

Abstract

Well-being is the state of being happy, healthy, or prosperous (Merriam-Webster, n.d.). For the past several decades, scholars, policymakers, and practitioners, including Extension professionals, have connected the domains of health and wealth. The objective of this paper is to introduce and highlight the importance of financial well-being and its association with health and well-being, and to encourage Extension professionals to consider not only how financial well-being interacts with their subject matter domain but ways to integrate and address this foundational construct. Five pathways show the correlation among these aspects of wellness. The continuum from "not at all being well" to "being really well" for physical, mental and financial well-being is influenced by these pathways, one's resiliency, and ability to manage resources. This paper provides strategies and implications for Extension program development and delivery to build on people's strengths and resilience to create positive behavior change.

Health and Wealth Connections: Implications for Extension Professionals

In life, people live on a continuum from being really well to not being well at all. One's position on the well-being continuum is not static. Health and wealth are keys to accessing, possessing, and maintaining well-being. We know this from the substantial scholarship across multiple disciplines that connect health – whether it is physical or mental health – and wealth, whether it is income or a more subjective measure like financial well-being, a con-

struct used interchangeably with wealth throughout this paper (Hoffman & Risse, 2020; Hyland & Revere, 2018). Based on this broad range of scholarship, Extension professionals can build initiatives that assist clientele in making positive changes that improve their well-being. This paper's objective is to introduce and highlight the importance of financial well-being and its association with health and well-being, and to encourage Extension professionals to consider not only how financial well-being interacts with their subject matter domain but ways to integrate and address this foundational construct. The paper begins with a brief discussion of the health-wealth connection scholarship, but first defines the interrelated concepts of financial well-being, health, and resilience. A summary of five pathways that connect wealth with health is provided followed by a discussion of the strategies and implications of this scholarship for Extension work as they relate to the health-wealth connection and overall well-being.

Financial well-being describes the extent to which one's financial situation and money choices provide a feeling of security for a person and how much freedom of choice versus constraint they are experiencing. Feelings of security and freedom have a present and future time orientation and move on a continuum (Consumer Financial Protection Bureau (CFPB), 2017). A person's financial well-being can shift from experiencing negative feelings characterized by stress and discontent to the other end of the continuum, where a person feels secure and content. Someone's feeling of financial well-being is not solely determined by or aligned with how much income they earn (CFPB, 2017). A person's resilience and human capital enable them to manage wherever they are in the present and help them move beyond their current situation in the future.

Similarly, people's health and/or mental health moves on a continuum. The World Health Organization defined health in its Constitution as "a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity" (2020, p.1). Thus, adaptation and effective functioning, even in chronic disease or mental illness,

can be considered a state of wellness. The Academy of Health Sciences (2024, n.p.) states that:

Health is a process of continual change. And people must continually adapt to these changes in their lives to maintain good health and well-being. It is our adaptation or response to that change, rather than the change itself, that affects our health.

Integral to this definition of health is the concept of resilience. A person's resilience and ability to adapt determines outcomes that range on a continuum from a high level of wellness to death; with "death occurring when adaptation fails completely, and there is irreversible damage to the body" (Academy of Health Sciences, 2024, n.p.). Resilience is the ability to manage physical, mental, financial, human resources, and perceptions of a context, and it is what helps people cope with all that life presents (American Psychological Association, 2024). As one can see, wealth, health, well-being, and resiliency are related concepts. Each serve as an asset, is an outcome developed and acquired, and rests on a continuum.

Resilience plays a dynamic role in helping individuals adjust their well-being on this continuum. A person's adaptive capacity is determined by many factors, including opportunities, choices, knowledge, skills, confidence, and attitudes. These are the human assets or capital cultivated by Extension. Extension professionals and program initiatives often serve as a bridge, fostering access and bringing much of this information and support to clientele in personal interactions and programming. Through programming and services Extension programs assist clientele in building resilience and resiliency skills to help cope with their situations.

Extension professionals are increasingly using the Extension Committee on Organization and Policy (ECOP) Health Equity model (HE model) to apply resilience concepts and subject matter expertise to the work that supports individuals and families (Burton et al., 2021). The HE model, as shown in Figure 1, is based on the social-ecological model,

which depicts individuals within families within embedded systems from home-based or farm businesses to the levels that constitute community structures. Resilience is embedded in the systems depicted in the HE model and is dependent on the human, social, and economic capital, infrastructures, and resources within each of these levels. Individuals and families need support from the outermost levels (Braun & Pippidis, 2021), and these community structures need support from community members. Within the HE model, Extension professionals bring their expertise and the role they play in facilitating the development of personal relationships between these structures and groups.

