



what works
wellbeing

Evidence for Wellbeing

Nancy Hey

Director, What Works Wellbeing

overview

How can we evidence the culture & leisure contribution to wellbeing of individuals and community?

Why does it matter that we have positive experiences?

- What Works Wellbeing
- What is wellbeing – international & National



What is the What Works Centre?

Nancy Hey
Centre Director

Vision, Mission and Approach

An independent, collaborative organisation set up to develop and share robust, accessible and useful evidence about wellbeing.

We want a future where the wellbeing of people and communities improves year on year and wellbeing inequalities are reduced.



We develop and share useful evidence that governments, businesses, communities and people can use to improve wellbeing across the UK.

We believe that improving wellbeing should be the ultimate objective of policy and community action.

Our approach

independent
evidence based
collaborative
practical
open
iterative.

Our funders and partners

We are independent and collaborative.

Economic and Social Research Council

Arts and Humanities Research Council

Public Health England

Department for Health

Department for Business Innovation & Skills

Department for Communities & Local Government

Department for Work and Pensions

Food Standards Agency

DCMS | Arts Council England | Historic England | Heritage Lottery Fund

Department for Environment, Food & Rural Affairs

Ministry of Defence

BT, Bupa, Maximas

Cabinet Office

Local Government Association

Big Lottery Fund

Office for National Statistics

Alliance for Useful Evidence

Sciencewise

Wellcome Trust

And more....



Our consortia

We build on a strong evidence base



15 universities, 7 civil society organisations and OECD

What Works Network

We operate as a Network

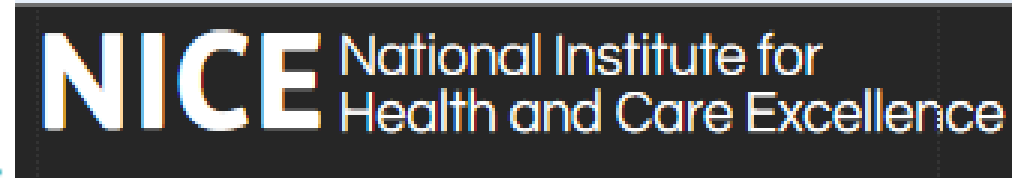


What Works Scotland

Supporting effective public services in Scotland



CENTRE FOR
**AGEING
BETTER**



Culture & Leisure evidence synthesis

Available now

Music & singing – healthy adults/diagnosed conditions

Sport, dance & young people

Community wellbeing theory of change

Social relations scoping review

Wellbeing inequalities local analysis

Coming soon

Visual arts & mental health

Leisure (inc green & blue space) & the family

Green space; ‘pro-social space’, Heritage

Local area wellbeing **indicators** & wellbeing inequality drivers



Wellbeing

International & National context

What is wellbeing?

What does google say?



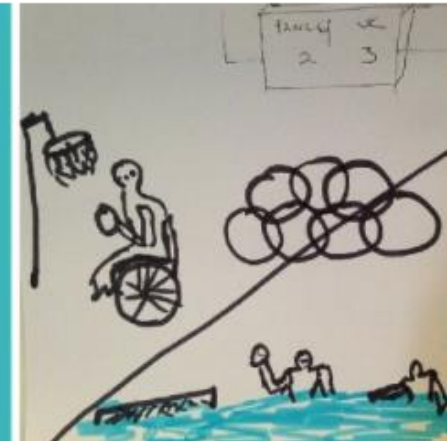
What the public say about culture, sport & wellbeing

Culture and sport have an impact on our wellbeing by providing fun activities, enjoyment, friendship and a feeling of belonging.

Cultural and sporting activities are felt to be at the heart of quality of life, part of our way of life and core to social interactions. We learn, we take notice, we get active, we connect and we give. Most of all we develop our interests and with it our initiative and confidence.

- We understand Culture very broadly and beyond traditional arts and music
- Spectating, participating and volunteering are all equally valued.
- Culture and sport help us through difficult times

If you can't participate you can still be inspired by watching other people achieve.



What do practitioners say?



