

HEALTH AND CARING—FROM A EUROPEAN PERSPECTIVE

Kinds of well-being: A conceptual framework that provides direction for caring

KATHLEEN T. GALVIN, PhD & LES TODRES, PhD

School of Health and Social Care, Bournemouth University, Bournemouth, United Kingdom

Abstract

This article offers a conceptual framework by which different kinds and levels of well-being can be named, and as such, provides a foundation for a resource-oriented approach in situations of illness and vulnerability (rather than a deficit-oriented approach). Building on a previous paper that articulated the philosophical foundations of an existential theory of well-being (“Dwelling-mobility”), we show here how the theory can be further developed towards practice-relevant concerns. We introduce 18 kinds of well-being that are intertwined and inter-related, and consider how each emphasis can lead to the formulation of resources that have the potential to give rise to well-being as a felt experience. By focusing on a much wider range of well-being possibilities, practitioners may find new directions for care that are not just literal but also at an existential level.

Key words: *Phenomenology, well-being, existential, conceptual framework, caring science, care, philosophy, Heidegger*

(Published 9 December 2011)

A lifeworld-led approach to care provides ways to describe health-related conditions and needs in ways that are more complex than conventional medical and diagnostic descriptions of health and illness (Dahlberg, Todres, & Galvin, 2009; Todres, Galvin, & Dahlberg, 2007). Such a lifeworld-led approach, however, does not only provide an alternative descriptive power but also a directional power, that is, well-being as a goal that is much deeper and more complex than just the absence of illness. If “well-being” offers a core direction for caring, then it is important to begin to articulate adequate conceptualizations of well-being that can do justice to both the essence of what it is, and to its possible variations in human lives. It is for this reason that we have found it highly productive to draw on a phenomenological style of philosophy to offer a conceptual framework that can articulate a multiplicity of kinds of well-being, and some of the possible paths towards it. But, let us start with well-being as an intertwined experiential phenomenon.

Our bodies know what well-being is.¹ We recognize well-being in many different forms and nuances when it is present, and recognize its absence in

suffering. When asked the question ‘how are you?’, if we take a moment, as human beings, we can sense very concretely our state of well-being or otherwise, even if we are not able to find the best words to say all of it. This experiential sense of well-being can be articulated in many different ways. The task of a previous paper (Todres & Galvin, 2010) introduced a theory of well-being as “Dwelling-mobility”, and attempted to capture the range of well-being experiences within a coherent existential whole. We asked the question: What is it about the essence of well-being that makes all kinds of well-being possible? Guided by Mugerauer (2008) and drawing on Heidegger’s later work on homecoming (e.g., Heidegger, 1959/1966, 1969/1973, 1971/1993, 1971, Heidegger, 1977) we articulated the deepest experience of well-being as a unity of dwelling and mobility. In this earlier philosophically focused paper, we indicated how our well-being theory was inspired by a particular interpretation of Heidegger (Mugerauer, 2008), an interpretation that considers the trajectory of Heidegger’s work as a whole, including both the continuities and discontinuities of his earlier and later works. This interpretation was

Correspondence: K. T. Galvin, School of Health and Social Care, Bournemouth University, Christchurch Road, Bournemouth, BH1 3LT, UK. E-mail: kgalvin@bournemouth.ac.uk

central to our more applied concerns about the phenomenon of well-being.² Here, we also followed Heidegger in the “Zollikon Seminars” (Heidegger, Boss, Mayr, & Askay, 2000) in which an ontological level of analysis is seen to have important potentially practical ontic insights for our everyday lives. It is in this spirit that we have attempted to translate these ideas into their consequences for understanding human well-being and the practical implications this may have for caring science.

Mobility or a sense of movement describes all the ways that one can have access to the feeling of possibility. Metaphorically, we can describe it as a sense of adventure, a sense of moving into wider horizons, “a new dawn”. The essence of mobility “lies in all the ways in which we are called into the existential possibilities of moving forward with time, space, others, mood and our bodies. We could say that it is a kind of Eros or energy that can give a feeling of flow, a sense of aliveness and vibrant movement” (Todres & Galvin, 2010, p. 3).

By dwelling, we mean a sense of “at homeness” with what has been given. There is a sense of rootedness, of settling into what is there, a ‘letting be’ and a certain peaceful attunement. The essence of dwelling lies in all the ways that we existentially come home to what we have been given in time, space, others, mood and our bodies. The feeling of this coming home is one of acceptance, rootedness and peace. In our previous paper, we elaborated these two dimensions of dwelling and mobility as separate kinds of well-being in their own right, but also considered how the deepest possibility of well-being was best expressed as a paradoxical unity of dwelling and mobility, what we called “dwelling-mobility”.

In dwelling mobility, there is both “the adventure” of being called into existential possibilities as well as “the being at home with” what has been given. It carries with it a sense of rootedness and flow, peace and possibility. In dwelling-mobility, there is an integration of peace and possibility or stillness and movement.³

A typology of well-being

In our previous paper, we indicated that the unity of dwelling-mobility has within it a sense of both mobility and dwelling. Thus, experiences of possibility and peace, flow and rootedness are not necessarily separate experiences, even though they may be articulated as logically discrete. The nature of embodied experience is that it is able to hold multiple qualities at the same time. This unity of dwelling mobility indicates well-being in its deepest fullness, but does not have to be experienced in this

fullest sense to be of benefit to people: there can be different kinds and levels of well-being that can be derived from this unity, depending on emphasis and focus. It is in this spirit that we have derived 18 variations of well-being experience. In Table I, we present what we call “the Dwelling-mobility lattice”.

