Evaluation of Five Ways to Wellbeing

Evaluation of Pilot Roll-Out of Five Ways Group Engagement and Brief Intervention Products and Training

August 2015

Dr Karen Smith
## Contents

Acknowledgements .................................................................................................................................................. 2  
Executive Summary ............................................................................................................................................... 2  
Introduction and Background ................................................................................................................................ 5  
  Five Ways to Wellbeing and *nef* .......................................................................................................................... 5  
  Social marketing of Five Ways to Wellbeing in Buckinghamshire ................................................................. 6  
  Five Ways to Wellbeing outside of Buckinghamshire .......................................................................................... 7  
  Moving Five Ways to Wellbeing forwards in Buckinghamshire ..................................................................... 8  
Purpose of the Evaluation and Methods Chosen ................................................................................................... 9  
Findings .................................................................................................................................................................... 11  
  Products ................................................................................................................................................................. 11  
    Product development process .............................................................................................................................. 11  
    Overview of the products .................................................................................................................................. 12  
    Reactions to and use of the products .................................................................................................................. 15  
Training ................................................................................................................................................................. 19  
  Motivations ............................................................................................................................................................ 19  
  Experience of the training ..................................................................................................................................... 20  
Mentoring ............................................................................................................................................................... 23  
Engagement with Five Ways to Wellbeing Post-Training ..................................................................................... 24  
  Non-engagement post training ............................................................................................................................. 25  
  Five Ways to Wellbeing in Practice ..................................................................................................................... 25  
Impact on the workplace ......................................................................................................................................... 27  
Impact on Clients and Service Users .................................................................................................................... 30  
The challenges of using Five Ways to Wellbeing in Practice ............................................................................. 31  
Moving Forwards .................................................................................................................................................. 36  
Discussion .............................................................................................................................................................. 38  
Concluding Remarks ............................................................................................................................................. 42  
Recommendations .................................................................................................................................................. 42  
References ............................................................................................................................................................... 43
Acknowledgements

We would like to acknowledge the support of the Sophy Forman-Lynch, Public Health Practitioner from Buckinghamshire County Council and Project Officer, in the evaluation of Five-Ways. We also would like to thank the questionnaire respondents and interviewees who freely gave their time to contribute to this evaluation. Finally, we acknowledge the work of Mary Rees, who led the evaluation at the University of Hertfordshire until her retirement in March 2015.

Executive Summary

The Five Ways to Wellbeing approach was first outlined by the new economic foundation (nef) in 2008. It received much publicity both nationally and locally and Buckinghamshire County Council ran a year-long social marketing campaign to raise awareness of the intervention. The evaluation of the campaign showed that there was increased recognition of Five Ways and some uptake of Five Ways activities as a direct result of the marketing campaign. Buckinghamshire was committed to Five Ways to Wellbeing and its Buckinghamshire-developed brand and decided to further develop and fund Five Ways initiatives in order to support its embedding. At that time, there was a paucity of evaluated 5 Ways initiatives nationally, so Buckinghamshire decided to commission its own work in this area.

Four Buckinghamshire 3rd sector organisations were funded through a ‘Five Ways Our Ways’ (5-WOW) Programme to trial and experiment with embedding Five Ways within their organisations and practice. Early reflections from these four projects (which were later supported by a separate external evaluation) suggested that the organisations wanted additional support - in terms of training and materials - to get their projects off the ground. Buckinghamshire County Council commissioned Oxford Health NHS Foundation Trust, who worked with Bucks New University’s positive psychology experts, to produce a suite of Five Ways products: Group Engagement Guide, Brief Interventions Guide and an electronically accessible Resources Pack to support both guides. The Products were designed to be used by the 5-WOW projects and also for wider application in Buckinghamshire by multi-agency frontline workers, volunteers, and community members. An independent training provider was separately contracted to develop and facilitate and pilot a training programme to complement the products and to provide follow-on support in the form of mentoring, which was felt necessary to support frontline workers in developing confidence in taking Five Ways forwards.

This report offers an evaluation of the roll-out of the products, training and mentoring developed to support the embedding of Five Ways to Wellbeing in Buckinghamshire. The evaluation is formative in nature and aims to help with continuation planning for Five Ways. Data collected in the evaluation comprises: an analysis existing Five Ways to Wellbeing documentation; interviews with the development team; observations of training sessions and follow-on email questions; an online survey of trainees; and interviews with trainees to garner case study examples of the use of Five Ways to Wellbeing in practice.

The findings show that, in terms of the products:
• The development process was not always straightforward due to the complexity of the brief and a lack of clarity about expectations. A partnership model of iterative working, however, resulted in products that all those involved in development were happy with.

• The products are professionally produced, colourful, attractive to look at, with accessible text and practical activities. The materials are available in hard copy and electronic format via a request through a website, which has further information on wellbeing and Five Ways to Wellbeing in particular.

• Respondents were very positive about the products, half of them had used them post-training. The online resources were particularly underused, due to a lack of awareness of their existence, difficulties in locating them, accessibility issues, problems downloading them, and being unable to customise them.

In terms of the **training:**

• The training was well-received by all who participated in it. The training was described as engaging, active and enjoyable. People left the sessions feeling more confident and knowledgeable about Five Ways and able, for the most part, to see how it could be embedded within their own contexts.

• Respondents reported using the activities learnt in the training sessions within their own practice.

• The trainer was deemed to be authentic and modelled the behaviours, attitudes, and techniques he was asking the participants to use.

In terms of **mentoring:**

• There was limited uptake of mentoring opportunities due to a lack of awareness that it was available.

In terms of **post-training engagement** with Five Ways to Wellbeing:

• Most people had engaged with Five Ways post-training. Reasons for non-engagement included: lack of opportunity, feeling it would not work in their context or role, and discomfort using the techniques.

• Those that had used Five Ways provided examples of the impact at different levels: with themselves, family and friends; in the workplace; and with clients and service users.

• The training encouraged people to examine their own wellbeing and then to try out interventions with friends and family.

• Within the workplace, respondents reported looking more carefully at their staff’s wellbeing.

• Examples were shared of Five Ways to Wellbeing being used for strategic planning and to support policy development.

• Respondents described working with individual clients around Five Ways; some reported that these conversations were difficult to initiate.

• Working with community groups around actions that aligned with Five Ways were easier to manage.

• Key challenges reported with regards to embedding Five Ways included: resistance to the concept; the need to engage in Five Ways yourself; lack of clarity around how many of the
Five Ways need to be in place to see wellbeing gain; future investment and impact measurement; lack of time; and initiative overload.

- Moving forwards, most respondents reported that Five Ways to Wellbeing was either to some extent or greatly part of their personal life; their planning, and their organisation. There was a concern that funding for Five Ways would dry up and that the initiative would die.
- To maintain momentum, respondents recommended more publicity; contact with previous trainees; ongoing support; targeting specific groups to become involved; development of evaluation tools; modelling practice by Buckinghamshire County Council; and accreditation opportunities.

The concluding section discusses the following areas:

- The difficulties of ensuring balance between academic rigour and accessibility for products that have a wide target audience.
- The importance of partnership working in developing accessible resources.
- The static nature of the current website, which does not encourage people to return to the site.
- The power of a good trainer in motivating people to engage in Five Ways.
- The need to offer post-training support to maintain momentum and foster sustained change.
- The challenge posed by the need to engage with Five Ways yourself in order to better support other people in making changes to their wellbeing and the difficulties involved in initiating conversations about wellbeing.
- The use of Five Ways to better communicate current practice and to reform practice by identifying gaps in provision, rather than transform practice.
- The marketing of Five Ways to Wellbeing nationally and locally as a package and the lack of clarity around whether engaging in more than one of the five ways leads to additional wellbeing gain.
- The need to develop clear and robust strategies for evaluating and measuring the impact of Five Ways to Wellbeing interventions.

Finally, **recommendations** are offered:

**Nationally**

- Further research into whether a combination of Five Ways adds to wellbeing gain.
- Development of a Five Ways to Wellbeing measurement tool.
- Further national promotion to support local activity.

**Locally**

- Investment in a more dynamic website to enable sharing of resources and guiding visitors to local Five Ways opportunities.
- If initial training continues, the need to employ a trainer who can motivate people to accept and adopt Five Ways.
• Provision of ongoing support to ensure sustained engagement with Five Ways for those who are actively involved in Five Ways to Wellbeing activities.
• Development of bespoke training on challenging areas, such as impact measurement and evaluation.

Introduction and Background

Five Ways to Wellbeing and new economic foundation (nef)

Five Ways to Wellbeing are evidence-based public mental health messages, which aim to improve the population’s mental health and wellbeing. They were developed by nef (the new economic foundation) as a follow-on to a project commissioned by the UK government’s think tank Foresight, after the 2008 Foresight Project on Mental Health and Wellbeing.¹ The findings from their project were published in the nef report: Five Ways to Wellbeing: The Evidence (nef 2008).²

The initial phase of nef’s project involved developing a long list of actions to enhance wellbeing based on the evidence found in the Foresight Challenge Reports and emergent positive psychology literature. This list was then synthesised to five actions, which represented the key findings from the research. The Five Ways to Wellbeing and examples can be found in Table 1.

<table>
<thead>
<tr>
<th>Action</th>
<th>Example</th>
</tr>
</thead>
<tbody>
<tr>
<td>Connect</td>
<td>With the people around you. With family, friends, colleagues and neighbours. At home, work, school or in your local community. Think of these as the cornerstones of your life and invest time in developing them. Building these connections will support and enrich your every day.</td>
</tr>
<tr>
<td>Be active</td>
<td>Go for a walk or run. Step outside. Cycle. Play a game. Garden. Dance. Exercising makes you feel good. Most importantly, discover a physical activity you enjoy and that suits your level of mobility and fitness.</td>
</tr>
<tr>
<td>Take notice</td>
<td>Be curious. Catch sight of the beautiful. Remark on the unusual. Notice the changing seasons. Savour the moment, whether you are walking to work, eating lunch, or talking to friend. Be aware of the world around you and what you are feeling. Reflecting on your experiences will help you appreciate what matters to you.</td>
</tr>
<tr>
<td>Keep learning</td>
<td>Try something new. Rediscover an old interest. Sign up for that course. Take on a different responsibility at work. Fix a bike. Learn to play an instrument or how to cook your favourite food. Set a challenge you will enjoy achieving. Learning new things will make you more confident as well as being fun.</td>
</tr>
<tr>
<td>Give</td>
<td>Do something nice for a friend, or a stranger. Thank someone. Smile. Volunteer your time. Join a community group. Look out, as well as in. Seeing yourself, and your happiness, linked to the wider community can be incredibly rewarding and creates connections with people around you.</td>
</tr>
</tbody>
</table>

Table 1: Five Ways to Wellbeing and Examples, from nef 2008

The nef project aimed to be evidence-based; offer actions that had universal appeal and that targeted the individual; and that provided opportunities for varied types of action that would support the diverse population of the UK. Each of the key five messages is set out in the nef report and supported with evidence from the Foresight Challenge Report, other evidence and the rationale for its inclusion (nef 2008, pp. 5-11). The report also sets out why certain themes were excluded from the key actions, namely wellbeing at work; nutrition; and nature (nef 2008, pp.11-12).

The action for change model (nef 2008, p.13) suggests that if you take heed of the advice in the five key messages, it will influence not only wellbeing (good feelings day-to-day and overall happiness, satisfaction) but also mental capital (resilience, self-esteem, cognitive capacity, emotional intelligence). While the report states that ‘each action does not need to be practised in parallel’ (nef 2008, p.14), the model seems to suggest that the benefit comes when all actions are performed. This is not supported by the evidence presented earlier, which focusses on the benefits of each individual action; there is no evidence presented within the report to suggest that engagement with more than one action has a greater impact on wellbeing and mental capacity.

