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A Complexity Approach to the Design of Wellbeing Development in a Community Context

KAREN ELIZABETH GEORGE

A thesis submitted in partial fulfilment of the requirements of the University of Northumbria at Newcastle for the degree of Doctor of Philosophy

Research undertaken in the Faculty of Engineering and Environment in conjunction with the Faculty of Arts, Design & Social Sciences and in collaboration with the Third Sector

Strictly Confidential

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 orcid.org/0000-0002-3928-8350



NAME	Karen Elizabeth George
MAIN SUPERVISOR	Dr Petia Sice
SUPERVISORS	Prof. Robert Young Prof. Safwat Mansi Dr. Jeremy Ellman
TITLE	A Complexity Approach to the Design of Wellbeing Development in a Community Context
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CAMPUS	University of Northumbria at Newcastle East
Student no:	93402205

Abstract

UK Government calls for more effective ways of communicating and engaging with the community to devolve power and enable local improvements in the concept of the 'Big Society'. Devolved power is often gained through local community organisations. These organisations are being tasked to manage community assets calling for a new breed of skilled community participants. They are under tremendous pressure and this additional stress may have a detrimental impact on individuals' wellbeing. Community organisations often struggle to attract capable community participants as they compete with the well-known giants of the voluntary sector, who have significant marketing budgets. They need to develop their use of ICT to compete, attract and sustain community participants. When the public consider community participation there are a series of local social interactions that take place, culminating in a tipping point, when they decide to participate. This process is complex with varying sources of information linking into decision making. Coupled with the needs of community organisations necessitates careful management to ensure the wellbeing of both. The aim of this research was to develop a wellbeing themed framework for effective community participation, applying both complexity and design perspectives. This has repeatedly been highlighted as an area of need and yet still no real answer has been found to offer the public a process that supports the development of wellbeing whilst creating tipping points for community participation. The research started with a literature review followed by open interviews of experiences and a separate analysis of spiritual reflections to develop and clarify themes for the wellbeing semi-structured interviews. The interview process involved reflection, Mindsight and Mindfulness of each themed area to rate where participants felt they were at that point in time, where they wanted to be and what actions they could have taken to get there and when. An international evaluation was completed to add qualitative and quantitative information to the research, validate the process and understand beneficial language. This was followed up with refinements from the literature. The evidence demonstrated the effectiveness of the wellbeing process with designed tipping points for community participation. The community sector can exploit this research for their benefit, offering well-fitting roles for career development of young people, unemployed, retired or ill health recovery. The contribution to knowledge acquired is the development of a sustainable, effective, efficient and time saving wellbeing framework and process for online communication mediation for wellbeing in a community participation context.

Keywords - Wellbeing, Community Participation, Complexity, Design, Mindsight & Mindfulness

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Preface

The researcher has worked and/or volunteered in the third sector for over thirty years. The researchers' first true role in community participation started at the age of twelve in a local care unit for the terminally ill, twice a week helping out with the games nights. Her volunteering progressed over the years to setting up and becoming the chairperson of an out of school club and advisor to a community buildings network. As a professional she worked her way up to a principal management role supporting community organisations. Throughout her life she experienced much positivity and unfortunately negativity. Using Mindsight (looking back in your life for the cause of present issues) she tracked back where her wellbeing problems first developed. As a child she developed a low self-esteem. When you suffer from low self-esteem you accept a feeling of worthlessness as the norm. This can cause a domino effect if you find yourself amidst negative people. If negative behaviour towards you continues over time it can have a serious effect on your wellbeing and to those around you. Instead of challenging inappropriate behaviour towards you, realistically you ineffectively raise issues. Your mind is too focused on the negativity of what is happening and stops you from stepping back to see the bigger picture so you can effectively move on. This is where the domino affect develops. People need to understand the cyclic effect language and behaviour has on people within the home, work, socially or participating in the community. Recognition of this negativity and understanding the history is the first step to reclamation and personal development. Putting things into perspective helps people to move forward from both sides, so talk, reflect and understand. Looking at the issue from the other person's perspective can help you to widen your understanding and come to a mutual understanding. Mindsight and Mindfulness (awareness of your daily thoughts and behaviour and how it affects others) and appreciating positivity all help individuals to flourish. The researchers experience inspired this research. Many community participants suffer because of life experiences and she wanted to find a way of supporting them and those around them to positively move forwards. She believes that if people focus on their wellbeing and in this context the wellbeing of the community then working together becomes more harmonious and naturally effective. To do this you need to be aware of yours and others mind, body and spirit. Each of us is complex so the wellbeing process designed has to be unique to each person.

Acknowledgements

Thank you to my supervisors, especially Dr Petia Sice & Prof Robert Young for the support they gave and to Northumbria University for recognising my strengths and partially funding me.

I would like to thank all those who gave me work contracts so I could keep my head above water whilst completing this research.

An extra special thank you to all the participants for their cooperation and I hope they continue to develop their wellbeing.

Thank you to the Rickter Company for their training, TOI evaluation and the use of the Rickter Scale®.

This research is dedicated to my family and partner for their support. Without them I could not have completed this PhD at a challenging time in my life.

Declaration

I declare that the work contained in this thesis has not been submitted for any other award and that it is all my own work. I also confirm that this work fully acknowledges opinions, ideas and contributions from the work of others. The work was done in collaboration with the TOI and the Third Sector.

Any ethical clearance for the research presented in this thesis has been approved. Approval was sought and granted by the Faculty Ethics Committee on summer 2011.

I declare that the Word Count of this Thesis is 84,488 words.

Name: Karen Elizabeth George

Signature:

Date: 15th June 2016

Introduction

This research supports community participants to focus on the wellbeing of themselves and others to ensure harmony and progress occurs in positive ways within their life and community organisations. The researcher has over 30 years of experience in community participation with a wide range of participation including supporting people who have suffered from mental health issues to recovery, back into work. Chapter 1 investigates the literature in the wellbeing field and identifies wellbeing themes. The literature is also used to give a clear understanding of community, participation and their synergy to form community participation. Chapter 2 clarifies complexity and design theories and how they beneficially work together in this research. It also looks at other research and practice in the field, developing the research question, aim and objectives. Chapter 3 takes you through the methodology clarifying the research paradigm, indicative methodology, methods, approach, design, research route and ethics. Chapter 4 takes you through the validation of the basic semi-structured interview process by evaluating an international study. Chapter 5 shows the research results and discernments. Chapter 6 develops the framework, concept diagram, recommendations for an information communication system and guidelines for users. Chapter 7 concludes the research against the objectives, the contribution to knowledge, limitations and recommends further research.

The wellbeing research follows on from prior research to enhance community participant and management involvement in "Strategic Information and Knowledge Management in the Community Sector" (George, 2010). The focus of that research was to investigate how community organisations could be best supported into using information communication systems for business administration. "This research identified nine beneficial areas and interrelated findings suggesting that by utilising McElroy's theory to develop and deploy a people focused system the benefit to community organisations is to enable knowledge and information growth" (George, 2010). The author is keen to investigate means of supporting wellbeing development in community organisations to ease their path forwards in a time

when community participants are being tasked to take on board services that have been lost from main stream provision (Government, 2008; Hudson, 2011).

Each UK Local Authority has been tasked with reviewing their community assets, as part of the Quirk Review (Quirk, 2007). Community Organisations are being tasked to take on board the role of asset management of community buildings. This calls for a new breed of community participants with appropriate skills to take on property management as well as service development. Community participants are currently under tremendous stress and this additional pressure can have a detrimental impact on their wellbeing. The 'New Philanthropy Capital' states the importance of community organisations and agrees that their community participants are stressed and lack the skills needed for best practice (Head, 2007; Hudson, 2011). This limits what they can do and the funds they can apply for. The lack of skills also adds stress to any paid staff in the sector as there can be an absence of professional guidance. Hudson (2011) suggests filling the skills gap with people from outside the local community. It is not easy to gain interest from people inside let alone outside of the local community with no prior knowledge of the organisation.

Many community organisations have no presence on the internet to gain that recognition. Community organisations need to improve their wellbeing and develop their use of information communication systems so as to compete with the voluntary and private sectors for sustainability, particularly when it comes to competing for community participants (Gilchrist, 2009; McElroy, 2003). The 'Communities in control: real people, real power.' report raises the need for the Government to find more effective ways of communicating and engaging with the community and devolving power to enable improvements (George 2010 agrees with Government, 2008). To develop IT skills the community sector needs more community participants in place to support this process. There needs to be intrinsic research into how information communication systems can maximise community participation. This requires collaborative working between local government, private and the community sector to ensure effective local social interactions take place (Fuller, Marler, & Hester, 2006; Goodwin et al., 2012; Stacey, 2010; Zhu, 2007). If the local social interactions are well connected they can have a powerful influence at a global level (Sice et al, 2000; Turner, 2011; Wheatly & Frieze, 2006). These local social interactions are part of complex networks which

can emerge into tipping points. Information communication systems can play a significant role in facilitating the phenomenon of these tipping points for community participation (Gilchrist, 2009; Malcolm Gladwell, 2001).

A Third Sector Excellence program was instigated by the Government to support the research development and deployment for the management of information, knowledge and best practice within the community sector (Building the capacity of the Third Sector, 2010). In support of best practice the Social Impact of ICT report was requested through the University of Siegen by the European Commission (Siegen., 2010). The European Commission, National and Local Government are asking members of the community to engage more in community participation and to make better use of information communication systems (*Building the capacity of the Third Sector*, 2010; N.A. Office, 2010; Saeed, Rohde, & Wulf, 2012). There is a need for research into more than just using information communication systems but embracing it so that it benefits the wellbeing of participants and community organisations by deciphering what information really needs to be utilised and how it should be communicated to maximise effective participation (George, 2010; Hume & Hume, 2008; Office, 2010; Seddon, 2008).

Present community participation systems tend to be quite crude and make assumptions with regards to the minimal information gathered about the persons requirements in a role and focus more on equality and diversity information (Carlson et al., 2011; "Volunteer Centre Newcastle," 2014). The reason given for this is to make it quick for a member of the community to complete. There is a lack of reflection and understanding of real need to develop the wellbeing of community participants. There is no ongoing wellbeing system to manage, monitor and develop wellbeing. However to sign up to these crude existing systems community organisations need to already have numerous policies and procedures in place ("Volunteer Centre Newcastle," 2014). The development that needs to happen so that organisations can adopt best practice is what gives that wellbeing air to the community organisation (George, 2011; Raphael et al., 1999). To achieve this organisations need the right community participant to help them at times of difficulty. This is a new breed of people who understand their own wellbeing and how to support communities/societies to develop organisational wellbeing (George & Sice, 2014; Seligman, 2011; Sice & French, 2004).

We need to change the way we think about wellbeing, community participation and how we support the expanded use. Community organisations are just as unique as community participants, both are complex (Buxton, 2007; Thackara, 2006; Turner, 2011). To ensure the best fit the relevant information needs to be gained from each to create a beneficial wellbeing partnership (Yoon & Chung, 2011). The wellbeing of community participants and community organisations is a motivational factor for this research. Involvement from the public, community and Third Sector gives this research credibility in the field (Jason, 2004; *Participatory Design Principles and Practices* 1993). Wellbeing in community participation has repeatedly been highlighted as an area of need and yet still no real answer has been found (Sum, Mathews, Pourghasem, & Hughes, 2008). The contribution to knowledge acquired is the development of a themed framework for effective community participation and online communication mediation. The community sector is able to exploit this information for their benefit (Saab & Riss, 2011; Szostak, 2011). There is a synergy of insight into community participation from the perspectives of complexity and design theories (Alexiou & Zamenopoulos, 2008; Johnson, Zamenopoulos, & Alexious, 2005; Morin, 2008; Chris Mowles, 2010; Zhu, 2007). This shows how these theories work in partnership in third sector research. This research into motivational factors in community participation is available for others to review (Ardichvili, Page, & Wentling, 2003; Goleman, 1996; Maslow, 1987).

The impact of the research could be global. The UK Third Sector and Local Government can benefit with an effective and efficient, time saving model to promote wellbeing and community participation (Senge, 2006). Organisations supporting people into work can benefit from this wellbeing themed framework for their participants with community participation roles until paid work is established (Pryor & Bright, 2011; Wodzianski, 2008). It can be an ideal way of gaining work experience, personal development and expanding your curriculum vitae. Previously community participants placements have sometimes been cumbersome for the wellbeing of community organisations, or boring for community participants not satisfying their wellbeing need, as neither needs have been taken into consideration it can cause disharmony, which can lead to stress (Head, 2007; Pryor & Bright, 2011; Wodzianski, 2008). The wellbeing themed framework and process can be altered for use in other organisations. An additional benefit can be the improved collaborative

knowledge sharing partnership between Higher Education providers, Local Government and the Third Sector (McElroy, 2003 ; Stock, 2011).

Chapter 1: Wellbeing in a Community Context Defined

1.1. Introduction

Chapter one details the epistemology from the literature review on wellbeing, communities, participation and the synergy of these. The wellbeing evidence stretches over time from the ancient Egyptians to the present day. Many similarities are confirmed and more recent advancements show links between quantum theory, the mind, brain and social interactions which can have positive or negative outcomes on wellbeing (Siegel, 2015; Stanford, 2015; Stapp, 2011; Thompson, 1990). It also reviews some self-help literature as the aim is to provide detail for a self-help process and framework. Self-help literature is not usually used in academic research but is reviewed to understand the research utilised in this area and common practice shared for self-motivation, self-resourcing and commitment to self-development. Self-help could encourage resilience at a time of reduced funding for the NHS and mental health providers. The review continues to clarify community and participation and identified synergies with wellbeing and community participation. The complexity theory is explored in chapter 2 to outline the paradigm of understanding wellbeing in a community context and to develop the research question. Synergies between complexity and design theory are sought to inform the research process.

1.2. History of Wellbeing

Wellbeing is a widely used term with an extensive range of circumstances and contexts but in this research it is the unique satisfaction of an individual or organisations way of being (Knight & McNaught, 2011; Sum et al., 2008; Wodzianski, 2008). This quality of life can incorporate our environment, fortune, happiness, learning, challenges, giving, support given, relaxation, leisure pursuits, physical and mental health, harmony, fulfilment, resilience, social belonging and anything else important to somebodies way of being (Bergdolt, 2008; Knight & McNaught, 2011).

Aristotle (2009) 384-322 BC, a philosopher, had wellbeing ideas which underpin the current development in 'The science of happiness' (Diener & Seligman, 2002; Pursuit of Happiness, 2011). Aristotle believed that the focus of life was challenging goals, revolving around relationships, caring for others, health and fitness, morality, mental wellbeing through learning and continuously challenging ourselves, discovery and using our strengths and

virtues (Pursuit of Happiness, 2011). These wellbeing areas fit into Rath & Harter's (2010) five essential elements of wellbeing and Maslow's (2010) hierarchy of needs. (Bohm, 2004; Bohm & Peat, 2010; Putnam, Feldstein, & Cohen, 2005; Sennett, 2012) agree that wellbeing depends upon how we work together to pursue challenging goals and how as individuals we continuously work at improving this craft of cooperation which involves personal effort and competencies, relationship skills such as listening, responding, discussing, sympathy and collaboration to develop, free and shape our lives through shared experience and ethical actions in a complex world.

Aristotle (2009) was a student of Plato and Plato of Socrates and they all had influential views on wellbeing and happiness. Plato thought that wellbeing related to the establishment of a hierarchical order of elements within the soul (Kraut, 2002, 2007; Plato et al., 2007). This philosophical way of thinking has travelled through the ages with twists and turns. Tribalism is “thinking you know what other people are like without knowing them” or stereotyping, and ‘Samuel Stouffer’s’ belief “that white soldiers who fought alongside black soldiers were less racially prejudice” was unfounded by Putnam who “found that first-hand experience of diversity in fact leads people to withdraw from those neighbourhoods; conversely, people who live in homogeneous local communities appear more sociably inclined towards and curious about others in the larger world” (Aristotle, 2009; Putnam, 2004; Putnam et al., 2005; Sennett, 2012).

Prior to Aristotle and Plato the ancient Egyptians wellbeing was based around the cyclic behaviour of the Nile, which was viewed “as a vital giver of life” (Bergdolt, 2008). Life was thought to be directed by gods and spirits and prayers were seen as contributing towards spiritual wellbeing (London, 2003).The cyclic life also drew upon the importance of physical needs which evolved into a standard of hygiene for the Egyptians with the washing of dishes, clothes and personal bathing, including the removal of hair to prevent lice infestation (Bergdolt, 2008; Maslow, 1987). These are still a key part of daily life today. There has been plenty of press coverage regarding the Mayan cyclic calendar and its end on 21st December 2013 and the start of a new Mayan calendar (Duell, 2012). Many scientists talk of cyclic behaviour of our planet revolving around this Mayan calendar as the planet changes its distance to the sun. They believe this is responsible for major changes in humanities

behaviour and developments to cope with our changing planet (Duell, 2012). As we learn more and share more information readily on the worldwide web people can make more informed decisions (Stock, 2011; Szostak, 2011).

Information on behaviour and how it affects health supports theoretical approaches to promote good health, although individuals still often choose behaviours which risk their health, e.g., smoking, extreme sports (Knight & McNaught, 2011; Raczyński & DiClemente, 1999). In the Greek pre-classical period the link between physical and spiritual for one's wellbeing was recognised and the doctors' role evolved with a high status until around 500 BC when their greed for money and torturous treatments put them into disrepute (Bergdolt, 2008). Even to this day there are doctors still offering illegal treatments (Fazlulhaq, 2012). When people are in need they reach that tipping point and still take a high risk option, whether that is to use the services of an unqualified doctor or the adrenaline of extreme sports (Fazlulhaq, 2012; Gladwell, 2001; Schloesser, Dunning, & Fetchenhauer, 2013).

Over time a clearer recognition has evolved for the wellbeing of the mind with alertness, the body with food, water and fitness and supporting the development of personalities (Knight & McNaught, 2011; Maslow, 1987). Over the centuries many debates have looked at the link between the body and mind, e.g., "If one is ill, are they both ill?" (Guo & Powell, 2001). Recognition was understood that if you were over worked, tortured, cold, suffered a lack of sleep; food or water affect an individual's wellbeing which is used against people in times of war (Maslow, 1987; Rollnick, Miller, & Butler, 2008). The philosopher, Democritus, suggests wellbeing as directed by a positive state "moderate in pleasures and harmony in life" and that lack of self-control caused illness thus the mind and body are interlinked as the mind including the inner mind controls the body (Bergdolt, 2008; Kabat-Zinn, 2005; Knight & McNaught, 2011; Peters, 2013; Raczyński & DiClemente, 1999; Siegel, 2010a). We can see this more clearly now in research on the brain aptly describes how to harness the mind and control consequential actions (Feuerstein, Feuerstein, & Falik, 2010; Peters, 2013; Rock, 2009; Siegel, 2007). The World Health Organisation believes that "the health sector cannot achieve good mental health alone. The determinants of mental health are often outside the remit of the health system, and all government sectors have to be involved in promoting mental health" (WHO, 2011). In Table 1: Determinants of Population

Mental Health (WHO, 2011) the protective and risk factors of mental health are shown. Those protective wellbeing factors need to be promoted and understood. In contemporary Western thought, wellbeing links closely to (Maslow, 1987) hierarchy of needs, a recognised step up approach to individual's needs, where human needs of shelter, safety and food are at the base. (Maslow, 1993) identifies the core of human nature as the need to love, to develop through a process of trust and safety net building. Remember trust is a major player for productive cooperation (Covey, Link, & Merrill, 2012).

Table 1: Determinants of Population Mental Health (WHO, 2011)

Protective factors	Risk factors
Social capital and welfare protection	Poverty, poor education, deprivation, high debt
Healthy prenatal and childhood environment	Poor prenatal nutrition, abuse, harsh upbringing, poor relationship to parents, intergenerational transmission of mental health problems
Healthy workplace and living	Unemployment, job insecurity, job stress
Healthy lifestyles	Alcohol and/or drug use

Scandinavia is identified as being one of the biggest successes for wellbeing in the Gallup poll and that is thought to be due to the fact that "their basic needs are taken care of to a higher degree than other countries" for which they pay highly through their earnings (Levy, 2010). Income at higher levels can enhance people's evaluation of their lives but does not improve their emotional wellbeing (Kahneman & Deaton, 2010). The next step up in Maslow's hierarchy is the need to feel safe and establish stability within the complexity of life (Maslow, 1987). The hierarchy moves on to a need of feeling loved and a sense of belonging (Maslow, 2010). (Rath & Harter, 2010) wellbeing theory is based around ones work/career, financial, physical, community and social elements. (Siegel, 2007, 2010a, 2013) takes this a step further stating that human experience is developed across the whole lifespan dependent upon the flow of energy, information and the maturation of the nervous system. (Seligman, 2011)

enhances this with positive psychology. (Bandler & Thomson, 2011) highlight the need for meditation around peaceful words.

Rath & Harter, (2010) split wellbeing into five categories/elements/areas. The first being the wellbeing of careers which includes your education or advanced learning, un/employment or your role in day to day life, e.g., house wife/husband, retired, community participant, etc., (Knight & McNaught, 2011; Pryor & Bright, 2011; Rath & Harter, 2010). It is what shapes you as a person and how many others identify with you (Rogers, 2004). It gives meaning and fulfilment to your life (Maslow, 1987; Pryor & Bright, 2011; Rath & Harter, 2010). When an individual loses their job you can understand why they would feel they had lost their identity/meaning and fulfilment in life (Fuller, Marler, Hester, Frey, & Relyea, 2006).

The second wellbeing category is social wellbeing or social connections and interactions including the quality of relationships and your love life (Bergdolt, 2008; Bowlby, 2005a; Knight & McNaught, 2011; Rath & Harter, 2010; Siegel, 2007; Wallis, 2012). Individuals need to take on board transcendence so you interact with others in a positive, caring, reflective and understanding way (Hamilton, 2010; Maslow, 1993, 2010; Seligman, 2003). We need to recognise each situation as it is at this point in time, study it and make well thought out, effective choices that create positive effects (Fantino & Navarro, 2011; Goldratt, 2008; Tolle, 2005; Whitney & Trosten-Bloom, 2010). Spirituality plays an important role in how we interact with others and our level of consciousness needs to be developed so that we interact harmoniously (Goldratt, 2008; Lipton, 2008). Spirituality could be the energy of the community, spiritual practice which promotes positivity, understanding, development and care of the human race, the environment and the planet itself (Hawkins, 2002; Schooler et al, 2013). What support you give to others plays a vital role in your own wellbeing as you gain satisfaction and a feeling of being appreciated (M. Gladwell, 2009; Mills et al, 2013; Mongrain & Anselmo-Matthews, 2012). Your quality of interactions affects your wellbeing (Goodwin et al., 2012; Siegel & Hartzell, 2004). When someone smiles at you then you tend to smile back and it makes you feel good (Chu, Baker, & Murrmann, 2012; Kim & Yoon, 2012). Rath & Harter (2010, p. 34) states that Harvard research showed that if a friend of your friend is happy, your friend has a 15% more chance of being happy and you have a 10% chance of being happy. The percentages differ for different interactions in life but we are influenced by the people around

us, e.g. "when it comes to smoking you are 61% more likely to smoke if you have a direct connection with a smoker" (Rath & Harter, 2010, p. 35).

The third area is that of physical or health wellbeing which includes what we eat, drink and smoke; how well we exercise and sleep; which all affect how much energy we have (Knight & McNaught, 2011; Rath & Harter, 2010; Thaler & Sunstein, 2008). Exercise comes in many formats and a popular way of exercising to work and stretch all your muscles is yoga (Rimer, 2011; Rohnfeld, 2012). Yoga can also help with your consciousness (SahajayYoga.org, 2015; Salmon, 2007).

The fourth area is financial wellbeing and I have included it because the Gallup poll shows that those countries with higher income have a higher level of satisfaction (Levy, 2010; Rath & Harter, 2010, p. 50). (Kahneman & Deaton, 2010) agree it shows a higher level of satisfaction in lifestyle but it doesn't increase emotional wellbeing. So it is not exclusive and indeed all the wellbeing areas interact with the environment so that each situation is unique to the individual (Kennedy, Landor, & Todd, 2011).

The fifth is wellbeing within your local habitat or community and entails the quality of daily provisions and what is included, e.g. water, the look and feel of the area, how safe you feel, the quality of your internet, the freshness of the air you breathe, local provisions such as child-minders, nurseries, schools, play areas, community centres, day care, restaurants, pubs, walks, clean streets, green space, community safety, etc., (Burns & Taylor, 2001; Gilchrist, 2009; Putnam, Feldstein, & Cohen, 2005; Raphael et al., 1999; Rath & Harter, 2010). It depends on where you live and your status as to what quality you expect, for some decent water and food could increase their wellbeing tenfold for others their expectations are higher, e.g., 5 star accommodation and staff to manage your day to day life. (Raphael et al., 1999) states that the "quality of life is the degree to which a person enjoys the important possibilities of their life and is based on the categories 'being', 'belonging', and 'becoming', respectively who one is, how one is connected to one's environment, and whether one achieves their personal goals, hopes, and aspirations". The quality or feeling of wellbeing can often suffer due to a lack of appreciation of ones behaviour with regards to themselves and others (Cooperrider & Kaplin 2005; Mills et al., 2013; Whitney & Trosten-Bloom, 2010).

We need to be aware and reflective of how we behave (Mowles, 2012; Schön, 1991; Siegel, 2007; Swindal, 2012). Respect, courtesy, thoughtfulness enhances wellbeing. Smiling is another key to improving your wellbeing by aiding that feel good feeling. Tolle (2005) takes the perspective, in his belief in the “Power of Now that we are already complete and perfect”. “You are walking along at night in thick fog, your powerful flashlight cuts through the fog to show you a clear space forwards. The fog is your life situation, including your past and future: the flashlight is your conscious present and the clear space is the Now” (Tolle, 2005). His belief is about moving away from negative emotions from the past and living in the now, surrendering to what is, acting positively and being in the present (Seligman, 2003; Tolle, 2011). Positive psychology has a proven track record in research (Beyerstein, 1990; Mills et al., 2013; L. L. Murray, 2013; Stollznow, 2010). When someone hits a brick wall it creates an unpleasant memorable experience consisting of implicit and explicit memories (Siegel, 2007). If you have hit a brick wall previously it can resurrect those previous feelings which can be encoded without your awareness (Siegel 2010a). You are then coping with your previous memories and feelings as well as the present experiential feelings and you can start to drown in your negative thoughts. You can't think of anything else. You don't notice the hand that is there offering to help. To see that hand you have to reflect how you previously managed to overcome the brick wall and understand the steps you took and use this to take those steps again (Hirschfeld & Lammel, 2005; Ramsey, 2005; Schön, 1991; Siegel, 2007). You have to become your own master to reach out for that hand which helps you overcome the brick wall to your confidence and positivity.

“The key to halting the downward spiral into depression is to aim for the positivity ratio 3:1 in positive to negative emotions” (Akhtar, 2012, p.49.) Gratitude and appreciation are positive emotions and are used as positive motivational tools (Cooperrider & Kaplin 2005; Mills et al., 2013; Whitney & Trosten-Bloom, 2010). People need to train themselves to be more aware using positive psychology and gain mastery (Akhtar, 2012; Feuerstein et al., 2010; Mongrain & Anselmo-Matthews, 2012; Seligman, 2003). A major part of mastery is learning how you learn. How we interpret our lives, using positive meanings and interpretations promotes positive growth (Akhtar, 2012 p 49). You need to be able to examine yourself, reflect and understand how to develop and utilise your own learning (*Learning to Learn*, 2014). So this process is unique to each individual depending upon their experiences in life.

Maslow's (1987) next step up the wellbeing ladder is esteem need which results in competencies, mastery, attention and recognition of others. There are many methods out there for mastery but how many of them work with everyone as we are all unique. Esteem need is followed by the aesthetic need for self-actualisation so one can maximise their potential through knowledge and fulfilment (Raczynski & DiClemente, 1999; Williams & Penman, 2011). Maslow added another step to his hierarchy with transcendence, the state of being beyond, a consciousness expansion for connection with others to support their full potential through knowledge, fulfilment and wellbeing (Abraham H. Maslow, 1993, 2010; rare-leadership.org, 2014). Maslow's theory has been developed further with recent research taking the understanding of wellbeing a step further into the complexity of the interplay between the subjective and objective factors of wellbeing (Knight & McNaught, 2011).

The UK Government has taken this understanding of subjective and objective factors of wellbeing and promoted an awareness system of wellbeing through the NHS website (NHS, 2015). The NHS has developed a new wellbeing approach from research collated with the Beth Johnson Foundation ("Celebrating success of healthy workplace initiative," 2013) and a Likert scale approach to promote positive mental health (Tennant et al., 2007). The drawback is that the system only gives a scaling in comparison to what others have input into the system and tells the participant that they are average or that they need some help and does not support a self-motivation system supporting the development of actions, monitoring them and measuring your wellbeing. The NHS wellbeing theme focuses on the following five areas: connect with people, be active, take notice of what is happening, keep learning and give time, support or give money to others (NHS, 2012). These five areas link into what makes people feel happy, meaningful, empowered, motivated, respected and engaged ("Celebrating success of healthy workplace initiative," 2013). These subject areas are strongly appreciated within positive psychology (Beyerstein, 1990; Murray, 2013; Seligman, 2011; Stollznow, 2010). These subject headings can be related back to Aristotle's philosophical thoughts on what makes a person happy, what interactions must one participate in; how reflection, contemplation and virtue hold the light to wellbeing and positivity (Aristotle, 2009).

Psychological prosperity and positive daily feelings can also stem from societal networks that support the development of quality relationships (Abdallah, Michaelson,

Steuer, Marks, & Thompson, 2009). Diener & Seligman (2002) completed research with students at the University of Illinois showing that the happiest students had strong quality relationships and those suffering from depression did not. Many people suffer with attachment difficulties. Research on attachment disorder shows how using ‘Mindsight’ meaning a deep awareness of our thoughts, feelings and actions can support people to move on from the attachment disorder (Becker-Weidman, Ehrmann, & LeBow, 2012; Bowlby, 2005b, 2005a; Siegel, 2010a). Siegel (2010a) evidences a case of a 92 year old man who suffered a loveless upbringing with little parental interaction and he had carried that behaviour into his adulthood. Siegel (2010a) took him through a heightened awareness practice of body and mind awareness which supported change enabling the 92 year old to be open and enjoy positive loving experiences. Riggio (2012) argues that we do not need to reflect on the past and that we are perfectly fine the way we are, we just have bad strategies and that we have to let go of the past. To let go of the past you need to be aware of what it is you need to let go of and this is how we recognise how the good and bad strategies came about, reflect, understand and move forwards (Bowlby, 2005b; Siegel, 2007, 2010a, 2013).

To recognise and understand ones wellbeing you need to be aware of the state and needs of your mind, body and energy (Bohm & Peat, 2010; Guo & Powell, 2001; Hawkins, 2002; Lipton, 2008; Maturana & Varela, 1998; rare-leadership.org, 2014; Siegel, 2010a, 2013). Individuals need to learn how to adapt to societal constraints past and present and as such each person’s wellbeing is unique within this recognition (Feuerstein, Feuerstein, & Falik, 2010; George & Sice, 2014). How one makes decisions should be to have enough information to trust the decision and to take that nudge to tip over into action (Covey et al., 2012; Gladwell, 2001; Thaler & Sunstein, 2008). (Peters, 2013) states that you need to carefully plan your route to ensure you take care of your chimp, the other side of your mind that constantly asks what if and clarifies the goals, time and tools needed at achieve your dream. Peters (2013) also states you need to monitor and assess how you achieve and that you may need to put more effort in to achieving the real goal. Gladwell (2006) and Schooler et al (2013) argue that before being asked for the detail of how you are going to achieve your goal you need to spontaneously think of an idea because those who try to think of the detail first fail to come up with any idea. Initial ideas need to be spontaneous and positive (Gladwell, 2006; Seligman, 2003). Positive psychology is a proven successful scientific route to wellbeing and

closely linked to the ‘science of happiness’ (Mills et al., 2013; Mongrain & Anselmo-Matthews, 2012; Tennant et al., 2007). How can positive psychology be utilised within a self-help information system which also monitors and shares information to support policy development and the focus of funding to support wellbeing development has yet to be devised?

Mini Case Study 1

“I was being harassed and had been for a while and although I am working with the police the harasser has managed to avoid being caught. This issue has had a huge impact on my wellbeing. I was focusing on when the next attack would be and this became the focus of my life rather than my work, family and friends. I would sit at my computer to work but my mind was focussed on the harassment so I couldn’t concentrate, hours would pass and I didn’t even realise, nothing got done. The problem and my worries grew. Minor issues became big issues and my stress levels were at breaking point. People around me started to comment on how much I focused and talked about the harassment and some even started to avoid me. My whole life was taken over by the way I reacted to the harasser. My escape route was trying to focus on the positive attributes in my life, mainly my children, to actively look for things to appreciate and what relieved my stress and made me happy. I went out more on the bike, walking up mountains and re-joined the National Trust. The key was working through small steps to improve and build upon my relationships. I started to appreciate the help and support I got and I am trying to appreciate that the harasser has a much bigger problem than me. Perhaps in time this may help me to forgive. I’m on the road to recovery but it takes time and ongoing small steps. Little things still set me back but it’s getting easier. Thank you”

Figure 1: Mini Case Study 1 - Community Participant External Wellbeing Issue

Akhtar (2012, p. xiii) states that “What you focus on grows” evidenced in Figure 1: Mini Case Study 1 - Community Participant External Wellbeing Issue. This community participant had given up participating in the community after many years of involvement. They missed the involvement and the good feelings it gave but just couldn’t focus on it due to the excessive stress. Relationships good or bad are a key focus in our lives how we perceive those relationships effects our wellbeing. Using a change of focus, exercise, appreciation, positive

psychology, small steps and focusing on those achievements helped this participant to move forwards. This interlinking is shown in Figure 1: Mini Case Study 1 - Community Participant External Wellbeing Issue. If your focus is on positivity it can actively enhance your wellbeing. Siegels (2007, 2010a) model demonstrates how our experiences and consequential thoughts affect our network of cells.

The information and energy that flows in and out from relationships interlinks the brain and nervous system (Feuerstein et al., 2010; Siegel, 2012a). Consciousness and its effect on wellbeing are associated with quantum mechanics as mental activity correlates to brain behaviour (Stanford University, 2015). Relationships, the mind and brain interact with one another on a feedback loop continuously responding to new experiences creating physiological changes (Siegel, 2010; Goleman, 1996). This is neuroplasticity or the brains change capacity. “Dr Siegel goes further to say that the mind, our thoughts and feelings, can and do interact with the physical nervous system to influence how we respond to experiences throughout our lives shown in Figure 2: Wellbeing/Resilience Triangle adapted from Siegel (2010, p.11).

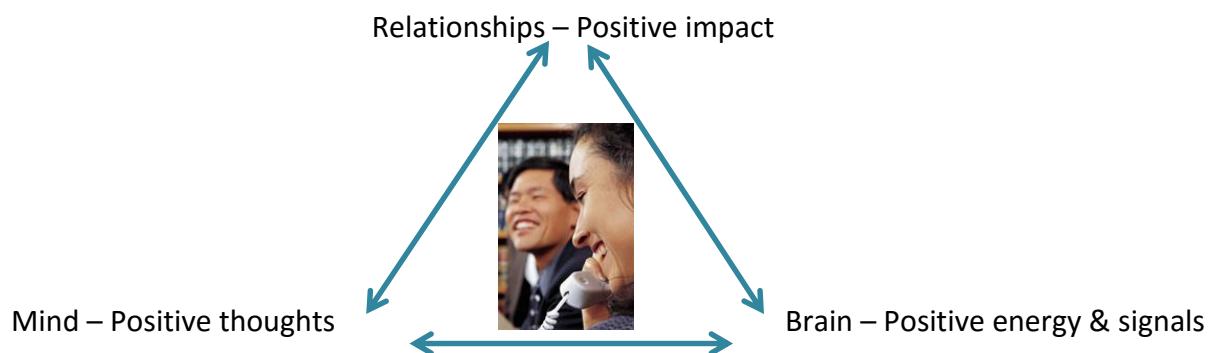


Figure 2: Wellbeing/Resilience Triangle adapted from Siegel (2010, p.11)

What we intend and pay attention to directs and regulates electrical and chemical signals so that physical changes can be detected with scans that measure activity (like blood flow) in the living brain.” (Manitoba Trauma Information & Education Centre, 2013; Siegel, 2012b). “The effect of focusing on the wrong thing brings to mind a simplistic example, teaching my son to ride his bicycle. We were on the moor as I thought it was a big open space and he would not hit anything while learning to ride his bike. He had just begun pedalling unaided directly towards the one and only lamp post for about half a mile. I shouted at him WATCH OUT FOR

THAT LAMP POST as I said it he looked up at it and his focus was now on the one and only lamppost and he ended up cycling straight into it. Luckily he was not hurt and laughed it off. If I had said to my son look at me and turn the handlebars towards me the focus would have been on me." This shows simply that what you focus on can have negative consequences and backs up the mini wellbeing case (Akhtar, 2012; Rock, 2009; Siegel & Bryson, 2014; Siegel, 2010a, 2013). The mini wellbeing case had more serious effects. In Figure 3: Stress & Ill Health Triangle adapted from Siegel (2010, p.11) you can see how a negative spiral of thoughts causes stress which sets off negative signals causing negative chemicals to be released which cause ill health.

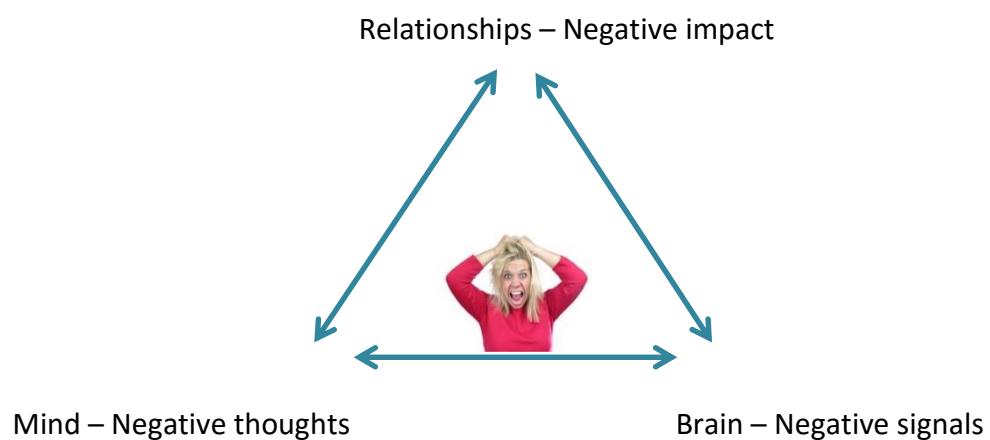


Figure 3: Stress & Ill Health Triangle adapted from Siegel (2010, p.11)

When reflecting upon your wellbeing looking for a route to improvement it must be a positive focus (Cooperrider & Whitney, 2005; Seligman, 2003). Those who focus on negativity including causing harm to others only recycle their hatred and never improve their wellbeing (Seligman, 2011). This is often where ill mental health develops (Akhtar, 2012). Relationships have a continuous and key effect on our lives as our views are formed through our ongoing local social interactions with people and the community at large.

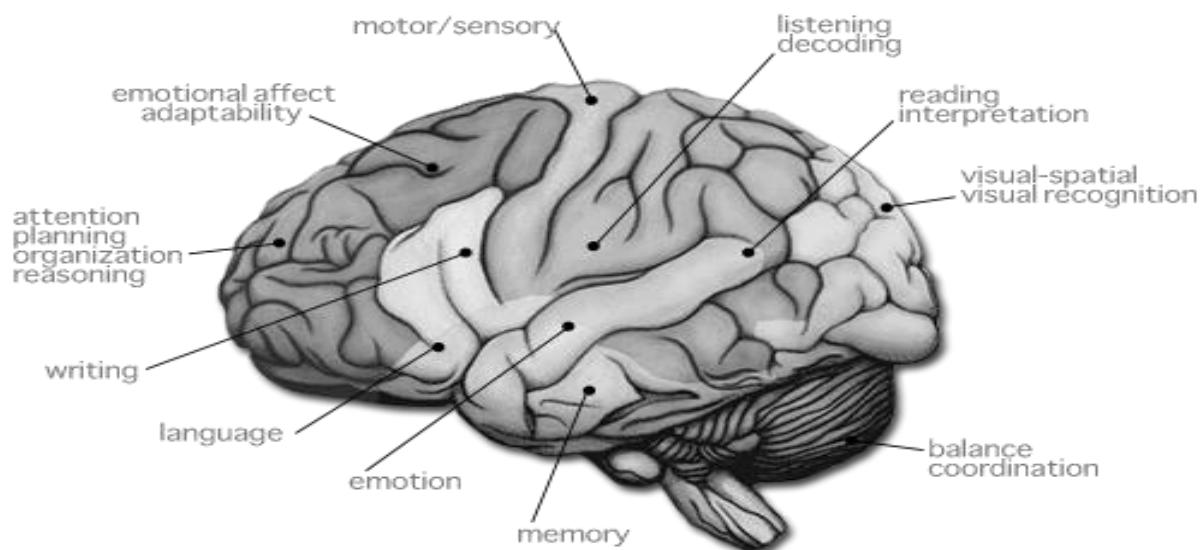


Figure 4: Brain Areas for Abilities (Hill, 2011)

Our experiences with our parents/carers, especially in the first few years of our lives, profoundly affect our brain development and the preoccupation of our unconscious minds and who we become, our brain blue print (Bowlby, 2005a; Maslow, 1993; Siegel, 2013). This attachment can be secure where our needs are attended to or insecure where our needs are not attended to or where they are blatantly violated (Bowlby, 2005). See Figure 4: Brain Areas for Abilities (Hill, 2011) to understand that “Over the course of childhood this security allows the developing brain to build good connections between the prefrontal cortex (reasoning part of the brain) with the mid-brain structures; (which are involved in sensing emotions and their regulation, encoding of memory, achieving body awareness, and developing empathy).” (Manitoba Trauma Information & Education Centre, 2013). Siblings from insecure carers can behave in different ways as their individual experiences affect them in different ways, e.g. one sibling may sleep a lot in the buggy when out and the other may look around and see many positive relationships and remember these as something they strongly believe in. They may stay awake just to view and feel the joy of those secure relationships. When they become carers they care for their children in the way they longed to be cared for. The other sibling who did not see or make this connection cares for their children in the same insecure manner as their carer. Secure attachments are developed by responsive carers to the child’s needs (Bowlby; 2005a, 2005b; Manitoba Trauma Information & Education Centre, 2013; Siegel & Hartzell, 2004).

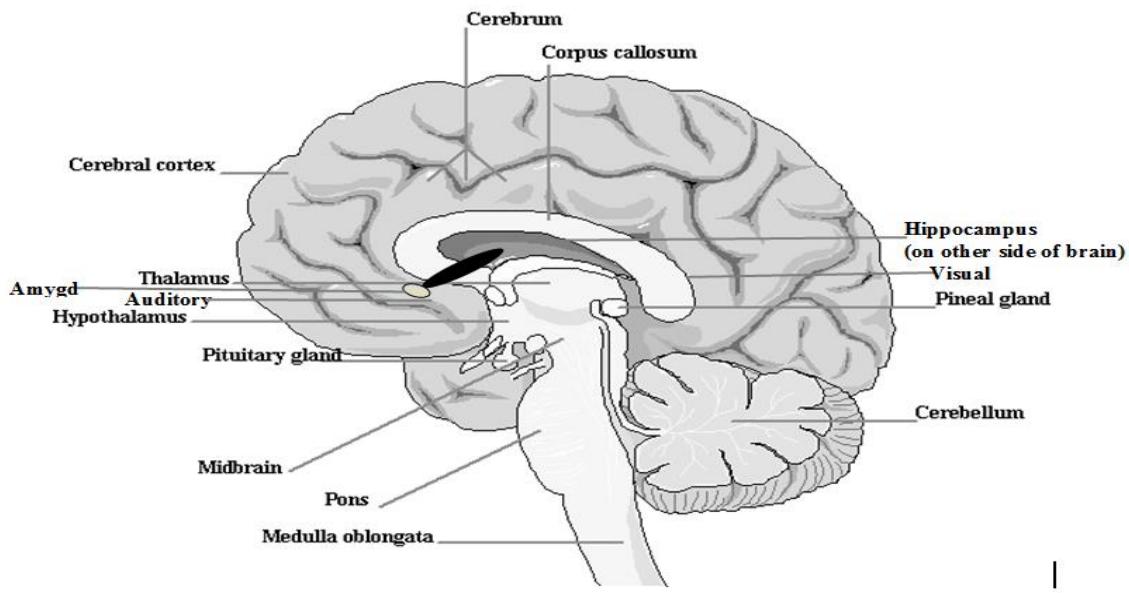


Figure 5: Adapted from dmacc.edu (2014)

The brain is a complex system and can adapt to compensate for insecure attachments, injury or illness. A Pittsburgh (1999) University PA stated that after a stroke the brain can spontaneously reorganise its cognitive functions. Scanning the brain evidenced that the “brain function associated with language shifted away from the stroke-damaged area of the adult brain to the corresponding area on the undamaged side of the brain” (Pittsburgh, 1999). So the brain is adaptable and can be retrained. The part of the cerebral cortex that was damaged compensated elsewhere. The brain and what the areas are responsible for are shown in Figure 4: Brain Areas for Abilities (Hill, 2011) and the corresponding names of the areas are shown in Figure 5: Adapted from dmacc.edu (2014). These diagrams show the complexity of the brain and how it works in synchronicity with various parts of the brain to support our thoughts and behaviour. Severe stress can cause disconnections in the brain as overload shuts down connections to thoughts that are too distressing as a coping mechanism (Akhtar, 2012; Hodgetts, 2010; Seligman, 2003; Siegel, 2012b, pp.74-5). These thoughts although not always at the forefront of our minds affect the way we behave and think (Rock, 2009; Siegel, 2013, p.163).

To try and stop and or change thoughts many people exercise, read, listen to music or do performing arts to engross their minds in alternative positive thoughts (Hodgetts, 2010, p. 316; Nazimek, 2009; Solli, Rolvsjord, & Borg, 2013). The challenge is to reflect and overcome

the issues, rebuild and enjoy your life and move forwards positively (Hooge, Verlegh, & Tzioti, 2014; Siegel & Bryson, pp.194-8, 2014; Siegel, 2013, p.163). The right information and people play a key role in supporting this development (Ouweneel, Le Blanc, & Schaufeli, 2013). It is extremely difficult for individuals who have suffered for years with mental health and many still do not seek help for fear of retribution (Beyerstein, 1990; MIND., 2011).

The ongoing effects of attachment disorder are discussed by Siegel (2010a) who gives examples of many patients present day behaviours and works with the patients to become aware of how their past is affecting their present day life. Reconnecting these thoughts can be traumatic as the emotions and feelings come back too. To move forwards the past needs to be reconnected to put it into perspective so the individual is aware of the cause and effect. Often breathing exercises are used to help people to overcome stress (NHS, 2015). Siegel (2010a) uses various techniques to support this reconnection in stepped processes such as body awareness and relaxation, colour feelings awareness and rich pictures for calming. Exercise also helps with stress as your focus is on achieving the exercise (Feuerstein et al., 2010; Knight & McNaught, 2011; NHS, 2015). It also gets your blood pumping, raising your positive chemical exchange (Feuerstein et al., 2010; Knight & McNaught, 2011; Sood, 2015).

The brain is connected and developed from the nervous system which develops in the embryotic phase as ectoderm, an outer layer of cells which eventually become the skin (Rock, 2009; Siegel, 2007). Some of the out layer folds in to form the neural tube or spinal cord, this core of neurons is the brain (Siegel, 2012a). The brain is embodied within us and genetics decide the journey of the neurons migration and interconnections (Rock, 2009). Later the neurons interconnect with experience where neural firings respond to stimuli (Siegel & Bryson, 2014). The neurons develop connectivity and supportive links (Rock, 2009). There is an average of one hundred billion all interlinked by synaptic interconnections (Rock, 2009; Siegel, 2007). The nature takes on the experience of nurture and continues to develop more neurons, synaptic interconnections and support cells which is called neuroplasticity (Siegel, 2007).

Mindful practice and awareness increases synaptic interconnections and support cells in the activated areas (Germer, 2009; Schooler et al., 2013; Williams & Penman, 2011).

Meditation such as mindfulness meditation is encouraged by many as a calming, reflective, deep thinking, reasoning practice to achieving wellbeing (Williams & Penman, 2012). Meditation has history in both spiritual and religious domains. We are born in a natural state, rhythmically in tune with our bodies but life interconnections has an effect on our wellbeing, Mindfulness and meditation are ways to help calm our lives and refocus to improve our wellbeing (Culliford, 2011). There are other means of supporting calming of the mind. Siegel (2010a) suggests that having a safe rich picture or photo to focus on can help people to relax in times of stress. Art can be used to tell a story of how people perceive the way they would like their future to be (Golomb, 2011). Rich pictures and photos can also remind people of happy, safe, relaxing times (Golomb, 2011; Siegel, 2007). Colour is also used as a healer or calming element and although colours have been tested to see what emotions they encourage (Bonds, 1999). Generally fuchsia is known as a colour for letting go (Wills, 2006, p.67). However colours and their effect are not 100% as some people having differing feelings so it is best to work out which colours make you have what feelings and use those colours wisely around you (Bonds, 1999; Siegel, 2010a; Wills, 2006).

Golomb (2011); Levitin (2008); MacDonald, Mitchell, & eds. (2012); K. Norton (2015) and Solli et al (2013) recommend music be used to support people suffering low levels of wellbeing. Music is also used to help with calming and reflection (Solli et al., 2013). Just as language is developed as we evolve so does music, involving various emotions along the way (Levitin, 2008, p.247). "Singing is also verified as beneficial to wellbeing in neuroscience and psychology by connect behaviour and brain function with the musical voice" (Norton, 2015). Singing and music can enhance feelings of calm, motivation, etc. but the type of music to promote positive influence can be unique to individuals (MacDonald et al., 2012, p. 405). However it is also important to know that certain music can have negative effects. "Music has been linked to health and healing in Shamanic traditions for more than 30,000 years" (MacDonald, Kreutz & Mitchell, eds., 2013 agree with Moreno, 1991, p. 405). An experience sampling method study on the relationship between self-reported stress and music listening throughout the day showed music as having a positive effect on reducing stress of participants except when they were watching the television. Figure 6: Relationship between music experience and wellbeing (adapted from: Macdonald, Kreutz & Mitchell. eds., 2013. p.409) shows how that positive relaxation effect works and links with imagery and memory.

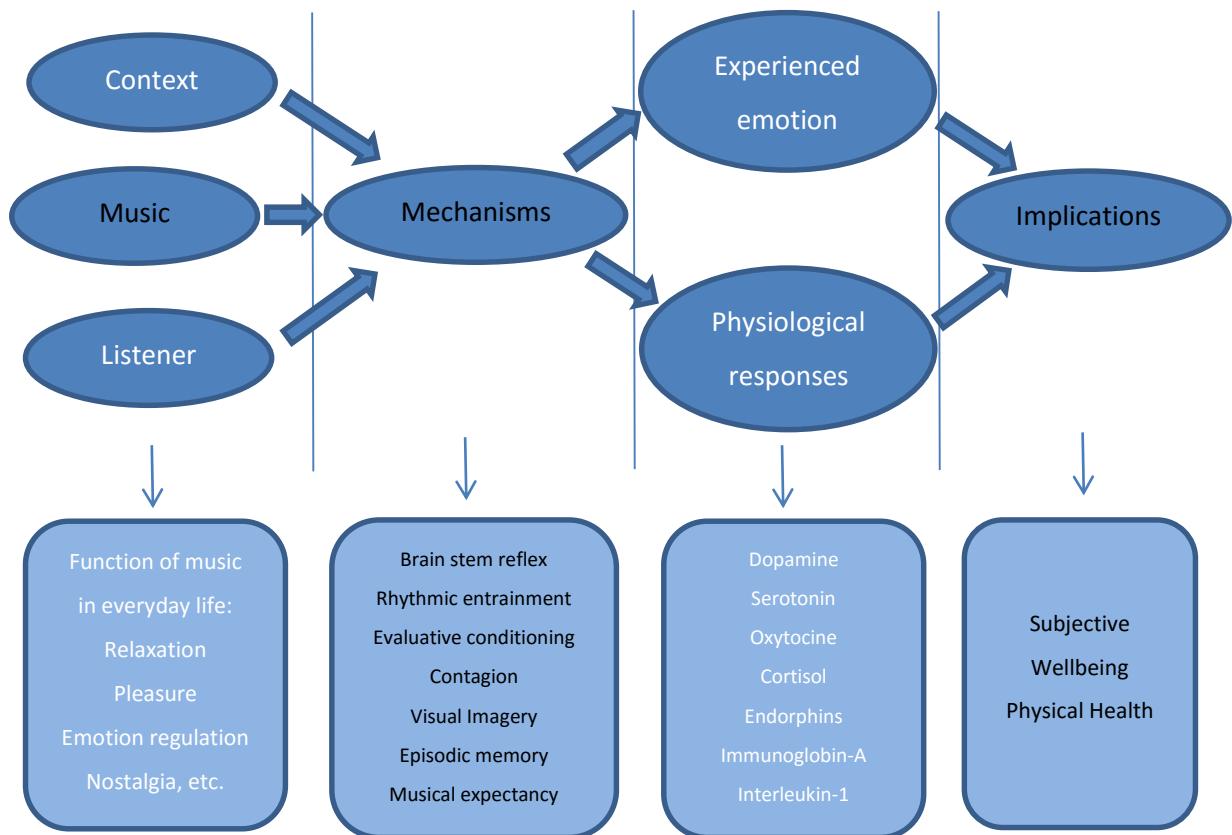


Figure 6: Relationship between music experience and wellbeing (adapted from: Macdonald, Kreutz & Mitchell. eds., 2013. p.409)

The similar physiological responses can be gained from calming exercises such as deep breathing, emptying the mind and stilling the body (Rohnfeld & Oppenheimer, 2012; Salmon & Maslow, 2007). These positive responses can also be gained from pictures and colours you know always make you feel good (Bergdolt, 2008; Siegel, 2007). Positive psychology is a key to wellbeing (Seligman, 2003).

Positive psychologists use positive reflection such as asking participants to reflect and find three things to appreciate/be grateful for each day (Kelm, 2008; Mills et al., 2013; Whitney & Trosten-Bloom, 2010). This supports positive thinking which is a step towards being able to cope with any trauma from the past (Hodgetts, 2010 p.58). On You Tube there was a TEDx talk where the speaker said to help himself get started in the right frame of mind every morning he thinks of 5 different people to send his silent gratitude (Sood, 2015). However this is a struggle for individuals suffering from long term mental health issues as they have often closed off from friends and family so thinking of 5 different people they know even

on day one let alone future days can be a difficulty. Remember in Figure 1: Mini Case Study 1 - Community Participant External Wellbeing Issue where the participant closed down from people and those she was still in contact with started to avoid her. He also suggests someone who has died but often the loss of a friend or family member is the cause of depression. However thinking of three different things they are to be grateful for each day could be a much better starting point (Kelm, 2008; Whitney & Trosten-Bloom, 2010). Positive thoughts increase positive chemicals in the brain and help people to stay on the right track. Sood's (2015) suggestion works for many people and his other suggestions of starting a sentence to create positivity in a relationship even accepting fault you feel you are not responsible for e.g. "Honey you were really right". The third recommendation is to none verbally "wish people you know well", then "reframe your life with: Monday gratitude; Tuesday Compassion; Wednesday acceptance; Thursday higher meaning and Friday forgiveness" (Sood, 2015). Community participation is an ideal way of building new relationships and developing your wellbeing at the same time (Einolf & Chambré, 2011).