An explanation of this framework

On the left-hand side of Table I, we name a number of experiential domains within which well-being can be emphasized (spatiality, temporality, etc.). These experiential domains are centrally informed by the phenomenological-philosophical tradition in which Husserl, Heidegger, Merleau-Ponty and others have delineated fundamental lifeworld constituents that are implicated in human experience (Boss, 1979; Heidegger, 1962; Husserl, 1970; Merleau-Ponty, 1962).⁴ So, for example, one can think of well-being in terms of the way it can be experienced spatially, temporally, inter-personally, bodily, in mood and in terms of the experience of personal identity. Although each of these domains of experience are implicated in one another, one can still usefully refer to these qualities as emphases, and this can help us to delineate different well-being possibilities. Along the horizontal rows, the two emphases of well-being (dwelling and mobility) are delineated, together with a third possibility when intertwined or unified (dwelling-mobility). Indeed, ontologically, this intertwined phenomenon is primary and the separate emphases of dwelling and mobility are variations that exist in “stepped down” ways (“figure-ground” emphases within a unity). So, considering each of the qualities of well-being as both separate and intertwined (dwelling, mobility, the unity of dwelling-mobility), one can see these qualities more clearly as a “structure” with different emphases or variations in everyday life. For example, one can think of a well-being possibility where mobility is emphasized, a well-being possibility where dwelling is emphasized and a well-being possibility where they are integrated. By considering the relative interaction of these two dimensions (experiential domains and well-being possibilities), one can derive a number of kinds and levels of well-being that are afforded to human existence. In this framework, we have derived 18 terms that each describe a particular quality of well-being such as “present-centeredness” when dwelling and temporality interact, or “I can” when identity and mobility interact. Although these variations are all implicated in one another, their distinct experiential emphases in terms of figure and ground can be usefully delineated and named. For example, one may experience a kind of well-being in which spatial dwelling is in the foreground; here, one

Table I. “Dwelling-mobility” lattice.

	Mobility	Dwelling	Dwelling-mobility
Spatiality	Adventurous horizons	At homeness	Abiding expanse
Temporality	Future orientation	Present-centredness	Renewal
Inter-subjectivity	Mysterious inter-personal attraction	Kinship and belonging	Mutual complementarity
Mood	Excitement or desire	Peacefulness	Mirror-like multi-dimensional fullness
Identity	I can	I am	Layered continuity
Embodiment	Vitality	Comfort	Grounded Vibrancy

may feel particularly tuned into the physical environment’s quality that engenders a sense of “at homeness” as a foreground experience. This emphasis is “never alone” or apart from other possible well-being variations. So, the mood of dwelling (that has a quality of “peacefulness”) may also be there, but in the background, and not explicitly focused upon. Nevertheless, we will now show that it is helpful to articulate each of the variations of well-being as discrete emphases. We call this framework a “lattice” because the various kinds of well-being are dynamically intertwined and layered. The term “lattice” attempts to indicate this woven nature and to express the dynamic possibilities of their figure/ground relationships within their larger unity. We now describe each variation of well-being experience. We believe that these discrete emphases are both experientially meaningful as well as having value when one comes to think about practical directions. Furthermore, to make comparisons between the 18 variations of well-being, we address similar topics within each variation. Although this may appear formulaic and perhaps repetitive to read, we do this for the sake of rigour and to be able to show how the various elements are similar or different across variations, so in each case we consider how that dimension is essentially defined, give an example of how it may be lived and provide a possible health care application, etc.

Spatial mobility: adventurous horizons

There is a well-being experience that emphasizes “adventurous horizons”. When adventurous horizons are bright, a person is tuned into the spatial possibilities of their environment that offer movement (either metaphorically or literally) in ways that are valued or wanted. So, for example, a sense of adventurous horizons in a literal sense may occur “on the road” where one feels invited to explore new places and things; there is a “sense of adventure” provided by the spatial possibilities of the situation. A sense of “adventurous horizons” in a metaphorical way may occur through, for example reading a novel

in which descriptions of place open up a feeling of adventure as imagined movement.

In relation to the implications of this “well-being emphasis” for care, one could ask the question: what adventurous horizons in this person’s physical environment can be offered and supported as either a literal reality or as a focus for possible experiential engagement? One example of offering adventurous horizons as a possible experiential focus that is not literal may occur in the case of a person who is physically disabled. Here, some time may be spent in which carers find out about the kind of imaginative journeys that could be meaningful to a person, and engage in help that could open up such a possibility either through access to paintings, or films and so on. Alternatively, literal possibilities may include “outings” that achieve something of the essence of this felt sense in a way that is possible. Another example might simply be the sense of adventurous horizon in which a person experiences the feeling of spatial mobility by looking out at the stars or a sunset. Well-being as a sense of “adventurous horizons” is thus anything that offers a place of promise.

Spatial dwelling: at-homeness

There is a well-being experience that emphasizes “at homeness” or a sense of “being at home”. When there is a sense of “being at home”, a person may be tuned into the spatial possibilities of his or her environment that offers settling or stillness (either metaphorically or literally) in ways that are valued or wanted. So, for example, a sense of at-homeness in a literal sense may occur “on my favourite easy chair in front of the fire”. Here, literally, one is in physical surroundings that are familiar and comfortable; there is a sense of at-homeness provided by the spatial possibilities of the situation. A sense of at-homeness in a metaphorical sense may occur through, for example, having familiar objects and personal things close to hand that connect a person to their familiar sense of place and belonging; this returns one spatially to a sense of at-homeness as an

experience of welcome 'dwelling'. In relation to the implications of this "well-being emphasis" for care, one could ask the question: what sense of "at homeness" in this persons' physical environment can be offered and supported as either a literal reality or as a focus for possible experiential engagement? One example of offering welcome "at homeness" as a possible experiential focus that is not literal might be where a person is being treated in a clinical environment. Here, there is a danger that the person may feel dislocated or alien, and some effort may be spent bringing in objects and things into the environment that provide a sense of familiarity and belonging. This could range from plants and other natural items to personally significant objects that connect the person with his or her familiar sense of place. Well-being as a sense of at-homeness is anything that offers a place of settling or peace.

Spatial dwelling–mobility: abiding expanse

There is a well-being experience that can hold both spatial mobility and spatial dwelling together; an experience that can straddle both adventurous horizons and at-homeness. We call this experience "abiding expanse". In "abiding expanse, a person is tuned into the spatial possibilities of their environment that offers at the same time 'settled at homeness' as well as 'adventurous horizons'" (Todres & Galvin, 2010), either metaphorically or literally in ways that are valued or wanted. In this unity, there is an experience of abiding expanse; being deeply connected to a familiar place that offers itself as a stepping out point for possible literal or metaphorical adventures or journeys. So, for example, one person may have a sense of abiding expanse, in both literal and metaphorical ways, at a window where he or she feels both safe and settled inside, as well as invited out by the path disappearing into the distance. In relation to the implications of this well-being emphasis for care, one could ask the question: What possibilities of "abiding expanse" can be offered in this person's physical environment and supported as either a literal reality or as a focus for possible experiential engagement?