Finally, the nef report suggests that the Five Ways messages should be communicated through a social marketing campaign, which appeals to a wide-range of people, offers positive approach goals, is targeted at individuals and is easily understood (nef 2008, pp.15-16).

Social marketing of Five Ways to Wellbeing in Buckinghamshire

There was a lot of publicity around the nef report and its approach to mental wellbeing. A multi-agency forum, coordinated by Bucks Public Health, decided that the best way forward for the county was to take the nef Five Ways to Wellbeing messages and to undertake a social marketing campaign within the area, with a specially-designed logo for Buckinghamshire (see Figure 1).

![Buckinghamshire Five Ways to Wellbeing logo](image)

While Buckinghamshire did keep the top-level terms for the five action areas, the examples have been shortened, while maintaining the same overall sense from the nef narrative, as can be seen in Table 2.

<table>
<thead>
<tr>
<th>Action</th>
<th>Example</th>
</tr>
</thead>
<tbody>
<tr>
<td>Connect</td>
<td>With other people. Have people around you, connect with others in your life. Building these connections will support and enrich your life every day.</td>
</tr>
</tbody>
</table>
Be active

Find a physical activity that you enjoy, exercising makes you feel good.

Take notice

Be aware of the world around you and what you are feeling. Reflecting on your experiences will help you appreciated what matters to you.

Keep learning

Set a challenge you will enjoy achieving. Learning new things will make you more confident as well as being fun.

Give

Seeing yourself, and your happiness, linked to the wider community can be incredibly rewarding and creates connections with people around you.

Table 2: Buckinghamshire Five Ways to Wellbeing and Examples

There was a strong commitment to the Five Ways campaign from Buckinghamshire County Council, which provided support through their communications team and there was strong ownership of Five Ways to Wellbeing in the area due to the multi-agency approach to driving the campaign forwards. The campaign ran for a year and it was anticipated that at the end of the year those involved in developing the campaign would actively embed Five Ways to Wellbeing into what they were doing and use the branding to promote it locally; there were some examples of proactive work (for examples integrating Five Ways into strategic planning), but uptake was not universal. An evaluation of the year-long campaign showed that while there was higher recognition of the branding and the messages towards the middle of the campaign, it tapered off at the end. It was decided that, given the strong ownership of Five Ways to Wellbeing locally, that Buckinghamshire County Council would continue to take Five Ways forward and not just raise awareness, but change practice and embed within organisational cultures and services.

Five Ways to Wellbeing outside Buckinghamshire

In 2013, the Public Health Team scanned nationally recognised initiatives to promote Five Ways to Wellbeing. At this point, there were limited reported (and evaluated) five ways activities. Below is a summary of some of the initiatives that had taken steps to embed five ways at the time (see Table 3, please note this is not a comprehensive overview of all Five Ways Activities that were operating at that time or now).

<table>
<thead>
<tr>
<th>Initiative</th>
<th>Brief overview</th>
</tr>
</thead>
<tbody>
<tr>
<td>NHS NorthWest: A Year of Health and Wellbeing</td>
<td>The bespoke website describes the initiative as a decade-long movement to help everyone in the North West feel good and live well. The site gives an overview of the Five Ways to Wellbeing and people are invited to pledge how they will enhance their wellbeing by engaging with one of the Five Ways. Local organisations can show their own engagement by becoming a partner. There are ideas for how to get started with Five Ways (e.g. take up yoga) and an invitation to get involved in established challenges (e.g. global children’s challenge). There is a resources section, which includes a discussion toolkit, a video and a downloadable logo. This initiative took an asset-based approach to wellbeing and looked at a programme of large-scale change. It commissioned initiatives such as Our Life (see below).</td>
</tr>
</tbody>
</table>
Our Life: improving wellbeing, empowering communities

Our Life is a social enterprise that provides consultancy around wellbeing. It grew out of NHS North West’s ‘Living Longer, Living Better, Caring More’ and is now self-financing. Our Life has used Five Ways to Wellbeing to evaluate housing associations current activities and similarly to assess the current activities of two merging housing groups who were seeking to develop a strategy for future development.

http://ourlife.org.uk/

South London and Maudsley NHS: Keeping Well

South London and Maudsley NHS: Wheel of Wellbeing (WoW).

On the website there is a ‘Wellbeing Zone’. The zone provides links to each of the five ways to wellbeing. These links provide evidence for each way, some ideas as to how you can develop them (e.g. a ‘gratitude visit’ to support the call to ‘connect’). There are also videos with specialists around each of the ways to wellbeing.

http://www.slam.nhs.uk/our-services/keeping-well

South London and Maudsley also developed a Wheel of Wellbeing. This draws on Five Ways to Wellbeing (but changes the top-level terminology) and adds a sixth aspect, ‘Place’, which focuses on enhancing the environment in which we live. The website gives tips on how to improve your own wellbeing; how to use the Wheel of Wellbeing in organisations, the workplace, or local community; finally, the website outlines how a section is being developed to support those involved in public policy, health, social care or local government and want to work at a strategic level.

http://www.wheelofwellbeing.org/

Table 3: Some of the Five Ways to Wellbeing Initiatives investigated in 2013

Buckinghamshire Public Health had previously commissioned SLAM to directly deliver and evaluate their DIY Happiness programme within the Aylesbury-based Healthy Living Centre. However, a limited budget, the need to develop Five Ways training skills and capacity in county, and the desire to keep the strong local branding of Five Ways, resulted in the Bucks Adult Wellbeing Group deciding to opt for locally developed Five Ways initiatives, building on learning gleaned from the above initiatives.

Moving Five Ways to Wellbeing forwards in Buckinghamshire

Initially, Buckinghamshire Public Health funded four organisations in a project which sought to allow the organisations to trial and experiment with what an organisation could do to embed Five Ways to Wellbeing within both the organisations themselves and the services that they provided. These Five Ways Our Way projects have been evaluated separately (see Hovard 2015). The evaluation showed that it was difficult for people to know where to start and what they were to do with Five Ways.
In 2013, Bucks Public Health commissioned Oxford Health NHS Foundation Trust, in partnership with Bucks New University’s Department of Psychology, to develop three products for multi-agency frontline workers, volunteers and community workers:

- A Five Ways Group Engagement Guide – to provide information on how to facilitate group discussions in relation to the promoting wellbeing, and specifically the Five Ways to Wellbeing;
- A Five Ways to Wellbeing Brief Interventions Guide – to provide frontline workers with information and guidance on how to start up conversations with service users and clients about wellbeing and specifically Five Ways to Wellbeing;
- An electronically accessible Five Ways Resources Pack with additional activities, ideas and information to support both the Group Engagement and the Brief Interventions Guides.

In July 2014, Buckinghamshire Public Health commissioned a training provider to design and deliver a pilot training programme to support the first-phase roll-out of the Five Ways Group Engagement Guide and the Five Ways Resource Pack to local frontline trainers, facilitators, volunteers and Five Ways Our Ways champions for use with new or existing groups of people. The training programme was to run from July 2014 until March 2015. In addition, training would be supported by follow-up mentoring for those who wished to have further support and encouragement to begin to deliver group sessions on wellbeing and Five Ways to Wellbeing. The decision to include this opportunity arose from experiences with the 5WoW projects, where it was clear that some frontline practitioners would benefit from ongoing support to take Five Ways forwards, particularly in group settings.

Bucks Public Health also commissioned the same training provider to design and deliver a training session to support the roll-out of the Five Ways Brief Interventions Guide for frontline multi-agency workers and those delivering ‘Making Every Contact Count’ (MECC). This training was to run during the same period as the Group Engagement training.

In September 2014, Bucks Public Health commissioned the University of Hertfordshire to carry out an evaluation of the Fives Ways Group Engagement Guide, the Five Ways Brief Intervention Guide and the Five Ways Resources Pack, and of the pilot-roll-out of the training and mentoring initiatives.

**Purpose of the Evaluation and Methods Chosen**

This evaluation seeks to answer the following evaluation question:

- How do the Five Ways Group Engagement and Brief Intervention products and, training initiatives impact on diffusion and uptake of Five-Ways messages and actions by individuals and within/across communities.

The evaluation is formative in nature (Hall & Hall 2004, p.29), aiming to support the ongoing development of the products, training and mentoring associated with the Five Ways to Wellbeing initiative in Buckinghamshire and therefore enhance and develop future provision.

The evaluation employed a multi-method approach to data collection, enabling triangulation of data. The data collection methods comprised the following:
• **Development of Five Ways materials and training interviews**
  Interviews were conducted with the Project Commissioner, the product development Project Manager, two product developers (one from a university and one from an NHS wellbeing service), and the Trainer. The interviews were either conducted face-to-face or via the telephone and were transcribed.

• **Analysis of existing documentation**
  Namely the Group Engagement Guide, the Brief Interventions Guide, the Five Ways Resource Pack, the online resource pages, and the evaluation report compiled by the training provider at the end of the training period (Pollard 2015).

• **Observations of three training sessions**
  Two general brief intervention training sessions and one bespoke training session for a housing association, which covered both brief interventions and group engagements were observed. The observer adopted a passive participation stance (Spradley 1980) in her observations, which meant she observed activities in the setting without participating in them.

• **Post-training email reflections**
  Trainees at the observed sessions were invited to provide feedback on the training shortly after the sessions; six participants responded to a short questionnaire.

• **Online survey**
  In May 2015, an online survey was distributed to n=87 (of the n=113) people who had attended Five Ways training. N=41 responses were received, reflecting a 47% response rate. The survey comprised a series of closed and open questions relating to the training, resources, mentoring, and the impact of Five Ways on Practice. Potential respondents were contacted via the email address they had used to register for the training session.

• **Use of Five Ways interviews**
  Follow-on interviews with n=12 training attendees to discuss in more detail their use of Five Ways in their practice post training. This represents 11% of those who took part in the training (and 14% of those who responded to the questionnaire). These interviews were designed to gain case study examples of the use of Five Ways in different settings. The interviews were either conducted face-to-face or via the telephone and were transcribed.

A decision was made early in the evaluation planning phase that it would not be feasible to interview end-users as part of this evaluation. Brief intervention Five Ways activities are opportunistic and usually one-off interactions, which makes it difficult to follow-up on their impact on subjective wellbeing. Instead it was decided that the evaluation should focus on the take-up of Five Ways activity in professional practice. One of the limitations of adopted approach to the data collection method, however, is that data was principally elicited from those who were engaged with Five Ways.

---

3 The difference between the number of training session attendees (n=113) and the number of invitations to take part in the survey (n=87) reflects the fact that some managers enrolled their staff on the training and some trainees had moved jobs, resulting in email bounces.
to Wellbeing, as it is likely that those who were more ambivalent to the intervention chose not to respond to the survey call or offer to be interviewed. The approach to data collection, however, has resulted in rich, illuminative data. The data were analysed using thematic analysis and those themes are discussed below.

Findings

Products

Product development process
As noted above, Oxford Health NHS Foundation Trust (Oxford Health) was commissioned to develop the Five Ways to Wellbeing products. They led a partnership with an independent project manager, Healthy Minds Bucks and Bucks New University.

The partnership comprised of people with different expertise: New Bucks University had expertise in the content of the material and in positive psychology more generally; Healthy Minds were familiar with developing materials and packages for self-help groups and running focus groups; and the Development Team project manager was used to project planning, meetings deadlines and liaising with the Task and Finish Group membership, including the commissioner.