What Are the Pathways Between Health, Wealth, and Well-Being?

The HE model can be a tool to illustrate the complexity of interconnectedness between health, wealth, and resilience because many of the concepts identified within the social determinants of health portion of the model identify areas that effect health equity but also financial well-being. For the past several decades, scholars, policymakers, and practitioners, including Extension professionals (Kiss et al., 2019) have connected the domains of health and wealth. Meta-analyses, reviews, and studies establish an association between wealth predictors on health and general well-being outcomes (American Institutes for Research, 2010; Ettman et al., 2022; National Academies of Sciences, Engineering, and Medicine. 2019; Tan et al., 2020). One meta-analysis examined whether to include wealth measures in health research and found greater wealth was associated with better health in most studies. The findings were most consistent with specific and multiple measures such as net worth, types and total assets and debts, debt-to-income ratios, and home ownership rather than a single measure (Pollack et al., 2007). Braveman et al. (2018, p.3) suggests that wealth may be a precursor to health: "while health can certainly affect the ability to generate both income and wealth, evidence from longitudinal studies confirms that health itself is strongly affected by both wealth and income".

We share five explanations or pathways that link wealth with health (Hill-Briggs, 2021). Knowledge and insight about these pathways can help Extension professionals better understand the process of the health-wealth connection, what individuals and families experience, and ways to strengthen and develop effective initiatives. These pathways illustrate the complex, interconnected nature of the concepts of health, wealth, well-being, and resilience. The explanatory pathways connecting health and wealth vary in their approach, some more strongly emphasize the individual, which fuses with the traditional approach of Extension engaging in direct education. Other pathways rely on a community-based approach to address systems and policies and are more akin to the PE model (Figure 1). Combining both approaches can improve Extension's effectiveness (Washburn et al., 2022).

Material Hardship Pathway

Material hardship, the first pathway, is when a household is unable to pay for basic, material needs, such as housing, utilities, food, or health care. Basic needs are among the first to lapse among financially strapped households, thereby undermining their ability to meet the conditions that are either essential to or help promote good health (Karpman et al., 2018). An Urban Institute study summarizes wealth's link with health outcomes, noting an association of material hardship with a range of physical, mental, and psychological outcomes among children and adults (Karpman et al., 2018). There is no consensus on the answer to which comes first, but the Urban Institute report shares evidence of wealth as a precursor and major

indicator of health.

Social Determinants of Health Pathway

The Social Determinants of Health (SDOH) framework emphasizes environmental conditions as a pathway: "where people are born, live, learn, work, play, worship, and age will affect a wide range of health, functioning, and quality-of-life outcomes and risks" (U.S. Department of Health and Human Services, 2021, n.p.). Economic stability, a component of wealth and financial well-being, is one of five domains used to organize the SODH and the circumstances that affect health outcomes. The goal of economic stability in the SODH framework is a person's ability to earn stable, not volatile income to address their health requirements (U.S. Department of Health and Human Services, 2021). Community-level factors affect access to, affordability of, and actual use of those aspects of life that provide basic needs, employment, health care services, and financial services.

Extension professionals have long championed the incorporation of the SODH framework as a key to addressing health inequities, such as diabetes (Andress & Fitch, 2016), with the SODH framework being integral to the HE model, as shown in the third ring in Figure 1. The Extension supported Supplemental Nutrition Assistance Program Education (SNAP-Ed) initiative has addressed SODH through their health equity work (Washburn et al., 2022). Many SNAP-Ed programs address food budgeting but do not address the entire household budget. Extension initiatives that take the person, their environment, and its interrelatedness together will have a better chance at addressing well-being holistically (Betley et al., 2023).