Practicing appreciation in daily life supports the development of reflection in a positive way to view life experiences in a different way and learn from the reflection and use it to positively move forwards (Dewe & Cooper, 2012; Kelm, 2008). It is consciously disciplining your life (Bailey, 2001). Irons (2013) discusses the importance of compassion in mental health for a positive effect on wellbeing. Sometimes people struggle to focus on appreciation, positivity and compassion as they are stuck in a spiral of negativity and need to learn how to relax and reconnect in a positive way. Siegel, (2010a) has several exercises that he recommends to his participants such as body scanning, diary writing with descriptive words of the day and even giving patients various coloured glasses to help reconnect with their thoughts and feeling. So each person's wellbeing route is unique to them, e.g., you may need to put stickers up to remind yourself to stay positive, appreciative, grateful, compassionate and calm, you may even need the support of someone to remind you (Hooge et al., 2014; Ouweneel et al., 2013; Seligman, 2003, 2011).

A daily use wellbeing system could be ideal to support this wellbeing route especially for those who do not want professional help. Focus should be on small easy steps based upon your strengths, what promotes positive emotions and or feelings of optimism and helps your

resilience to flourish (Akhtar, 2012; Diener & Seligman, 2002; Mills et al., 2013; Scharmer & Kaufer, 2013; Seligman, 2011). It is a complex route so do not try to think or plan it all out at once (Gladwell, 2006; Tait & Richardson, 2008; Whitney & Trosten-Bloom, 2010). Success, remember means focusing on the idea to start with and then the small steps (Gladwell, 2006; Schooler et al., 2013). Reflecting and appreciating how you made successful changes in the past is a useful way forward so you understand the success route and utilise it in the present, celebrate it and expand on its use to keep moving forwards (Mowles, 2012; Ramsey, 2005; Siegel, 2007). The focus should be on your wellbeing, happiness, appreciation of others, gratitude, joy and satisfaction (Irons, 2013; Mills et al., 2013; Sood, 2015; Wodzianski, 2008). Celebrate your successes and use the competencies gained to move forwards again (Fernandez & Moldogaziev, 2013; Veenhoven, 2010; Wodzianski, 2008).

These good attributes in your life increase your wellbeing and you regain the true meaning of your life (Pursuit of Happiness, 2011; rare-leadership.org, 2014; Seligman, 2003). Even when looking for prior successful steps used you should not focus on the negative you came from just acknowledge it, appreciate the positive steps taken and reuse those competencies to move forwards (Akhtar, 2012; Bailey, 2001; Mongrain & Anselmo-Matthews, 2012; rare-leadership.org, 2014). Keeping note of your successes can help as you can read them now or any time in the future (rare-leadership.org, 2014). Siegel & Bryson (2012) state that focusing on a positive picture of happy, chilled memories helps people to focus and regain calm.

Psychologists state to calm yourself in a state of panic the best way to regain calm is to take deep breaths, breathing in for as long as you can and then breathing out as slowly as you can, which can be repeated numerous times until calm is regained (Dimitrov, 2003; Siegel, 2010a). When individuals are aware that this panic state is temporary and recoverable, it helps them to take control (Goleman, 1996; Peters, 2013; Siegel, 2007). Solli et al (2013) state music helps to recover from a stressed or panic situation. Meditation is also said to quiet the mind but it can take sometimes months or even years of practice to be able to meditate effectively (Germer, 2009; Johnstone, 2012; Kabat-Zinn, 2005; Siegel, 2007). Many spiritual (connection with oneself or subtle, divine reality) meditational practices encourage cleansing prior to meditation which is a process of moving through the mind and body and wiping clean

all thoughts and movements (Culliford, 2011; SahajayYoga.org, 2015; Salmon & Maslow, 2007). They also encourage yoga as a practice to support meditation as you learn to effectively control and relax your body (Smith, 2013; Kabat-Zinn, 2005; Sahajayoga.org, 2015). Many meditation practitioners recommend that you work through some body relaxation prior to meditating to help free the mind from external focus (Johnstone, 2012; Siegel, 2007). Others evidence that to have a healthy mind you need to keep the body active (Guo & Powell, 2001; Nazimek, 2009; Siegel, 2007). Numerous practitioners and or therapists recommend a good mix of these options (Hodgetts, 2010; Siegel & Bryson, 2012).

Literature is telling us that we have many characteristics that affect our wellbeing so how do we put them into perspective? Kabat-Zinn (2005) recommends we use all our senses and knowledge to make non-judgemental, mindful decisions on how to move forwards. Siegel (2007) shows this in his description of “the river of consciousness” which he describes within his “wheel of awareness” seen in Figure 7: Adapted from the Wheel of Awareness (Siegel, 2007, pp.74-75).

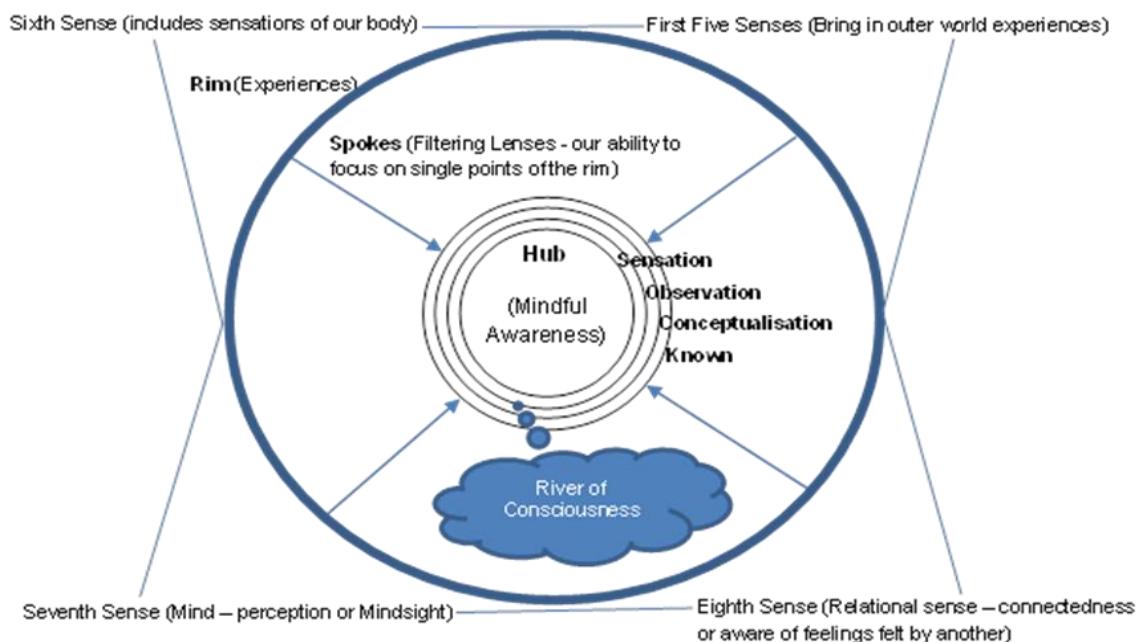


Figure 7: Adapted from the Wheel of Awareness (Siegel, 2007, pp.74-75)

This sense of awareness is something we each learn over time with experience and reflection to change and move forwards. Some things we are more aware of than others. The wheel rim is our direct sensory experiences and observations which we conceptualise and are now known to us (Kabat-Zinn, 2005; Siegel, 2007). The wheel hub symbolises mindful awareness

whereby the open mind allows elements of rim experience into its “river of consciousness” enabling reflective awareness of emotion, memory, physical reaction or connective sense which enable relational perceptions (Siegel, 2007). Working through the wheel of awareness can be completed at various levels depending on your skill level (Siegel, 2010).

Our perceptions vary dependent upon what we see and our experiences. (Kelm, 2008, pp. 14-15) interviewed numerous people with regards to her research and found clear evidence that what we perceive is subjective as two people described the same incident at work from different perspectives. One focused on the negativity of the incident and was traumatised by it and couldn't focus on joy for at least a week whilst the other person saw all the positive things that people did to support the victim and co-workers and how it had spurred them on to look at a change in career of nursing (Kelm, 2008, p.15). This is a clear example of what you focus on grows but it also shows that what we perceive is subjective (Abdallah et al., 2009; Akhtar, 2012a, p. xiii; Helliwell & Barrington-Leigh, 2010). We all have blind spots being aware of these to make non-judgemental decisions is one of the keys to wellbeing (Arthur et al., 2001; Maturana & Varela, 1998; Scharmer, 2010b). Figure 8: Blind Spot Experiment (Maturana & Varela, 1998, pp. 19-20) shows a visual blind spot or zone with no receptors responding to light on the retina. By covering or closing your left eye with head about half a metre from the screen or paper, focus your right eye on the plus symbol whilst slowly moving your head towards the screen or paper.



Figure 8: Blind Spot Experiment (Maturana & Varela, 1998, pp. 19-20)

The dot disappears from your view as it enters the retinas blind spot. When we focus on things in life in particular negative portrayals we create blind spots and spirals of negativity.

Figure 9: Mini Case Study 2 - Depicting a Blind Spot illustrates an overview from a participant interview. The interviewer shared with him a similar situation with another young

male and he realised that his perception of his father and mother may be biased but still could not think of a way he could build up a relationship in a way he felt comfortable. The interviewer shared with him how this other young male managed to spend time with his estranged father through sport as he too felt uncomfortable connecting with his father. The interviewer also explained that the other young male still struggled with his relationship with his father on occasions and would go back to sport to keep a comfortable distance but keep an ongoing relationship. The participant's action was then to arrange to play badminton with his father initially and when he felt more comfortable he could play badminton and extend that by going for a drink afterwards. He knew if the relationship became strained he could revert to just sport until he felt comfortable again. He felt much happier with the situation as he could now see an acceptable way forward.

Mini Case Study 2

A young male community participant in his twenties was struggling with his relationship with his estranged father. Living with his mother he had become biased towards her behaviour towards his father. His father desperately wanted a relationship with his son. The young male could not see how he could have a relationship with his father. His brain had disconnected loving thoughts about his father after years of blindness to the overall picture. He was in a blind spot and couldn't see the full picture as to how he could move forwards. He was asked to try and put himself in his father's shoes and look at the situation from his perspective. He could see that his father obviously still loved him and wanted regular contact but couldn't get past his mother's feelings and behaviour to recognise how he could do that.

Figure 9: Mini Case Study 2 - Depicting a Blind Spot

People need to change the way they make decisions by changing habits, thoughts and actions so they think not only about themselves but of others and the global community where possible (Hendrix, 2005; Kelm, 2008; Mills et al., 2013; Scharmer, 2010b; Scharmer & Kaufer, 2013). The present interactive patterns, tipping points and consequences need to be understood and the blind spots identified so that effective change can be made that connects people with the future non-judgemental emerging global community rather than

perpetuating past failing interactions (Arthur et al., 2001; Claus Otto, 2001; Scharmer & Kaufer, 2013).

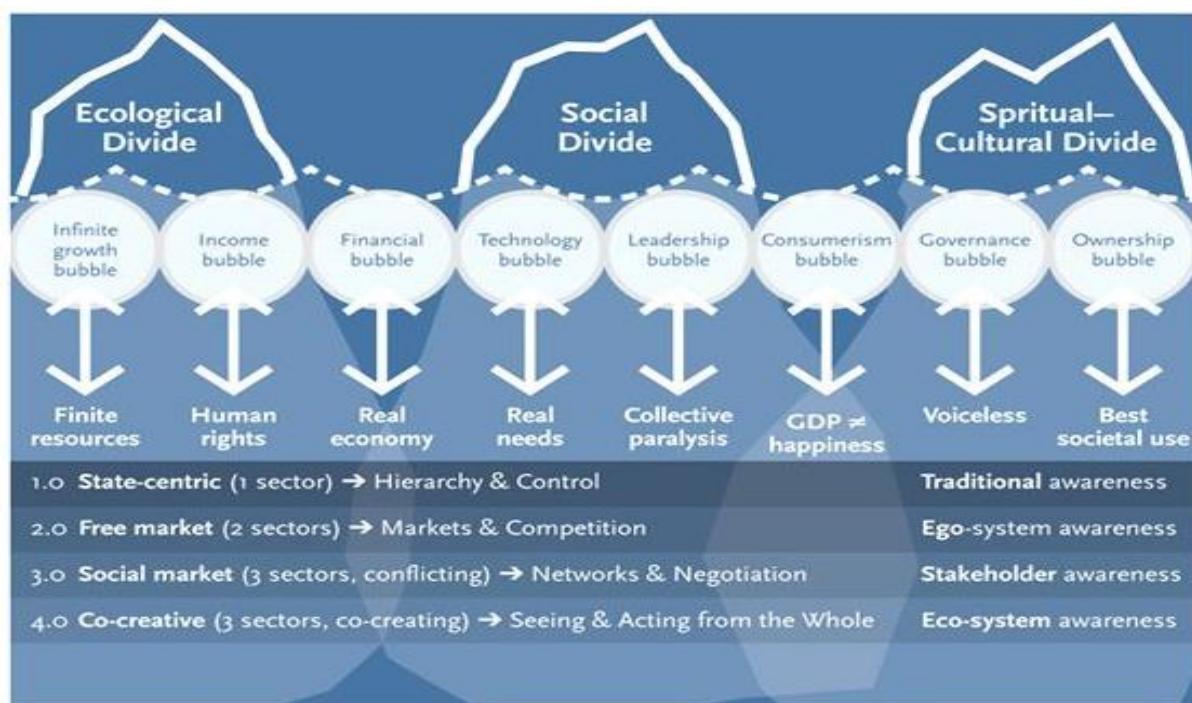


Figure 10: The Iceberg Model: A Surface of Symptoms and Structural Disconnects (Bubbles) Below It (Scharmer & Kaufer, 2013)

Figure 10: The Iceberg Model: A Surface of Symptoms and Structural Disconnects (Bubbles) Below It (Scharmer & Kaufer, 2013) demonstrates that “the global community has a major ecological divide due to using up more resources than it can sustain, a social divide with many still dying of malnutrition and a spiritual-cultural divide with many individuals suffering from stress and depression” (Scharmer & Kaufer, 2013). The World Health Organisation stated that in “2000 more than twice as many people died from suicide as did in wars” (WHO, 2014). “Almost 1 million lives are lost yearly due to suicide, which translates to 3000 suicide deaths every day. For every person who completes a suicide, 20 or more may attempt to end his or her life” (WHO, 2012). “The burden of depression is 50% higher for females than males” (WHO, 2008). The global community is disconnected from reality, the decision making processes and or systems in use are not learning systems or the learning is fed back so late the decisions and actions have been made, the decision makers have moved on and never feel, see or even become aware of the consequential impact or externalities (Scharmer, 2010b).

CLARA (2014) re-analysed 15 years of online ELLI survey data researching learning and development with regards to personal resilience and learning power. They investigated how people can respond in a positive way to challenges, risks and uncertainty. This model is based on seven areas of learning power as depicted in Figure 11: Seven Dimensions of Learning Power (Adapted from The Crick Learning for Resilient Agency profile – CLARA, 2014). There is also a slider which shows how people show their openness of each dimension. The dependent end shows how fragile a person is in that dimension and the closed end shows how brittle they are. People, if motivated enough, can develop themselves in each of these dimensions to become resilient and more effective learners.

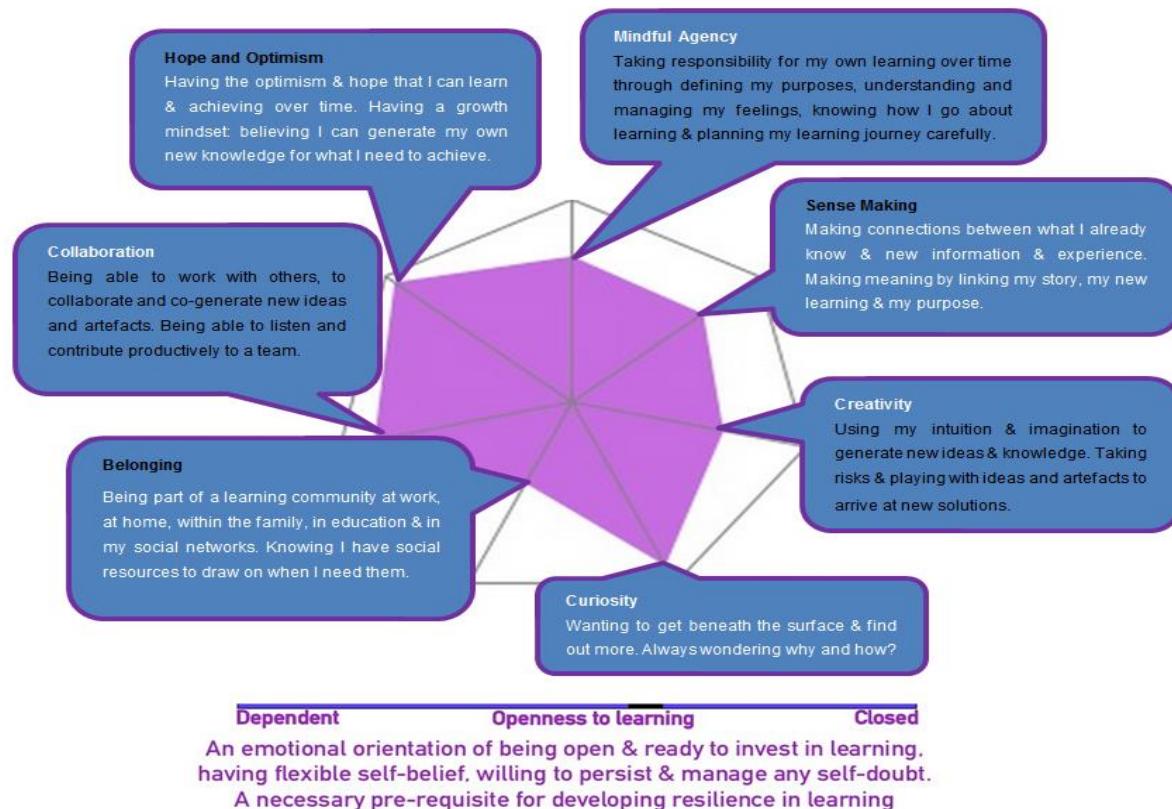


Figure 11: Seven Dimensions of Learning Power (Adapted from The Crick Learning for Resilient Agency profile – CLARA, 2014)

This model may accidentally support individuals to develop some of their wellbeing but does not support reconnection with their past to reflect, understand and set goals to move forwards to develop their wellbeing. This model supports learning development for resilience and is similar to the areas depicted in the NHS (2012). What is needed is a system that utilises all this research and adds to it to deliver a dedicated information communication system for

everyone which promotes individual design, reflection, S.M.A.R.T. actions and ownership as well as attaching emotion to motivation whilst developing a conscious understanding (Bailey, 2001; Goleman, 1996).

How to monitor ones wellbeing is still an uncertainty for the UK Government (NHS, 2012). A stress measuring tool used by the NHS does not give adequate information or direction for people to quickly be able to move forwards and to continue to monitor and learn about themselves (NHS, 2015). The success of a wellbeing system is much dependent on the adequacy of the questions asked and supportive process used (Goodwin, 2009; Hawkins, 2002; Zhu, 2007). The questions asked need to truly reflect wellbeing in an effective way for the benefit of the individual and their relationships (Alexiou & Zamenopoulos, 2008; Zhu, 2007). The questions also need to promote self-evaluation and recognition of wellbeing within the community (Savolainen, 2011; Wallis, 2012). The New Economics Foundation states that people evaluate their own wellbeing in two ways by summarising reflectively over time or looking at how their daily psyche or emotional wellbeing is affecting them, roughly over the last 24 hours (Abdallah et al., 2009). The more distance there is between feelings and reflection the better we are at putting that information into context for overall reflection (Abdallah et al., 2009; Swindal, 2012). Prochaska, Norcross, & DiClemente (1994) state that people with emotional issues can change for good but serious issues such as the death of someone close can cause people to slip back.

Goleman (1996) suggests emotional intelligence is the key factor and that if people can relearn by replaying and understanding, the traumatic issues and symptoms within a safe environment they can regain control and gain enough understanding to be able to cope with another setback. Knight & McNaught (2011) suggest a wellbeing focus should be taken to support people through this time of economic and environmental change. Literature is highlighting some key pointers for wellbeing around relationships with love and attachment; lifestyle with basic needs, energy, and relaxation; cooperation and understanding where you feel part of the community entailing a range of fields such challenges, usefulness, decision-making, changes, commitments, involvement, respect, being valued, point of view, trust, learning, development, giving and supporting; these areas build up our confidence, we experience positive emotions and happiness as we move through our lives (Akhtar, 2012;

Bergdolt, 2008; Covey et al., 2012; Hawkins, 2002; Kabat-Zinn, 2005; Knight & McNaught, 2011; Maslow, 1987, 1993, 2010; Maturana & Varela, 1998; Peters, 2013; Rock, 2009; Seligman, 2003; Sennett, 2012; Siegel, 2007, 2010, 2013; Siegel & Bryson, 2012; Siegel & Hartzell, 2004; Tolle, 2005; Wodzianski, 2008). What literature also states is that we can be more in control of our wellbeing by being masters of our bodies, minds and spirits (Akhtar, 2012; Bergdolt, 2008; Guo & Powell, 2001; Hawkins, 2002; Kabat-Zinn, 2005; Knight & McNaught, 2011; Lipton, 2008; Lipton & Bhaerman, 2009; Maslow, 2010; Maturana & Varela, 1998; Peters, 2013; Rock, 2009; Siegel, 2007, 2010, 2013; Tolle, 2005; Wodzianski, 2008).

How can wellbeing be developed by individuals in an effective way? Mills et al. (2013) state that positive psychology should be used as it involves “resilience, appreciative enquiry, empowerment, gratitude, psychological capital, work engagement, supervisor support, organisational support, positive teamwork, co-worker relations and positive leadership.” Ouweeneel et al (2013) argue that workplace interventions using positive psychology “will only work when employees want it too” and that “it is up to supervisors ... to make sure those who experience lower levels of wellbeing get motivated”. Siegel (2010a) suggests that people suffering from low wellbeing need to be able to reflect on why they are suffering from low wellbeing and to do that they may firstly need to work through being more aware and in control of their mind and body. This is supported and enhanced by encouraging people to live in the present (Blackstone, 1997; Kabat-Zinn, 2005; Tolle, 2005). Siegel (2013) stresses the active need for people to be in control of their own wellbeing and life with self-determination and making their own decisions. People are part of organisations and their state of wellbeing can have a major effect on the success of them (Clark & Baker, 2004; Mills et al., 2013; Project Team, 2013; Wodzianski, 2008b). People and organisations are both unique and complex and they interact together in unique ways (Mowles, Stacey & Griffin, 2008; Oliver & Roos, 2000; Putnam, 2004; Szostak, 2011). How people are supported and the questions asked to set people on the right track are vitally important (Lo, 2011). Hawkins (2002) states that wellbeing questions need careful calibration to reflect the complexity, motivation, goals and awareness level. We share this planet and need to respect other people’s needs and live in harmony (Chopra, 2011; Guo & Powell, 2001; Putnam et al., 2005). So as to understand what questions to communicate, we need to further understand wellbeing and step further into the realms of complexity, biology, beliefs and behaviour (Lipton & Bhaerman, 2009; Lo, 2011).

Lipton & Bhaerman (2009) and Maturana & Varela (1992) relate evolutionary development to society with its political battles and economic changes. Just as cells work together for the functioning of the body, beliefs can make spontaneous changes to the wellbeing of the body, you can be aware of how to care for your body, mind and energy to fight disease and manage your wellbeing (Lipton, 2008; Lipton & Bhaerman, 2009). Everyone is part of the overall field of consciousness and we are all part of evolution as human and environmental complexity emerges to find attractor patterns (Bailey, 2001; Hawkins, 2002). This drive for survival is evolution creating a unique path of local interactions between humanity and the environment (Lipton & Bhaerman, 2009). Tolle (2005) suggests that if humanity cannot learn to use bygone wisdom and challenge the community struggles to learn to love all, humanity could well become extinct just as other species before us.

What we believe affects the plans we make and the routes we take (bailey, 2001; Hawkins, 2002). If we always work in the negative creating dysfunctional behaviour so do our communities become dysfunctional and as such humanity follows suit (Putnam, 2004). If we believe in a loving society we sow the seeds of love and create a loving functional community (Bailey, 2001; Hawkins, 2002). ‘The science of happiness’ has broadened its horizon to include spiritual or religious practice, positive thinking and mindfulness to encapsulate these more modern terms within wellbeing (Kabat-Zinn, 2005; Seligman, 2011; Williams & Penman, 2011). Community/social spirit should also be added into the term just as the Confucians thought that social virtues were an essence for wellbeing (Aristotle, 2009; Hawkins, 2002). People could become aware of societal needs which can be gained through spiritual practice or volunteering or by playing a participative societal role in the local community (Putnam, 2004; Hawkins, 2002). Funding is being cut back from community groups, many have given up and closed, some are positively seeking new look for alternative routes that do not rely on that funding (Quirk, 2007). They need local community participation to find unique positive partnerships and new ways of working to survive and grow. These positive interactions are shared, repeated and reflect globally as community organisations evolve into a new species (Lipton & Bhaerman, 2009).

Community

“Whatever the problem, community is the answer” (“The Berkana Institute,” 2012). Communities have been researched from the perspectives of business innovation, knowledge creation and social innovation (Chesbrough, Ahern, Finn, & Guerraz, 2006; Cruickshank, 2010). Most research studies, however, come with descriptive definitions of what a community is, based on its purpose (Chu & Chan, 2009 to be added). However, few studies adopt a more generic definition of community which focuses on what community is in terms of how it emerges and develops (Wheatley & Frieze, 2006; Wheatley & Kellner-Rogers, 1998). Complexity science looks at communities as the ‘emergent property’ of complex social networks, not equivalent to a social network but rather the outcome of interactions within networks (Gilchrist, 2004). Communities are different from networks as the people in communities make a commitment to be there for each other and they participate not only for their own needs but for the need of others (Wheatley & Frieze, 2006).

People still have to work at issues and sometimes communities fall apart because they do not take the time to fully understand, to recognise the cause and effect and ignore common sense (Goldratt, 2008; Putnam et al., 2005). Putnam (2004) states that people in communities relate to each other and share these strong feelings, acknowledging each other’s contribution. The common interest increases the wellbeing within the community or neighbourhood which is proven to reduce crime (Putnam et al., 2005). “It is harder for people to commit a crime against someone they know in their community and as such participating within the community increases the stability” as successful co-creation causes a reluctance to attack individuals you have shared achievement with and instead supports the development of community ownership (Putnam et al., 2005). A community provides benefits to those within it, giving them a greater voice and offering them to be part of improving their own wellbeing (Bailey, 2001). The roles can effectively complement each other to build a valuable bond created with trust, commitment and respect which can bridge differences with reasoning to reach shared agreements (Bailey, 2001; Covey et al., 2012). Creative dialogues take place to cope with complex community problems. Communities share stories and assumptions, they understand their community needs, they reflect and learn to build the appropriate community structure and benefits, harmonising and creating a common sense of purpose (Bohm, 2004; Rimer, 2011). The young participate in dialogue and learn from the old as they become the leaders of tomorrow (Allott, 2011; Bailey, 2001). It is a mass of complex

connections that encourage people to trust, commit and respect their community to ensure its wellbeing (Murphy, 2011; Putnam, 2004; Smith, 2013).

Participants are involved in deciding their own futures, the successes are theirs, the challenges are shared with people they know and understand (Lo, 2011; Shneiderman, 2008). They are responsible for each other, a partnership and they possess the efficacy to succeed (Berg, Coman, & Schensul, 2009; Ouweneel et al., 2013). If the focus for involvement is individual wellbeing the community needs are formed from each individual's wellbeing needs. Why do we then ask communities questions in audits that individuals often do not even understand Build the Capacity of the Third Sector (National Audit Office, 2010). Burns & Taylor, (2001) suggest fourteen different audits with different questions all of which only include a morsel of what is important to each community member. How can we benchmark community need, success and measure, the distance travelled? Knight & McNaught (2011) recommend that individuals should be able to access ways of developing their wellbeing but it is complex and subjective to individual's feelings. However, individuals form the communities so this complex uniqueness needs to be captured.

Each individual identifies themselves with different communities, including virtual communities (Biti, 2008; Fuller, 2006). Community wellbeing usually reflects the commonality of its member's wellbeing which is what pulls them together, that shared understanding (Putnam et al., 2005). A community participation wellbeing audit gives individuals and the community organisation an understanding of its participant's greatest needs and the participant an understanding of the community organisations greatest needs. What should be part of an audit to gain insight into those needs? What system should be in place to support community participants to be more aware of others and the organisation needs? Supporting people highlights commonality and promotes creative dialogue to find successful routes forward (Bohm, 2004; Bohm & Peat, 2010). What is required is that we foster an environment where our awareness of ourselves and of our surroundings is actively developed. This, however, is not enough; in addition, we need to observe the conditions under which the quality of conversation is maintained, to encourage new linguistic distinctions based on new experiences and awareness to emerge (Bohm, 2004; Bohm & Peat, 2010; Putnam et al., 2005). Improving quality of conversations means improving our understanding of others, of others

views and assumptions (Sice & French, 2004). Dialogue is important where we pursue a generative space encouraging opening up and engaging ourselves in listening with no other purpose than to hear what it is that is being said, whilst trying consciously to suspend our assumptions and judgements (Bohm, 2004; Bohm & Peat, 2010). What is said and when it is said can strongly influence peoples decision making or tipping points to make a decision (Gladwell, 2001).

Literature suggests that trust needs to be evident in any research or audit held with a community as “high-trust organisations outperform low-trust organisations by nearly three times” (Covey et al., 2012). Professor Muhammad Yunus set up his own bank, Grameen Bank, to help the poor in Bangladesh, especially women to set up their own businesses to gain independence as the existing banks would not trust them (Kickul, Terjesen, Bacq, & Griffiths, 2012). The Grameen Bank was repaid 98% of the small business loans in comparison to 88% in traditional banks (Covey et al., 2012). If Yunus had not recognised the starvation in the community, started up a dialogue to see what was needed to overcome the issues and trusted the community more than 8 million borrowers of over \$6 billion in loans would have not have happened in Bangladesh (Covey et al., 2012; Kickul et al., 2012). Communities can benefit from trust and dialogue to overcome issues (Bohm, 2004; Covey et al., 2012). It would also be more effective for government, the public and private sectors to link into wellbeing audits to collaboratively overcome issues (Liebowitz, 2006). Funding should be focused dependent upon the wellbeing audit outcomes and suggestions of remedy (Batley, 2011; Dollery, Grant, & Crase, 2011; Sanders & Stappers, 2008). The wellbeing audits are individual to each person so only the high concerns become a focus and common suggestions for remedy (Batley & Rose, 2011; Pearson & Saunders, 2006).

Trust, interest, commitment and respect suggest a fit with Maslow’s hierarchy of needs and identification with a paradigm of oneness, rather than division (Hawkins, 2002; Abraham Harold Maslow, 1970). A community can pull together and enhance its environment or a community can fight against each other and destroy their environment (Christen & Schmidt, 2011). We can clearly see this throughout history. Society holds the key to totally wipe out humanity just as it holds the key to enhance and develop it into a world of sharing, supporting, caring and positive living (Bell & Morse, 2011; Kim, 2011). People and

communities who are not aware of the greater needs of humanity a only focus on their own selfish actions to satisfy an immediate need of greed without caring about the long term damage to humanity, the hatred developed and never ending cycle of destruction (Bergdolt, 2008; Dimitrov, 2003). The wellbeing of communities much depends upon the wellbeing of individuals (Ardichvili et al., 2003; Kozinets, 2010). Individual awareness of themselves and others is a key to success. If individuals look after their wellbeing and develop their awareness of others needs they support each other and their communities (Gilchrist, 2004; Putnam et al., 2005).

Communities can be seen as organisations of local people where that organisation works well you have harmony and where that organisation does not work well you have dysfunction (Fernandez & Pitts, 2011; Martin, Gonzalez, Juvina, & Lebriere, 2013; Rose, 2011). Often wellbeing has been neglected in organisations and the workplace environment (Dewe & Cooper, 2012, p.60). Kesebir & Diener (2008, p. 118) and Dewe & Cooper (2012 p.66) state that wellbeing can be assessed by an overview of life satisfaction, a positive balance of happiness and satisfaction with the key interactive people/influencers in an individual's life. Organisations and workplaces are a complex mix when associated with wellbeing (Gordon, 2007; Kesteven, 1995; Thomas, Achilleas, Dimitris, & Antonios, 2011). A wellbeing assessment should encourage positive behaviour (Ouweneel et al., 2013). Key focuses on organisational wellbeing and behaviour are satisfaction with their role in the organisation; positivity to enhance individual happiness and the key interactors/influencers play a major part in the wellbeing of individuals and the organisation as a whole (Bell & Morse, 2011; Wodzianski, 2008). An organisation with people at the helm who do not give positivity, e.g., praise their employees/organisational participants and give ongoing positive encourage, has dissatisfaction and dysfunction (Chu et al., 2012; Mongrain & Anselmo-Matthews, 2012). "Data from the HSE psychosocial working conditions survey showed 16 percent (4 million) workers described their jobs as extremely or very stressful" (Dewe & Cooper, 2012; Packman & Webster, 2009). This can be increased by ongoing redundancies, difficulties in gaining employment and keeping employment.

1.3. Participation

A participant is a person who contributes towards achieving a common community goal. Participants within a community and or social setting are often termed as social capital. In this research a participant is any of the following: a volunteer, work experience, work team challenges, an employee on a government employment scheme, committee or board member, someone doing reparation or community service, anyone who gets involved in the community by giving or supporting. In all of these there is a commonality and centrality of local social interactions for a positive community cause or common goal (Maak, 2007; Martin et al., 2013). ‘These relationships and interactions can evolve into wellbeing in communities’ (Putnam et al., 2005). Through participation relationships develop pulling together individuals who were previously isolated into a community identity (Goodwin et al., 2012). The connection of local social interaction supports the development of wellbeing in the individuals (Bergdolt, 2008). If individuals are brought together dependent upon their characteristics to create effective participation and co-create they make the connections more powerful and sustainable (Peci, Figale, & Sobral, 2011; Sanders & Stappers, 2008; Scharmer, 2010a). When participation evolves into wellbeing, it is via achievable goal setting in the community which supports their own wellbeing (Bergdolt, 2008; MacKerron & Mourato, 2013).

Figure 12: Mini Case Study 3 – Out of School Club (George & Sice, 2014) depicts an Out of School Club case study. Before the club was set up it was difficult for parents to gain appropriate childcare as the child-minders were full or did not collect from that school, family members all worked and they were having to reduce their hours work or leave work early and build up the time elsewhere or drop them at alternative childcare and go back to work increasing the length of the working day. The committee firstly applied for and set up an after school club. When that was proven successful they applied for funding and set up a breakfast club. When that was proven successful they applied for funding and set up a holiday club. So they set goals in a stepped approach and as each was achieved they built on that success and set another goal (Ouweneel, 2013). They felt that success which motivated them to carry on. They co-created and improved their wellbeing with effective childcare and a great sense of achievement (Kimbell, 2011; Lozano, 2011). What communities collectively agree to achieve is improved quality of life, freedom, human rights and emotional wellbeing (World Bank,

2005). Individuals need to feel their participation is contributing to either their needs or community need and can be a risky decision causing more stress in the short term (Dimitrov,

Mini Case Study 3

Having been a community participant on numerous occasions I can honestly say that my wellbeing was of questionable interest. So long as I came and did my job that was what was needed. However, just as community organisations need to have participants that are good for the organisation it is important for the organisation to be good for the individual. For example as a newly formed committee for a start-up Out of School Club we had great difficulty in recruiting other parents to spread the work load. The realisation was that other parents just needed the out of school club service for their children but were not as desperate as the three of us who volunteered to set it up. We had a couple of mums who came for a few months and left as the pressure was too much. We captured the funding in phases as we successfully managed to set up each new provision. We thrived upon our achievement and it kept us going planning for the next phase. It took three years to get the club up and running as a full service with breakfast, after school and holiday provision and after three years it was a successful profit making charity. However, the three of us running it were not looking after our own wellbeing working fulltime, looking after our children and managing the club on top. We initially participated in this community role due to a high need for childcare, at an affordable price, so we could work. We could understand why the other working parents did not want to participate as we were stressed but we thrived on the achievement. We all had high pressure jobs and were used to working to targets and gaining from the satisfaction of success. Once we had completed the set up and expansion of the club to full provision we desperately needed some relief as our wellbeing was being pushed further and further to the back. The initial tipping point to participate relates to Maslow's needs, e.g. the need for affordable childcare to work. The tipping point to continue was the successful achievement of each phase. The tipping point to step down also relates to Maslow's needs as we were stressed, were no longer gaining the enjoyment of achievement as the club was fully set up and needed to improve our wellbeing. So we looked for a private company to take over the Out of School Club and donated the profit to the school. We took pride in what we achieved. This success is a lasting satisfaction that will always be there for us to reflect upon. We still had use of the service but regained our precious time with the family, provided employment for local people, reduced our stress tenfold and proudly gave a donation to the school.

Figure 12: Mini Case Study 3 – Out of School Club (George & Sice, 2014)

Peoples needs change dependent upon how life interacts with them personally, e.g. employment, caring needs of family, children, locality, etc. (Cheung, 2011; Sangiorgi, 2011). Some people participate because one of their loved one has either left them or died and they need to feel connected or loved by others. They need to gain love, trust, respect and commitment from other people. These are the same needs communities request from participants (Gilchrist, 2009). Reasons for participating link to Maslow's hierarchy of needs right up to the top where people participate to support their potential through knowledge and fulfilment (Maslow, 2010).

1.4. Synergy of Wellbeing and Community Participation

People's needs change and so their wellbeing goals change. A wellbeing system is needed that can cope with these changes in a participants life and help them to move forwards using their prior positive experiences to achieve this. This is a complex system of ever changing local social interactions, involving co-creation between new community participants and the existing community members who form the community organisations (George & Sice, 2014). Matching the community participant goals with the communities effectively is the challenge so as to ensure the wellbeing of both (Jackson, 2010). Community participation should not be allowed to diminish an individual's wellbeing neither should it create unbearable stress for a community organisation. Community organisations need to monitor and assess community participant's wellbeing and their own (Ngana, 2014; Upshur, 2005). Wellbeing needs to effectively link participants and organisations so as to co-create sustainability and improve participants' quality of life within the present economic and environmental constraints (Ihlen & Roper, 2014; Kira & van Eijnatten, 2011). Figure 12: Mini Case Study 3 – Out of School Club (George & Sice, 2014) shows this wellbeing link. If community participants are fully aware of the limitations of a role they are unlikely to be disappointed mid-role (Einolf & Chambré, 2011). In the same way the organisation keeps a happy medium and the participants do not suffer from community participant dissatisfaction (Dimitrov, 2003). Wellbeing links to our quality of life. Local and central government use information gathered locally through audits to assess how satisfied people are and what is needed to improve satisfaction (National Audit Office, 2010). Community participation audits are so varied (Burns & Taylor, 2001). Burns & Taylor (2001) state a variety of audits enhance "community groups ability to run in an effective and inclusive way?" but if the group were running effectively and inclusively this

would reflect within their wellbeing scaling (Gradl & Kühberger, 2013). Surely auditing against general wellbeing scaling's for participation would be simpler (Gradl & Kühberger, 2013). Participants can then highlight whatever is affecting their wellbeing rather than being channelled towards areas they had not really thought of as being an issue (Coffey & Dugdill, 2006).

ICT systems can group the common themes raised by individuals so that the greatest concerns are focused for action (Nielsen & Loranger, 2006; Nikhil, Brian, Jeannie, & Heiko, 2011; Peris, Garcia-Melon, Gomez-Navarro, & Calabuig, 2013). If it has not been raised then it clearly is not a priority in that person's life at that point in time (Dimitrov, 2003). It is difficult to motivate someone to be involved in something where they cannot see the benefits, e.g. if you state there is a shortage of out of school childcare and they do not have a child you find it difficult to motivate that person to do something about the shortage (Montoya, Massey, & Lockwood, 2011). If you ask someone if there is a need for childcare in their area they might well say no even though there is as they are unaware (Fantino & Navarro, 2011; Martin et al., 2013). Questions need to be asked in a way that the individual can tailor the response to themselves (Lockwood, 2010). Often audits are behind the times with the issues affecting people and sometimes encourage people to dwell on issues that are already solved (Beckwith, 2011). Individuals need change as does the economy and the environment (Wheatley & Kellner-Rogers, 1998). Audits need to be able to reflect those changes dependent upon locality (Benyon, 2010). Understandably there needs to be a balance just as people need a balance in their day to day wellbeing (Stacey, 2007). However, community participation has been evidenced as increasing happiness and connections with people (Raphael et al., 1999). Naturally community participation can enhance individuals' wellbeing by meeting the needs that cannot be fulfilled within those individuals' existing local social interactions (Fuller et al., 2006). Energy pervades these social interactions, including community spirit which is the energy that flows within community groups (Sice, Mosekilde, & French, 2008).

Individual wellbeing cannot be found alone, it needs communities (Putnam et al., 2005). Love and caring form bonds which form communities (Maturana & Bunnell, 1999). Communities form society which in turn forms humanity (Lipton & Bhaerman, 2009). These complex interactions cause evolution as we influence each other (Putnam, 2004).

Developments in complexity science such as chaos and quantum theory, the study of consciousness and psychology are pointing towards a new paradigm of oneness, where everything is connected (Baets, 2006; Bethge & Faust, 2011; rare-leadership.org, 2014). Energy pervades these connections, including community spirit, the energy that flows within community groups (Covey et al., 2012; Mavrofides, Kameas, Papageorgiou, & Los, 2011). An individual's awareness and behaviour creates a ripple effect throughout humanity as everything is linked (Di Paolo, 2005). Wallis (2012) questions how to move existing theories from fragmentation to an efficacious system with practical measures, changing concepts whilst developing validation processes.

1.5. Conclusion

A systemic approach is needed to support and develop individual's wellbeing (Burns & Taylor, 2001; Buxton, 2007; Yoon & Chung, 2011). The approach needs to incorporate satisfaction of each individuals needs relevant to them and their community (Burns & Taylor, 2001; Maddi et al., 1972; Maslow, 2010; rare-leadership.org, 2014). Third sector organisations need to recognise community participant's wellbeing as a tipping point to participation and enhance the experience so as to ensure prolonged participation and satisfaction. Community participants need to recognize the Third Sector as an option to enhance areas of their wellbeing and support relationship development which can lead to changes in the brain and the way they perceive life and their wellbeing. The concept needs to bring together existing fragmentation of theories to develop an effective system with practical measures whilst supporting developmental changes within both individuals and the organizations (Akhtar, 2012; Becker & Rauber, 2011; Burns & Taylor, 2001; Mills et al., 2013; Salmon & Maslow, 2007; Seligman, 2011). Literature suggestions of twenty themed areas for wellbeing are; usefulness, energy, support, confidence, involvement, relaxation, happiness, giving, decision-making, changes, relationships, lifestyle, respect, emotions (feelings), challenges, point of view, trust, commitment, valued and learning & development. The process needs to stimulate the mind to reflect, to use successful actions from the past to move forwards, to incorporate mindfulness (view from the others standing), to enable measuring and monitoring, to look to be able to focus on any or all twenty areas of wellbeing, to support learning and awareness so we become masters of our behaviour, body and mind (Williams, 2011). Meditation and

mindsight support positivity, calming and reflection (Siegel, 2010; Germer, 2009; Kabat-Zinn, 2005; Tolle, 2005).

Wellbeing provides a focus for individual participants and communities. Wellbeing data over time can not only be used to measure an individuals' distance travelled but also that of a community, a country and humanity's distance travelled. The matching and setting of wellbeing goals, monitoring and managing the distance travelled motivates individuals and helps them to self-organize and develop, see, review and take pride in their achievements. This also helps to improve the organizations wellbeing and harmony (Lo, 2011). Disregard for others wellbeing has a ripple effect of catastrophe and disharmony (Mongrain & Anselmo-Matthews, 2012). We need to be aware of what we do and how it affects others (Lo, 2011). If we are always positive to others they reflect that positivity (Ouweneel et al., 2013). We can learn to love, trust, and respect and commit to each other and work in harmony (Bandler & Thomson, 2011). As the economy changes community organizations that are under threat of extinction need to evolve just as humanity evolves (Sanders & Stappers, 2008; Scharmer & Kaufer, 2013). Positive people live happier and longer lives (Rimer, 2011). Positive participants are needed to create positive communities and organisations that support each other to achieve success (Hooge et al., 2014; Seligman, 2003). To achieve success with an information communication system there are a number of motivators that can be utilised such motivational colour/s, music and rich pictures (Bonds, 1999; Levitin, 2008; Wills, 2006). To support participants to relax during the use of information communication systems physical, mental and breathing exercises can be utilised along with calming colour/s, music and rich pictures (Bonds, 1999; Levitin, 2008; Rohnfeld, 2011; Siegel, 2012; Wills, 2006).

Chapter 2: Synergy of Design and Complexity for Wellbeing in a Community Context

2.1. Introduction

Chapter two investigates the rationale of complexity and design theories and their synergy with relation to the development of a themed framework for wellbeing in communities. It looks at current practice in wellbeing recruitment in the Third Sector and research in the field. It provides the research question, aims, objectives and chapter conclusion for the rationale, question, aims and objectives.

2.2. Complexity theory

The complexity perspective stems from developments in modern science such as chaos and quantum theory, the study of consciousness and psychology. These developments are pointing towards a new paradigm of oneness, where everything is connected to everything else. Energy pervades these connections. Lack of recognition for these connections causes paradigm blindness (Hawkins, 2004, p.257). The invisible energy field that is everywhere is what religion and ancient traditions often refer to as spiritual dimension. It is science and ancient wisdom, the material and the spiritual coming together, united by similar insight. This includes community spirit and the energy that flows within community groups. This energy depends upon the individuals involved in each community (Putnam, 2004). It can create positive and negative energy. The respect or lack of respect this energy is given can mean success or failure. Attractor patterns within communities are a key focus in this research. Positive energy supports wellbeing and creativity (Hawkins, 2004).

The day to day dynamics of life are complex with an array of knitted characteristics forming local social interactions (Dimitrov, 2003; Martin et al., 2013). The local social interactions emerge in turn into processes. These processes formulate activities known as social systems and or day to day phenomena (Dimitrov, 2000; Rowland, 2007). The social systems have a knock on effect causing more local social interactions and emergent processes (Alexiou & Zamenopoulos, 2008; Tait & Richardson, 2008). This research includes focus on local social interactions and emotions of community participants. Social interactions, emergent processes and consciousness effect wellbeing and are associated with quantum theory as these interactions and processes form mental activity which correlates to brain

behaviour (Stanford, 2015). Human thinking, level of understanding, feeling, energy, relationships, influence, the environment and timing from chaos, flow together to create local social interactions, which form patterns, sometimes unique patterns (Dimitrov; José-Rodrigo, 2011; Norman, 2011). These patterns change depending upon the scaling and or amount of each of the ingredients (Dimitrov & Kopra, 1998). Just like cooking an egg it depends on how you cook it and what you add as to whether you get a soufflé, omelette, scrambled, poached, boiled, fried, hard, and soft, over or under cooked egg for your meal. In the dynamics of community participation the ingredients come from that same bottom up approach although there are many more characteristics so it is much more complex (Simon & Stephen, 2011; Wolfgang, 2007).

There are two major complex strands to community participation with individual members of the community and the community organisations themselves. You can look further into this as legislation, the government and politics also influence how individuals and community organisations behave. Although the majority of community organisations have been released from the tight wings of local authorities they still have to abide by the law they just don't have as much support to do that. However assumptions should not be made and too many restrictions limit the creativity of volunteers (Rimer, 2011). The challenge of a dysfunctional community organisation could be appealing to a member of the community. They may feel bored and frustrated, that a dysfunctional organisation may give them the challenge or experience they need to make them feel fulfilled (Coonor, 1994; Wallis, 2012). Dimitrov & Wright (2011) believe emotions play a prime role in emergent phenomena and self-organisation. The complex dynamics of which are interwoven energies, forces, thoughts and feelings. Complexity theory offers an approach which represents the learning and innovation dynamics of social systems as an emergent rather than a managed process and offers tools for dynamic analysis of systems behaviour (Small, Sice, & Venus, 2008). However, rigorous models are yet to be developed as the impact of the insights of complexity theory into human affairs and the use and role of Information Communication Technologies and Web technologies have not been fully appreciated (Stacey, 2010).

Communities are social systems where people make a commitment to be there for each other and they participate not only for their own needs but for the needs of others

(Putnam, 2004). Thus, it is important to consider communities as an emergent phenomenon and take a more generative perspective in terms of seeking to understand how communities function from within (Putnam et al., 2005). It is equally important to consider what makes people contribute to each other and be there for each other in an area of common interest. What do people need to support and develop their own wellbeing as well as the community organisation? Complexity often takes a systematic overview for understanding and development (Peris et al., 2013). Complexity leads the way with design for complex multifaceted information systems that link the complex systems and behaviour of a human, the way humans think, react to emotional signals in the pallor of the skin as temperature changes occur, sweating, change in respiration (Plethysmography), voice changes and manage the ever growing knowledge of non-verbal communication and computational emotion recognition (Takahashi; Namikawa; Hashimoto, 2012). Systems can recognise emotion in text (Quan & Ren, 2010). The rich interactive qualities and experiences people have need embracing to utilise and create emergent technologies such as the Milo experiment shown by TEDX (Chapman, 2005; Molyneux, 2010).

Complexity supports systems that support effective reflection, self-awareness development, along with mindfulness and mindsight (Fisher et al, eds., 2009 p.191-197). What do people understand from language? Can people's uniqueness be made sense of through an idiosyncratic language? This infinite uniqueness rather than being a division can be a unification to develop a system of this type (Kelley, 2001; Salvatore et al, Eds., 2013). The complexities of human computer interaction evolve into usable, effective systems that help people as they change and cope with the ever changing environment (Burnes, 2009; Benyon, 2010; Gill, 2008). A system that can incorporate tipping points helps individuals to move forwards and achieve (Gladwell, 2001). Positivity is a key to change in individuals and in organisational behaviour (Brooks, 2009, pp22-4; Hooge et al., 2014). Can a system be used to change negativity to positivity? Can achievement and the option to visualise this be a key? Nervousness/panic can cause hyperventilation as can colour, pictures, exercise, and types of music but they can also help to calm people and help develop resilience (Heath & Heath, 2010; MacDonald et al., 2012; Mills et al., 2013). A design to take on board the complexity of wellbeing needs to be human centred (Lin et al, 2011; Parker & Wall, 1998; Sangiorgi, 2011). A wellbeing design must work with an individual's need and develop mental toughness

(Clough, & Strycharczyk, 2014). This kind of design can support individuals as well as groups and organisations to move forwards positively (Brooks, 2009; Faust, 2009; Lo, 2011). ‘Information gained in research needs to be useful to people, the effects of the information must be observable, there needs to be a series of steps with intentional communication with truthful informational returns’(Case, Ed., 2012). As the Third Sector picks up more local government services they need to develop the skills to support individual wellbeing as well as the organisations wellbeing with the support of useful research (DCLG, 2010).

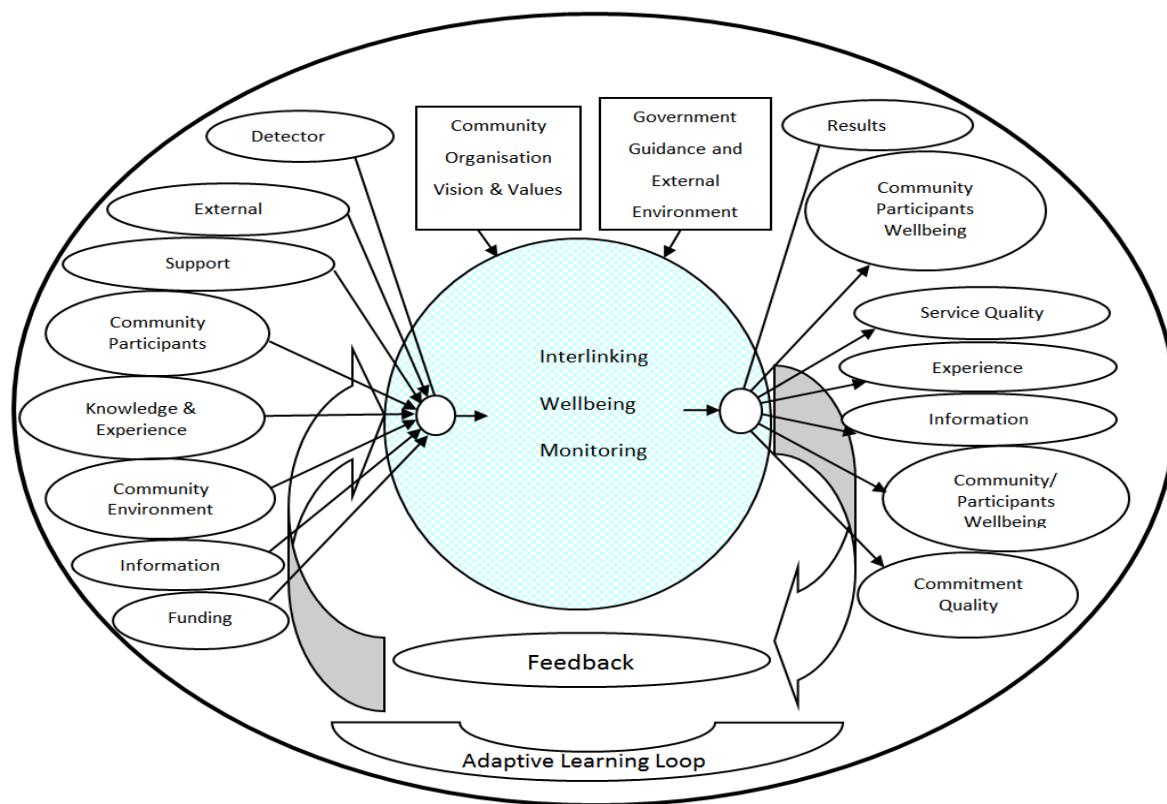


Figure 13: Complex Adaptive System for Wellbeing Community Participation (adapted from McElroy, 2003)

The Third Sector consists of numerous variable voluntary and community organisations and within them the people are unique, so is their wellbeing state and route to improvement. There is a great need in these organisations to find skilled community participants especially those in management roles with the relevant experience and knowledge to support major change in the sector. The government is putting high pressure on the third sector to improve accountability and become as transparent as the business sector (George, 2010 agrees with Third Sector, 2013). A solution needs to be researched and developed to ease this change, support growth and give community participants the much needed support whilst managing these changes to ensure their wellbeing and the wellbeing

of the third sector (Burnes, 2009; Connor, 1994; Kelley, 2001). The third sector needs to collaborate with the private sector to gain knowledge and experience. Information communication systems can be the key to supporting the development of a solution to wellbeing development, see Figure 13: Complex Adaptive System for Wellbeing Community Participation (adapted from McElroy, 2003) which exhibits an overview of the complex adaptive system. This suggests a holistic approach researching management, community participants and the public to ensure all are actively involved. Any results need to be analysed and evaluated to develop a seamless solution. The paradigm of oneness fits the complex adaptive system for wellbeing community participation as the numerous detectors feed into the wellbeing of community participants with daily environmental issues as well as individual wellbeing issues, experience and knowledge of the various community participants, external support, funding as well as stress from those multiple incoming variants. Those create local social interactions which can be positive or negative. How these interactions occur and the reactions of individuals create functional or dysfunctional community organisations.

Many community organisations have similarities in their constitutions which direct the way they carry out their business. As community organisations have numerous community participants who can be interchangeable if the wellbeing environment is poor how can improvements be made for accountability and transparency and how can the management of their assets be sustained (Community Matters, 2010)? To do this the community organisations need dedicated community participants to enhance day to day operations and business development and their needs to be an information communication system in place to capture and direct the daily changes of wellbeing within the organisation and its complex team of participants. Design could be used to support this complex issue.

