

Bridging theory and practice in holistic wellbeing education: Participant feedback on a 7DHW-based course

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Abstract: Holistic wellbeing has gained increasing attention across health, organizational, and educational contexts, reflecting its multidimensional and context-dependent nature. The 7 Dimensions of Holistic Wellbeing (7DHW) framework conceptualizes wellbeing as the dynamic interplay between self-esteem, body image, social relationships, environment, meaningful work, health knowledge, and a sense of future. While prior research has focused on the theoretical development and initial validation of the 7DHW model, limited attention has been given to participants' perceptions of holistic wellbeing education grounded in this framework. This study explores participants' opinions and feedback regarding a holistic wellbeing course based on the 7DHW model. Using a cross-sectional, exploratory design, data were collected via an online questionnaire that included both quantitative and open-ended items. The instrument assessed perceived relevance, thematic interests, preferred learning formats, and motivational and contextual factors influencing participation. Findings indicate a high perceived relevance of holistic wellbeing training, with strong interest in stress management, work–life balance, emotional communication, burnout prevention, and self-care. Participants favored flexible and interactive formats, including short videos, interactive modules, and live sessions. Qualitative insights reveal that engagement is shaped by the interplay of intrinsic motivation, time constraints, and organizational support. Overall, the results highlight that the effectiveness of holistic wellbeing programs depends not only on theoretical grounding but also on perceived relevance, accessibility, and alignment with participants' lived experiences. This study provides evidence-informed insights to guide the design and implementation of holistic wellbeing courses grounded in the 7DHW framework.

Keywords: holistic wellbeing; 7DHW; wellbeing education; participant feedback; workplace wellbeing; adult learning; health knowledge

1. Introduction

In recent years, holistic wellbeing has emerged as a central concern across health, organizational, educational, and community contexts, reflecting a growing recognition that health extends far beyond the absence of disease (Silva et al., 2025a; Bai and Lazenby, 2015). The World Health Organization (WHO) defines health as a state of complete physical, mental, and social wellbeing, emphasizing the dynamic interplay between individual, social, and environmental factors in shaping quality of life (World Health Organization, 1946; Kickbusch et al., 2013). This multidimensional

understanding has driven the development of theoretical frameworks and assessment tools that seek to capture wellbeing as an integrated and lived experience rather than a collection of isolated indicators (Silva et al., 2024).

Within this landscape, the 7 Dimensions of Holistic Wellbeing (7DHW) model (Silva et al., 2024) was proposed as a comprehensive, theory-driven framework grounded in WHO principles. The model conceptualizes wellbeing as the interaction of seven interdependent dimensions: (i) self-esteem, (ii) body image, (iii) social relationships, (iv) environment, (v) meaningful work, (vi) health knowledge, and (vii) a sense of future (Silva et al., 2024). Rather than treating these domains as independent constructs, the 7DHW model emphasizes their mutual influence, acknowledging that changes in one dimension may reverberate across others, shaping individuals' coping strategies, life satisfaction, and long-term wellbeing (Silva et al., 2025a).

Building on this theoretical foundation, recent research has focused on operationalizing and validating the 7DHW framework by developing the Holistic Wellbeing Questionnaire. Initial pilot studies demonstrated promising reliability and sensitivity to change over time, highlighting the tool's potential to capture nuanced wellbeing profiles across diverse life contexts (Silva et al., 2025b). Further large-scale psychometric validation studies are currently underway to examine the conceptual coherence, factorial structure, and internal consistency of the seven dimensions in broader populations. These ongoing efforts include planned validations in both Portuguese- and German-speaking adult populations, aiming to strengthen the questionnaire's empirical robustness and support its future applicability in research, clinical, and organizational settings.

While validated measurement instruments are essential, there is an increasing recognition that effective wellbeing interventions must also be informed by the lived experiences, expectations, and preferences of the people they intend to support (Silva et al., 2024; Ryff and Singer, 2006; Keyes, 2007). Participatory and user-centred approaches in health and wellbeing research highlight the importance of integrating subjective feedback to ensure that interventions are meaningful, accessible, and contextually relevant (Bate and Robert, 2006; Sanders and Stappers, 2008). In workplace and adult learning environments, this perspective is particularly salient, as individuals face complex challenges related to stress, burnout, work–life balance, environmental concerns, environmental catastrophes, and uncertainty about the future (World Health Organization, 2022; Maslach and Leiter, 2016; Mosca et al., 2025). In parallel, organizations are increasingly recognizing wellbeing as a strategic priority rather than a peripheral or individual responsibility (LaMontagne et al., 2010; World Health Organization, 2010; Nielsen and Noblet, 2018). Contemporary corporate cultures across both large multinational companies and small-to-medium enterprises are increasingly integrating health and wellbeing into organizational values, policies, and performance indicators, recognizing their direct impact on employee engagement, productivity, retention, and overall organizational sustainability (Grawitch et al., 2006; Harter et al., 2002; Sanders and Breckon, 2023; Burlakova et al., 2020).

Educational and training programmes focused on holistic wellbeing represent a promising avenue for translating multidimensional wellbeing models into practical,

actionable strategies (Ryff and Singer, 2006; LaMontagne et al., 2010). Courses grounded in validated frameworks such as the 7DHW can support self-reflection, awareness, and behavioural change across multiple life domains (Silva et al., 2024; Silva et al., 2025b). However, the effectiveness and sustainability of such programmes depend not only on their theoretical robustness but also on how participants perceive their relevance, content, format, and applicability to daily life (Bate and Robert, 2006; World Health Organization, 2022; Nielsen and Noblet, 2018; World Health Organization, 2018).