We're
speaking
different
languages when
it comes to
wellbeing

Feeling inspired and
recognised by an
institution

Something to look
forward to

A sense of belonging
Positive social
connections

Part of something bigger
Knowing someone who
can help you

Inspired by role models
of local people

Pride in local area

Part of the community
Sense of identity

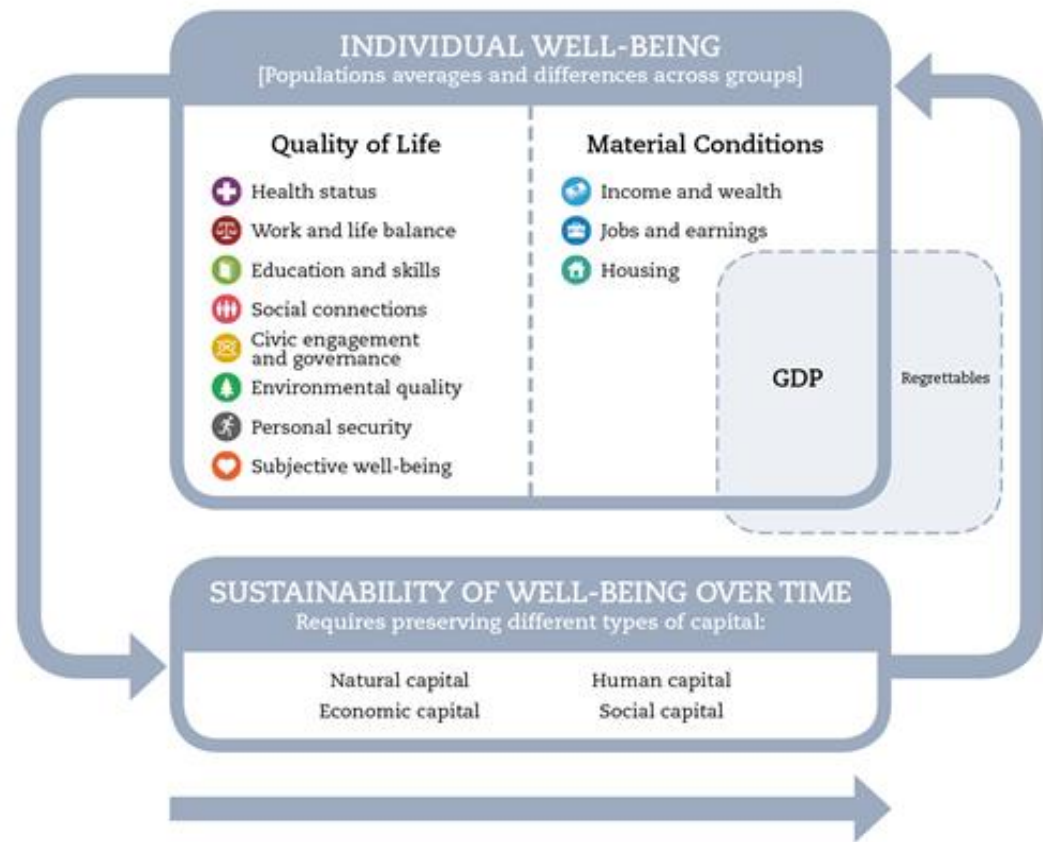
We talk about

- self-esteem
- community cohesion
- life satisfaction
- anxiety

These are all part of
what makes up
wellbeing



What the ‘experts’ say



OECD model for wellbeing

Wellbeing is more than health

Most of what makes us healthy is affected by things outside the healthcare system
Growth is about people AND place

The “Wellbeing Industry” confuses the issue



What the 'experts' say

Wellbeing

Feel Good

Day to day and overall – happiness,
purpose, contentment, low anxiety

Function well

Competent, choice, control,
meet needs

External Conditions

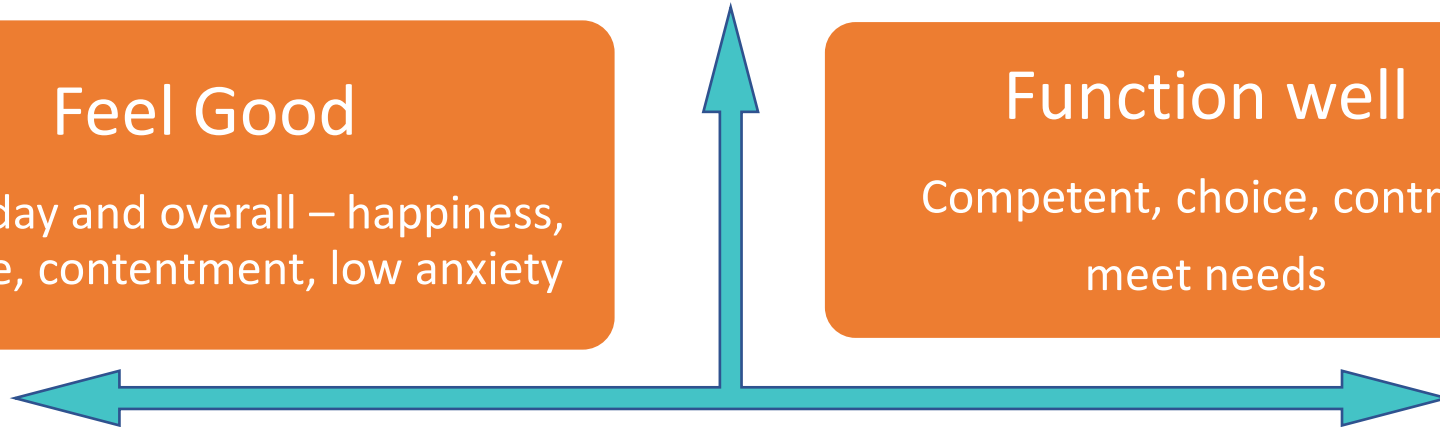
Quality of Life
Feeling safe

Social Context

Relationships, community,
power

Personal

Genes, resilience,
optimism, characteristics



UK National Measurement Programme

**‘how we are doing’
as individuals, communities and as a nation
and how sustainable this is for the future**



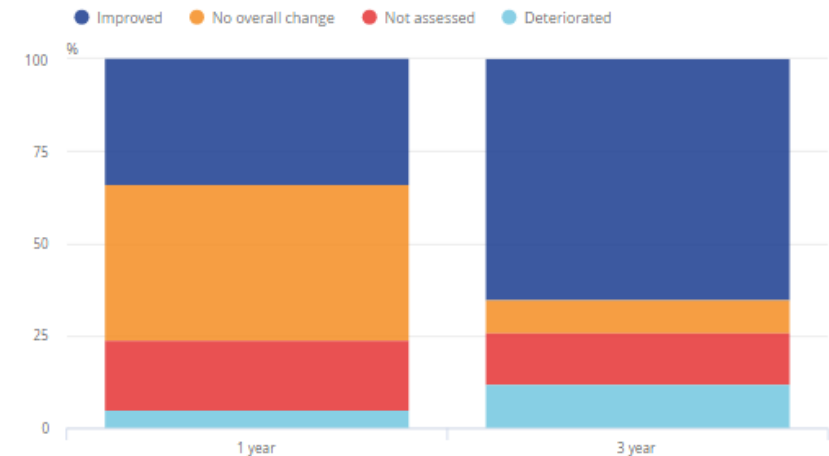
Our Relationships

Positive relationships have one of the biggest impacts on our quality of life and happiness. This domain includes satisfaction with personal relationships and feelings of loneliness.