2.3. Design Theory

Design appears to take complexity and all its fuzziness as a challenge, embracing it (Johnson et al., 2005). Design also needs to have established the array of knitted characteristics with their cause and effect (Alexiou & Zamenopoulos, 2008). If we consider the aspect of emergence of new forms of action serving the community and or its environment we are entering the discourse of design (Johnson et al., 2005). Design theory focuses on the

interactions and processes that enable individuals and communities to engage in the creation of new activities or infrastructures (*Participatory Design Principles and Practices* 1993).

Design in this instance focuses on the value of local social interactions to the community participants, the process, employees and management committee members in community organisations, knowledge management and society (Norman, 2011; Stacey, 2007). It also investigates the effects of the environment. It considers innovation to clarify complexity, scoping the objects, services and processes to collaboratively formulate a new way forward (Dimitrov, 2003; Norman, 2011). Design studies suggest that information and communication technologies can contribute to emergent social innovation (Fuller et al., 2006; Jason, 2004). Social innovation fits well with the third sector as it promotes involvement, empowerment and ownership (Boyle & Silver, 2005). These act as motivators for the acceptance of the research and new developed practices. The design perspective can lead to additional research and the use of human centred design to recommend development of the proposed artefact (Lin et al., 2011). Faust (2009) recommends the ingredients for positive design through utilising active involvement with narratives of rich discussion and discourse focused on moving forwards with decision paradigms to enhance and give some ownership throughout the design process thus developing a sustainable solution for change.

Krippendorff (2006, p.159) agrees with Osgood et al (1957) seeing semantic differential scaling as a new foundation within design, it allows participants to rate each adjective in an objective way giving measurable quantitative and qualitative results. It gives unique meaning for each participant being able to scale their thoughts and feelings towards each adjective, e.g., wellbeing can be broken down into 20 descriptors or themes. If the participants baseline scaling is taken as zero and their desired scaling as 100% it gives a standard format for measuring a participants distance travelled to their desired scaling over time (Gradl & Kühberger, 2013). This allows for change if a participant wants to change their desired scaling which humans do on a regular basis. This semantic differentiation enables semantic differentials to be obtained from objects such as the themed areas of wellbeing (Krippendorff, 2006). Swindal (2012) states “a proper philosophical analysis provides a complete and consistent systematisation of concepts for the description and explanation of things (objects) and their modifications over time”. Following in these footsteps using the semantic

differentiation for the wellbeing themes supports unique actions and changes in people's existence as causation continuously occurs (Claus Otto, 2001; Krippendorff, 2006; Swindal, 2012; Yoon & Chung, 2011). It also allows for the research to work effectively and gain valid usable data.

Design challenges simplistic information communication systems to provide unique services for individuals to enhance their experience (Lin et al., 2011). Using existing community participants to design through social innovation encourages engagement (Murray et al., 2010). Design can operate at a holistic and ecological level to promote understanding of the nature of the community context as well as at the level of detailed resolution (Steiner et al., 2014). It uses sophisticated systems of visualisation and representation to encourage cooperation, co-ownership and responsibility for new forms of service. No assumptions are made (Thackara, 2006). Research in the Third Sector needs narratives from experienced volunteers and community managers so they fully understand the field of research (Bethge & Faust, 2011; Mark et al., 2006). They fully understand the interrelationships and their emergence into social interactions giving them a deep understanding of meaning (Faust, 2009).

Designing an online system that interacts effectively with people means it needs to work for everyone (K. Goodwin, 2009). Design asks us to understand what we are trying to achieve by thorough research (Benyon, 2010). To fully understand wellbeing the literature needs to be fully understood. How humans interact with wellbeing and change, what motivates people, can a scenario be set up that could be adapted and developed online (Goodwin, 2009). When looking at wellbeing participants need to be able to develop their knowledge in the area, understand it, relate it to them so they become aware and gain wisdom (Gladwell, 2001; Thackara, 2006, p135; Thaler & Sunstein, 2008). Designing a human centred interacting online system follows the creative process of understanding, designing, envisioning and evaluation (Benyon, 2010, p 49). Designing the research to the same processes and understanding the use and potential online should support any future development. The best way to learn is through interaction, embodiment, live experiences (Thackara, 2006, p. 158). This is not a one size fits all and needs to be reflected in the research. Somehow wellbeing and community participation need to be carefully nudged together to create a learning

experience and a tipping point (Gladwell, 2001; Thackara, 2006; Thaler & Sunstein, 2008). What is designed for the online system needs to be feasible and similar to the research process so that participants can visualise a human computer interaction for the process they are involved in and questions asked so we have active experience, description and explanation (Benyon, 2010, p14; Swindal, 2012, p163).

2.4. Synergies

This research proposes to explore synergies between design and complexity thinking to develop understanding of the motivational factors in community participation and information communication systems. In particular it is looking at the development of a themed approach, the value of the information communicated and how this promotes wellbeing. Designing from complexity is about developing information communication systems for a supporting role in a people centred world (Thackara, 2006). Complexity and design theory favour the use of narratives with participants in the field of study. A method which is favoured by the third sector as it leads to more ownership of the outcome. To simplify, complexity theory can be used to make sense of the multitude of community participation tipping points to participate in the community and to withdraw, the thoughts and interactions behind these tipping points which can be unique to individuals (Gladwell, 2001). Design theory can utilise established complex data to design a complex system of solution focused IT interactions (Alexiou, 2008). The two theories work in partnership to investigate and develop frameworks for human performance technology. Complexity and design theory can embrace life phenomena to communicate and impact in life like emergent patterns (Dimitrov, 2003).

2.5. Research in Community Participation with Information Communication Systems

The main focus for community participation research is currently based on studies regarding communication and information sharing between the government and the public for political gain and government business. This research has generally monitored practice to gain insight and is largely based on observations of how members of the community engage with technology and follow up interviews with participants attending ICT workshops (Hill et al., 2008). Hodges (2009) assessed 4 volunteer websites in the USA for short term roles for those who want a taster first. The results showed a need for specific dates for one off

opportunities. It was noted that people should be able to search without needing to register. Also people were not happy at having to sift through the listing as it was time consuming. It was noted that there are plenty of opportunities for envelop filling and similar roles especially in the built up areas.

There is research focused on leadership and management of virtual community groups (Vaccaro & Madsen, 2009). This study is based on analysing observed practice and interviews. Waters & Williams, (2011) research analysed actual tweets to establish if the information was one or two way communication. Their results showed the majority of information was only one way as government tends to redirect questions to other sites showing a lack of communication. Absent in the studies outlined is the directing attention to how information communication can benefit wellbeing community participation as it emerges through local interactions, such as:

- Non-electoral organisation volunteer
- Active member of an organisation or group
- Fundraising participant through running/walking/cycling, etc.
- Other fund-raising for charitable purposes
- Community problem solving
- Asset management of community buildings
- Operational management
- Business development and management
- Service development
- Human resource management
- Financial management
- Projects
- Setting up an organisation
- Revitalising an organisation
- Saving a dysfunctional organisation from dissolution

It is important to focus on understanding the dimensions and quality of interactions within wellbeing and community participation. In particular those interactions that make members of the community initially decide to participate. What are the critical tipping points that motivate people to participate and what can be designed to exploit this through the use of an information communication system? A tipping point is a critical moment in a series of events when unprecedented changes occur quite rapidly with irreversible effect. The concept of ‘tipping points thinking’ connected with insights from complexity theory suggests that in well-connected networks minor changes can lead to significant change. Messages, behavioural traits, ideas and even products can act as an outbreak of an infectious disease (Gladwell, 2001). Hence the popular term ‘gone viral’. The tipping point in this research is an examining of social epidemics which can effect community participation (Gladwell, 2001). These social epidemics could be innovatively exploited to enhance community participation (Gladwell, 2001). Rowntree (2006) declared from their research that community participation needs to be repackaged in a way that encourages and enhances individual’s involvement.

There is research in other areas which is transferable and useful like the study on emotions and decision making (Schloesser et al., 2013). This research shows that predictions can be made on peoples immediate emotions as to whether they make a high risk decision or not. People give weight to their decisions dependent upon their need for fulfilment. To ensure wellbeing within community participation this requires careful management. People make decision upon what they feel most positively aroused and in control about. People feel positive and pulled towards something they think brings happiness (Helliwell et al., 2015). If people gain what they anticipate it raises the likelihood of them repeating the decision and encouraging others to do so. People hold positive or negative attitudes towards decision making and its influence on their life. This is seen as a gamble and often people feel more comfortable sticking with what they have rather than risking the unknown. If asked at a time where they are already feeling positive and ready to move forwards then a tipping point is more likely to be created with motivation to actively participate in the community. People follow their passions even if they do not have the competence to fulfil the quest as they search for that happiness feeling. This information could be used to positively guide questioning in the research (Whitney & Trosten-Bloom, 2010).

2.6. Current Practice in Wellbeing Recruitment in Community Participation

The Volunteer Centre website to support the public to gain community participation roles that fit with their wellbeing within Newcastle upon Tyne consists of an online quick search linked to Do-it (2015). This entails a drop down interest and a post code request which provides hundreds of opportunities. There is an advanced search with how many miles are you prepared to travel from your post code, types of roles you want to do or interests, activities or you can give a keyword and when you are available to volunteer, e.g., morning, afternoon or evening. You are then provided with a list of roles available. My initial check showed 109 roles available in a 5 mile radius for me to search through. The site also advertises special community participation “one off” roles to participate in. The site advises you to check out the monthly newsletter which lists pages and pages of “one off” opportunities (“Do-it: Volunteering made easy,” 2015; “Volunteer Centre Newcastle,” 2015). The paper version given out can be found in Appendices

Appendix: Positive Choices which collects data but you are matched by a staff member. The option does not give an ongoing measure of how the role is benefitting an individual and how they are benefitting the organisation. The search does not provide a participant with any information about the culture of the organisations.

Cultures are often what make or break community participation. This research is not about frightening people away from certain organisations it’s about ensuring those needing a challenge/change or just to be around people are supported by people who understand and can benefit them. Those who need more support can safely participate where they can thrive so that it is a WIN WIN situation whereby community participants and organisations have a feel of supportive interconnections of oneness whereby people develop together supporting each other. It is not a one off process it is an ongoing system as people are affected by interactions in their life which affect their community participation and where the organisation is affected by interactions which affect the community participants. All need to be more aware of how they affect each other. This research process concerns the development of an ongoing wellbeing aide to the complexity and success of both community participant and community organisation.

2.7. Research Question

The research addresses this question:

“What are the motivational tipping points in wellbeing in this instance for community participation and how can they be utilised to maximise active engagement?”

2.8. Research Aim

The aim of this research is to develop a wellbeing themed framework for conceptualising an information communication system for “effective wellbeing community participation applying both complexity and design perspectives” (George, 2011a). “This links to both the current UK ‘Empowering Local Communities’ policy agenda and to practical ways of developing wellbeing community participation; in keeping with the aspirations of the Big Society” (George, 2011b agrees with *Big Society - overview*, 2011). The research can also be a key to the Government 8% budget cuts to supporting mental health (Buchanan, 2015).

2.9. Research Objectives

The research is not just about enhancing communication with regards to wellbeing, it looks “at what essentially needs to be communicated and how that information can be utilised” in real and virtual spaces to create an effective way to maximise wellbeing in a community context (George, 2013). The initial research focuses on the Third Sector within the North East and Scottish Highlands. The 519 interviews from the Transfer of Innovation validate the research process which focuses in Scotland, Greece, Italy and Germany. The semi-structured interviews for wellbeing in a community context are focused in the North East. The framework designed can be promoted within a new website and or App for wellbeing communities to support their excellent work to develop wellbeing and community participation.

The research objectives are to:

- Critically evaluate the literature in wellbeing in a community context to identify relevant wellbeing themes;
- Evaluate the application of complexity and design insights into understanding wellbeing in a community context to inform the research method/paradigm;
- Conduct primary research to validate and further develop the themes and process;
- Design and evaluate a developmental framework for wellbeing in a community context;

These objectives can only be successful with the necessary ingredient which is people who are actively or tip into involvement in community participation in the Third Sector.

2.10. Conclusion

Complexity points to the new paradigm of oneness and links with the study of consciousness and psychology (rare-leadership.org, 2014; Salmon, 2007). Design embraces complexity in establishing knitted characteristics cause and effect and is well used in psychology, wellbeing and community research (Thackara, 2006). Complexity and design theory both favour the use of narratives as it encourages participants to take ownership (Dimitrov, 2003). Design and complexity theories make sense of the multitude of tipping points, thoughts and interactions behind the tipping points (Bowers, 2011; Gladwell, 2001; Steen, 2011). The rationale of complexity and design practices reflect upon the oneness paradigm in wellbeing (Alexiou, 2008). Current research in the area is reviewed to outline what the gaps are to support community participants' wellbeing. There is no quick and effective system that clearly matches wellbeing needs of the participant with community organisational wellbeing need. There is no system to manage and monitor individuals wellbeing or as they interact with a community organisation/s. Poor wellbeing can lead to stress and with more responsibility being put on the Third Sector with prior government services their needs to be appropriate support to manage and monitor this (DLCG, 2010; MIND, 2015). With stress being a major factor in mental health this research is desperately needed with the mental health service budget cuts of eight percent (Buchanan, 2015). The research needs to ensure the outcome is valid, trustworthy and reliable for all. The next chapter looks at the best fit for the methodology in this research.

Chapter 3: Methodology

3. Introduction

This chapter evidences the development of the methodology of the research in wellbeing in a community context following the paradigm of oneness. The indicative methodology, research approach, field of research and method are clarified. As wellbeing is complex mixed methods and design are used to support the route to validation of the research. The ethics is detailed and a conclusion drawn.

3.1. Research Paradigm

The research paradigm has come from complexity and oneness whereby everything is interconnected, as the literature review established the different aspects of wellbeing are interconnected. Figure 13: Complex Adaptive System for Wellbeing Community Participation (adapted from McElroy, 2003) in chapter two shows the complexity of participation in a community organisation. The wellbeing interacts with all the community participation and organisation detectors which interact with each other and have an effect on individuals' wellbeing. These local social interactions result in the creation of harmony or dysfunction in the organisation and wellbeing or negative wellbeing for the community participants (Martin, 2013). There is a temporal connection between past, present and future which is important (Large, 2015). More specifically in this research an individual's wellbeing is totally interconnected with everything else in their life, past, present and future (Siegel, 2010). Issues from the past can be triggered in the future by a local social interaction and can have a negative or positive response depending upon what is detected by that individual at the time of the trigger or tipping point (Dimitrov, 2003; Gladwell, 2001; Goodwin, 2012). Wellbeing can support development and tipping points into community participation. To let complexity lead us to the answer in this research design is used to develop a useable conclusion.

The research philosophy relates to the paradigm of oneness and links into quantum theory. Quantum theory evidences how the brain, mind, consciousness, social interactions and the way of life are all interlinked (Stapp, 2011). The local social interactions can cause positive stimuli or negative stimuli which effects how individual feel and respond (Siegel, 2012b). The research option needs to reproduce this and ensure reflection plays a part in any

wellbeing system proposed is used to reproduce prior positive experience to counteract feelings in the present.

Table 2: Philosophy Research Options and Examples that Fit with the Research

Philosophical Research Options	Definition and relation to this research
Empirical	"The information, knowledge and understanding are gathered through experience and direct data collection", (Black, 1999, p. 3), e.g., The European Leonardo Da Vinci Study
Non-empirical	Accepting third party research data and analysis as authority (Black, 1999, p. 4), e.g., Research data and analysis gained through the literature review
Inductive	The use of researcher reasoning, e.g., observing in interviews or a case studies, "data collected, patterns recognised and relationships proposed" (Black, 1999, p. 8), e.g. The open interviews with community participants and managers.
Deductive	A process of reasoning and neutral analysis of data, e.g., matching circumstances to the theory (Black, 1999, p. 9), e.g., from the wellbeing theory themes is used as a framework for data gathering.
Positivist (Scientific, Predictive approach)	The generalising of facts gained and observational experience to formulate findings, (Easterby-Smith, Thorpe, Jackson, & Easterby-Smith, 2008, p. 7), e.g., The use of questionnaires to identify parameters of personal profiles.
Interpretivist	The researcher interprets or translates what they observe, to develop an understanding of individuals behaviour and views (Stahl, 2014, p. 1), e.g., The semi-structured interviews involve interpretation by the interviewer to respond appropriately to participants so as to encourage them to develop actions from their reflections to improve their wellbeing.
Quantitative	"Gaining statistical information to analyse the proportions/ measurements of what is being investigated to qualify, prove or disprove what has been analysed e.g., surveys" (Easterby-Smith et al., 2008, p. 24), e.g., the large amount of statistical evidence gained from the Leonardo Da Vinci scaling's and questionnaires from all the semi-structured interviews.
Qualitative	Ingredients or components of qualitative information gained on the subject area are utilised to find relevant relationships. Used within "Naturalistic Field Research" whereby emphasis is on realism, heuristics and relevance (McKernan, 1996, p. 7), e.g. The semi-structured interviews, reflections and observations.

To develop the research methodology numerous philosophical research options are investigated as described in Table 2: Philosophy Research Options and Examples that Fit with the Research. The design needs to be rigorous and consistent to produce a credible research process (Sousa, 2014).

3.2. The Indicative Methodology – Mixed Methods and Design

This research follows the phenomena of oneness where social interactions interlink with variable tipping points dependent upon the individuals involved and their frame of mind at that point in time. The process is an iterative process and uses design to look for improvements. The approach under development can be used to enhance the wellbeing of individuals at local, national and international levels. People's behaviour and beliefs change and have differing effects upon their wellbeing. This supports a mixed method approach to capture information and data from numerous angles. It allows for continuity of the research to delve deeper and further validate the evidence. The focus is on:

- Social phenomena as emerging in the mutual interrelationships of the human condition, behaviour and the external environment;
- Working across boundaries in understanding and improving human organisations;
- Individual wellbeing as part of a wider context, which includes life style, behaviour, social and physical environments;
- Links between physical, mental and social aspects of wellbeing.

3.3. Method

The methods used need to work in partnership with the phenomena of oneness, the theory of complexity and design to evidence this interlinking. To stay within these boundaries mixed methods is used to effectively evaluate the subject area. Mixed methods are popular in the fields of "applied social science and evaluation" (Cameron, 2009). This research entails a mix of literature review, daily reflections collated, mini case studies, open interviews, discussion groups, email feedback, semi-structured interviews and questionnaires. The research provides both qualitative and quantitative within various phases of the research which is integrated to formulate the conclusion (Ivankova et al., 2009). Mixed methods are a

“powerful tool for investigating complex processes and systems” (Fetters et al., 2013). The programme of the research can be found in Appendix: PhD Research Gantt Chart.

Jason (2004) recommends that the research needs to be held outside of the university setting so the interaction is held where individuals feel comfortable in their social community setting. (Easterby-Smith et al., 2008) recommends successful research needs to personally produce learning and growth for the researcher whilst providing enhancement for the participants. The semi-structured interview provides enrichment for both the participant and the researcher. Effective management ensures information is fully appreciated and the knowledge process is understood. Each community participant has advantageous knowledge/information accumulated in their brain. This knowledge/information is often forgotten about or lost when the person leaves the organisation (Szulanski, 2003).

Table 3: Knowledge Creation (adapted from Liebowitz, 200, p.33)

Knowledge Creation	Method
Tacit ⇒ Tacit	Face to face meetings/ open and semi- structured interviews
Tacit ⇒ Explicit	E-mail
Explicit ⇒ Explicit	Internet/ email/ IMS/ printed documents/literature review
Explicit ⇒ Tacit	Depends on expertise/ experience/ mind-set of the participants but a key example would be after reflection when participants create action points from the knowledge gained

Knowledge can be tacit or explicit, some examples of how knowledge is created in this research is show in Table 3: Knowledge Creation (adapted from Liebowitz, 200, p.33). Each piece of knowledge gained is united with existing knowledge for improved understanding so that new knowledge is formed thus developing savvy research with repetitive cycles which can be utilised to gain competitive advantage in community participation (Liebowitz, 1999; Szulanski, 2003). McElroy (2003) considers three theories of knowledge management. The initial theory entails information communication systems as the focus, utilising best practice with continued improvements through sharing information. It does not need to be detailed just an overview pointer for wellbeing can make people more aware of each other's needs allowing for the enhancement of individuals and the organisational wellbeing. The

information can be utilised to enhance ongoing wellbeing practice ensuring tacit and explicit knowledge is transformed to use in creating new knowledge. The knowledge is transformed into information within an information communication system for sharing (McElroy, 2003). The second theory focuses on distributing the information enhancing decision making by utilising an information communication system. The focus is on the Ikujiro Nonaka SECI model which converts tacit to explicit knowledge (Review, 1998). The following stage depicts the flow of knowledge, e.g. it's management and freedom of use (McElroy, 2003). The final theory distinguishes between the engagement of managing knowledge, processing it and the usage. Knowledge is utilised with innovation to supportively respond to the organisations problems or issues. Information communication systems are used for enabling the process not to drive it. The capital intellect of the community participants and organisation is managed to enhance social innovation hence initiating a comprehensive platform for the development of a knowledge management in a wellbeing culture (Baets, 2006; McElroy, 2003).

The final theory is highly pertinent to the community sector due to the diversity of the community participants and managing the organisations. The primary focus in the community sector is people and promoting their wellbeing. This last theory is emergent as it starts with the grass roots, a bottom up approach. To model this theory of knowledge management in wellbeing with a community organisation is complex, classifying it as a Complex Adaptive System or CAS (Baets, 2006; McElroy, 2003). The CAS accepts all the complex ideas and opinions of the organisation and stakeholders whilst allowing for constant change to develop in wellbeing. As committee members are voted on or off the committee the nature of the community organisation and wellbeing is definitely one of change. Figure 13: Complex Adaptive System for Wellbeing Community Participation (adapted from McElroy, 2003) in Chapter Two depicts how the CAS diagram should logically size up with interactive wellbeing patterns forming (McKenzie & Winkelen, 2004). "Logic dominates which is a tacit form of collectable knowledge" (George, 2010 agrees with McKenzie & Winkelen, 2004).

The information/knowledge on wellbeing serves as the foundation for decision making which can go on to support wellbeing enhancement actions (Stacey, 2001; McKenzie & Winkelen, 2004). The process must be able to adapt to change, e.g., individuals change in

needs, community organisations changes due to external changes, government directives, etc., (Lozano, 2011). The changes act as barriers to be overcome so as to attain objectives thus changing the culture of the organisation to one of cooperation and co-creation of knowledge production and advancement (Liebowitz, 1999; Szulanski, 2003). Information given must be the most appropriate to enhance knowledge formation and the promotion of wellbeing best practice (McKenzie & Winkelen, 2004; Szulanski, 2003). If the most appropriate information is not transferred community participants are not be able understand or cooperate (Agarwal, Xu, & Poo, 2011). The culture of Community Organisations is vital to succeed in the assessment of new information which poses difficulty at the best of times (Jackson, 2010; Ramasamy & Thamaraiselvan, 2011; Ralph Stacey, 2000). Spontaneous cultures need to be developed so that new effective wellbeing outcomes/actions emerge freely (Lipton & Bhaerman, 2009; McElroy, 2003). The adaptive learning loop and feedback need to be developed so it can be used to create more wellbeing awareness, support and spontaneity (McElroy, 2003).

McElroy (2003) states that to promote effective self-organisation the right policies, procedures and programmes need to be in place. Hurley & Green (2005) "Argue that in the community sector there are inefficiencies with programming and that funding to inspire this has not been effectively promoted". The value of knowledge management needs promoting. To successfully promote the value of knowledge in wellbeing, cultures need to be creative, using information communication systems to develop an environment of wellbeing knowledge creation which is more pertinent. Liebowitz, (1999) states the management of a wellbeing information communication system is extremely important. "Sharing knowledge is power" (Liebowitz, 1999, p. 1). Managing the knowledge appropriately promotes security, coordination, combination, retrieval, ease of distribution and use whilst enhancing and creating new knowledge and wellbeing (Bohm & Peat, 2010; Feuerstein et al., 2010; Kira & van Eijnatten, 2011). Tacit knowledge should be formalised before transferring into explicit knowledge for the knowledge repository, positive experiences and lessons learned are productive in improving understanding and as such need to be shared so others can gain from developing their wellbeing (Liebowitz, 2006; Maturana & Varela, 1998; Review, 1998 ; Stacey, 2001). It is recommended to capture knowledge through interviewing, analysing, questionnaires, observing and practical learning by participation (George, 2010 agrees with

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Goodson & Phillimore, 2012; Jason, 2004; Liebowitz, 1999). "You can take this a step further into what to capture: such as anecdotes, stories, case studies, lessons learned, best practice, failures & successes, heuristics and which relationships add value with regards to human/structural/customer intelligence capital" (George, 2011 agrees with Liebowitz, 1999, 2006). In the context of the wellbeing of the Third Sector the most important wellbeing knowledge management goal is a combining of internal wellbeing know-how and internal wellbeing customer knowledge (Goldratt, 2008; Liebowitz, 2009). A second important objective is an information repository on an intranet or cloud for community organisations/projects so wellbeing lessons learned are not lost (George, 2010 agrees with Liebowitz, 1999, 2009).

Individuals each have their own unique issues although many of these are interrelated and as such do not exist in isolation (Stacey, 2003). Many of these issues or problems are interrelated to community organisations and world problems (Scharmer, 2010b). Although the problems or issues are not exactly the same the goals to solve them can be. Often a solution for an individual can be a solution for an organisation and this is commonly the case for community participants and community organisations. For example an individual may have lost a relative, may be lonely and is also an excellent receptionist and a community organisation desperately needs a receptionist. As a receptionist you get to meet and talk to new people which, helps with recovery. Interlinking the two improves the wellbeing of both. Creating tipping points from wellbeing creates the link (Gladwell, 2001). Sometimes people can see their problem but without the creation of the tipping point can't see a way forward. Participants' wellbeing needs to be monitored to ensure ongoing wellbeing. These complex issues are common place and could be solved using soft systems thinking (José-Rodrigo, 2011; Nam, et al., 2012; Seddon, 2008; Tait & Richardson, 2008; Zhu, 2007).

Intelligence is a community organisation's capability for processing, interpreting, encoding, manipulating & accessing information in purposeful, goal-directed manners, so as to increase their adaptive capability of successfully functioning (Turban, 2010). Community organisations intelligent distribution model entails their intelligence is embedded into routines, systems, procedures, operating standards, language and culture (Liebowitz, 1999). All of these affect the outcome of a community organisation. Collaborating with stakeholders

and other community organisations enhances community organisations intelligence (Hume & Hume, 2008; Jason, 2004; Kang et al., 2011; Putnam et al., 2005; Sennett, 2012). It is not a small task and prior research lacks practical ways to implement the management of useful knowledge and information. Motivation is needed to encourage change (Burnes, 2009, p. 493). Using knowledge to profit and save time is a good initiating factor (Goldratt, 2008; Liebowitz, 2008). The wellbeing of the organisation relies upon the wellbeing of the community participants and paid staff if they have any. If individuals get stressed they could be off for a long time. Understanding the people within the organisation understands the mechanics of it. Keeping a machine well-oiled keeps it working. Individuals need that ongoing support to enhance their wellbeing.

3.4. Research Approach and Design

This section describes the research approach and design process which can be found in Figure 14: Research Design Flow Chart and gives a description of the research philosophy used at the different stages of the research. In Table 2: Philosophy Research Options and Examples that Fit with the Research depicts how the research options fit with the philosophy and are described in more detail in the following stages. The research design and flow are set to evidence rigour and consistency in how the themes are developed and how the semi-structured interview process is used (Sousa, 2014). The participants for the overall study was based in North East England with participants from the Scottish Highlands and some internationals.

Figure 14: Research Design Flow Chart initiates with the *literature review* which identifies the wellbeing themes to be verified against the *spiritual reflections* and *open community interviews*. The *wellbeing themes to be thematically analysed* and the context of each to be used to development the question framework for the semi-structured interview and supporting questionnaire. These should then be *piloted* and analysed for success of use with any recommended changes. The basic semi-structured interview process needs to be *validated* and analysed for beneficial *improvements* to adapt the process for the main semi-structured interviews. Any changes made need to be tested again and questionnaires updated for the *main semi-structured interview*. These are to be *analysed, evaluated* and used to draw

conclusions from the wellbeing themed results and used to identify and *recommend future research*.

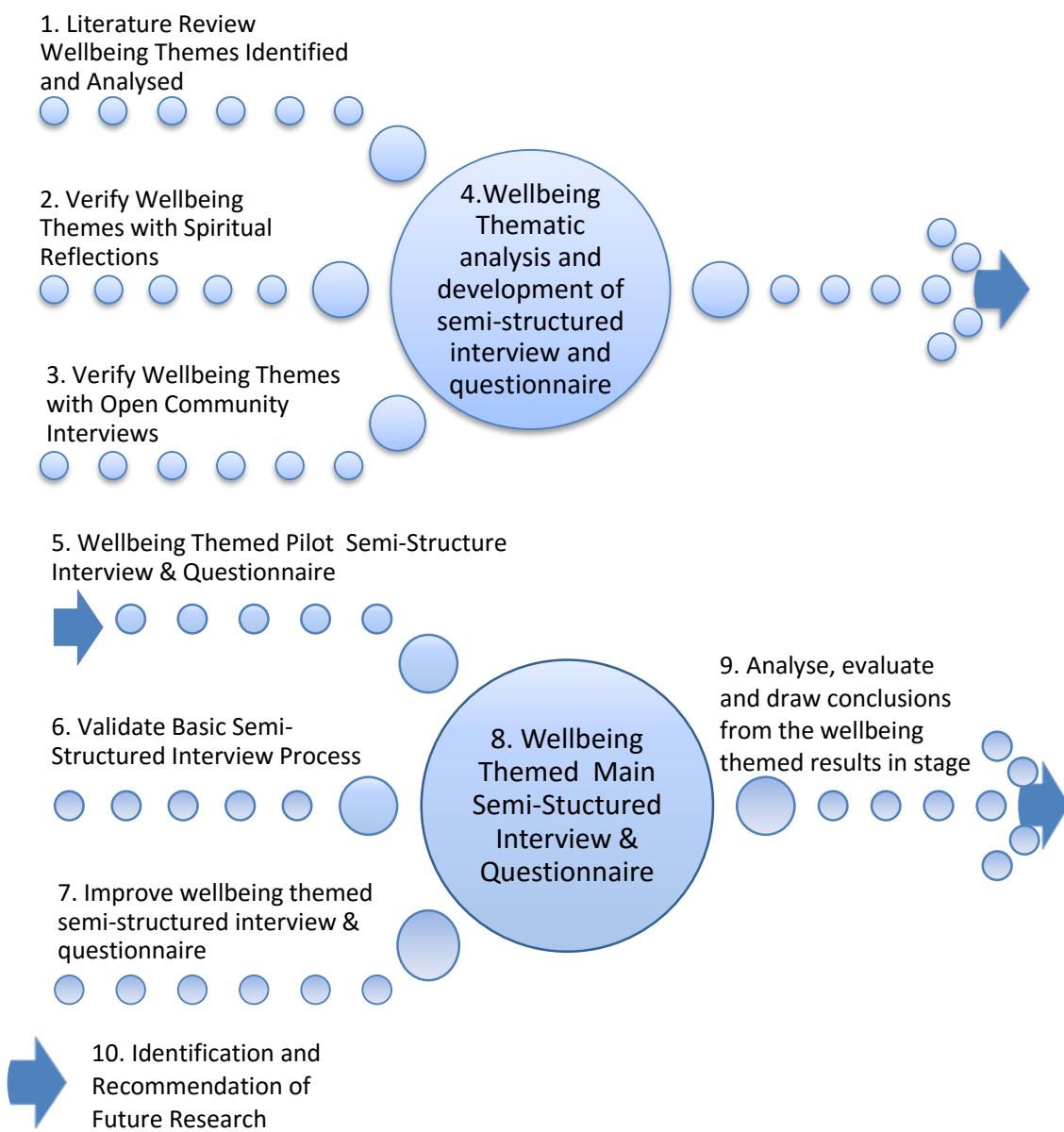


Figure 14: Research Design Flow Chart

3.4.1. Literature Review

The first stage identifies the wellbeing themes from the literature review. The academic literature is reviewed and the qualitative information gained on wellbeing is used to find relevant relationships (McKernan, 1996, p. 7). Twenty key themes are identified from the literature review. The first stage 'Literature Review & Wellbeing Themes Identified and Analysed' is shown at the top of Figure 14: Research Design Flow Chart. Table 2: Philosophy

Research Options and Examples that Fit with the Research shows the literature review as being part of non-empirical research using third party research literature, data and analysis.

3.4.2. Daily Spiritual Reflections

The second stage ‘Verifying Wellbeing Themes with Spiritual Reflections’ is shown in Figure 14: Research Design Flow Chart and relates to Table 2: Philosophy Research Options and Examples that Fit with the Research. The wellbeing theory themes identified in the literature review are used as a framework for gathering qualitative data. Each theme is set a code and the daily reflections are then searched for relevant information pertaining to each theme and interpreted by the researcher. This stage verifies the wellbeing themes identified in the literature review within spiritual daily reflections. The daily reflections are used worldwide by spiritual participants of Sahajay Yoga (2015). The literature review identified spirituality as a possible key to wellbeing. This is why it has been used an additional verification of the wellbeing themes. There is a lot of discussion and research highlighted in the literature reviewed around spirituality as part of wellbeing tradition across the wellbeing field. It has been important throughout the ages as such a spiritual organisations daily reflections are collated in line with the wellbeing themed findings highlighted in literature review regarding spirituality (Aristotle, 2009; Maslow & Lowry, 1999; Siegel, 2015). Following the paradigm of everything being interconnected, complex and flowing with the community and an emphasis on design, the literature review leads the research to the daily spiritual reflections. Design supports the need for this additional research to be added for the creation of a more complete rich picture of wellbeing. The research follows a thematic analysis of the daily reflections from a spiritual organisation given to their follows to support them on their wellbeing journey (SahajayYoga.org, 2015). Just over two months daily reflections are collected, analysed and evaluated to investigate the areas of direction for spirituality to see how it fits within the wellbeing themed areas identified from the Literature Review and the bigger picture within the wellbeing oneness paradigm. This information is later supported by a thematic analysis of community open interviews to verify usage of the themes in daily life so they can be used to formulate the questions for the semi-structured interview process.

3.4.3. Open Community Interviews

The third stage 'Verify Wellbeing Themes with Open Community Interviews' found in Figure 14: Research Design Flow Chart and relates to Table 2: Philosophy Research Options and Examples that Fit with the Research as inductive research. Initially an inductive case study approach was investigated for the research with community participants and community organisations but reproducing the study with the same results would be highly unlikely (Easterby-Smith et al., 2008). A 'Socratic Dialogue' and 'Community of Enquiry' approaches are also investigated for this initial ground research from management and community participants to gain the consensus about their experience to gain an insight into what the community participant and the community organisation needs are in the form of wellbeing (Marinoff, 1999 & Kestrel Education, 1999). However getting the groups together from across the UK would have been too costly and not all were easily able to connect to the internet. The open interviews were chosen to search for wellbeing community participation and organisation links so that unbiased experiences were communicated. Prior to running this research ethics forms were prepared and assessed by Northumbria University Ethics Committee. The full ethics details can be found in 3.5. Research Ethics.

The open interviews are used to verify the discussions with community participants and managers about their experiences and the fit within the wellbeing themes. This gives an insight into how the questions should be asked regarding each theme. Each wellbeing theme is given a code and the content of the interview transcripts are interpreted against each code to verify the relevance of each. The participants are asked to describe their experiences, thoughts and feelings on community participation and management within the third sector. The open interviews started with an open ended question asking about their experiences in community participation so that the informant lead the interview and detail given, e.g., "Can you basically just tell a story about community participation, from your perspective as a community participant, what worked well or not and why?" The researcher asked probing questions about information given for clarification, e.g., "Could anything have been done to improve the situation?" Examples were shared by the researcher only if the participant appeared unsure of what was being asked, e.g., the researcher share a type of community participation or management role they had participated in and talked about a pro and a con from that experience. The open interviewee participant was then asked to tell a story from

their own experiences. The participants were signed up through an open email request to numerous groups and individuals within the Third Sector requesting them to participate. Each participant signs a contract at the beginning of the narrative agreeing to only narrate truthful first hand experiences so as to ensure the quality of the narratives. To best make use of those available to participate in the research the researcher travelled to the participants venues to record and gain information about wellbeing from both a community participants experience and from the management of third sector organisations. This also allowed the participants to use a meeting space they felt comfortable in.

Demographic data is collected. The age bandings are split differently to the standard banding to take on board how wellbeing affects people in the circle of life. The age bandings are split into 18 year brackets as under 18's are generally at school. 19-36 year olds are often still in full or part time education, early careers or starting a family. 37-54 year olds people are often finished developing their families, many have been promoted in their careers, are more comfortable financially and are looking for ways of improving their health to enjoy more free time. 55-72 years old people are working up to and taking phased/early retirement and retirement so a new set of experiences bed in with more free time. 73-90 years old most people have retired and some have to look at supported living. 91+ years old most people are in supported living and often with restricted ability. Learning how to cope with this means a new set of skills. The interviews are analysed to verify usage of the wellbeing themes in daily community participation life. This research process uses the narratives by interpreting into the thematic coding of the wellbeing themes identified in the literature review and used to analyse the daily spiritual reflections. The data from the open interviews evidences participants' wellbeing needs and reflective and reflexive views on effective participation. The researchers experience in the field enables her to ask questions if anything out of the ordinary is narrated or to keep the narration going. The members of the group open interview could ask for clarification or give supportive agreement from their own experiences or to explain any different experiences in that area as basically it was an open discussion for them to look for ways forwards. The themed findings are split into community participant data and manager/organisational data. These findings are evaluated to validate the list of wellbeing themes and identify their characteristics to the themes in the researchers view and identify any connections. The open interviews are used to verify the wellbeing themes within a

community context. The interview information is then analysed against the wellbeing themes along with the information from the literature review and spiritual daily reflections to formulate the questions for the semi-structured interview process.

3.4.4. Development of Pilot Semi-structured Interview and Questionnaire

The fourth stage sees the development of the wellbeing themes into useful questions for a semi-structured interview and to develop a questionnaire to help validate the process and gain insight into the needs of an information communication system. The fourth stage can be viewed in Figure 14: Research Design Flow Chart and relates to Table 2: Philosophy Research Options and Examples that Fit with the Research with inductive, positivist and predictive approaches. The researcher interprets what they observe, to develop an understanding of human behaviour and views (Stahl, 2014, p. 1), e.g., development of the semi-structured interview involves interpretation of the literature review to provide the twenty wellbeing themes which formulate the frame of reference. The daily spiritual reflections and open interviews with community participants and managers are separately collated and interpreted into the coded wellbeing themes, verifying their use and wellbeing relationships. The resulting information is used to formulate the questions for the solution-focused semi-structured interview process which should encourage positive actions (Easterby-Smith, Thorpe, Jackson, & Easterby-Smith, 2008, p. 7).

Tipping points have been used in the research to evidence how people can be transformed together (Sherman, 2015). A tipping point in this research is where a chain of occurrences are deliberately instigated to develop heightened emotions and participants desire to improve in their wellbeing. They then agreeing actions and timescales. The tipping point needs certain elements to work effectively. This is why the wellbeing themes and process need to be validated as useful and active to support people. The themes need context to create powerful advocates for the participants to associate with them and feel the intense need to evolve their wellbeing development thus creating a strong need for change (Sherman, 2015). Tipping points are also evident as effecting confidence and attitudes (Women's Sport and Fitness Foundation, 2012). People act as major influencers especially children (Women's Sport and Fitness Foundation, 2012). Emotional intelligence and cognitive competencies play an important role when certain numbers of these are mastered it tips people to a new level.

Boyatzis (2006) carried out research which evidenced that competences were matched to various financial tasks and only a certain number of those competences were needed from the skill banding for individuals to tip into achievement. Developing a number of competences supports wellbeing by tipping into personal achievement as well as achievement for employment (Boyatzis, 2006).

Mini Case Study

Malcolm Gladwell describes various tipping points and their effect. One of these stories is that of Bernhard Goetz who shot 4 youths on the New York subway after one asked for five dollars. There are numerous tipping points in this story to do with Goetz's background and build up to that day, the individual youths, their backgrounds and the consequences of Goetz's actions that day. The final tipping point was the way the youth had looked at him when asking for the money that tipping Goetz into shooting the youths. One youth he shot twice as he "lay screaming on the ground" the second bullet going through his "spinal cord and paralysing him for life". This incident sparked many changes to the underground system and a massive reduction in crime

Figure 15: Mini Case Study on Tipping Points (Gladwell, 2011)

Michie et al (2015) state that we need to become more aware of what causes tipping points so that interventions can be put in place to mitigate or reduce If people gain sign posting of competences and what is needed to achieve they can self-develop and tip into a higher level of attainment. the impact. If people can master their wellbeing by becoming more aware of themselves and the consequences of their actions this could help people to their negative tipping points. Figure 15: Mini Case Study on Tipping Points (Gladwell, 2011) evidences the effect of tipping points.

This research uses positive tipping points to encourage movement forwards. Self-analysis of prior negative tipping points is used to decide what positive actions need to be taken to repair the situation and move forwards. In this research tipping points are created several times throughout the process. Each wellbeing themed question is put into context so as to create powerful advocates for the participants to associate with them and feel that association (Sherman, 2015). They reflect on their present status in each wellbeing theme, on

their past status and what local social interactions they made to move forwards to the present. This feeling of success with remembering the joys of moving forwards can create a tipping point of intense need to evolve their wellbeing development further in that area. As change effects confidence and attitudes these themes can create strong tipping points that support the other wellbeing themed areas too. What individuals relate to each theme is very subjective and unique to their thoughts and feelings at that time. The themes are interlinked and people can feel one action will help them in many areas on one review as the action has created a strong emotional tipping point that carries on working through several themes. As tipping points and individuals thoughts are unique some tipping points only work for one theme. The strength of each tipping point can vary dependent upon how an individual feels that day, e.g., emotional status, confidence, attitude, others behaviour, etc. Emotional intelligence and cognitive competencies play an important role in how well the process works for individuals and how quickly people tip into mastering their wellbeing development. The more active individuals are in personal achievement in the early stages supports ongoing wellbeing development more as they review positives. Where individuals struggle with the system initially it is best to develop awareness skills first through a range of tasks, e.g., bodily awareness, effect of music and colour. These develop the skills to reflect and emotional feeling by becoming aware of the positive effect local social interactions developing more susceptibility for the tipping points to work.

The accompanying questionnaire is used to verify the semi-structured interview process and gain recommendations for further developments. The facts and observational experience gained from the daily reflections and open interviews are generalised to formulate the parameter findings to identify appropriate questions for the semi-structured interview to develop personal profiles (Easterby-Smith, Thorpe, Jackson, & Easterby-Smith, 2008, p. 7). The semi-structured interview and questionnaire approaches are described in more detail in the following paragraphs and the next section and in chapter four validity of the semi-structured interview process.

The questions and structure of the semi-structured interview are designed to encompass factors such as motivation, self-efficacy, creative problem-solving, critical reflection and persistence. In this research as well as the questions being designed the semi-structured

interview process has also been redesigned to create tipping points, in this case for community participation. This special adaption of tipping points is a key in this research. Community participation can be used as a route to improve wellbeing as can other organisations, schools, work places, etc. People differ in their ability to make decisions but can be supported to enhance their self-confidence, self-esteem and self-efficacy through this process. One of the most important things is an optimal fit between the questions asked during the interview, the language used by the researcher and the understanding of the participant.

The process is only as good as those who are using it and the researcher's ability to develop an appropriate themed frame of reference and accompanying questions for the semi-structured interview. The questions need to support the participant to identify themselves and their behaviour, emotions, confidence, beliefs, values and the service they gave. These were the keys in the spiritual daily reflections and open interviews that could support development in wellbeing of the participants and those around them. This first question encourages the participant to look at their behaviour and identify with themselves. The more specific questions are in the middle which encourage participants to further recognise their behaviour and identity but also encourage emotional and self-evaluation. They further encourage participants to recognise their confidence level, beliefs and values and a generalised question at the end so that anything they can think of that's needs progression in their life can be raised at the end under happiness. This could raise issues under any focus e.g., behaviour, confidence, identity, emotions, etc. This way they are eased into the semi-structured interview and finish feeling they have looked at all areas of their life and have a complete action plan to work on to improve their wellbeing.

Each themed question focuses in developing awareness in that area which can be seen in Table 4: Themed Focus of Semi-Structured Interview Questions and the full questions in Table 5: Pilot Wellbeing Semi-Structured Interview Summary. They are asked in ways that always utilise positivity unlike the Rickter Company who ask some questions in the negative. When converted to graphics for easy viewing and motivation for the participant the negative themes are not aligned and can cause confusion.

Table 4: Themed Focus of Semi-Structured Interview Questions

Themed Heading	Focus
Usefulness	Identity and Behaviour
Relaxation	Self and Emotions
Relationships	Behaviour and Identity
Energy	Behaviour and Self
Changes	Behaviour and Identity
Confidence	Identity
Decision-making	Behaviour, Confidence, Identity, Beliefs and Values
Support	Behaviour and Identity
Giving	Behaviour and Identity
Learning and Development	Behaviour, Self and Emotions
Emotions (feelings)	Behaviour, Self and Emotions
Trust	Beliefs and Values
Lifestyle	Behaviour
Challenges	Behaviour and Identity
Commitment	Behaviour and Identity
Point of View	Beliefs and Values
Respect	Beliefs, Values and identity
Involvement	Values, Identity and Service
Valued	Values
Happiness	Self, Identity, Behaviour, Confidence, Emotions, etc.

Alterations to the existing process are seen in bold red in Table 5: Pilot Wellbeing Semi-Structured Interview Summary. Added to the end of the original process is in each theme is an additional tipping point on community participation. At this point it is easier to see where community participation can help an individual's development as the issues have already been identified in the initial part of the theme and they start to develop a picture of their self, identity, behaviour, confidence, emotion, beliefs, service and values. This supports the participants to master these focus points and as such themselves which greatly supports their wellbeing development. Twenty themed headings were identifying in the literature review to 91

build a double frame of reference along with a positive way for each themed heading to be raised with the participants to ensure wellbeing development. It also encourages a tipping point for community participation as a supportive mechanism to reflect the participant's specific wellbeing. The community organisation's wellbeing is enhanced by gaining the much needed support for survival and development. The specially added tipping point for community participation in the semi-structured interview has been specifically designed and added to the end of each theme as the issues have already been identified in the initial part of the theme so at this point it is easier to see where community participation can help an individual's development. Each set of headings is accompanied by questions that, when answered by the participant through scaling their response with the slider directly on the board. This provides a snapshot of the participant's current situation under that themed heading. The questions are designed directly relating to the twenty wellbeing themes identified in the primary research.

They are asked in ways that always utilise positivity unlike the Rickter Company who ask some questions in the negative which means some questions when converted to graphs for the participants are not aligned and can cause confusion. Alterations to the existing process are seen in **bold red** in Table 5: Pilot Wellbeing Semi-Structured Interview Summary.

Table 5: Pilot Wellbeing Semi-Structured Interview Summary

Name:	
Interviewer:	
Date:	
Interview:	Baseline <input type="checkbox"/> Review <input type="checkbox"/> Review No: <input type="checkbox"/>

Remember to keep your finger on the relevant slider as it helps you to connect your thoughts and feelings.

1. Usefulness

How useful do you feel you can be to other people? Ten you feel very useful and zero you do not feel useful at all.

Present State	
Scaling	<input type="checkbox"/>
What's on your mind here?	

Has it ever been lower? **Move back to that feeling.**

Now move forwards and remember what actions you took to achieve your present state?

Desired State

Scaling

Where would you like to be? / What can you do to achieve/sustain that? **Try and break that down into small steps?**

Could community participation help?

Individual's Actions

- 1.
- 2.
- 3.

Review by date:

Community Participation Actions

- 1.
- 2.
- 3.

Review by date:

How does that make you feel?

2. Relaxation

How relaxed do you feel at this time in your life? Ten you feel very relaxed and zero you do not feel relaxed at all.

3. Relationships

How well do you feel you develop relationships with other people? (This can be any relationship that comes to mind) Ten you feel you develop relationships well and zero you do not feel you develop them at all.

4. Energy

How much energy do you feel you have at this time in your life? Ten you feel you have lots of energy and zero you feel you have no energy at all.

5. Changes

How well do you feel you cope with changes at this time in your life? Ten you feel it is very easy to cope with changes and zero you do not cope with changes at all.

6. Confidence

How much confidence do you feel you have at this time in your life? Ten you feel very confident and zero you feel no confidence at all.

7. Decision-Making

How easy is it for you to make decisions in your life? Ten you feel it is very easy for you to make decisions and zero it is not easy at all.

8. Support

How good are you at requesting support from others? Ten you feel you are very good at requesting support from others and zero you do not request support at all.

9. Giving

How good do you feel you are at giving support to others? Ten you feel you are very good at giving support to others and zero you do not give support at all.

10. Learning & Development

How interested do you feel you are in learning new things? Ten you feel very interested in learning new things and zero you do not feel interested at all.

11. Emotions (Feelings)

How well do you manage your emotions at this time in your life? Ten you feel you manage your emotions very well and zero you do not manage them at all.

12. Trust

How good do you feel you are at trusting other people? Ten you feel you are very good at trusting other people and zero you do not feel trusting at all.

13. Lifestyle

How healthy do you feel your lifestyle is? Ten you feel that your lifestyle is very healthy and zero you do not feel healthy at all.

14. Challenges

How well do you feel you cope with new challenges in your life? Ten you feel you cope very well with new challenges and zero you do not cope with them at all.

15. Commitment

How good do you feel you are at completing something once you have committed to it? Ten you feel very good at completing something and zero you are not good at all.

16. Point of View

How good do you feel you are at understanding someone else's point of view? Ten you feel you are very good at understanding someone else's point of view and zero you are not good at all.

17. Respect

How comfortable is it for you to have respect for other people, regardless of their differences? Ten you feel very comfortable respecting other people, regardless of their differences and zero you do no comfort at all.

18. Involvement

How important is it for you to feel involved with other people at this time in your life? Ten you feel it is very important to feel involved with people at this time in your life and zero you do not feel it is important at all.

19. Valued

How valued do you feel at this time in your life? Ten you feel very valued at this time in your life and zero you do not feel valued at all.

20. Happiness

How happy are you at this time in your life? Ten you are very happy and zero you do not feel happy at all. (NB. This is the same as the original)

The order in which the questions are asked in is of vital importance so that the semi-structured interview initiates with easier themes giving self-motivation for the more difficult questions to follow. The heading of relationships is the same as the life-board however the question is different, “How well do you feel you develop relationships with other people?” in comparison to “How happy are you with your relationships”? The questions have different meanings. It has been asked this way to reflect attachment disorder which is a major cause of difficulties in people’s lives (Bowlby, 2005; Siegel & Hartzell, 2004; Thomas, 2005). The question at the end of each theme is how does that make you feel is asked so that at the end of working through each theme the participant should feel they have an achieved an action point and or route to improve their wellbeing. By the end of the semi-structured interview they should be feeling much happier. The final question is a general question on happiness to allow for anything to be raised that the prior nineteen themes have not encompassed within the rest of the interview. Happiness is also in itself a positive word and as such supports a more positive and appreciative finish to the interview. The happiness question is the same as in the Rickter Company life-board. The theme and questions have been developed from the primary research. The tipping points are a new adaption to the interview. In this instance a tipping point question is asked at the end of each theme regarding community participation. It could be asked about how could family and friends help you, NHS, day care, a residential home, organisation, society, management at work, student support, etc.?

A typical initial question is for example: How useful do you feel you can be to other people? Ten you feel very useful and zero you do not feel useful at all? This snapshot scaling is called a themed baseline profile. The participant is then asked “What’s on your mind here?” about their thoughts regarding their scaling so they feel and understand the reasons why they are there. These thoughts are noted in the system along with the scaling. They are then asked “Has it ever been lower? Move back to that feeling. Now move forwards and remember what actions you took to achieve your present state?” This is so that the participant recognises where they have been and how they achieved moving forwards in the past. They are then asked “Where would you like to be? (This scaling is recorded as the target scaling) What can you do to achieve/sustain that?” and the actions are recorded. If participants struggle to recognise the route and actions taken to develop their wellbeing previously, solution-focused questions can be added here as to how they can achieve this. In addition to these basic fielding questions an additional question is asked to create a tipping point for community participation which is “Could community participation help (to achieve/sustain this?)” and “How does this make you feel?” The difference between the present state and the desired state gives information about follow on steps and possibilities for the action plan.

The semi-structured interview leads to precise, unique and enriched information. Participants can gain clarity about their own situation with a complete picture and route to achievement. Issues can be put into perspective and through the different connections, new patterns of thinking are created and self-awareness starts to flow. Participants can see more positive elements and new opportunities through this systematic solution focused approach. The physical scaling itself gives participants a feeling of control and ownership, especially for people who are not that confident or experienced in interview situations, the board is often like a neutral and non-threatening object to focus on and talk through. The researcher needs to be unbiased and maintain a neutral tone so as not to show personal distaste, shock or opinion. This encourages the participant to open up and seek those steps forward. Through the appropriate questioning participants are encouraged to look for their own solutions to their problems. The interview needs to be analysed and evaluated to identify key pointers that are needed to support people within an online self-help system.

The process used measures distance travelled over time. This movement measures the achievements on the route to gain the wellbeing level of their choice along with skills to overcome issues along the way enhancing their ability to move forwards. The process measures those small and often intangible achievements. This should act as a motivational online tool coupled with the easily accessible information on actions and achievements. One of the most important things is an optimal fit between the questions asked during the interview, the language used by the practitioner and the understanding of the participant. The process is only as good as those who are using it and the researcher's ability to develop an appropriate themed frame of reference for the scaling system. The researcher is a trained practitioner in the use of the semi-structured interview process. This approach is designed to develop co-evolution, with the special adaption of tipping points in this instance for community participation, between individuals engaging in community participation, community organisations and the environment they live in to identify the most effective and positive interactions for wellbeing development.

This is an alternative to the NHS system which is a one off measure informing participants if their scaling is good, normal or they need to seek some help (NHS, 2014). The NHS website has links to help but does not identify issues and what actions are needed to improve wellbeing. A system that identifies measures and monitors wellbeing as well as giving direct links to wellbeing support can enhance wellbeing and allow for big data on wellbeing issues allowing for speedy interactions by the NHS and/or Government. The quality information gained from these thematically framed questions helps develop an understanding of the quality of interactions and critical tipping points that develop for effective wellbeing.

The thematically framed question headings were derived from the literature review and confirmed through the open interviews with community participants, community managers and spiritual reflections. In this research the questions are worded to encourage positive thinking, e.g. instead of asking people how stressed they are they are asked how relaxed they are. The questions are asked with a mix of focuses for each theme. They start with a general question with how useful do you feel you are to others, so that the participants can answer the question with more ease. The questions are set in a way that encourages

reflection on your life, promoting identification and recognition of prior tried and tested routes forward. The reflection gets people to briefly review and experience the feelings of the past which helps them to understand that things are not as bad as they think at the present time. This reflection also helps participants to more strongly experience those good feelings when they made the improvements to the present which motivates the participant to use those actions again as they know they are tried and tested and have achieved using them before. If participants feel they can't use the actions they used before or have not felt at a lower level in the scaling they can be asked to imagine waking up in the morning to find their life has changed and that they are now at their desired state under the that themed heading and to identify all the changes they can imagine. They are then asked to identify how each factor changed to gain action points to move forwards. However if participants still struggle it is best to come back to that question later in the interview or at a review interview. The initial interviews are expected to take about 1.5 hours.