In this context, systematically collecting and analysing participants' opinions and feedback becomes a critical step in bridging theory, measurement, and practice. Feedback data provide insight into which wellbeing dimensions resonate most strongly with participants, which themes are perceived as most urgent, and which learning formats best support engagement and integration into everyday routines. Moreover, participant feedback can reveal emerging needs that may not be fully captured by standardized questionnaires alone, enriching the interpretative depth of holistic wellbeing research. The present study aims to explore participants' opinions and feedback on a holistic wellbeing course explicitly grounded in the 7DHW model (Silva et al., 2024; Silva et al., 2025b). Using a structured feedback questionnaire aligned with the conceptual dimensions of the model, this study addresses three research questions: (RQ1) how participants perceive the relevance of a holistic wellbeing course based on the 7DHW framework; (RQ2) what wellbeing themes and learning formats participants prioritize; and (RQ3) what motivational and contextual factors influence engagement. By examining participants' perceived relevance of holistic wellbeing training, thematic interests, preferred learning formats, and motivational factors related to participation, and by situating these insights within the broader theoretical and empirical literature on holistic wellbeing and the 7DHW framework, this article seeks to contribute to evidence-informed design guidelines for holistic wellbeing courses, supporting the development of interventions that are theoretically sound, empirically grounded, and meaningfully aligned with participants' lived experiences.

2. Background

The concept of wellbeing has progressively evolved from a narrow focus on physical health and the absence of disease toward a more holistic, multidimensional, and context-sensitive understanding of human experience (Ryff, 1989; Dodge et al., 2012; World Health Organization, 1995). Contemporary perspectives conceptualize wellbeing as a dynamic, socially situated construct shaped by continuous interaction among individuals, their relationships, and their environments (Keyes, 2007; Dodge et al., 2012). This shift is reflected across disciplines such as psychology, public health, human-computer interaction (HCI), and organizational studies, which increasingly emphasize emotional, social, occupational, and environmental dimensions alongside physical and mental health (World Health Organization, 2010; Calvo and Peters, 2014).

Within this broader landscape, holistic wellbeing frameworks have been proposed to capture the complexity of everyday life and to move beyond fragmented or domain-specific approaches (Dodge et al., 2012; Ryff and Singer, 2008).

Multidimensional models of wellbeing acknowledge that people do not experience health, work, relationships, or personal development in isolation. Rather, these dimensions are deeply interdependent and mutually influential (Ryff and Singer, 2006; World Health Organization, 2010). Disruptions or imbalances in one domain, such as work-related stress or social isolation, can propagate to other domains, affecting emotional regulation, motivation, self-perception, and long-term life satisfaction (Keyes, 2007; Maslach and Leiter, 2016; Antonovsky, 1979). As such, holistic models provide a conceptual foundation for both understanding wellbeing and designing interventions that address it in an integrated manner (Ryff and Singer, 2008; Keever, 2025).

Several multidimensional frameworks and questionnaires have been proposed to operationalize wellbeing across diverse populations and contexts (Ryff, 1989; Diener et al., 2010). Prominent examples include the World Health Organization Quality of Life instruments (WHOQOL), which conceptualize wellbeing across physical, psychological, social, and environmental domains, and the PERMA model, which emphasizes positive emotion, engagement, relationships, meaning, and accomplishment (The WHOQOL Group, 1998; Seligman, 2011). These approaches have made important contributions by moving beyond purely biomedical indicators and by legitimizing subjective experience as a core component of wellbeing assessment (Ryff and Singer, 2008; Lucas and Diener, 2008). However, existing models often privilege either psychological outcomes or health-related quality of life, and may insufficiently capture the relational, occupational, and future-oriented aspects that shape wellbeing in everyday and organizational contexts (Ryff and Singer, 2008; Aust et al., 2024). Moreover, many instruments focus primarily on measurement, offering limited support for reflection, sensemaking, and integration into daily practices (Bate and Robert, 2006; Calvo and Peters, 2014).

The 7 Dimensions of Holistic Wellbeing (7DHW) framework builds on these principles by explicitly articulating wellbeing as the interplay between self-esteem, body image, social relationships, environment, meaningful work, health knowledge, and a sense of future (Silva et al., 2024). Grounded in World Health Organization perspectives on health and wellbeing, the 7DHW model positions wellbeing as an ongoing process of sensemaking, reflection, and adaptation, rather than a static outcome (World Health Organization, 1946; Silva et al., 2024; World Health Organization, 1995). Importantly, the model recognizes that wellbeing is not solely an individual attribute, but is co-constructed through social interactions, organizational contexts, and broader socio-environmental conditions.

In parallel with theoretical developments, there has been a growing emphasis on the need for practical tools that capture holistic wellbeing in meaningful, accessible, and actionable ways (World Health Organization, 2010; Dodge et al., 2012; Shin, 2025). Questionnaires and self-report instruments remain central to wellbeing research and practice, offering structured means to assess subjective experiences across multiple dimensions (Diener et al., 2010; The WHOQOL Group, 1998). However, prior work has highlighted that wellbeing data do not exist independently of interpretation: individuals actively make sense of their own responses, compare them to lived

experiences, and situate them within their personal, social, and professional contexts. From this perspective, questionnaires are not merely measurement instruments, but potential triggers for reflection, awareness, and dialogue (Dodge et al., 2012; Weick, 1995; Kleinman, 2020).

