

Improving Emotional and Physical Wellbeing

Initial Evaluation of the Everyday Wellbeing Programme

By Mike Bell, Director, Mutual Inspiration CIC

Abstract

Mental and physical wellbeing is a growing national social and economic challenge. There is an increasing search for interventions that offer remedial and preventative outcomes. The Everyday Wellbeing programme is potentially one such intervention.

An evaluation of the Everyday Wellbeing programme, developed and delivered by Mutual Inspiration CIC was undertaken using the Warwick Edinburgh Mental Wellbeing Scale (WEMWBS) and a participant-generated, or individualised, outcome questionnaire.

The average score on the WEMWBS increased from 50 before the programme to 56 afterwards, and positive improvement and effectiveness was noted by participants across a range of issues and expectations including mental and physical health, work, family and meaning/spiritual.

Background

There is increasing national interest in the concept of mental well-being and its contribution to all aspects of human life, including social and economic.

Annual economic costs of mental health problems in England were estimated at £77.4 billion in 2003 (SCMH, 2010)¹, rising to £105.2 billion in 2009/2010 (CMH, 2010)². Mental illness costs the NHS and local authorities £22.5 billion a year; lost earnings cost the economy a further £26.1 billion. In 2007 this represented 5.3% of GDP and is predicted to double to 10.1% of GDP in 2026.

Prescriptions for anti-depressants have more than doubled in the last 11 years. Some GPs feel they have no option but to prescribe drugs because waiting times for counselling and psychotherapy are so long, and this is having repercussions.

“We estimate more than two million people are taking antidepressants long-term, in particular women aged between 18 and 30” said Professor Kendrick of Southampton University. “Our previous research found although these drugs are said not to be addictive, many patients found it difficult to come off them, due to withdrawal symptoms including anxiety.”

Jim Dobbin, chairman of the House of Commons all-party group on Involuntary Tranquiliser Addiction, said: "All the medical profession are doing is creating higher addiction levels. The consequences are dire – people have their lives ruined by these drugs."

There is a growing search for interventions that have both remedial and preventative outcomes and this reports on an initial evaluation of one such intervention – the Everyday Wellbeing Programme.

The 10 week Everyday Wellbeing programme is a ‘group talking therapy’ that builds

¹ Sainsbury Centre for Mental Health (2003). The economic and social costs of mental illness. Policy 3. http://www.scmh.org.uk/publications/economic+social_costs.

² Centre for Mental health (2010). The economic and social costs of mental health problems in 2009/10. http://www.centreformentalhealth.org.uk/pdfs/Economic_and_social_costs_2010.pdf

emotional strength, resilience, health and happiness. It is an antidote to stress, anxiety and low self esteem. The programme combines positive psychology, CBT, NLP, psychosynthesis and the latest understanding from neuroscience and evolutionary psychology and biology, within a framework of 8 Universal Dimensions of Inner Wellbeing.

Methodology

Participants in 2 Everyday Wellbeing programmes were invited to complete 2 types of assessment, the Warwick Edinburgh Mental Well Being Scale (WEMWBS) and a self observation and assessment.

Participants largely self selected to the programme and paid for it themselves. One person was funded by their organisation and others received concessionary places. The sample comprised 5 females and 3 males ranging in age from 34 – 57 years.

Warwick Edinburgh Mental Well Being Scale Assessment

This assessment, favoured by the Scottish Government, asks respondents to read 14 separate statements describing feelings relating to mental wellbeing, and indicate how often they have felt this way over the last two weeks, using a 5 point scale (ranging from none of the time to all of the time). The overall score is calculated by totalling the scores for each item (minimum possible score is 14 and the maximum is 70); the higher a person's score, the better their level of mental wellbeing.

Participants were asked to complete the assessment during Module 1 – Base Camp of the programme, that is before the actual content of the programme started. They filled in the assessment again during Module 10 – Completion, when the programme content had finished. Participants who missed the first or 10th modules were excluded.

Before the Everyday Wellbeing programme the average score of participants on the Edinburgh Warwick scale was 50 – see Table 1. (This is a similar score to that found in the evaluations in Scotland over the last 4 years.)

Table 1			
Individuals' Totals	Before	After	Change
A	44	54	+10
B	51	51	0
C	42	54	+12
D	50	54	+4
E	53	58	+5
F	60	60	0
G	56	59	+3
H	46	58	+12
Average	50	56	+6

After the Everyday Wellbeing programme the average score had increased to 56, and overall increase of 6 points.