The pilot semi-structured participants are asked to complete questionnaires to feedback their personal thoughts and feelings about their semi-structured interview and a future self-help online system. The Rickter Company (2015) does supply a questionnaire to use with the scaling board which formed the basic questionnaire. The questionnaire is shown in Appendix: Pilot Wellbeing Interview Questionnaire with the original questionnaire used by The Rickter Company supplied in black and the adaptions in bold red. The questionnaire asks for clarification on the research background, use of the scaling tool, wellbeing themed frame of reference, the environment, process, wellbeing contributions/development and an information communication system. There is also allowance for any other comments to be made. The questionnaire is estimated to take no more than ten minutes. Questionnaire results give validation to research as it is an easy way of gaining information with a repeatable proven method (Saxton & Hackler, 2007; Webster & Wylie, 1988). The questionnaire is checked for clarity and usefulness and slightly altered for the main research.

3.4.5. Pilot wellbeing Semi-Structured Interviews & Questionnaires

The fifth stage is the pilot of the themed semi-structured interview and questionnaire. Participants for the pilot semi-structured interviews are gained locally in Newcastle upon Tyne by email request and self-sign up. The semi-structured wellbeing interviews are all held in

Newcastle upon Tyne although one of participants is not a native of the United Kingdom and English is not their first language. The process involves a semi-structured interview uniquely developed in stage four with a twenty wellbeing themed frame of reference and accompanying questions so as to support individuals to move forwards with their wellbeing and a validating questionnaire. This fifth stage can be viewed in Figure 14: Research Design Flow Chart. Table 2: Philosophy Research Options and Examples that Fit with the Research shows that the researcher interprets or translates what they observe, to develop an understanding of individuals behaviour and views from the semi-structured interviews to respond appropriately to participants so as to encourage them to develop actions from their reflections to improve their wellbeing (Stahl, 2014, p. 1).

The semi-structured interviews, reflections and observations are ingredients or components of qualitative information gained on wellbeing which are utilised to find relevant relationships. Termed as qualitative research which is used within “Naturalistic Field Research” whereby the emphasis is on realism, heuristics and relevance (McKernan, 1996, p. 7). Qualitative and interpret research are often used together. Any information communication system developed needs to be able to interpret qualitative data. The semi-structured interview is unique in that it incorporates and builds upon a number of underpinning theoretical approaches to personal development such as solution focused assessment process, emotional intelligence, motivational interviewing, efficacy theory, person-centred counselling, solution-focused brief therapy, systems thinking and applied positive psychology techniques. This research uses a manual sliding scale board and a specially designed spreadsheet to measure and monitor the distance travelled based on each semi-structured interview process. Participants are asked to rate certain feelings, emotions, needs, etcetera against their experiences. This helps develop an understanding of the quality of interactions and the critical tipping points developed for effective community participation.

This is an alternative to the current NHS (2015) system which gives them a percentage bracket of the number of people giving the same type of scaling. The poorest wellbeing scaling asks them to seek help but there is no clarification of what help they need, where they are going wrong, what actions they should plan or even built in motivation to encourage them to look for their own tried and tested approaches used in the past. The semi-structured

interview approach is grounded in the pursuit of happiness as it also supports individuals to develop their own positive plan of action which motivates them throughout the interview and evidences the distance travelled in each wellbeing area (George et al, 2012 agrees with Pursuit of Happiness, 2011).

The sliding scale board used in the process is a plastic board with ten sliders in a framework of scales that read from zero to ten which was developed by the Rickter Company (2015). The basic ten question themed interview has a frame of reference called the life-board. Each slider has its own themed heading which forms the basic life-board. The board can be used by researchers, with specially designed frames of reference and questions, by interchanging those themed headings on the board with a magnetic overlay. The frame of reference in this case is developed through evaluation of the literature review, spiritual daily reflections and open community interviews. The twenty wellbeing themes identified in stage four create two frames of reference. These can be viewed in 5.2. Literature Review. The semi-structured interviews are analysed to ensure the wellbeing themed process works positively to benefit the participants.

The questionnaires are used to identify improvements to the themed process and gain information on what the participants would like in an information communication system. The pilot is not large enough to validate the process, which the researcher felt needed to be done as this is academic research. The opportunity arose to validate the basic process with multiple countries within the Leonardo Da Vinci Transfer of Innovation research detailed in chapter four and briefly mentioned in 3.4.6. Validation of the Basic Semi-structured Interview Process. The pilot wellbeing themed semi-structured interview is tested with six participants, coded as P1-6, who are possible candidates for community participation. The participants are also given a questionnaire after the interviews to gain empirical primary results to promote the probability of gaining repeated results in future research (Easterby-Smith et al., 2008). Both the interviews and questionnaires are analysed and evaluated to ensure the research is gaining appropriate feedback to move the research forwards. The interviews and questionnaires are altered for the main semi-structured interviews. The reviewing of the semi-structured interviews with questionnaires gains experiential feedback which is analysed and evaluated. A full quota of questionnaires returned from participants gives validity to

research. Questionnaires are a cheap, quick and an easy way of gaining valid information and are a repeatable proven method (Saxton & Hackler, 2007; Webster & Wylie, 1988). The research outcome encourages further research and hopefully the development of an information communication system for public wellbeing use (Black, 1999).

3.4.6. Validation of the Basic Semi-structured Interview Process

The sixth stage the Leonardo Da Vinci Transfer of Innovation (TOI): European Quality Assurance Reference Framework (EQARF) in Vocational Education and Training (VET) is used to investigate the reliability and validity of the process with large numbers of mixed communities across Europe. The sixth stage is evident in Figure 14: Research Design Flow Chart as 'Validate Basic Semi-structured Interview Process' and in Table 2: Philosophy Research Options and Examples that Fit with the Research which shows this research as empirical with "The information, knowledge and understanding are gathered through experience and direct data collection", (Black, 1999, p. 3). It is also quantitative as it "Gains statistical information to analyse the proportions/measurements of what is being investigated to qualify, prove or disprove what has been analysed" (Easterby-Smith et al., 2008, p. 24). The statistics need to evidence that semi-structured interview does show that the process helps them to move forwards. This is evidenced in both the distance travelled and the questionnaire responses from participants. The practitioners and managers also complete questionnaires on how useful the process and Impact Management System (IMS) are to them and any improvements that could be made.

The study also investigates further the issue of language used in the semi-structured interview process. Questionnaires and emails are used throughout the two year research to support this evaluation. The semi-structured interview process needed evaluation in much larger numbers which needed more people involved to be completed within the given timescale and language was showing to be an issue in the pilot so when the opportunity arose to evaluate a major study using the basic semi structure interview across Europe it allowed the research to be taken a step further to verify the interview process, language, quality control and improvement to an online system being developed for the Leonardo Da Vinci Transfer of Innovation: European Quality Assurance Reference Framework in Vocational Education and Training this is willing added to the research design. The Transfer of Innovation

allowed an evaluation of over 519 semi-structured interviews across Europe including the Scotland, Germany, Italy and Greece. This opportunity is ideal for the overall research design as it greatly enhances the end results. This evaluation is one of complexity with over 200 unique individuals participating. To ensure this uniqueness and involvement of those participating is valued the following method of appreciative inquiry was used as it involves co-creation and cooperation of those involved, enabling the uniqueness of individuals to be key. The evaluation on the use of the semi-structured interview process, language and quality is a European study to transfer the use of the process and involves managers, practitioners (trained users of the semi-structured interview process) and participants from across Europe. The details of this formulate a chapter of its own found in Chapter 4: Validation of the Basic Interview Process.

3.4.7. Improve the Wellbeing Themed Semi-Structured Interview & Questionnaire

The seventh stage is to alter the semi-structured interview and questionnaire to take on board issues identified in the pilot and Leonardo Da Vinci Transfer of Innovation semi-structured interviews and questionnaires. Stage seven can be viewed in Figure 14: Research Design Flow Chart. The questionnaires used in the primary research is analysed to identify any changes needed to gain the best parameters of personal profiles which is identified in Table 2: Philosophy Research Options and Examples that Fit with the Research (Easterby-Smith, Thorpe, Jackson, & Easterby-Smith, 2008, p. 7). This positivist research focuses on a deductive approach within the analyses of the quantitative data. The interpretivist research focuses on an inductive approach to the analyses of the qualitative data. The questionnaire results are analysed and synthesised for improvement for the main semi-structured interviews and questionnaires.

The research has a mixed method philosophy with characteristics from both positivist and interpretivist philosophies. Some of the community participant responses do not need the researcher interpretation as they are closed questions. Some allow for expression of feelings which need analysis and interpretation. Many of these were asking for feedback on the semi-structured interview and questionnaire whilst some asked about the development of a self-use online system. Additional suggestions and improvements to the existing wording or way the question is asked have been included, e.g. one participant asked if the questions

asked with a degree of agreement could all be asked in same way so those that were answer a little, etc., were changed to strongly agree, agree, etc. Some of the wording was slightly alter to improve the understanding or cut such as self-confidence was changed to just confidence and self-efficacy was removed leaving self-esteem as people queried these on a number of occasions. It is best not to confuse participants and stick with questioning they understand.

A few additional questions were asked regarding the use of music and relation exercises as a calming influence and music also as inspirational and motivational as further wellbeing support mechanisms for an online system as these issues were raised in the primary research by participants and further researched as a possible option for a future information communication system. This also keeps the research up to date. These questions fit well with that of pictures to enhance the overall online process for motivation, inspiration and calming as and when needed. The participants were additionally asked if they would be interested in participating in any further semi-structured interviews or an online automated information communication system with the interview. This would allow for any further research with these participants. These questions can be seen in Appendix: Main Wellbeing Interview Questionnaire. All changes from the pilot version are made in **bold red**.

The semi-structured interview is altered with improvements suggested through the pilot wellbeing semi-structured interviews in stage five and stage six validation of the process with the Leonardo Da Vinci Transfer of Innovation research which was used to verify the semi-structured interview and to investigate quality issues in the process and to understand the use of language in the process from a large scale study. Following on from this research some refinements are recommended to give the system the ability to be truly unique to an individuals need with improved clarification of language as some participant had shown some confusion at the meaning of some words. These amendments to the pilot semi-structured interview are shown in **bold red** throughout the semi-structured interview. This also ensures the same meaning is given throughout the main semi-structured interview research. This is better for validation of the main semi-structured interview. This can be viewed in Table 6: Main Wellbeing Semi-Structured Interview Summary.

Table 6: Main Wellbeing Semi-Structured Interview Summary

Name:			
Interviewer:			
Date:			
Interview:	Baseline <input type="checkbox"/>	Review <input type="checkbox"/>	Review No: <input type="checkbox"/>
<p>When completing review interview, only enter desired state scaling if the individual wants to change it from their first interview.</p> <p>Remind participant to keep their finger on the relevant slider as the mix of physical movement and feeling helps their thoughts and feelings to open up.</p>			

1. Usefulness (being of use or service; serving some purpose; advantageous, helpful, or of good effect: a useful member of society)

How useful do you feel you can be to other people? Ten you feel very useful and zero you do not feel useful at all.

<p>Present State</p> <p>Scaling <input type="checkbox"/></p>	
<p>What's on your mind here? (What do you presently think and feel regarding feeling useful?)</p>	
<p>Has it ever been lower? Move back to that feeling. Now move forwards and remember what actions you took to achieve (get to) your present state?</p>	
<p>Desired State</p> <p>Scaling <input type="checkbox"/></p>	
<p>Where would you like to be? What can you do to achieve/sustain that (stay at this level)? Try and break that down into small steps? Could community participation (Volunteering) help? Do you need to break that down into bite size steps? Close your eyes and image you are waking up and your life has changed you now feel very useful. What changes have been made? What bite size steps do you think you could take to achieve (get to) your vision (dream)?</p>	
Individual's Actions	Community Participation (Volunteering) Actions
1.	1.
2.	2.
3.	3.

Review by date:	Review by date:
How does that make you feel?	

2. Relaxation (**State of being relaxed as opposed to be stressed**)

How relaxed do you feel at this time in your life? Ten you feel very relaxed and zero you do not feel relaxed at all.

Present State Scaling <input type="text"/>	What's on your mind here? (What do you presently think and feel regarding feeling relaxed?)
Has it ever been lower? Move back to that feeling. Now move forwards and remember what actions you took to achieve (get to) your present state?	
Desired State Scaling <input type="text"/>	Where would you like to be? What can you do to achieve/sustain that (stay at this level)? Try and break that down into small steps? Could community participation (Volunteering) help? Do you need to break that down into bite size steps? Close your eyes and image you are waking up and your life has changed you now feel very relaxed. What changes have been made? What bite size steps do you think you could take to achieve (get to) your vision (dream)?
Individual's Actions 1. 2. 3. Review by date:	Community Participation (Volunteering) Actions 1. 2. 3. Review by date:
How does that make you feel?	

3. Relationships (**a connection, association, or involvement with someone**)

How well do you feel you develop relationships with other people? (**This can be any relationship that comes to mind**) Ten you feel you develop relationships well and zero you do not feel you develop them at all.

Present State	
Scaling	<input type="checkbox"/>
<p>What's on your mind here? (What do you presently think and feel regarding relationships? That could be any relationship with a family member, colleague at work, friend, etc.)</p>	
<p>Has it ever been lower? Move back to that feeling. Now move forwards and remember what actions you took to achieve (get to) your present state?</p>	
Desired State	
Scaling	<input type="checkbox"/>
<p>Where would you like to be? What can you do to achieve/sustain that (stay at this level)? Try and break that down into small steps? Could community participation (Volunteering) help? Do you need to break that down into bite size steps? Close your eyes and image you are waking up and your life has changed you now develop relationships well. What changes have been made? What bite size steps do you think you could take to achieve (get to) your vision (dream)?</p>	
Individual's Actions	Community Participation (Volunteering) Actions
1.	1.
2.	2.
3.	3.
Review by date:	Review by date:
How does that make you feel?	

4. Energy (**the capacity for vigorous activity; available energy**)

How much energy do you feel you have at this time in your life? Ten you feel you have lots of energy and zero you feel you have no energy at all.

Present State	
Scaling	<input type="checkbox"/>
<p>What's on your mind here? (What do you presently think and feel regarding your energy state?)</p>	
<p>Has it ever been lower? Move back to that feeling. Now move forwards and remember what actions you took to achieve (get to) your present state?</p>	

Desired State	
Scaling	<input type="checkbox"/>
<p>Where would you like to be? What can you do to achieve/sustain that (stay at this level)? Try and break that down into small steps?</p> <p>Could community participation (Volunteering) help?</p> <p>Do you need to break that down into bite size steps?</p> <p>Close your eyes and image you are waking up and your life has changed you now have lots of energy. What changes have been made? What bite size steps do you think you could take to achieve (get to) your vision (dream)?</p>	
Individual's Actions	Community Participation (Volunteering) Actions
1.	1.
2.	2.
3.	3.
Review by date:	Review by date:
How does that make you feel?	

5. Changes (to make the form, nature, content, future course, etc., of something different from what it is or from what it would be)

How well do you feel you cope with changes at this time in your life? Ten you feel it is very easy to cope with changes and zero you do not cope with changes at all.

Present State	
Scaling	<input type="checkbox"/>
What's on your mind here? (What do you presently think and feel regarding changes?)	
<p>Has it ever been lower? Move back to that feeling.</p> <p>Now move forwards and remember what actions you took to achieve (get to) your present state?</p>	
Desired State	
Scaling	<input type="checkbox"/>
<p>Where would you like to be? What can you do to achieve/sustain that (stay at this level)? Try and break that down into small steps?</p> <p>Could community participation (Volunteering) help?</p> <p>Do you need to break that down into bite size steps?</p>	

Close your eyes and image you are waking up and your life has changed you now feel it is very easy to cope with changes. What changes have been made? What bite size steps do you think you could take to achieve (**get to**) your vision (**dream**)?

Individual's Actions	Community Participation (Volunteering) Actions
1.	1.
2.	2.
3.	3.
Review by date:	Review by date:
How does that make you feel?	

6. Confidence (**belief/trust/rely on yourself to succeed**)

How much confidence do you feel you have at this time in your life? Ten you feel very confident and zero you feel no confidence at all.

Present State Scaling <input type="text"/>	What's on your mind here? (What do you presently think and feel regarding your confidence?)	
Has it ever been lower? Move back to that feeling. Now move forwards and remember what actions you took to achieve (get to) your present state?		
Desired State Scaling <input type="text"/>	Where would you like to be? What can you do to achieve/sustain that (stay at this level)? Try and break that down into small steps? Could community participation (Volunteering) help? Do you need to break that down into bite size steps? Close your eyes and image you are waking up and your life has changed you now feel very confident. What changes have been made? What bite size steps do you think you could take to achieve (get to) your vision (dream)?	
Individual's Actions	Community Participation (Volunteering) Actions	
1.	1.	
2.	2.	
3.	3.	
Review by date:	Review by date:	
How does that make you feel?		

7. Decision-Making (**the cognitive process of reaching a decision; deciding which the best option is by weighing up the pros and cons**)

How easy is it for you to make decisions in your life? Ten you feel it is very easy for you to make decisions and zero it is not easy at all.

Present State	
Scaling	<input type="text"/>
What's on your mind here? (What do you presently think and feel regarding your decision-making ability?)	
Has it ever been lower? Move back to that feeling. Now move forwards and remember what actions you took to achieve (get to) your present state?	
Desired State	
Scaling	<input type="text"/>
Where would you like to be? What can you do to achieve/sustain that (stay at this level)? Try and break that down into small steps? Could community participation (Volunteering) help? Do you need to break that down into bite size steps? Close your eyes and image you are waking up and your life has changed you now feel it is very easy for you to make decisions. What changes have been made? What bite size steps do you think you could take to achieve (get to) your vision (dream)?	
Individual's Actions	Community Participation (Volunteering) Actions
1.	1.
2.	2.
3.	3.
Review by date:	Review by date:
How does that make you feel?	

8. Support (to request or accept help to sustain or withstand pressure/strain)

How good are you at requesting support from others? Ten you feel you are very good at requesting support from others and zero you do not request support at all.

Present State	
Scaling	<input type="text"/>
What's on your mind here? (What do you presently think and feel regarding you're the support you take from others?)	

Has it ever been lower? Move back to that feeling.

Now move forwards and remember what actions you took to achieve (**get to**) your present state?

Desired State

Scaling

Where would you like to be? What can you do to achieve/sustain that (**stay at this level**)? Try and break that down into small steps?

Could community participation (**Volunteering**) help?

Do you need to break that down into bite size steps?

Close your eyes and image you are waking up and your life has changed you now feel very good at requesting support from others. What changes have been made? What bite size steps do you think you could take to achieve (**get to**) your vision (**dream**)?

Individual's Actions

- 1.
- 2.
- 3.

Review date:

Community Participation (**Volunteering**) Actions

- 1.
- 2.
- 3.

Review date:

How does that make you feel?

9. Giving (**present something voluntarily without expecting a return**). How good do you feel you are at giving support to others? Ten you feel you are very good at giving support to others and zero you do not give support at all.

Present State

Scaling

What's on your mind here? (**What do you presently think and feel regarding the support you give to others?**)

Has it ever been lower? Move back to that feeling.

Now move forwards and remember what actions you took to achieve (**get to**) your present state?

Desired State

Scaling

Where would you like to be? What can you do to achieve/sustain that (**stay at this level**)? Try and break that down into small steps?

<p>Could community participation (Volunteering) help? Do you need to break that down into bite size steps? Close your eyes and image you are waking up and your life has changed you now feel you are very good at giving support to others. What changes have been made? What bite size steps do you think you could take to achieve (get to) your vision (dream)?</p>	
Individual's Actions 1. 2. 3. Review date:	Community Participation (Volunteering) Actions 1. 2. 3. Review date:
How does that make you feel?	

10. Learning & Development (**work people do to develop practices**)

How interested do you feel you are in learning new things? Ten you feel very interested in learning new things and zero you do not feel interested at all.

Present State Scaling <input type="text"/>	What's on your mind here? (What do you presently think and feel regarding your learning and development?)
Has it ever been lower? Move back to that feeling. Now move forwards and remember what actions you took to achieve (get to) your present state?	
Desired State Scaling <input type="text"/>	Where would you like to be? What can you do to achieve/sustain that (stay at this level)? Try and break that down into small steps? Could community participation (Volunteering) help? Do you need to break that down into bite size steps? Close your eyes and image you are waking up and your life has changed you now feel very interested in learning new things. What changes have been made? What bite size steps do you think you could take to achieve (get to) your vision (dream)?
Individual's Actions 1. 2. 3.	Community Participation (Volunteering) Actions 1. 2. 3.

Review date:	Review date:
How does that make you feel?	

11. Emotions (Feelings) (Experiences joy, sorrow, fear, hate, or the like)

How well do you manage your emotions at this time in your life? Ten you feel you manage your emotions very well and zero you do not manage them at all.

<p>Present State</p> <p>Scaling <input type="text"/></p> <p>What's on your mind here? (What do you presently think and feel regarding your emotions/feelings)</p>	
<p>Has it ever been lower? Move back to that feeling. Now move forwards and remember what actions you took to achieve (get to) your present state?</p>	
<p>Desired State</p> <p>Scaling <input type="text"/></p> <p>Where would you like to be? What can you do to achieve/sustain that (stay at this level)? Try and break that down into small steps? Could community participation (Volunteering) help? Do you need to break that down into bite size steps? Close your eyes and image you are waking up and your life has changed you now feel you manage your emotions very well. What changes have been made? What bite size steps do you think you could take to achieve (get to) your vision (dream)?</p>	
Individual's Actions	Community Participation (Volunteering) Actions
1. 2. 3. Review date:	1. 2. 3. Review date:
How does that make you feel?	

12. Trust (reliance on the integrity, strength, ability, surety, etc., of a person or thing; confidence in them)

How good do you feel you are at trusting other people? Ten you feel you are very good at trusting other people and zero you do not feel trusting at all.

Present State

Scaling

What's on your mind here? (**What do you presently think and feel regarding your trusting others?**)

Has it ever been lower? Move back to that feeling.

Now move forwards and remember what actions you took to achieve (**get to**) your present state?

Desired State

Scaling

Where would you like to be? What can you do to achieve/sustain that (**stay at this level**)? Try and break that down into small steps?

Could community participation (**Volunteering**) help?

Do you need to break that down into bite size steps?

Close your eyes and image you are waking up and your life has changed you now feel you are very good at trusting other people. What changes have been made? What bite size steps do you think you could take to achieve (**get to**) your vision (**dream**)?

Individual's Actions

- 1.
- 2.
- 3.

Review date:

Community Participation (**Volunteering**) Actions

- 1.
- 2.
- 3.

Review date:

How does that make you feel?

13. Lifestyle (**your interests, opinions, behaviours, and behavioural orientations**)

How healthy do you feel your lifestyle is? Ten you feel that your lifestyle is very healthy and zero you do not feel healthy at all.

Present State

Scaling

What's on your mind here? (**What do you presently think and feel regarding your lifestyle?**)

Has it ever been lower? Move back to that feeling.

Now move forwards and remember what actions you took to achieve (**get to**) your present state?

Desired State	
Scaling <input type="text"/>	
<p>Where would you like to be? What can you do to achieve/sustain that (stay at this level)? Try and break that down into small steps?</p> <p>Could community participation (Volunteering) help?</p> <p>Do you need to break that down into bite size steps?</p> <p>Close your eyes and image you are waking up and your life has changed you now feel that your lifestyle is very healthy. What changes have been made? What bite size steps do you think you could take to achieve (get to) your vision (dream)?</p>	
Individual's Actions	Community Participation (Volunteering) Actions
1.	1.
2.	2.
3.	3.
Review date:	Review date:
How does that make you feel?	

14. Challenges (a call/ summons to engage in a contest, as of skill, strength, etc.)

How well do you feel you cope with new challenges in your life? Ten you feel you cope very well with new challenges and zero you do not cope with them at all.

Present State	
Scaling <input type="text"/>	
What's on your mind here? (What do you presently think and feel regarding challenges?)	
<p>Has it ever been lower? Move back to that feeling.</p> <p>Now move forwards and remember what actions you took to achieve (get to) your present state?</p>	
Desired State	
Scaling <input type="text"/>	
<p>Where would you like to be? What can you do to achieve/sustain that (stay at this level)? Try and break that down into small steps?</p> <p>Could community participation (Volunteering) help?</p> <p>Do you need to break that down into bite size steps?</p>	

Close your eyes and image you are waking up and your life has changed you now feel you cope very well with challenges. What changes have been made? What bite size steps do you think you could take to achieve (**get to**) your vision (**dream**)?

Individual's Actions 1. 2. 3. Review date:	Community Participation (Volunteering) Actions 1. 2. 3. Review date:
How does that make you feel?	

15. Commitment (**dedicating/obligating yourself to something, e.g. a person/ cause**)

How good do you feel you are at completing something once you have committed to it? Ten you feel very good at completing something and zero you are not good at all.

Present State Scaling <input type="text"/>	What's on your mind here? (What do you presently think and feel regarding your commitment?)
Has it ever been lower? Move back to that feeling. Now move forwards and remember what actions you took to achieve (get to) your present state?	
Desired State Scaling <input type="text"/>	Where would you like to be? What can you do to achieve/sustain that (stay at this level)? Try and break that down into small steps? Could community participation (Volunteering) help? Do you need to break that down into bite size steps? Close your eyes and image you are waking up and your life has changed you now feel very committed to completing things. What changes have been made? What bite size steps do you think you could take to achieve (get to) your vision (dream)?
Individual's Actions 1. 2. 3. Review date:	
Community Participation (Volunteering) Actions 1. 2. 3. Review date:	
How does that make you feel?	

16. Point of View (**Seeing others perspectives**)

How good do you feel you are at understanding someone else's point of view? Ten you feel you are very good at understanding someone else's point of view and zero you are not good at all.

Present State

Scaling

What's on your mind here? (**What do you presently think and feel regarding your understanding of others points of view?**)

Has it ever been lower? Move back to that feeling.

Now move forwards and remember what actions you took to achieve (**get to**) your present state?

Desired State

Scaling

Where would you like to be? What can you do to achieve/sustain that (**stay at this level**)? Try and break that down into small steps?

Could community participation (**Volunteering**) help?

Do you need to break that down into bite size steps?

Close your eyes and image you are waking up and your life has changed you now feel very good at understanding someone else's point of view. What changes have been made? What bite size steps do you think you could take to achieve (**get to**) your vision (**dream**)?

Individual's Actions

- 1.
- 2.
- 3.

Review date:

Community Participation (**Volunteering**) Actions

- 1.
- 2.
- 3.

Review date:

How does that make you feel?

17. Respect (**positive feeling for people who have pointers different to your belief**)

How comfortable is it for you to have respect for other people, regardless of their differences?

Ten you feel very comfortable respecting other people, regardless of their differences and zero you do no comfort at all.

Present State

Scaling

What's on your mind here? (**What do you presently think and feel regarding your respect for others?**)

Has it ever been lower? Move back to that feeling.

Now move forwards and remember what actions you took to achieve (**get to**) your present state?

Desired State

Scaling

Where would you like to be? What can you do to achieve/sustain that (**stay at this level**)? Try and break that down into small steps?

Could community participation (**Volunteering**) help?

Do you need to break that down into bite size steps?

Close your eyes and image you are waking up and your life has changed you now feel very comfortable respecting other people. What changes have been made? What bite size steps do you think you could take to achieve (**get to**) your vision (**dream**)?

Individual's Actions	Community Participation (Volunteering) Actions
1. 2. 3.	1. 2. 3.
Review date:	Review date:

How does that make you feel?

18. Involvement (to include as a necessary circumstance, condition, or consequence with other people)

How important is it for you to feel involved with other people at this time in your life? Ten you feel it is very important to feel involved with people at this time in your life and zero you do not feel it is important at all.

Present State

Scaling

What's on your mind here? (**What do you presently think and feel regarding your involvement with others?**)

Has it ever been lower? Move back to that feeling.

Now move forwards and remember what actions you took to achieve (**get to**) your present state?

Desired State	
Scaling	<input type="checkbox"/>
<p>Where would you like to be? What can you do to achieve/sustain that (stay at this level)? Try and break that down into small steps?</p> <p>Could community participation (Volunteering) help?</p> <p>Do you need to break that down into bite size steps?</p> <p>Close your eyes and image you are waking up and your life has changed you now feel very involved with people. What changes have been made? What bite size steps do you think you could take to achieve (get to) your vision (dream)?</p>	
Individual's Actions 1. 2. 3. Review date:	Community Participation (Volunteering) Actions 1. 2. 3. Review date:
How does that make you feel?	

19. Valued (**feeling highly regarded or esteemed**)

How valued do you feel at this time in your life? Ten you feel very valued at this time in your life and zero you do not feel valued at all.

Present State	
Scaling	<input type="checkbox"/>
What's on your mind here? (What do you presently think regarding feeling valued?)	
<p>Has it ever been lower? Move back to that feeling.</p> <p>Now move forwards and remember what actions you took to achieve (get to) your present state?</p>	
Desired State	
Scaling	<input type="checkbox"/>
<p>Where would you like to be? What can you do to achieve/sustain that (stay at this level)? Try and break that down into small steps?</p> <p>Could community participation (Volunteering) help?</p> <p>Do you need to break that down into bite size steps?</p>	

Close your eyes and image you are waking up and your life has changed you now feel very valued. What changes have been made? What bite size steps do you think you could take to achieve (**get to**) your vision (**dream**)?

Individual's Actions 1. 2. 3. Review date:	Community Participation (Volunteering) Actions 1. 2. 3. Review date:
How does that make you feel?	

20. Happiness (a mental or emotional state of well-being defined by positive or pleasant emotions ranging from contentment to intense joy).

How happy are you at this time in your life? Ten you are very happy and zero you do not feel happy at all.

Present State Scaling <input type="checkbox"/>	What's on your mind here? (What do you presently think and feel regarding your happiness?)
Has it ever been lower? Move back to that feeling. Now move forwards and remember what actions you took to achieve (get to) your present state?	
Desired State Scaling <input type="checkbox"/>	Where would you like to be? What can you do to achieve/sustain that (stay at this level)? Try and break that down into small steps? Could community participation (Volunteering) help? Do you need to break that down into bite size steps? Close your eyes and image you are waking up and your life has changed you now feel very happy. What changes have been made? What bite size steps do you think you could take to achieve (get to) your vision (dream)?
Individual's Actions 1. 2. 3. Review by date: How does that make you feel?	

Any other comments:	
Date of next Interview:	
Signature of Individual:	
Signature of Interviewer:	
Reference: Dictionary.com (2012) Dictionary.com. Retrieved 2 October 2012, from http://dictionary.reference.com	

3.4.8. Main Wellbeing Semi-structured Interviews and Questionnaires

The eighth stage is to run the main research with the updated wellbeing themed semi-structured interview and questionnaire. This eight stage can be viewed in Figure 14: Research Design Flow Chart and Table 2: Philosophy Research Options and Examples that Fit with the Research which shows that the researcher interprets or translates what they observe, to develop an understanding of participants behaviour and views from the semi-structured interviews to respond appropriately to participants so as to encourage them to develop actions from their reflections to improve their wellbeing (Stahl, 2014, p. 1). The semi-structured interviews, reflections and observations are ingredients or components of qualitative information gained on wellbeing which are utilised to find relevant relationships. Any information communication system developed from this research needs to be able to interpret this qualitative data. The participants for the main study are gained through a wellbeing publicity event in the East End of Newcastle at East End Library and Pool. The publicity leaflet to attract participants can be found in Appendix: Advertising Leaflet for Semi-structured Interview for Main Wellbeing Interview. Those who signed up were a mixture of visitors to the event and other stall holders who took an interest in the research. All the participants lived in Newcastle upon Tyne although some again were not native to the United Kingdom and English was not their first language so it was an ideal opportunity to see if the update language in the semi-structured interview works.

The updated semi-structured interview is found in Table 6: Main Wellbeing Semi-Structured Interview Summary which follows the pilot wellbeing interview and questionnaire updates and the process validation (see chapter four). The basic interview process having been tried and tested in both the pilot and Leonardo Da Vinci Transfer of Innovation is

validated although there were a few issues with language comprehension which are taken on board. The same style interview process is used as in the pilot interviews with additional tipping points for wellbeing community participation but with additional language clarifications for easier understanding throughout the interview process, in particular for those where English is a second language. The additional tipping points which worked well in the pilot wellbeing semi-structured interviews seek further validation in the main wellbeing semi-structured interviews. The questionnaire was also updated with regards to feedback and the option of future research involvement seen in Appendix: Main Wellbeing Interview Questionnaire. The questionnaire seeks clarification and validation for the main wellbeing semi-structured interview process and to gain further insight into the needs of an information communication system.

3.4.9. Evaluate the main wellbeing semi-structured interview and questionnaires

The ninth stage analyses and evaluates the main wellbeing semi-structured interview and accompanying questionnaires. The ninth stage is evident in Figure 14: Research Design Flow Chart and Table 2: Philosophy Research Options and Examples that Fit with the Research shows that the semi-structured interviews, reflections and observations are ingredients or components of qualitative information gained on wellbeing which are utilised to find relevant relationships. The semi-structured interview validation of the basic life-board process and route to unique development is found in chapter four.

The results of the wellbeing research are found in chapter five, framework for the introduction of wellbeing in a community context in chapter six and conclusion in chapter seven. The research searches for a solution for wellbeing development with a themed framework for the development of a well-designed information communication system. The validation follows the guidance of Figure 16: Validation of Adapted Rickter Process for Empowering Wellbeing (Adapted from Sousa, 2014, p.218). Figure 16: Validation of Adapted Rickter Process for Empowering Wellbeing (Adapted from Sousa, 2014, p.218) starts with the paradigm of oneness where local social interactions are all interlinked as is the research and validation process. The paradigm starts with the link to psychology and empowering people into wellbeing. If people are empowered into wellbeing this shows a trustworthy concept and process. To validate that trustworthiness the results need to be evaluated and interpreted.

The rational of the meaning of these results needs to clearly identify who is benefitting and how are they benefitting. This needs to be clarified with the generation of the theory and contribution to knowledge in this case the wellbeing themed framework and additional tipping points identified and the transferability in this case from pilot to the main study based in the North East of England.

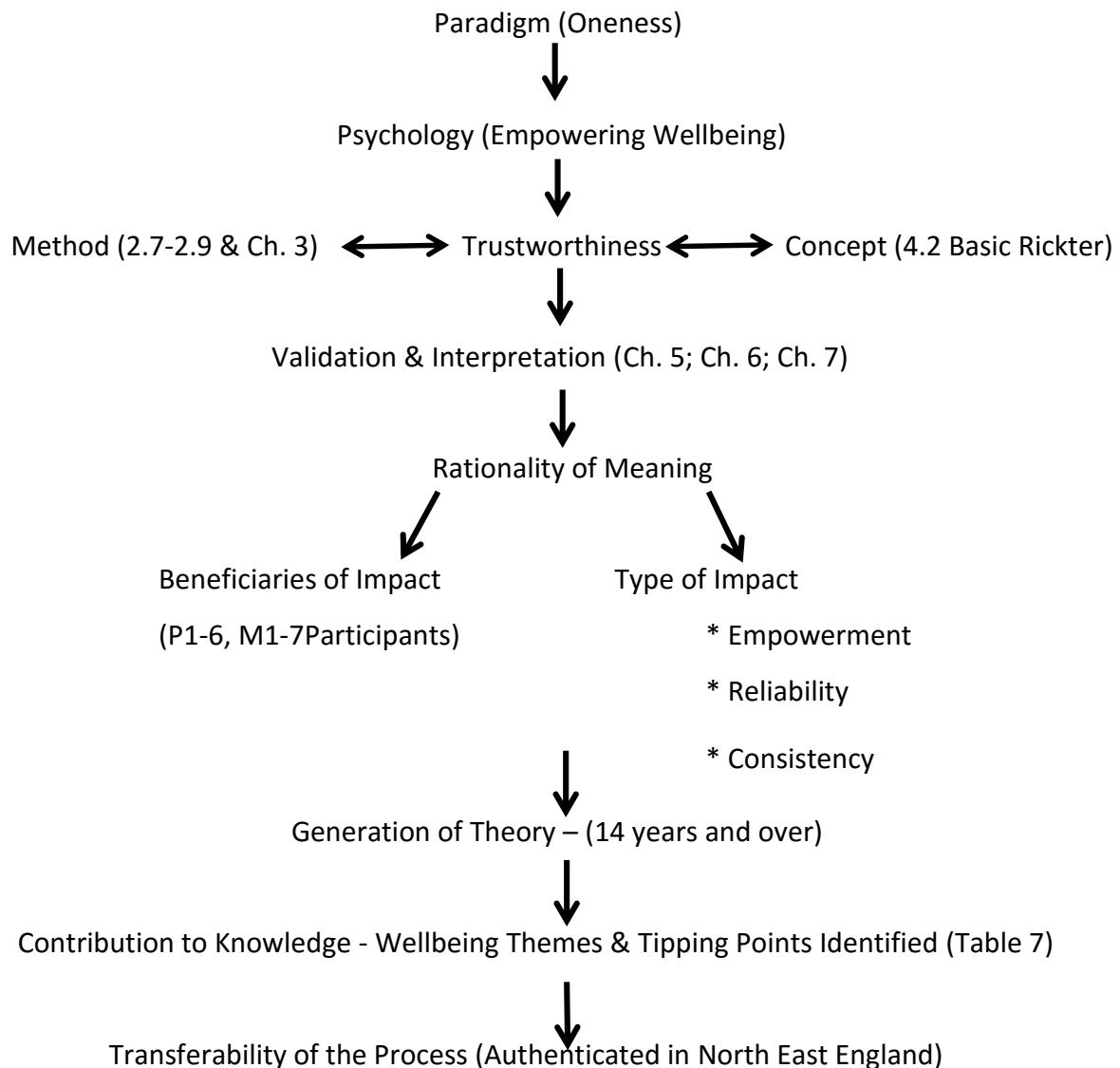


Figure 16: Validation of Adapted Rickter Process for Empowering Wellbeing (Adapted from Sousa, 2014, p.218)

3.4.10. Identification and Recommendation of Future Research

The tenth stage focuses on drawing a conclusion and makes recommendations within the themed process to identify future developments and possible research and is identified in

Figure 14: Research Design Flow Chart and in Table 2: Philosophy Research Options and Examples that Fit with the Research as reviewing all mixed methods research which would in the main be classified as following qualitative and interpretive values. The conclusion and recommendations for future research based on the findings can be found in chapter seven. The researcher also worked with an IT developer for 4 months to try and develop a basic information system proto type but the developer took ill unfortunately without producing any useable system so the research is limited to research with no ICT development.

3.5. Research Ethics

The research proposal is assessed against ethics to ensure it follows good practice and the requested ethics forms were attached see Appendix: Ethics (Northumbria University, 2013-14). The documents produced as required by ethics and for best practice are firstly an introductory sheet, prepared for all participants, to ensure they are fully aware of the research they are participating and all participants are offered copies of this documentation to keep. Secondly a voluntary consent produced and requested of all participants and where those participants are under sixteen their parents must also sign the consent section. All participants are offered copies of their interviews and feedback from the end results. The research involves children and vulnerable adults so the researcher obtains an up to date enhanced CRB in line with the ethic committee and request and good practice. In lines with the Helsinki Declaration participants are informed that they can at any time withdraw their participation and data from the research (WMA, 2008). The following research principles are followed:

- “Honesty in all aspects of research
- Accountability in the conduct of research
- Professional courtesy and fairness in working with others
- Good stewardship of research on behalf of others” (WCRI, 2010)

All personal data is securely stored and will be deleted/securely disposed of within 6 months of the research being validated (Legislation.gov.uk, 1998).

3.6. Conclusion

The paradigm of oneness where everything is interconnected is reflected in the methodology with this complex research which follows an iterative process using design to look for improvements. The approach of mixed methods is clarified with the twenty themes identified from the literature review which are verified with the spiritually daily reflections and open community interviews to be validly appropriate in the two extremely different environments. The twenty themes are used to develop the pilot wellbeing semi-structured interview and accompanying questionnaire. The way questions are asked encourages individuals to reflect in specific ways and eases the route to development. The wellbeing semi-structured interview is piloted and the basic interview process is validated with the Leonardo Da Vinci Transfer of Innovation (TOI) research. The main wellbeing themed semi-structured interview and questionnaire are altered taking on board the results of the pinot and Leonardo Da Vinci TOI results and validation (see chapter four). The results of the main wellbeing semi-structured interviews and analysed and evaluated to draw conclusions and recommend further research. The field of research is focused in Newcastle upon Tyne, the Scottish Highlands, Germany, Greece and Italy although many participants are from across the world. Ethics has been taken earnestly with a CRB check being adhered to, the storage of data being secure and the research being carried out with good stewardship, honesty, accountability and in a professional manner.

Chapter 4: Validation of the Basic Interview Process

4.1. Introduction

This chapter evidences the validation of the basic semi-structured interview process as shown in section six ‘Validate Basic Semi-structured Interview Process’ in Figure 14: Research Design Flow Chart and relates to Table 2: Philosophy Research Options and Examples that Fit with the Research by endorsing and documenting it with those who manage, practically present it and participants who use the process (Marks & Yardley, 2004). The role of the researcher was as evaluator of all the semi-structured interviews, feedback and questionnaires. The researcher presented feedback in discussion sessions and shared experiences as a user of the process with practitioners and managers and provided documented research results and reports. The managers, practitioners and a random sample of interviewees were all given questionnaires at the end of the interim study and at the end of final study. The researcher listened to feedback in meetings about how the practitioners had interviewed, signposting offered, the language used, mistakes they made and the consequences, the success stories and how they thought they had come about. The researcher utilised the identified differentiations from the standard interviewing process and evaluated these for use in the main wellbeing research interviews.

This research follows an appreciative inquiry methodology in line with the paradigm of oneness to validate the experiences of those who use the process (Bushe & Kassam, 2005; Sousa, 2014). The local social interactions that are present in this research involve those who participate in the inquiry at all levels (Heron & Reason, 1997). An appreciative inquiry uses analysis, feedback and development through decision-making to create beneficial change for those involved (Cooperrider & Whitney, 2005; Heron & Reason, 1997). To gain valid results the participants as well as the practitioners and managers are asked to feed back to provide further documented evidence on their experience and to corroborate the findings (Marks & Yardley, 2004; Sousa, 2014). The evaluator/researcher shares feedback at each stage with the practitioners and managers to help with decision-making (Heron & Reason, 1997). The focus being to investigate if the basic semi-structured interview process and newly developed frames of reference are dependable, consistent and trustworthy (Sousa, 2014). A key piece of evidence is the graphs developed over time showing the participants distance travelled

during the research (Marks & Yardley, 2004). The basic process was developed by the Rickter Company (2015) and in this piece of research transferred and adapted by four organisations supporting people into employment or community participation roles. The evaluation follows Figure 17: Validation of Basic Rickter Process for Empowering People into Work (Adapted from Sousa, 2014, p.218). The diagram starts with the paradigm of oneness where local social interactions are all interlinked as is the research and validation. The paradigm starts with the link to psychology and empowering people into work.

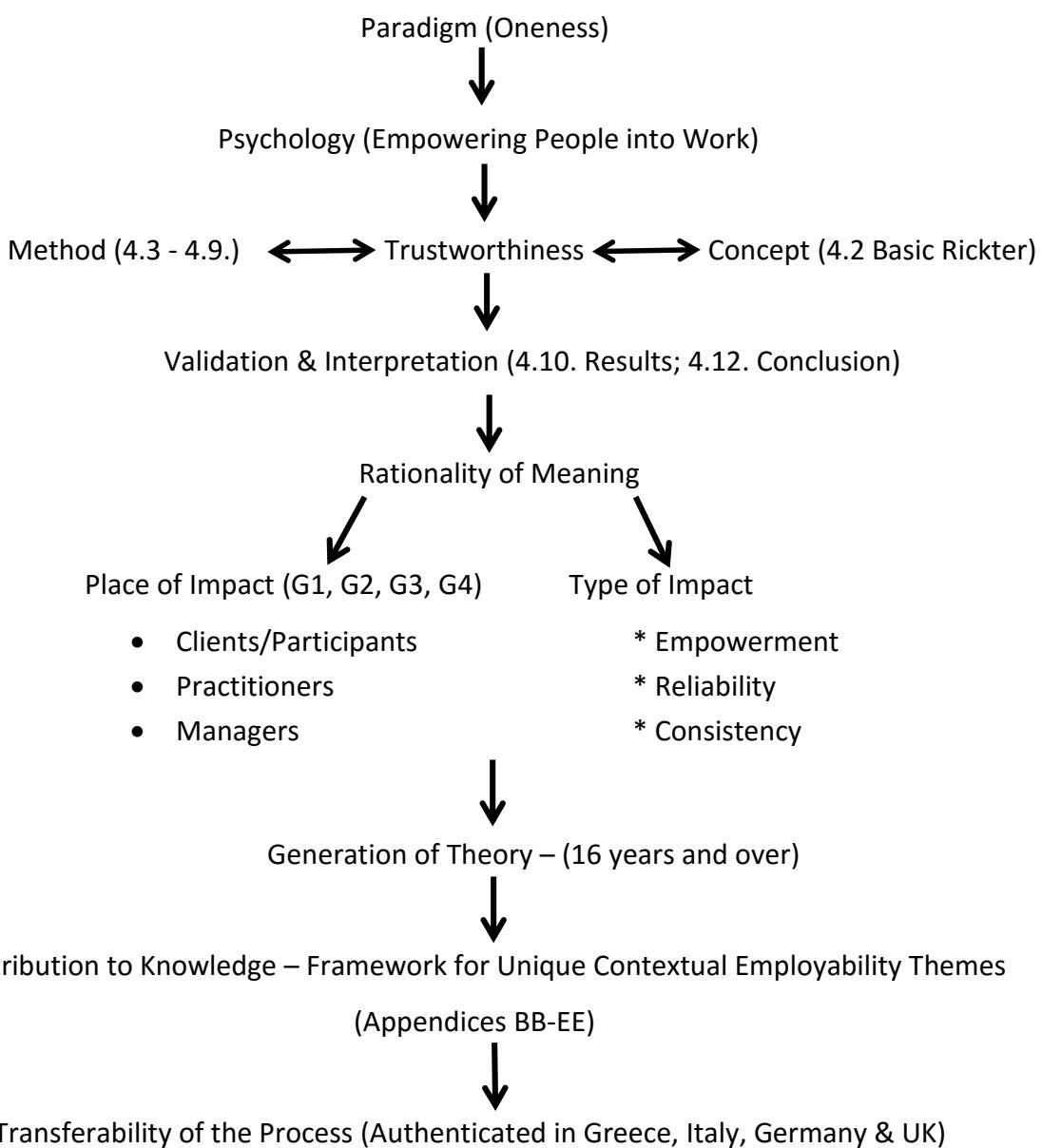


Figure 17: Validation of Basic Rickter Process for Empowering People into Work (Adapted from Sousa, 2014, p.218)

If people are empowered into work this shows a trustworthy concept and process. To validate that trustworthiness the results need to be evaluated and interpreted. The rational of the meaning of these results needs to clearly identify who is benefitting and how are they benefitting. This needs to be clarified with the generation of the theory and contributions to knowledge in this case the employability framework and the transferability in this case from the UK to Greece, Italy and Germany.

4.2. The Basic Rickter Scale Process

The Rickter Company basic interview theme is set on their scaling board tool called the Rickter Board with their ten themed headings termed a frame of reference which they use as a training board, it is called the life board which can be viewed in Figure 18: Rickter Board. The Rickter Scale® process was designed to support individuals to overcome their barriers in engaging with employment, training and education. These barriers can create denial and apathy to ambition and aspiration. The barriers can be caused by many social interactions in life such as social exclusion or a chaotic lifestyle. The process can create direction and give purpose to an individual to move forwards in their life.



Figure 18: Rickter Board

This assessment process identifies current circumstances; reflects on where they have been, evaluates how they have moved forwards in the past, the strategies and skills they tried and tested; their present needs and motivates individuals to set positive, achievable goals for the future. This process is measurable via the scaling individuals provide in their present status and where they would like to be (Scharmer, 2010b). It measures any future movement and records the detail to achieve this. The basic themed process designed by the Rickter

Company is called the life-board and consists of ten headings which can be viewed in Figure 19: Basic Rickter Scale Training Frame of Reference. This board is used to train practitioners who then develop their own special board dependent upon the organisational and or participant/client needs. The board supports the structure of the interview and gives the interviewee something to focus on other than the interviewer. This removal of focus on the interviewer encourages the interviewee to be more reflective and open (Hirschfeld & Lammel, 2005). The process also supports the paradigm of oneness with everything being interconnected. Your present behaviour is developed from your experiences. People can reflect upon these positively or negatively meaning two people can have the same experiences and react in different ways. Humans are subjective and what relates to a theme for one person may not relate for another (Mark, 2006). This process captures that subjectivity and makes sense of it (Sousa, 2014). The themed process supports improved understanding of individuals situations and on a bigger scale this research shows how the themes (frame of reference) used develop understanding with the various ethnographic groups (Marks & Yardley, 2004).

Figure 19: Basic Rickter Scale Training Frame of Reference

Lifeboard Frame of Reference
1. How happy are you with your Employment/Training/Education ? Ten you are very happy with your employment/training/education. Zero you are not happy at all.
2. How happy are you with your Accommodation ? Ten you are very happy with your accommodation. Zero you are not happy at all.
3. How happy are you with your Money ? Ten you are very happy with your money. Zero you are not happy at all.
4. How happy are you with your Relationships (this can be any relationship that comes to mind)? Ten you are very happy with your relationships. Zero you are not very happy at all.

- | |
|---|
| 5. How happy are you with the Influences? Ten you are very happy with your influences. Zero you are not happy at all. |
| 6. How Stressed are you at this time in your life? Ten you are very stressed at this time in your life. Zero you are not stressed at all. (R) |
| 7. How much are Alcohol part of your life? Ten alcohol is a very large part of your life. Zero alcohol is no part of your life at all. (R) |
| 8. How much are Drugs part of your life? (This can be anything that you think are drugs, e.g., medication, coffee, cigarettes, etc.) Ten drugs are a very large part of your life. Zero drugs are no part of your life at all. (R) |
| 9. How happy are you with the state of your Health ? Ten you are very happy with your health. Zero you are not happy at all. |
| 10. How Happy are you at this time in your life? Ten you are very happy. Zero you are not happy at all. |

The series of what appears to be simplistic questions is researched and structured dialogue which enables the interviewee to recognise and identify with their present circumstances, where they have been in the past and how they can progress forwards building upon their prior strategies and skills by setting achievable goals (Lo, 2011). The questions are asked so that the participant identifies with various states of themselves, understands how those states have developed and how they can change (Berg & Szabo, 2005). All this information is used to formula a unique action plan which can be monitored or altered as circumstances change in the future (Dimitrov, 2003). Change is inevitable and needs to be part of a wellbeing process (Dimitrov, 2003). The process uses those emotional feelings to help recover past experiences of achievement and to attach the emotions to their goals to enable the vision of the bigger picture and use of the motivational feelings to fulfil their goals

and move forwards (Diener, & Seligman, 2002; Siegel, 2007). Repeated use of the process encourages participants to become more aware of their behaviour and systematically start to think through their own successful local social interactions to move forwards whilst starting to make sense and master their behaviour through understanding others (Di Paolo, 2005; Salvatore et al, 2013).

The guidelines for structuring the interview can be viewed in Table 7: Basic Rickter Process. The present scaling section explores the participant's present circumstances and any questioning needs to be in the present tense (Siegel, 2007). This section enables the participant to see the big picture and recognise those interrelationships between social interactions and to acknowledge their beliefs and values (Mark, René & Jo van, 2006; Moskowitz et al, 2011). This research clearly relates to the paradigm of oneness where everything is interconnected by social interactions. The data collected here is a scaling for the present state and a note to explain what is on the participants mind with regards to the subject area raised (Mills, Fleck & Kozikowski, 2013). This is important to note so each participant is clear how they viewed each area to gain their big picture.

Table 7: Basic Rickter Process

Present State Scaling <input type="text"/>	
What's on your mind here?	
Has it ever been higher/lower? (depending on whether a '10' is positive or negative) Now move back to your present state? How did you achieve that?	
Desired State Scaling <input type="text"/>	
Where would you like to be? What can you do to achieve/sustain that?	
Individual's Actions: Review by date:	Practitioner's Actions: Review by date:

The second section reflects on if and when their situation was worse without delving into the situation just acknowledge they have been there and explore what strategies and skills they used to move forwards to where they are today (Berg, 2005). The aim is to move

the slider back to where they have been, acknowledge it and immediately request they move it back to the present scaling with the aim of remembering how they achieved that move forwards, which is recorded (McDougle et al, 2011). This part of the process supports the next section which moves onto where they would like to be. This new scaling is collected along with details of what the participant can do to achieve that scaling or sustain it if the desired scaling has remained the same as the present scaling (Wolfgang, 2007). These strategies are broken down and recorded in bite size action points with reasonable dates to achieve. The process is therefore solution focused with SMART goals: specific, measurable, achievable, realistic and time-bound (Thackara, 2006). In this research the practitioners and managers are experts in the field of supporting development for employment with both soft and hard skills, they can identify resources and or sign posting to support individuals to move forwards (George, 2013). The overall process supports individuals to develop their mind, brain and relationships which include those in employment (Goleman, 1996; Pryor & Bright 2011; Siegel, 2010).

4.3. Leonardo Da Vinci Transfer of Innovation (TOI)

The Rickter Company trains the evaluator and or researcher and four companies who support people into work, who are the focus in this research, which is about transferring an innovative process across Europe. The TOI research is used to investigate the reliability and validity of the basic semi-structured interview process with 591 participants. The aim being to identify benefits and any limitations of the basic process, the scaling board and the Impact Management System (IMS) which is an information communication system used by the practitioners and managers to record participant details and progression. Any limitations identified are given recommendations for change dependent upon the feedback from the managers, practitioners and participants. This research also supports the investigation of a possible future development with a new information communication system for public use with a self-help wellbeing system with big data usage.

This piece of research directly refers to the recommendation of the European Parliament and Council of 18 June 2009 on the establishment of European Quality Assurance Reference Framework (EQARF) for Vocational, Education and Training (VET) providers, by providing practical tools that enable the implementation of quality criteria concerning the evaluation of

outcomes and processes, which should be regularly carried out and supported by measurement and review. This project has a direct relationship to indicator number one “Relevance of quality assurance systems for VET providers”, as it demonstrates how VET providers can apply a comprehensive quality assurance system which is designed around the semi-structured interview process specifically set to develop soft skills needed for employment using the sliding scale board. In addition an online system or Impact Management System (IMS) that is used to record and store data is further developed during the process for use with practitioners. There is an interim and final report to this research which can be found in the Advanced Data Archive Management (ADAM) Project and Product Portal for the Leonardo da Vinci repository the final report is used as evidence in this research (George, 2013).

4.4. G1 History and Target Group Brief Description

G1 was a families and children's centre in Athens, Greece and is a leading Greek Non-Government Organisation (NGO) aiming to promote active inclusion of various socially excluded and underprivileged groups, with a special focus on mental disorders. Specifically, G1 has a solid background and substantial expertise in providing housing and rehabilitation services to individuals with mental disorders. G1 has a strong expertise in social inclusion, gender equality, immigrants, employability, VET and citizenship, with a focus on vulnerable social groups such as women, one parent families, elderly as well as youth and the long-term unemployed. Research and social studies are among the most important components of G1's activities. Since its establishment in 1979, G1 has developed and implemented numerous successful projects and research in Greece and increasingly abroad. G1 has extensive experience in vocational training and counselling programs targeting vulnerable people. It focuses on the implementation of specific programmes and actions aiming at the diffusion of know-how and the development of innovations in education and training of socially vulnerable groups. G1 provides comprehensive support to immigrants, people with disabilities and youngsters at risk of dropping out of school. Most of G1's activities are carried out in disadvantaged areas with beneficiaries of all ages from at risk groups of social exclusion, including those with special needs. G1 aims to transform public psychiatric institutions to integrated support centres run by NGOs and place mentally ill people in specialised homes or

have them attend day care centres and participate in community based services. G1 offer multiple services in social, health, education, employment and legal fields under the overarching objective of rehabilitating and when possible reintegrating people with severe mental disorders. Staff of Day Care Centres evaluate participant need/desire to participate in supported paid employment or in prevocational rehabilitation programs (occupational training) and encourage them to participate in educational programs in order to improve their skills in a variety of areas, e.g., computers, organic farming, carpentry, basic business education. Day Care staff support participants to write their CV and complete application forms as well as addressing negative or irrational ways of thinking that act as a barrier to employment (fears of performance/ irrational expectations/ money/ responsibilities). The Greek learners like to gain feedback after any assessment as it offers them a sense of direction. The learners feel it is important that assessments are validated to add to their sense of achievement and offer added value to their skills in the form of an accredited certification.