Those involved in the product development felt that the brief was very complex and that there was not enough clarity in the initial tender as to what they were expected to produce. It took some time and many iterations of the materials to establish what was required. The Commissioner felt she was clear, however, in that she wanted them ‘to develop a toolkit, which had ideas on how you could start conversations, facilitate groups, talk to communities about how you promote wellbeing’ (Commissioner). The Commissioner envisaged a resource that drew in things from many different places, but admitted that she ‘just didn’t know what it would look like’.

New Bucks University undertook the initial work on the content of the guides and the resource pack. Two postgraduate students were employed to take what was already known from the positive psychology research and its evidence base and to weave that into Five Ways to Wellbeing. This activity took much more time and resource than was originally envisaged. The Commissioner felt that the initial materials were too academic and theoretical and did not sit well in a toolkit that could be used by people who were interested in wellbeing. It appeared that it was a difficult balance to ensure that the materials had the solid evidence base that people wanted but were also accessible to a wide audience. As a Developer noted: ‘if you do ask for evidence-based interventions and commission serious psychologists, a research psychologist, then you end up with a particular product’ (Developer). The development team did find ways to make the materials more customer-friendly, ‘but it took a large cull’, which was ‘painful’ given the scale of work that had been done, though it resulted in ‘a better layered product’ (Developer) at the end of the process.

As the materials were being developed, focus groups were being conducted to consult on what the materials should contain. What came out clearly was that ‘whatever was produced in the end would guide the process, how to run a brief intervention, rather than too content heavy’ (Developer). This was important feedback as the initial materials, as discussed above, ‘were more focussed on content than process’ (Developer).
The development team were also field-testing some of the training packages. The brief interventions content and training were relatively straightforward; the field-testing of the brief intervention train the trainer content and package was more complicated and confusing both for the people delivering the training and those who were attending:

*We were training people in how they would then train other people to deliver this intervention [...] Despite reiterating why people were attending and what they were attending for, at the end of that train the trainer session, people were really bamboozled and did not really understand why they were there.* (Developer).

The developer said that, with hindsight, it would have made sense to have broken the work down into specific phases, focussing initially on devising the brief interventions guide and then field-testing that, then the group engagement guide, and finally the train the trainer package. Participants in the field-testing sessions often did not see the difference between the packages and thought they were interchangeable and people who would never be training a trainer arrived at that session as they could not make another. A clearer delineation of the packages and the training, offered sequentially and separately, would have provided ‘more clarity about what we were working on at what time’ (Developer). It was following the feedback on this field testing that it was decided to drop the Train the Trainer component and just undertake a pilot of the Group Engagement and Brief Intervention training.

Towards the end of the process, the person who would subsequently facilitate the pilot training was sub-contracted by Oxford Health to work on the guides and the resource pack, working to ensure that the resources were more practical, shorter, simpler and user-friendly.

While the development process was not totally straightforward and involved many people, those interviewed who had contributed to the development were pleased with the finished products:

*I got them to a point and I know the point I got them to was good and they were made a lot better and credit to the people who did that* (Developer).

*It looks like they are in a format now that is useful. The materials integrate the idea and process, so if we think about the brief intervention, the materials incorporate how to deliver the conversation, how to have a conversation* (Developer)

*[Were you pleased with the end result?] Absolutely. Very. It was what I was hoping for in terms of accessibility, customer-friendly type materials* (Developer)

**Overview of the products**

The products comprise two A5 booklets: *Buckinghamshire Five Ways Brief Interventions Guide* and *Buckinghamshire Five Ways Group Engagement Guide*. Both guides are colourful, attractive to look at and professionally produced. They make use of pictures, diagrams, icons, quotes, coloured text boxes, and short bullet-pointed text to engage the reader. They have the same branding, with the Buckinghamshire Five Ways logo; the guide title; the title of the initiative (five ways to wellbeing); the five ways (connect, be active, take notice, keep learning, give) and the strapline ‘*living life well, one step will make a difference*’.
Both guides begin with an acknowledgements page and a contents page. At the end of the table of contents, there is a reminder that the five ways resource pack can be accessed online and the web address is given. The guides then go on to outline how to use the guide and who it is for before providing information on why wellbeing should be promoted. These pages give information on the benefits of wellbeing, how we can influence wellbeing, background to Five Ways, an invitation to try the five ways yourself, links to further information, and finally an overview of positive psychology and its link to the ‘practical, evidence-based positive psychology activities that relate to each of the five ways’ (Brief Interventions Guide, p.10; Group Engagement Guide, p.9). The two guides then provide practical advice and guidance on how to get started with either brief interventions or group engagement session.

**Brief Interventions Guide**

The Brief Interventions Guide provides detail on a ‘stages of change’ model before offering a framework for active listening. This is followed with ideas on how to take a brief intervention forwards and explore Five Ways more deeply. Section 4, gives some contact details to support those who are worried about their mental health. Finally, there is a pull-out prompt sheet to support discussions about Five Ways, using visual prompts (as in the NHS Alcohol Brief Advice Tool⁴). It has:

- The Five Ways logo;
- A list of the five ways (with definitions);
- The web address and links to other support;
- An overview of the benefits of wellbeing;
- A self-assessment thermometer
- A quote from the Dalai Lama;
- The Five Ways wellness wheel;
- A box to note down what you want to try this week to improve wellbeing.

**Group Engagement Guide**

The Group Engagement Guide provides very practical advice on how to run a taster session that explores wellbeing and the Five Ways to Wellbeing messages. The initial practical advice section ‘Getting Started’ goes right back to basics, outlining how group facilitation benefits both the facilitator and those participating in the session; providing information on planning and preparation; and outlining step-by-step what a taster session could look like through a guided session plan. There is then information on how to run a follow-up session, with different approaches that could be adopted. Finally there is the same guidance on supporting people who are worried about their own mental health that can be found in the Brief Interventions Guide.

**Resources Pack**

The Five Ways Resource Pack is a different product to the two Guides. Although it carries the same logo, branding, strapline and colourful appearance (with pictures, diagrams, icons and bullet-pointed text), it is a larger A4 document with a very different purpose. This pack has been designed as something that can be dipped into. As the introduction notes, the pack is there to accompany the other guides and it ‘gives you a selection of tried and tested group activities, three-step ideas on wellbeing, some wellbeing assessment and evaluation tools, as well as useful five ways hand-outs

⁴http://www.alcohollearningcentre.org.uk/Topics/Browse/BriefAdvice/?parent=4444&child=5007
and background reading’ (Resource Pack, p.4). Before providing the practical activities and ideas, the Resources Pack gives a brief overview of how adults learn (drawing on Kolb’s Learning Cycle) and advises on having a ‘Working Agreement’ when working with any group; an example of a working agreement is provided. Users are invited to adapt any materials to suit their own purposes.

The first section provides inspiration on how to liven up group activities. It includes ice-breaker activities such as: ‘start with a positive’; ‘human bingo’ (to encourage mingling within groups); and a hopes and fears activity to surface group concerns. There are activities that encourage focus and reflection, including: ‘the tree of strengths’ (to notice strengths); a mindfulness exercise ‘take a deep breath’; and the ‘conveyor belt game’ to generate and share Five Ways associated activities.

Consolidation activities include the ‘carousel exercise’, which helps foster creativity and a 50-minute session plan to introduce participants to Five Ways through activity-based exercises called ‘actions speak louder than words’. Finally there are two wellbeing games sourced from different Five Ways initiatives: ‘DIY happiness’ (by SLAM) and ‘A fail deal to wellbeing discussion’ (from Our Life). This section closes with some other ideas to consider, such as watching an inspirational film; learning a new skill (e.g. knitting, hula hooping, creative writing); volunteering; book, poem, and mindfulness walking clubs. All of these ideas are mapped onto the Five Ways (e.g. the mindfulness walking club is mapped to the following five ways: ‘be active’, ‘take notice’ and ‘connect’).

The second section offers three-step (try one thing; take it further; a way of life) ideas on the five ways, based on evidence from positive psychology. The ideas explored are organised according to the five ways, for example:

1. CONNECT: practising the act of gratitude
2. BE ACTIVE: guided and mindful walking
3. TAKE NOTICE: learning to savour and enjoy moments in time
4. KEEP LEARNING: setting goals to inspire
5. GIVE: random acts of kindness.

The third section offers some useful hand-outs that define wellbeing; a prompt sheet for brief interventions (that is also available in the Brief Interventions Guide); Five Ways Top Tips (with space to add in your own comments); and an aide memoire for those running group engagement sessions.

The fourth section offers three personal assessment tools: the Warwick-Edinburgh Mental Wellbeing Scale\(^5\); a personal activity fit diagnosis; and a VIA-inventory of strengths\(^6\).

The fifth section provides some simple tools for evaluating group sessions including: an evaluation form; smiley faced ranking; a five ways circle; a river of wellbeing and a blob tree.

The sixth section offers evidence and background reading to support the promotion of wellbeing, as well as support services for those worried about their own mental health and wellbeing (which is also available in the Guides).

---


\(^6\) VIA inventory of strengths: [https://www.viacharacter.org/www/](https://www.viacharacter.org/www/)
The *Resource Pack* is designed to be very user-friendly and practical. Although it is available in hard copy, a much smaller print run was done for this pack. Instead, it was envisaged that the *Resource Pack* would be accessed online, which would facilitate the printing of the hand-outs, prompts, and activities that can be found there.

**Online materials**

Five Ways to Wellbeing’s online resources are hosted by Buckinghamshire County Council. They carry the same branding and logo as the hard copy *Guides* and *Resource Pack*.

An introductory page outlines the Five Ways and there are separate pages for each of the ways. These pages introduce the ways and then provide examples of how you can achieve them; e.g. for ‘be active’, the site suggests that you ‘take a walk at lunchtime at work or school’ or ‘you borrow a dog and go for a walk’ (amongst others). There are also links to the right-hand side of the webpages to existing groups that people might want to join (e.g. Simply Walk).

A second link invites visitors to explore their own wellbeing. The opening page in this section provides additional support through GP, Healthy Minds, Bucks Mind, and Bucks Drug Action Team. There are links on the left to an online tool WEMWBS [Warwick-Edinburgh Mental Well-Being Scale], used by psychologist to measure wellbeing and to further support for young people, via Time to Talk Bucks, Schools, and Young Carers Bucks (with links to national support, e.g. the Samaritans, on the right).

A third link provides access to the Five Ways Toolkits. In order to access the Guides, the Resource Pack and Five Ways logo, a request form needs to be completed. This page also highlights that training in Brief Interventions and Group Engagement is also available. To the right of the page, are links to positive psychology courses offered by the University of East London, and Bucks New University.

The fourth link offers visitors opportunities to become wellbeing champions. These pages provide information of the work of some of the existing champions (i.e. Bucks Adult Wellbeing Group; Children and Young People’s Mental Health and Emotional Wellbeing Group) as well as the Five Ways Our Ways projects commissioned by Public Health Buckinghamshire (discussed above).

A fifth link introduces a pilot scheme to promote Five Ways with young people via the Five Ways Peer Educators initiative.

Finally, a sixth link gives information on the training sessions provided as part of Five Ways (group engagement and brief interventions). An email address is given where people can express their interest in participating. There is also a link to training in mental health first aid.

The Five Ways to Wellbeing initiative has provided some rich products for people to use; in the next section reactions and use of the products are explored.