Overall 3 participants obtained significant benefit from the programme with score increases of 10 or more. Three participants experienced increases of 3-5 points and 2 participants showed no overall increase. There may have been a tendency for some people to score themselves too high at the beginning because even those with low or no overall increase on this scale reported improvements in important issues they were facing – see below.

Looking now at the average scores for each of the 14 statements relating to mental wellbeing, none registered a decline in Before and After scores and a number were around or above average – see Table 2.

Table 2			
Average Statement Scores	Before	After	Change
I've been feeling confident	3.38	4.25	+0.88
I've been feeling relaxed	4.00	5.00	+0.63
I've been feeling good about myself	3.38	4.00	+0.63
I've been interested in new things	3.88	4.38	+0.50
I've been feeling cheerful	3.50	4.00	+0.50
I've been feeling close to other people	3.50	3.88	+0.38
I've been thinking clearly	3.63	4.00	+0.38

Participant-Generated Outcome Evaluation

The second assessment aimed to measure the outcomes that the participant considered the most important. During Module 1 participants identified up to 3 issues that they hoped would be addressed by the Everyday Wellbeing programme and, for each issue, completed statements that began 'This causes me to...' and 'Positive change will...'.

In the Completion Module they revisited these issues and completed the statement 'My situation now is...'. Their responses are summarised below:

Issue: Chronic Anxiety

My situation now is: An improvement in my levels of anxiety. I feel I am able to trust and let go more, with perhaps less attachment to outcomes. I am also less concerned with the need for approval from others.

Issue: Lack of Meaning

My situation now is: The exercise where we aligned our goals to our values was particularly helpful and gave me some ideas about the direction my life might take. I am less concerned with the search for meaning and more concerned with engaging with life.

Issue: Would like my job situation resolved

My situation now is: I am feeling more positive about how I can take responsibility for myself and my behaviours/actions in a difficult situation.

Issue: Better balance and inner harmony

My situation now is: I can now see the tools that are at my disposal to make improvements in this area. I need to find and use the will to 'choreograph' my energies.

Issue: More focus on my spiritual path

My situation now is: I have been more focussed, attentive and committed within and to my spiritual community. I now need to work on regular practice at home.

Issue: Feel Dysfunctional

My situation now is: I feel a little better maybe. I think things might shift if I use the tools presented and break through the barriers stopping me

Issue: Worry, anxiety and guilt at xxxx

My situation now is: I am getting better at making quicker choices, enjoying the time we do have. I am certainly more aware of and detached from the guilt.

Issue: What will I do career-wise after expiry of fixed term contract?

My situation now is: The course has helped me focus on what I want and I am clearer about where I want to go. Feel more confident about the future.

Issue: Busyness and feeling stressed

My situation now is: that I am much more relaxed

Issue: Lack of self confidence and doubting self and abilities

My situation now is: that I have much knowledge and skills and feel so much more confident within myself

Issue: Lack of confidence

My situation now is: I am more at ease with who I am. I am also more able to acknowledge my successes and not just my perceived 'failures'.

Issue: Managing team member

My situation now is: I feel more in control. I am better prepared to respond and be open to the other person rather than react and feel threatened and undermined by them.

Issue: Open University course work

My situation now is: I do feel much more energy to tackle issues/work at home and at work and prevaricate much less than before. I am more confident that when my course starts again in the New Year I will be able to manage it better.

Issue: Exercise

My situation now is: I have been exercising more. I have been looking at longer term exercise goals which has helped. If I don't exercise I am more compassionate with myself – I feel more in control of my health.

Issue: Tired and ratty

My situation now is: Feel better but not as good as could be. Have found opportunities to take more sleep and have more fun (balance).

Issue: Overweight

My situation now is: This is the issue that I have felt the least to be addressed but I have started to address it. I am building in more physical activity into my day. I have noticed today that I feel much more energised because I went for a good walk during my lunch hour and I am committed to doing more of this.

As can be seen, participants brought a wide range of issues and expectations to the Everyday Wellbeing programme including mental and physical health, work, family and meaning/spiritual. Most achieved some improvement in their situation.

Conclusion

Although the sample size for this initial evaluation is small, 8 people, the results of both the mental wellbeing scale and the participant-generated outcome questionnaire demonstrate a level of positive improvement and effectiveness when before and after assessments are compared.

Future evaluations, currently being explored, should involve larger numbers and reassess perhaps 3-6 months after completion of the programme to determine the longer term impact.

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