4.5. G2 an Employment Desk for Domestic Care Workers History and Target Group Brief Description

G2 is based in Carpi, Italy, is a cooperative society working in the field of social innovation, with a specific focus on management of project and promotion of products and services in the field of welfare and social inclusion. G2 activities include active ageing and support to frail and dependent elderly; training and support to family carers, informal and formal carers; and the fight against poverty through supporting social inclusion of disadvantaged people. G2 areas of competence are:

- Project management and social research
- Training and e-learning
- Validation of informally acquired skills
- Social information
- Development of software packages for social workers and employment services

Within its activities, G2 has promoted several projects at local, National and European level and, among its participants, there are: local and regional administrations, foundations, Non-Government Organisations (NGO), trade unions, job centres and social cooperatives. G2 manages an employment services desk promoted by Carpi Municipality. The main aim of this

desk is to support the care work supply and demand matching in order to promote and guarantee that migrant care workers can work legally with a regular job contract whilst enhancing the quality of care activities, so that families can be assured of a better quality of life for their dependent elderly relatives. In order to create domestic care workers profiles and to put them in the database of the province, each care worker has to answer questions which identify the professional skills of the care worker and collect further useful information for the demand supply matching. Once the care worker has answered all the questions, documents are compiled and the care worker then has to wait for a match with a family's request. The demand and supply matching is monitored and regularly updated. The most important element of the Italian partner's use of the semi-structured interview process is the participants' motivation to carry out the complete process so as to gain a recognised qualification, which by doing they believe they have more opportunity of getting a job.

4.6. G3 History and Target Group Brief Description

Applicant co-ordinator: G3 in Solingen, Germany, is a private vocational training centre in the western part of Germany and offers professional counselling, training and job placement for vulnerable people wanting to access the labour market. This includes the long-term unemployed, job returners, migrants and elderly people. G3 also acts as a service provider for the application and administration of EU funded qualification courses. G3 has been operating since 2004, and there are local branches in the cities of Solingen, Wuppertal, Leverkusen and Marburg. G3's work supports people who are dependent on social benefits on their journey towards professional qualifications and employment. Accordingly they offer:

- Preparation courses for the successful completion of advanced vocational training for young people
- Individual counselling and job placement for unemployed people
- IT-related qualification courses for those seeking further education
- Language courses and courses including literacy skills for migrants
- Training courses for woman returning to work following maternity leave
- Counselling, training and job placement for unemployed people over 50 years old

Each participant brings his/her unique individual needs to become the central focus of G3 work, while their partners are contracting bodies such as the federal Employment Agency, local Job Centres, state governmental departments, EU administration bodies and private companies. In the German assessment process referred to as ‘competency analysis’, students were quite happy to do written tests in literacy and numeracy, though practical assessment was popular when the tasks involved team working. The teachers in the Assessment Centres recommend further training to follow these assessments, based on the identified individual strengths and weaknesses. G3 strongly believes in the idea of “building Europe” and has taken part in co-operation projects with schools and other vocational training centres throughout Europe for many years. Successful lifelong learning projects like ‘Assessing and Evaluating Non-formally or Informally Acquired Skills in Vocational Training’ (ASK) which was selected as an example of “good practice” by the German National Agency and ‘Women’s International Network’ (WIN) reflecting the productive work of G3.

4.7. G4 the UK-NW Target Group and Brief Description

A local authority from Ayrshire in Scotland, United Kingdom provided anonymised data through the Impact Management System. Due to the high level of data protection required the evaluator (researcher) is only given a limited number of reports and no identifiers were shared. This is to protect confidentiality for both the local authority and the individual participants. The service works with adult learners supporting individuals to improve their literacy and numeracy skills, in order to improve their chances of employment or promotion within the workplace and also to cope better with day to day living. This is because there is a high connection between poor literacy and numeracy and high rates of unemployment. In this particular part of Scotland the combination of poor basic skills and unemployment is not only high, but because of the closure of heavy industries since the 1980s, there are many instances where two or even three generations of the same family are unemployed. This obviously has a knock-on effect in their communities, and is strongly linked to social exclusion, poverty and poor health.

4.8. Appreciative Inquiry

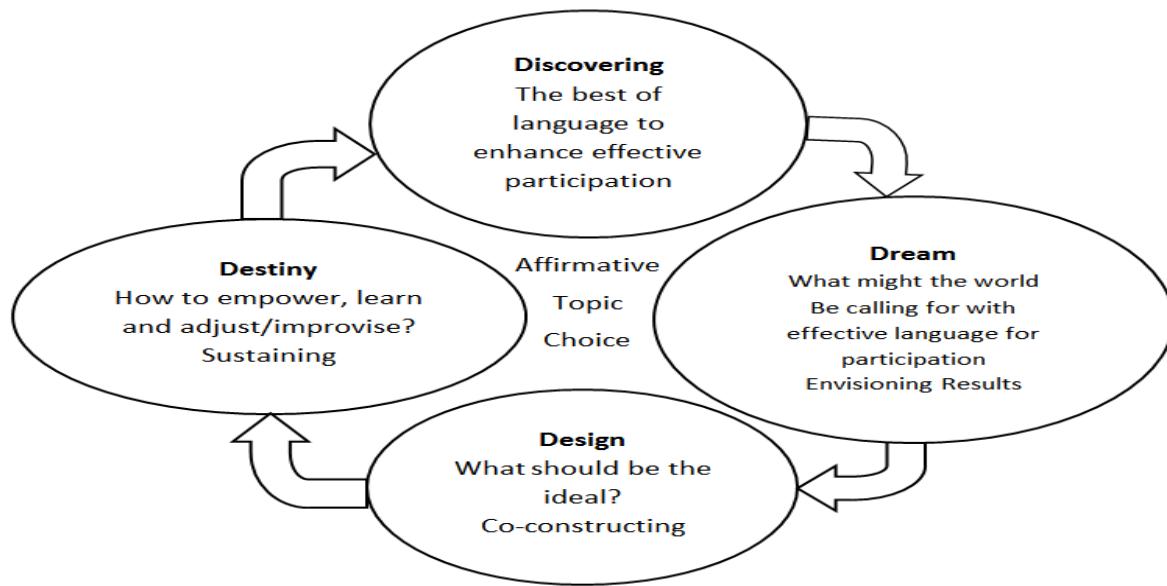


Figure 20: Appreciative Inquiry 4-D Cycle (Adapted from Cooperrider & Whitney, 2005, p. 16)

The methodology for this section of the proposed research is an appreciative inquiry which includes action research and reflective practice which can be seen in Figure 20: Appreciative Inquiry 4-D Cycle (Adapted from Cooperrider & Whitney, 2005, p. 16). There are five basic principles within (Cooperrider, 2005) appreciative inquiry. The first being the knowledge of the participant should be interwoven with the destiny of the organisation/s (Whitney & Trosten-Bloom, 2010a). The organisation/s need to be seen as a living construction. The second is that the research inquiry and the change that happens are simultaneous (D. L. W. Cooperrider, Diana Kaplin 2005). The seed for changing the way people tip into employment/community participation must be what the participants think and talk about from the beginning so the discussions and narrative inform discovery and images inspire design Malcolm Gladwell, 2001). This material is used to construct the destiny (D. L. W. Cooperrider, Diana Kaplin 2005).

The third is a poetic principle, the organisations story is under constant rewrite as they go through life constantly learning, being inspired like the ongoing interpretations of poetry (Whitney & Trosten-Bloom, 2010a). The VET organisations policy is constantly interpreted differently and as such the organisations change their responses dependent upon the participants or government in office at any given time (Goodson & Phillimore, 2012). An

inquiry seeks information with regards to the wellbeing of an organisation, the enthusiasm and efficiency. Fourthly is that of anticipation, the collective imagination and discourse of the future allows the participants to project ahead through language and imagery bringing the future into the present. The last principle is that of the unconditional positive for building and sustaining change which is uniquely designed by and to fit the needs of the participants. This needs team work with positive affect which are set through innovation meetings/workshops to inspire, to create togetherness, urgency, enthusiasm and joy creating a catalyst to craft and seed the most effective design through unconditional positives.

The researcher/evaluator participates alongside the practitioners from the beginning to discuss the project its development and training. The researcher/evaluator participates in the full process from training to use of the IMS for experience and evaluation. The researcher gathers feedback via viewing the practitioners training and interviewing techniques, the recorded information on the IMS, discussion sessions, open questions, and questionnaires and by email clarification to make recommended changes to improve the quality of the experience of the recording documentation, training, frames of reference, interview and the IMS. Action research is based on improvement of a practice; the improvement of the understanding of a practice by practitioners and the improvements of situation in which the practice takes place (Robson, 2002). This approach fits with best practice which is an area being promoted in the Leonardo Da Vinci Transfer of Innovation: European Quality Assurance Reference Framework (EQARF) in Vocational Education and Training (VET). It involves the members of VET and their participants which enhances the ownership. The appreciative inquiry process is viewed in Table 8: Appreciative Inquiry Process Creating Appreciative Soft/Hard Skills Development (Adapted from Cooperrider & Whitney, 2005, p. 30, 39 & 47). The table shows the design of this research. Reflexive practice demands awareness that the researcher is an individual with a particular social identity, background and culture that may have an impact on the research process, a participant observation (McKernan, 1996). Reflexivity can be used to identify areas of potential researcher's bias. Through interpretivism the data is used to ascribe and understand the significance of participants' constructed reality and their subjective views of the use of appropriate language and quality assurance in the field.

Table 8: Appreciative Inquiry Process Creating Appreciative Soft/Hard Skills Development (Adapted from Cooperrider & Whitney, 2005, p. 30, 39 & 47)

	4-D Cycle Focus	Participants	Creating Appreciative Organisations
Discovery	Mobilise a systemic inquiry into the use of language & quality to benefit participants understanding in semi-structured interviews internationally	<ul style="list-style-type: none"> • Engage in appreciative interviews • Reflect on interview highlights • Aligning strengths for competitive advantage • Sharing best practices to enhance effectiveness & efficiency 	<ul style="list-style-type: none"> • Inquiry into the call & capacities to create an approach for all • Uncover multiple & diverse stakeholder strengths • Aligning strengths for collective potential
Dream	Envision participants improved understanding & greatest potential for positive influence & effect	<ul style="list-style-type: none"> • Images of a better world • Strategic vision of the use of language & quality to enhance participants understanding of themselves and their enhanced potential in serving society 	<ul style="list-style-type: none"> • Share dreams, narrative & best practice collected • Create & present dramatic enactments
Design	Craft propositions in which this improved language & quality for understanding for participants is boldly alive in all strategies, processes, systems, decisions & collaborations	<ul style="list-style-type: none"> • Articulating improve language & quality values • Crafting provocative propositions & improved language & quality for understanding principles • Design ideal system for improved use of language & quality for understanding 	<ul style="list-style-type: none"> • Crafting clear purpose & improved language & quality for understanding principles • Crafting a charter of relationships, roles & responsibilities with improved language & quality use • Craft design for integration
Destiny	Invite action inspired by the discovery, dream & design days.	Acting to realise the dream in alignment with the principles	<ul style="list-style-type: none"> • Publicly ask for support • Continuous network innovation in alignment with the vision & values

4.9. Evaluator/Researcher

As external evaluator the prime purpose is to examine the extent to which the project meets its objectives and the partners agree the work plan. As a researcher the prime purpose is to see if the basic process is valid, trustworthy and reliable. The evaluation of the project is undertaken in two stages, the first with the lifeboard frame of reference and the second with specially adapted frames of reference for each group so as to effectively contribute to the learning process and development of 'Scaling New Heights in VET: adapting the semi-

structured interview and process to improve and monitor the journey of marginalised groups towards employability'. This also informs the partners about the effectiveness of the project. The evaluation process itself encourages the partners to reflect on what has been happening. This allows for identification of good practice whilst enabling strategic development to overcome issues along the way. The evaluator uses data from the Impact Management System, feedback reports from the partners and the following forms of evaluation throughout the TOI study as follows:

- Appendix: Leonardo Da Vinci TOI Training Evaluation Questionnaire
- Appendix: Leonardo Da Vinci TOI Practitioner Interim Questionnaire
- Appendix: Leonardo Da Vinci TOI 'Life-Board' Questions for Employability Participants
- Appendix: Leonardo Da Vinci IMS Usability Questionnaire
- Appendix: Leonardo Da Vinci TOI Final Practitioner Questionnaire
- Appendix: Leonardo Da Vinci TOI Final Managers Questionnaire
- Appendix: Leonardo Da Vinci TOI Final Participant Questionnaire
- Appendix: Leonardo Da Vinci New Interview Frames of Reference Headings

The evaluation process considers the impact of the project for all stakeholders. The external evaluator/researcher observes and seeks opinions on the extent to which objectives and proposed outcomes are met throughout the project and looks at the added value gains from stakeholder participation. The evaluation process supports the project through the delivery of the Interim and Final Evaluation Report (George, 2013). The reports are utilised to formally report back to the project funding body via the National Agency of the Coordinator Partner G3 in Germany, at the conference and to other prospective stakeholders via the website. Both the Interim and Final Evaluation Reports provide opportunities for the partners to reflect on the semi-structured interview process, recognise participant achievements, and consider and discuss both short and longer-term strengths, weaknesses, opportunities and threats. The data is also used to validate the process for the wellbeing research.

The final evaluation key question and focus is, 'How successful is the Transfer of Innovation, and how the success is demonstrated?' The answer lies first in the purpose of the semi-structured interview process itself, because it is designed to measure an individual

participant's personal journey in this case towards employability and or opportunity readiness, from the first interview where individuals consider their present state in relation to relevant aspects of their life that are going to impact that journey, where they make informed choices about their goals and aspirations, and where in collaboration with their practitioner, they complete and take responsibility for their action plan.

At the participant's second interview, when the same questions are reviewed as were asked in the first interview, they consider their own perception of any movement. This may in the following interviews be progress, regression or even stasis in relation to their desired state and goals. This is a paradigm of oneness where everything is interlinked and causes interactions. Individual's lives have highs and lows. Understanding these supports development. In calculating the percentage of movement towards their goals across 10 pre-determined key elements that form the 10 headings of each partner's frame of reference, it is demonstrated not only how well each individual participant succeeds, but because the Impact Management System aggregates, analyses and produces bespoke reports about any of the qualitative and quantitative data inputted by the practitioners, it is also possible to evaluate the movement of the different participant cohorts, and compare outcomes across the four partner organisations. In the Final Evaluation Report the data is fully explored in this way (George, 2013). This evaluation process also focuses on:

- Extent of outcome achievement;
- Extent of work package delivery, e.g., effectiveness, timescales, partner cooperation, best practice, issues, etc.
- Project added value to each partner, including feedback from Practitioners as to how active participation has had an impact on their own practice and development;
- Also as far as the logistics of the research has allowed, feedback is also presented from a sample of participants from each country.

The evaluation considers each of the work packages outlined and takes into account the overall focus of the evaluation. The meetings/workshops allow for reflection on the process. More specifically how language & the quality aspects effect participation. The interim report and other graphs and statistics provided by the evaluator are used to promote discussion and

reflection. This is discussed in the meetings/workshops whereby the practitioners were asked to socially innovate how the information communication system could play an improved role. What would satisfy their needs for effective involvement? Practitioners are encouraged to role play, narrate, etc., motivational factors which could be used for improvements to the process and IMS.

The connections from the narratives and semi-structured interviews were compared with information from the workshops which help develop improved language and quality motivational factors for more effective participation. These were interpreted to design the final proposition framework for the transfer of innovation for each organisation. This was being fed back to those involved for peer review. The frameworks were developed for effective stakeholder use dependent upon the needs of their participants. The evaluation guides improvements and the development of the IMS to enhance the use by sponsors, managers and practitioners. The IMS is not set up for or used by participants. In line with the reporting arrangements required by the Leonardo Da Vinci Programme the evaluator completes both Interim and Final Evaluation Reports (George, 2012; 2013).

4.10. TOI Results

The following section and sub sections give the phased overview of the Leonardo Da Vinci Transfer of Innovation, the demographic data of participants, the distance travelled by ethnographic splits, feedback from the initial life board trials, the semi-structured interview results, end of training questionnaire results, interim practitioner questionnaire results, the interim IMS usability and questionnaire results, evaluation of the vocational training organisations usage, the final evaluation questionnaires and finally validity of the basic semi-structured interview process.

4.10.1. Phase Overviews

Phase One sees the initial steering group meeting, although unavoidably delayed by a month, successfully achieves its objectives of developing the website. There is one small issue with the proposed website colour scheme as those who suffer colour blindness cannot view all the content which the team remedy from the evaluator recommendations.

Phase Two sees the Impact Management System adaptation to accommodate the use of the German, Greek and Italian languages taking slightly longer to complete which causes minor problems for the practitioners in phase three. Language proves to be a major issue which is also an issue in the wellbeing community participation pilot but to lesser extent. However both are in need of careful analysis. It was more of an issue in the Leonardo Da Vinci Transfer of Innovation as English was not the mother tongue of the majority of practitioners and participants. Words can have multiple meanings in one language let alone various languages, some words mean the same thing and some words have no translation at all into other languages. The fact that the language the frames of reference were initially developed in is not the mother tongue of all the practitioners is proven to be a major problem. This again causes issues later as some of the interviewees, in Italy, are interviewed in a second language, as they are migrants. The frame of reference and semi-structured interview need further modification in this instance. The Impact Management System development is clearly a significant part of the innovation transfer and as such is considered by the practitioners as a work in progress that continues throughout the life of the project. Early in the project the evaluator recommends and designs a form which is recommended for use in improving the management of Impact Management System issues being raised as they are not always traceable and some get mislaid. Upon the upgrading of the Impact Management System feedback the improvements are made much easier with staged accountability with feedback given at each to the person raising the issue so they are confident their issue is being taken care of.

Phase two also sees the first in course questioning session designed to gain feedback on the training course so alterations can be made during the training. The first questionnaire is designed to gather information about the practitioners' training experience. The first questionnaire is also designed to gather information about:

- Preparation of the practitioners
- Appropriateness of the life-board frame of reference and changes for the new group frames of reference (headings and wording)
- Appropriateness of the interview environment
- Actual use of the process

- Specific outcomes for practitioners
- Specific outcomes for participants

All preparation notes sent to the practitioners prior to the training are translated into the practitioners languages and all training hand-outs and PowerPoint Presentations are similarly translated, English is used as the means of delivering the training itself. The training is designed and managed well taking on board issues as they arise and making alterations to suit the practitioners. It is quickly recognised that not all practitioners had the same level of competence in either understanding spoken English or of speaking it themselves. The training schedule is therefore reviewed and adapted to cater for more vernacular group sessions so the practitioners can support each other with any language difficulties they encounter. There are also a few translation issues in relation to the more technical aspects of the semi-structured interviewing process that became apparent. The partner practitioners are given more time to review the process and amended accordingly so the instructions are suitable for their colleagues to learn too. An additional ‘Glossary of Terms’ is produced for the Project, with each partner contributing their best translation of key words and phrases specific to the use of the interview process and Impact Management System (IMS).

Phase Three sees the second questionnaire which focuses on the positive approach of the interview process to motivate and empower the practitioners into finding potential improvements for the Transfer of Innovation. This follows the initial semi-structured interview use with the life-board frame of reference which is used as the baseline frame of reference. This set of ten questions was initially used in the semi-structured interviews with all partner participants. The results formulate the baseline for the evaluation and are known as the life-board results. After the initial implementation came the first adaptation. Germany, Greece and Italy chose to retain four of the original baseline questions and add 6 unique questions to reflect the specific needs of their particular target participant groups. In phase three there were still a number of issues regarding the Impact Management System with translation strings, and some data being lost, causing loss of time as it is inputted again. This is reflected in the lower scoring for the Impact Management System usability in Phase Four. The usability questionnaire was completed to find out how satisfied the practitioners were with the Impact Management System (IMS). There was a delay to this phase in implementing

changes until the new form for tracking IMS issues raised with the sub-contractor was implemented. However, most IMS issues were taken care of in this phase which improved the ease of use of the IMS. The more efficient tracking system put in place monitors actions taken to deal with any IMS issues raised by the Practitioners. Consequently these are dealt with more appropriately. Some issues are due to lack of understanding and retraining is offered and others are technical issues which are referred to the subcontractor for further development to the IMS.

Phase Four saw the in-house evaluations being completed and published by partners in specialist areas. These are valuable evidence of the success of the semi-structured interview process. The interim evaluation of the semi-structured interviews also took place through a review of the recorded data uploaded by the practitioners to the IMS, prior questionnaires and other verbal and written feedback from the practitioners. The completion of evaluations and semi-structured interviews are thus successfully achieved, and the IMS is successfully updated again.

Phase Five sees the provision of data and analysis for compilation from the IMS on the semi-structured interviews. Feedback and analysis is also compiled from the managers, practitioners and participants questionnaire responses. The semi-structured interview process is reviewed and some further changes are made to better suit the participant groups with the new frames of reference which are appropriately translated.

Phase Six sees all the documentation available on the Scaling New Heights in VET website, the conference arrangements, regional networks developing and the interim and final evaluation and project report completed. Further projects are discussed as well as the Transfer of Innovation partners each becoming Associate Partners to ensure the continued use and on-going dissemination of the semi-structured interview processes developed throughout the UK, Germany, Greece and Italy. As Associate Partners G1, G2, G3 and G4 cascade the practitioner training in their own countries.

4.10.2. Demographic Data of the TOI Participants

This evidence shows a range of data and graphs which are extremely useful in managing and directing work programmes for staff and the support needs of participants. It

is vitally important that appropriate signposting is available for participants from all the groups. There are general graphs showing the percentage of participant categories across the whole TOI project evaluation and individual pieces of research performed with each group. This information is useful for benchmarking and to ensure there is a good range of participant demographic breakdown across the research. It is also useful in ensuring that all demographic groups distanced travelled are positive or identifiable within the wider data so that demographic groups are not discriminated against. Different groups of people may need special sign posting or interventions which can be identified and put in place to support travel forwards.

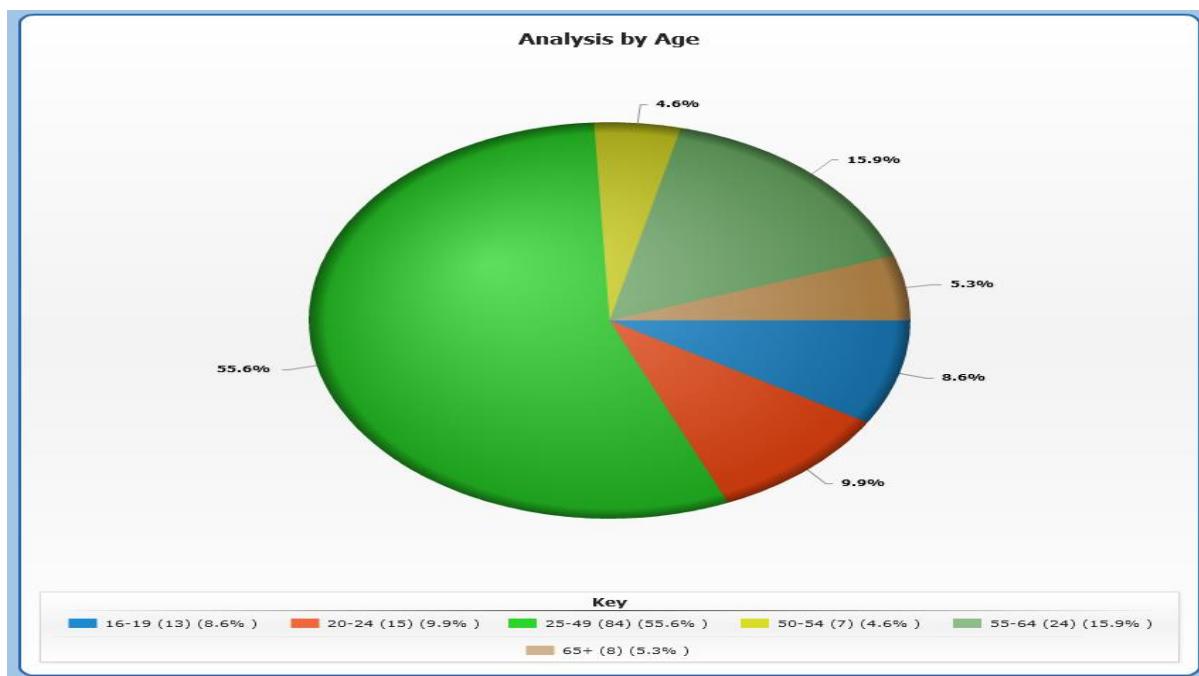


Figure 21: Participant Ages for Overall TOI Programme

Figure 21: Participant Ages for Overall TOI Programme evidences interaction within age range of participants in the research shows there are 8.6% 16-19 year olds, 9.9% 20-24 year olds, 55.6% 25-49 year olds, 4.6% 50-54 year olds, 15.9% 55-64 year olds and 5.3% over 65 year olds. There is a good age range in the sample of participants.

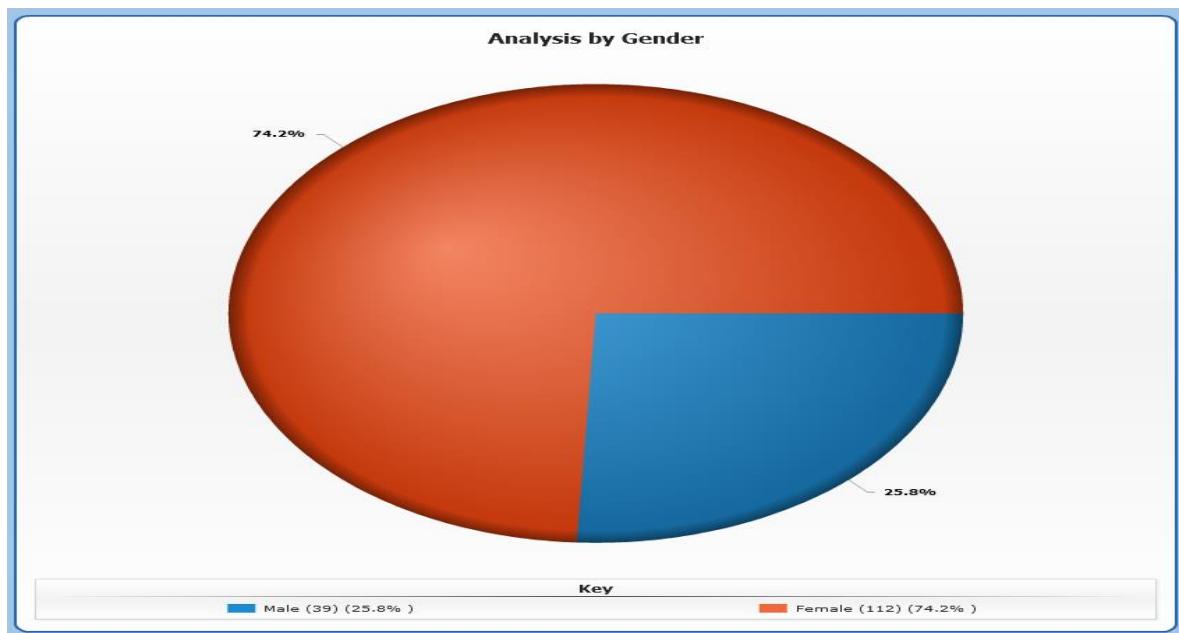


Figure 22: Participant Gender Report Graph for Overall TOI Programme

Figure 22: Participant Gender Report Graph for Overall TOI Programme evidences interaction within the gender range of participants in the research shows 25.8% male and 74.2% female. The reason for this is that there are more women out of work wanting to gain employment or in low paid work wanting to improve their employment status.

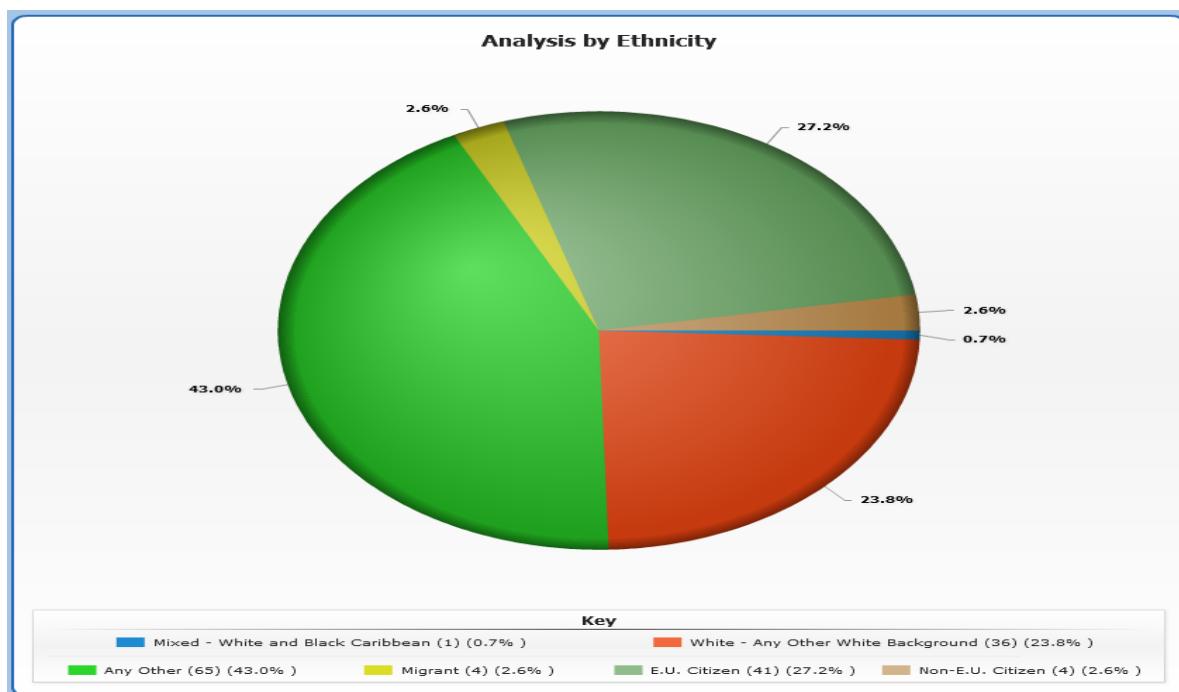


Figure 23: Participant Ethnicity Report Graph for the Overall TOI Programme

Figure 23: Participant Ethnicity Report Graph for the Overall TOI Programme evidences interaction within the range of ethnic backgrounds of participants in the research shows 0.7% mixed-white and black Caribbean, 23.8% white—any other white background, 43% any other, 2.6% migrant, 27.2% E.U. citizens and 2.6% non-E.U. citizens. There is a good range of ethnicity in the sample of participants.

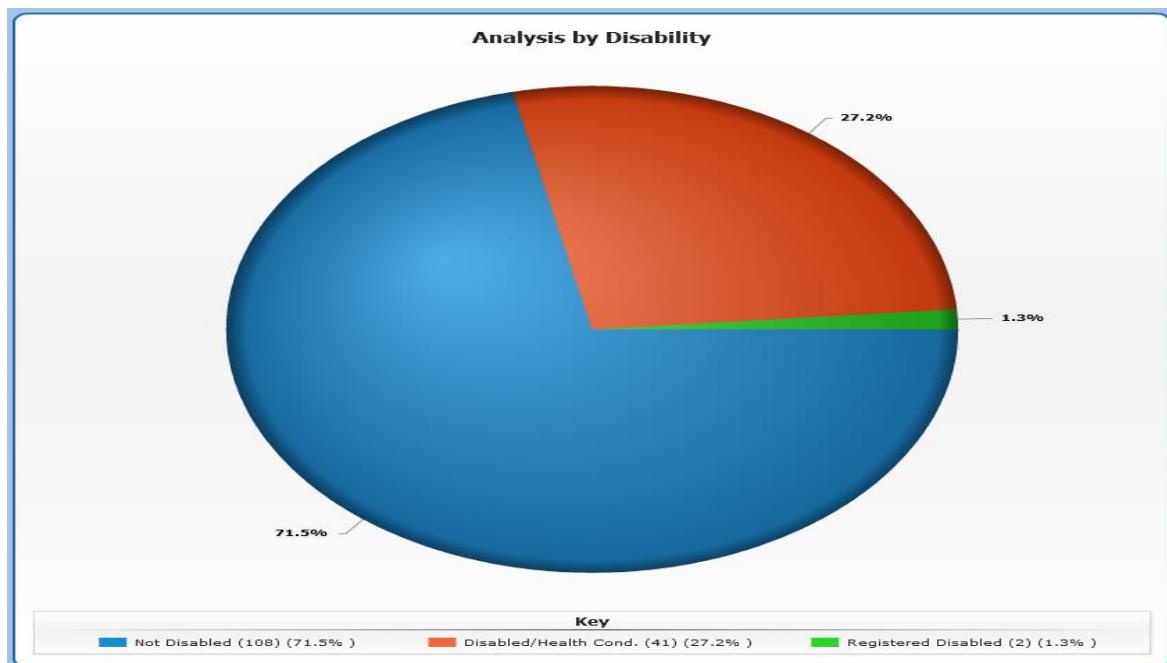


Figure 24: Participant Disability Report Graph for the Overall TOI Programme

Figure 24: Participant Disability Report Graph for the Overall TOI Programme evidences interaction within participants with a disability in the research shows 71.5% not disabled, 27.2% disabled/health condition and 1.3% registered disabled. There is a good range of abilities in the sample of participants in comparison to the UK government statistics which evidence 5.7 of 60 million of adults of employable age having a disability, which is 10.5% (Gov.UK. 2014). The sample shows 28.5% of participants claim to have a disability. There is a good sample of people with disabilities but this could also be evidencing that there are a higher proportion of people with disabilities struggling to gain their desired employment.

Figure 25: Participant Employment Status for the Overall TOI Programme evidences interaction within participant employment status in the research shows 47% unemployed, 13.2% inactive, 0.7% self-employed, 17.9% inactive in education or training, 5.3% employed

full-time, 7.9% employed part-time, 7.3% full-time apprenticeship and 0.7% retired. There is a good range of employment status in the sample of participants.

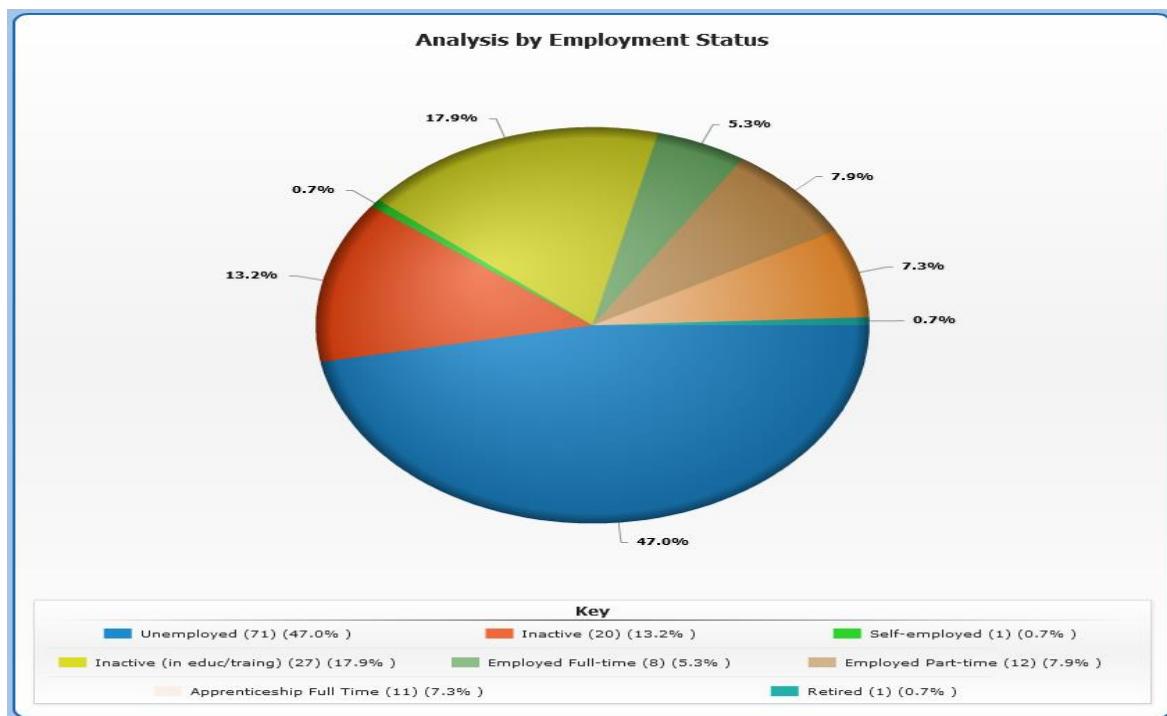


Figure 25: Participant Employment Status for the Overall TOI Programme

4.10.3. Participants Distance Travelled by Ethnographic Data Split

Screen shots are shown as evidence in this section from the Impact Management System to evidence the distance travelled within the research by various ethnographic groups. The first set of figures show the distance travelled in the overall TOI programme.

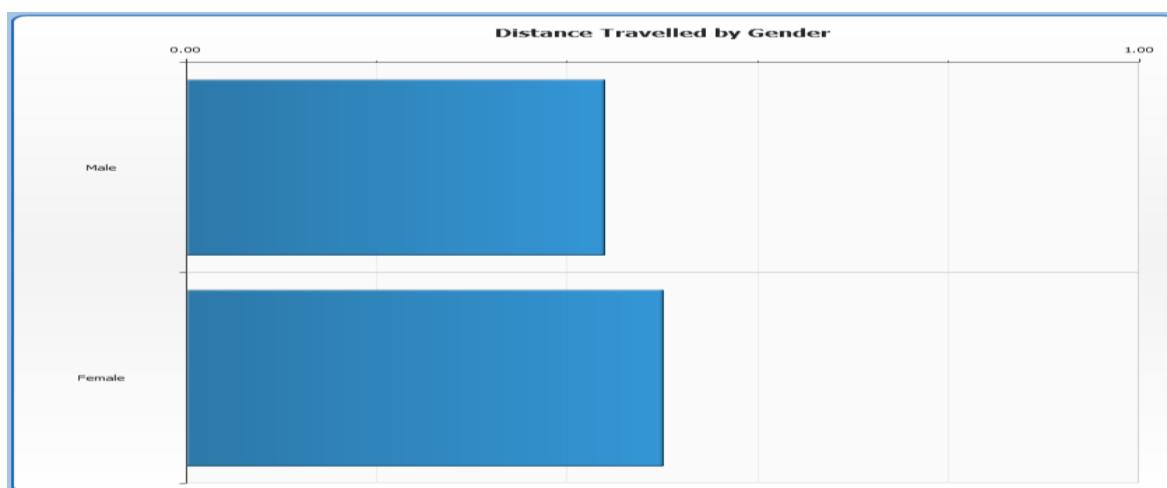


Figure 26: Overall TOI Programme Distance Travelled by Gender

Figure 26: Overall TOI Programme Distance Travelled by Gender evidences interaction within participant gender in the research shows males travelled forwards 0.45 and females travelled forwards 0.50. There is little difference in the distance travelled by male and female participants at 0.05. The majority of participants are female and one project only gave support to women in the second year of the study.

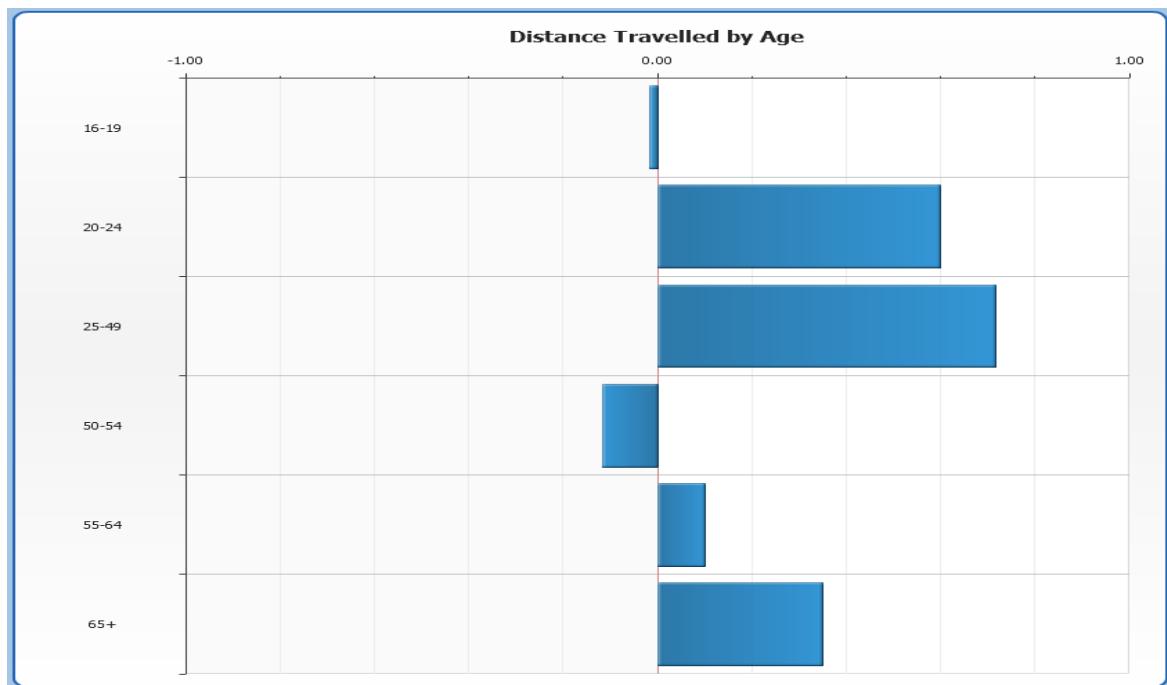
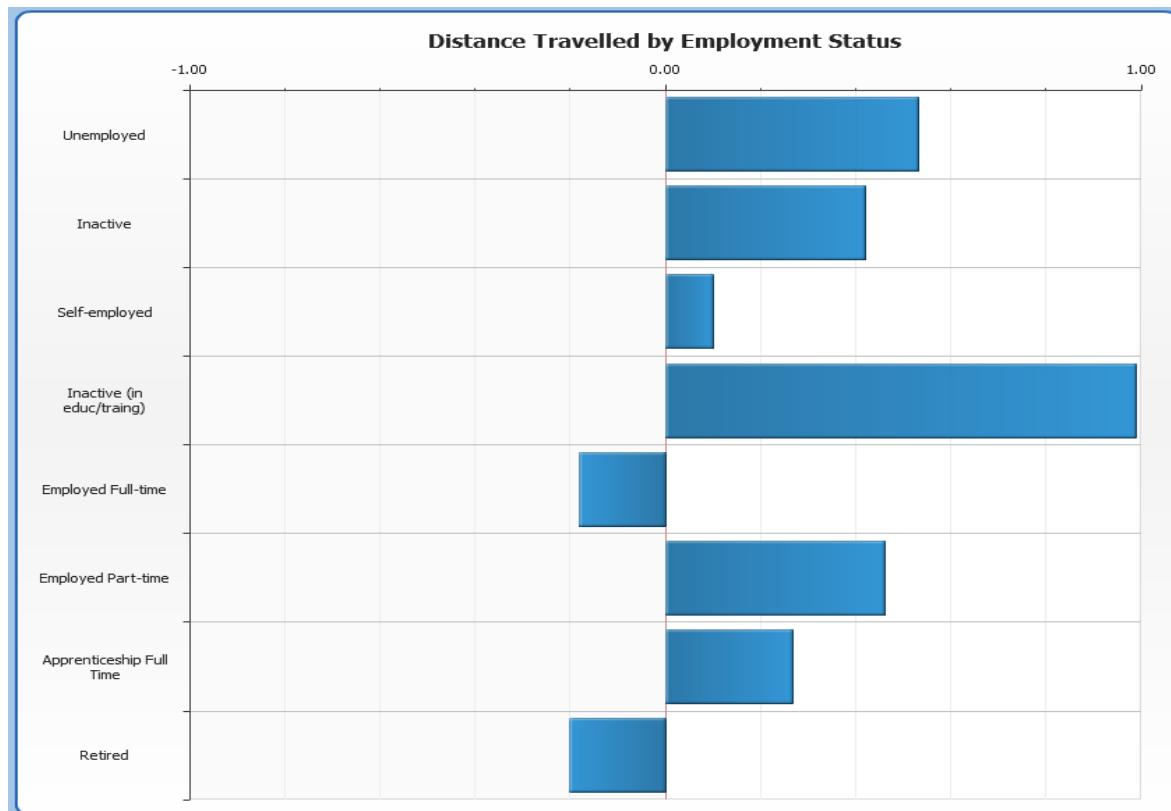


Figure 27: Overall TOI Programme Distance Travelled by Age

Figure 27: Overall TOI Programme Distance Travelled by Age evidences the distance travelled by participants in various age brackets show as 16-19 year olds travelled backwards -0.2, 20-24 year olds travelled forwards 0.6, 25-49 year olds travelled forwards 0.7, 50-54 year olds travelled backwards -0.12, 55-64 year olds travelled forwards 0.1 and 65+ travelled forwards 0.35. The two age groups struggling to move forwards are the 16-19 year olds and 50-54. The 16-19 year olds deciding where to enter the work market and 50-54 year olds who have migrated to Italy and are working in a new profession as unqualified carers. The practitioners stated more appropriate sign-posting was needed for these two sample groups. Another option would be trial work placements or community participation roles to help 16-19 year olds to try various roles to see if they are suited to them.

Figure 28: Overall TOI Programme Distance Travelled by Employment evidences interaction within participants by employment status from the overall TOI research shows

unemployed travelled forwards 0.53, inactive travelled forwards 0.42, self-employed travelled forward 0.1, in active in education and training travelled forward 1.0, employed full-



time travelled backwards 0.18, part-time employed travelled forwards 0.47, apprenticeship full-time travelled forwards 0.27 and retired travelled backwards 0.2.

Figure 28: Overall TOI Programme Distance Travelled by Employment

Those wanting to get back into work after retirement and those wanting to improve their employment status are struggling. The migrants in Italy have struggled in low paid live in care work as they only have one night off per week and they are in need of gaining qualifications and language development to gain improved employment. Some of the migrants are of retirement age but needed to gain employment for a sustained income. G2 are working to improve care work contracts and provide appropriate training and timing of the training.

Figure 29: Overall TOI Programme Distance Travelled by Ethnicity evidences interaction within participants by ethnicity from the overall TOI research shows mixed - white and black Caribbean and white – any other white background travelled forwards 0.6, any other travelled forwards 0.63, migrants travelled backwards -3.5, E.U. citizens travelled forwards 0.36 and non-E.U. citizens travelled forwards 0.3. The migrants travel backwards was investigated as 150

discussed in Figure 28: Overall TOI Programme Distance Travelled by Employment. New legal agreements are now being pushed through for migrants with regards to their live in work placements.

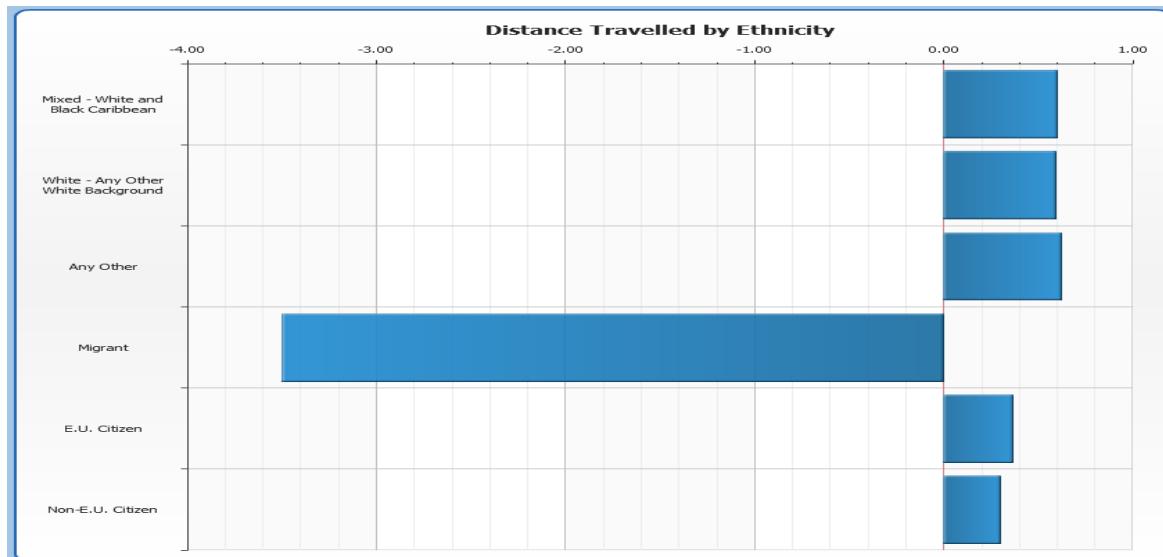


Figure 29: Overall TOI Programme Distance Travelled by Ethnicity

Figure 30: Overall TOI Programme Distance Travelled by Disability evidences interaction within participants by disability from the overall TOI research shows non-disabled travelled forwards 0.45, disabled/health condition travelled forwards 0.53 and registered disabled travelled forwards 1.2. The process has worked well for those who have identified themselves as disabled.

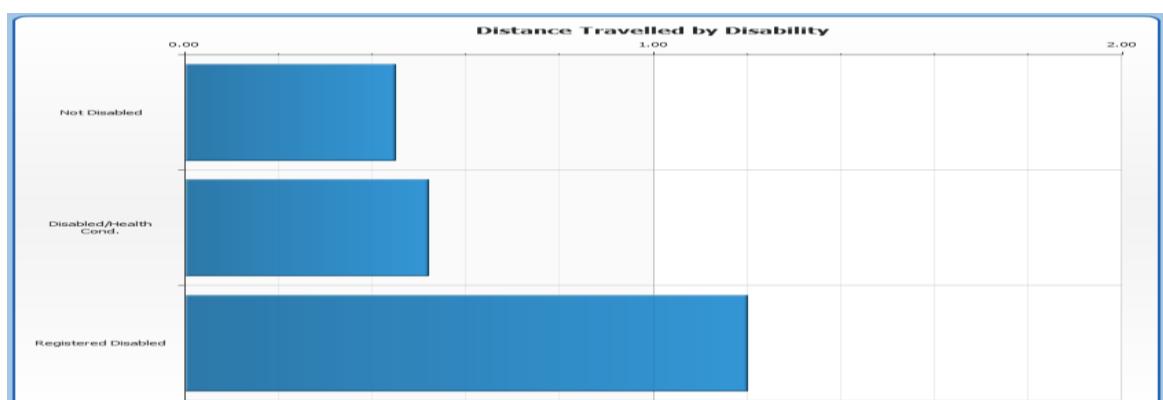


Figure 30: Overall TOI Programme Distance Travelled by Disability

The next set of figures show the distance travelled using the G1 life-board and the G1 new frame developed. The comparisons show how well the new frame has been developed for each ethnographic group.



Figure 31: G1 Life-board Distance Travelled by Gender

Figure 31: G1 Life-board Distance Travelled by Gender evidences interaction within G1 participants by gender with the Life-board research shows males at having travelled forwards by 0.65 and females as having travelled forwards by 0.72 as the life board evidenced a close distance travelling forwards.

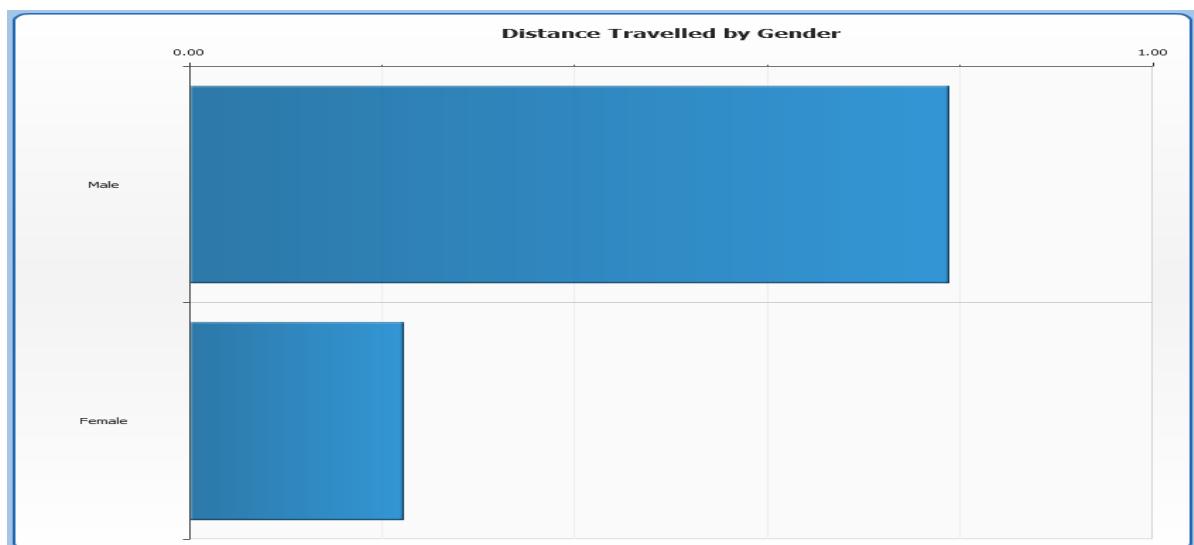


Figure 32: G1 New Frame of Reference Distance Travelled by Gender

Figure 32: G1 New Frame of Reference Distance Travelled by Gender evidences interaction within G1 participants by gender with the new frame of reference research shows males travelling forwards to 0.78 an increase of 0.13 and females travelling forwards by 0.22 which shows a decrease of 0.5. The new frame and or signposting are not working as well for the women and needs to be developed further.

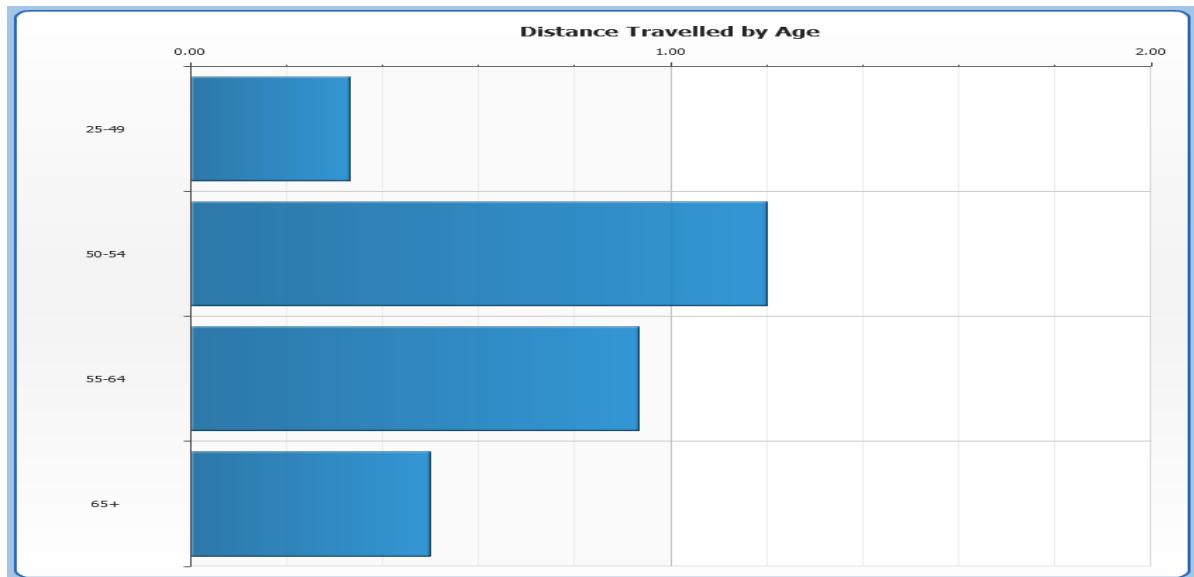


Figure 33: G1 Life-board Distance Travelled by Age

Figure 33: G1 Life-board Distance Travelled by Age evidences interaction within G1 participants by age with the life-board research shows 25-49 year olds as travelling forwards by 0.34, 50-54 year olds travelling forwards by 1.2, 55-64 year olds travelling forward by 0.93 and 65+ as travelling forwards 0.49. The focus of support sign posting has moved to the 25-49 year olds with the new frame who were clearly in need of extra support but the new frame evidences that the 55-64 year olds have now travelled backwards. This needs to be relooked at.