**Reactions to and use of the products**

The responses to the Five Ways responses were positive, yet the questionnaire showed that they had been used by half the respondents post-training. See Figure 2:

---

The questionnaire respondents provided more detail why they used the materials; the most frequently chosen reasons were: to explain to someone else what Five Ways is (n=19); to further own understanding of Five Ways (n=18); and to find activities to support brief interventions with clients (n=14). These and the other reasons are shown in Figure 3:

Figure 2: Use of Five Ways Material Post-Training

The interviewees provided a positive appraisal of the resources:

The materials are very professional and I wanted to read more of it. I’ve been right the way through the booklet and the interventions’ guide, from front to back. Not many things capture my imagination that much. It’s bite-sized, the graphics, the layout’s easy to read, there are bullet points, all these things, it’s not a document that needs hard reading, you can flick through it (Voluntary Sector, Manager).
I am looking through it now and there are elements of the booklet that look very easy to use and to illustrate examples. It’s appealing to look at (Private Sector, Officer).

For one interviewee, the resources provided activities and evidence that you could continue to return to: ‘it has all the evidence in and all the activities [...] it’s nice when you’re going back into it to just have a look. It actually keeps it interesting for yourself” (Local Authority, Advisor). This was echoed by a questionnaire respondent who wrote:

The resource pack has a wealth of information that I use for the training, in meetings and in everyday life. I really like the ‘science stuff’, which is concise and easy to understand (Voluntary Sector, Manager).

Another interviewee reported that while they did not use the resources themselves, they passed them on to others who were involved in training (Local Authority, Project Officer); similarly another respondent believed the materials were being used in a self-help group run by his organisation (Voluntary Sector, Manager).

As shown in Figure 3 above, around half of the questionnaire respondents had not used the materials following the training. While this is to be expected in terms of the Brief Interventions Guide and the Group Engagement Guide, where it is likely that one guide will be more applicable than the other for some respondents, the use of the more generic resources pack (printed and online) post-training is lower than anticipated. This lack of use was commented on in both the questionnaire and interview responses. Their reasons included: a change of role, focus of role (strategic rather than front line), time off work, lack of discipline, and simply a lack of time:

At the time of the training I browsed through afterwards and during the time of the training [...] I haven’t looked at the brochures since then, which is one of those discipline things, going on the training and not spending a lot of time afterwards looking through everything. For the less conscientious of us that happens (Private Sector, Manager).

I need to allocate time to go through the resources. Time is an issue (Private Sector, Officer).

Others reported not remembering to or not needing to use them again, as shown in this quote:

The programme equipped me to create the opportunities for encouraging the people around me to get involved with each other and in the community. The materials, although excellent, are superfluous to my activities (Voluntary Sector, Manager).

There were particular concerns amongst the commissioning team that there had been problems with the online site; most people who responded to the question about accessing the online materials did not report any issues rather a lack of awareness of online availability as one interviewee noted:

I had forgotten that there was the online material; I didn’t consider going online for it (Private Sector, Officer)

A small number, however, did report access issues:
Initially I was not able to locate the materials and then as time went by, it has slipped my mind (Local Authority, Support / Care Worker).

In the initial stage yes I did but it was sorted out (Private Sector, Coach / Facilitator).

I downloaded it and it seemed fine but then when I went to open it there was a corruption. I need to try again (Local Authority, Social Worker).

During one of the interviews, the interviewee logged onto the website and talked through what they were seeing, highlighting potential issues for users:

I am on the website now and I have found the resources pack and it looks like there is the engagement guide and there is material and the resources and the toolkit. The resources pack suggests that I need to request it, and there is no cost. It seems that I need to request it, rather than it being clearly available. When you said there was more information online, I thought I would just go to a website and there would be page after page of fun activities, but there is a request form. So I make a request and then do they send me something, or is it a download? As a user just coming here for the first time, I am a bit confused (Private Sector, Officer).

The request process is actually relatively straightforward; you enter your details and then the guides are there for you, in PDF format, for you to download. When the online guides were downloaded, however, a second interviewee found that they could not modify them for their situation:

I had to make my own resources, which I was disappointed about because I had to make the big petals and I had to make the pie chart myself. I did look at the online resources, but I couldn’t see anything that explained Five Ways to Wellbeing and had the pie chart on one piece of A4 paper and had space around for people to fill in what they were doing. That was a shame (Private Sector, Officer).

This was an issue that had also troubled the trainer, who had envisaged a much more dynamic online presence:

Who will maintain this online? Initially they thought that if something worked in a workshop, they would do add it to the website, but they have no one to do that (Trainer).

One developer had envisaged something similar, whereby people using Five Ways could submit questions and queries: ‘one of the things we talked about was the website back-up [...] I put in at one point an “email if you’ve got a question” and it was taken out’ (Developer).

A more dynamic web presence with customisable materials would have facilitated the development of a stronger online community of users of Five Ways to Wellbeing products and ensured that the excellent materials developed were used more extensively. During the pilot phase there was evidence of the beginnings of an online community that extended beyond Buckinghamshire to Barnet, Sheffield, Northern Ireland, and Australia. These people had found the Five Ways site through a Google search and requested materials; it is likely that a more dynamic site would have attracted more visitors and encourages them to make return visits.
Training

Training was put in place between July 2014 and March 2015 to support the pilot roll-out of the Five Ways to Wellbeing initiative. Seven training workshops were facilitated as part of the pilot phase in order to test the materials and training before considering on-going investment, adjustments to the materials and extending the training roll-out. 113 people were trained as part of this pilot. There were three group engagement workshops (n=47 participants) and three brief intervention workshops (n=54 participants). These were open to any participants and the trainer particularly enjoyed these sessions for the variety of the people who attended and the opportunities for networking they afforded (Trainer). This was picked up by one of the attendees:

*The first thing I came away with was some networking. I know that wasn’t the aim, but I did get that. It is really useful* (Voluntary Sector, Manager).

In contrast, there was one bespoke workshop designed for a housing association that combined both group and brief intervention activities (n=12 participants). The distinction between the two facets was clear within the training session (Observation Field Notes). The trainer described how he went about designing the bespoke session:

*It was about meeting with them, talking to them about their staff, who they interacted with, the types of interaction they had, the whole variety […] I got the whole picture from them, a picture of what they do. I look for where there might be obstacles or shut down […] I need to get them into a place where the obstacles are second or third, and also recognise that the job is hard, but see that they are incredible people because they do it.* (Trainer)

What was also important in the bespoke session was the collaboration between the housing association staff (who translate the exercises into their context and provide a rationale for the training) and the trainer (Observation Field Notes). Providing a rationale was of utmost importance for there to be buy-in for the session:

*It is so, so, important that frontline staff are aware of the rationale behind training. All too often, in my experience, new initiatives come along, no rationale is given, so this is what you do, frontline staff are sometimes very tired, very worn, they work very hard and there can be resistance, when there is no background given, or rationale for what they are doing and we thought that by setting the context, it would be clear and transparent, hopefully giving them a rationale to understand why they were here. And I think that was very effective for opening them up and clearing their mind, letting them understand and see what was going on behind the scenes and opening them up for the rest of the day to actually learn about the subject.* (Private Sector, Manager)

And following a brief overview of their rationale for engagement, the training went better than expected and people’s behaviour suggested that were comfortable with the session, that they had benefitted from the variety of activities and the opportunity to challenge and provide feedback in an environment where people had a shared background and knowledge.

Motivations

Questionnaire respondents were asked to note their main motivations for attending the Five Ways training; they were asked to tick all that applied to them. The main motivations training were to
learn how to integrate Five Ways (n=24); to become more familiar with the Five Ways materials (n=17); and because their manager or organisation encouraged them to attend (n=16). A full breakdown of the results can be found in Figure 4.

**Figure 4: Motivations to Attend Training**

When asked in the follow-up interviews what had drawn them to the training specifically, and to Five Ways to Wellbeing more generally, the interviewees demonstrated either a prior familiarity with Five Ways (through involvement in steering groups, initial meetings, conversations with the commissioner, and awareness of the earlier *nef* publications on wellbeing), an interest generally in wellbeing, or being early champions of positive psychology. Interviewees also noted that, as an approach, it chimed both with personal values (Voluntary Sector, Manager) and with organisation need (Private Sector, Manager).

**Experience of the training**

The training facilitators, the training materials and the training activities were all very well received, as Figure 5 shows. 97.5% (n=40) of respondents rated the training facilitators good or excellent; 95% (n=39) rated the training materials good or excellent; and 97.5% (n=40) rated the training activities good or excellent.
Figure 5: Response to the Training

95.1% (n=38) found the training activities engaging.

At the end of the training, the respondents agreed or strongly agreed that they could:

- Relate the training to their own context: 92.6% (n=38);
- See how to use the activities in their own practice: 82.2% (n=35)
- Feel more confident about how to promote Five Ways in their own organisation: 82.2% (n=34)
- Find more information about Five Ways if they needed to: 80.5% (n=33).

The questionnaire respondents were asked to outline their take home messages following the training that they had received. These are summarised below in Table 4:

<table>
<thead>
<tr>
<th>Message</th>
<th>Example quotes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Simplicity</td>
<td>It’s not complicated. Simple and easy to relate to as professionals and for families (Local Authority, Coach / Facilitator).</td>
</tr>
<tr>
<td></td>
<td>Five Ways is common sense and can easily be integrated into my everyday life and applied to my work (Local Authority, Advisor)</td>
</tr>
<tr>
<td></td>
<td>5 ways is easy to incorporate and everyone is already doing the 5 ways to some extent but it's making people realise that they are doing them (Voluntary Sector, coordinator)</td>
</tr>
<tr>
<td>Encourage involvement</td>
<td>Be proactive in encouraging others to get involved (Voluntary Sector, Manager)</td>
</tr>
<tr>
<td></td>
<td>Don't be shy about talking to anybody because it can often lead to very positive outcomes (Local Authority, Life Story Worker)</td>
</tr>
<tr>
<td>Own wellbeing</td>
<td>To find which of the 5 areas I need to work on (Local Authority, Officer)</td>
</tr>
<tr>
<td></td>
<td>That you can with these very simple tools improve your own wellbeing and share this with others (Local Authority, Social Worker)</td>
</tr>
<tr>
<td>Holistic</td>
<td>Step back and try to look at the person's life in front of you as a whole (Voluntary Sector, Manager).</td>
</tr>
<tr>
<td></td>
<td>That wellbeing is holistic - which chimes well with how OTs work anyway (Local Authority, Occupational Therapist)</td>
</tr>
<tr>
<td>Small acts</td>
<td>A small change is as good for you as a grand gesture (Local Authority, Library Assistant)</td>
</tr>
<tr>
<td></td>
<td>Simple changes can lead to improved wellbeing (Private Sector, Officer)</td>
</tr>
<tr>
<td>Affirming</td>
<td>I found that I was already using this approach within my working practice (Local Authority,</td>
</tr>
</tbody>
</table>
Support / Care Worker
Learning about the Five Ways initiative I found that I was doing all these things anyway and had been for years. It’s just common sense really. Just all part of living a happy healthy life and helping others (Private Sector, Support / Care Worker)

Flexibility
That 5 Ways was flexible and could be applied practically and strategically in many ways (Private Sector, Manager)

Positivity
Giving positive affirmations to encourage others in improving their own wellbeing (Voluntary Sector, Manager)
Start with the positive (Voluntary Sector, Volunteer)
The importance of positively encouraging people (Voluntary Sector, Project Officer)

Table 4: Training Take Home Messages

**Making connections with own contexts**

Only one person reported disagreement in the questionnaire with the statements: I can see how to use this in my own context and I feel more confidence about how to promote Five Ways in my own organisation and only one interviewee reported that the tools described in the training sessions would not work in their context:

*The trainer gave us lots of different tools we could use. But I didn’t feel they would be well received in a busy workplace setting* (Local Authority, Officer).