Research in HCI and health-oriented design has further reinforced the importance of considering wellbeing as an experiential and participatory phenomenon (Bate and Robert, 2006; Sanders and Stappers, 2008; Calvo and Peters, 2014). Studies exploring emotional awareness, social sensemaking, and reflective technologies demonstrate that wellbeing-related interventions are most effective when they align with users' everyday practices, values, and motivations (Calvo and Peters, 2014; Weick, 1995; Baumer, 2015; Nielsen and Randall, 2013; Suchman, 1987). Rather than prescribing behaviour change in a top-down manner (Michie et al., 2011; Soares, 2023), these approaches foreground participants' interpretations, preferences, and agency, acknowledging that sustained engagement emerges from relevance and resonance with lived experience (Bate and Robert, 2006; Sanders and Stappers, 2008; Nielsen and Randall, 2013).

This body of work is particularly relevant in workplace and adult learning contexts, where wellbeing is increasingly shaped by complex, interrelated pressures (LaMontagne et al., 2010; World Health Organization, 2010). Contemporary work environments are characterized by heightened cognitive and emotional demands, blurred boundaries between professional and personal life, and growing uncertainty linked to economic, technological, and environmental change (World Health Organization, 2022; Maslach and Leiter, 2016; Parent-Thirion et al., 2016). As a result, wellbeing has become a central concern not only for individuals but also for organizations seeking to foster healthy, resilient, and sustainable work cultures (Harter et al., 2002; Nielsen and Randall, 2013).

In response, organizations across sectors have begun to invest in wellbeing-oriented initiatives, including training programmes, workshops, and team-based activities aimed at promoting awareness, reflection, and mutual support (World Health Organization, 2022; World Health Organization, 2010; Grawitch et al., 2006). These initiatives are increasingly positioned as strategic investments, associated with employee engagement, retention, collaboration, and long-term organizational performance (Harter et al., 2002; OECD, 2021). Nevertheless, existing programmes vary widely in scope, theoretical grounding, and practical relevance, and many lack a clearly articulated holistic framework that integrates multiple dimensions of wellbeing (LaMontagne et al., 2010; Ryff and Singer, 2008).

Educational and training programmes grounded in holistic wellbeing models represent a promising means of bridging theory, measurement, and practice (World Health Organization, 2010; Ryff and Singer, 2008). When based in validated frameworks such as the 7DHW, such programmes can support participants in developing a more integrated understanding of their wellbeing, fostering self-reflection, awareness, and intentional change across different life domains (Silva et al., 2024; Silva et al., 2025b; Bandura, 2004). At the same time, prior research consistently shows that the effectiveness and sustainability of wellbeing programmes cannot be determined solely by conceptual robustness (Nielsen and Randall, 2013; Greenhalgh

et al., 2017). Participants' perceptions of relevance, clarity, format, and applicability to everyday life play a decisive role in shaping engagement, learning outcomes, and long-term impact (Bate and Robert, 2006; Sanders and Stappers, 2008).

In this context, examining participants' opinions and feedback emerges as a central methodological and conceptual concern for holistic wellbeing research (Bate and Robert, 2006; Masterson et al., 2024). Participants' reflections provide insight into how abstract models and structured questionnaires are interpreted, appropriated, and integrated into everyday life (Weick, 1995; Suchman, 1987). Such feedback makes it possible to identify which wellbeing dimensions are perceived as most relevant, how educational content and formats support or hinder reflection, and where gaps remain between theoretical intentions and lived experience (Baumer, 2015; Keyworth et al., 2023). By foregrounding participants' perspectives, feedback-focused studies contribute to the iterative refinement of holistic wellbeing frameworks, questionnaires, and course designs, supporting the development of interventions that are not only theoretically grounded, but also meaningful, usable, and sustainable in real-world contexts (Calvo and Peters, 2014; Greenhalgh et al., 2017; Marrone et al., 2022).

3. Methods

This study adopted a cross-sectional, exploratory methodological approach to capture participants' opinions and feedback on a holistic wellbeing course based on the 7 Dimensions of Holistic Wellbeing (7DHW) framework. Rather than focusing on psychometric validation, the methodological design was oriented toward understanding perceived relevance, interests, preferred formats, and experiential expectations related to holistic wellbeing training. Data were collected via an online self-report questionnaire disseminated via social media, using convenience and snowball sampling. The approach aligns with user-centred and participatory perspectives in wellbeing and educational research, where participant feedback is considered a valuable source of insight for informing course design, content prioritization, and practical implementation.

3.1. Participants

Participants were adults recruited through online dissemination of the questionnaire using social networks and personal contacts, following a snowball sampling strategy (friends and friends-of-friends). Participation was voluntary and anonymous. No exclusion criteria were applied beyond age 18. The questionnaire collected basic sociodemographic information, including age group, gender, educational level, and profession, enabling descriptive characterization of the sample. This recruitment strategy was chosen to reach individuals from diverse professional and educational backgrounds, reflecting the broad target audience of holistic wellbeing courses in the workplace and adult learning contexts.