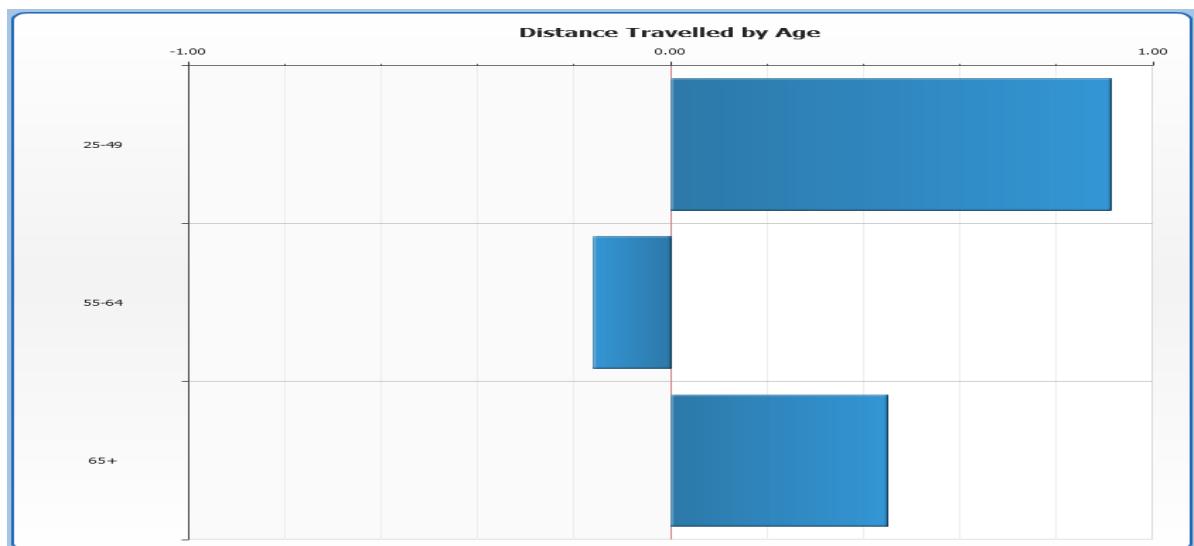


Figure 34: G1 New Frame of Reference Distance Travelled by Age

Figure 34: G1 New Frame of Reference Distance Travelled by Age evidences interaction within G1 participants by age with the new frame of reference research shows 25-153

49 year olds as travelling forwards by 0.9 a 8.66 movement forwards from the life-board, 55-64 year olds travelling backwards by -0.17 which is a loss of 0.66 and 65+ as travelling forwards 0.45 which is a loss of 0.04.

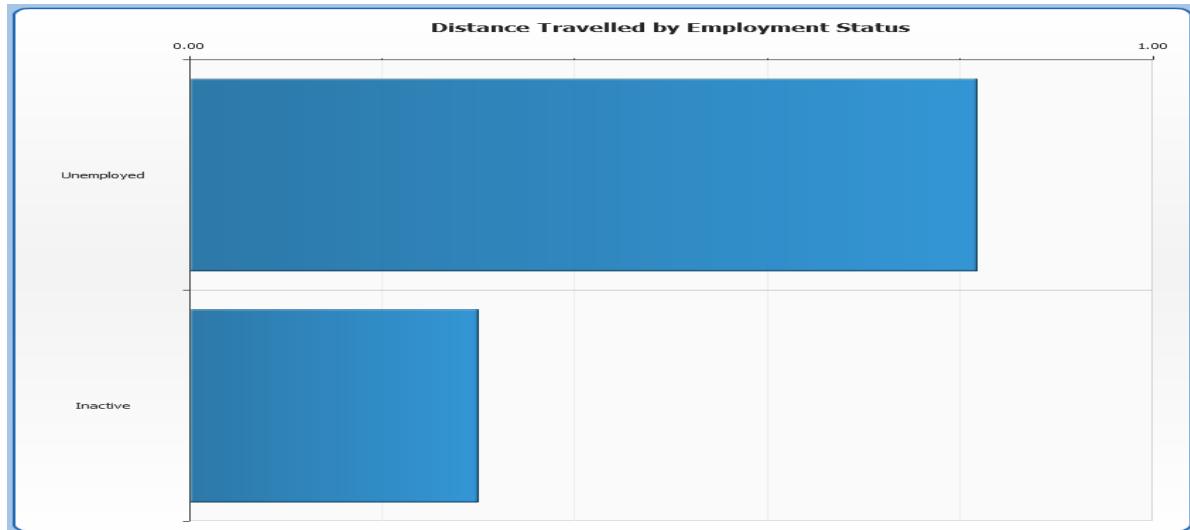


Figure 35: G1 Life-board Distance Travelled by Employment

Figure 35: G1 Life-board Distance Travelled by Employment evidences interaction within G1 participants by employment status with the Life-board research shows movement forwards of 0.83 for unemployed and a travel forwards of 0.3 for inactive.



Figure 36: G1 New Frame of Reference Distance Travelled by Employment

Figure 36: G1 New Frame of Reference Distance Travelled by Employment evidences interaction within G1 participants by employment status with the new frame of reference research shows travel forwards of 0.57 for unemployed which is a loss of 0.26 and a travel forwards of 0.53 for inactive a movement forwards of 0.23. This is due to the focus being to support the inactive group to move forwards as they were behind in the lifeboard.

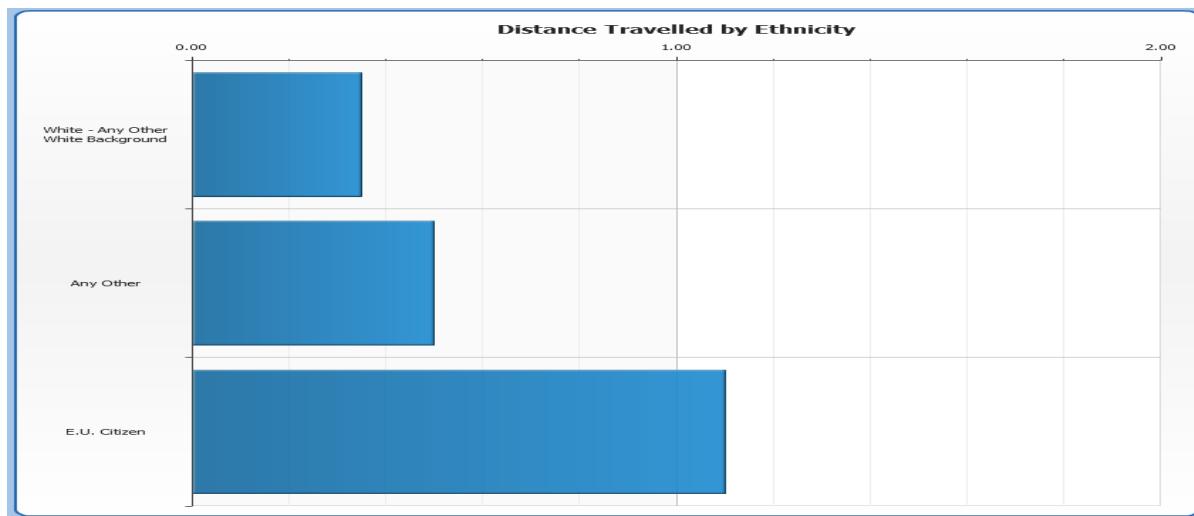


Figure 37: G1 Life-board Distance Travelled by Ethnicity

Figure 37: G1 Life-board Distance Travelled by Ethnicity evidences interaction within G1 participants by ethnicity with the Life-board research shows travel forward in white – any other white background of 0.35, a movement forwards in any other of 0.5 and a movement forwards in E.U. citizen of 1.1.

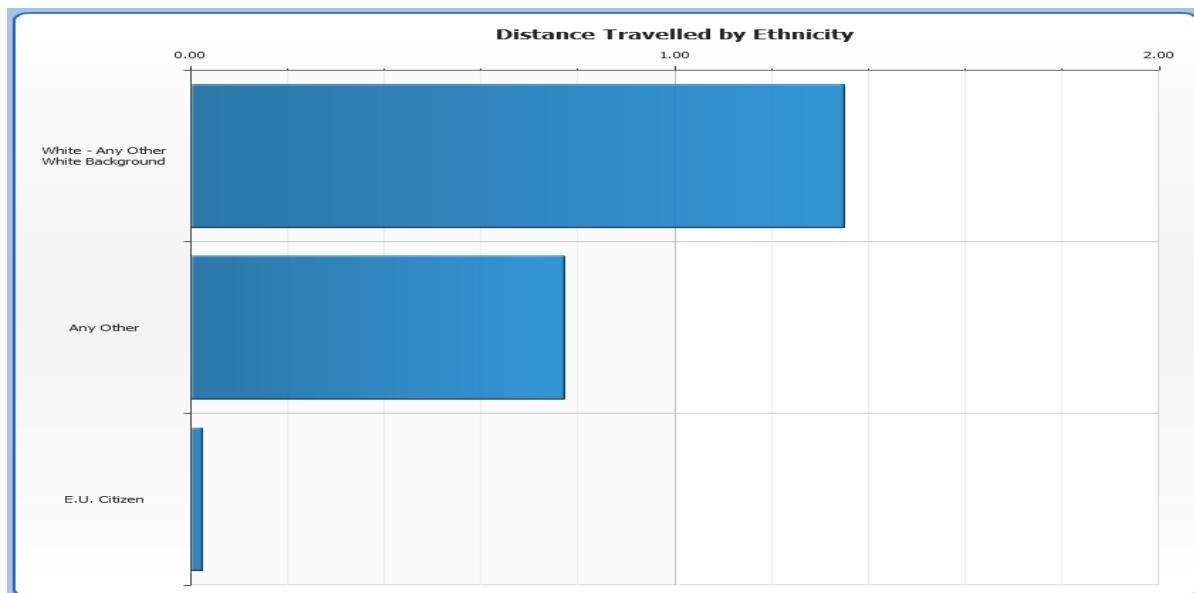


Figure 38: G1 New frame of Reference Distance Travelled by Ethnicity

Figure 38: G1 New frame of Reference Distance Travelled by Ethnicity evidences interaction within G1 participants by ethnicity with the new frame of reference research shows travel forward in white – any other white background of 1.35 which is a 1.0 increase with the new frame of reference, a movement forwards in any other of 0.77 an increase of 0.27 and a movement forwards in E.U. citizen of 0.02 a loss of 1.08. Support organisations

need to continue with the good support they were giving to E.U. Citizens with the lifeboard and develop additional support and signposting for the minority groups.

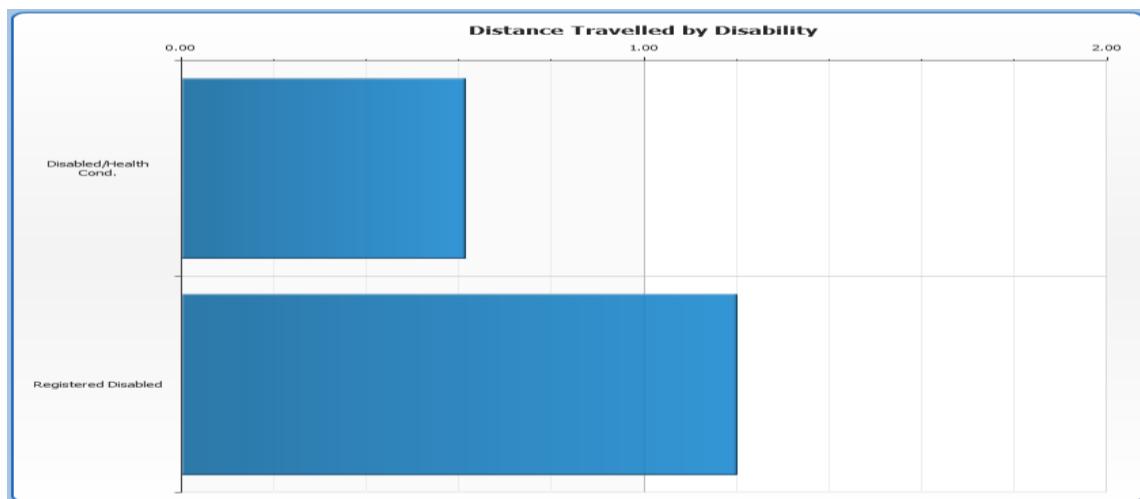


Figure 39: G1 Life-board Distance Travelled by Disability

Figure 39: G1 Life-board Distance Travelled by Disability evidences interaction within G1 participants by disability with the Life-board research evidences a movement forwards in disabled/health condition of 0.61 and a movement forwards with registered disabled of 1.2.

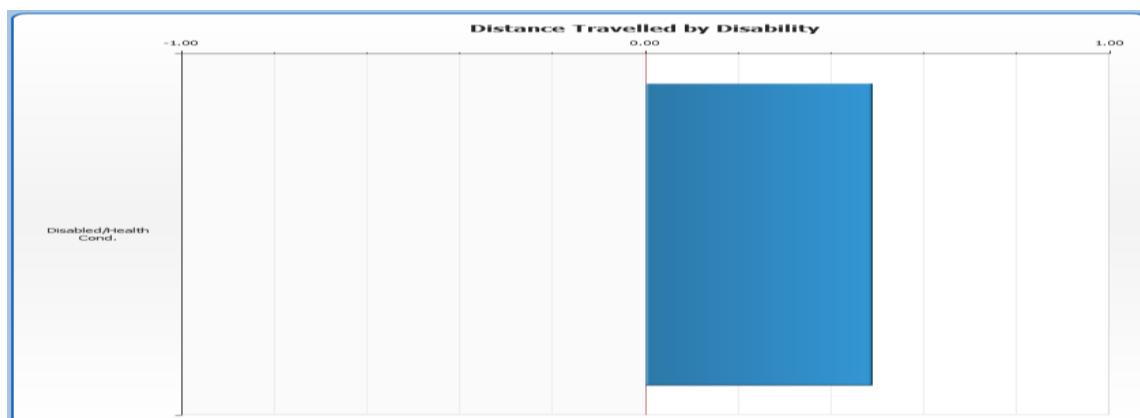


Figure 40: G1 New Frame of Reference Distance Travelled by Disability

Figure 40: G1 New Frame of Reference Distance Travelled by Disability evidences interaction within G1 participants by disability with the new frame of reference research evidencing movement forwards of 0.49 for disabled/health condition which is a loss of 0.12. G1 decided to change their new frame after this as their mental health participants/clients did not have the authority to make improvements to their life in these areas. Their needs to be development in this field for G1 as other countries manage mental health patients with more joint agreement which supports patient recovery. Their participants/clients were

struggling with no longer having freedom and the ability to work. Having some freedom in the choice of community participation role, colour and music of their room, exercises, etc. could improve their quality of life and recovery (Bonds, 1999; Levitin, 2008; Rohnfeld, 2011; Siegel, 2012; Wills, 2006).

The next set of figures show the distance travelled using the G2 life-board and the G2 new frame developed. The comparisons show how well the new frame has been developed for each ethnographic group.

Figure 41: G2 Life-board Distance Travelled by Gender evidences interaction within G2 participants by gender with the Life-board research shows males travelling forwards to 0.7 and females travelling forwards to 0.18. Clearly issues between the male and female ability to travel forwards.

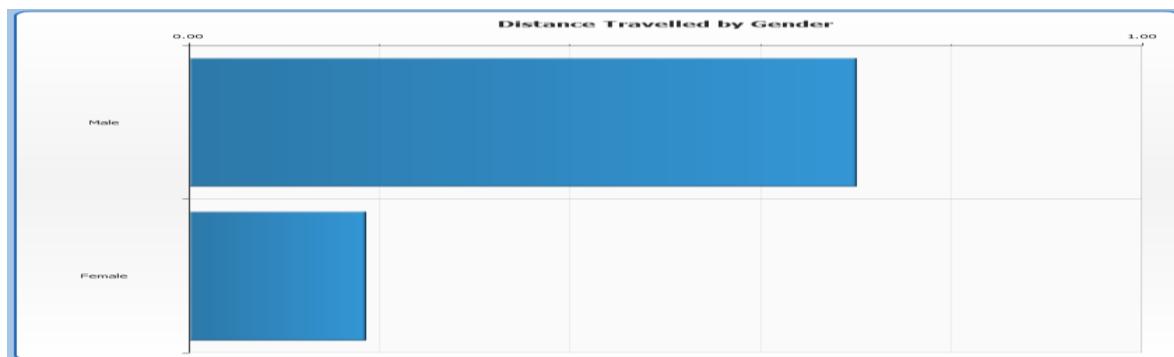


Figure 41: G2 Life-board Distance Travelled by Gender

Figure 41: G2 New Frame of Reference Distance Travelled by Gender evidences interaction within G2 participants by gender with the new frame of reference research shows males travelling forwards 0.1 a drop of 0.6 and females travelling forwards 0.46 a movement forwards of 0.28 from the life-board.

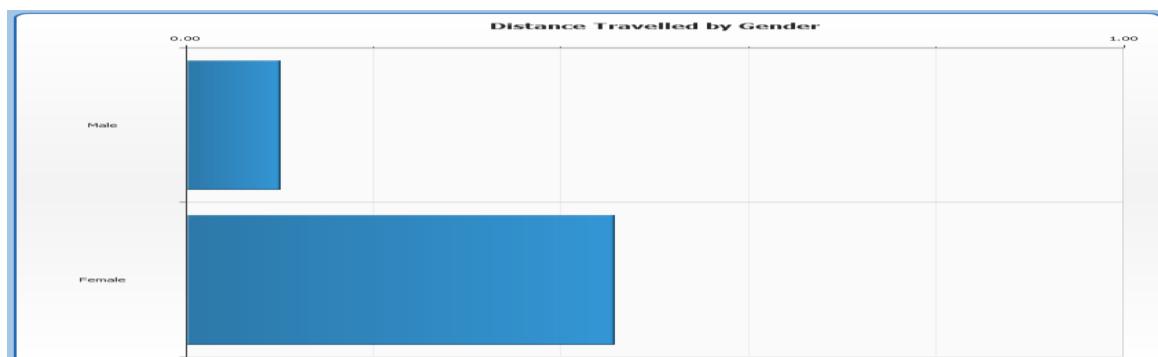


Figure 42: G2 New Frame of Reference Distance Travelled by Gender

The women have been supported more to travel forwards with the new frame of reference however there appears to be a discrimination for the men so the new frame needs to be looked at again or the signposting needs development to ensure there is appropriate signposting for men older than 49 as those younger can be viewed as travelling forward well in Figure 44: G2 New Frame of Reference Distance Travelled by Age.

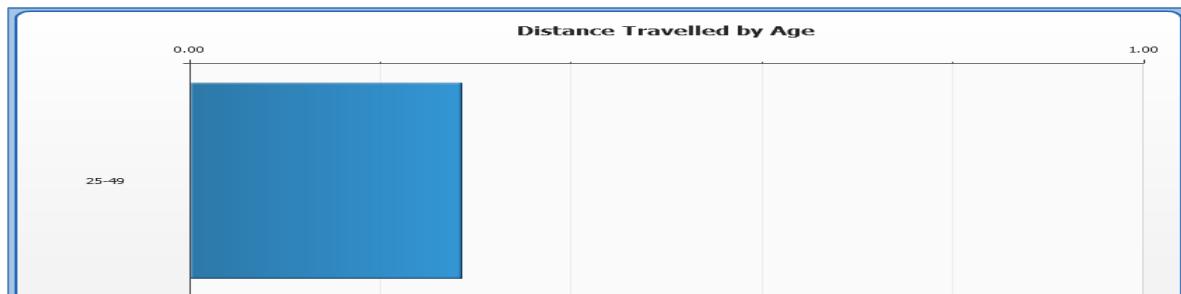


Figure 43: G2 Life-board Distance Travelled by Age

Figure 43: G2 Life-board Distance Travelled by Age evidences interaction within G2 participants by age with the Life-board research shows 0.28 for 25-49 year olds. G2 have then focused their development on the 25-49 age group as they were the participants/clients involved at the time.

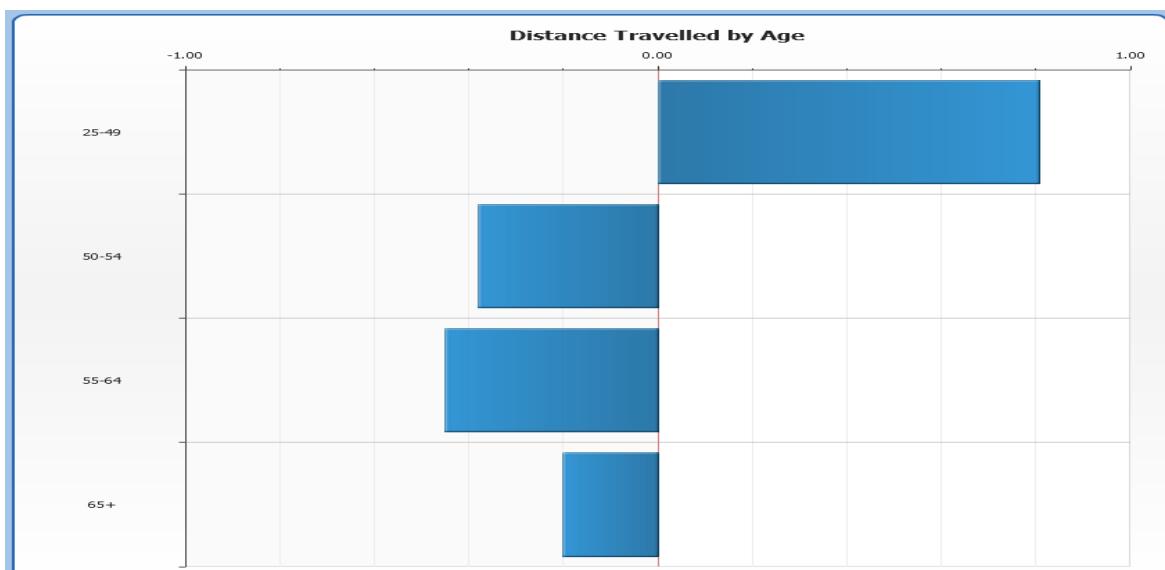


Figure 44: G2 New Frame of Reference Distance Travelled by Age

Figure 44: G2 New Frame of Reference Distance Travelled by Age evidences interaction within G2 participants by age with the new frame of reference research shows a travel forwards for 25-49 year olds of 0.8 a 0.52 increase with the new frame. There are also some new age groups but all are in the negative with 50-54 year olds at -0.38, 55-64 year olds

at -0.45 and the 65+ age group at -0.2. G2 need to work through the same development they did to improve the movement forward for the 25-49 age group with the new age groups.

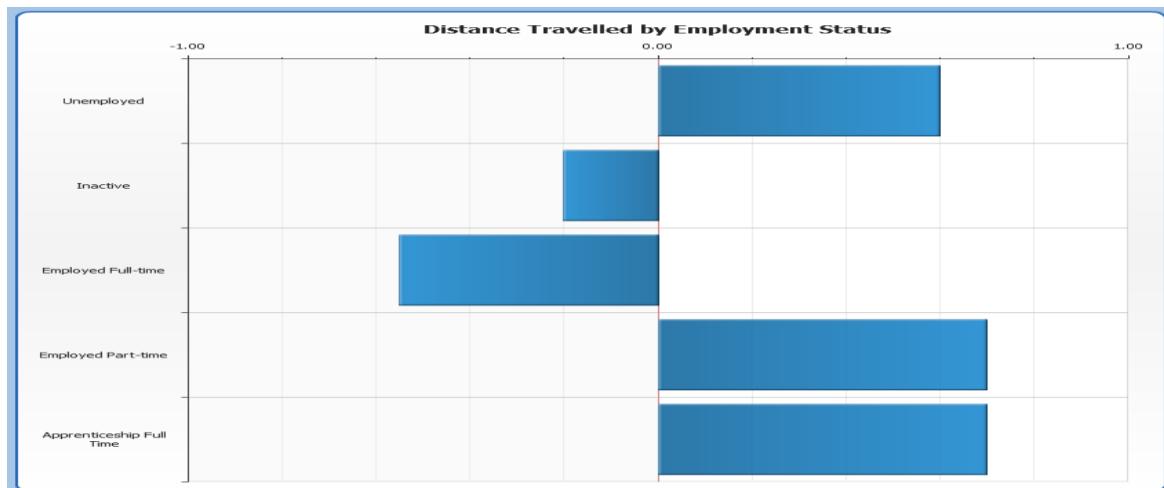


Figure 45: G2 Life-board Distance Travelled by Employment

Figure 45: G2 Life-board Distance Travelled by Employment evidences interaction within G2 participants by employment status with the Life-board research showing unemployed as travelling forwards by 0.6, inactive travelling backwards by -0.2, full-time employed travelling backwards by -0.55, part-time employed travelling forwards to 0.7 and full-time apprenticeships travelling forwards to 0.7.

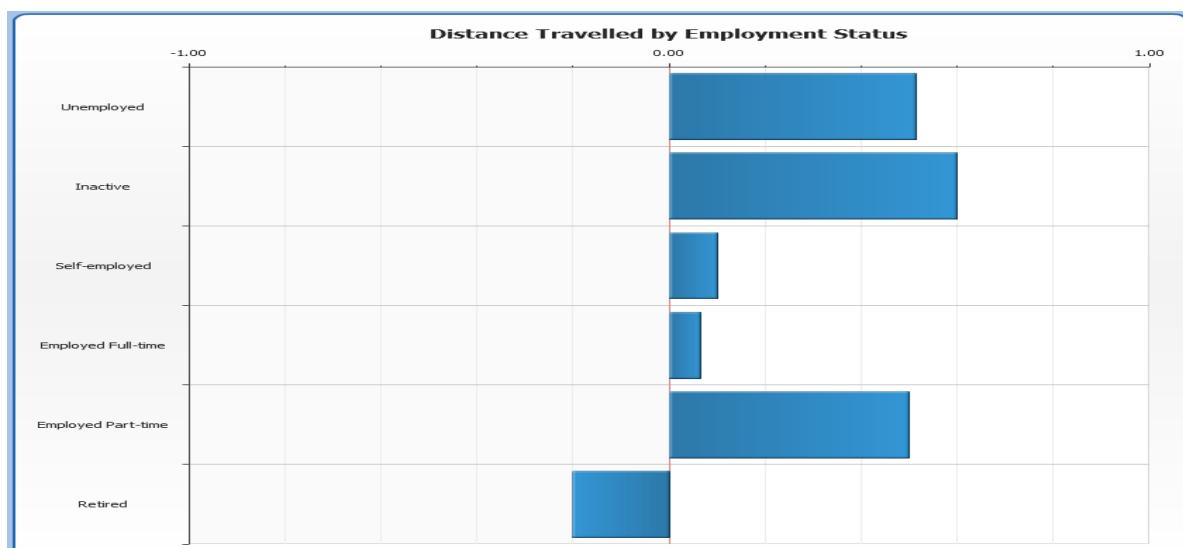


Figure 46: G2 New Frame of Reference Distance Travelled by Employment

Figure 46: G2 New Frame of Reference Distance Travelled by Employment evidences interaction within G2 participants by employment status with the new frame of reference research unemployed as travelling forwards by 0.5 with a loss of 0.1, inactive travelling

forwards by 0.6 a 0.8 increase, self-employed travelled forwards to 0.1, full-time employed travelling forwards by 0.07 a 0.62, part-time employed travelling forwards to 0.5 a 0.2 drop and retired travelling backwards -0.1. Retire is a new group for G2 so they need to look at how they can best develop appropriate support for them to move forwards.

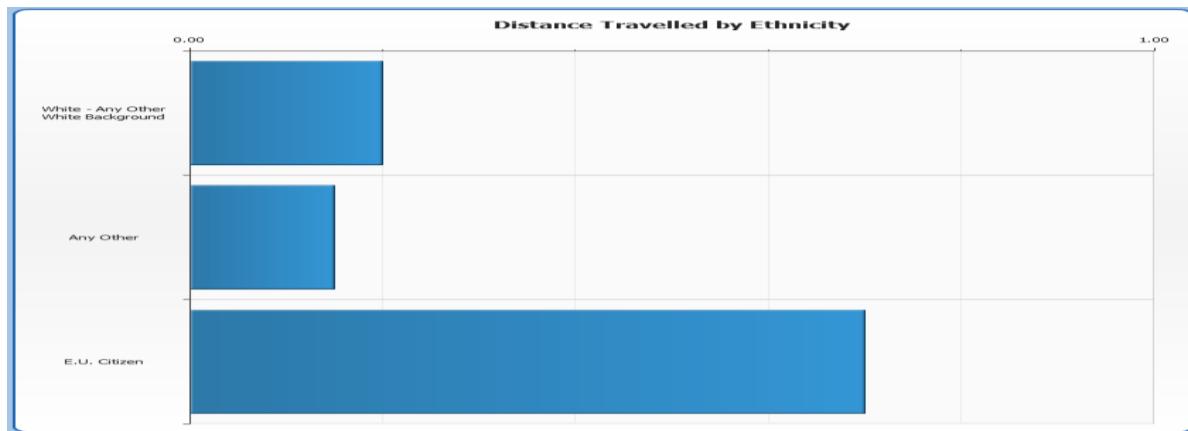


Figure 47: G2 Life-board Distance Travelled by Ethnicity

Figure 47: G2 Life-board Distance Travelled by Ethnicity evidences interaction within G2 participants by ethnicity with the Life-board research shows white - any other white background as travelled forwards by 0.2, any other as travelling forwards by 0.15 and E.U. citizen as travelling forward by 0.7.

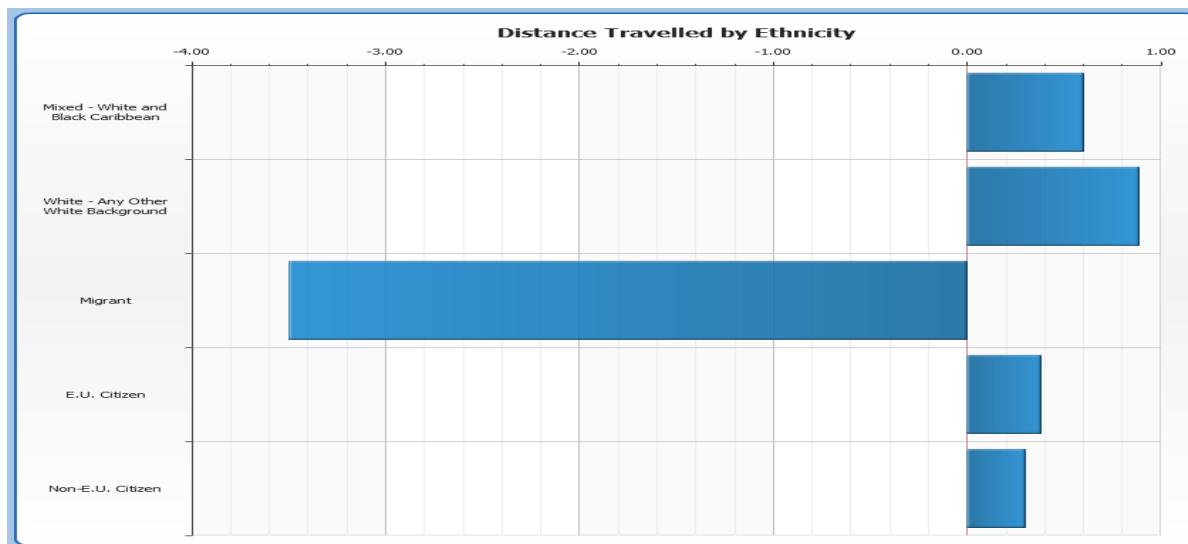


Figure 48: G2 New Frame of Reference Distance Travelled by Ethnicity

Figure 48: G2 New Frame of Reference Distance Travelled by Ethnicity evidences interaction within G2 participants by ethnicity with the new frame of reference research shows mixed –white and black Caribbean as travelling forwards by 0.6, white - any other white

background as travelled forwards by 0.9 a 0.7 increase on the life-board, migrant as travelling backwards by 3.5, E.U. citizen as travelling forward by 0.38 a drop of 0.32 and non-E.U. citizens travelling forward by 0.3. G2 took this on board to work with the appropriate authorities to change the legal agreements to improve their contracts and educational development.

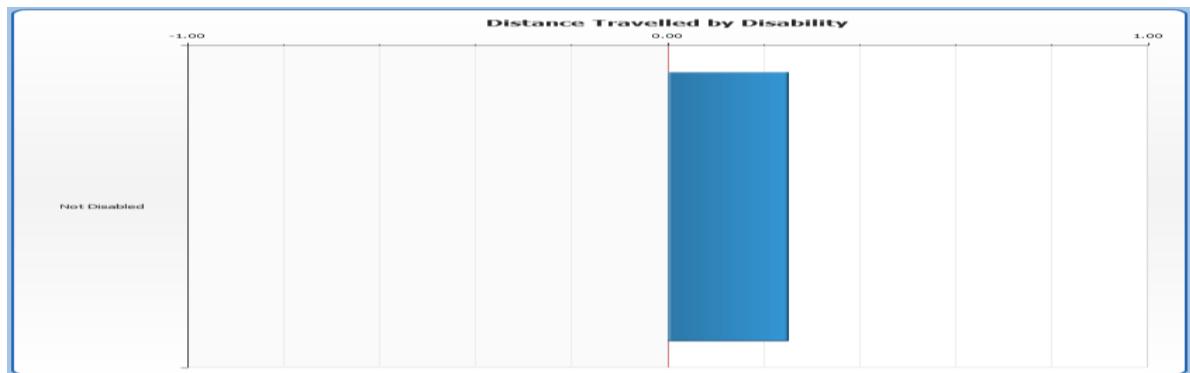


Figure 49: G2 Life-board Distance Travelled by Disability

Figure 49: G2 Life-board Distance Travelled by Disability evidences interaction within G2 participants by disability with the Life-board research shows not disabled as travelling forwards by 0.25.



Figure 50: G2 New Frame of Reference Distance Travelled by Disability

Figure 50: G2 New Frame of Reference Distance Travelled by Disability evidences interaction within G2 participants by disability with the new frame of reference research shows not disabled as travelling forwards by 0.425 a movement forwards on the life-board of 0.175 and disabled/health condition as moving forwards by 0.4. This is close movement forwards showing well balanced support in this area.

The next set of figures show the distance travelled using the G3 life-board and the G3 new frame developed. The comparisons show how well the new frame has been developed for each ethnographic group.

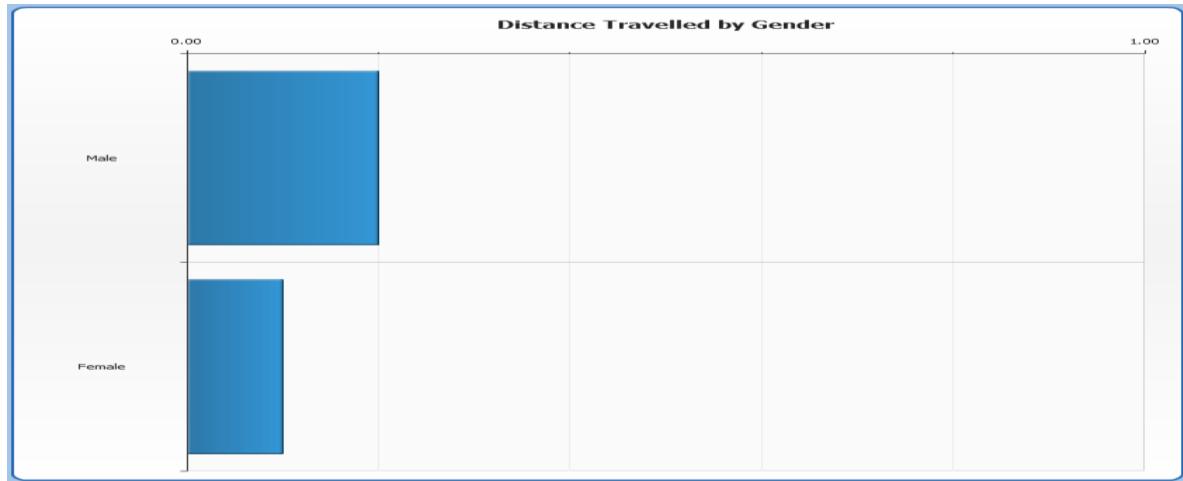


Figure 51: G3 Life-board Distance Travelled by gender

Figure 51: G3 Life-board Distance Travelled by gender evidences interaction within G3 participants by gender with the Life-board research. Males travel forwards twice as far as females with the life-board with males at 0.2 and females at 0.1. This is not a large difference of 0.1. However money being limited it changed the focus of G3's work load.

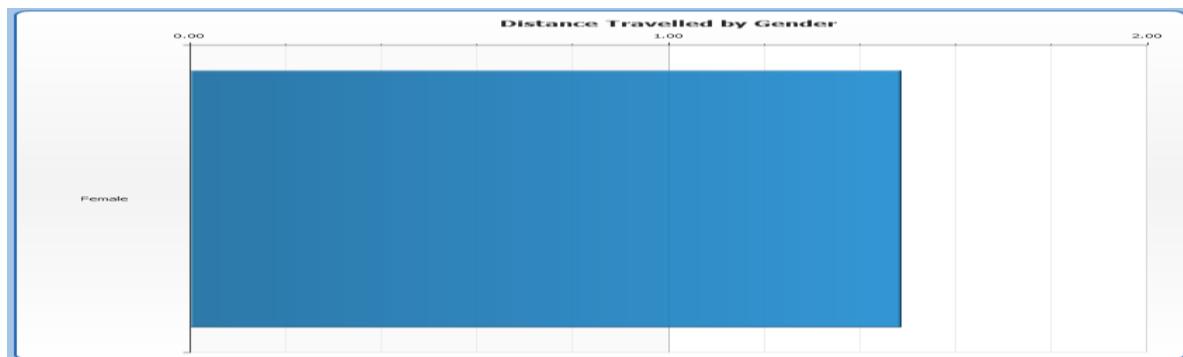


Figure 52: G3 New Frame of Reference Distance Travelled by gender

Figure 52: G3 New Frame of Reference Distance Travelled by gender evidences interaction with G3 participants by gender with the new frame of reference research. It shows that only female participants were involved after the interim report as one of G3's funded projects came to an end. So the second frame of reference was concentrated on the women only group involved in the life-board study as women in Germany find it harder to gain employment in the present employment climate. These female participants travel from 0.1 to 0.15 forwards with the new frame of reference.

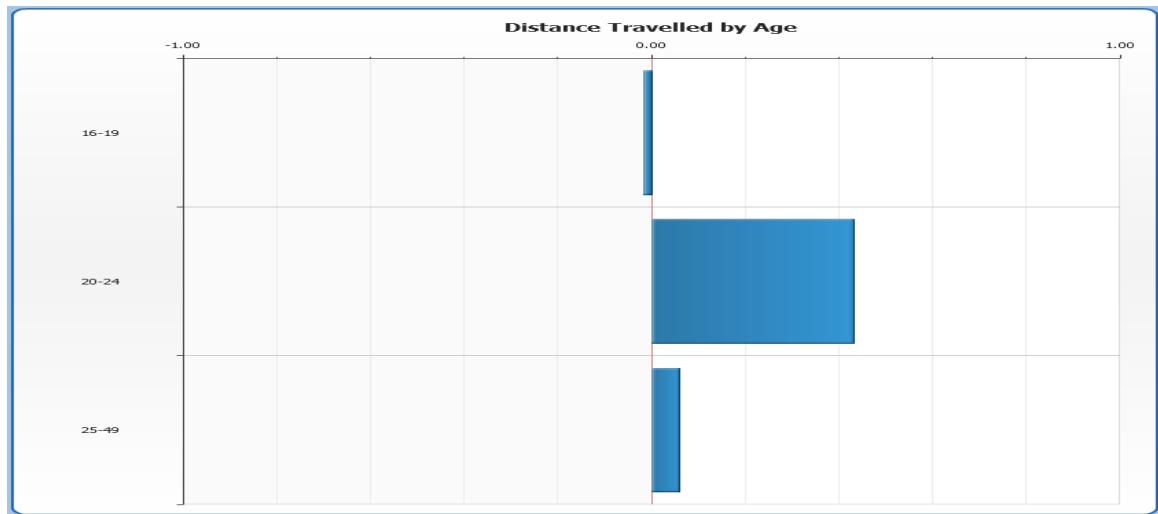


Figure 53: G3 Life-board Distance Travelled by Age

Figure 53: G3 Life-board Distance Travelled by Age evidences interaction within G3 participants by gender with the Life-board research. G3 Participants aged 16-19 did not move forward at all with the Life-Board rather they travelled backwards 0.02, 20-24 year olds travelled forwards 0.425 and 25-49 year olds travelled forwards 0.06. The 0.02 travel backwards which was identified as a lack of appropriate signposting.



Figure 54: G3 New frame of Reference Distance Travelled by Age

Figure 54: G3 New frame of Reference Distance Travelled by Age evidences interaction within G3 participants by age with the new frame of reference research with 20-24 year olds travelling forwards 0.6 a 0.175 increased travel forwards from the life-board. There were no 16-19 year olds using the new frame of reference as they had either moved on or were now 20.

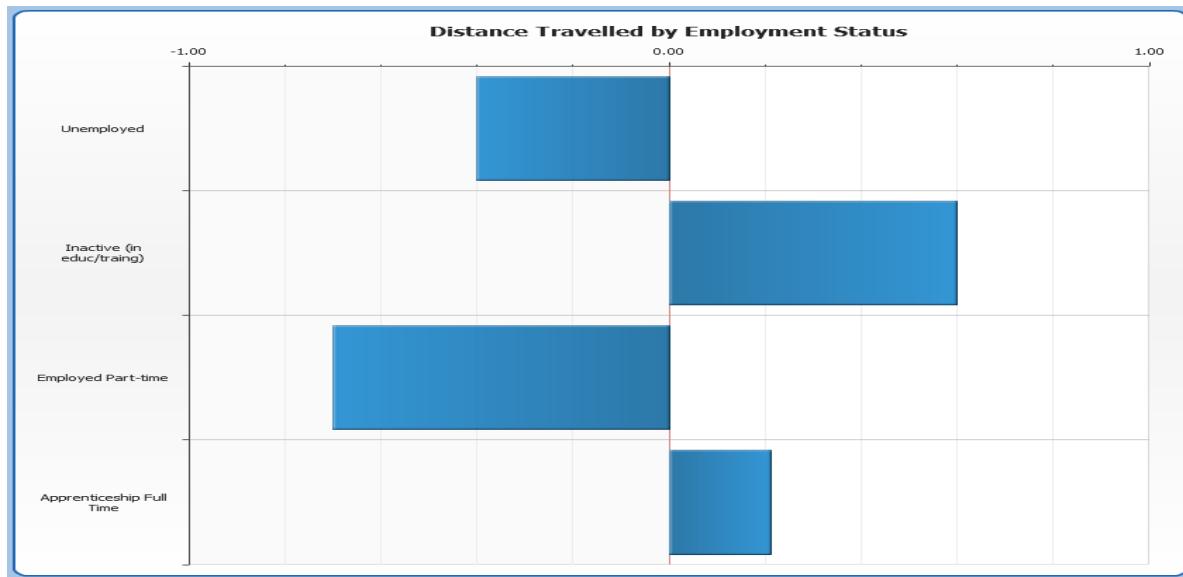


Figure 55: G3 Life-board Distance Travelled by Employment

Figure 55: G3 Life-board Distance Travelled by Employment evidences interaction within G3 participants by employment status with the Life-board research shows unemployed as having travelled backwards to -0.4, inactive in education or training travelled forwards to 0.6, part-time employed travelled backwards to -0.7 and full-time apprenticeships travelled forwards 0.21.

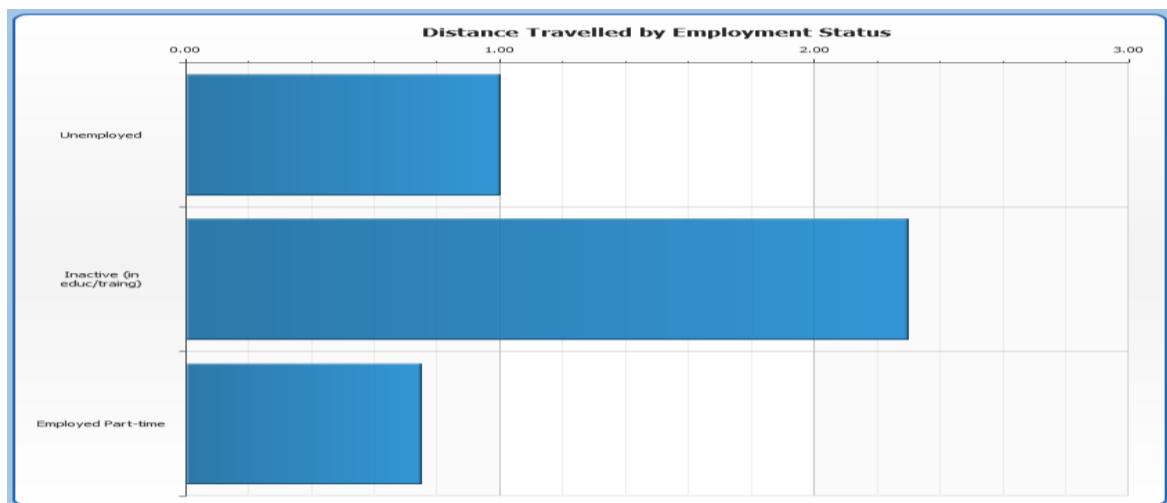


Figure 56: G3 New frame of Reference Distance Travelled by Employment

Figure 56: G3 New frame of Reference Distance Travelled by Employment evidences interaction within G3 participants by employment status with the new frame of reference research shows unemployed travelled forwards to 1.0 a 1.4 movement forwards, inactive in education or training travelled forwards to 2.3 a 1.7 movement forwards and part-time employed travelled forwards to 0.75 a 0.54 movement forwards. The apprenticeships from

the life-board research finished and moved on from the project. This clearly shows how well the new frame of reference has been developed and appropriate signposting put in place.



Figure 57: G3 Life-board Distance Travelled by Ethnicity

Figure 57: G3 Life-board Distance Travelled by Ethnicity evidences interaction within G3 participants by ethnicity with the Life-board research shows white – any other white background as travelling forward to 0.16 and any other travelling forwards to 0.175.

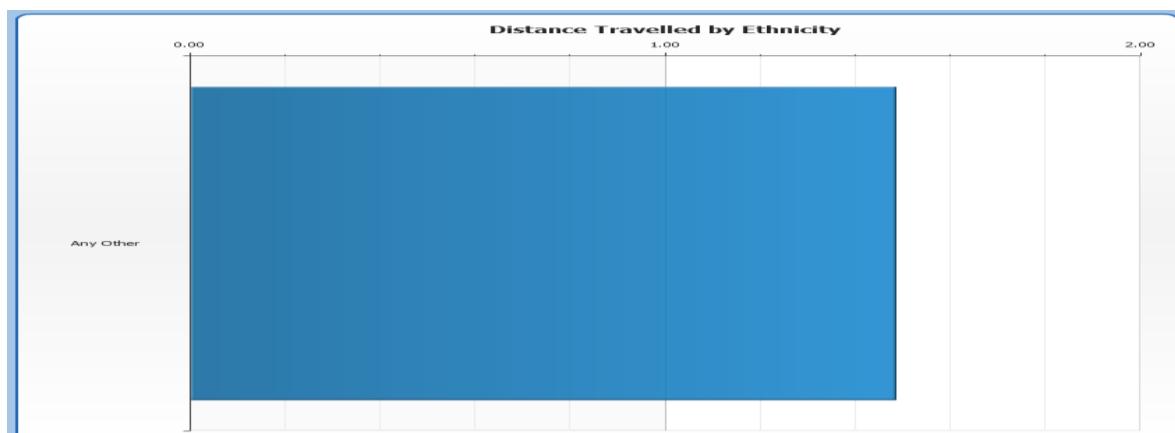


Figure 58: G3 New Frame of Reference Distance Travelled by Ethnicity

Figure 58: G3 New Frame of Reference Distance Travelled by Ethnicity evidences interaction within G3 participants by ethnicity with the new frame of reference research shows only any other still part of the research with the new frame of reference and they have travelled forwards to 1.475 which is an improvement of 1.125.

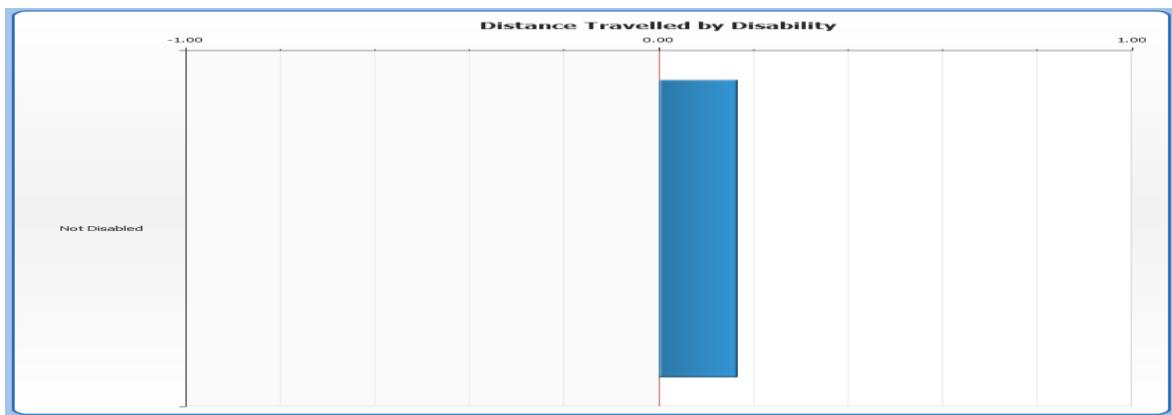


Figure 59: G3 Life-board Distance Travelled by Disability

Figure 59: G3 Life-board Distance Travelled by Disability evidences interaction within G3 participants by disability with the Life-board research shows only non-disabled participants and they have travelled forwards by 0.175.



Figure 60: G3 New Frame of reference Distance Travelled by Disability

Figure 60: G3 New Frame of reference Distance Travelled by Disability evidences interaction within G3 participants by disability with the new frame of reference research shows only non-disabled participants and they have travelled forwards by 1.475. A movement forwards of 1.3 with the new frame. This evidences how well the new frame and additional signposting has worked for G3.

4.10.4. In-Session Feedback from the initial Life-board Trials

Eleven practitioners fed back on their use of the semi-structured interview process using the scaling board between the initial training in December to the training follow-up in February and rated where they feel they currently are in using it, i.e. 10 you are confident with your use of the process and 0 not confident at all. At this time, everyone was using the

life-board, to enable them to become confident in the use of the semi-structured interviewing process and to help identify any specific progress barriers for their participant group that would determine modifications to be considered for the adaptation phase. Practitioners rated an average of 6.82 for how happy they were with their using the semi-structured interviewing process. They said that generally participants appeared comfortable with the process and that the board made it easier to understand their lives.

Participants found it much easier and better than the usual system of conversation. Participants that usually wouldn't talk much, especially about emotions, got to the basic problem quite quickly with enhanced levels of discussion. In particular practitioners thought the semi-structured interviewing process made it easier to connect with new participants. Practitioners found showing participants their graph from the interview was helpful to identify which areas to work on and what steps to take. Generally practitioners had been given appropriate support with confidential interview space and adequate time to complete the interviews. Some felt there was a lack of opportunity to use the semi-structured interviewing process and others had issues with privacy in the office. Time for some had been an issue as 'you can capture a lot of information within the interview and then it needs to be written up'. They agreed that it is a powerful tool giving good quality information. The physical touching of the board helps participants to see the situations and the words became actions. Participants were curious with the use of the board and after the interview said they now understood where they had to start with their actions. However, a small number of participants, although initially excited and happy with the process, at the follow-up interview were worried about it how much personal information they were telling the practitioners. The practitioners reassured the participants their information was confidential. Practitioners felt the process was helpful in selecting goals. However although the process can be used for counselling practitioners should only be encouraging participants to state the issue briefly and look at positive routes forward they have used before.

Practitioners from Germany felt the process fitted well with their participants' situations and was useful in gaining useful information which supported the development of participant action plans. Practitioners from Greece using the board with mental health participants felt that overall the process helped to show them where their participant

concentration level was good. Some of the mental health participants found the questions difficult to understand and that the process worked better with the higher functioning patients. They had interviewed one man whom they had known for two years and found that they were guiding him towards their own goals rather than giving him choice, under the onus of trying to motivate him. While there is recognition of influencing because of the levels of understanding they felt that their action in that case had been appropriate. There was also a query as to whether the participants had a real choice from the some questions. Were they appropriate in the circumstances? Practitioners from Italy had difficulties motivating participants to give up their limited free time to come in and be interviewed as their only free time was a Wednesday or Sunday night. There was an issue around confidentiality which the partner is currently looking at, as to how the semi-structured interview process fits into the practices of their service with regards to their confidentiality policy and procedures. This is a concern that the trainers had emphasised as something that should not happen when the semi-structured interview process protocols are followed. The Practitioners who quoted this response agreed that they had in fact deviated from the protocols. Practitioners recognised issues with some of the questions on the “Life-board” for their beneficiaries and were starting to identify more appropriate headings.

4.10.5. Semi-structured Interview Results

Participants, practitioners and Managers from Germany, Greece and Italy and UK complete questionnaires, give in-session feedback. The practitioners hold 519 semi-structured interviews with their participants.

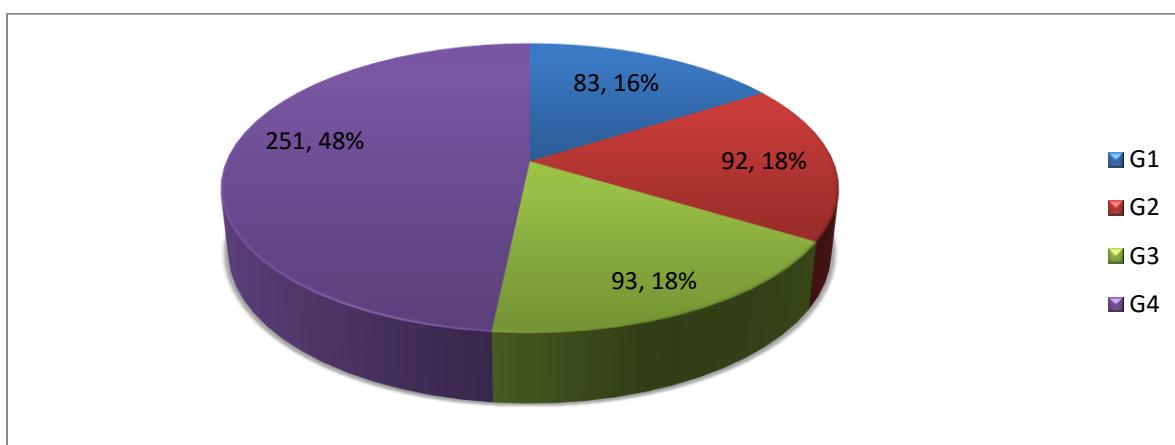


Figure 61: Numbers and Percentages of Semi-Structured Interviews Completed by Each Partner

The breakdown of which can be seen in Figure 61: Numbers and Percentages of Semi-Structured Interviews Completed by Each Partner. G1 hold 83 interviews equalling 16%, G2 complete 92 semi-structured interviews equalling 18%, G3 complete 93 interviews equalling 18% and G4 hold 251 equalling 48%.