During the observation of a brief intervention training session, one of the evaluators questioned how easy it would be for participants to transfer these abstract activities into a particular workplace setting. She asked whether it might be more explicitly situated within their own context (Observation Field Notes). This was a concern for one of the interviewees:

*I suppose the challenge for me was thinking in my everyday conversations with tenants, how am I going to fit in these conversations about Five Ways?* (Private Sector, Officer).

Overall, however, the follow-up interviews and questionnaire responses suggest that the participants were able to translate and adapt the activities into their own contexts:

*There were a lot of different exercises that we could take and that we could regurgitate for our own audiences and specific parts of organisations where we are trying to get cooperation and engagement* (Local Authority, Project Officer).

Respondents reported using the following activities that they had learnt within the training in their own practice: positive news to start a session; Five Ways Circle; human bingo; and counting to ten in Japanese, e.g.:

*The one thing I took from it is what we do all the time now […] we did that round robin thing where you share something good that has happened this week and everyone loved it* (Private Sector, Officer).

*The Human Bingo always works so, so well* (Local Authority, Coach / Facilitator)

*[The Five Ways Circle] to ask people which segment they do not have anything in and then ask what they could do to improve the balance of the five segments* (Private Sector, Consultant).
Overall, the feedback indicated that the training was excellent. The external evaluator noted the trainer’s obvious experience and rapport with the participants. This was also reflected in comments during the follow-up interviews:

*The training was excellent [...] I have a bad habit of critiquing the facilitators. I thought these two were very good* (Voluntary Sector, Manager).

Such positive feedback heartened the trainer as well, who set out to design a fun, learning experience:

*I want them to have a good learning experience. It gives them a possibility. It is also tapping into their own expertise, valuing them and what they have to offer. They come away thinking they have come away with something that enhances what they do.* (Trainer).

This interviewee particularly valued the fact that the trainers were modelling the techniques they were asking participants to use: ‘*they were demonstrating what they were asking us to do*’ (Voluntary Sector, Manager). It was clear to the participants that the trainer believed and practiced what he was teaching; such authenticity was important:

*The trainer had a few good examples and he was very good at not just actually presenting an idea, but then how he did it, how he had personally done it, in fact he was demonstrating how he had changed himself [...] At no point were you not convinced by him. The motive was the correct one. If someone is delivering you something that they don’t believe in themselves, or are unconvincing, that definitely puts you at a disadvantage* (Local Authority, Advisor).

This correlates strongly with the trainer’s own evaluation of the sessions. Comments on the sessions focused on the practical nature of the training and the sharing of tools that could be used immediately; the knowledge of the facilitators; the energy of the course; and the information provided (for more detailed analysis see Pollard 2015). The training sessions received excellent satisfaction ratings. The group engagement workshops received an overall rating of 5.70 out of 6; the brief interventions workshops 5.74 out of 6; and the bespoke training 4.91 out of 6. The relatively lower score given to the bespoke training session was explained by the trainer in his interview who noted that difficult experiences in the initial field-testing sessions had tainted the expectations of some attendees at the bespoke pilot-training session; this view was supported by a developer who had been involved in the initial field-testing session and recognised that a lack of understanding of what they were doing meant that the experience ‘*left a bit of bad feeling about the whole project, I felt, potentially in some people’s eyes*’ (Developer).

Overall, the training sessions were very well received and following the training people felt confident that they could apply what they had learnt within their own settings.

**Mentoring**

Mentoring was offered as part of the Five Ways package; of the 41 people who responded to the questionnaire, not one had taken up the offer of mentoring. Those people who had attended training were sent an email reminding them of the mentoring opportunity, but the Commissioner questioned whether it had been sufficiently promoted during the training sessions or within the Five Ways products. This was, to some extent, confirmed by the questionnaire respondents.
Thirteen people reported that they did not know that a mentor support programme was available to them, e.g.:

\[I \text{ did not realise that this type of support existed (Private Sector, Coach / Facilitator)}\]

This was also reported during the interviews, e.g.:

\[I’ll \text{ be completely honest, I can’t actually remember, I have brief recollections about the working with a mentor thing, but I don’t know the details (Private Sector, Manager)}\]

A further eleven people reported in the questionnaire that they did not need mentor support as they had either received all the information they needed at the training or it was not appropriate given their current role. One of the eleven reported having discussions with the trainer after the training but did not define this as mentoring:

\[I \text{ did not feel I needed that level of support. However I did converse with the trainer by email on several points and he made a point of seeking me out and asking how I was getting on when he was at my location for another reason (Local Authority, Advisor)}\]

Other reasons for non-uptake included having mentors in place who offered sufficient support; having expertise amongst colleagues in the area of wellbeing to draw on; lack of time; and for one interviewee feeling that they had arrived to the initiative too late: ‘we were a bit late. I did ask. But I think we had missed the boat a bit’ (Voluntary Sector, Manager).

One respondent expressed regret for not having sought mentoring support:

\[I \text{ wish I did, but I didn’t have the time. In hindsight, this probably would have saved time for me as all the interactions I had during the training were extremely beneficial in helping me navigate through 5WTWB [Five Ways to Wellbeing]. If it was still available I would take up the offer for my next phase of 5WTWB (Voluntary Sector, Manager)}\]

When mentoring did happen, it appeared to be on a rather ad hoc basis, based on the trainer’s particular interests (care homes, diabetes) and also the enthusiasm of the mentee; e.g. ‘I am happy to sit down with people who are interested’ (Trainer).

This appears to be a missed opportunity, for as the Development Team Project Manager noted, this kind of ongoing support is of key importance for a change initiative to embed:

\[Mentoring and coaching, coaching is so powerful. Just giving someone that people can talk to, ‘this is what I’ve done, but no more is happening, I haven’t been able to do this and that’, and helping them to pull together a strategy, supporting them (Developer)\]

**Engagement with Five Ways to Wellbeing Post-Training**

The questionnaire respondents were asked whether they had engaged with Five Ways to Wellbeing since they had completed the training. 80.5% (n=33) reported that they had either drawn on Five Ways in conversations with individuals or groups, the remaining 19.5% (n=8) reported not.
Non-engagement post training
Respondents indicated that the main reason for their non-engagement to date was a lack of opportunity (n=6); smaller numbers of respondents noted that they struggled to remember them (n=2), they would not work in their context (n=1), felt it was not appropriate for their role (n=1), or would not feel comfortable using them (n=1).

Open questions provided more detail on these responses. One respondent indicated that due to other work priorities, they had not had the chance to organise a group event, while another had changed job role. Another respondent felt there was little opportunity within their role. Two respondents noted that it is easy to forget about an initiative, when the training is over:

*It has gone off my radar* (Private Sector, Advisor)

*I feel that soon after the training, it’s like anything really, that you soon forget about it and then it feels more and more difficult to be able to use it (if you remember to use it)* (Local Authority, Advisor).

Of these eight respondents who had not engaged with Five Ways following their training, 62.5% (n=5) thought that they would in the future.

Five Ways to Wellbeing in Practice
Questionnaire respondents and interviewees provided a range of ways in which they had been using the messages, tools and activities from Five Ways to Wellbeing in their own practice. The impact of engagement with Five Ways could be seen at different levels and is represented diagrammatically in Figure 6 and discussed further below.

![Figure 6: Impact of Five Ways to Wellbeing on Practice](image)

---

25
Impact on self, family and friends
Respondents reported that the training and resources had led them to take a closer look at their own wellbeing and to better support those around them. Some questionnaire respondents spoke in general terms about the impact on their own wellbeing:

* I didn’t realise what a positive impact Five Ways to Wellbeing would have on all aspects of my working and personal life (Voluntary Sector, Manager).

* I have found the insight offered by the course helpful to my own wellbeing and hope to get the opportunity to cascade this to others in the near future (Local Authority, Officer).

One reflected more specifically on what was happening in his own life:

* It made me think, am I doing the Five Ways? I went on a stag weekend the weekend afterwards, and I was doing all these five: learning new skills: go-karting, and noticing all the young people clubbing … we need to arrange stag parties for everyone! You do need to internalise yourself and I guess it’s always the first step, internalising it yourself and then encouraging other people to do it. (Private Sector, Officer).

Another interviewee reported how the Five Ways training had impacted on how he connected with other people:

* I have longer conversations with people than I would have done previously. I was perhaps a bit dismissive of people who needed a bit more of my time […] In the training they used the example that neighbours, we don’t talk to them anymore. I’ve probably talked to my neighbours more since I had the training that I have for the last ten years prior. When I think about, I’m quite a chatty person, I just wasn’t chatty with them (Local Authority, Advisor).

To be engaging with Five Ways on a personal level was seen as important for the initiative to have any credibility, as this interviewee noted:

* People are quick to pick up on whether you are invested nor not, and if you’re doing it because you’ve been told to do it, or if you’re doing it because you believe in it, that really does come across (Local Authority, Project Officer).

If the first stage in encouraging Five Ways is to engage it in yourself, for a number the second stage is to introduce Five Ways to close family and friends. Of the n=33 people who noted in the questionnaire that they had engaged in a Five Ways individual or group conversation, n=9 had done this with a family member and n=17 with a friend. There is already an established level of trust, understanding and familiarity that might make it easier to initiate a conversation about wellbeing with someone close than with a work colleague, client, service user or member of the public.

Questionnaire respondents provided the following examples of how they had raised Five Ways to Wellbeing with members of their family:

* All the five strands of Five Ways to Wellbeing are applicable at home with family and friends, when I do things at home (Local Authority, Advisor).
Talking to my married niece and nephew who were experiencing lifestyle transition stress, as I listened I sensed imbalance in their day-to-day lives. They recognised the imbalance and were seeking to readjust. I could apply [Five Ways] without stating it was being done (Voluntary Sector, Manager)

The brief interventions training gave me the tools to have a conversation with my son about his day which was ‘all about him’ instead of me interrogating him. He opened up and we had a very nice chat, instead of ‘school was fine’ statement or a grunt. I always use this style now and it has spread into my conversations with other family members, friends, colleagues and clients (Voluntary Sector, Manager).

Trying out techniques, activities and tools with close family members can raise confidence and encourage people to use in different settings, such as the workplace.

Impact on the workplace

Workforce wellbeing

The first area in which the impact of Five Ways was realised within the workplace was in the recognition that a workforce’s wellbeing was of prime importance, as one manager noted: ‘we haven’t taken focus off the fact that it can have an internal benefit for the organisation’ (DG). This view was further elaborated by a training officer, who recognised the importance of wellbeing for their colleagues:

> It’s not just for our service users, it’s for our staff too. A lot of our staff are in stressful jobs [...] I think it’s important for them especially (Private Sector, Officer).

Identifying stressed work colleagues was also important for a questionnaire respondent: ‘As a finance community, it’s more about looking out for staff appearing stressed’ (Local Authority Officer).

The impact on the workforce might be informal and individual, as in the conversations people have:

> They are also taking notice about what’s around us, what’s in blossom at the moment. There’s a stunning clematis that has come out on someone’s fence and a couple of people were talking about that in the office this morning, there’s lots of little ways to take notice. I think the next person who goes out the back who hasn’t noticed the clematis might do so now (Voluntary Sector, Manager).

And the activities and work practices that people engage in:

Promoting the Wellbeing of Staff in Residential Care Homes

The Health Promotion Lead in the Quality in Care Team is responsible for over 140 residential care homes for older people and people with learning difficulties and disabilities; and also care delivered in clients’ homes.