3.2. Instrument

Data were collected using a structured online questionnaire developed specifically to gather participants' feedback on a prospective holistic wellbeing course grounded in

the 7 Dimensions of Holistic Wellbeing (7DHW) framework. The questionnaire was implemented in Google Forms and comprised a mix of closed- and open-ended items, designed to capture both quantitative trends and qualitative insights. The questionnaire consisted of four main sections.

The first section collected sociodemographic information, including age group, gender, educational level, and professional background, using multiple-choice questions with predefined response options.

The second section assessed interest and perceived relevance of a holistic wellbeing course. Participants were asked to indicate their level of interest in attending such a course and the perceived relevance of holistic wellbeing topics to their personal or professional life using 5-point Likert-type scales (1 = not at all interested, 5 = very interested), allowing for graded responses.

The third section focused on content and format preferences. Participants selected, through multiple-choice and multiple-response items, the wellbeing themes they considered most relevant or appealing, including stress management, burnout prevention, emotional communication, self-care, work–life balance, environmental awareness, body image, and future outlook. In addition, participants indicated preferred learning formats (e.g., short videos, live online sessions, downloadable PDFs, audio content, and interactive activities), enabling the identification of favored educational modalities.

The fourth section addressed engagement and practical considerations related to course participation. This section included multiple-choice questions on preferred mode of participation (individual, group, or company-based), willingness to pay, and interest in receiving a certificate of completion. An open-ended question invited participants to elaborate on their motivations, expectations, and potential barriers to participation in a holistic wellbeing course, yielding richer qualitative feedback.

The questionnaire's thematic structure and item formulation were conceptually aligned with the 7DHW framework's seven dimensions, ensuring coherence between the underlying holistic wellbeing model and the experiential, practical, and educational aspects explored through participant feedback.

3.3. Procedure

The questionnaire was disseminated online between June 2025 and September 2025 via social media platforms and direct sharing within personal and professional networks, using convenience and snowball sampling strategies. The survey link was shared publicly and further circulated through peer-to-peer dissemination, enabling participation from individuals across diverse professional and educational backgrounds.

Participants accessed the questionnaire via a public online link and were first presented with an introductory information page outlining the purpose of the study, its focus on gathering feedback to inform the development of a holistic wellbeing course, and the voluntary nature of participation. The introductory page also informed participants that their responses would be collected anonymously, that no personally identifiable information was required, and that the estimated completion time was

approximately five minutes.

Informed consent was obtained implicitly through participants' voluntary decision to proceed with and complete the questionnaire. To ensure confidentiality, no identifying data was collected from survey responses. An optional field was included at the end of the questionnaire for participants who wished to provide an email address in order to receive information about the future launch of the course. This information was stored separately from the survey responses and was not used in the analysis.

Participants were able to complete the questionnaire using a range of digital devices, including computers, tablets, and smartphones, allowing flexible access and reducing barriers to participation.

3.4. Data analysis

Data analysis followed a descriptive and exploratory approach, consistent with the study's aim of capturing participants' opinions and feedback to inform the design of a holistic wellbeing course. Quantitative data derived from closed-ended items were analysed using descriptive statistics, including frequencies, percentages, and measures of central tendency. These analyses were used to summarize participants' sociodemographic characteristics, levels of interest, perceived relevance of the course, and preferences regarding content themes, learning formats, and practical aspects of participation.

Given the exploratory nature of the study and the sample size, no inferential statistical analyses were conducted. Quantitative results were interpreted descriptively, with the goal of identifying dominant trends and patterns in participant responses rather than testing hypotheses or establishing generalizability.

Responses to open-ended questions were analysed using qualitative thematic analysis with an inductive coding approach. All textual responses were reviewed in full and coded iteratively by the first author to identify recurring themes related to participants' motivations, expectations, perceived benefits, and potential barriers to participation in a holistic wellbeing course. Codes were progressively refined and grouped into higher-level themes through repeated review of the data. Given the exploratory nature of the study and the sample size, coding was conducted manually without the use of qualitative data analysis software. To enhance analytical rigor, the identified themes and their interpretation were discussed among the authors, allowing for reflexive validation and refinement of the thematic structure. Discrepancies in interpretation were resolved through discussion until consensus was reached.

Finally, quantitative and qualitative findings were integrated at the interpretative level to provide a comprehensive overview of participant feedback. This mixed-descriptive approach enabled triangulation of numerical trends with participants' own explanations and reflections, supporting the identification of design implications and guiding principles for the development of holistic wellbeing training programmes grounded in the 7DHW framework.

4. Results

This section presents the results of the quantitative and qualitative analyses of participants' feedback on a holistic wellbeing course grounded in the 7DHW framework. Findings are organized according to the main thematic areas explored in the questionnaire: perceived interest and relevance; preferred wellbeing themes; learning formats and modes of participation; perceived value and certification preferences; and qualitative reflections on motivations and barriers to participation. Quantitative results are reported using descriptive statistics, while qualitative findings are presented through inductively derived themes supported by illustrative participant responses.

4.1. Participants' demographic information

A total of 45 adults participated in the study (**Table 1**). The sample was predominantly feminine ($n = 37$; 82.2%), with 17.8% ($n = 8$) masculine participants. Participants' ages ranged from 18 to 60 years, with the following distribution: 18–20 ($n = 2$), 21–30 ($n = 13$), 31–40 ($n = 3$), 41–50 ($n = 10$), and 51–60 ($n = 17$) age groups. Regarding educational background, most participants reported higher education qualifications, including Bachelor's degree ($n = 18$) and Master's Degree ($n = 16$), with a smaller proportion holding Doctoral degrees ($n = 3$). The remaining participants reported high school education (12 years of schooling; $n = 5$), Bacharelato ($n = 2$), or basic education (9 years of schooling; $n = 1$). This heterogeneous sample reflects a range of adult life stages and professional backgrounds, consistent with the intended target audience of holistic wellbeing programmes in workplace and adult learning contexts.