Evidence of Distanced travelled through the various frames of reference

Table 9: Leonardo Da Vinci Cumulative Number of Interviews per project

Cumulative Number of Interviews per programme				
Interviews conducted				
Entire Programme				
	Lifeboard	Cumulative (G1, G2 & G3)		
		Baseline Review:	44	
		Total Reviews:		91
G1 Frame New				
		Baseline Review:	18	
		Total reviews:		40
G2 Frame New				
		Baseline Review :	19	
		Total Reviews:		68
G3 Frame New				
		Baseline Review:	24	
		Total Reviews:		69
G4 Frame New				
		Baseline Review:	38	
		Total Reviews:		251
Totals			143	519

Table 9: Leonardo Da Vinci Cumulative Number of Interviews per project shows the cumulative interviews from the project. G1 held 43 interviews with the life-board and 40 with the new frame of reference totalling 83. G2 held 24 interviews with the life-board and 68 with the new frame of reference totalling 92. G3 held 24 interviews with the life-board and 69 with the new frame totalling 93 interviews. G4 held 251 interviews altogether with an overall total for the project being 519 interviews with 143 people. G1 was the group who used the life-board the most with their participants evidenced in Figure 62: Percentage of semi-structured interviews using the Life-board with G1 performing 47%, G2 27% and G3 26%.

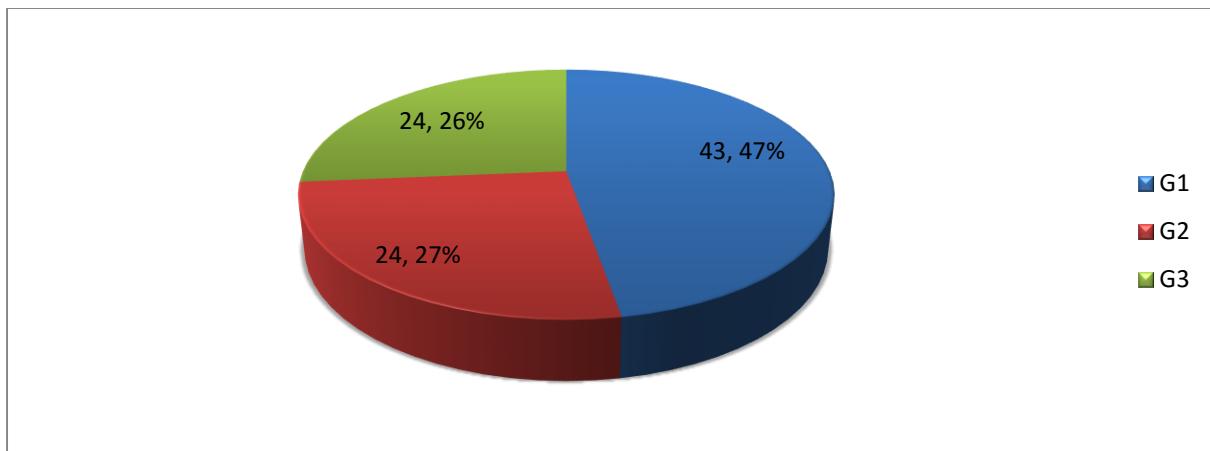


Figure 62: Percentage of semi-structured interviews using the Life-board

Appendix: Life-Board Distance Travelled for All Interviews shows the outcomes for practitioners' use of the Life-board frame of reference, which is not specifically adapted for a specialist group but is already showing reliability with the positive distance travelled.

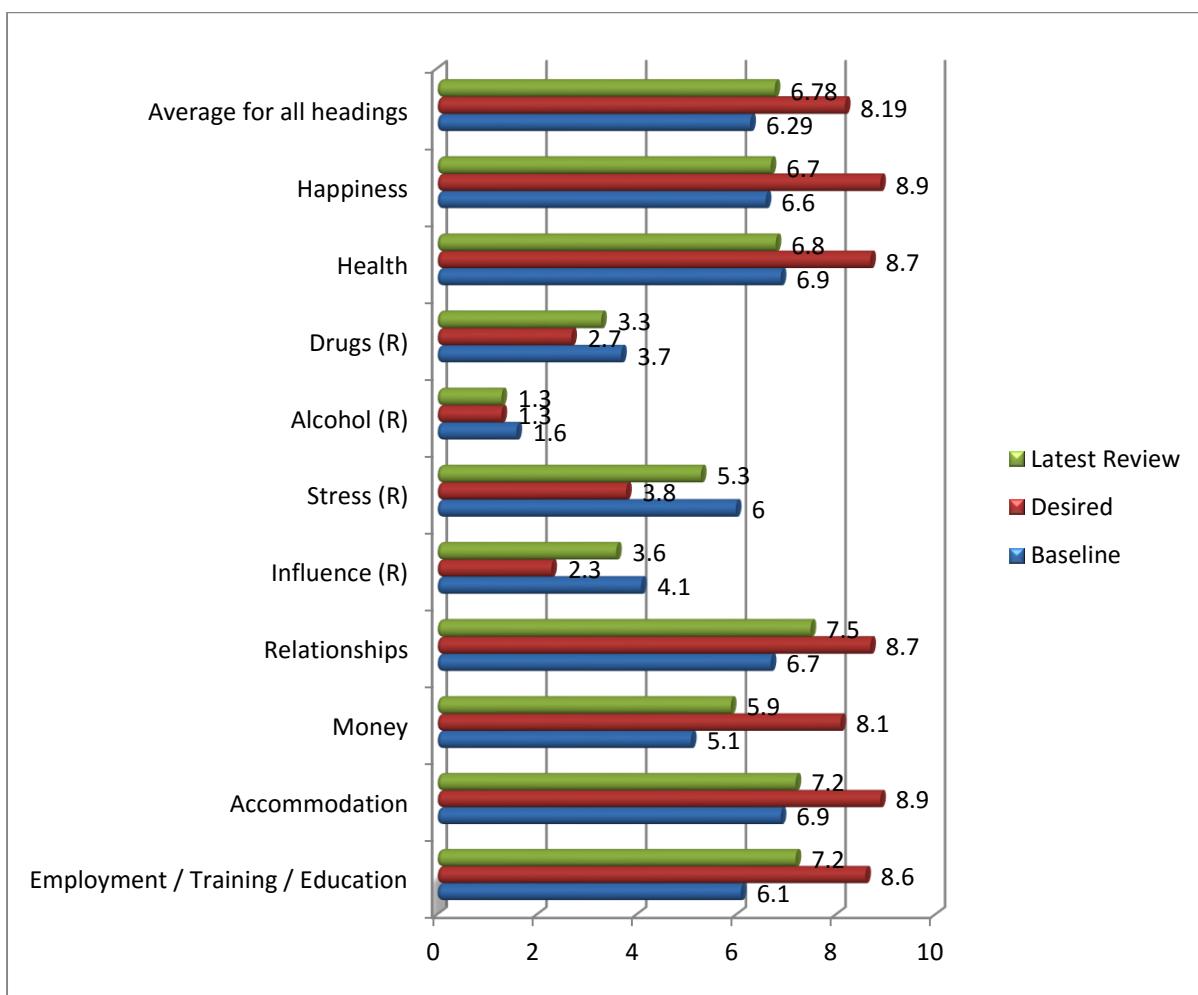


Figure 63: Distance travelled by all participants using the Life-board Frame of Reference

There is an overall positive movement forwards from 6.29 to 6.78 to the desired state. Alcohol is showing as the highest movement forwards with 100%. The only life-board heading which has no movement forwards is health which can be viewed in Figure 63: Distance travelled by all participants using the Life-board Frame of Reference shows a drop from 6.9 to 6.8 totalling -0.1 for health. The (R) after a heading means it is scored in reverse order. The reverse scoring can be confusing for participants and is not following the positive psychology guide (Mongrain & Anselmo-Matthews, 2012; Seligman, 2003). There are four reverse order scaling's of drugs, alcohol, stress and influencer so although they look like the participants have dropped under these headings they have not. Employment/Training/Education evidences a movement of 44% towards the desired state of 8.6. Distance travelled by all participants using the life-board frame of reference is 25.79%, evidencing validity in the process.

Moving on to the individual group results G1 an organisation supporting mental health patients develop soft skills. Appendix: Life-Board Distance Travelled Summary Average for G1 evidences 35.42% movement towards the desired state across all headings.

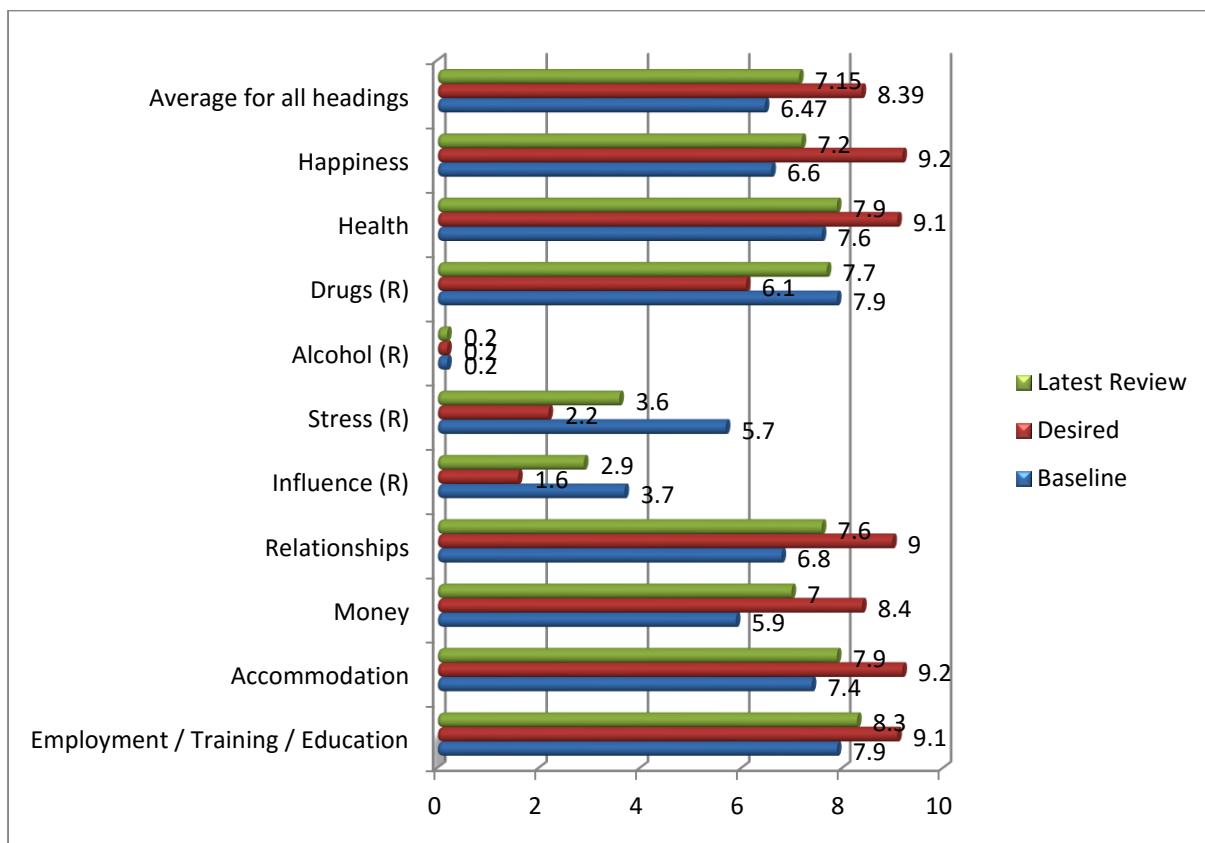


Figure 64: Distance travelled by G1 participants using the Life-board Frame of Reference

The highest movement forwards is with activities at 54.50% and the lowest is support which has remained static. There is a reverse scaling here of stress recorded as 20%. Figure 64: Distance travelled by G1 participants using the Life-board Frame of Reference evidences the average scaling that these percentages relate to. You can evidence that alcohol is not an issue to the participants/clients as they mental health patients who do not have any alcohol. The alcohol has been removed from the new frame of reference which is evidenced in Figure 65: Distance travelled by participants using the New G1 Frame. This evidences the outcomes for participants using a specially adapted frame of reference for G1 with an overall positive distance travelled from 6.89 to 7.58 with the desired scaling as 8.39 this is a 42% overall movement forwards. The following changes were made progress, community, activities and appearance/personal hygiene were added and drugs was swapped for medication as these were things mental health sufferers had some control over.

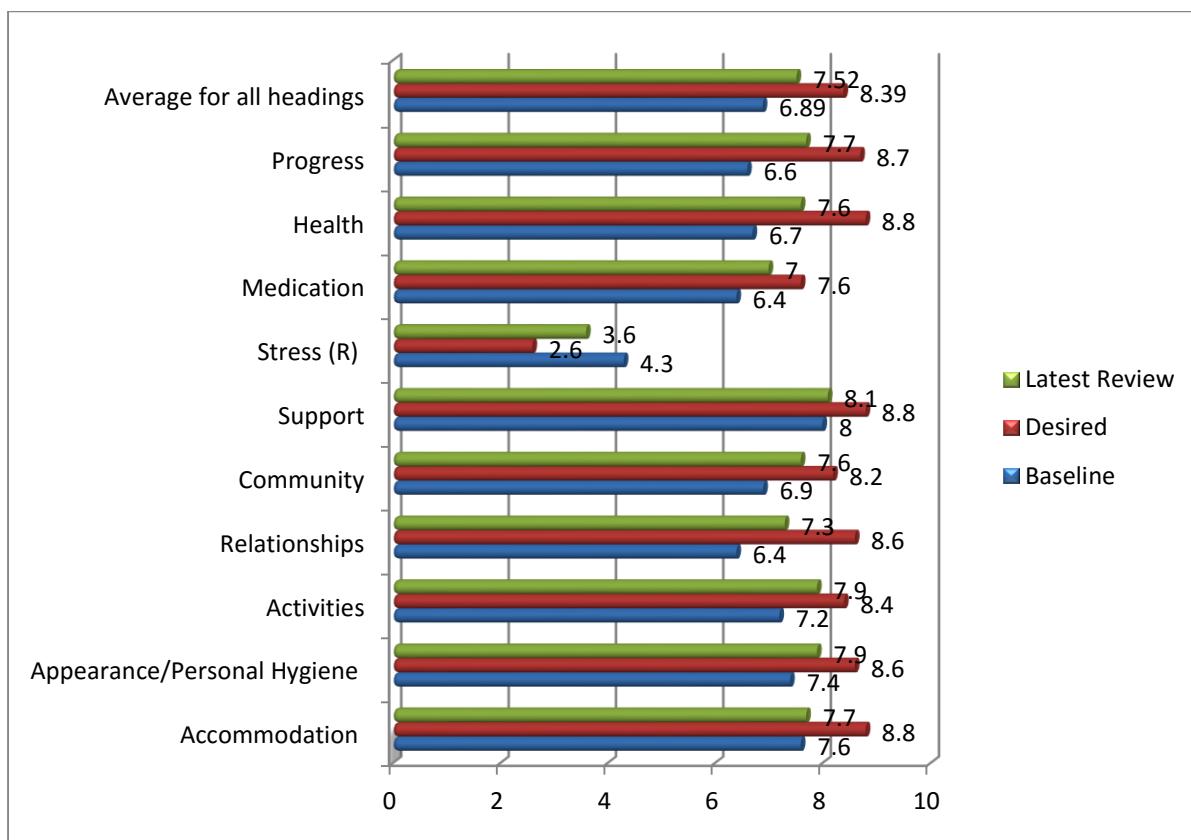


Figure 65: Distance travelled by participants using the New G1 Frame

Community means how they perceive themselves in the community and activities can mean undertakings they do which help them feel useful or participation interactive activities to aide recovery. Stress shows a baseline scaling of 4.3 with the latest review scaling of 3.6

which is 41.2% distance travelled forward. In Appendix: G1 New Frame Distance Travelled the percentages are evidenced with accommodation as the lowest movement forwards with 8.3% and activities shows the highest increase from the baseline to the last review with 58.3%. Keeping active is a key to wellbeing improvement (Rimer, 2011; Rohnfeld, 2012). The Lifeboard supported G1 participants/clients to move forwards by 35.42% and the new frame of reference supported G1 participants/clients to move forwards by 42.00%. This is a 6.58% improvement on the Lifeboard. This is clear evidence that the process works and with the right frame of reference and questioning further advances can be made. The G1 organisation decided to make changes giving the participants more responsibilities whilst at the centre to support development and increase the amount of support they were giving (Fuller, Marler & Hester, 2006). In the UK the law states for mental health patients that “The professionals should talk to you before they decide what support you should get and you should tell them what you think you need” MIND (2013). This is proactively encouraging mental health patients to be involved in their recovery and to feel responsible for the practical changes (Fuller, Marler & Hester, 2006).

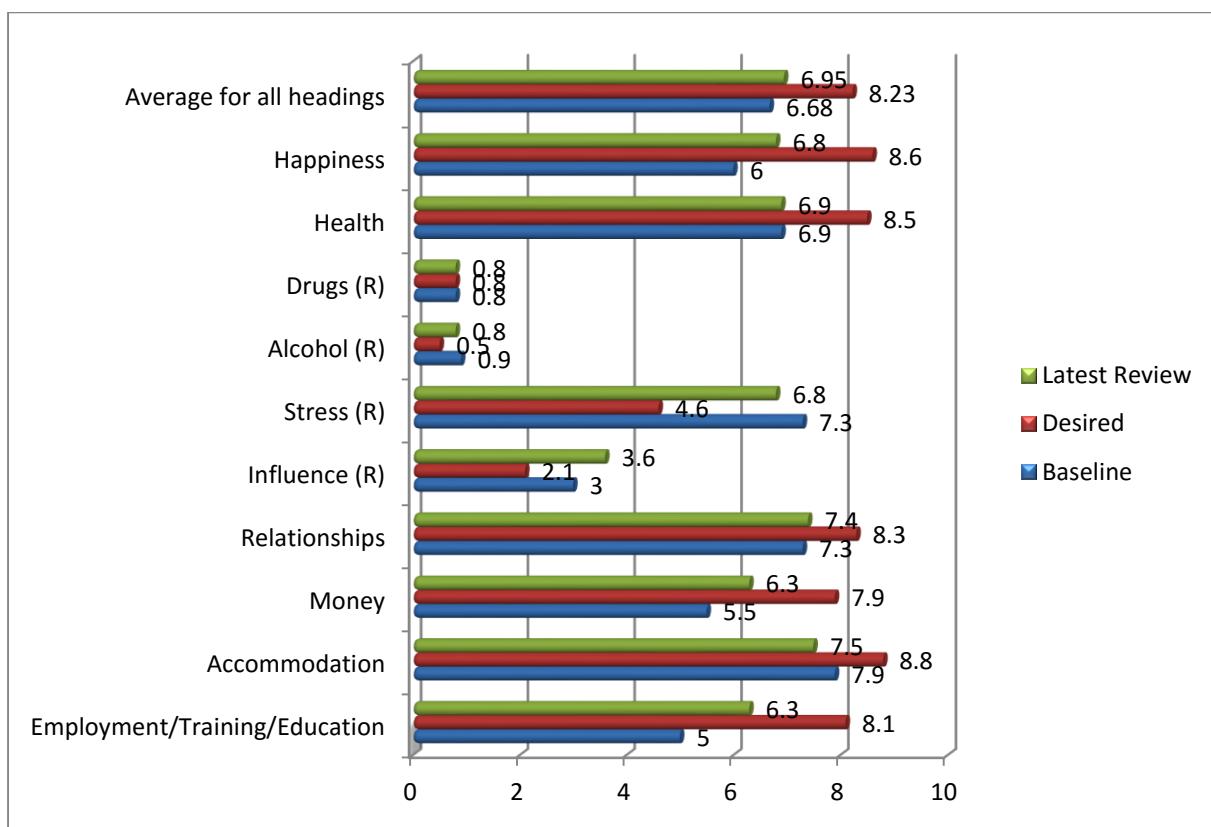


Figure 66: Distance travelled by G2 participants using the Life-board Frame of Reference

G2 an employment agency in Italy working closely with the public and community sectors. G2 Lifeboard evidences 18.71% distance travelled for their participants in Appendix: Life-Board Distance Travelled Summary Average for G2. This is evidenced further in Figure 66: Distance travelled by G2 participants using the Life-board Frame of Reference where you can note that drugs again is not evidenced as an issue area for these clients with baseline, desire and latest review all being the same. Drugs are evidenced in Figure 67: Distance travelled by G2 participants using the New Frame of Reference as having been removed. The new additions are cooperation, barriers, skills, support, work/life balance and work. The interview process helped them to gain valuable information about how the migrant workers felt about their employment.

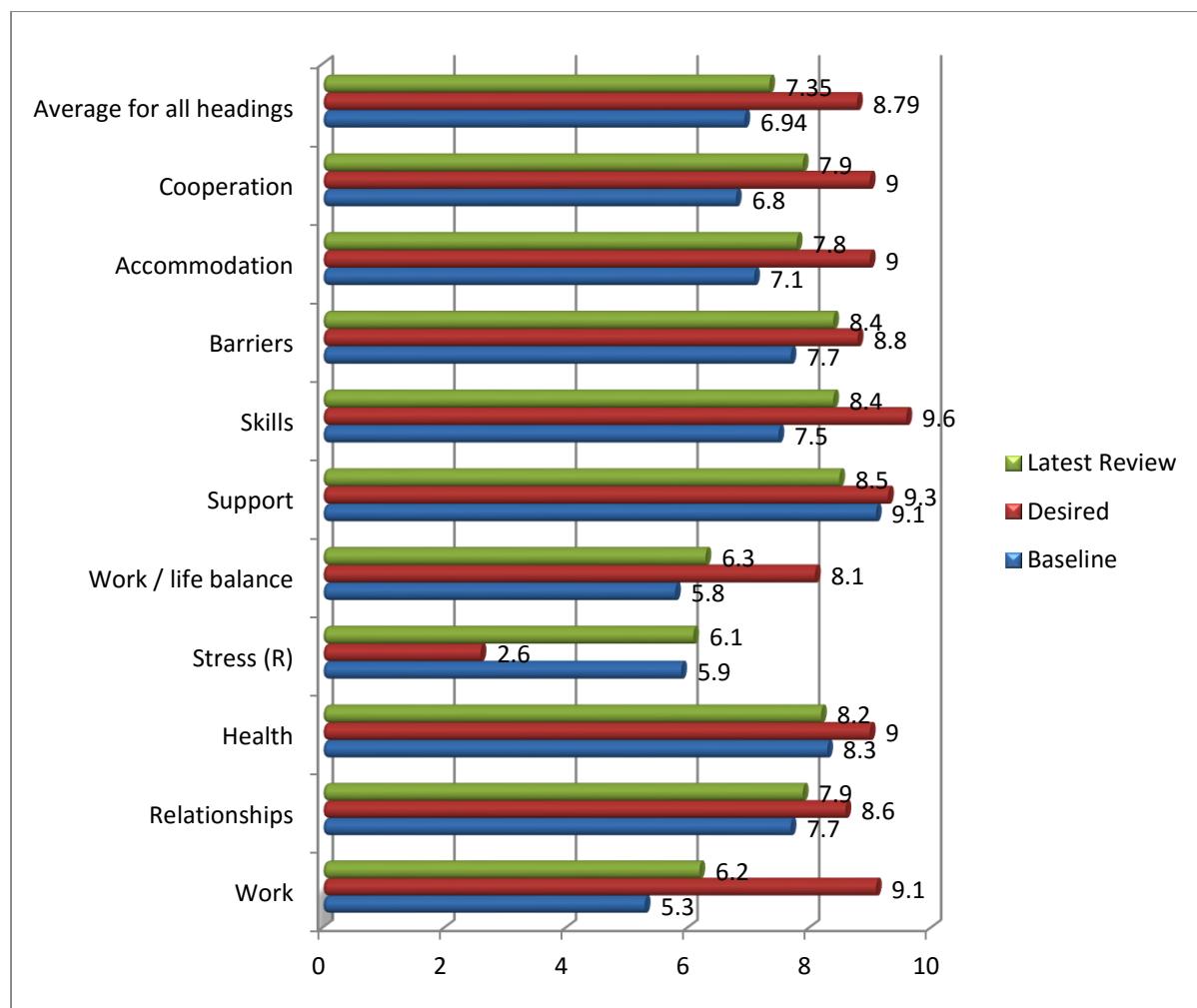


Figure 67: Distance travelled by G2 participants using the New Frame of Reference

These changes evidence an overall move forwards of 22.16% confirmed in Appendix: G2 New Frame Distance Travelled which is an improvement of 3.45% evidencing that the process is

valid. The improved frame of reference and questioning for the process evidenced further progression. The G2 group consists mainly of migrant carers working extremely long hours as they mainly live in with someone in need of care. It was difficult to encourage this group to participate as they only get a few hours leave each week. Work and work/life balance are rated lower than the other headings and stress being reversed is rated high. Health is also rated poorly. This signals alarm bells for G2 to give support to improve these conditions. Professional training qualifications are being offered and new agreements are being drawn up to improve the work contracts for the migrants so they can attend this training to gain better employment. Once in place signposting should be easier.

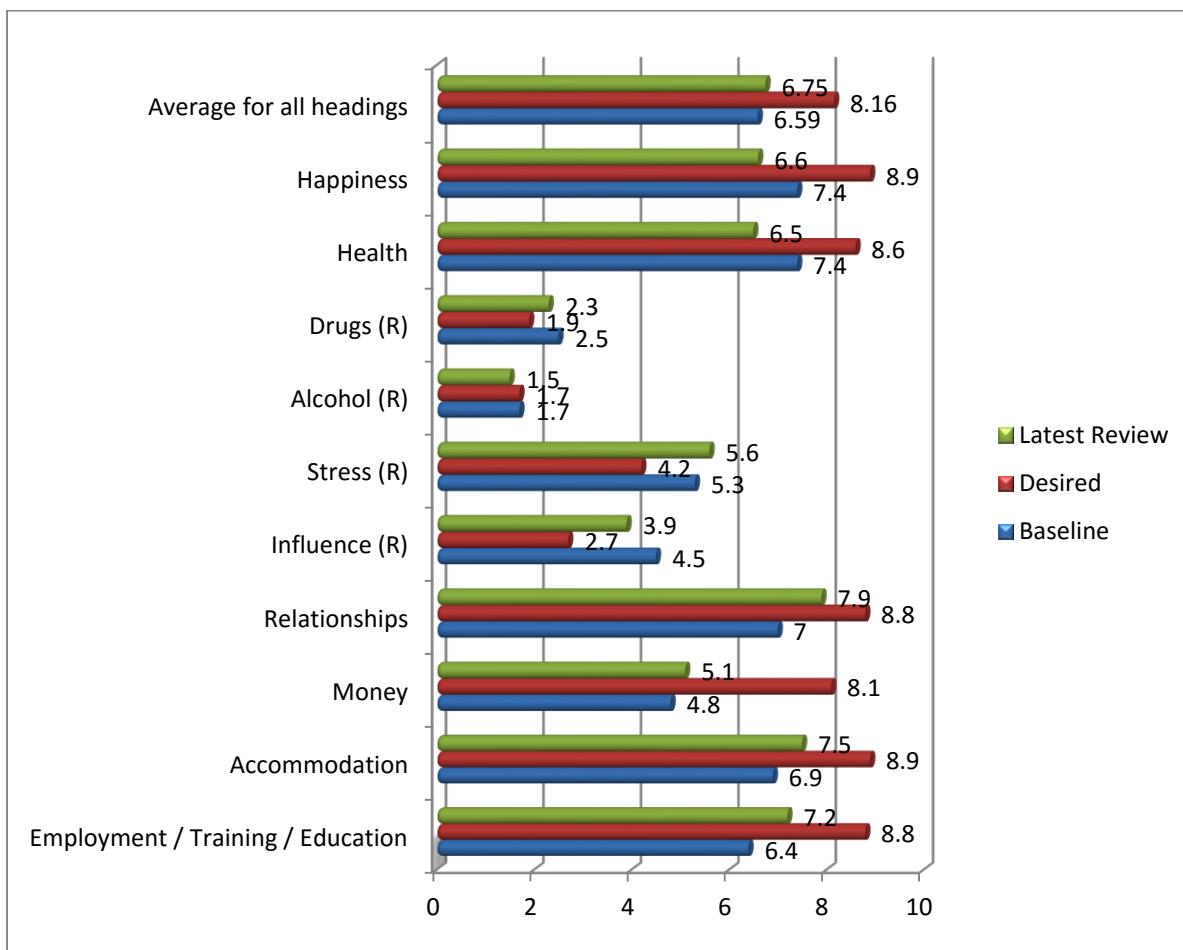


Figure 68: Distance travelled by G3 participants using the Life-board Frame of Reference

G3 is an employment agency who provides training in Germany initially supporting male and female participants into work but in the new frame only women are involved. Figure 68: Distance travelled by G3 participants using the Life-board Frame of Reference evidences

an overall movement forwards from 6.59 to 6.75. In Appendix: Life-Board Distance Travelled Summary Average for G3 of 10.19% distance travelled forwards. Participants have dropped back in health, stress and happiness. The interviewers state that they gain too much information and that participants are later worried about confidentiality. This is causing them stress which is affecting their health and happiness. The interviewers should not be delving into what has happened in the past other than to seek SMART actions to help individuals move forwards.

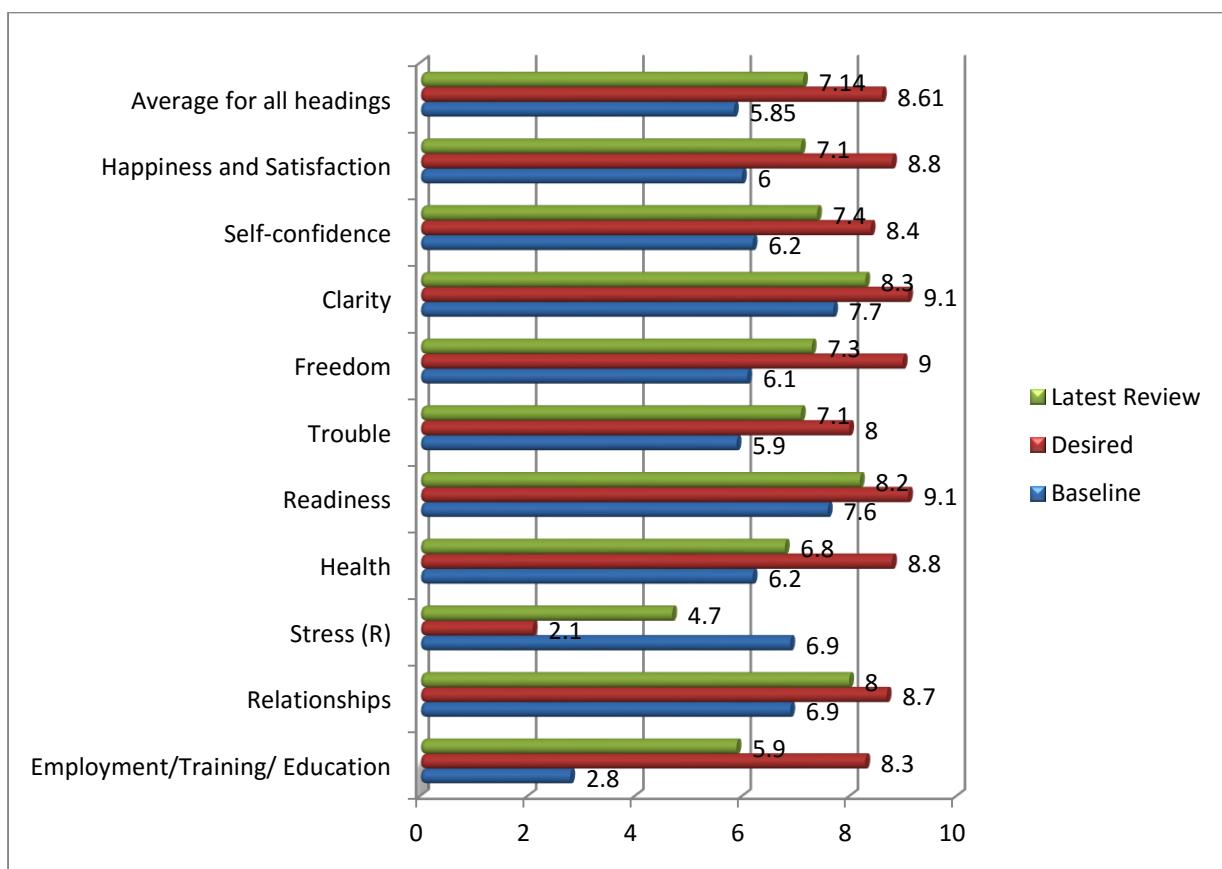


Figure 69: Distance travelled by participants using the New G3 Frame

Taking on board the feedback and some renewed training Appendix: G3 New Frame Distance Travelled evidences the results a percentage of movement towards the desired state across all headings of 50.38%. This is an increase from the lifeboard of 40.19% in movement forwards. All the headings have moved positively forwards. The highest of these is relationships with 88.20% and the lowest is health with 16%. Figure 69: Distance travelled by participants using the New G3 Frame shows the changes to the new frame of reference as originally they picked work/life balance but could not get participants to understand this

terminology and so changed the heading to freedom which shows the baseline at 6.1 and the latest review at 7.3 a 1.2 increase in distance travelled. Employment/training/education has a low baseline with 2.8 and high on the desired at 8.3. G3 is a training organisation and the participants expect support in this direction which they got with a 5.9 movement towards their desired rating which is 56.4%.

Appendix: G4 New Frame Distance Travelled shows the reliability with an overall movement towards the average desired state across all headings of 61.81%. The highest percentage being money with 100% improvement and the lowest being other skills with 16.70% improvement. Figure 70: Distance Travelled by participants using the G4 Project's New Frame of Reference shows the outcomes for participants using the specially adapted board for the UK North West Scotland 'Essential Skills' Project frame of reference with an overall positive distance travelled from an average of 4.91 to 6.5 across all headings.

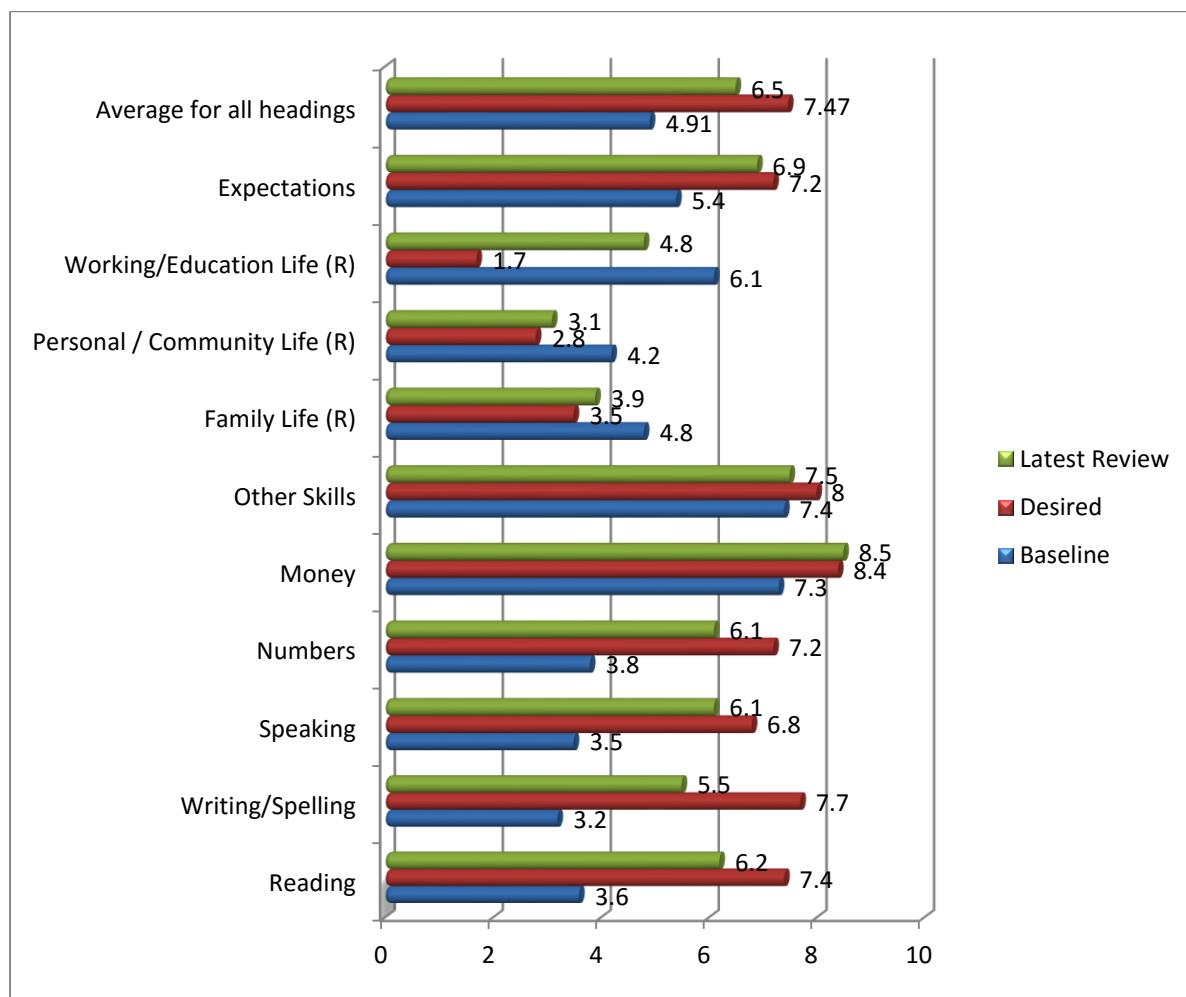


Figure 70: Distance Travelled by participants using the G4 Project's New Frame of Reference

The G4 Scottish agency works with long term unemployed participants to improve their poor standard of numeracy and literacy so as to support them into work as such movement forwards can be slow and more difficult to judge. The fact that family, community and personal life are all travelling forwards well and money has exceeded the desired status shows the success of the project as they can feel the benefits of being in work. This result again shows an exceptional positive movement forwards.

The groups had difficulty trying to work out a frame of reference that satisfied all their participants as they had different needs. It is important not to push participants to answer a question where they can't think of anything. The likelihood is they think of something negative if they are pushed to answer. The migrant workers in Italy were struggling with their lives. G3 found participants struggled to comprehend work/life balance and so changed it to freedom. G1 struggled as their participants in the first year were sectioned mental health patients who were not given much scope for choice. Their participants with the new frame are day patients who have more choices. However the sectioned participants could have been given community participation roles within the centre which would have supported their development. Perhaps the headings in this instance need to lead to viable choice options and build up as they recover. It is not easy getting the headings right for the frames of reference or getting the wording right under those frames. Ten frames of reference can be limiting but more is time consuming for professionals to have to work through. However a larger frame allows you to incorporate more and individuals can skip headings that are not relevant at that point in time. Also positive wording supports positive psychology. This is a key in wellbeing and especially with people already suffering trauma of having to leave their homes either as a migrant or a mental health patient. People need some control in their lives to be able to move forwards even simplistic things like ensuring positive surroundings that mean something to an individual, the colour of their room, music they enjoy, rich pictures/photos, enjoyable smells, exercise to relieve stress, etc. These little things can make a huge improvement in an individual's life. This positive effect has an effect on relationship development especially where migrants are living in someone else's house and where mental health patients are given some freedom in the room.

4.10.6. End of Training Questionnaire Results

The results show that 12 practitioners completed the training.

- (1) They rated an average of 8.7 on a scale of 0 to 10 to the extent that the course aims and objectives were met. Generally they thought that they had a full understanding of the Rickter Scale®. More specifically they thought the aims of feeling comfortable, confident and competent in using the Rickter Scale® Process were achieved.
- (2) Their training motivation was rated as an average 8.8 and additionally commented that the training was motivating. The practitioners felt totally persuaded that the Rickter Scale® Process is worth every effort to implement. They felt it was a useful tool that stimulates and inspires individuals to take responsibility for their own life and plan steps to improve it.
- (3) The practitioners rated an average 8.6 for understanding the theory underpinning the Rickter Scale®
- (4) The practitioners rated 8.3 for clarity about using the information gained through the process.
- (5) For their assessment of their own competency in the use of the Process, they rated an average 7.6 and also stated that practice will help improve their competence, confidence, knowledge and skills further.
- (6) They rated an average 7.6 for the confidence they felt about using the Rickter Scale® with their participants immediately after the initial training.
- (7) Generally the practitioners enjoyed using the Rickter Scale® and rated an average 7.8 for how comfortable they felt using it.
- (8) They rated an average 9.3 for the effectiveness of the trainer's style in meeting the course needs and appreciated the group working, which gave them the opportunity to mix with others and gain insight into their working strategies and methods.
- (9) The practitioners rated an average 6.0 in feeling they had an adequate system of staff supervision within their own organisations and suggested the Rickter Scale® might be a good tool to use within their organisations for Staff Appraisal and Supervision.
- (10) 6.2 was the average rated for their organisations' adequacy of referral agency networks.
- (11) The practitioners rated an average 7.8 for the extent they felt their organisation offers an adequate environment for participant interviews.

(12) One of the practitioners felt they had training plans but not "participant action plans." They think the Rickter Scale® will complete the work they do though it is more time consuming than their current processes.

(13) Generally practitioners think that the Rickter Scale® will be useful to them and their participants in structuring interviews, motivating, seeking capabilities and positively effecting employability, and encouraging aspirations and goal setting in an effective stepped approach. It is productive, gathers qualitative and quantitative information.

(14) The practitioners commented how interesting and motivating the training was although there was a suggestion for more small group work which was taken on board for the training follow-up.

4.10.7. Overview of Interim Practitioner Questionnaire Results

Preparation of the practitioners

The practitioners feel the semi-structured interview process training is perfectly adequate and feel confident in using the semi-structured interview process. The practitioners believed the semi-structured interview process is a useful and positive tool to use with their participants, in particular with new participants as they can see clearly where their problems are based and identify actions to overcome them. Practitioners also feel the semi-structured interview process overall is a useful evaluation tool.

Appropriateness of Frames of Reference

The second section looks at the frames of reference, starting with the 'Life-board'. Practitioners are asked if the current headings within the 'Life-board' frame of reference are appropriate to their participant group. 40% of those answering feel it is appropriate, but 60% feel it is not. Of course, this is entirely expected as the 'Life-board' frame of reference used in the UK is designed as a generic set of questions. The whole purpose of the project is to start from a default position to then enable each partner to decide exactly what questions are more appropriate to their own participant group. The intention is that a frame of reference must always reflect the specific needs of the participant group using it, as well as helping to fulfil the aims and objectives of the provider organisation. The practitioners feel the 'Life-board' frame of reference needs some of the headings changed during the 'Adaptation Phase' as is planned for, as they are too general, especially for the mental health participants in Greece.

However, practitioners also comment on the process being timely for them as an additional Quality Assurance procedure with real practical value for participants, practitioners and their organisations alike. At this point the practitioners are starting to recognise headings that could be useful to their participants and possible new headings for discussion in their teams.

Interview environment

The majority of practitioners hold their interviews in offices. Initially there are concerns with privacy and time constraints which are later taken on board as the trainers reminded practitioners that privacy and time are golden rules for the process.

Overview of actual use of the semi-structured interview process

The practitioners' main reason in determining which participants should use the semi-structured interview process is usefulness to the participant closely followed by mental ability. The practitioners suggest valued use with a mix of ages, gender and ability of participants. The semi-structured interview process evidences how good it is at encouraging people to take more responsibility for their life by setting their goals and continuously working towards their desired state. The Practitioners feel the semi-structured interview process helps participants to achieve their aims/objectives. The on-going monitoring identifies work strategies to help people stay in vocational training, rehabilitation and improvements psychologically with participants gaining more of an insight into themselves.

Specific outcome for practitioners

Practitioners felt that the semi-structured interview process helps in eliciting significant participant information and contributes to a means of improving team communication about individual participants, also as a means of improving communication with external agencies regarding individual participants and as a standardised structure for interviewing participants. Most could see how the semi-structured interview process contributes to producing evidence of their effectiveness in terms of demonstrating their support and intervention with participants. Practitioners feel that the semi-structured interview process contributes to clarification of participant needs/limitations/barriers/options. Practitioners feel that the semi-structured interview process contributes to a measure of the participant's soft indicators. Most also feel strongly

that the semi-structured interview process contributes to producing the participant's action plan and to completing recording documentation that is easy to use.

Specific outcomes for participants

The practitioners felt that the semi-structured interview process contributes to identification of their priorities for support/intervention and to a new perspective on their current circumstances, by seeing both the big picture and connections between the issues illustrated in the semi-structured interviews. Most feel that the semi-structured interview process contributes to identification of strategies that have worked in the past, to exploration of options for the future and contributes to a means of setting goals. Most feel that the semi-structured interview process contributes to a means by which participants can take responsibility for their future and to a realisation of the progress/achievements made. The practitioners also feel that the semi-structured interview process contributes to a means of improving individuals' self-awareness, self-confidence, self-esteem and self-efficacy.

4.10.8. Interim IMS Usability Feedback and Questionnaire

The results of the Interim IMS usability questionnaire identify some useful improvements for the IMS. During the initial use of the IMS there are numerous issues with the translation strings and case communication which are resolved but some have great difficulty in getting resolved and have to be requested several times. In response to this an additional evaluation was implemented by Northumbria University students. The evaluation showed the IMS as a useful tool but in addition to the pointers above the following recommendations were made:

- Intermittent back buttons;
- A breadcrumb trail;
- Quick keys to move from one page to another;
- Improved graphic options;
- Improved segregation and integration of data;
- A help system;
- Improved presentation for expanded use.

In general any information management system/impact management system should always be reviewed for ways to improve it to optimise its performance for its customers as systems software improves. The new on-going issue log improves quality tracking and ensures agreed corrective action is taken and the information is fed back to the person who raised the issue, ensuring a solution is found and customer satisfaction maintained.

4.10.9. Evaluations of Vocational Training Organisations Usage

Initially the practitioners used the ‘Life-board’ overlay found in I Appendix: Leonardo Da Vinci TOI ‘Life-Board’ Questions for Employability Participants, which are found to be useful in identifying the barriers in people’s lives to soft/hard skills development for employment. As the practitioners became more comfortable with the use of the process, they started to appreciate it more and recognised other themes for the frame of reference that would be better applied to their specific participants to enhance achievement towards their aims. The project encouraged G1, G2 and G3 to develop 5 specialised headings for their group and to keep 5 static headings from the ‘Life-board’ that they felt would apply to their role and engage their participants found in Appendix: Leonardo Da Vinci New Interview Frames of Reference Headings. When the project was in the third stage each country again discussed the questions they were using and more alterations were made.

The IMS evidences data in graph form for distance travelled within the various ethnographic groups evidencing useful information when developing the frame of reference. Figure 71: Distance Travelled by Employment Status for G3 participants using the ‘Life-board’ Frame of Reference and Figure 72: Distance Travelled by Employment Status for participants using the New G3 Frame of Reference show G3 participants, in Germany, distance travelled by employment status with the ‘Life-board’ and then the new G3 frame of reference. You can clearly see that the newly developed frame of reference is much more effective as the participants are clearly moving forwards in all employment-related headings.

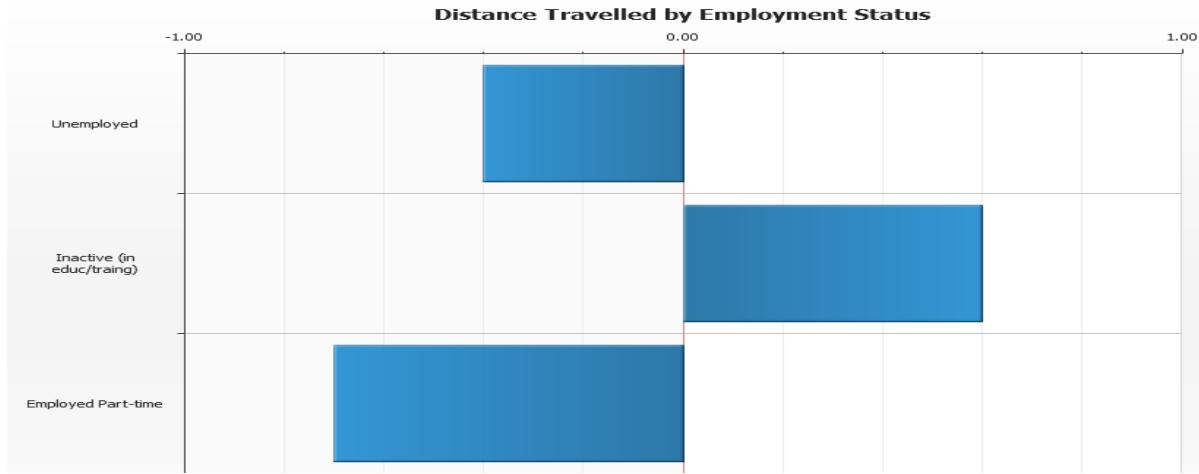


Figure 71: Distance Travelled by Employment Status for G3 participants using the 'Life-board' Frame of Reference

In Figure 71: Distance Travelled by Employment Status for G3 participants using the 'Life-board' Frame of Reference and Figure 72: Distance Travelled by Employment Status for participants using the New G3 Frame of Reference those changes can clearly be seen to be making an improvement in the distance travelled towards the participants' desired state. Unemployed have moved from -0.40 to 1.00. A movement forwards of 1.40. Part-time employed have moved from -0.70 to + 0.75. A movement forwards of 1.45. Inactive on education/training have moved from 1.00 to 2.30. A movement forwards of 1.30.

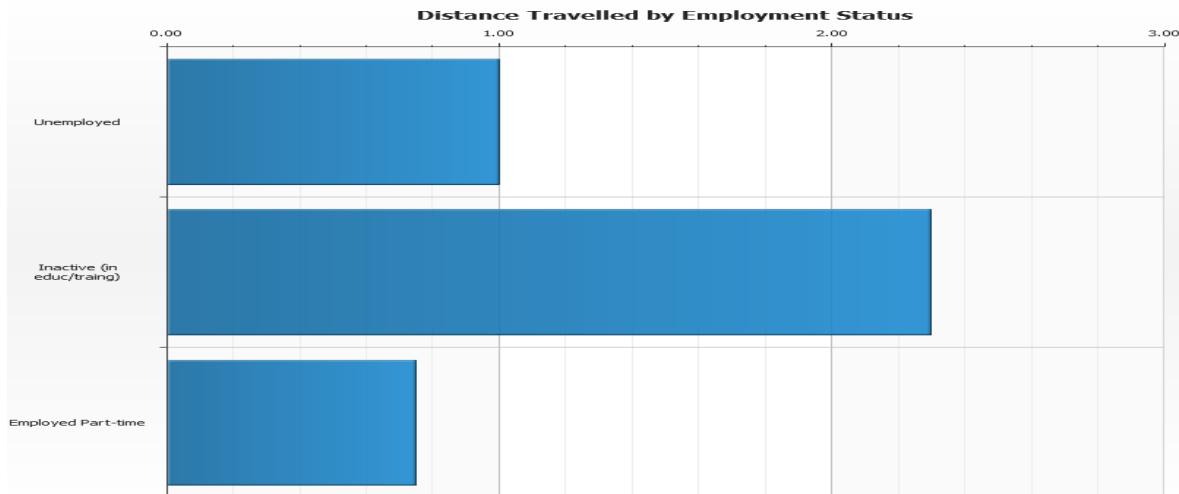


Figure 72: Distance Travelled by Employment Status for participants using the New G3 Frame of Reference

To further view the positive effect of the Transfer of Innovation see Figure 73: Distance Travelled by Employment Status for G2 participants using the 'Life-board' Frame of Reference and Figure 74: Distance Travelled by Employment Status for participants using the New G2

Frame of Reference evidence is shown again with the positive travel enhancement in the specially developed frame of reference for G2 in Inactive, employed full-time and self-employed.

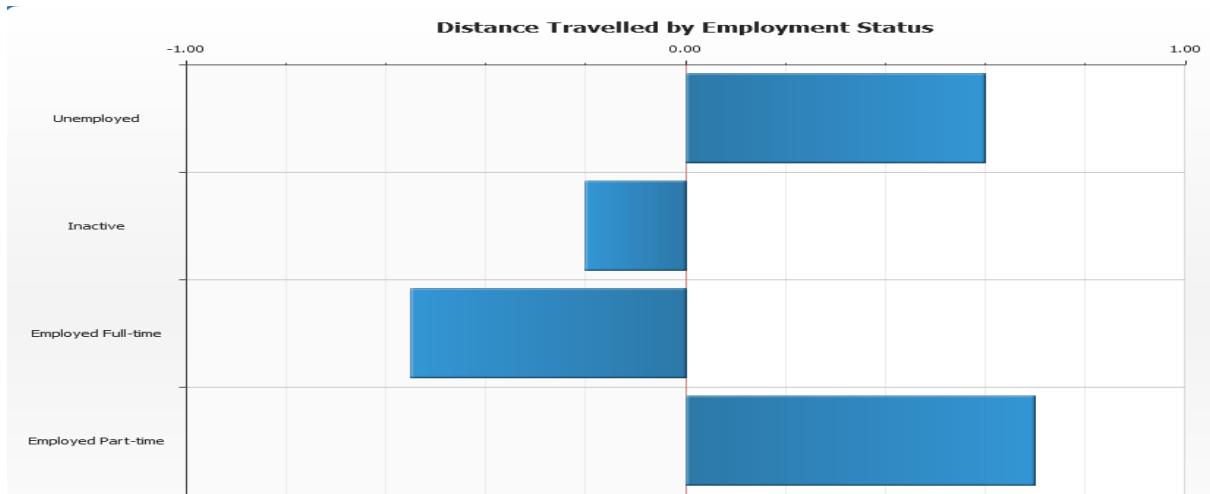


Figure 73: Distance Travelled by Employment Status for G2 participants using the 'Life-board' Frame of Reference

G2 said the frames of reference applied to migrant women and home carers would not be changed, but they would expand the exploration of questions concerning the heading 'work-life balance'. However G2 eventually changed this heading to 'freedom' which the migrants understood and can be seen in Figure 73: Distance Travelled by Employment Status for G2 participants using the 'Life-board' Frame of Reference and Figure 74: Distance Travelled by Employment Status for participants using the New G2 Frame of Reference to have again made an improvement in distance travelled towards participant desired state.

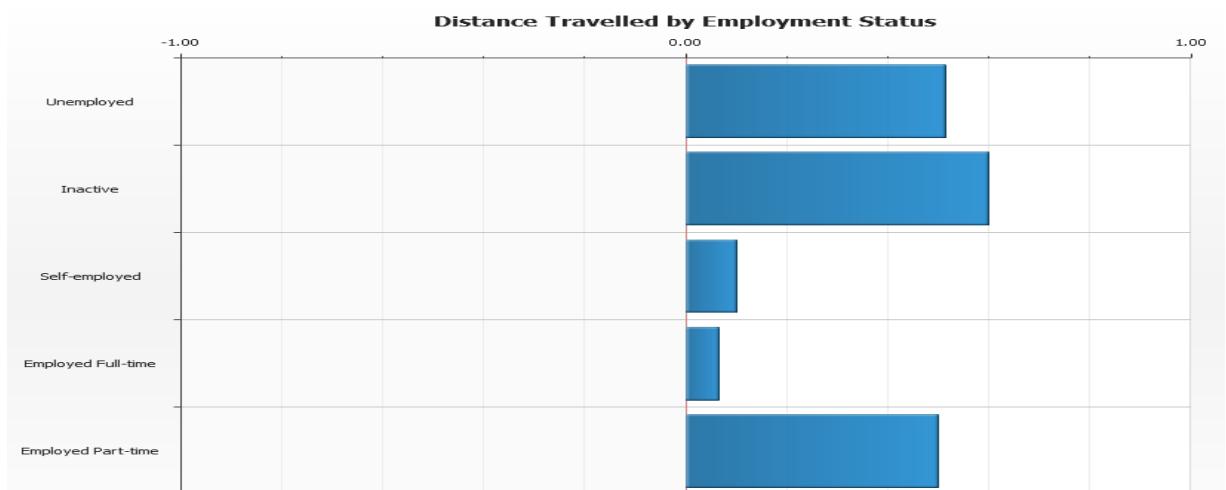


Figure 74: Distance Travelled by Employment Status for participants using the New G2 Frame of Reference

If an employment status reduced with a new frame of reference the organisation would know to investigate which heading or headings were not working. As more organisations sign up to the process, sharing of the usefulness of each heading can be shared so that headings become unique to the wellbeing of participant groups in each country.