One example of facilitating "abiding expanse" as a possible experiential focus is where a person is physically disabled. Here, instead of just facilitating imaginative journeys in different ways or bringing familiar objects into the environment, the carer pays attention to designing the physical environment in such a way as to facilitate a creative tension between home and adventure. One might offer the possibility of spatial experiences in which there is a transition between the familiar and unfamiliar in a way that is both nourishing and interesting. For example, a

carer and the physically disabled person may expend some effort arranging a "liminal" space near a window, where the person can feel both at home with familiar things to hand as well as the possibility of following the flights of birds as they venture to warmer climes. Well-being as a sense of abiding expanse is any place that stretches between home and adventure.

Temporal mobility: future orientation

There is a well-being experience that emphasizes a future orientation or future possibilities. When there is a sense of future orientation, a person may be tuned into the temporal possibilities of moving forwards into a future (either as a sense or literally) in ways that are valued or wanted. So, for instance, a sense of future orientation in a literal way may occur when one is able to identify and progress one's valued projects. Here, a person may be energized by life possibilities that call from the future and that motivate his or her in a way that constitutes a sense of purpose. This sense of meaningful purpose constitutes this kind of well-being because it can provide a quality of flow and continuity to the ongoing progression of one's life in time. Without this possibility one may feel "stuck", as if frozen in time without meaningful invitations "into the future". A well-being future orientation may occur for example, as one looks forwards to a celebration that is due to happen with others. Here, there is a well-being dimension in the anticipation of what is to be; a very human kind of joy. Well-being as future orientation does not need to be as special as this to act as a resource. One can imagine possibilities for achieving change in small ways that are welcome, anything that can provide a sense of new things happening and that constitute 'a breath of fresh air'. In relation to the implications for care, one can ask the question: what future orientation could be welcomed by this person, no matter how small? One example of a literal entry point into the possibility of facilitating future orientation could be where a carer considers, together with a person, those small changes that might "unstick" a sense of deadening routine or situation. Well-being as a sense of temporal mobility is anything that offers an invitation into a welcoming future.

Temporal dwelling: present centredness

There is a well-being experience that emphasizes "present centredness".⁵ When a person is absorbed in the present moment, they are tuned into a kind of temporal focus that offers "at oneness", an intimacy, a sense of belonging or a deep connection with what

is happening in the moment in ways that are valued or wanted. So, for example, a sense of present centredness often occurs in marginal literal situations where one's attention "is grabbed", such as in sports and other absorbing challenges. Here, people are "in the zone". An example in an everyday sense of temporal dwelling may be when one is enchanted by beautiful music or the taste of good food. In these and other situations, which may be very personal, one is "brought home" to the very simple event of "just being", and there is a completeness and satisfaction in this moment of temporal dwelling. In relation to the implications of this well-being emphasis for care, one can ask the question: What welcome present centred experience can be facilitated and supported as a possible focus for experiential engagement? One example of offering a present focus to experience could be very simple such as the mere directing of a person's attention to something that is already there as a source of comfort such as the gentle sound of rain on the roof or the rise and fall of breathing. Another example is where a sense of temporal dwelling is offered by helping the person to engage in activities of possible dwelling such as through painting or through spending time in the garden. Well-being as a sense of present centredness is anything that offers absorption as a moment of welcome "being here".

Temporal dwelling mobility: renewal

There is a well-being experience that can hold a sense of temporal mobility and temporal dwelling together; an experience that unifies future orientation and present centredness at the same time. We call this experience "renewal". In "renewal", a person is tuned into a temporal range that carries with it both the novelty of being called into the "newness" of the future, as well the settledness of being absorbed in the present moment. There is simultaneously a welcome invitation from the future as well as a "being here", present with whatever is happening. This is a "rooted-flow", a sense of the present that strongly grounds the movement towards the future. The word "renewal" indicates something of the freshness, aliveness and uniqueness of the present moment which has never before quite happened like this as well as a sense of possibility and potential movement that leans towards a future that opens up. Here, one is both intimately "at one with the present moment", as well as energized by life's future possibilities; it is a dwelling that leans forward. So, for example, a person may experience a feeling of being connected to their life's desires and their future possibilities through an activity, such as climbing towards the top of a mountain as well as experiencing the "nowness" of

this "complete moment" as it is unfolding. In relation to the implications of this well-being emphasis for care, one could ask the question: What possibilities for renewal can be offered in this person's situation? Here, one avenue of exploration concerns how meaningful ritual has characteristics that can mark the importance of the present moment as well as signal the potential to move into a new phase or possibility as "renewal". So, for example, in a situation of a person undergoing the kind of surgery that will involve the loss of a body part, a carer could facilitate something like "a ritual" or some space and time by which the person is encouraged to honour that part of the body and its role in the past, and then move on to include some acknowledgement of what the new phase of life may open up. Well-being as a sense of renewal is any welcome "joining" between the depth of the present and the openness of the future.

Inter-subjective mobility: mysterious inter-personal attraction

There is a well-being experience that emphasizes 'mysterious interpersonal attraction'. When such attraction is present, a person is tuned into the inter-personal possibilities that offer movement (either metaphorically or literally) in ways that are valued or wanted. There is an "eros" in which a person's "otherness" is an attraction beyond any simple knowing. Indeed, the essence of this attractiveness is precisely in the mystery of otherness. This well-being possibility in the inter-personal realm constitutes an energized openness towards the other which can be called "desire". Such desire or attraction, when experienced as well-being, constitutes a kind of radiance and a "leaning towards". So, for instance, a sense of mysterious inter-personal attraction may occur where one cannot quite name why it is that you wish to find out more about another person. The essence of this mysterious inter-personal attraction is not, however, in finding out or knowing that person, but in the sheer energy of the "beyondness" of someone or something partially hidden in the unknown; this inter-personal unknown is always in a sense "wild" (in the sense of undiscovered or exotic), an aliveness that energizes an interest to reach towards the other, something that the spontaneous innocence of a baby's grasp understands. This gravitation towards the other is not only "eros" but can also be "agape": a respectful caring interest in the others difference and uniqueness. In relation to the implications for care, one can ask the question: What mysterious inter-personal attraction can be welcomed by this person as a source of interest in the world? One example of a literal entry point into the possibility of facilitating

“the spark” of the call from the mystery of otherness is where a carer surprises an animal lover who is withdrawing because of illness by bringing a new cat onto the scene. Well-being as a sense of mysterious inter-personal attraction is anything that offers an invitation into the mystery of being.