Table 1. Sociodemographic characteristics of the study participants ($N = 45$).

Variable	Category	n	%
Gender	Feminine	37	82.2
	Masculine	8	17.8
Age group (years)	18–20	2	4.4
	21–30	13	28.9
	31–40	3	6.7
	41–50	10	22.2
	51–60	17	37.8
	Educational level	Basic education (9 years)	1
High school (12 years)		5	11.1
Bacharelato		2	4.4
Bachelor's degree		18	40.0
Master's degree		16	35.6
	Doctoral degree	3	6.7

4.2. Interest in and perceived relevance of a holistic wellbeing course

Participants reported generally high levels of interest in attending a holistic wellbeing course. On the 5-point Likert-type scale assessing interest, the majority of participants selected high values: 16 participants rated their interest as 4, and 12 selected the maximum value of 5. A smaller proportion reported moderate interest (rating of 3), while only a few participants reported low interest (ratings of 1 or 2).

Overall, the mean interest score was $M = 3.67$ with a standard deviation of $SD = 1.19$, indicating a generally positive, though somewhat variable, level of interest across participants.

Perceived relevance of a holistic wellbeing course followed a similar but slightly stronger pattern. Most participants rated the course as highly relevant, with 15 participants selecting 4 and 22 selecting 5 on the relevance scale. Only a small number of participants found the course to be low in relevance. The mean perceived relevance score was $M = 4.18$, with a standard deviation of $SD = 1.07$, suggesting a high overall perception of relevance and comparatively lower variability than for interest ratings.

Discussion

The high levels of reported interest and perceived relevance observed in this study indicate a strong alignment between participants' perceived needs and the proposed holistic wellbeing course grounded in the 7DHW framework (Silva et al., 2024; Silva et al., 2025b). While both constructs were rated positively, perceived relevance was notably higher and less variable than interest, suggesting that participants broadly recognize the importance of holistic wellbeing training even when personal enthusiasm or immediate motivation to participate may differ.

This pattern is consistent with prior research in workplace wellbeing and adult learning contexts, which shows that individuals often acknowledge the relevance of wellbeing initiatives while simultaneously negotiating practical constraints such as time availability, workload, and competing responsibilities (LaMontagne et al., 2010; Nielsen and Randall, 2013; Knowles et al., 2014). From a design perspective, this distinction highlights the importance of not equating perceived relevance with automatic engagement, but rather of developing course formats and delivery strategies that lower participation barriers and enhance accessibility.

Within the 7DHW framework (Silva et al., 2024; Silva et al., 2025b), the high relevance ratings may reflect participants' recognition of the interconnected challenges addressed by the model, particularly those related to stress management, work–life balance, emotional communication, and future outlook. The variability observed in interest scores further underscores the value of flexible, modular, and context-sensitive course designs that allow participants to engage with wellbeing content at their own pace and according to their immediate priorities.

Taken together, these findings reinforce the importance of grounding holistic wellbeing programmes not only in validated theoretical frameworks, but also in participant-centred design principles that acknowledge differing motivational states, life circumstances, and organizational contexts. By explicitly addressing this gap between perceived relevance and engagement readiness, holistic wellbeing courses may achieve greater uptake, sustained participation, and long-term impact.

4.3. Preferred wellbeing themes

Participants were invited to indicate the wellbeing themes they considered most relevant, with the possibility to select multiple options. The full list of wellbeing themes presented to participants included: stress management, burnout prevention, emotional communication, self-care, work–life balance, environmental awareness, body image,

and future outlook. The most frequently selected themes were stress management ($n = 32$; 71.1%), work–life balance ($n = 27$; 60.0%), emotional communication ($n = 26$; 57.8%), and burnout prevention ($n = 22$; 48.9%).

Self-care was also commonly selected ($n = 21$; 46.7%), followed by future outlook ($n = 17$; 37.8%). Themes related to the environment ($n = 11$; 24.4%) and body image ($n = 10$; 22.2%) were selected less frequently, although still by a notable proportion of participants.

Overall, the distribution of selected themes indicates that participants prioritize wellbeing topics related to emotional regulation, occupational balance, and stress-related challenges, while also recognizing the relevance of broader future-oriented and environmental dimensions.

Discussion

The distribution of preferred wellbeing themes provides important insight into how participants prioritize different dimensions of holistic wellbeing in their everyday lives. The prominence of stress management, work–life balance, emotional communication, and burnout prevention reflects the centrality of emotional and occupational challenges in contemporary adult and workplace contexts. These findings are consistent with the broader literature highlighting increasing cognitive and emotional demands, blurred boundaries between work and personal life, and heightened burnout risk across diverse professional settings (Maslach and Leiter, 2016; Bakker and Demerouti, 2007).

