. The

pursuit of wellness becomes the pursuit of the good life; or as Goldstein (1992) suggests, the good life has become the healthy life.

While these analysts have drawn attention to the connection between morality and health, they have not yet articulated how individuals construct and use moral meanings in their pursuit of health and wellness. In this paper I use interviews with university students who regularly engage in wellness activities to examine the meanings of health promotion in everyday life.

METHOD

This study emerged from a research seminar I taught on "Wellness on Campus" in the Spring semester of 1989 and 1992. In each class, the students became a research team. With my supervision, they conducted participant observation research in locales where activities were likely to occur (e.g., cafeteria, fitness center), selected and interviewed respondents, and conducted preliminary analysis of the data. The interview guide was constructed together with the instructor and was very similar for both classes.

A total of 54 Brandeis University undergraduate students were interviewed; 24 in 1989 and 30 in 1992. The interviews were semi-structured and open-ended. Respondents were a convenience sample, although to be eligible to be interviewed they had to show a commitment to regular wellness activities (e.g., jogging, exercise, diet, etc.). We purposely excluded varsity athletes from the sample, reasoning they would be engaged in regimens related to their sport commitments and not necessarily in health pursuits. Interviews lasted between 30 and 60 minutes and were tape-recorded and transcribed. Quantitative data (not reported here) was also collected on type and amount of wellness activities.

The age range of the sample was 17–23 with a mean of 21; most were in their third or fourth year of college. The sample included 28 men and 26 women. By definition, all were regularly engaging in health and fitness promoting activities. The sample included a few individuals who were so dedicated to health promotion they might be termed by their contemporaries as obsessed with health and fitness, but the vast majority of our respondents were simply committed to wellness as a priority in their everyday lives.

Brandeis University is a small research university located in Waltham, Massachusetts. The undergraduate population is about 2800, with 90% living on campus and using the university meal plan. Approximately two thirds of the student body is Jewish. The university has physical education facilities, including a pool, track, gym and exercise equipment room avail-

able. Student-run aerobics classes are regularly scheduled. A new athletic facility and fitness center was built during the intervening years between the two interview cohorts. While this new facility probably attracted more students to health and fitness activities, we did not notice significant changes in the meanings of those activities between the 1989 and 1992 samples. Thus, we treat the total respondents as a single sample.

The sample creates some limitations to the study. Interest in wellness activities is not distributed equally among all social classes. There is considerable evidence of a variance in dieting and exercise patterns in different classes and ethnic groups (Meredith and Dwyer 1991), which may indicate differing values and social meanings around wellness. This sample is comprised primarily of white middle and upper middle class young people, clearly not representative of all Americans. The interpretations of the findings reflect the cultural world of relatively young and affluent middle class Americans, rather than all segments of society.

The data analysis was carried out inductively using the principles of qualitative data analysis and grounded theory (Glaser and Strauss 1967; Strauss 1987).

FINDINGS

In our interviews we asked respondents how they became involved in wellness activities, what they did for health and wellness, and what meaning these activities had for them. The most common wellness activities reported were exercise, dieting and nutrition. Nearly all exercised 3 to 6 times a week and expressed a commitment to being fit. Overwhelmingly our respondents did not smoke, drank alcohol moderately, and rarely used drugs. Some respondents reported not getting enough sleep regularly, indulging in junk foods, or engaging in other "unhealthy" behaviors, but overall our respondents were, by their own definition, health conscious and relatively healthy.

Our concern here is less the wellness activities per se than with what meanings these activities had for our respondents. In this context we focus on what our respondents said about their wellness activities: how they got involved, why they engaged in particular activities, how they felt about them, and what place and meaning wellness had in their lives. In this way we can begin to unearth the meanings of wellness participation and, implicitly, what is often called "motivation." Given the nature of this college-aged sample, the wellness emphasis is on exercise and to a lesser extent diet and weight control.

Feeling good physically

Many respondents said that exercising (in particular) made them feel good. By this most meant they felt better physically, especially after they exercised, although some also reported psychologically feeling better as well. A young man described the pleasure of physical exertion.