Inter-subjective dwelling: kinship and belonging

There is an inter-personal well-being experience that emphasizes a sense of kinship and belonging. Here, a person feels at home with another or others. This sense of familiar inter-personal connection constitutes relaxed situations of meeting in ways that can make us feel that we belong there. In such a metaphorical or literal situation of “kinship”, there is a sense of “we” rather than “I” and “you”; an effortless being together with one another, a sense of familiar security and togetherness.

So, for example, a sense of inter-personal kinship and belonging may occur literally where one has built up a long history with someone that one has come to love and know. However, this sense of kinship and belonging can also occur in a more metaphorical way as when we meet a “kindred spirit” with whom we feel immediately compatible on various levels such as personality, heritage, interest and so on. In these situations of inter-subjective dwelling, there may be a kind of re-connecting with where we had left off previously, a long time ago, almost as if we share a kind of eternal presence with the other person. This may constitute the sense that not much time has passed once we are together again: there is an eternal return to dwelling in this inter-personal present. In relation to the implications of this well-being emphasis for care, one can ask the question: What forms of kinship and belonging can be facilitated and supported as a possible focus for experiential engagement? One example of a literal entry point into the possibility of facilitating a sense of kinship and belonging is where a carer, sensitive to the cultural background of a person, helps to connect that person with others from their shared background and to possible events, objects, music, and traditions from their heritage. Within this context, heritage can be healing in that it provides cultural homecomings and shelter. Alternatively, a carer could facilitate a sense of kinship and belonging in a more metaphorical sense by engaging in shared stories which the person remembers and “joins with” ancestry and shared histories that give a sense of continuity, familiarity and belonging. Alternatively, some people may need inter-personal kinship experiences that move beyond the cultural level to include interests

and affinities that are very specific and not necessarily related to cultural heritage. So, for example, “clubs” and social networks have become much more important as the history of community life becomes more fragmented. Well-being as a sense of kinship and belonging occurs in any of the ways that one can find an “at homeness” with others.

Inter-subjective dwelling–mobility: mutual complementarity

There is an experience that can hold a sense of both inter-subjective mobility and inter-subjective dwelling together; an experience in which there is both the qualities of mysterious inter-personal attraction as well as kinship and belonging. We call this experience “mutual complementarity”. In “mutual complementarity”, a person is tuned into the possibility of being with another or others in such a way that there is “homelike-oneness” with the other as well as an energetic separation or attractive mystery, “calling” from the other. Here, there is a paradoxical quality of both familiarity and strangeness in which we are reciprocal but complementary to one another. The “mutuality” is one of kinship and belonging, the complementarity is one of “a giving” in which one is “more” when together than when apart. So, for example, two or more people may have a sense of mutual complementarity when there is a partnership constituted by a shared equality, together with the ongoing learning that may come from each others’ difference. This is a creative tension of “sameness” and “difference”. The difference is given by a “not knowing” in which the other appears as a mysterious depth that can be surprising and which brings something new to the relationship. At the same time, a certain “sameness” or familiar “sharedness” is given by a familiarity based on a shared recognition of places where “we meet” and that we have “in common”. In this creative tension, there is both the intimacy of feeling at home with the other as well as a sense of the novelty that each brings to the other in a mutual and complementary way. Mutual complementarity as an inter-subjective well-being experience is thus a journey of companionship that is both “at home” and “in adventure”. In relation to the implications of this well-being emphasis for care, one can ask the question: What forms of mutual complementarity can be facilitated and supported as a possible focus for experiential engagement? One example of a literal entry point into this possibility is where a carer encourages a couple who feel at home together but who are “in a rut”, to discover either things they do not yet know about each other or to pursue something new together. Alternatively, a carer could facilitate a sense of mutual comple-

mentarity in a more metaphorical sense by helping a person engage with their cultural history in new ways that give new directions for that person's life, such as, an engagement with the cuisine of their culture that they had not previously known about. This opens up both an inter-subjective re-connecting as well as a sense of new direction; something old and something new. Well-being as a sense of mutual complementarity can occur in any way that one finds the "attractive unknown" in the ones that are close, and with whom we feel we belong.

Mood mobility: excitement or desire

There is a well-being experience that emphasizes the mood of excitement or desire. Here, well-being as a mood or felt attunement is emphasized, but specifically, as a mood that has the quality of movement and buoyancy. In everyday terms, this mood may be characterized as one of excitement or welcome desire. So, for example, there may be a sense of excitement when one is about to leave for a much longed for holiday or special event. A sense of such excitement or desire in a metaphorical sense may occur when there is a feeling of possibility; a feeling that the world is inviting one into horizons that connect with the desires of one's heart. This energized feeling constitutes the mood of motivation, a kind of "life force" or vitality that sustains the feeling that life is worth living. In relation to the implications of this "well-being emphasis" for care, one can ask the question: What sense of excitement or desire in this person's situation can be offered? One example of offering an invitation to the mood of welcome excitement or desire may be in a situation where older people are living in a residential care setting. Here, such older people may be provided with opportunities to celebrate important events or seasons. In this example, one is helping to focus attention on the possibility of a sense of celebration that brings with it a mood that has, in various ways, been available to us all as part of the heritage of being human. Well-being as a mooded sense of excitement is thus anything that motivates a felt connection to a person's meaningful life desires.

Mood dwelling: peacefulness

There is a well-being experience that emphasizes the mood of peacefulness. Here, well-being as a mood or felt attunement is emphasized, but specifically as a mood that has the qualities of stillness, settledness or re-conciliation. In everyday terms, this mood may be characterized as one of peace and welcome "pause". So, for example, there may be a sense of peacefulness when one has fulfilled a task or responsibility

that required some effort and commitment. We would like to note that the process of settling or "coming to accept" things may be challenging, and that the direction of acceptance may be a journey that includes sadness, patience and concern. A person can come to the mood of dwelling in multiple ways, but in the end, the mood of dwelling is one of peacefulness in spite of everything. A felt sense of peace may also be experienced in less literal situations through an attunement of mind, or through a more general comportment towards the world. Here, a person is able to accept "what has been given" for what it is, and to experience the concomitant feeling of peacefulness that arises with such "letting-be-ness". Peace as a felt sense is thus the mood of dwelling or "at homeness". In relation to the implications of this well-being emphasis for care, one can ask the question: what sense of peace or settledness is possible for this person? One literal example of offering an invitation to the mood of peace may be where a carer suggests, for example, that a person keeps "a book of abundances" in which they note daily something that they can appreciate or accept "just as it is". A less literal example may be where a carer introduces practices that help focus a person's attention on the possibility of accepting things as they are, where it may be possible to do so. One can perhaps begin to encourage someone to do this by first noticing and appreciating simple changes in life such as the rhythms of day and night, and of the seasons, and the mood that this may bring. One could then move onto more complex mindful practices for life in which the possibility of peacefulness and "letting be-ness" is progressively achieved as a general mood or comportment towards life's changes. Well-being as a mooded sense of peacefulness occurs whenever there is a felt acceptance of things, circumstances and changes.