Figure 1: Assessment of change - national well-being measures

UK, April 2017



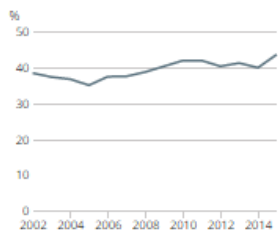
Source: Office for National Statistics

NEW INTERACTIVE DASHBOARD

Other relevant outcomes and determinants

Satisfaction with leisure time

Satisfaction with their amount of leisure time

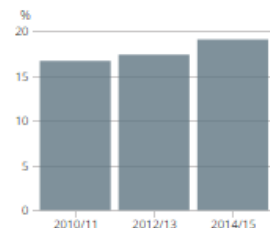


The proportion of people in the UK who were mostly or completely satisfied with their amount of leisure time was 43.7% in 2014 to 2015, an improvement from the previous year (40.0%) and over the 3 year period (40.4% in 2011 to 2012).

Updated: 6 April 2017

Volunteering

Volunteered more than once in the last 12 months

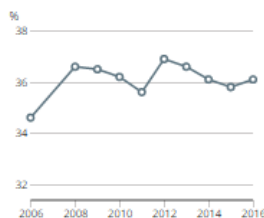


Almost 1 in 5 people in the UK (19.1%) reported that they had participated in some kind of volunteering more than once in the last year in 2014 to 2015. This was an improvement from the previous year (17.4%) from 2010 to 2011 (16.7%).

Updated: 6 April 2017

Sports participation

Adult participation in 30 mins of moderate intensity sport once per week



In the year ending September 2016, 36.1% of people in England participated in 30 minutes of moderate intensity sport, once per week. While there was no overall change since the previous year (35.8%) there was a deterioration over the 3 year period (36.6% in the year ending September 2013).

Updated: 6 April 2017

Health satisfaction

Mostly or completely satisfied with their health

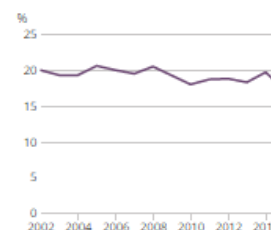


In 2014 to 2015, 49.6% of people in the UK were mostly or completely satisfied with their health. This was an improvement both from the previous year (44.6%) and over the 3 year period (45.4% in 2011 to 2012).

Updated: 6 April 2017

Depression or Anxiety

Some evidence indicating depression or anxiety

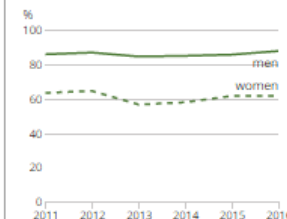


In 2014 to 2015, 17.3% of people in the UK showed some evidence of anxiety or depression. This was an improvement both from the previous year (19.7%) and over the 3 year period (18.8% in 2011 to 2012).

Updated: 6 April 2017

Feeling safe

Felt safe/very safe walking alone after dark

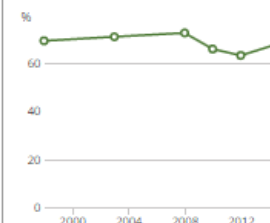


In the year ending March 2016, 87.9% of men and 61.7% of women in England and Wales reported that they felt fairly or very safe walking alone after dark. While there has been an improvement over the long term basis (84.7% and 56.7% in the year ending March 2013 respectively), there was no change with the previous year (85.8% and 61.7% in the year ending March 2015 respectively).

Updated: 6 April 2017

Belonging to neighbourhood

Agreed/agreed strongly they felt they belonged to their neighbourhood



The proportion of people in the UK who agreed or agreed strongly they felt they belonged to their neighbourhood in 2014 to 2015 was 68.8%. While change was not assessed over the 1 year period, there was an improvement over the 3 year period (63.3% 2011 to 2012).

Updated: 6 April 2017

How are we doing?

4 personal well-being questions →

4 perspectives

Answered on an 11 point scale: 0 means 'Not at all', 10 means 'Completely'

I would like to ask you questions about your feelings on aspects of your life.

There are no right or wrong answers.

I'd like you to give an answer on a scale of nought to 10, where nought is 'not at all' and 10 is 'completely'.

Overall, how satisfied are you with your life nowadays?

Evaluative perspective

How satisfied are you with your life nowadays?

To what extent do you feel the things you do in your life are worthwhile?

Eudaimonic perspective

Positive experience perspective

How happy did you feel yesterday?

How anxious did you feel yesterday?