After [I finish exercising] I feel hot and sweaty. I usually feel better because your blood gets going and your capillaries get blood in them and your body, you just feel alive. But working out gets you to a pump. When you're pumped you just feel like your muscles are going to explode, they have blood in them . . . You just feel very vigorous and very virile and you can go out there and conquer the world.

Many respondents felt "refreshed," "euphoric" or "high" after working out. Some said they didn't like doing exercise but felt better afterwards.

I guess what makes me do it is the feeling you get afterwards. When you're done with . . . whatever you're doing, you feel so good.

When respondents didn't exercise for a while or missed a few days because they were too busy, they said they felt "lazy," "sluggish," "mushy," "like a slug," or just plain "blah."

When I don't exercise I feel like shit. I feel fat . . . I just feel blah . . . I feel so bad.

Clearly many respondents felt that exercising invigorated their body and, when they missed working out, they felt less energized and their body felt "less alive."

For many, aerobic workouts reduced everyday stress and cleared the mind. They saw exercise as a re-energizing break, relieving the pressures of school. Some respondents reported being more alert after exercise. In this way, exercise was seen as contributing to mental as well as physical health, part of maintaining a sound mind and body.

Feeling better about yourself

One of the most consistent responses to questions about why people exercise and what they get from it took the form of "it makes me feel better about myself." Statements such as these were common:

I try to eat right and get as much exercise as I can because I know that it makes me feel better about myself. I care about my body.

It is definitely something that makes me feel good about myself so I do it. I know that it is going to make me feel better after I do it.

I feel better about myself when I work out. That's basically it in a nutshell . . . I know that I'm doing the best I can possibly do by working out everyday. I'm motivated by wanting to feel good and look good.

As one young man succinctly put it, he felt good exercising but more importantly he felt good *about* doing it.

Whether it works or not, I feel good after the workout. I feel good about doing it. Its an emotional high for me.

As a young woman noted, "it makes you feel good about yourself when you're doing it for you." Another stated how running makes her "like herself better."

Many respondents report that when they don't exercise (or follow their expected eating regimens) they specifically don't feel good about themselves. One man said, "I get upset with myself when I don't feel that I'm exercising. I just do not feel good about myself."

Others noted that they felt more "confident," "energetic," "in control," "attractive," and "cleaner" when they exercised. It is likely that these kinds of perception could affect an individual's self image. Surely, such perceptions could be a piece of why exercisers felt better about themselves.

Many respondents said how they felt a real sense of "accomplishment" after exercising. For some the fact that they exercise gave them satisfaction. One young man remarked how this was especially true in college.

Because right now our lives are so structured; you're supposed to go to class, you're supposed to work at this time. And this is something good for me, and I have to make myself do it. And if I don't make myself do it, it won't get done.

Exercising is a very concrete activity. While respondents may have long-term work (e.g., studying, papers) that seems to have no end, exercise has a distinct beginning and end. It is something that can be completed daily. The work of working out allows students to feel they accomplished something no matter what else is happening in their lives.

It makes me feel good because I feel satisfied after I've done something. I might not be doing well in school at the time, but if I have a good workout and push myself, I'll say, gee, I've worked hard at this.

Many report a feeling of accomplishment right after they finish working out. As this young woman stated, the accomplishment is related to feeling good about oneself.

I feel that after I've exercised I've accomplished something so its a good feeling of satisfaction that I've doing something that's good for me.

In the sense presented here, our respondents felt better about themselves in part simply because they exercise (or, to a lesser degree, ate well). They felt good because they were doing good for themselves. One might say they felt virtuous about their exercising.

The good, the bad and the should: A morality of the body

Wellness seekers create a morality of the body in terms of what is good and bad. Actions regarded as good for the body are lauded while actions deemed bad for the body are to be avoided. In this moral world, for example, exercise is deemed “good” while junk foods are “bad.”

Foods more than anything else are categorized on a good-bad continuum. “Healthy foods” are the ideal to eat, although wellness adherents sometimes partake in “shit” (i.e. not healthy) foods as well.