Mood dwelling-mobility: mirror-like multidimensional fullness

There is a well-being experience characterized by a highly complex mood that participates in both the energetic quality of enthusiasm and interest as well as the settled quality of being at home with oneself and the world. We call this paradoxical mood "mirror-like multidimensional fullness". We have called this mood "mirror like" because it contains a settled openness that is large enough to reflect whatever is happening in a "letting be" kind of way. At the same time, we have called this mood "multidimensional fullness" because it is a fullness of mood that can be many things such as sadness, love and happiness. It can be many things because

this mirror-like mood does not need to separate itself from whatever is happening right now. In not separating itself, the mood is one of “union with”, but a “union with” the fluidity that is alive and unfolding, rather than a union with a finished circumstance. The paradoxical quality of the mood of “mirror-like multidimensional fullness” is, metaphorically speaking, like that of being at both the centre and the periphery of a cyclone at the same time. There is a mood of both stillness and of being “on the move” simultaneously. The mood is one of fullness in the sense that one feels complete and that nothing is missing; it is far from a sense of deficient emptiness. So, for example, a person may experience a mood of mirror-like multi-dimensional fullness when they are “drinking in” the novelty of new sights and sounds, and feeling complete “there” in this moment. The paradoxical quality of this complex mood thus includes fullness and completeness, novelty and surprise, appreciation and serenity and so on. The Japanese Haiku tradition evokes something of this mood in stanzas such as

*how touching
to exist after the storm
chrysanthemum*

(Basho, 1692–1694/ 2008).

In relation to the implications of this complex well-being mood for care, one could ask the question: What possibilities are there for such a complex mood that is one of “giving oneself emotionally” to this moment, in both an enthusiastic and re-conciled way? Sometimes, this mood may occur spontaneously in a patient with a chronic illness after having “gone through a lot”. Suddenly, she feels something more than just acceptance and peace about her condition. She feels, without there being a reason, enthusiastic about sipping a simple cup of tea early in the morning. She is not enthusiastic in the sense of looking forward to anything, but in the sense that there is nothing more important to be or do, but just to fully “give herself” to appreciating what is available now, even though there may be pain and uncertainty. This mood cannot be directly facilitated, and often comes in surprising and unexpected ways; it is the mood where hard earned “songs of experience” meet the child-like presence of “songs of innocence”. It is not so much that professionals and carers can help make this happen, but that they can prevent this possibility from happening by not recognizing or understanding the value of this mood, and therefore in such situations could mistakenly bring the person back pre-maturely to projections about the future, or back to a narrative definition of themselves. So, well-being as a sense of

multi-dimensional fullness is characterized by the enthusiastic mood of “giving oneself” to an experience without narrative implication, and because of, rather than in spite of, the limits of this timeless moment.

Identity mobility: “I can”

There is a well-being experience that emphasizes a sense of one’s personal identity as “I can”. When such an emphasis of personal identity is experienced, the person will experience themselves as being “on the move” (either metaphorically or literally) in ways that are valued or wanted. Relating to their sense of personal identity, there is a sense of “being able to”, a degree of confident personal competence in which one feels able to move into the kind of future and its expanding horizons that are consistent with a knowledge of one’s personal possibilities and self-belief. This sense of “I can” can range from being very simple and literal to very complex and metaphorical. So, for example, this self-sense of “being on the move” can be as simple as a toddler developing the self-belief that they can consistently walk to the corner. At a more complex and metaphorical level, this sense of “I can” may occur when one has been able to develop a tacit sense of optimism that dreams can be realistically achieved on the basis of one’s hard work and personal capacities. At its most existential level, there may be a very general sense that there is always “a more” to one’s identity, and a feeling that one’s personal capacities lie in possible potentials that have not yet been named or realized. There is thus a very close relationship between “I can” identity mobility and a sense of personal agency. This well-being possibility in the realm of identity constitutes an energized openness about the possibilities of the self. In relation to the implications of this well-being emphasis for care, one could ask the question: What possibilities for self-efficacy are there in this person’s life that are meaningful to the person and that can be offered and supported as either a literal reality or as a focus for possible experiential engagement? One example of facilitating a greater sense of self-efficacy may be with a person who has lost their confidence in being able to engage in past activities because of an illness. Here, they can be encouraged to set small relevant goals, and over time, experience a gradual build up of “I can” successes. This “I can” mobility-identity then becomes somewhat restored, and can constitute a source of well-being. An example that is less literal is where a more general sense of self-potential is facilitated. Here, a psychotherapy patient who had been overly identified with personal historical experiences of failure may rediscover aspects of

themselves, or previously unknown aspects of themselves that had been obscured by their self-definition of failure. This is usually done psychotherapeutically in a non-linear way where, instead of focusing on the problem, one helps the person to explore things about themselves and their potential that they may have forgotten. There are many ways in which this can be facilitated, for example, through art, writing and through pursuing dormant passions. Well-being as a sense of “I can” is thus any experience where one’s personal identity is felt to be capable of “being able to” and of being able to achieve what one values.