Negative experience perspective

[See ONS results](#)

Personal Wellbeing in the UK

London lower average ratings of

- life satisfaction
- anxiety
- feeling things in life are worthwhile

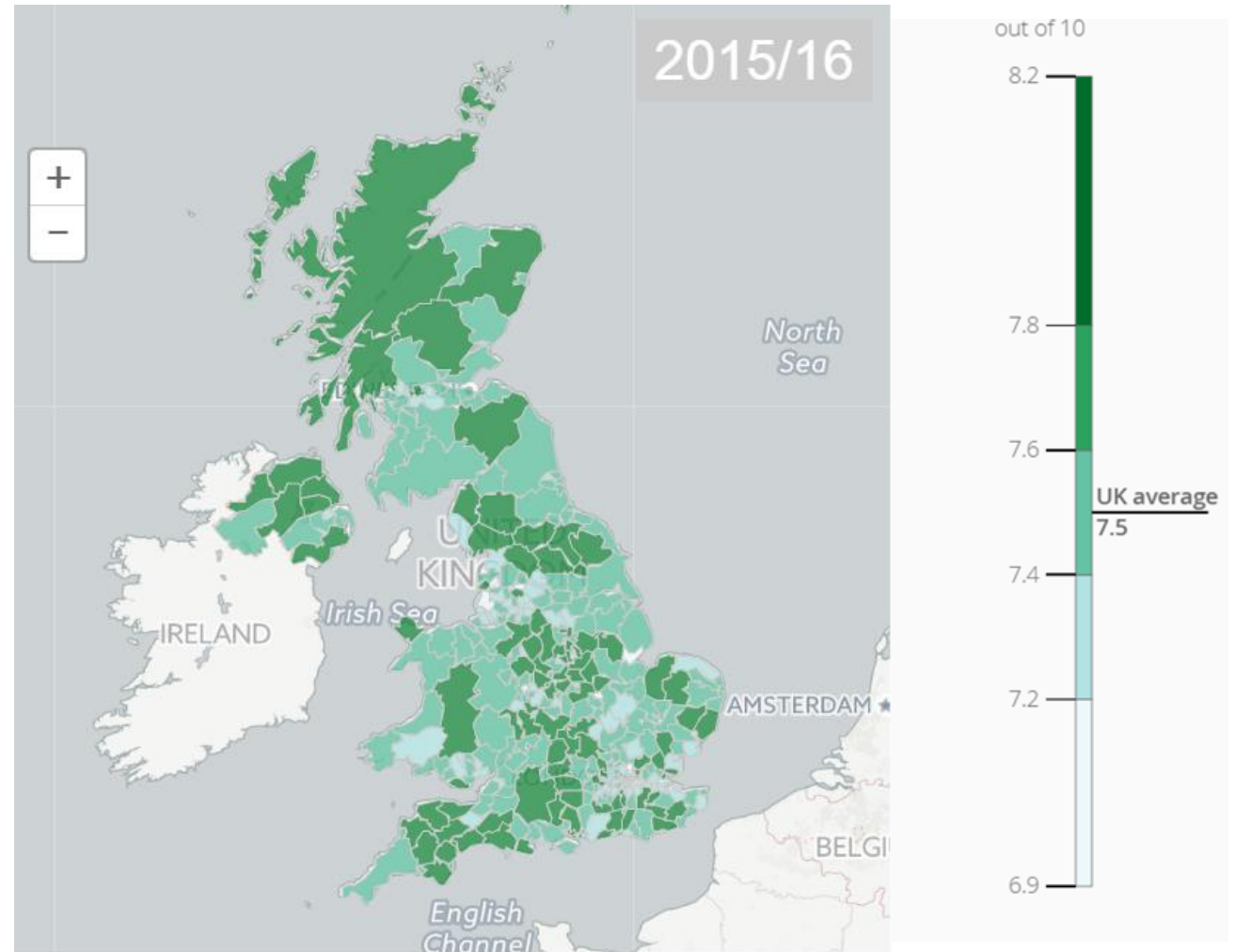
Northern Ireland higher average ratings all personal well-being measures except anxiety,

Women

- Higher life satisfaction
- Higher worthwhile

AND

- higher levels of anxiety



Mean Life Satisfaction across the UK

Interactive Maps

How are we doing? – cross cutting measures

Personal Well-being

Includes individual's feelings of satisfaction with life, whether they feel the things they do in their life are worthwhile and their positive and negative emotions.



Improved year on year for 5 years from March 2012-15.....but not 2016.