Wellness seekers try to steer a smooth course on the moral sea of what is bad and good for the body, with definite tilt toward the good. When asked what she did for her health, one young woman replied:

Eating right and taking care of my body. Making sure that each day, like, you do things that aren't bad for [your] body but good for your body. You stay away from foods that are bad for your body. . . . Like trying to live in harmony with your body and keeping yourself away from eating crap.

Respondents frequently spoke of wellness as doing things that are “good for your body” and eschewing those that were “bad.” These moral evaluations can affect how people feel about themselves.

I always have a certain level that I feel good about myself depending on how much exercise I do and how well I eat. Whether I feel I'm doing good things for my body.

When wellness seekers become lax in exercising or eat “shit” food they are likely to feel guilty. Many respondents reported they felt guilty if they weren't exercising. One man said:

If I start to miss more than three days I start feeling a little guilty. If I miss a week, I start feeling pretty lousy. If I miss a couple of weeks, I'm unhappy.

Eating “bad” foods can create guilt as well. As one man put it, “I allow for . . . food that's not good for you. [But] I feel guilty.”

This moral world of good and bad for the body engenders injunctions about what individuals should or shouldn't be doing. Respondents frequently spoke about what they felt they should be doing in terms of their personal wellness. Comments like “I should run,” “I should be doing more,”

"I should be 15 pounds lighter" and "I shouldn't be putting junk in my body" were common. These injunctions can engender and reflect guilt.

But I admittedly feel bad when I eat [junk food]. I know I should be eating something else. It also keeps me exercising because there is a guilt factor . . . knowing I should be eating healthier.

Such "shoulds" can make wellness seekers feel they have let themselves down. A woman who was having difficulty finding time to exercise said, "[I am] disappointed in myself because I know what I should be doing."

Wellness seekers construct a moral world where particular actions are deemed good and bad for the body. They typically know what they should be doing and often feel guilty when they are not living up to their own standards of wellness behavior. They sometimes try to create a moral balance between the bad and the good.

Our respondents reported that they sometimes tried to balance out the bad with the good. A few respondents noted how they exercised before indulging in "unhealthy" food. One woman said she wouldn't have dessert unless she ran. Another fellow sometimes rewarded himself with junk food after a hard workout. However, it was more common to see exercise as an antidote for lapses in eating. Wellness seekers believed they could overeat or eat junk foods if they balanced this with running or exercise.

Sometimes I eat more than I should because I know I'm going to be exercising and I can think I can just burn it off.

Exercise can be a retribution for indulging in unhealthy food. If individuals just do enough exercise (the good), so the thinking goes, they can make up for eating junk foods (the bad). As one young man said:

I just run it out. Its my remedy all the time. In the sense of doing something bad like that, yeah, its a way of making up for it. I know if I have all these excess calories in my body I know I'll go out and try to run it out and run really hard and get it out of my system.

As another young man put it, exercise can exorcise the bad things he's done to his body.

It [exercise] makes me feel really good. It makes you feel like . . . you're cleansing your system. You can feel like all the junk food you've eaten in the past day or so is just cleansed out with the exercise and burned off.

As a young woman said, "you sweat all of the bad things out." Exercise almost becomes a ritual of purification, a bodily catharsis, eliminating remnants of previous wellness transgressions.

Wellness seekers see fat as a nemesis to be avoided. Our respondents were often critical of themselves or others who were seen as overweight. Fat was frequently depicted as a moral issue; it was symbolic of weakness, laziness and slovenliness. As one respondent put it, "fat is ignoring your body." Fat in oneself was something to be struggled against and controlled. In one way or another, fear of fat was often among the rationales underlying wellness activities.

Looking good: Getting bigger and getting smaller

Wellness seekers are interested in results they can see. Related to the moral meanings of wellness are the instrumental goals and outcomes that regular wellness activities can provide. While health in general is mentioned as a goal, fitness and appearance are more prominent among this college-age sample. Many Americans are dissatisfied with their bodies (Glassner 1989), although it is more common for women than men (Nichter and Nichter 1991). As Conrad (1988) notes in a study of worksite wellness participants, losing weight and staying in shape were the most important reasons for participating in the wellness program. These are important here as well, with perhaps a little more emphasis on looking good.