While clearly improving the wellbeing of the care home residents is of prime importance and plays a key role in the work of the carers, the Health Promotion Lead recognised that improving wellbeing had to start with care home staff themselves. With the support of the Five Ways to Wellbeing Trainer, the Health Promotion lead has developed training that seeks to raise self-esteem amongst carers and establish an environment of joint working and positivity, whereby staff feel that they can make a real difference.
There is a lot more going out for short walks with others from the office, some walking meetings, socialising, getting up from the desk, getting together, people have been exploring local pathways and sharing with people where you could walk to, walk around to get a bit of fresh air during lunchtimes. There’s a lot. There was before, but there is the sharing of food, baking, and someone organised a potluck lunch and we shared some amazing food that people brought in (Voluntary Sector, Manager).

Going round the table discussing one good thing that has happened that week prior to launching a full meeting – this can dispel negativity around the table (Voluntary Sector, Officer)

Engagement can be ad hoc and individual or more formal and organised. Interviewees reflected on organisation-wide wellbeing events that made reference to Five Ways, and ongoing awareness raising activities, through email campaigns and posters displayed in staff areas, and uptake by Human Resources departments.

Workplace strategy and planning
The second area where Five Ways to Wellbeing could be seen to be having an impact was in the area of planning and strategy.

Developing Provision within Buckinghamshire Libraries

Five Ways to Wellbeing came at the right time for Buckinghamshire libraries. It has given structure, credibility, legitimacy and purpose to their developments.

Key staff participated in Five Ways training. Information was the disseminated to all the major branch libraries and differentiated training was developed for all staff.

Initial discussions showed that much of the libraries’ current provision fits well with the Five Ways message; for example, the coffee mornings offered lonely people a chance to connect with others and creative writing courses an opportunity to learn. The library team began to assess the extent to which their activities mapped against the Five ways: ‘we could, at least with four of the five, tie them to a lot of things that we do’. They then moved to a position where decisions to continue an activity were made based on the fit with Five Ways: ‘it made us think that if it doesn’t fit three or four of the criteria, we won’t do it anymore because it has less value’.

The Five Ways Framework has become a powerful planning tool.

At a very basic level, the Five Ways Framework was being used as a mapping tool; mapping current activities against the Five Ways:

It gives you a framework to look at your

Strategic Planning within the Housing Association Paradigm

One manager at a Housing Association has recognised the importance of Five Ways for future long-term planning:

‘We can see the wisdom of this, we can see the hard, political cost savings that are behind this at a national level and we are seeing how we can tailor what we do to fit with that, because it is going to be the way forward’.

The plan is long term; it could be up to ten years until people see it as given that health and housing are so closely connected. In the interim, the challenge is ensuring senior management investment. Managers might perceive wellbeing to be the concern of other agencies and outside the remit of housing associations.

Currently, however, there is buy-in at a conceptual level in terms of strategic thinking in the short, medium and long term and this is shaping developments.
own practice and where you’re not already doing it, find out how to do those elements
(Private Sector, Officer)

This can be developed to form a planning tool, whereby new activities are planned based on their fit with the Five Ways Framework:

We have adopted it. The things we do fit well. Clearly, when we set up new projects, we might be able to note that that ticks two of the Five Ways boxes (Voluntary Sector, Manager).

The concept of wellbeing is high on our agenda and I reflect on the Five Ways as an internal guide when developing and checking what we do. But we don’t use the language of Five Ways very much, as we didn’t find it very intuitive (Voluntary Sector, Manager).

There were also reports of the Five Ways Framework being used to support appraisal and individual planning and development:

I line manage five staff and I’ve trained nearly twenty staff over the year and when we’ve done their forward planning for what their development plan is, they’ve had to have a Five Ways element in their plan. So, if they were going to deliver a children’s activity, they would have to name how that connected with Five Ways and what benefits there were (Local Authority, Advisor).

While not currently used in that way, one interviewee recognised that the Five Ways Framework could usefully be used as an evaluation tool, particularly where funding was sought (Private Sector, Officer); the benefit of using the Framework for funding purposes was also recognised by another interviewee: ‘I find it useful in funding applications, because there is a framework there and an awful lot of research that backs it up’ (Voluntary Sector, Manager)

Finally, two interviewees saw Five Ways as being firmly embedded in what they do, thus shaping future strategy:

I would like to see Public Health and Five Ways in the DNA of what we do. And there’s no reason why it can’t be as it is perfectly consistent with what we do (Local Authority, Project Officer).

Community Hub Vision

The community hub, Our Place, has Five Ways to Wellbeing at the core of its vision. Our Place states that:

‘One of the greatest outcomes is the benefit we bring to local volunteers who wish to be involved in their community to help, build and make a difference. Their involvement brings improved wellbeing in all aspects of Five Ways to Wellbeing that we have set as core values’

Their documentation uses the Five Ways brand, their activities map onto the Five Ways Framework (e.g. knit and natter-connect; simply walk-active, notice; you can paint-learn) and the Wellbeing and Health self-help group makes specific use of Five Ways resources and activities.
Impact on Clients and Service Users

Finally, questionnaire respondents and interviewees outlined how they had used Five Way in their frontline work with clients and service users. Of the n=33 who reported using Five Ways after their training, n=14 said they had used it with clients and n=9 with service users. Engagement could either be direct or indirect. One example of an indirect use of Five Ways comes from a Local Authority Project Officer, who supported the establishment of community action groups, Movers and Shakers. While the Project Officer does not deliver the service themselves, they can encourage people to run them in particular ways and has shared the Five Ways resources with the providers. The same interviewee also used the Five Ways brand to promote the initiative when talking to GPs:

*What I do say when I see GPs, I say this is consistent with Five Ways to Wellbeing, it [Movers and Shakers] does deliver all five ways* (Local Authority, Project Officer)

There were examples of more direct engagement with Five Ways in both individual and group contexts.

Two questionnaire respondents described how they had been able to instigate conversations with clients during routine visits:

*Getting clients to clarify areas where they could make changes to help their wellbeing [using the Five Ways Wellness Wheel]* (Local Authority, Coach / Facilitator)

*I visit older people on a regular basis, so where appropriate I will use the Five Ways to Wellbeing positive approach method. It may be in relation to building relationships or accessing activities […] I gained an improved understanding of service users’ feelings and also needs. Sometimes this resulted in a positive action, at other times, it meant that in the next conversation there was something to build on* (Voluntary Sector, Project Officer)

Interviewees comment on how difficult this could actually be in practice. It could be that the nature of the interaction meant that it had quite a different focus:

*By having the Five Ways in your head, you can use it to insert those into conversations and therefore it’s challenging to remember an element and try and bring it up in a natural way when the conversation may not take you down that route, because the focus might be on a specific aspect of higher priority at that particular moment* (Private Sector, Manager).

The same interviewee recognised, however, that drawing the service user’s attention to the emergence of spring outside might divert attention away from the difficult issues that need to be discussed and enable some relationship building to happen before tackling the main problem. This could be beneficial and is what a lot of frontline staff do automatically; reflection on their practice, using Five Ways, offers recognition for this good practice.

In terms of community group engagement, the job is somewhat easier. The groups have often come...
together with a specific focus and it is perhaps easier to make reference to Five Ways to Wellbeing. In one example from the questionnaire, a respondent described how they had been able to incorporate tools and activities about wellbeing in sessions in a parenting course, highlighting the importance of ‘looking after ourselves’ (Local Authority, Coach / Facilitator). Five Ways proved a useful way of starting a conversation about adult needs and how even small changes can have a positive impact on themselves and their children as a result.

The challenges of using Five Ways to Wellbeing in Practice
As the evaluation of the Five Ways Our Way projects (Hovard 2015) has shown, there were challenges associated with engaging with Five Ways to Wellbeing, these included: clients finding the model patronising; imposing a ‘government’ intervention on clients; exposing sensitive or private issues; opening up negative emotions; being seen as implying ‘there is something wrong with you’ (Hovard 2015, p.19). Other challenges included what it means to ‘do’ Five Ways to Wellbeing and how to evaluate the approach. Similar challenges were identified in this evaluation.

The following key challenges were identified in the questionnaire and interview data:

- Resistance to the concept of Five Ways to Wellbeing
- The need to engage in Five Ways to Wellbeing yourself before trying to engage others
- Do all the Five Ways have to be achieved to improve wellbeing?
- Future investment and impact measurement
- Lack of time
- Initiative overload

These areas will be discussed in more detail below.

Resistance to the concept of Five Ways to Wellbeing
By far the most frequently cited challenge for implementing Five Ways to Wellbeing was the resistance of those that you would be working with, for example:

I thought I might have had more interest from colleagues, but there was a lack of interest and motivation (Local Authority, Support / Care Worker).

It was met with some resistance (Voluntary Sector, Manager).

Some scepticism as to what the Five Ways were all about (Private Sector, Support / Care Worker)

There are always cynics. Some people think that it a bit fluffy and subjective […] Some people do not connect with it. They see it as a bit woolly and ask how people can work with it when it’s all about happiness and how can you measure happiness? (Voluntary Sector, Manager)

One of the resource developers recognised that this might well be an issue, and that some people would need more convincing that others:

I think the biggest challenge is motivating people and engaging people to consider some of the things that are being suggested. I am involved with mindfulness and positive psychology,
equally, I am very aware that most people aren’t au fait with those ideas and it clashes a little bit with our culture in Britain. Some of the things that were being suggested in the materials were things that a lot of people needed convincing to try out [...] Having the confidence to suggest [a gratitude log] to someone who is struggling with their finances, or children playing up, whatever, getting them into the mind-set of considering that this was something to try out, the confidence to do it, and that they’re engaged, and to know that you’re going to suggest something that does not sound completely ridiculous to where they are at the moment. It’s transferring something, a lot of these great ideas that were supported by sound positive psychology research, actually translating them into something that is digestible by the types of people who will be in receipt of these types of interventions, that’s the challenge I think (Developer).

It could well be that there was also resistance because engagement with Five Ways involves entering into quite personal and private spaces of the people you are working with. This was reflected in a case study example submitted to the questionnaire. The response may seem rather flippant, but it raises some important questions about the extent to which we have the right to start some very personal conversations with people that we do not know:

**Context of brief intervention:** I work in the library and I told someone to do some more exercise.

**Impetus for the intervention:** They looked very unfit.

**What did you expect to happen:** I expected them to be appreciative.

**What actually happened:** They were offended.

**What were the challenges of introducing the intervention:** The person did not want to hear what I was saying (Voluntary Sector, Volunteer).

This was raised by a Developer who recognised that the brief intervention approach to Five Ways to Wellbeing was not an easy skill to develop:

*This might not be the easiest thing for people to learn how to do, to find ways of trespassing on people’s space, though we gave them a lot of examples as to how you might do that. It’s a kind of general issue for us as human beings* (Developer).

The challenge, then, was in being open to the approach and being confident in being able to engage others in Five Ways to Wellbeing; this, it appeared, required some personal experience of Five Ways.

**The need to engage in Five Ways to Wellbeing yourself before trying to engage others**

This message came strongly through the interviews with the developers and the trainer. It is known within positive psychology that in order to encourage other people to be mindful of their own wellbeing, you have to be mindful of your own:

*The underlying message was do it yourself and then have a go at it yourself and then do it with others. Learn a bit about it and then give it a go* (Developer).
What is important is that they see Five Ways as something they do all the time. It’s about the awareness of what we do (Trainer)

This was not always easy, however, as it involved people really questioning their own behaviour:

I think this is a challenge for all of us, who would rather be in denial about all the things that we do that are not so good for us and how we could all change our lifestyles and behaviours to attempt to stay well longer. There’s something about, we need to overcome our personal barriers to it. If we want to be talking to people about it, we should have tried it out for ourselves first, otherwise it would be hypocrisy (Developer).