Quarterly updates from Sept 2016

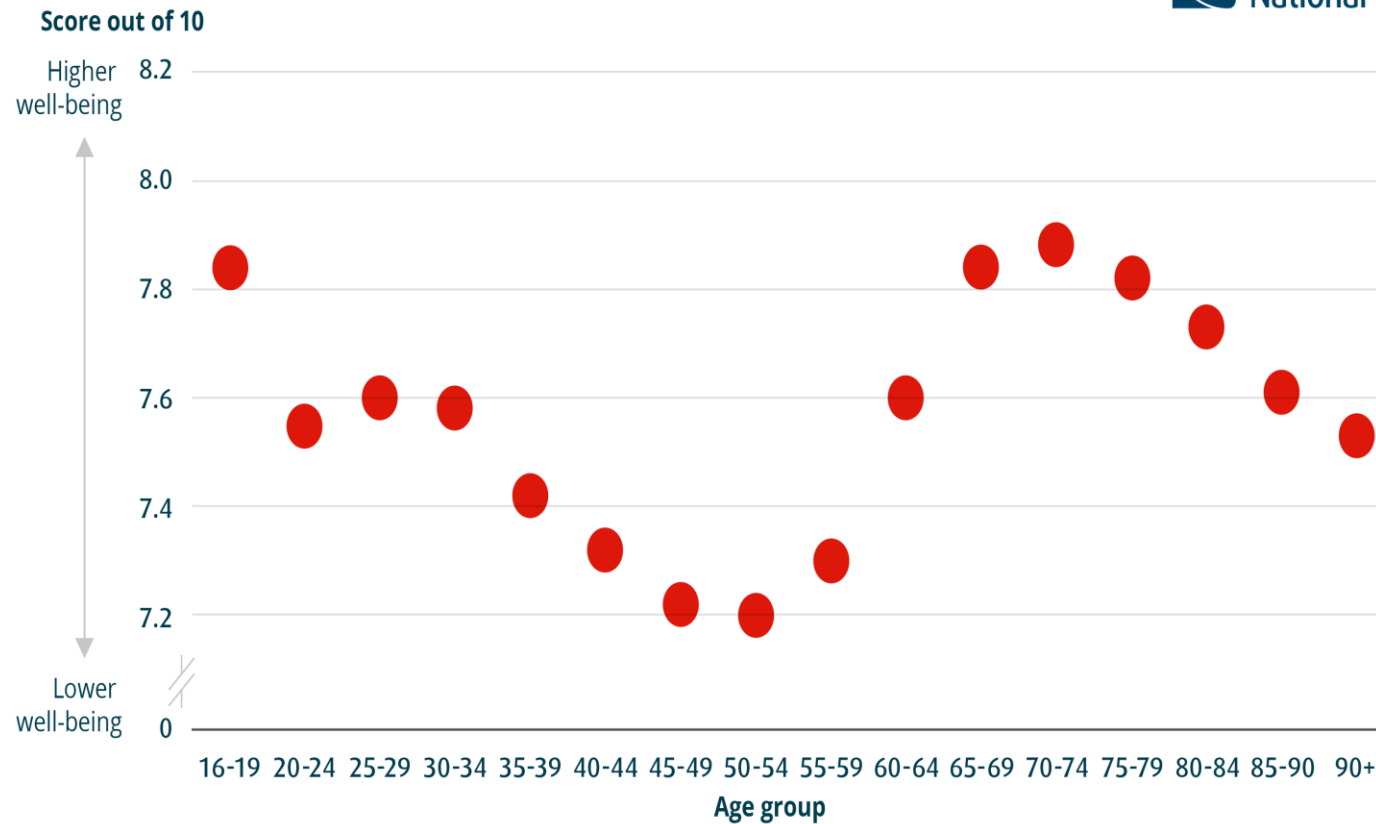


What do we know about wellbeing

What do we know about wellbeing

Typical wellbeing over a life time

Average Life Satisfaction, 2012-2015, UK



Source: **Annual Population Survey**, Office for National Statistics

Anti-depressant use by age

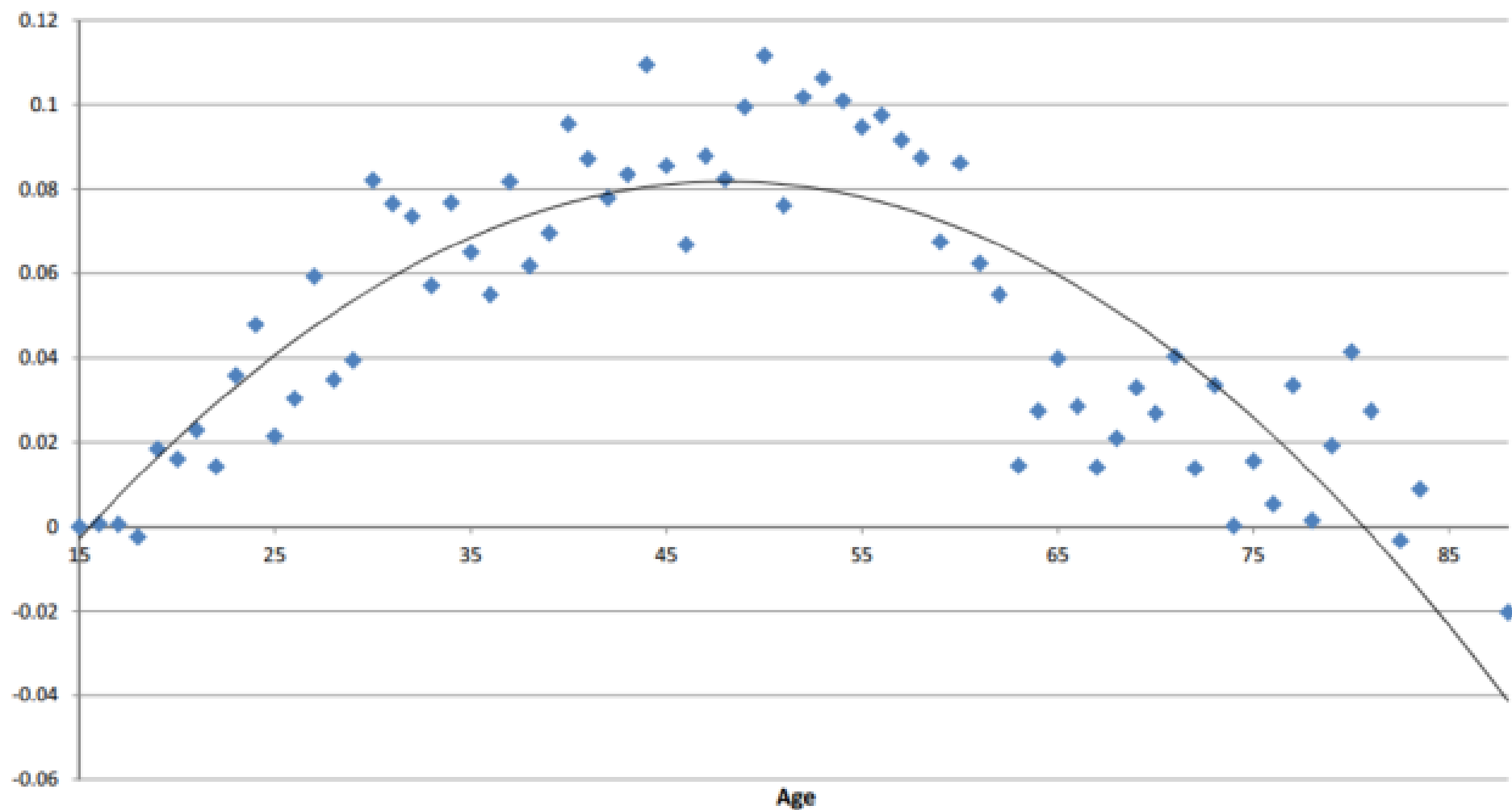
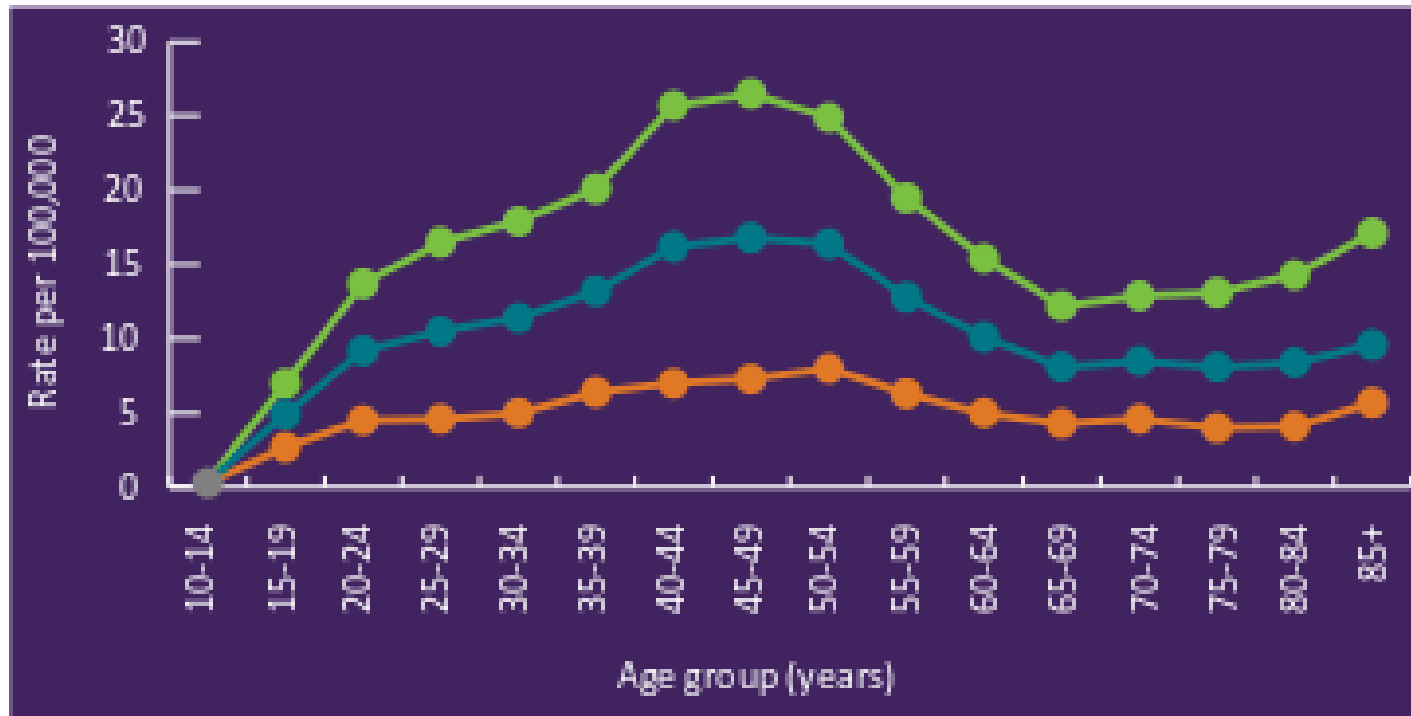


Chart 2. The regression-adjusted relationship between the probability of antidepressant use and age (full set of controls, as in Column 1 of [Table 2](#)).

Suicide rates by age

Graph 2: Suicide rates in UK by age group, 2014

● Male ● Female ● Overall



Graph 2 shows that in the UK the age group with the highest suicide rate per 100,000 for all persons and males is 45-49 years, and for females is 50-54 years. This data also indicates a slight bimodal distribution (where there are two 'modes' / peaks in the distribution across the ages) with peaks in the mid-years and those aged over 85 years. The ONS mark rates calculated from fewer than 20 counts as unreliable. The data in Graph 2 that is considered unreliable has been greyed out.