Many respondents clearly stated that appearance, or looking good, was an important goal of their wellness activities. Students would say how they want to tone their body, stay trim, and generally look better. This was often connected to feeling good; as one young man said, "sometimes I feel like when I look good and I'm trim and fit, I feel good." Looking good is clearly a significant aspect of an individual's self-image. As one woman put it:

The health part is not an issue for me. I mean I don't work out to be healthy, I work out so I will look better in my body and so my body will be able to do the things I need it to do.

While stereotypes might suggest that women are more concerned with looking good, we found that men and women both connected attractiveness with wellness activities. In general, they wanted to control their weight and tone and shape their bodies. Both men and women regularly worked out with exercise equipment in the gym. But there were significant gender differences in what they wanted from their workouts (cf. Saltonstall 1993).

Women focused much more on losing weight and toning their bodies. As one woman stated, "I think that every woman thinks she could have a smaller butt and thighs." Women typically focused on getting thinner. Many said they would like to lose between 5 and 15 pounds. A number of women directly stated they exercised to be thin.

I have a certain number I'd like to get down to in weight . . . Psychologically, knowing that I've shrunk [in] size, it does a lot for my self-image.

Women want to tone their bodies and reduce their size. As one respondent noted, "I think my legs are toned, but sometimes I wish they could be smaller." Some mentioned they wanted to fit better in clothes or a bathing suit.

Men, on the other hand, often worked out to become stronger, more muscular, and create definition in their bodies. As a man who worked out regularly put it, "I want to be stronger, bigger, faster." Some men specifically worked out to build more "bulk" on their body.

I would like to be a little more muscular, that's why I work out. I think I'm thin, well not too thin, but not broad enough . . . I want to put on some muscle mass . . . I want to be basically bigger and stronger. I feel better about myself when I am.

As another young man who worked out regularly stated, men sometimes need to make up for what nature did not provide: "I was not given a good genetic load, so I wish I was bigger, stronger, [had] more stamina, that stuff."

To put it simply, in terms of their bodies, women wanted to get smaller and men wanted to get bigger. This is reflected in the types of exercise they engaged in, especially in terms of exercise equipment. Women used the stairmaster-type machines much more than men, while men were likely to spend more time using free weights. Even when men and women use the same exercise equipment, they have different purposes in mind. For example, these two respondents used nautilus equipment regularly to get their bodies in better shape. The woman worked on "getting rid of certain areas of my body I'm unsatisfied with." The man used nautilus because "I'd like to be stronger . . . a little bit tighter in some areas . . . [and] I wouldn't mind being a little bigger." While both men and women sought good results from working out, typically, women wanted to lose and men want to gain in size. This reflects the cultural ideals of the thin and shapely woman and the big and muscular man (cf. Brenner and Cunningham 1992).

In sum, both men and women were interested in improving their appearance, albeit in different ways. Looking good through exercising can increase sexual attractiveness and enhance one's self-image. When we asked respondents why they thought *other* people exercised, the most common response was that they want to look good. As many respondents noted, looking good is closely related to feeling good. "If you look good, you feel good." And if exercising makes you feel good about yourself, then you certainly must be doing good.

WELLNESS AS VIRTUE

As noted earlier, several analysts have pointed out that health can be a moral discourse and the body a site for moral action. This is reflected in the way wellness seekers speak about what they do and why they do it.

One of the dominant themes in our interviews was that engaging in wellness activities is imbued with moral implications. The way in which wellness seekers talk about exercise as feeling good *about* doing it, experiencing a sense of accomplishment, and feeling better about themselves for doing it suggest there is more to exercise than feeling physically satiated and obtaining beneficial bodily results. While clearly these bodily benefits are important, they contribute to seeing wellness as an unambiguous good. The moral discourse is particularly apparent in the vocabulary respondents use to describe wellness related activities. The categorizing of actions as good or bad for the body, the emphasis on balancing bad health behaviors with good ones, the continual references to what they “should” be doing, and eating, all point to a profoundly moral comprehension of health and wellness.¹