Within the 7DHW framework (Silva et al., 2024; Silva et al., 2025b), the themes most frequently selected by participants map strongly onto the dimensions of meaningful work, self-esteem, social relationships, and health knowledge, suggesting that participants intuitively recognize the interdependence between emotional regulation, relational dynamics, and occupational wellbeing. The strong emphasis on stress and burnout further underscores the relevance of preventive and reflective approaches that address wellbeing not only as an individual responsibility, but as a systemic and contextual phenomenon (Maslach and Leiter, 2016; LaMontagne et al., 2010; Bakker and Demerouti, 2007).

At the same time, the selection of self-care and future outlook by a substantial proportion of participants highlights an awareness of wellbeing as a longer-term, self-regulatory process that extends beyond immediate stressors. Although environmental and body image dimensions were selected less frequently, their inclusion by a meaningful subset of participants suggests that these domains remain relevant, particularly when considered in relation to sustainability, identity, and embodied experience.

From a course design perspective, these findings support the value of modular and flexible programme structures that allow participants to engage more deeply with themes perceived as most urgent, while still maintaining exposure to less immediately salient but conceptually important dimensions of holistic wellbeing (Calvo and Peters, 2014; Knowles et al., 2014; Merrill, 2012; El Galad et al., 2024). Such an approach aligns with the core premise of the 7DHW model (Silva et al., 2024; Silva et al., 2025b), which emphasizes the dynamic and interconnected nature of wellbeing across life domains.

4.4. Preferred learning formats and modes of participation

Regarding learning formats, participants expressed a clear preference for flexible and interactive modalities, with the option to select multiple formats. Short videos were the most frequently selected format ($n = 28$; 62.2%), followed by interactive modules ($n = 25$; 55.6%) and live online sessions ($n = 24$; 53.3%). Downloadable PDFs were selected by 17 participants (37.8%), while audio content was selected by 11 participants (24.4%).

These results indicate that participants value learning materials that combine conciseness, interactivity, and opportunities for engagement, while still recognizing the usefulness of more traditional or asynchronous formats.

Regarding modes of participation, participants reported interest in both individual and collective learning contexts. In addition to individual participation, many participants indicated interest in group-based or company-integrated formats, highlighting the perceived relevance of holistic wellbeing initiatives within organizational and team-based settings.

The learning formats presented to participants included: short videos, live online sessions, downloadable PDFs, audio content, and interactive modules. Modes of participation included individual, group-based, and company-integrated formats.

Discussion

Participants' preferences for learning formats highlight the importance of flexibility, interactivity, and accessibility in the design of holistic wellbeing courses for adult and workplace contexts. The prominence of short videos, interactive modules, and live online sessions suggests that participants value learning experiences that are concise, engaging, and adaptable to varying schedules and attention demands (Knowles et al., 2014; Mayer, 2002; Guo et al., 2014). This finding aligns with research in adult learning and digital education, which emphasizes the effectiveness of modular, multimedia-based approaches for supporting sustained engagement and self-directed learning (Knowles et al., 2014; Merrill, 2012).

Within the context of holistic wellbeing training, these preferences underscore the need to move beyond static, text-only materials and toward blended learning designs that combine reflective content with opportunities for interaction and dialogue (Hu and Xiao, 2025). The continued relevance of downloadable PDFs and audio content further indicates that participants appreciate having access to resources that can be revisited asynchronously, supporting integration of wellbeing practices into everyday routines (Hrastinski, 2008).

The expressed interest in both individual and group-based modes of participation has important implications for the implementation of wellbeing programmes grounded in the 7DHW framework (Silva et al., 2024; Silva et al., 2025b). While individual participation may support personal reflection and self-paced engagement, group-based and company-integrated formats can facilitate shared sensemaking, social support, and collective reflection, key mechanisms through which wellbeing is co-constructed in organizational settings (Knowles et al., 2014; Hrastinski, 2008; Salmon, 2013).

Taken together, these findings suggest that holistic wellbeing courses may benefit

from hybrid delivery models that allow participants to engage individually while also offering structured opportunities for collective learning and discussion. Such flexibility not only accommodates diverse preferences and organizational contexts but also aligns with the 7DHW model's emphasis on the interdependence among the individual, social, and occupational dimensions of wellbeing (Silva et al., 2024; Silva et al., 2025b).

4.5. Perceived value, accessibility, and formal recognition

Participants were asked to indicate how much they would be willing to pay for a holistic wellbeing course. Responses revealed considerable variability in willingness to pay. The most frequently selected category was €20–€30 (n = 11; 24.4%). Other common responses included up to €20 (n = 9; 20.0%) and free access (n = 8; 17.8%). Smaller proportions of participants indicated willingness to pay €40–€50 (n = 7; 15.6%),

€30–€40 (n = 6; 13.3%), or more than €50 (n = 4; 8.9%). The response options presented to participants included: free, up to €20, €20–€30, €30–€40, €40–€50, and more than €50.

Furthermore, participants were also asked to indicate the type of certification they considered relevant for a course of this nature. Responses were evenly distributed across the available options. Specifically, 33.3% of participants indicated that a certificate of participation was important (n = 15), 33.3% preferred a recognized certificate (n = 15), and 33.3% reported that certification was not a relevant factor for their participation (n = 15). The certification options presented included: certificate of participation, recognized certificate, and certification not considered relevant.

Discussion

Participants' responses regarding willingness to pay and certification preferences provide important insight into how holistic wellbeing training is valued, accessed, and legitimized in adult and workplace contexts. The observed variability in willingness to pay suggests that, while participants generally recognize the relevance of holistic wellbeing training, their capacity or readiness to invest financially differs considerably (Skivington et al., 2021). The concentration of responses in the lower to mid-range price categories (€20–€30 and up to €20), together with a notable proportion of participants preferring free access, highlights the importance of affordability and accessibility as central considerations for course design and dissemination.

