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One of the priorities for college campuses is an emphasis on promoting healthy behaviors. To assess health promotion behaviors of college students the Wellness Evaluation of Lifestyle *(WEL) was used. Students in this study scored highest on the WEL subscales of Love and Sense of Worth and lowest on Nutrition and Stress Management. Comparison with national norms indicates differences on several of the scale scores. Implications for current practice and future research are discussed in relation to the findings.*

One of the priorities for college campuses according to *Healthy Campus 2010* is an emphasis on promoting healthy behaviors (American College Health Association, 2004). Assessing the health-promoting behaviors of college students should be the first step in identifying prevention strategies that will create healthy campuses. Considering the large number of students enrolled in college — 10.8 million, according to the Bureau of Labor Statistics — research related to wellness behaviors has the potential for impacting large numbers of students in the college environment.

Myers, Sweeney, and Witmer (1998) developed the *Wellness Evaluation of Lifestyle* (WEL) as a method for describing wellness behaviors that encompass factors related to the body, mind, and spirit. The WEL evaluation of lifestyle was designed to identify wellness behaviors encompassing both physical and psychological dimensions of behavior. To examine healthy behaviors of the college population, the present study[1] focused on six of the subscales of the WEL instrument, including Spirituality, Sense of Worth, Nutrition, Exercise, Stress Management, and Love. With the increased emphasis on health promotion and wellness, further research is needed to identify wellness behaviors in college students.

The following research questions were developed to explore wellness behaviors of first-year college students:

1. What are the wellness behaviors in first-year college students?
2. How do the wellness scores of this sample of first-year college students compare with scores from a national sample of college students?

METHOD

The sample consisted of 1,007 (n = 535 women, n = 470 men, gender data missing for 2 participants) first-year students enrolled in a one-credit required general education course, Skills for Healthy Living, at the College of Saint Benedict/Saint John's University, two moderate-sized, Midwestern, Catholic liberal arts colleges. Students ranged in age from 18–20 years. All first-year students in 2002–03 completed the WEL as a course requirement; 100% participation was achieved. The study was reviewed by the institutions' institutional review board and approved with an expedited review.

The WEL survey was formatted for online administration. All first-year students completed the WEL survey on their own time during the first week of the course by entering data directly into the online database. The WEL scale scores were calculated by student assistants and returned to participants via e-mail. Statistical analyses, including Cronbach's alpha coefficients, were conducted using the Statistical Package for Social Sciences (SPSS) 12.0.

The *Wellness Evaluation of Lifestyle* (WEL)[2] is a 123-item self-scored wellness behavior survey using a five-point Likert-type scale. Wellness is measured by 17 subscales consisting of five life tasks. Higher scores indicate a more positive self-rating in wellness behaviors. Previous-use reliabilities indicate internal consistency of the 17 subscales ranging from .61 to .89 (Myers, Sweeney, & Witmer, 1998). The Cronbach's alphas for the current study ranged from .43 (Sense of Control scale) to .82 (Exercise scale) with a total alpha of .88. Only those subscales with Cronbach's alpha at or above .70 are addressed in this study; these include Love (.80), Sense of Worth (.73), Exercise (.82), Spirituality (.82), Stress Management (.79), Nutrition (.78), and Total wellness (.88).

RESULTS

Descriptive statistics for the sample of first-year college students are reported in Table 1. The results from descriptive analyses indicate that students from this sample scored highest on the Love (85.64 out of 100) and Sense of Worth (83.81 out of 100) subscales and lowest on the Nutrition (67.16 out of 100) and Stress Management (73.48 out of 100) subscales.

National, normative, comparative data for the WEL was compiled with 1,357 participants aged 19–25 (Hattie, Myers, & Sweeney, 2004). Table 1 compares the average scores from this sample of first-year students on selected subscales with the average scores for the national sample.

Table 1. Descriptive statistics for WEL scale items

WEL Scale	Present Study (*N* = 1,007)		National Sample (*N* = 1,357)	
	Mean	SD	Mean	SD
Love	85.7	11.1	87.5	13.6
Sense of Worth	83.8	10.6	83.6	12.8
Exercise	79.8	15.3	72.8	18.0
Spirituality	73.7	12.8	75.8	18.0
Stress Management	73.5	10.8	72.1	14.7
Nutrition	67.2	15.8	59.1	20.3

DISCUSSION

Wellness Behaviors

The first objective of the study was to explore wellness behaviors of first-year college students. The online administration of the WEL instrument was very effective in collecting wellness data for this group of first-year college students; all first-year students participated in the survey and complete information was available for all but two students.

This sample of students scored highest in the Love and Sense of Worth subscales. Love was assessed by eight questions related to having at least one relationship that provided physical and emotional intimacy. The high scores on this dimension possibly reflect the importance of social connections in this group of students. According to Reagan and colleagues (personal communication, March 6, 2006) nearly half of the students on these college campuses, 46.9%, reported having had no sexual partners. Because of the relatively low incidence of sexual relationships, higher Love scores may reflect nonsexual friendships or close family ties for this group of students.