Identity dwelling: “I am”

There is a well-being experience that is in touch with one’s sense of personal identity as “I am” in its most general sense. When such an emphasis of personal identity is in focus, a person may experience themselves as someone who is simply supported by histories and contexts that are continuous with one’s sense of self, and which does not need to be excessively questioned or “at stake”. This is not an “I am” as if it was an objectified definition of oneself; rather it is an “I am” that, at its depth, feels connected to a sense of being which is given to us in its most foundational sense. When one is tuned into this sense of identity, there is a sense of “being there” before all the specific layers of self-definition that have been built up are brought into play. So, this sense of “I am” is not “I am this or that”; it is really just the feeling of “being” very generally, or present, as “someone who belongs here right now”, and who is able to take “nourishment” and some security from this sense of ontological identity. At its depth, one can call it an “ontological security”: that one’s identity (in a very general way) is supported by “merely being” rather than “having to be” something or someone. The well-being focus of the “identity dwelling” emphasis of “I am” is experienced as a familiar continuity, a sense of effortless connectedness, a certain peacefulness or lack of dilemma of who and what I am: a kind of being at home with one’s self. In relation to the implications of this well-being emphasis for care, one can ask the question: What effortless or peaceful sense of “I am” is possible for this person? One literal example of facilitating a greater sense of “I am” that has an “identity dwelling” quality may be where one helps a disabled person connect with identity resources to which they feel continuous with, and belong to, beyond the particularity of “I am disabled”. In this example, a practitioner may facilitate the possibility of an experiential engagement in which the person recognizes their continuity with cultural, geographi-

cal or historical connections with which they may identify such as a place, or a sense of belonging with “my people”. A more existential example of deep “identity dwelling” may be where a person who has been recently diagnosed with a terminal illness spontaneously realizes, within the midst of their anguish, an inexplicable feeling that “I am still here, and much more than my illness”, and that “my sense of being here” is vast and indefinable. At this existential level, such experiences cannot be predicted or determined, and seem to involve a kind of “breakthrough” to a sense of self as “simply being”. Such an ontological sense of the foundation of personal identity is a well-being resource in which a certain timeless dimension of one’s depths relieves the narratives of our lives. Well-being as a sense of “I am” is thus an experience where our sense of personal identity is felt to be connected to resources and contexts far beyond oneself, but which nevertheless, are continuous with what is most deeply one’s own.

Identity dwelling–mobility: layered continuity

There is a well-being experience that can hold a sense of identity-mobility and identity-dwelling at the same time; an experience that unifies “I can” with “I am”. We call this experience “layered continuity”. In “layered continuity”, a person may experience their own identity, not in any particular thing like way, but as a sense of continuity with different layers of “I can”, as well as a continuity with the general sense of simply being here before all the specific layers of self-definition are brought to the fore. In this rare and paradoxical experience, both one’s specific sense of identity as well as one’s strong sense of “just being” in a foundational sense are both in the foreground. Here, one’s sense of identity is inclusive of a sense of all the historical details and connections that make up the “I can”, as well as the sense of ontological security of “I am”. This sense of inclusion of both these identity resources is experienced as a layered continuity in which one is empowered by both the multiple resources of one’s uniqueness as well as that level of identity that opens out to one’s most anonymous and transpersonal ground. This layered continuity is thus continuous with both personal and transpersonal layers of self. Jung indicated this ambiguous experience of both the unity and multiplicity to one’s identity when he said:

I am all these things at once and cannot hold up the sum . . . and it seems to me that I have been carried along. I exist on the foundation of something I do not know. In spite of all uncertainties

I feel a solidity underlying existence and a continuity in my mode of being. (Jung 1961/1995, p. 392)

The well-being experience in layered continuity lies in its inclusive qualities of “I am all this and more”. So, for example, a person may have a feeling of the “layered continuity” of who they are in unguarded moments when the need to assert or protect any sense of self-definition is in abeyance; self-definition is not at stake and a sense of oneself as “layers” that spontaneously shine through without the need to “be achieved” is supportively experienced.

In relation to the implications of this well-being emphasis for care, one could ask the question: What possibilities are there for experiencing such a complex identity within this person's life situation? Again, such experiences cannot be predicted or determined, and seem to involve a kind of “breakthrough” to an ambiguous sense of self as “layered continuity”. An example of experiencing layered continuity may be in a person who has been through much effortful and self-conscious treatment regimes. After a long period in which she was struggling with her sense of self as “a patient” trying to take “full responsibility” for her recovery, she spontaneously realized that there was not much more that she could do. Something deep within her relaxed, a letting go of the “responsible one” and a “letting in” of the deep need to simply be cared for. Suddenly in this moment, a sense of her layered continuity was restored; she felt unconcerned about any definition of herself that she had been upholding, and felt the well-being experience of “I already am and I already can, even though I do not know who that is in specific terms — I am many layers”. Well-being as a sense of layered continuity is any experience where one's personal identity is felt to be both already achieved in its essence as well as felt as a sense of self that is “able to” in a general sense.

Embodied mobility: vitality

There is a well-being experience that emphasizes a sense of bodily “vitality”. When there is such a sense of vitality, a person may be tuned into an embodied energy that carries with it a quality of movement in ways that are valued or wanted. So, for example, a sense of embodied mobility may occur in a literal way, actualizing the power of one's own body to move in various ways and towards different desired outcomes. This is a literal “bodying forth”. Therefore, one important source of the kind of well-being that is given to bodily existence is an active power to move in, and with, one's world and others. At a more existential level, a sense of vitality can refer to

energized bodily feeling that can occur without literal physical movement such as in imagination, eroticism or any other generalized desire where one feels the energy of this motivation as a palpable bodily experience; it is an incarnate sense of vitality. This sense of vitality constitutes a kind of well-being because it essentially provides life forward and life-positive qualities of “being an actor” or “agent” in the world; of extending one's power freely, a “life force” in the world through bodily sensation and capacity. Without this possibility, one may feel depleted and lacking in bodily energy and functional capacity. In relation to the implications of this well-being emphasis for care, contexts, one could ask the question: What possibilities for bodily vitality can be offered and supported to this person as either a literal reality or as a focus for possible experiential engagement? A literal example of the possibility of restoring a sense of vitality may be where a physiotherapist works with a person to maximize a dysfunctional limb so that literal movement is enhanced. An example of facilitating a sense of vitality in a more metaphorical or existential way may occur in the case of a person who is experiencing an embodied listlessness and lethargy. Here, a carer may understand that this bodily listlessness and lethargy is not disconnected from the person's felt sense of “how” or “where” their life is going, where they feel blocked and where there may be possibilities for moving forward.

Firstly, with such an understanding, the carer may help the person to first see a link between their bodily sense of lethargy and the blocked life projects that are announced. Secondly, the carer may help the person to then focus their energies on meaningful possibilities that are relevant to them. If this is successful, the sense of existential movement achieved will concurrently constitute the more bodily felt level of “movement” that we are calling vitality. Well-being as a sense of vitality thus occurs as the bodily sense of refreshed possibilities in literal and metaphorical ways.