Benefits of higher wellbeing

People with higher wellbeing = better health, work, personal life and social contribution

Determinants: Conditions likely to support thriving



Moderately happy



Benefits: Is likely to help with..

Health

1. Reduced inflammation
2. Improved cardiovascular health
immune & endocrine systems
3. Lowered risk of heart disease
stroke & susceptibility to
infection
4. Practicing good health
behaviours
5. Speed of recovery
6. Survival & longevity

Work

1. Increased productivity
2. Peer rated & financial
performance
3. Reduced absenteeism
4. Creativity & cognitive
flexibility
5. Cooperation & collaboration
6. Higher income
7. Organizational performance

Personal & social

1. Longer term time preferences and
delayed gratification
2. Reduced consumption & increased
savings
3. Employment
4. Reduced risk taking
5. Pro-social behaviour e.g. donating
money and volunteering
6. Sociability, social relationships &
networks

❖ Wellbeing as a goal in itself

❖ Also instrumental to
delivering other outcomes we
value

Important:

- ❖ Social connections,
- ❖ altruism and
- ❖ personal control

Key protective factors/determinants

Childhood & Home

1. Mother's mental health
2. Childhood emotional health
3. School/Home 50:50

= 50% later adult wellbeing

Predictive up to 8 years before

Adulthood

1. Emotional Health (and Physical health self-perceived)
2. Partner relationship
3. Employment



Bringing together global evidence base

What sort of interventions will be more fruitful?

What can we do to improve wellbeing?



POLICIES TO PROMOTE WELL-BEING

Promote Volunteering and Giving

Tackle Loneliness

Promote Wellbeing at Work

Build Character & Resilience in Schools

Treat Mental Ill-Health like
physical ill-health

Reduce Unemployment

Support Parents

Empower Citizens

Promote Growth

Sociable & Green Built Environment

1. **Mental Health**, social & emotional skills, partner relationships and physical health
 - Home life and family are most important for children's wellbeing
 - Healthier tends to mean happier
 - Adults in happy partner relationships have higher wellbeing
2. **Community wellbeing** including social support, volunteering, giving and social connectedness to reduce loneliness
 - At every age - social relationships are key
3. **Balanced stable economic growth**, low unemployment and wellbeing at work
4. **Good governance** including devolving power, anti-corruption, freedom to choose, faster less contracted processes especially for children and families

The [O'Donnell Commission](#) highlighted policy priorities to promote well-being.

Unemployment hurts, but it depends who you are

what evidence did we find?

(continued)

unemployment damages wellbeing



Unemployment is damaging to people's wellbeing regardless of their age, gender, level of education, ethnicity or part of the country in which they live. The longer the time unemployed, the worse the effect.

People do not adapt to unemployment. Unlike the impact of many other life events, their wellbeing is permanently reduced.

but it affects people differently

Gender matters. Men's wellbeing is more affected by the incidence and duration of unemployment.

Age matters. Wellbeing may decline further for young people, particularly if the spell of unemployment is longer.'

Effects on others. Unemployment not only affects the person who lost their job, it also reduces the wellbeing of their spouse, especially female spouses.

(re)employment boosts wellbeing



Re-employment leads to higher wellbeing

but it depends on the type of work

Men appear to gain more than women when they are re-employed, but it depends on the type of work.

Job quality. The increase in wellbeing is smaller for those who transition into a job with less prestige, lower pay or lower autonomy.

Temporary jobs. Increases in wellbeing is smaller for those who enter into temporary jobs compared to permanent work (and wellbeing declines if move from standard to non-standard employment).

Analysis of survey data: Gender differences

what mitigates the damaging effect of unemployment?

Social support
Those who can rely on social support from family and friends.

Living in an area with high unemployment
There may be less stigma associated with unemployment where the local unemployment rate is higher, and in the UK, this results in a smaller the reduction in wellbeing from being unemployed.

Personality
Extroverts suffer less, while conscientious individuals suffer more.

Employability
Those with skills or who are more adaptable suffer less.

Social capital
Little evidence of mitigating effects from most social participation activities, including voluntary work, but regular religious attendance has buffering effect.

Arts & positive impacts for some diagnosed conditions

in hospice and hospitals







- 

 Brief music therapy is an effective intervention to support wellbeing of palliative care patients in hospital settings.
-  Music therapy can contribute to improved spiritual wellbeing in hospice patients








in higher education settings



- 

 Targeted, culturally relevant music interventions can decrease depression in nursing students in a college environment.
-  Music therapy can alleviate anxiety in undergraduate students.

in residential and community settings









- 
 Targeted, culturally relevant music and singing interventions can enhance mental wellbeing and decrease depression in older people with chronic conditions in residential and community settings.
-  Participation in individual personalised music listening sessions can reduce anxiety and/or depression in nursing home residents with dementia and that listening to music may enhance overall wellbeing for adults with dementia.
-  Music therapy has a positive effect on mood in post-stroke patients and may be beneficial for mood improvement with stroke.
-  Participation in extended (12 months) community singing programmes can improve quality of life and social and emotional wellbeing in adults living with chronic conditions.
-  Participation in group drumming can support participants dealing with symptoms of PTSD.
-  Singing classes are associated with improvements in wellbeing in patients with COPD.



what evidence did we find?