This pattern aligns with prior research indicating that perceived relevance does not necessarily translate into willingness to pay, particularly for wellbeing-related interventions, which are often viewed as desirable but non-essential when competing with other financial and time-related demands (LaMontagne et al., 2010; Greenhalgh et al., 2017; Loewenstein et al., 2007). From a design perspective, these findings underscore the need to balance sustainability with inclusivity, for example, by offering tiered pricing models, institutional or organizational sponsorship, or blended formats that combine free introductory content with optional paid components (Greenhalgh et al., 2017; Baicker et al., 2010).

Certification preferences further illuminate participants' motivational orientations. The evenly distributed responses across certificate of participation, recognized

certification, and no interest in certification suggest the coexistence of distinct engagement logics within the same target population. For some participants, formal recognition may enhance perceived value, professional legitimacy, or organizational uptake, particularly in workplace or continuing education contexts (Eraut, 2004; Boud and Solomon, 2001; Colley et al., 2003). For others, engagement appears to be primarily intrinsically motivated, with personal relevance and practical applicability outweighing the importance of formal credentials (Knowles et al., 2014; Deci and Ryan, 2000; Ryan and Deci, 2000).

Within the context of the 7DHW framework (Silva et al., 2024; Silva et al., 2025b), these findings reinforce the importance of designing holistic wellbeing programmes that remain flexible not only in content and format, but also in how value and recognition are structured. Offering optional certification pathways, rather than mandatory credentials, may allow programmes to accommodate diverse motivations while avoiding exclusionary barriers (Dikilitas and Fructuoso, 2023). Taken together, the results highlight that the long-term sustainability and impact of holistic wellbeing courses depend not only on theoretical robustness but also on careful consideration of economic accessibility, perceived value, and the varied ways participants seek recognition and meaning from learning experiences.

4.6. Practical considerations and qualitative feedback

Participants were asked whether they would attend the holistic wellbeing course outside the scope of their company, on their own initiative, and to justify their response in one sentence. Qualitative analysis of the justifications revealed several recurring themes that shed light on participants' motivations, constraints, and contextual considerations regarding individual participation.

Overall, responses reflected a balance between intrinsic motivation and perceived relevance, on the one hand, and practical constraints and organizational expectations, on the other.

4.6.1. Intrinsic motivation and personal responsibility for wellbeing

Many participants who answered positively to attend a course on their own initiative expressed a strong sense of personal responsibility for their own wellbeing. These responses framed participation as a self-initiated learning opportunity driven by curiosity, self-development, or the perceived importance of wellbeing in everyday life (Ntoumanis et al., 2021).

Illustrative responses included statements such as:

- “I want to do it on my own initiative.” (English); “Quero fazer por minha iniciativa própria.” (Original)
- “I consider wellbeing to be very important.” (English); “Considero o bem-estar muito importante.” (Original)
- “To learn more about the subject.” (English); “Para poder aprender mais sobre o tema.” (Original)

These responses suggest that, for some participants, holistic wellbeing is understood as an individual, ongoing process that merits proactive engagement,

independent of organizational support.

4.6.2. Time constraints and workload as barriers to individual participation

Among participants who indicated they would not attend the course outside the company context, lack of time emerged as a dominant theme. These participants emphasized the difficulty of engaging in additional learning activities outside working hours, given existing professional and personal demands.

Typical responses included:

- “Not much time to do it outside of working hours.” (English); “Pouco tempo para o fazer fora de horário de trabalho.” (Original)
- “Lack of time outside the professional context.” (English); “Falta de tempo fora do contexto profissional.” (Original)

This theme highlights how structural and temporal constraints can limit engagement, even when perceived relevance is high.

4.6.3. Preference for organizational or institutional support

Some participants justified their responses by emphasizing the role of the organizational context in enabling participation. These responses suggested that engagement in wellbeing training is more feasible or meaningful when integrated into workplace structures, schedules, or organizational initiatives (Aust et al., 2024; LaMontagne et al., 2010; Nielsen and Randall, 2013).

Examples included:

- “It makes more sense in the context of the company.” (English); “Faz mais sentido no contexto da empresa.” (Original)
- “If it were integrated into the work, it would be easier.” (English); “Se fosse integrado no trabalho, seria mais fácil.” (Original)

These responses indicate that, for some individuals, wellbeing initiatives are perceived as more legitimate, accessible, or sustainable when supported institutionally rather than pursued independently.

4.6.4. Life circumstances and employment status influence participation

A smaller subset of responses reflected participants’ current life or employment situations, such as unemployment or transitional phases, which shaped their answers. In these cases, willingness or unwillingness to participate individually was not linked to a lack of interest but to contextual factors.

For example:

- “As I am not currently employed by any company...” (English); “Como atualmente não frequento nenhuma empresa...” (Original)

This theme reinforces the importance of considering broader life contexts when interpreting engagement intentions.

Discussion

The qualitative findings on participants’ willingness to attend the holistic wellbeing course outside the organizational context highlight the complex interplay among individual agency, contextual constraints, and institutional support in shaping

engagement with wellbeing initiatives. While many participants articulated strong intrinsic motivation and a personal commitment to learning about holistic wellbeing, their responses also revealed that motivation alone is often insufficient to sustain participation when faced with practical constraints such as limited time, heavy workloads, and competing responsibilities (Chowhan and Pike, 2023).