Embodied dwelling: comfort

There is a well-being experience that is in touch with one's sense of “comfort” as a bodily experience. When such a sense of bodily comfort is felt, a person may literally experience their body as warm, full, relaxed, still, satiated and rooted. Here, one feels a welcome simple sense of “being at home” in one's body, simply feeling the support or nourishment of the reliable rhythms of one's natural bodily functions, as in the gentle rise and fall of the breath or the relaxation of the body at rest. In bodily comfort, there is a certain unforced sense of familiarity and

intimacy with the internal natural and organic rhythms announced by the body. There are also silent and unseen rhythms that we take for granted but which support the palpable sense of comfort. Such natural comfort is, in a sense, unthought or pre-reflective. The comfortable body is simply there in its reliable givenness. Here, one is unpre-occupied with the body. The body does not announce itself as a “dilemma”; it “just is” and is in “letting be” mode. We know comfort through a kind of trust rather than through a purposeful search. At its depths, such bodily comfort is connected to natural rhythms beyond oneself such as the rhythms of day and night, warmth and coolness and other fleshly contexts that are familiar to a body that feels comfortable in its context. We can also think of the comfort of bodily dwelling in a more metaphorical way as in Mary Oliver’s (2004) expression your “*soft animal body*”, a body ‘curled up’ or “folded in” with sources of nourishment and support, sustaining a bodily sense of well-being. Metaphorically, we could say that the body knows that it comes from primordial darkness, intimate with rhythms within rhythms lapping on this fleshly shore. Bodily comfort as well-being is something the body deeply knows as a tacit, self-evident foundation to healthy being. Comfort constitutes a kind of well-being because it essentially provides an embodied dwelling in which there are qualities of “non purposeful natural presence” as a foundation for being there. Such comfort is a bodily “gravitas” that makes possible an embodied openness to the world. Without comfort as a well-being possibility, one may feel a sense of *dis-ease*, a pre-occupation with the palpable bodily sense that “something is wrong”. In relation to the implications of this well-being emphasis for care, one can ask the question: What possibilities for bodily comfort are available to this person at either a literal or existential level? A literal example of the possibility of restoring a sense of comfort will be familiar to many readers. Here for example, a carer may aim to bring comfort to a paralysed person through being sensitive to the need for a change of position, and to facilitate a welcome refreshment through bathing, clean linen, a warm drink and with attention to minimizing noise and bright light. A more existential example of promoting a sense of comfort may occur in the case of an immigrant who is experiencing bodily restlessness and insomnia. Here, a professional may understand this restlessness and insomnia in a way that is not disconnected from the person’s felt sense of “trying to find a way back home”, where home in a literal sense is no longer available. With such an understanding, the professional may help the person to find bodily reminders of feeling at home, perhaps through

familiar foods or other possible ways that connect the person to the bodily feeling of comfort of what home is like for them. If this is successful to some degree, the sense of existential settling that is achieved may also constitute the more bodily level of comfort that provides enough security to perhaps “settle” and sleep. Well-being as a sense of comfort thus occurs as the bodily sense of “feeling at home” and settling in literal and metaphorical ways.

Embodied dwelling-mobility: grounded vibrancy

There is a well-being experience that can hold a sense of embodied mobility and embodied-dwelling at the same time, an experience that unifies vitality with comfort. We call this experience “grounded vibrancy”. In grounded vibrancy, a person’s bodily existence is felt as an intertwining of gentle energized flow, unified with a bodily sense of feeling deeply at home and settled. In this complex experience, there may be a bodily sense of both “being” and “becoming” at the same time; a sense of fullness that solidly anchors the body and with it, a “humming” vibrancy that is attracted to unfinished horizons. This paradoxical quality of grounded vibrancy contains both a sense of the freshness of renewal and great possibility as well as a sense of the deep continuity that belongs to feeling “at one with” oneself and the world. This bodily well-being experience can be expressed more poetically as a “well-spring, a bubbling brook at its source, out of the ground”. The bodily feeling where being and becoming “are humming” can constitute a welcome and effortless bodily tension or oscillation between the body’s “quest” (the attraction to unfinished horizons) and satiation (the comfort of bodily fulfilment). The body’s “quest” is given by a certain kind of vitality that is the essence of the feeling of “being attracted”. At the same time, a bodily sense of comfort is experienced at a deeper level in the background. This background bodily sense of completeness and tranquility holds and empowers a bodily vibrancy that is “ticking over” with potential, and a readiness to live forward. In relation to the implications of this well-being emphasis for care, one could ask the question: What possibilities are there that would allow a person to experience grounded vibrancy? Because of the complexity of this experience, its circumstance cannot be determined or predicted: situations that facilitate either comfort or vitality can make way for it. But there is something “extra” to the comfort or vitality. So, for example, we were told a story by one of our friends about a man with dementia. He is outside with his carer on a hot day, and sees an ice cream van. He does not know what to call it, but points,

and his carer buys him one. He tastes and his eyes light up. He looks for words but can't find them, so exclaims: "This is a good one!!" Here, there is a deep bodily satisfaction and recognition as well as an enthusiasm that links the body's "satiation" to the vibrant world of a "hot-summer's-day-full-of -ice-cream-potential". Well-being as a sense of grounded vibrancy is any bodily experience where variations of rest and comfort are intertwined with variations of alertness and vitality.

Conclusion

Although we have given examples of specific possible ways that each of the well-being emphases can be facilitated within a caring context, such experiential possibilities should not be understood in a deterministic way as if certain conditions will inevitably lead to certain well-being experiences. Within the human realm, experiential well-being possibilities can happen unpredictably in spontaneous and unexpected ways. The conditions for well-being such as economic, political, social, health related, and institutional may provide either a support or an obstruction to well-being, but these conditions are not always sufficient or necessary for the experience of well-being to occur. This existential view of well-being is thus consistent with a resource-oriented approach in which the possibilities for well-being experiences can be revealed or focused upon from the perspective of its widest literal and deepest existential contexts. By considering the multi-dimensional facets of well-being as articulated in this framework, we may widen and complexify the range of possible resources that are available for the alleviation of suffering. Here, suffering is much more complex than illness, and well-being is much more complex than health. In our view, it is this multi-dimensional complexity that defines the deepest scope of caring science.