There are three types of evidence

- 

 **strong** - We can be confident that the evidence can be used to inform decisions.
- 
 **promising** - Decision makers may wish to incorporate further information to inform decisions.
-  **initial** - Decision makers may wish to incorporate further information to inform decisions

What we know: sport & dance for young people

evidence for selected sports



Yoga or Baduanjin-Qigong can improve feelings of anxiety, depression, anger, attention and overall subjective wellbeing.



Yoga can improve overall mood.



Aerobic and hip-hop dance lead to positive mood enhancement compared to ice-skating and body conditioning.



Dance training is effective in lowering self-reported depression.



Empowering young girls through exercise has a positive effect on self-efficacy.



group-based and peer-supported sport and dance programmes may promote wellbeing enhancement in youth groups.

wellbeing benefits of taking part



Based on sector evaluations, the evidence shows that depending on the type of activity and the way it's delivered, taking part is associated with wellbeing improvements connected to:

- social connectedness
- pleasure
- sense of purpose
- confidence
- interpersonal skills
- happiness
- relaxation
- creative skills and expression
- aspiration and ambition.

However, taking part can also be associated with negative wellbeing in participants, which was connected to participants' concerns about competency and capability.

What we know: sport & dance for young people



what evidence did we find?

Is subjective wellbeing higher for young people who participate in sports?

Analysis of survey data shows us that young people who take part in physical activity rate their overall wellbeing higher; are happier in general; and find their life more worthwhile. These findings are especially strong for those who take part on a weekly basis.

How does this compare to other things we can do?

Alone or together? Inside or out?

Analysis from a European and American Survey shows that it matters where you are and whether you are alone or with others.

On average, across all activities including sport, those who were alone demonstrated lower happiness, higher anxiety and lower sense of purpose.

The survey confirmed that being outdoors is better for young people's wellbeing than being inside.

How to compare and prioritise?

Life Satisfaction impact

- Employment = +0.5 units of life satisfaction
- Physical active x1 week = +0.2 units life satisfaction
- Listening to music = +0.1 units of life satisfaction
- Classical music concert = +0.19 units life satisfactions



Happiness impact

- Employment = +0.3 units happiness
- Physical active x1 week = 0.17 units happiness
- Listening to music = +0.8 units of happiness
- Gospel concert = +0.72 units of happiness

Community wellbeing

Resilience:

enables a positive response to a crisis & increases positive emotion

From having a caring and effective community through:

People, Power, Place

- strength of social fabric
- levels of trust
- institutional quality
- generosity
- shared purpose



Coming soon

1. Local area wellbeing indicators (adults)
2. Community wellbeing indicators
3. What is community wellbeing?
4. What Works boost social relations scoping
5. What Works co-production scoping
6. Drivers of wellbeing inequality at local authority level
7. Guidance on measuring wellbeing for people delivering projects

Evidence could be better!






Surprisingly, despite thousands of sport and dance interventions taking place across the UK, in the published literature from the past decade, there is limited good quality evidence, and very little conducted in the UK. This points to a need for better structures for measuring, collecting and using evaluations to build national and local evidence bases.



what evidence did we find?

There are three types of evidence

	strong	We can be confident that the evidence can be used to inform decisions.
	promising	We have moderate confidence. Decision makers may wish to incorporate further information to inform decisions.
	initial	We have low confidence. Decision makers may wish to incorporate further information to inform decisions.

Strong, promising and initial evidence refer to high, moderate and low quality evidence / confidence as per GRADE and CERQual guidance. For further information on these classifications, please see the Centre's [Methods Guide](#).

All evidence should be considered alongside questions of possible benefits and risks, affordability, acceptability, feasibility and wider impacts, including equity issues, in the user setting. Where the evidence is less strong, these other considerations become even more important.

No evidence for your sport?

A lack of evidence does not mean that there are no wellbeing benefits from taking part – it only shows that no-one has measured the wellbeing impacts. Indeed, we would need a study to have tried to measure it to show there were no wellbeing benefits.



Resources

How can we achieve better outcomes?

Culture & Leisure evidence synthesis

Available now

Music & singing – healthy adults/diagnosed conditions

Sport, dance & young people

Community wellbeing theory of change

Social relations scoping review

Wellbeing inequalities local analysis

Coming soon

Visual arts & mental health

Leisure (inc green & blue space) & the family

Green space; ‘pro-social space’, Heritage

Local area wellbeing **indicators** & wellbeing inequality drivers

What can organisations do?

1. [Use the wellbeing data](#) to understand
2. Use the ONS4 or WEMWBs questions to [collect wellbeing data](#) in surveys and add wellbeing questions to your evaluations
3. [Share what you learn](#) especially if it doesn't work!
 - Forum
 - Pioneer case studies
4. Trial things out
 - [evaluating wellbeing guidance](#)
 - Help improve the guidance
5. Partner with us





thank you

www.whatworkswellbeing.org

@whatworksWB

is funded by the



and partners



HM Government



UNIVERSITY OF
LIVERPOOL



THE LONDON SCHOOL
OF ECONOMICS AND
POLITICAL SCIENCE



Brunel
University
London



Learn more

Wellbeing in Policy and Practice Course

We have developed a short course on Wellbeing in Policy and Practice.

It comprises three modules:

- Why wellbeing?
- What is wellbeing?
- Applying a 'wellbeing lens' to decisions

→ [Download course](#)

→ Cabinet Office [exercises to apply wellbeing lens](#) to policy, strategy, plan or service

What Works
Wellbeing

Wellbeing in policy and
practice – an introduction

A short course developed by the What Works
Centre for Wellbeing