And it was uncomfortable to raise this during the training, as it was seen as quite a big demand on people, who might well be resistant:

Sometimes it almost felt a bit embarrassing bringing that conversation up [that people need to be engaged in the Five Ways process themselves], as you were anticipating their resistance to it, you were anticipating resistance that would come from the people who you were training to deliver the package (Developer).

Initially, the resources had included quite a substantial amount of material on the importance of engaging in Five Ways to Wellbeing personally. Much of this was, however, removed as it was deemed ‘just too much and too demanding’ (Developer) and more like ‘a self-help guide’ (Commissioner). The idea that there is much benefit in trying out Five Ways does remain, however, within the resource documentation:

By embarking on this journey yourself, you will go through many of the experiences you want others to try. You will be role modelling the change, and you will be more able to share the benefits of five ways with others – with confidence. Feeling well and happy yourself, has the potential to create a ripple effect of wellbeing (Group Engagement Guide, p.8; Brief Interventions Guide, p.9).

While the Commissioner was not convinced that full personal engagement with Five Ways to Wellbeing was necessary in order to have meaningful conversations about wellbeing, she did recognise that without engagement, ‘you don’t seem believable’ (Commissioner); this was to a certain extent supported within the interviews and questionnaire responses:

You do need to internalise it yourself and I guess it’s always the last step, internalising it yourself and then encouraging other people to do it (Private Sector, Officer)

People are very quick to pick up on whether you are invested in something or not, and if you’re doing it because you’ve been told to do it or if you’re doing it because you believe in it, that really does come across (Local Authority, Project Officer)

I do it and have been doing it before I knew about Five Ways to Wellbeing, because it’s what I do. The challenge is how I get other people to do it (Voluntary Sector, Manager)

There is a theological basis for wellbeing. There is a Hebrew word, shalom, which people see as meaning ‘peace’, but really it is ‘wellbeing’. For me, the wellbeing agenda encompasses
the whole notion of being. It aligns with my principles and values (Voluntary Sector, Manager)

The concept of wellbeing and a positive psychology approach to life is really, really important in all spheres of life! (Voluntary Sector, Manager)

For many of the respondents who were actively engaged in implementing elements of Five Ways to Wellbeing, they were also proponents of positive psychology, wellbeing generally, or Five Ways more specifically.

Do all the Five Ways have to be achieved to improve wellbeing?

Another aspect of implementing Five Ways to Wellbeing was an uncertainty as to whether all of the five ways had to be achieved in order to see a wellbeing gain. The resource material is clear that this is not in fact the case. The front covers of all three resources carry the statement: ‘Living life well, one step will make a difference’. This is further developed in both the Brief Interventions (p.9) and the Group Engagement (p.7) guides, where they state: ‘starting with one small, simple five ways action can begin to make a difference, and over time these positive actions will start to feel natural, resulting in longer-lasting wellbeing’.

One developer was also very clear on this point:

Try one thing, it makes a difference. It became the subtitle. That was us saying we know that one thing makes a difference. All the research shows that if you adapt it, over a period of probably ten weeks, but if you try and adapt it, then you get change, and it’s enduring change [...] Try one thing. And don’t just keep doing the one thing. It’s not just keep doing the one thing. It’s finding ways of doing one thing (Developer).

The trainer was also clear about the benefits of engaging with just one of the five ways:

Some people will never use the whole thing, but even if they use a bit [...] even if you focus on one, what is most appropriate to your organisation (Trainer)

It is likely that this was the message delivered through the training; yet the social marketing of Five Ways to Wellbeing is as a package, meaning that people think they need to ‘seek to get a wellbeing balance’ (Commissioner). One interviewee reflected on this in their interview:

If I took very simply the five points: connect, keep active, learn, give notice, in the initial conversation, I might not cover all of those naturally. However, by having the Five Ways in your head, you can use it to insert those into conversations (Private Sector, Officer).

Later in the interview, the same interviewee commented further on whether it was necessary to do all five ways:

I suppose, as we have been talking about it, I have been thinking about them en masse. One circle with five elements in, but now I am in a position where I am being asked how I am using it, I am thinking, oh, I haven’t really focussed on that. I guess the reality is not all at all times. One will come into its own in a specific situation. Each one of the elements is good in itself and the guide says ‘one step will make a difference’, one things is already making a
difference and it’s progress and that’s good to recognise. Not to feel that I am not doing all of them, so it’s not working.

It does say on the first page that one way can make a difference, and if you are thinking about messages that are being communicates and given priority, it does say it. You have the Five Ways to Wellbeing Wheel – but there is a hint that if you do one thing life will improve, if you do all five, brilliant. That was probably brought out in the training, but the message that each individual takes away may vary. It’s what you can remember three months later (Private Sector, Officer).

The problem with seeing Five Ways as a package and for seeking wellbeing balance is that the evidence on which Five Ways is based does not appear to relate to their benefits as an entire package, but to each individual action (nef 2008, pp.5-11). While the Five Ways materials clearly state that one action is enough to have a positive impact on wellbeing, the social marketing package around Five Ways does give the impression that we should be doing all five and do them to equal amounts.

**Future investment and impact measurement**

Respondents also noted the challenge of ensuring future funding and senior management support for the initiative. The Development Team Project Manager highlighted the importance of senior level support, and this was highlighted in practical terms by an interviewee:

> At the moment, it is ensuring, if we were to do any further or deeper, I am still a bit nervous about how it would be prioritised in terms of investment by senior management. At the moment it is supported by my boss who buys into it. I’m not confident that if it required further investment that the backing would be there or that we would not be pushed into more core stuff (Private Sector, Manager).

One issue in terms of securing future funds for Five Ways is in measuring its impact. In the questionnaire, respondents were asked to state what the impact was of the brief intervention or group engagement Five Ways activity they had described. They offered these kinds of responses: ‘people talk about it’ (Local Authority, Analyst); ‘others have taken the idea to their meetings’ (Voluntary Sector, Officer); ‘I don’t’ (Local Authority, Support / Care Worker); ‘people have changed their behaviour’ (Voluntary Sector, Manager); ‘not yet’ (Private Sector, Officer); ‘because of subsequent meetings and conversations’ (Voluntary Sector, Manager). These responses show quite intuitive (or non-existent) approaches to impact assessment. Only two questionnaire respondents made reference to existing evaluation tools: The Warwick-Edinburgh Mental Well-Being Scale and Outcomes Star. Measuring the impact was a problem for some and a better way of evaluating the use of Five Ways could help in future funding bids, as this interviewee highlights:

> If it's gone well, how will we know? What tools will we use to measure it? It [the results of evaluation] would work so well with funding bids, especially for funding from Bucks. (Private Sector, Officer).

---


**Lack of time**
A further challenge noted in terms of engaging with Five Ways to Wellbeing was a lack of time. As a Developer recognised:

> People will always quote time. They don’t have the time to do these things, especially in primary care, they don’t have time to do anything. There are huge pressures to cover a whole checklist of things, let along starting on this (Developer).

This was confirmed in the responses to the questionnaire and by one interviewee who was running wellbeing events within their organisation: ‘they are so busy. To say notice and connect just seems a bit trivial when you’re stressed and busy’ (Local Authority, Officer).

**Initiative overload**
Finally, for a much smaller number of people, the fact that this was just one initiative of many within Buckinghamshire County Council was also an issue, as one questionnaire respondent noted: ‘it was felt that it was just another “BCC initiative” that they were pushing’. (Voluntary Sector, Manager).

**Moving Forwards …**
The people who responded to the questionnaire and who agreed to be interviewed were, for the most part, proponents of Five Ways to Wellbeing. They had participated in the training, had the resources in their possession and were, in some cases, trying to make small changes within their daily practice to support the Five Ways message. Their responses to the final questionnaire questions about their extent to which Five Ways to Wellbeing is now part of their personal life; approach to planning; and the workings of their organisations are, in general, very positive, as Figures 7 to 9 show.

<table>
<thead>
<tr>
<th>Extent to which Five Ways is part of personal life</th>
</tr>
</thead>
<tbody>
<tr>
<td>Greatly</td>
</tr>
<tr>
<td>46%</td>
</tr>
</tbody>
</table>

*Figure 7: Extent to which Five Ways is Part of Personal Life*
There was a concern amongst some that without further resource and funding the Five Ways to Wellbeing initiative would just die; this is particularly important given the fact that ‘a lot of money has been spent on this’ (Voluntary Sector, Volunteer). Respondents outlined other initiatives where the launch had been funded, but further funding to ensure embedding had not been available. As one interviewee and a questionnaire respondent noted:

*There’s always a lethargy to these kinds of programmes. If you have a second round, it will embed. With the results of the projects, who do some work in the first round, if we look at the positives from those and encourage people to take it up (Voluntary Sector, Manager).*

*SWTWB is a fantastic initiative but it can’t be just introduced by BCC [Buckinghamshire County Council] and then dropped. There needs to be some continuity so that it can be*
embedded. Otherwise it will just be another initiative that BCC have introduced and then stopped promoting. (Voluntary Sector, Manager).

Respondents were asked what things they would like to see put in place if further support were offered for Five Ways to Wellbeing. These will be discussed further in both the conclusions and the recommendations.

In summary, respondents suggested:

- Further awareness raising, wider dissemination, and more publicity.
- Establishing contact with those who have done the training through wellbeing-focussed emails, texts and a twitter feed; wellbeing events and conferences to share good practice; and networking opportunities.
- Providing ongoing support and mentoring for individuals and organisational development support for organisations.
- Rolling out to different target groups through targeted training (e.g. young people and children; other housing associations)
- Developing evaluative tools to measure the impact of Five Ways to Wellbeing on individuals.
- Officers of Buckinghamshire Country Council model Five Ways in their own practices.
- Exploring whether Five Ways accreditation is viable for organisations which are committed to promoting Five Ways to Wellbeing (i.e. in the vein of Investors in People).

Discussion

This evaluation has explored how the Five Ways Group Engagement and Brief Intervention products, training initiatives impact on diffusion and uptake of Five-Ways messages and actions by individuals and within and across communities. The evaluation did this through scrutiny of the Five Ways documentation; interviews with key stakeholders in the product development process; observations of training sessions; and feedback from those who had attended the training via questionnaires and interviews.

Prior to commissioning the Five Ways products, training and mentoring support, Buckinghamshire County Council had already run a social marketing campaign around Five Ways, which had had some success in raising awareness of the Five Ways messages. At the end of the year, while people might be familiar with Five Ways after the campaign, there was limited little evidence that they were embedding the Five Ways actions within their own practice. Buckinghamshire County Council had invested in the social marketing campaign and were committed to the Five Ways brand that they had produced and made the decision to support further investment to both diffuse and affect change in individuals and communities. In order to achieve this, it was necessary to move people beyond awareness and support them to firstly accept Five Ways, and then commit to implementing its messages. In essence that means moving through the stages of preparation, acceptance to commitment (Conner and Paterson 1982). With a paucity of reported and evaluated initiatives for the practical embedding five ways to wellbeing, beyond Five Ways social marking and awareness raising, Buckinghamshire had little evidence to draw on when designing a pilot that would foster commitment to the practical adoption of Five Ways and its associated actions.
The development process was inherently problematic due to the complexity of the brief in terms of what the commissioning team wanted the products and training to do and a lack of clarity around the precise form and format of both the Guides and the training packages. This is perhaps inevitable given that both the commissioning team and the development team were entering new territory. The development process was longer, more costly and more iterative than had been envisaged. There was clearly a fine balance between ensuring that the resources had the strong evidence base that was desired and needed to ensure the credibility of the message, and ensuring that the materials produced would be accessible and useful to a wide (and not necessarily an academic) audience. This reflects the difficulties that universities often face when translating research findings into public health practice (Brownson, Kreuter, Arrington & True 2006). It was the bringing together of the expertise of the researcher, wellbeing practitioners, trainer and commissioner into a partnership that led to the development of products that all were ultimately happy with.