Behavioral Pathway

Individual behaviors that promote or detract from achieving positive wealth and health outcomes is

a third behavioral pathway explaining the connection of health and wealth. Studies have shown that low-income populations adopt unhealthy behaviors (e.g., smoking, drinking) more frequently compared to their higher-income counterparts (Braveman et al., 2011; 2018; Hills-Briggs et al., 2021). Extension initiatives most often address these types of behaviors. Certain behaviors or personality traits, like locus of control or conscientiousness, link to positive health and financial behaviors, and are beneficial to both domains of health and wealth (McDowell, 2023). Individuals who pay bills on time and exercise regularly likely live lifestyles demonstrating consistent behaviors that contribute to their well-being. Extension programs excel in providing information, recommended behaviors or practices, and specific strategies to overcome personal traits and human tendencies (e.g., procrastination) that may be preventing a person from reaching a particular goal or potential.

Stressor Pathway

A fourth pathway focuses on a person's response to stressors which influences physiological well-being. When a person has unmet needs, the natural response is stress, and depending on the person's adaptiveness and resilience, stress can trigger a physical, mental, emotional, and/or behavioral reaction. Repeated and prolonged stress compromises the immune system, making one more susceptible to infections, or exacerbating existing conditions (Seiler et al., 2020). Some Extension programs include activities to strengthen a person's ability to control their stress response and use stress reduction strategies, such as mindfulness techniques, which have been found to enhance well-being (Eschbach et al., 2022).

Reverse Causation Pathway

inally, a fifth pathway acknowledges that the interrelatedness of wealth with health and the

potential for reverse causation. An individual's financial well-being can affect their health, and vice versa. Research developed over time highlights the complex, bi-directional nature of health and financial well-being (Hill-Briggs, 2021; Siahpush et al., 2003). Part of the complexity is due to differences among individuals in their level of stress response, resiliency skills, human capital and knowledge, socio-economic status, and ability to manage their personal and family resources in a way that helps them flourish. Additionally, the context, particularly one's community and zip code, explains the link between wealth and health outcomes (Hill-Briggs, 2021).

Strategies for Creating Change

When addressing financial well-being, health, or both, how and in what ways can Extension initiatives facilitate and support positive change? How can they help people move from one part of the continuum to the next, cope with where they are currently, or prevent them from slipping further down the well-being continuum? Building resilience, improving equity, and increasing access to resources are three strategies.

Personal and familial resilience attributes and resiliency are significant factors that help people move along their health, wealth, and well-being continuums, manage stress, and stay motivated. Resilience is the current capital drawn upon to address change and stressful situations, while resiliency includes the processes that use the capital resources to build resilience (Braun et al., 2021). Resilience capital encompasses the personal attributes that individuals and families have, while resiliency includes the skills used to prevent, manage, and adapt to change. Table 1 shows examples of resilience capital and resiliency skills.

When resilience attributes and skills are integrated into program efforts through identification, discussion, or practice, Extension personnel have the opportunity to clarify and augment clientele's strengths, self-awareness, efficacy, and skills, especially when it comes to someone's health and financial well-being. As educators, it is important to recognize and acknowledge that most individuals and families have some level of resilience and that a person's capacity to respond evolves over time as learning occurs. People and families live on continuums of well-being, and resilience attributes and resiliency skills improve through learning and practice.

Strengths can be cultivated. Extension programs and services can and do support the development of resilience to address the behavioral and stress response pathways that inhibit well-being. By integrating activities, discussions, and practice that highlight resilience attributes and skills as part of programs with subject matter topics like nutrition, health, stress management, agriculture risk management, and financial well-being, we can improve behaviors that shift the pathways that individuals and families can control. For example, Extension workforce development programs like Skill Up Tennessee address the material hardship pathway by positioning participants for stable and better-paying employment (Sano et al., 2024). Experiential education programs help build decision-making, problem-solving, communication, and relational skills that support resilience. The Smart Choice/ Smart Use Health Insurance program is an example of a program topic that uses activities to increase knowledge, skills, and confidence with case studies to practice using financial calculation skills, vocabulary, and comparative reasoning to evaluate personalized health insurance choices.