We would also like to say something about the deepest possibility of well-being as a developmental calling beyond the context of caring science (the focus of this present paper). There is obviously a relationship between "existence" and "caring", but well-being as an existential call far exceeds the vocation of caring science. Beyond the scope of this article, the existential theory of dwelling-mobility also has implications for a broader quest towards well-being as an existential task. For example, a further development of the theory could focus on an articulation of the deepest possibilities of well-being as "an existential pull" in peoples' lives. Future elaboration of the theory would then focus on the developmental processes by which human attention can be widened in such a way as to sustain multiple intertwined dimensions of well-being as an increas-

ingly available conscious resource at the foundation of experiential life.

Having acknowledged the existential developmental task that is given by the call of well-being, we would like to finally come back to the importance of our theory of well-being for the project of caring science. In the midst of suffering, a felt experience of well-being is particularly important to people as an inner resource when they are facing health-related challenges. Carers can then become much more attuned to the importance and value of this felt experience for the person. The wider "vocabulary" for well-being experiences that are offered here may contribute to an emerging cultural discourse that wishes to put well-being as a value more centrally at the forefront of public life.

Conflict of interest and funding

The authors have not received any funding or benefits from industry or elsewhere to conduct this study.

Acknowledgements

We would like to thank Karin Dahlberg for helpful conversations and comments.

Notes

1. We cannot here pursue the continental philosophical reasoning behind this statement. Suffice to say that we do not just mean simply "subjective well-being", but rather an understanding that is based on Heidegger's "Befindlichkeit" and further pursued in Merleau-Ponty's ideas. Here, experiential well-being is seen as a bodily informed phenomenon that speaks of our relation to Being. That is, it is an intentional bodily phenomenon that can tell us something authentic about ways of living in the world.
2. There are many different interpretations of Heidegger and the controversies concerning his earlier and later works. However in following Mugerauer, we have been encouraged by finding similar broad interpretations of Heidegger in other scholars such as Safranski (1999), Inwood (1999) and Moran (2000).
3. Previously, we have indicated that in "Being and Time" although homelessness is more profound than "at homeness", in Heidegger's later work (particularly "Building, Dwelling and Thinking"; "Art and Space" and [*Gelassenheit*] "Discourse on Thinking"), he emphasizes at homeness more and more, even though this never eradicates homelessness, and we end that paper with how Heidegger finally raises the possibility of homecoming within the homeless (Todres & Galvin, 2010).
4. We acknowledge that these philosophers do not necessarily agree about the nature of these experiential domains and the differential roles that they play. In this respect, we mainly follow Heidegger and Boss in naming these domains but, following Merleau-Ponty (1962) and Ashworth (2003), on the notion of "self-hood", we have found it useful to add the dimension we call "identity" as it provides a helpful nuance to our theory of well-being.

5. We acknowledge that the Heidegger of “Being and Time” emphasizes futurity (as we emphasize in our section on temporal mobility). However, there are indications, following Mugerauer, that in Heidegger’s later works on the topics of Dwelling and Gelassenheit, “to stand in the clearing” had a present-centred emphasis, even though none of the three ecstasies of time are ever alone or without one another.

References

- Ashworth, P. D. (2003). An approach to phenomenological psychology: The contingencies of the lifeworld. *Journal of Phenomenological Psychology, 34*, 145–156.
- Basho, (1692–1694/ 2008). *The complete Haiku translated with an introduction biography and notes by Jane Reichhold*. London: Kodhansha International.
- Boss, M. (1979). *Existential foundations of medicine and psychology* (S. Conway & A. Cleaves, Trans.). New York: Jason Aronson.
- Dahlberg, K., Todres, L., & Galvin, K. T. (2009). Lifeworld-led healthcare is more than patient-led care: An existential view of well-being. *Medicine Healthcare and Philosophy, 12*(3), 265–271.
- Heidegger, M. (1959/1966). *Discourse on thinking*. (J. M Anderson & E. H. Freund, Trans.). New York: Harper & Row, *Gelassenheit*, 1959.
- Heidegger, M. (1962). *Being and time* (J. Maquarrie & E. Robinson Trans.). Oxford, UK: Basil Blackwell.
- Heidegger, M. (1969/1973). *Art and space* (Vol. 6) (pp. 3–5)(C. H. Seibert, Trans.). Man and World, [Kunstund Raum, 1969].
- Heidegger, M. (1971/ 1993). Building, dwelling, thinking. In D. F. Krell (Ed.), *Basic writings: Martin Heidegger* (pp. 343–364). Routledge: London.
- Heidegger, M. (1971). *Poetry, language, thought* (A. Hofstadter, Trans.). New York: Harper and Row.
- Heidegger, M. (1977). *The question concerning technology and other essays*. New York: Harper and Row.
- Heidegger, M., Boss, M., Mayr, F. K., & Askay, R. R. (2000). *Zollikon seminars: Protocols-conversations-letters (SPEP studies in historical philosophy)*. Evanston: Northwestern University Press.
- Husserl, E. (1970). *The crisis of European sciences and transcendental phenomenology: An introduction to phenomenological philosophy*. Evanston: North Western University Press.
- Inwood, M. (1999). *A Heidegger dictionary*. Oxford: Blackwell.
- Jung, C. G. (1961/1995). *Memories, dreams, reflections*. (A. Jaffe Ed.), London: Fontana Press.
- Merleau-Ponty, M. (1962). *Phenomenology of perception* (C. Smith, Trans.). London: Routledge and Kegan Paul.
- Moran, D. (2000). *Introduction to phenomenology*. London: Routledge.
- Mugerauer, R. (2008). *Heidegger and homecoming: The leitmotif in the later writings*. Toronto: University of Toronto Press.
- Oliver, M. (2004). *Wild geese: Selected poems*. Northumberland, UK: Bloodaxe World Poets Series 2.
- Safranski, R. (1999). *Martin Heidegger: Between good and evil*. (E. Osers, Trans.). Cambridge, Massachusetts: Harvard University Press.
- Todres, L., Galvin, K. T., & Dahlberg, K. (2007). Lifeworld-led healthcare: Revisiting a humanising philosophy that integrates emerging trends. *Medicine Healthcare and Philosophy, 10*(1), 53–63.
- Todres L & Galvin KT (2010) “Dwelling-Mobility”: An existential theory of well-being. *International Journal of Qualitative Studies in Health and Well-being, 5*. DOI 10.3402/QHW.v5i3.5444