Participants who expressed willingness to attend the course on their own initiative frequently framed wellbeing as a personal responsibility and an ongoing process of self-development. This orientation resonates with the 7DHW framework's emphasis on self-esteem, health knowledge, and a sense of future as dimensions that support reflective and proactive engagement with wellbeing (Silva et al., 2024; Silva et al., 2025b). From this perspective, holistic wellbeing learning is perceived as meaningful beyond immediate organizational demands and is integrated into broader life trajectories.

In contrast, participants who reported reluctance to engage outside the workplace context often did so not because of a lack of interest or perceived relevance, but because of structural and temporal limitations. The prominence of time constraints in these responses underscores a recurring challenge in adult learning and workplace wellbeing research: even highly valued interventions may remain inaccessible if they are positioned as additional demands rather than embedded within existing routines (Knowles et al., 2014; Billett, 2001). This finding reinforces the notion that wellbeing should not be treated solely as an individual responsibility but as a shared concern that is shaped by organizational cultures, policies, and resource allocation (LaMontagne et al., 2010; World Health Organization, 2010).

The expressed preference for organizational or institutional support further underscores the workplace's role as a key enabling context for holistic wellbeing engagement. For some participants, company-integrated formats appear to legitimize participation, reduce practical barriers, and facilitate collective sensemaking and mutual support, mechanisms that align closely with the social relationships and meaningful work dimensions of the 7DHW model (Bate and Robert, 2006; Weick, 1995). These findings suggest that organizational endorsement may play a critical role in transforming individual interest into sustained participation (Bleier et al., 2023; Aust et al., 2024).

From an applied psychology perspective, this study contributes to understanding how perceived relevance, motivational orientation, and contextual affordances interact to shape engagement with wellbeing interventions. Taken together, the results point to the importance of designing holistic wellbeing programmes that accommodate both individual initiative and organizational integration. Flexible delivery models that allow participants to engage autonomously while also offering structured opportunities within workplace settings may be particularly effective in addressing diverse motivational profiles and life circumstances (Nielsen and Randall, 2013; Knowles et al., 2014; Billett, 2001). By acknowledging the situated nature of wellbeing engagement, such approaches are more likely to support sustained participation and meaningful impact, in line with the holistic and context-sensitive principles underpinning the 7DHW framework (Silva et al., 2024; Silva et al., 2025b).

5. Conclusion

This study explored participants' opinions and feedback regarding a holistic wellbeing course grounded in the 7 Dimensions of Holistic Wellbeing (7DHW) framework, with the aim of informing the design, delivery, and practical implementation of holistic wellbeing education in adult and workplace contexts. By combining quantitative and qualitative feedback, the findings provide insight into how future and possible participants perceive the relevance of holistic wellbeing training, which well-being dimensions they prioritize, and which formats and conditions best support engagement and meaningful participation.

Overall, participants reported high perceived relevance of a holistic wellbeing course and expressed strong interest in stress management, work-life balance, emotional communication, burnout prevention, and self-care. These priorities reflect contemporary challenges faced by adults in professional and personal life and align closely with the interconnected dimensions articulated by the 7DHW model. Preferences for flexible, interactive learning formats, such as short videos, interactive modules, and live sessions, further underscore the importance of adaptable, user-centred course designs that accommodate diverse schedules, learning styles, and organizational contexts.

Importantly, the study highlights that engagement with holistic wellbeing training is shaped not only by perceived relevance but also by practical considerations related to time availability, financial accessibility, and institutional support. Qualitative findings revealed a nuanced interplay between individual agency and structural conditions, with some participants emphasizing personal responsibility for wellbeing, while others pointed to the enabling role of organizational integration in making participation feasible and sustainable. These insights reinforce the value of hybrid delivery models that support both self-initiated learning and workplace-based participation, in line with the 7DHW framework's emphasis on wellbeing as a socially and contextually co-constructed process.

By foregrounding participant feedback, this study contributes to a growing body of research that positions wellbeing questionnaires and educational interventions not merely as measurement tools, but as reflective and dialogical artefacts that support sensemaking, awareness, and intentional change. This study contributes to applied psychology by demonstrating how perceived relevance, motivational dynamics, and organizational context interact to shape engagement with wellbeing interventions, highlighting the importance of aligning theoretically grounded frameworks with participants' lived experiences, contextual constraints, and opportunities for meaningful integration into everyday life and work practices. The findings offer concrete, evidence-informed guidelines for the design of holistic wellbeing courses that are theoretically grounded, experientially meaningful, and responsive to participants' lived realities.

While this study provides valuable initial insights, some considerations should be acknowledged. The use of convenience and snowball sampling, together with a relatively small sample size ($N = 45$), may limit the extent to which findings can be

generalized to broader populations. In addition, the study is situated within specific cultural and occupational contexts, which may shape both perceived relevance and engagement with holistic wellbeing training. Future research would benefit from extending this work to more diverse and larger populations, including cross-cultural and sector-specific samples. Longitudinal and intervention-based studies could further explore how participation in 7DHW-based courses influences wellbeing over time. Additionally, comparative research examining different instructional formats (e.g., fully online, blended, or workplace-integrated models) may provide deeper insight into how course design supports engagement, accessibility, and sustained behavioral change.

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