Equity is the focus of the HE national framework (Figure 1) and central to the experience and subjective perception of one's health and financial well-being. Extension clientele struggle with unequal access to financial and health services and products. A lack of equity can be a place-based

issue for Extension clientele. An important strategy for Extension professionals is to address equity in program design, materials, and implementation. The ECOP's health equity discussion states that "Society has enacted a system of laws, policies, norms, and expectations (think of them as outputs) that intentionally or unintentionally allow differing access to resources and opportunities based on the multitude of social identities we hold as individuals" (Burton et al. 2021, p. 16). A recent Aspen Institute proposal for a national strategy for financial inclusion identifies ways that financial systems are non-inclusive and makes recommendations for how typical societal outputs -- products, services, experiences, programs, and policies—can be more inclusive (McKay, 2022). These outputs are like Extension products. Inclusive societal outputs can be by design, which means being intentional when creating products, services, and other outputs so they are accessible, and serve multiple social identities, while also removing barriers, and increasing access. Inclusion by default creates societal outputs in a way that evens the playing field by automatically opting people into a product, program, or service. For example, a baby bond program with an opt-in feature produces equity by automatically enrolling all members, not just those who qualify or take the extra step to sign up for the program (Markoff, n.d.).

Equity must be a consideration when developing and implementing Extension work, with thought given to the accessibility, usefulness, and benefits of the outputs. Reviewing Extension initiatives with an eye on removing barriers, enabling access through design or default, and ensuring the initiatives are accessible, useful, and beneficial to the audience will be key to program improvement, and ensure a reliable, trusted source of programming that focuses on improving well-being. Extension's role in creating equitable, place-based, and accessible programs starts with our needs assessments, partnerships, and program development and evaluation. Including members of the target audience in assessments will help better shape our programs and policies and inform community decision-makers. Being involved in community coalitions, informing decision-makers of Extension work, sharing successes and findings, and engaging with groups that create systems and environmental change are implications for improving our initiatives.

Extension programs typically provide resources to help youth, families, and communities make positive shifts on the well-being continuum. Well-being, whether it is financial, mental, and/ or physical, is an appropriate outcome for Extension initiatives. Counterbalancing stressors and/or managing risks are often the drivers of Extension initiatives when providing programs, experiences, services, and products that help our clientele. The evidence-based Strengthening Families Program provides a family-based skills training program to reduce risky health behaviors like alcohol and drug use. Grounded in systems and resilience theories, parents and youth engage in separate and combined sessions that include role playing and practicing new skills (Kuepfer et al., 2018). Financial and health-related topics are top stressors for most individuals and families (Friedline et. al., 2021; Hasler et.al., 2021; Dankwa-Mullan, et. al., 2016). These stressors often motivate clientele to attend Extension programs and access our resources. The effective use of resources - financial, physical, mental, and emotional - could be integrated into almost any Extension program because they are essential to the adoption of behavior change. Within Extension programs, we can help people practice resiliency thinking and doing by encouraging the creation of plans that reinforce learning and change over time, and by helping people learn from mistakes and creating safe places for brainstorming new approaches to well-being.

Extension program areas tend to work in silos and subject matter areas don't necessarily incorporate strategies that build resilience, build on people's strengths, or offer cross-subject matter expertise. Yet the research shows that well-being is multi-dimensional and multi-subject matter oriented (Batley et al., 2023). Additionally, program resources could point out inaccurate information to improve

decision-making and inaccurate beliefs to help clientele make meaning out of their situations and help them understand the causation. Integrating financial well-being resources and topics into nutrition education or mental well-being resources or topics into agriculture risk management initiatives or building on clientele's strengths as part of behavior change strategies for a subject matter area are examples of cross-programmatic opportunities. Extension program areas not traditionally or directly linked to wealth, health, and well-being, like agriculture, do contribute to these areas (Walsh et al., 2018).

Implications for Extension Professionals

Programming efforts designed to acknowledge and integrate strategies that either support or mitigate the wealth-health pathways outlined previously, will help Extension support clientele as they build self-awareness and set goals. Well-designed programs can help contextualize and bring understanding about the concerns and challenges that individuals are experiencing that make them vulnerable. Or it can help clientele become aware of the coping mechanisms they currently have in operation. By helping clientele see a different way forward, grounded in research, Extension educators and researchers help people move on the continuum toward improved well-being. This approach to extension programming, no matter the subject matter, could develop activities and discussions that focus on identifying and practicing personal resilience attributes and skills like problem solving, communication, self-efficacy, strengthening relationships and connections with others through program design. The explanatory pathways of the health-wealth connection focus on learned behavioral patterns and experiences, coping strategies and character traits, and social and cultural contexts. These features can be integrated into program initiatives

to elevate their importance, dissect the causation, and determine effective motivators for change. By integrating case studies, role play, success stories, and other "real life" examples, Extension programs could counter negativity by encouraging hope, transformation, success, and new pathways to success. By using a little humor to lighten the learning environment, educators can encourage openness to new routes to wellness.