The higher Sense of Worth ratings may be related to the increased Love ratings for these students. Sense of Worth included five questions related to accepting and valuing both the self and genuine relationships with others. When students have a high sense of worth, they feel good about themselves, and are more likely to have positive relationships that reflect higher ratings in the Love dimension (Hafen, Frandsen, Karren, & Hooker, 1992).

Student scores on the Nutrition and Stress Management subscales were lower than other WEL scores reported in this study. The Nutrition dimension was evaluated with

five questions related to satisfaction with the variety and amount of food eaten daily. Students struggle with nutrition as they transition to a more independent lifestyle. Factors such as variety of cafeteria food choices, hours of operation of cafeterias, cost of food choices, and increased snacking used as a coping strategy for stress (Hudd, Dumlao, Erdmann-Sager, Murray, Phan, Soukas, & Yokozuka, 2000) all impact the nutrition scores. These low scores indicate the importance of addressing nutrition issues in the college population.

Being able to recognize and positively cope with stress was addressed in the eight questions of the Stress Management subscale. College students must constantly balance the demands of the classroom with work, extracurricular activities, volunteerism and social life (Kim & Seidlitz, 2002; Thome & Espelage, 2004). First-year students, like those in the current study, suddenly away from family, friends, and familiar ways of coping with stress were transitioning to new strategies to manage stress. This transition was reflected in the lower Stress Management scale scores.

National Comparison

The second objective of the study was to compare WEL scores of these first-year students with a national sample. The only available national normative data for the WEL was compiled with 1,357 participants (Hattie et al., 2004). The first-year college students in the present sample had significantly higher mean scores related to exercise, stress management, and nutrition when compared with the national sample from three cultural groups — Caucasian, African-American, and others (comprising mainly Hispanic and Asian-American students). These results may be related to the age of the study group.

The present group of students ranged in age from 18 to 20, whereas the national sample ranged in age from 19 to 25. Myers and Mobley (2004) have reported on the significant differences for traditional versus nontraditional college students. Because of routines established and monitored in high school and home, first-year students may be more likely to continue with exercise, stress management, and nutrition habits when compared with those students in later college years and younger adulthood. For young adults aged 19 to 25, as in the national norm group, limited time can become an issue with juggling varied work and family responsibilities and can have a negative impact on stress management, nutrition, and exercise patterns.

On both the Love and Spirituality subscales the students in the present sample scored lower than the national norm. As mentioned previously, first-year students were away from family and high-school friends for perhaps the first time and this could have had an impact on the closeness these students felt to significant others. These first-year students may not have had the opportunity to develop committed

relationships with significant others in the college setting. The comparatively lower spirituality score may also be related specifically to first-year college students who, for the first time away from their families, had the opportunity to question their beliefs and discover alternative faith traditions.

Limitations of the Study

The unique institutional setting for this sample, including the religious affiliation and coordinate structure of the two colleges, makes generalizations of these findings difficult. Due to the broad conceptualizations of wellness it is difficult to consistently and completely measure wellness and relate findings across studies. The lower alpha reliability scores on several of the WEL subscales make a complete analysis of wellness behaviors in this sample of students particularly difficult. The low subscale reliabilities in this sample are consistent with previous studies using the WEL (Myers et al., 1998). Newer versions of the WEL instrument have been used in several studies with reliability data ranging from .60 to .83 (Myers & Mobley, 2004).

Implications of the Study

This study provided information about wellness factors reported in first-year college students. Findings from the study could be utilized at the institutional level; colleges could explore how the campus academic and student affairs policies align with components of wellness (e.g., residential quiet hours, healthy food options in the dining room, quality exercise facilities). College faculty and staff could consider developing or expanding wellness programming and services, developing or expanding wellness courses within curricula, and incorporating these findings into general class discussions.

These findings also have implications for assisting individual college students. Assessing wellness in first-year students may be particularly helpful in addressing the needs of these students, building on strengths, and applying the findings in individualized wellness interventions. College faculty and staff have a variety of formal (counseling, academic advising) and informal (residential life staff) opportunities to converse with students about their lives. Through these interactions they influence the environment for individual students. On a remedial level, colleges could consider requiring wellness assessments and individual wellness plans for students on academic or judicial probation.

By focusing attention on wellness behaviors of college students, health and education professionals can develop programs and activities to enhance student wellness, thereby impacting their success in college and assisting them in developing healthy behaviors that can be sustained over a lifetime.

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NOTES

1.   A more comprehensive version of this article will be published in the *American Journal of Health Studies*, Volume 21, Issue 4 (Spring/Summer 2007).

2.   The *Wellness Evaluation of Lifestyle* can be obtained online at http://www.mindgarden.com.

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