I call this particular type of moral discourse “wellness as virtue.” By this I mean that the pursuit of health and fitness becomes a “good” end in itself. Independent of the results, merely engaging in wellness activities is a virtuous activity. Regular exercise and good eating become measures of virtue. Virtue helps individuals feel good about themselves and may improve their self-image. Failure to fulfill their own wellness expectations often leads individuals to make moral restitution (i.e. balance the bad with good) or brings on feelings of guilt. Backett (1992: 261) reported similar findings in her study:

[T]he majority of respondents . . . felt the need to apologize for and justify aspects of their lives which they thought to be unhealthy . . . Equally, when respondents laid claim to apparently health promoting practices they referred to themselves as ‘goody goodies’ or as ‘self-righteous.’

While I would argue that a sense of virtue is an important reason why our respondents continue their wellness activities, it is not the only one. Feeling good physically and looking good – more concrete results of exercise and healthy eating – remain important goals. In a college age population, who are just entering the mate market, the value of physical attractiveness may be accentuated. But even appearance can be translated in moral terms, with thin (for women) and muscular (for men) depicted as good outcomes of exercise. And failure is represented by fat and flabby.

The pursuit of wellness is largely a middle class phenomenon (Gillick 1984; Goldstein 1992). Gillick (1984: 381) contends that given the condi-

tion of society personal fitness may be a way that middle class Americans can achieve a sense of meaning.

With politicians held suspect after Watergate, with doctors increasingly regarded as less than trustworthy, with professions suffering from a fall in real income and faced with bleak employment prospects, the traditional ways for upper-middle class Americans to achieve a sense of purpose are in jeopardy.

On a more personal level, Glassner (1989: 182) posits that in post-modern society "fitness activities afford many American the opportunity to disenfranchise their selves from perceived shortcomings of everyday life in modern culture . . ." Combined with the long-standing American belief that "clean, good living" is fundamental to individual and societal health, pursuing wellness becomes a mechanism for middle class college students to demonstrate virtuousness, while still focusing on themselves.

Health promotion and virtue have been connected in other periods. The 19th century health movements developed an explicitly religious "hygienic ideology" by which participants could become virtuous through purification by right eating and exercise (Whorton 1982; Green 1986). Religion, morality and health were tightly fused in the promise of a deliverance through correct health regimens. The contemporary wellness movement operates on a more secular and broadly cultural level, but still adopts a moral tone. Crawford (1984: 63) once suggested that "health substitutes for salvation and becomes a salvation of its own." While the religious metaphor can be overstated, it seemed clear that a great deal of moral influence is granted to health and the pursuit of wellness. Perhaps those most committed to wellness seek a form of secular salvation (Conrad 1993); for the vast majority, a sense of virtue is probably sufficient.

In conclusion, this paper argues that the pursuit of wellness is inherently a moral pursuit, the achievement of a sense of virtue. The pursuit of virtue and morality may be particularly evident in college students who have few manifest health concerns, although it is likely to be found among wellness seekers in general. In modern society, where health is such a dominant value, the body provides a forum for moral discourse and wellness-seeking becomes a vehicle for setting oneself among the righteous.

*Department of Sociology
Brandeis University
Waltham, MA 02254*

ACKNOWLEDGMENTS

I owe considerable gratitude to the students who participated in the data collection and early discussions about the findings: Michele L. Becker, Nancy K. Berley, Staci Boden, Jennifer B. Brenner, Joel L. Cohen, Cynthia B. Epstein, Robin B. Goldstein, Esther Hakim, Peter Hammomd, Stacy M. Kanalstein, Nathan M. Murawsky, Melissa B. Palat, Wendy Sagett, Amy E. Schomer, Christopher Simpson, Deborah Solomon, Mindy G. Stern and Lori J. Wexler. I am especially grateful to Cynthia B. Epstein for her coding and organization of some of the materials. My thanks also to Irving K. Zola and Phil Brown for comments on an earlier draft of the paper.

NOTE

1. As others have shown, the discourse about illness can reflect a moral evaluation as well (Harris 1989).

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