Cross program efforts in both education and research could bring a variety of expertise to the development and implementation of innovative programs and research projects. This would require an assurance of funding for personnel who support health, financial, and/or psychological well-being. By recognizing and adapting programs that acknowledge and address these health-wealth pathways, and by developing cross programmatic services and programs that increase accessibility and equity, we can improve Extension clientele outcomes and ensure the future value and viability of Extension. When Extension works in cross programmatic teams, programs offered to clientele are stronger. As an example, incorporating family financial management programming into agriculture financial risk management or Women in Agriculture programs would address financial stress of farm families in a practical way (Sano et al., 2024). Health insurance literacy initiatives could assist audiences in understanding the complexities of accessing health care and successfully using health insurance. Financial literacy programs integrated into the SNAP-Ed and Expanded Foods and Nutrition programs could assist participants not only with how to stretch their purchasing dollars but can also assist clientele in managing food and financial resources. Extension can help improve well-being by making linkages across the socio-ecological levels within our communities. When we create cross-connections among agencies that improve access, develop resources, and create policy change and then link clientele to these connections, we build a stronger community. Extension research, program impacts, and strong relationships are all important tools to

making change. When we strengthen our circles of influence and connections, internally within Extension and externally with key community and governmental decision-makers, we place ourselves and Extension as an organization in a unique position to influence policies that enhance financial security, health, and well-being. Serving on community boards, meeting with government officials sharing research and programmatic outcomes, holding community action forums, and publishing findings helps to strengthen the networks aimed at community and individual well-being.

Well-being is complex and yet Extension professionals are well-positioned to address it in a cross-disciplinary, cross-programmatic manner. Extension professionals possess the skills, expertise, and tenacity for the challenge. Understanding the pathways between health and wealth, building on the resilience and resiliency skills of our clientele and communities, and operationalizing the strategies to build relevant, accessible, useful, and beneficial outputs are key to improving well-being. With some additional funding, coordinated research, program innovation and community engagement, Extension personnel can make impactful changes in the areas of healthy living, financial well-being, and resilient individuals, families, and communities.

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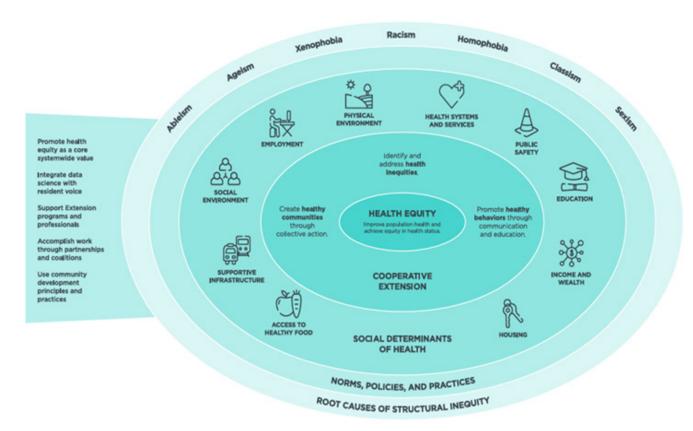
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Figure 1

Cooperative Extension's Framework for Health Equity and Well Being



Note. From "Cooperative Extension's national framework for health equity and well-being," by D. Burton, et al., 2021. Extension Committee on Organization and Policy: Washington, DC.

Table 1

Attributes of Resilience and Resiliency Skills

Resilience Capital Characteristics/Attributes	Resiliency Skills
Adaptable	Anticipates and Integrates Change
Hopeful	Communicates Effectively
Robust	Organizes
Flexible	Uses Resources Effectively
Communicative	Problem Solves
Interested in Learning to Improve Self and Others	Shares Feelings Shows Compassion
Social/Interactive	Creates Meaning from Experiences
Prepared/Has Reserves	Learns from Experiences
Diversified	Builds Strong Relationships/Social Networks

Note. From "Integrating resiliency thinking into your Extension farm and farm family programs" by M. Pippidis and B. Braun, 2022. University of Delaware Cooperative Extension and University of Maryland Extension. https://www.youtube.com/playlist?list=PLI-ZR4Jwy4gKxyFUXQfRxvzkactoHFXqJ