The final products are attractive, professionally-produced, practical and accessible. They were very well received by those who had attended the training. While the respondents were positive about the products, it was clear from the survey responses that they are not being used as fully as they could be. The online Resources Pack in particular appears to be under-utilised. A number of the survey respondents were simply not aware that there were more resources that could be accessed online, some had problems downloading the resources, and one interviewee described their surprise that they would have to complete a request form in order to get access to the materials. In an age where content is easily accessible, it could be that completing a request form is one step too many and interested people may be put off accessing the materials when asked to submit their email address and reason for access. When the materials are accessed, the requester is provided with PDF versions of the Guides and Resources Pack. While this is perhaps appropriate for the Guides, the PDF format is less suitable for those who want to adapt the materials for their own purposes (using different configurations of activities, for example). The static nature of the download site also misses an opportunity for the collaborative development of a resource bank, where other people engaged in promoting wellbeing could share their own materials. It should be noted, however, that a Five Ways Champions Network was established to support the 5WoW projects and also a small number of other interested parties. This Network had a social media platform where good Five Ways practice could be shared. There was little activity on this platform and people were not keen to post to the site. If a more dynamic site were to be designed, it would need to be carefully managed and proactively supported in order to enable the establishment of a wider wellbeing community and a reason to return to the Five Ways to Wellbeing site.

The training for Five Ways to Wellbeing drew on some of the activities that were described within the products, thus putting into practice what was being taught. The training sessions were extremely well rated. The participants appear to have appreciated not only the quality of the materials, but also the training exercises and the trainers. What was clear from both the survey responses and from the interviews was the role the trainer played in encouraging acceptance of the Five Ways actions. The main trainer for the Five Ways programme was deemed to be personable, enthusiastic, and authentic in his appreciation of the Five Ways model and positive psychology more generally. His use of examples from his own personal life of how he had engaged people in the five ways provided real illustrations of how wellbeing-enhancing activities and encounters could be easily integrated in one’s own life and the lives of others; this was both motivating and inspiring for some.
The power of the trainer should not be underestimated when looking to move people from broad awareness of a change initiative to its acceptance and ultimate implementation.

While the training and the trainer were highly rated, there was little engagement with the mentorship opportunities that were on offer post-training. It appears that these opportunities were not well-communicated, as many survey respondents did not realise that it was possible to have mentor meetings and to receive ongoing support. While one-off workshops can initially stimulate interest and enthusiasm, they are unlikely to engender sustained change. In order to enhance learning, opportunities to engage in post-workshop reflection is effective (Bennett-Levy and Padesky 2014). This was the rationale for the offer of mentoring sessions, which, unfortunately, had little uptake. The importance of opportunities for reflection became apparent during the interviews conducted for this evaluation, where some interviewees noted that having to reflect on what they had done with Five Ways since their training led them to explore new avenues where they could more firmly embed Five Ways into their professional practice. The lack of formalised post-workshop support to maintain the momentum of the training and a lack of engagement with mentoring opportunities seem to be a missed opportunity for fostering sustained change.

Irrespective of the lack of post-training follow-up, both the questionnaire and the interview data showed the training participants were engaging with Five Ways in different ways and on different levels and this is in line with the nef (2011) research. In order to make sense of their survey data (n=58), nef (2011, p.18) designed an analytical framework which mapped point of intervention (individuals; groups/communities; organisations; policies/strategies) against principal purpose (promoting wellbeing directly; promoting wellbeing indirectly). Their analysis showed activities were more likely to be focussed on promoting wellbeing directly rather than indirectly. They identified that Five Ways activity was apparent across all levels of point of intervention and that respondents were most likely to be working with individuals. They also found that Five Ways was being used to shape policies and strategies, and to affect change within organisations. Similar findings are apparent here.

What is less apparent in the nef research, but comes through strongly as a challenge in the data for this evaluation, is that some personal investment in Five Ways is also required. A number of interviewees and questionnaire respondents noted that prior to their Five Ways training they had been aware of Five Ways, or of positive psychology, or of the importance of wellbeing for mental health. The importance to the Five Ways approach of positive psychology and a personal commitment to enhancing your own wellbeing was strongly supported by the product developers and was written into the products (but trimmed back in the final version); in order to authentically promote Five Ways to Wellbeing you need to be trying to integrate some of the Five Ways actions into your own life. This is clearly a big ask for many people, something the development team recognised. Equally, it can be difficult to engage people you do not know very well in conversations about wellbeing, as in some situations it can feel as if you are encroaching on an individual’s personal space. It appeared that people were more comfortable in supporting groups that could be mapped against Five Ways to Wellbeing; these could relate specifically to wellbeing, but equally they could be creative writing classes (that promote learning); coffee mornings (that encourage people to connect); or lunchtime walks (that increase activity). Conversations with clients about wellbeing for people whose role was not wellbeing-focussed were seen as more difficult. People outlined how they were having conversations with close family and friends and hoping to build confidence to have
Five Ways conversations with their co-workers and clients. There was a sense of a need to personally understand and experience Five Ways before being able to use it with family and friends, and colleagues, clients and service users.

There were also examples of how individuals were using Five Ways to map existing practice in order to better communicate what they were doing by making their activities more transparent, coherent and rational. Five Ways was being used as a ‘communication framework’ (Raffe 2011) and is a tool for change rather than a driver for change. There are examples of Five Ways being used as a ‘reforming framework’ (Raffe 2011), where people sought to enhance their activities through identifying gaps in provision following mapping. In these data, there were no examples of a ‘transformational framework’ (Raffe 2011), where provision would be designed solely by reference to Five Ways with the intention of driving change. This could be an aim for Five Ways to Wellbeing if it is to truly shape the promotion of wellbeing in the UK.

Five Ways to Wellbeing has been marketed nationally as a package. Indeed the nef research suggests that ‘greater promotion of the Five Ways to Wellbeing at national level would add value to local work, particularly if the Five Ways to Wellbeing was to become as widely known as the “five-a-day” nutrition message’ (nef 2011, p.33). This is misleading, but somewhat explains some of the confusion amongst respondents as to how many of the five ways will lead to wellbeing gain. If compared to the ‘five-a-day’ nutrition message, it is implied that you should aim to engage with all five of the Five Ways to Wellbeing actions each day, just as you would aim to eat five portions of fruit and vegetables. While this is not reinforced within the text of the Five Ways products, which clearly state that one step is enough, it is implied through the product imagery and branding, which shows a balance between the five different petals that form the logo. The nef research (2008) does not look at combinations of five ways, it merely states the gains from engaging with individual actions in varied ways. Respondents were not clear at all whether they should be focussing on establishing a balance of the Five Ways in their brief interventions or group engagements, or whether it was sufficient to choose the one that was most appropriate for their contexts. Similar confusion was reported in the evaluation of the Five Ways Our Ways projects (Hovard 2015).

Finally, it was also clear that respondents did not have clear or robust strategies for evaluating or measuring the impact of their interventions. The need to demonstrate impact was necessary in order to maintain further funding to continue their work in the area. With concerns that Buckinghamshire County Council would cut funding to Five Ways before the initiative had chance to properly embed, the requirement to show impact was all the more acute. Similarly, the nef research showed that ‘measurement was an area of implementation in which projects and programmes were least confident’ (2011, p.32). Those who responded to the questionnaire and were interviewed for this evaluation also felt they needed clearer guidance on how to demonstrate the impact of what they were doing, and given the Chief Medical Officer’s claims that wellbeing ‘does not have a sufficiently robust evidence base commensurate with the level of attention and funding it currently receives in public mental health at national and local government level’ (Davies 2014, p.14), this is perhaps not an unreasonable request.
Concluding Remarks

The participants in this evaluation are most likely those who were either most in favour or most against Five Ways to Wellbeing as those are the people who are most likely to volunteer to take part in research. There were surprisingly few dissenting voices in the survey responses, but it could be that the 53% of training attendants who chose not to complete the survey were more ambivalent to the initiative than those who chose to respond. From the 47% who did respond, there are indications that the combination of well-designed resources to support brief interventions with individuals and group engagement sessions around wellbeing, combined with engaging and active training had motivated and inspired people to engage further with Five Ways to Wellbeing. Some people described projects and practices that had moved beyond awareness of Five Ways as a public mental health initiative. Indeed, they described examples of their adoption of Five Ways within their everyday professional practice through interaction with individuals and groups, and in their strategic planning and policy formation. What is less clear, however, is the extent to which these changes would be sustainable without ongoing personal and organisational development around the implementation of Five Ways to Wellbeing and continuing external promotion of Five Ways both nationally and locally. In order to do this there needs to be more clarity about what it actually means to embed Five Ways to Wellbeing into professional practice and how the effectiveness of the associated interventions can be adequately measured and rigorously evaluated.

Recommendations

The following recommendations are proposed following this evaluation:

At a national level:

- Conduct further research to establish whether the combination of five ways in the Five Ways to Wellbeing package provides additional wellbeing gain over the gains established by engaging with one five ways action in varied ways over time. Ensure that the Five Ways to Wellbeing materials reflect the findings from this research.
- Develop a specific Five Ways to Wellbeing measurement tool to improve measurement and evaluation (as suggested in nef 2011, p.37) that would enable approaches to Five Ways to Wellbeing to be compared nationally.
- Clarity of commitment to Five Ways to Wellbeing at a national level with further promotion through social marketing, which will support and legitimise local activity.

At a local level:

With regard to the Five Ways to Wellbeing products

- Invest in a more dynamic website that provides easier access to the resources, and enables not only the downloading of customisable resources (protected under creative commons licences\(^\text{10}\)), but also the uploading of materials by others who are involved in the promotion of wellbeing with a digital facility for postcode searchable, local Five Ways activities. The Jorum\(^\text{11}\) is one example of a repository where people can share resources. Developing a

\(^{10}\) [http://creativecommons.org/](http://creativecommons.org/)
\(^{11}\) [http://www.jorum.ac.uk/](http://www.jorum.ac.uk/)
vibrant site, promoted through social media channels and professional networks, would help widen the Five Ways community outside of the County.

**With regard to Five Ways to Wellbeing training**

- Responses to the pilot training sessions were positive and they inspired and motivated people to engage with the Five Ways messages. Training focused on either brief interventions or group engagements seems most appropriate. Any ‘train the trainer’ package would need to be carefully designed and field-tested to ensure that the confused experienced during this pilot did not reoccur. If training, as delivered this year, continues, it is important to find the right trainer. This evaluation has shown the importance of the trainer in supporting the promotion of wellbeing.

- There is an urgent need for ongoing support in order to ensure sustained engagement with Five Ways. This support is necessary to sustain the momentum established following the initial training sessions. This could be realised through:
  1. Network events to share good practice
  2. Formalised mentoring schemes and peer mentoring opportunities
  3. Follow-up conversations with training attendees to discuss their engagement with Five Ways post training
  4. Further bespoke training on, for example, impact measurement and evaluation.

**References**