G1 in Greece confirmed that the process is useful with participants with mild to moderate mental illnesses or learning difficulties, with which they had good results. They found that the process was not so good with those whose mental impairment is severe.

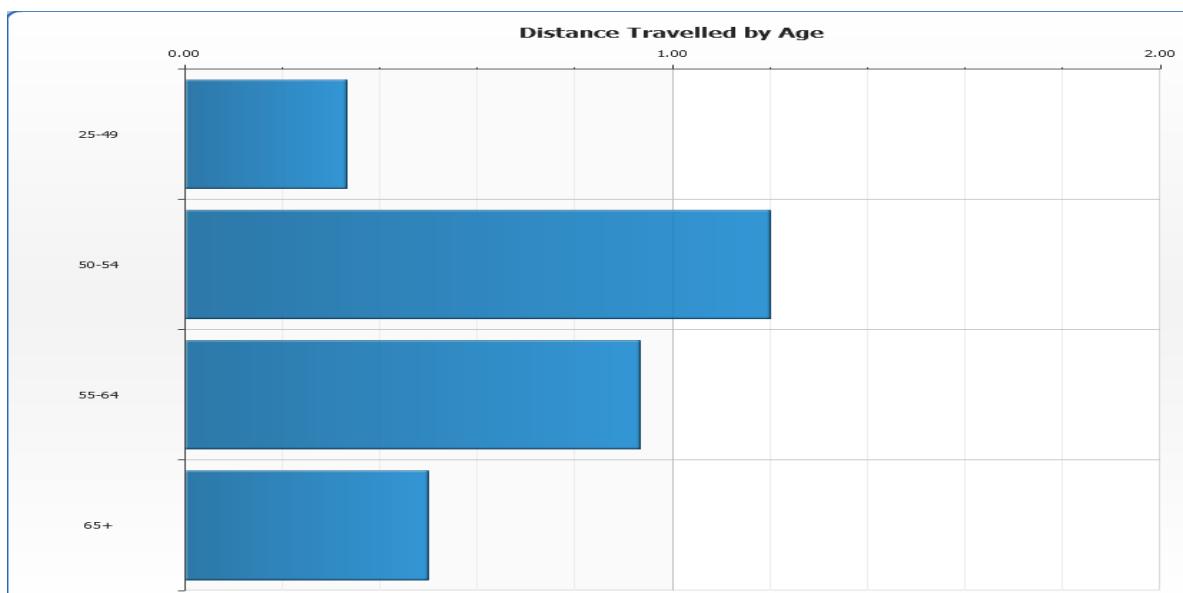


Figure 75: Distance Travelled by Age for G1 participants using the 'Life-board' Frame of Reference

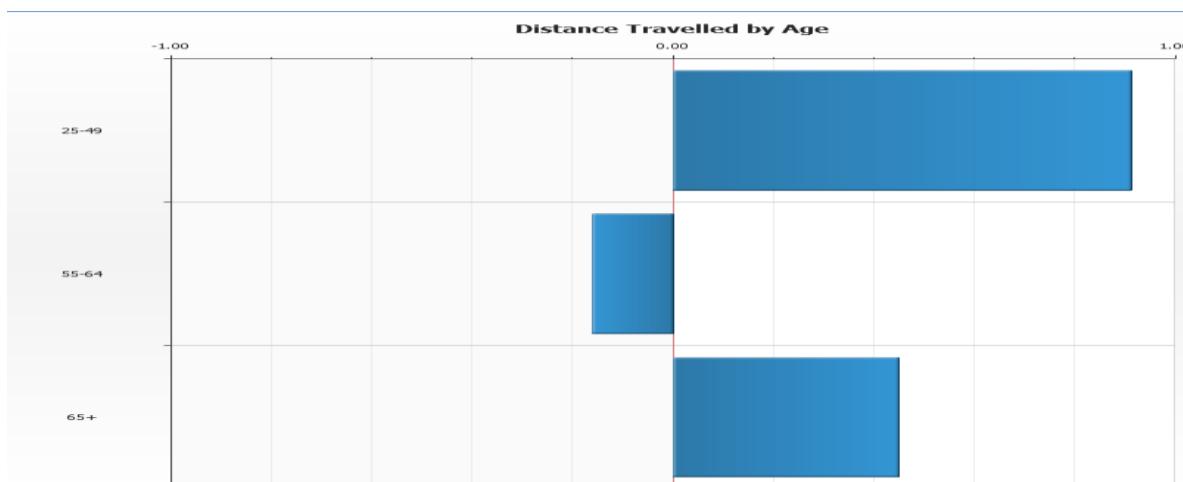


Figure 76: Distance Travelled by Age for participants using the New G1 Frame of Reference

They are to look further at the break down of their participants as certain age groups travelled further with the ‘Life-board’ than with the new frame of reference (see the comparison in Figure 75: Distance Travelled by Age for G1 participants using the ‘Life-board’ Frame of Reference and Figure 76: Distance Travelled by Age for participants using the New G1 Frame of Reference). The 25-49 year olds have travelled much further with the new frame of reference whereas the 55-64 year olds work better with the ‘Life-board’. The 65+ was also slightly better with the ‘Life-board’. G1 practitioners have suggested investigating the use of further frames of reference for their participants. G1 could also further investigate whether differences in participant ethnology has an effect on how their mental health participants/clients move forward. Figure 77: Distance Travelled by Disability using the New G1 Frame of Reference evidences there were no disabled participants identified in the New G1 research.

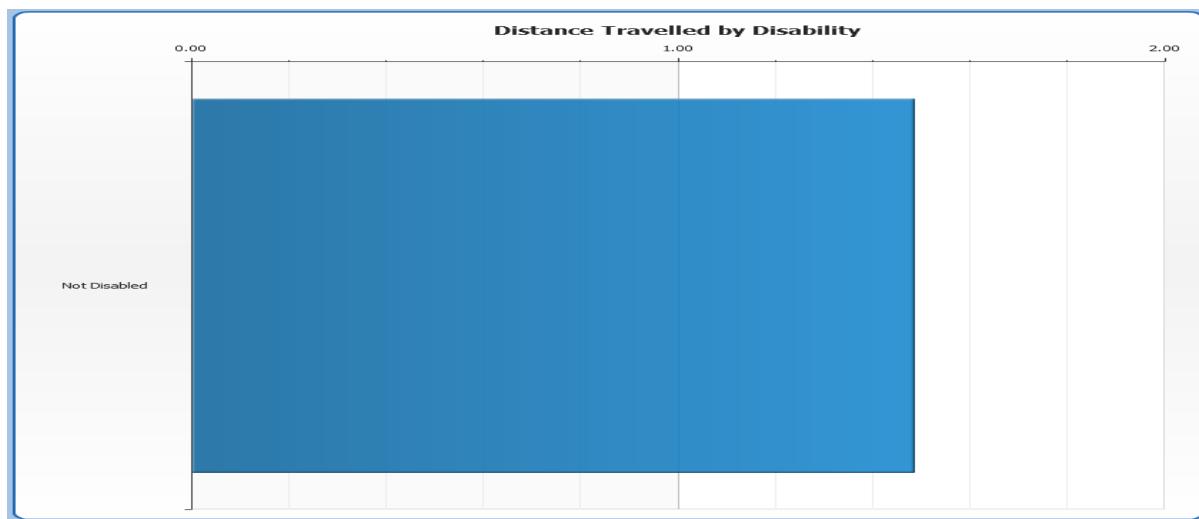


Figure 77: Distance Travelled by Disability using the New G1 Frame of Reference

In the UK practitioners have implemented changes to the frame of reference for families affected by long-term unemployment and low skill set. The questions are now more holistic to the work they are undertaking in skill development and family support. The greater use of the process develops a greater understanding of participants and how tweaks here and there can formulate numerous frames of reference which work specifically to sections of participant groups. This is where information sharing can save time for new organisations using the process and develop positive benchmarks. More detailed information can be found on the Scaling New Heights in VET website (Woods, 2013).

4.10.10. Final Evaluation Questionnaires

Practitioners

The final practitioner questionnaire can be found in Appendix: Leonardo Da Vinci TOI Final Practitioner Questionnaire. The results can be found in Appendix G1 Practitioners Evaluation Questionnaires Results; Appendix G2 Practitioners Evaluation Questionnaires Results; Appendix G3 Practitioners Evaluation Questionnaires Results and Appendix Results of All Practitioners Evaluation Questionnaires. The TOI final practitioner questionnaire evidences 53% of practitioners felt the process quite significantly improved and 43% felt the process considerably improved their understanding of their participant needs. 57% felt it considerably improved and 43% felt it quite significantly improved helping to identify areas of support and resources needed for participants. 72% of practitioners felt the measurement of participant progress is quite significantly helped while 14% thought it considerably helped and 14% thought it helped a little. 72% thought the process helped to measure the impact of their support and interventions with their participants and 28% did not answer the question. 86% of practitioners felt it quite significantly improved the participant review process and 14% felt it helped a little. 86% of practitioners felt it quite significantly improved the quality of work with participants and 14% felt it helped a little. 72% of practitioners felt quite significantly found the IMS system and reports useful and 28% found it considerably useful. Practitioners felt 28% considerably felt that the following improvements could be made to the process, 57% quite significantly and 14% did not answer. 72% of practitioners felt quite significantly they would like improvements to the IMS that would benefit them and their participants and 14% felt considerably improvements would benefit them and their participants and 14% did not answer. Comments are as follows:

- G2 wanted to do further reviews with participants to carry on recording their progress in terms of employability;
- G3 would prefer not to have to fill in the date of the interview at every action in the IMS;
- G3 would like the ability to fill in the practitioner and participants actions at the same time in the IMS;
- G3 would prefer the frame of reference headings to be repeated below the respective evidence and action sections in the IMS

Managers

The manager questionnaire can be found in Appendix: Leonardo Da Vinci TOI Final Managers Questionnaire. The results can be found in Appendix G1 Manager Evaluation Questionnaire Results; Appendix G2 Manager Evaluation Questionnaire Results; Appendix G3 Manager Evaluation Questionnaire Results and Appendix All the Managers Evaluation Questionnaires Results.

The managers felt that the Rickter Scale® Process considerably or quite significantly helps to measure the impact of the Practitioners' intervention and support, to review their team's work, identify new support needs or resources and to improve the quality of their work. They felt quite significantly that Rickter Scale® Process provides evidence for funders and stakeholders. The managers felt that the IMS and reports produced were considerably or quite significantly useful. The G3 manager commented that the overlays are adapted well to the needs of their target group of job returners. They would like to now have them adapted to other participant/client groups as well, especially to migrants in language courses who are entering the job market. G3 felt the reports the IMS produces are okay. G3 also recommended further improvements to IMS:

- General revision with easier navigation;
- Adaption to G3 environment, i.e. different classification for migrants and ethnicity choices generally;
- NB the present drop-down menu offers choice of participant/client ethnicity in the EU format required by EU-funded projects in the UK

Participants/Clients

The participant/client questionnaire is in Appendix: Leonardo Da Vinci TOI Final Participant Questionnaire.

G1 participants/clients Appendix: G1 Participants Evaluation Questionnaires Results averaged 8.3 for how comfortable they felt in using the Rickter Scale® Board. For clarity of use they averaged 7.2. For goal clarity they scaled 6.5. Slider movement helps G1 participants/clients to feel where they are in their life and where you would like to be scaled 8. They scaled 7.3 for Process helpfulness in using the Rickter Scale® board in their interviews.

The G1 participants/clients scaled 7.2 for ease of understanding the questions. They scaled 7 on how easy the Rickter Scale® makes it for participants/clients to talk about themselves and the things going on in their lives. Participants/clients scaled 6.7 for having used the Rickter Scale®, how aware were they about what they've already achieved and what their skills and abilities are. They scaled 5.8 for how easy they felt it is to see links between the different headings on the Rickter Scale® board. The G1 participants/clients scaled 7 for how positive they felt immediately after their last Rickter Scale® interview. None of the G1 participants/clients felt there was anything about the Rickter Scale Process that they would like to see improved. The overall totals for G1 show a positive level of satisfaction with the Rickter Scale® Process. The results evidence this as the majority of scaling is between 6-8 and heavier scaling on 7. G1 participants/clients are mental health patients who have more difficulty in seeing positivity in their lives so this evidence shows a fantastic transfer of innovation for G1, clearly showing the Rickter Scale® Process has worked well for their participants/clients.

Appendix: G2 Participants Evaluation Questionnaires Results show G2 participants/clients averaged 9.6 for comfort of use of the Rickter Scale® Board. Clarity of use they averaged 8.8. For goal clarity they scaled 8.4. For feeling that the Rickter Board's slider movement helps participants/clients to feel where they are in their life and where they would like to be, they scaled 8.8. They scaled 9.6 for Process helpfulness in using the Rickter Scale® board in their interviews. The G2 participants/clients scaled a 9 for ease of understanding the questions. They scaled 9 on how easy the Rickter Scale® makes it for participants/clients to talk about themselves and the things going on in their lives. Participants/clients scaled 9.6 for how aware were they about what they've already achieved and what their skills and abilities are having used the Rickter Scale®. They scaled 9 for how easy they felt it is to see links between the different headings on the Rickter Scale® board. The G2 participants/clients scaled 9.6 for how positive they felt immediately after their last Rickter Scale® interview. One G2 participant/client additionally commented that it would be useful to make more questions about the following aspects: job, health, relationship with husband/ fiancé, family, etc. They also said "It has been a very important testing for me. It let me know the person I'm, my strengths and the potentialities I didn't expect to have. I've learnt how to develop myself, how to become stronger and more self-confident". A second participant/client said "It let me

discover that I'm more skilled and prepared than I imagined myself to be. I realised for instance, about a specific experience that I gave more than I thought I could give. This tool has the power to let things inside me get out". It is important to note that during the TOI Italy had an earth quake which damaged the offices and homes and work places of practitioners and participants/clients. This had an effect on how people felt and their scaling. Naturally people were under more stress and found it difficult to be as positive as they had been prior to the earthquake. The overall totals for G2 show an outstanding level of satisfaction with the Rickter Scale® Process. The results evidence this as the majority of scaling is between 8-10 and heavier scaling on 10. G2 participants/clients suffered great stress during this trial from the earthquake and would have had more difficulty in seeing positivity in their lives so this evidence shows an outstanding transfer of innovation for G2, clearly showing the Rickter Scale® Process has not just worked well for their participants/clients but has positively helped participants/clients to recognise their achievements after the earthquake and thus enhance in the recovery process.

G3 participants/clients Appendix: G3 Participants Evaluation Questionnaires Results averaged a scaling of 9.2 for feeling comfortable in using the Rickter Scale® Board. For clarity of purpose they averaged 8.8. For goal clarity they scaled 9.4. For feeling that the Rickter Board's slider movement helps participants/clients to feel where they are in their life and where they would like to be, they scaled 6.2. They scaled 7.2 for Process helpfulness in using the Rickter Scale® Board in their interviews. The G3 participants/clients scaled 9.6 for ease of understanding the questions. They scaled 8.8 for how easy the Rickter Scale® Process makes it for participants/clients to talk about themselves and the things going on in their lives. Participants/clients scaled 8.8 for how aware they were having used the Rickter Scale® about what they've already achieved and what their skills and abilities are. They scaled 8.8 for how easy they felt it is to see links between the different headings on the Rickter Scale® Board. The G3 participants/clients scaled 9 for how positive they felt immediately after their last Rickter Scale® interview. None of the G3 participants/clients felt there was anything about the Rickter Scale Process that they would like to see improved. The overall totals for G3 show a high level of satisfaction with the Rickter Scale® Process. The results evidence this as the majority of scaling is between 7-10 and heavier scaling on 10. This evidences that the transfer of innovation for G3 has worked well for their participants/clients.

Overall the project participants/clients averaged 9 for comfort of use of the Rickter Scale® Board. Clarity of use they averaged 8.3. For goal clarity they scaled an average of 8.1. Slider movement helps project participants/clients to feel where they are in their life and where you would like to be scaled an average of 7.7. They scaled an average of 8 for Process helpfulness in using the Rickter Scale® board in their interviews. The project participants/clients scaled an average of 8.6 for ease of understanding the questions. They scaled an average of 8.3 on how easy the Rickter Scale® makes it for participants/clients to talk about themselves and the things going on in their lives. Participants/clients scaled an average of 8.4 for having used the Rickter Scale®, how aware were they about what they've already achieved and what their skills and abilities are. They scaled 7.9 for how easy they felt it is to see links between the different headings on the Rickter Scale® board. The project participants/clients scaled 8.5 for how positive they felt immediately after their last Rickter Scale® interview. The feedback comments given by project participants/clients were positive about the Rickter Scale Process. When you take on board the fact that G1 mental health patients often struggle with positivity and that the G2 participants/clients suffered an earthquake, average scaling of 7.7 – 9 shows an extremely good transfer of innovation. The more practitioners use this system and the more adept they become enabling them to further transfer their skills and knowledge to others at work and on the Rickter Scale® website.

4.11. Limitations of this research

The limitations of the study are that the evaluator/researcher was only able to view first-hand the practitioners interviewing skills during training although issues were discussed first hand at meetings. G4 data was all given as overview data from the Impact Management System (IMS) and no access was given to the individual data of participants due to confidentiality requesting from G4. However even lacking G4 data there were still 268 basic/review interviews to use with full access for validation which is a strong number of interviews. The IMS was quite crude to navigate around and presented numerous problems which were noted for improvement. The IMS is not set up for public use and as such could not be trialled directly with the public. Some translations were given from G1, G2 and G3 but other than that the evaluator/researcher had to use google translate to make sense of interviews. Google translate does not always offer a true translation as words can have several meanings. Language is an issue and in particular in G2 where the practitioners were

presenting the interview to migrants where their mother tongue was neither Italian or English so it meant a double translation and there was confusion with some of the language. The ethnographic distance travelled graph does not state how many people or even a percentage are under each headed break down, e.g., in Figure 75: Distance Travelled by Age for G1 participants using the ‘Life-board’ Frame of Reference and Figure 76: Distance Travelled by Age for participants using the New G1 Frame of Reference the change with the new frame of reference is a major drop in 50-54 bracket from 1.2 to -0.8. Is this one person or is it 20. G1, G2, G3, G4 management would have known the numbers of clients under each grouping from their own systems the evaluator/research had no details of this. Knowing what their participants/clients goals were and why they did or did not achieve them perhaps using a grouping system could help to analyse the cause and effect and ensure appropriate support and or signposting is in place for new clients/participants. What is missing from this piece of research is the tipping point which helps people to open up to resolutions such as community participation, NHS or other organisations to help on their empowering journey to employment in this case. The subjective issues direct how the employment agencies and or organisations signpost, direct staff time and attract funding for training. It would be interesting to see if the participants/clients had been using a self-help system how they would have scaled their distance travelled as they would have been responsible and in control themselves.

4.12. Conclusion of Basic Interview Process Validation and Recommendations

Through the implementation of the semi-structured interviewing and recording process, VET organisations were able to adapt and improve their existing vocational methods and systems to the increased demands of the workplace and ever more complex and diverse needs of their target groups (Stacey, 2001; Stacey, 2007). In using the semi-structured interview, they are able to engage more closely with those target groups, involving them directly in identifying their personal needs, setting appropriate goals and contributing to an overall action plan to develop their soft skills (Raphael et al, 1999). The less experienced practitioners delved into past complicated experiences of participants that resulted in heightened emotions. This made it difficult for some participants to think of S.M.A.R.T. actions. It is important to only touch upon the prior scaling and move forwards straight away. However in these cases some practitioners shared anonymised experiences with optional

routes which still gave choice so the heightened emotions were still linked to a motivational route of choice. The semi-structured interviews awaken the participants/beneficiaries to choice, ownership and responsibility (Fuller, Marler & Hester, 2006). The semi-structured interview is a particularly valuable qualitative tool in supporting the EQARF aims of recognising and valorising skills and competencies acquired by the target groups in Germany, Greece, Italy and the UK. At the heart of the project is quality of the on-going interaction between learners and practitioners and supplementary meta-feedback about satisfaction levels from all stakeholders. The online software that records both quantitative and qualitative data concerning the individual beneficiaries' journeys Impact Management System (IMS) evidences 'what works' at the parallel levels of beneficiary, practitioner and VET organisations, promoting more effective soft skills, vocational educational and training, and demonstrably reflecting the priorities of the European Quality Assurance Reference Framework. Specifically, the process is applied not only to the work the VETs do directly with their chosen target groups, but also to assess the quality management of VETs themselves.

For example with the introduction of the Work Programme in the UK, with payments to providers linked directly to sustained employment, it is essential that providers are able to monitor the journey of each and every individual, to know where they are starting from and at any point along the way, how far they have travelled towards their goals (Government. DWP, 2012). This is not just about measuring the impact of their interventions and supporting individuals into employment or opportunity readiness, but nurturing those attributes in individuals that help keep them in work. The 'Transfer of Innovation' partners are tasked to demonstrate the use of the semi-structured interview process and 'Impact Management System' as a quality management tool. The learning opportunities they provide and assessment models they use are widely different as they have each developed their own approach to offering effective learning opportunities and assessment to their participants.

Overall the process provides a successful route which helps people to identify and overcome barriers that encompasses factors such as motivation, self-efficacy, creative problem-solving, critical reflection and persistence. It does this in a systematic way which is repeated as and when necessary. This repetition helps individuals and organisations to learn more about individual's ability to move forwards. It basically provides a reflective diary for

participants to identify themselves and their behaviour, emotions, confidence, beliefs, values and the service they give. The participants portray unique information under each heading which is unique and logical to them although. This shows that no matter how an individual's thought processes work it captures individuals meaning related to their unique experiences, thoughts, situation and what connects each theme for them. This process is not about trying to stick people into a box it recognises that people are unique and works with that uniqueness. The scaling recorded are true to each individual and helps individuals to recognise the barriers and understand how much the barriers impact each themed heading. The process could be used worldwide by anyone with appropriate translations. Language is an issue which again can relate to peoples unique way of understanding (Szostak, 2011).

Any future information communication system developed needs to have alternative descriptions for clarification. Emotions are created in this process and they need to be attached to a goal to motivate the participant forwards (Germer, 2009). Inexperienced practitioners did not always channel this emotion into setting goals but encouraged participants to delve deeper into past experiences (Hooge, 2014). This did not benefit participants and they felt quite embarrassed by the amount of personal information they disclosed and had concerns about confidentiality (Hooge, 2014). The process is about remembering the successful movement forwards and the feelings of joy and or pride in doing so and reusing those actions with the feelings motivating them with new goals (Goleman, 1996).

Human error can be removed with a well-developed self-help system which can keep the focus and ask the right questions within a set time so individuals stick to the dedicated route. They need to focus in the present as to what can they do now to improve their life (Tolle, 2011). A self-help system would also be consistent in how it manages the process and steers individuals in the right direction. Where an individual knows there are no changes in a theme they can skip it again saving time. This would quicken the process and avoid going off track. Signposting is of vital importance for participants whether it is self-help or shared experiences and actions for participants who cannot see a route forwards on their own (Ardichvili et al, 2003). The stories need to be told in a way that describes those emotions and feelings in detail so the participant experiences the emotions too (Fuller, Marler & Hester, 2006). A self-help

system could do that with true voice or well written word. The process is overflowing with emotions of self-recognition and motivation on the joy of the choice of routes which are channelled into setting goals and breaking them down into small actions (Rollnick et al, 2008). If they are not given the appropriate signposting and or optional directional choices that motivation is lost and could cause more setbacks for this individual in the future as they can associate these feelings with the thought of never getting anywhere (Ardichvili, 2003). Their action could be to research the optional signposted routes to gain more knowledge, make the best motivational decision and agree the small stepped actions so the individual takes ownership of their action plan (McDougle, 2011). The process when performed in this way shows dependability, consistency and trustworthiness as an iterative process for individuals, which takes account of each part of an individual's life experiences, choices and success.

The mixed interactions of scaling, reflection, understanding and motivation move the participant forwards through the process, recording what is shared for future reflection. The baseline and results are unique to each individual following unique social interactions that an individual experiences. This complexity is again shared with design as the individual designs their route forwards which immerses into the oneness paradigm. An individual can be working through their issues successfully when catastrophe hits, e.g. the death of someone close, which may again cause issues in their wellbeing. Each individual's experiences are authentic in the process to them. When change occurs they can corroborate with the process to identify their tried and tested routes forward from the past (Lee, 2011). An online system would allow for this process to occur much quicker and be managed as and when the participant feels the need. For some this need is immediate or they drop back into a world of stress and focus on the death, problems and loss (Dimitrov, 2003; Scharmer, 2013). The longer they are in this situation the harder it is to see a way forwards as they spiral into negativity (Hooge, 2014). The organisations involved in the research gained a lot of knowledge about their own working practices and how best to support people. Signposting needs to be researched and updated regularly so it is relevant. Everything is interconnected so those offering support should be aware of websites and other organisations better suited to help people with individual wellbeing needs out of their remit (Wolfgang, 2007). People are unique so having mixed category data is essential to be able to develop that signposting or shared experience, e.g. a male who has a disability and is a foreign national may need different signposting to a female

who is disabled and is native to that country (Bowers, 2011). People cannot be set into tight brackets and every option of demographic behavioural need should be signposted adequately. Other needs also should to be taken on board such as stress and or mental health, weight issues, exercise need of the mind and body, etc.

Through the process options and choice need to play a constant role as this is what motivates individuals (Goleman, 1996). They take their unique stasis and decide how to develop it which sparks the responses in their brain which release chemicals that motivate them and make them feel good about themselves (Feuerstein, 2010; Rimer, 2011; Siegel, 2012; Sood, 2015). The semi-structured interview creates major thought processes, reflection, and understanding, motivation, tipping points, action planning, monitoring and awareness. Just as Siegel (2007) produces consciousness with his “Wheel of Awareness” this process develops awareness. Over time just as individuals can build up Mindfulness and Mindsight using the “Wheel of Awareness” (Figure 7: Adapted from the Wheel of Awareness (Siegel, 2007, pp.74-75) so can individuals using this wellbeing process. An information communication system would need to ask more detailed questions under each theme as individuals master their behaviour and thought processes in a similar way that people work through the “Wheel of Awareness”.

The trustworthy big data created is used in this instance by practitioners and managers to gain knowledge and understanding of their participants/clients in order to find improved signposting and attract funding to target issues highlighted in the system. The big data in this case was about improving soft skills for employment although clearly from the big data collected there were many wellbeing issues raised which impeded individuals movement forwards, e.g., the migrants in Italy acting as carers needed better working hours, needed to learn Italian, needed time off to gain qualifications, they were missing their families, etcetera. Everything is interconnected in this world we live in. Understanding your own issues and those around you allows you to help yourself and others. Peoples needs change and big data needs managing and monitoring to ensure new developments are evaluated for new issues and signposting is updated and funding is directed where needed. However that does not mean taking funding away from projects that are working well as the next assessment period may show a drop in distanced travelled in the area funding has been removed. Funding

reductions should be tapered slowly so the reductions in those support services are incremental and monitored so if needed can be reinstated. The IMS is limited in its present capacity if it could search more deeply for trends in more advanced ethnographies including identification of issues seen as barriers and how they are overcome. This information would create a wealth of knowledge to be shared with people and organisations to enhance wellbeing of both individuals and organisations. Using additional tipping point questions would gain more specific knowledge and direction for individuals. Big data developed could provide a wealth of knowledge and understanding to help channel much needed support.

Reflecting back to Figure 17: Validation of Basic Rickter Process for Empowering People into Work (Adapted from Sousa, 2014, p.218) the paradigm of oneness is all around as all the themes connect in local social interactions to an infinite number of other local social interactions which connect again and so on. These psychological connections are subjective and unique to individuals and can change over time dependent upon experiences and knowledge. Understanding oneself helps and using this process empowers people towards their set goals in the process. The method of appreciative inquiry works well in psychological research and has proven to be trustworthy in developing the themes for each user group. The concept of the Rickter process has also proven trustworthy as it manages oneness and those local social interactions in reflection, empowering, adaptability and subjectivity. The results showed validation as participants travelled forwards towards their goals. The goals allowed for interpretation of the past, present and future by individuals giving mindsight and encouraging mindfulness as individuals understand consequences of their behaviour. The practitioners became more aware and mindful of individuals needs and transferred this to their managers in the form of needs to enhance employability. Mindsight and mindfulness of the past, present or future generates a rationality of meaning. This rationality creates infinite impact to all concerned and further afield as participants become empowered to employability and gain from elsewhere in their lives this is exceptional clear for the migrants who wanted improved work life balance. The process has proven reliability and consistency in all four countries for those wanting to gain employment aged 16 years and over. Some were retired and needed to regain employment. The contribution to knowledge is the unique frames of reference for the process for each organisation. The process was transferred from the UK for authentication in Greece, Italy and Germany.

Chapter 5: Research Results and Discernments

5.1. Introduction

This chapter gives the results of the research starting with the literature review developing the themes, spiritual daily reflections and open interviews verifying the themes. Then moving on to the pilot semi-structured interviews utilising the themes and pilot questionnaires to verify use and look at development. The final semi-structured interviews to corroborate the themes and process and the final questionnaires to evidence further the trustworthiness of the themes and process and to look at development of an information communication system.

5.2. Literature Review

The literature review revealed twenty wellbeing themes throughout the ages of time:

- Usefulness
- Relaxation
- Relationships
- Energy
- Changes
- Confidence
- Decision-making
- Support
- Giving
- Learning & Development
- Emotions (feelings)
- Trust
- Lifestyle
- Challenges
- Commitment
- Point of View
- Respect
- Involvement
- Valued
- Happiness

The effect of each theme on individuals is more clearly understood in more recent years with new ways of viewing and recording activity in the brain. How individuals respond to social interactions under each of these themes can have a positive effect or a negative or even catastrophic effect. Understanding how mindfulness and mindsight can support individual wellbeing under each of these themes is a key feature to wellbeing. Stress and negativity are major causes of ill health and can cause a spiral of negativity as individuals struggle to live in the now and move forwards. Religion, Spirituality and Community Spirit are highlighted as

ways of supporting wellbeing. Guidance from each appears to be mainly regarding direction of how to control oneself and interact effectively with the master and or God etc. and within the community for you and the community to move forwards. A lot of literature and research is about giving to others as a route to happiness which supports community participation. Cooperation, giving and the accepting of support as and when needed, appreciating and looking for the positives in life. Those who purely think about themselves and their own gain can never find true happiness. The use of reflection and measuring distance travelled supports the semi-structured interview process. Exercise including relaxation exercises such as yoga and deep breathing help in reducing stress. Other ways of reducing stress are meditation, bodily awareness, positive pictures, music, the environment and colour. These are subjective to individuals and as such people need to learn what works well for them in different situations.

5.3. Spiritual Daily Reflections within the 20 Wellbeing Themed Areas

To give additional input into support to the wellbeing themes 62 days of spiritual daily reflections were gathered evidenced in Appendix: Daily Reflections Wellbeing Themed Table and analysed against the 20 wellbeing themes identified in the literature review. The reflections were under the following daily headings: Mastery, Gratitude, Real Joy, Giving, Marriage, Strength, Change, Yoga Steps, Conscience, Ask Not, Idleness, Living With Him, Rise and Fall, His Life, Going Home, Stillness, Religions, Aspire, Gratitude, Craving, Pose, Life in life, Change, Surrender, Restlessness, Etiquette, Purity, Thought Connection, Illusion, Liberation, Pure Existence, Higher Refinements, Approach, Attachment and Detachment, Bondage and Liberation, Clean Ego, Practice, Blame, Obedience, Living Master, Divine Lovers, Great Bargain, Bhakti, Raja Yoga, Pain, Responsibility, Spiritual Practice, Rarities, Realisation, Liberation, Simplify, Nature, Balanced Existence, Duality, Retreat Centre, Mind, Negate Desires, Beauty, Teacher and finally One Personality. The content of the daily reflections show that the focuses within the themes are around identity, self-evaluation, behaviour, emotion, values, beliefs, service and confidence. Some daily reflection titles were raised twice but those reflections were either worded differently or focused on additional wellbeing material. The graphical result is evidenced in Figure 78: Spiritual Daily Reflections & the Wellbeing Themes. The data shown is the percentages of the number of times each wellbeing theme was raised

within the 62 day collection period. The table shows all wellbeing areas are clearly supported in the daily reflections which are used to give guidance for spiritual wellbeing.

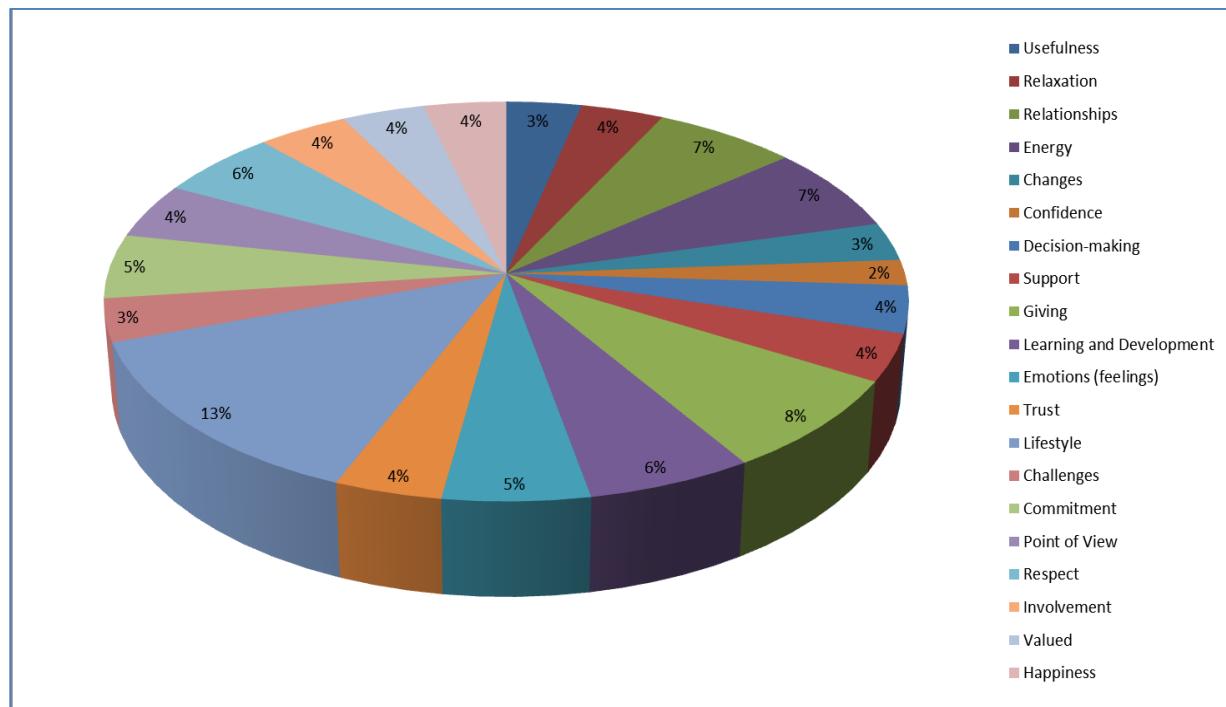


Figure 78: Spiritual Daily Reflections & the Wellbeing Themes

All wellbeing areas fall between 2-13% of usage in the daily reflections. The percentage of wellbeing category usage follows as the lowest being confidence with 2% and highest is lifestyle with 13%. An example of an individual spiritual daily reflection titled under responsibility is “It is not enough that each one of us to develop spiritually by himself, for himself, with the Master's help, but we have a responsibility to humanity. I won't call it a social responsibility to your people, whoever they may be. It is a responsibility to life itself, that as we go on we spread cleanliness, we spread happiness, and we spread spirituality.” Matching this against the wellbeing themes it talks about self-development (1) should not be sole your way of life or lifestyle (2) you need to accept responsibility (commitment) (3) to humanity (involvement) (4) with people (relationships) (5). The master is challenging (6) you to use your energy (7) to give (8) support (9) to others. Without fulfilling this direction you are not respecting (10) life itself or the master and will never find happiness (11). Eleven wellbeing themes were raised in just this one daily reflection about responsibility. The number of themes discussed in each reflection greatly varied from 2-20. The spiritual daily reflections definitely fit within the wellbeing themes. The wellbeing themes help to break down the daily

reflections into plain easily understood language. The daily reflections are reminding individuals to manage their wellbeing on a daily basis, giving direction as to what needs to be taken on board.

5.4. Third Sector Open Interview Results

Preliminary research was carried out in the form of open interviews with organisational managers to gain a perspective of the thinking from an organisational and community participants points of view to gain wellbeing perspectives. The researcher played the role of interviewer. They were asked to talk about their experiences with community participation and about the organisational needs. Six people agreed to the open interviews which were held in the North East of England and the Highlands of Scotland although some the participants from those organisations are Internationals, evidenced in Appendix: Demography of Open Interview Participants to Support Formulation of Wellbeing Themes. Fifty percent were known to the researcher and fifty percent were unknown to the researcher. Fifty percent are community participants and fifty percent are managers. Fifty percent are from functional organisations and fifty percent from a dysfunctional organisational perspective. Dysfunctional in this instance meaning there was unrest and dissatisfaction between the management and live in workers (community participants) causing a less productive atmosphere. Fifty percent of the open interviews were completed in face to face with only the interviewee/researcher and researcher. Fifty percent were carried out face to face with the interviewer/researcher as a group. This was the dysfunctional organisation who wanted to talk as a group to learn and build from the discussion. This interview took a lot longer but there were three participants. This benefitted the organisation and they set some new rules to improve the day to day community business and to improve relationships. The open interviews gave a lot of qualitative information regarding wellbeing.

5.4.1. Third Sector Open Interview Demographic Data

The Third Sector open interview demography shows the overall breakdown of participant data which is evidenced in table format in Appendix: Demography of Open Interview Participants to Support Formulation of Wellbeing Themes. Percentages of Male and Female divide for the Community Participation Open Interviews shows 33% female and 67% male participants. The percentage of male participants is high but the percentage of male leaders

in the larger Third Sector Organisations definitely outweighs female leaders as evidenced in Figure 79: Percentage of Men and Woman in Chair Positions in Third Sector (Jarboe, 2012 p.17).

...but men lead the vast majority of large charities

- The majority of board seats held by men: 68 % on the top charities by income, 73 % on the top charities by assets and 71 % on charities that appear on both lists.
- Men chair 83 % of the top charities by income, 85 % of the top charities by funds and 92 % of the charities that appear on both lists.
- Men hold the most senior executive position in 75 % of charities by income, 77 % of charities by funds and 76 % of charities that appear on both lists.

Figure 1 Percentage of board seats held by men and women

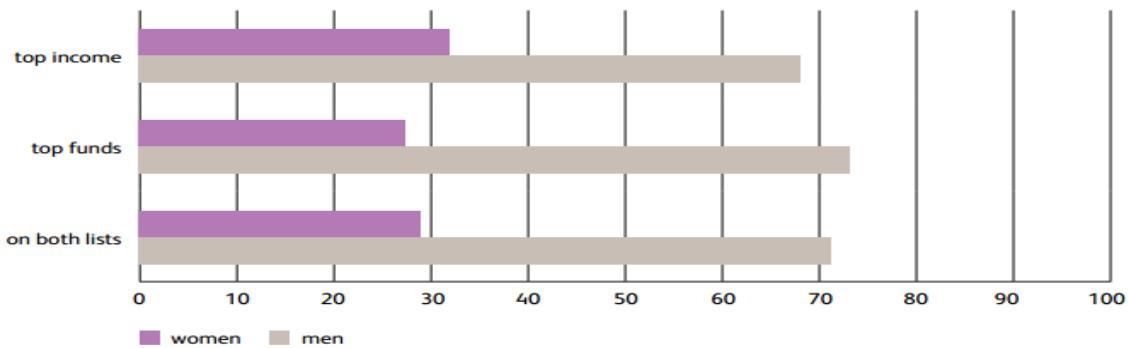


Figure 79: Percentage of Men and Woman in Chair Positions in Third Sector (Jarboe, 2012 p.17)

Generally women outweigh men as workers in the Third sector with 68% and the majority community participants but the organisations who volunteered to support the open interview research had more male participants (Jarboe, 2012 p.3). The country of origin for community participation open interviews evidences that 50% of participants were from England and 50% was equally split between Ireland, Holland and Australia. Age banding for the open interviews evidences that 50% of participants is 19-36 years old, 50% are 37-54 years old.

5.4.2. Third Sector Open Interview Wellbeing Themed Usage

All the data in this section is gained from Appendix: Open Interviews Themed Wellbeing Usage which is split into graphs. Appendix: Open Interview One Example of Anonymised Transcription is an example of an anonymised interview transcription used for the research. The text was examined in the same way as the spiritual reflections aligning discussion points with the wellbeing themes. Key pointers talked about were about there being mutual respect, how community participants are valued there was a discussion about how community participants are now invited to the staff Christmas party to show that value and respect. Community managers expect community participants to be able to see their

point of view and are happy to discuss this but their final decision has to be respected. Managers especially with young participants feel they are there to support learning and development, to offer challenges, give them support, help them build confidence, feel useful and involved. In return they expect trust, for them to give support, commitment, respect and learn. One manager was keen to support young people with emotional and lifestyle issues to help them get onto the right track, trusting them with decision-making and supporting change even though they have experienced the opposite and had to release community participants. They would still do it again as he is a people person and believes in giving in particular young people a chance.

Community participants in one organisation felt unvalued, disrespected and unfairly used. This organisation suffered from a lack of volunteers as the manager who started as a volunteer took unfair advantage of community participants for their own gain. The open discussion here focused on open discussion between community participants and the manager to look at resolution. Community organisations often have quality standards to be adhered to and as such community participants have to complete a minimum amount of training. There is a mix of why community participants decide to community participate. The participants in this research participated for different reasons at different times, e.g., do to relationship issues which could entail a death, a relationship break up or difficulties or the need for services for relations; the need for work experience/training; boredom at home; opportunity to travel; improve health and fitness level. There are many other reasons why people participate in the community but these are some of the key reasons which were raised in the research field.

Figure 80: Open Interviews with Managers Analysed against Wellbeing Headings and Figure 81: Open Interviews with Community Participants Analysed against Wellbeing show the results separately with individual participants. These results are varied from each participant. The overall totals from the managers and community participants are shown in Figure 82: Open Interview Averages from Managers and Community Participants (CP) Analysed against Wellbeing which depict the results of this preliminary research.

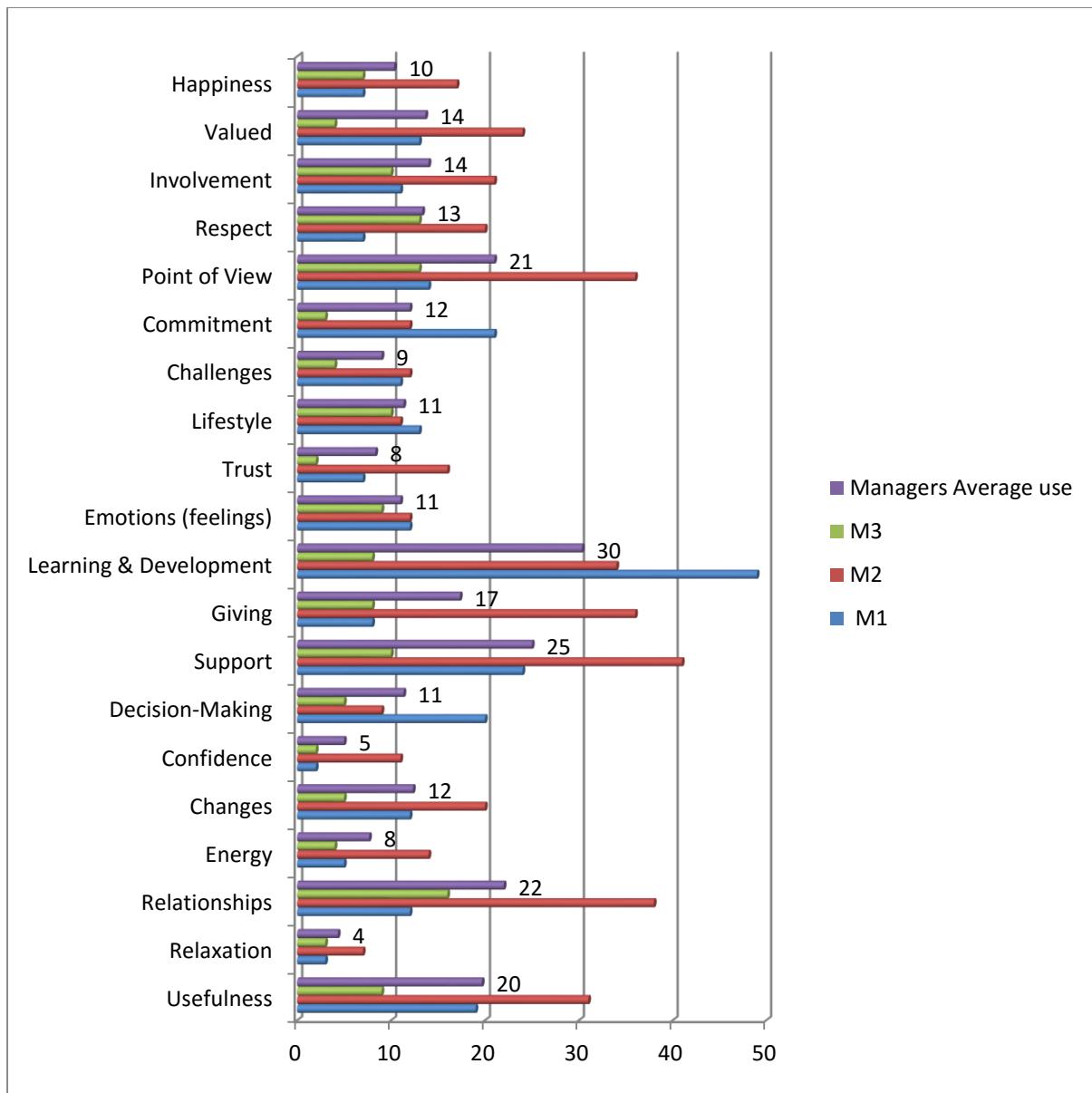


Figure 80: Open Interviews with Managers Analysed against Wellbeing Headings

Figure 80: Open Interviews with Managers Analysed against Wellbeing Headings shows the most popular topic talked about theme by managers is learning and development with an average of 30 uses followed by support with 25, relationships with 22, point of view with 21, usefulness with 20, giving with 17, involvement and valued at 14, respect at 13, changes and commitment at 12, lifestyle, emotions (feelings) and decision-making at 11, happiness at 10, challenges at 9, trust and energy at 8, confidence at 5 and the least talked about is relaxation at 4.

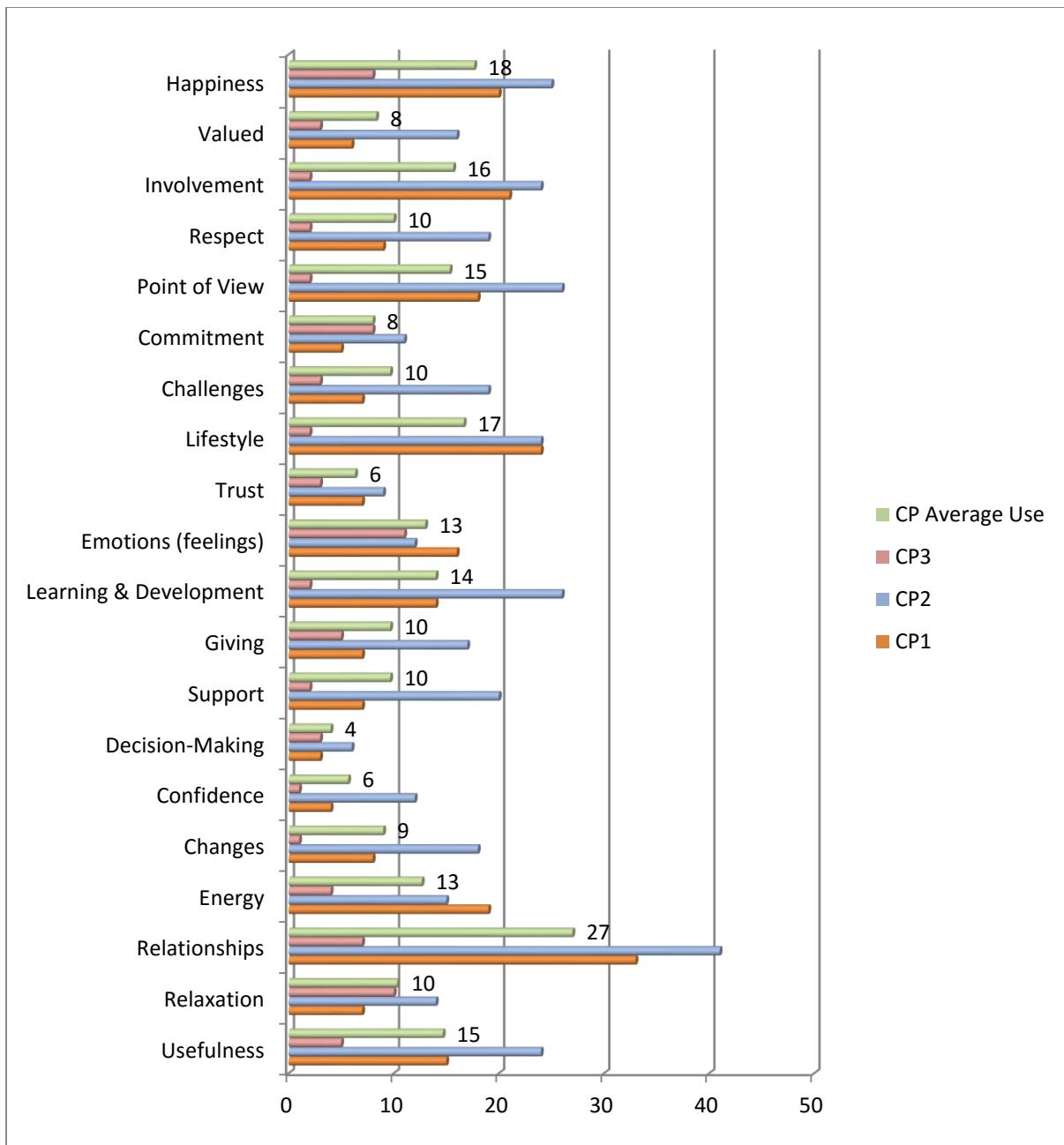


Figure 81: Open Interviews with Community Participants Analysed against Wellbeing Themes

In comparison to Figure 81: Open Interviews with Community Participants Analysed against Wellbeing, the themes are relevant in a different order. The primary theme of interest for community participants is relationships with 27 uses followed by happiness with 18, lifestyle with 17, involvement at 16, point of view and usefulness at 15, learning and development at 14, emotions (feelings) and energy at 13, relaxation, respect, challenges, giving and support at 10 followed by changes at 9, valued and commitment at 8, trust and confidence at 6 and lastly decision-making at 4.

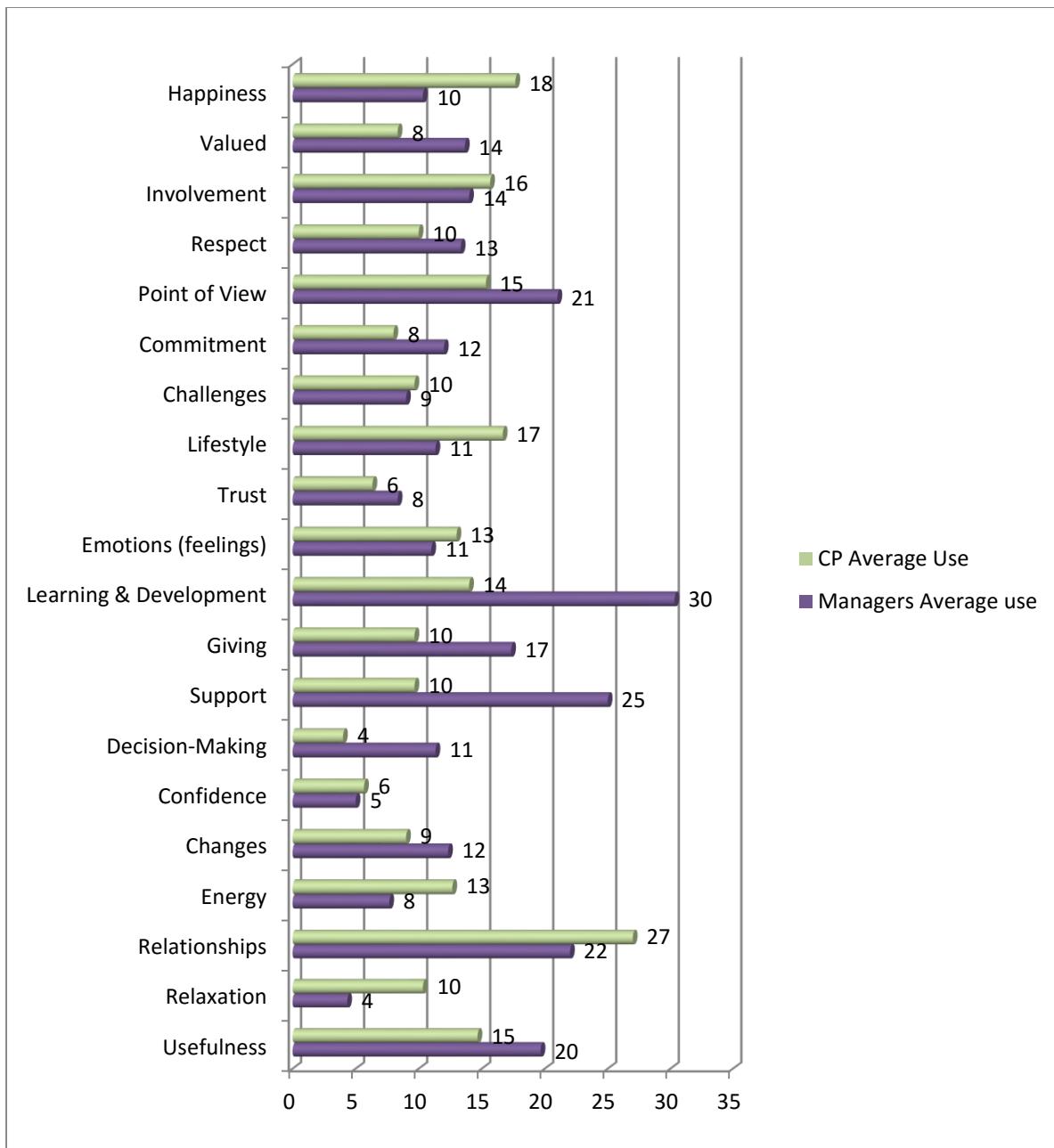


Figure 82: Open Interview Averages from Managers and Community Participants (CP) Analysed against Wellbeing Themes

When comparing the managers and community participants there are some major differences and some similarities in the usage of the wellbeing themed areas. Figure 82: Open Interview Averages from Managers and Community Participants (CP) Analysed against Wellbeing . The differences spread from 1 with confidence and challenges up to 16 in Learning in development. To make this easier to view each transcription is analysed against the wellbeing theme usage and the differences are portrayed in percentages which are evidenced in Figure 83: Differences in Themed Usage between Community Participants and Managers.

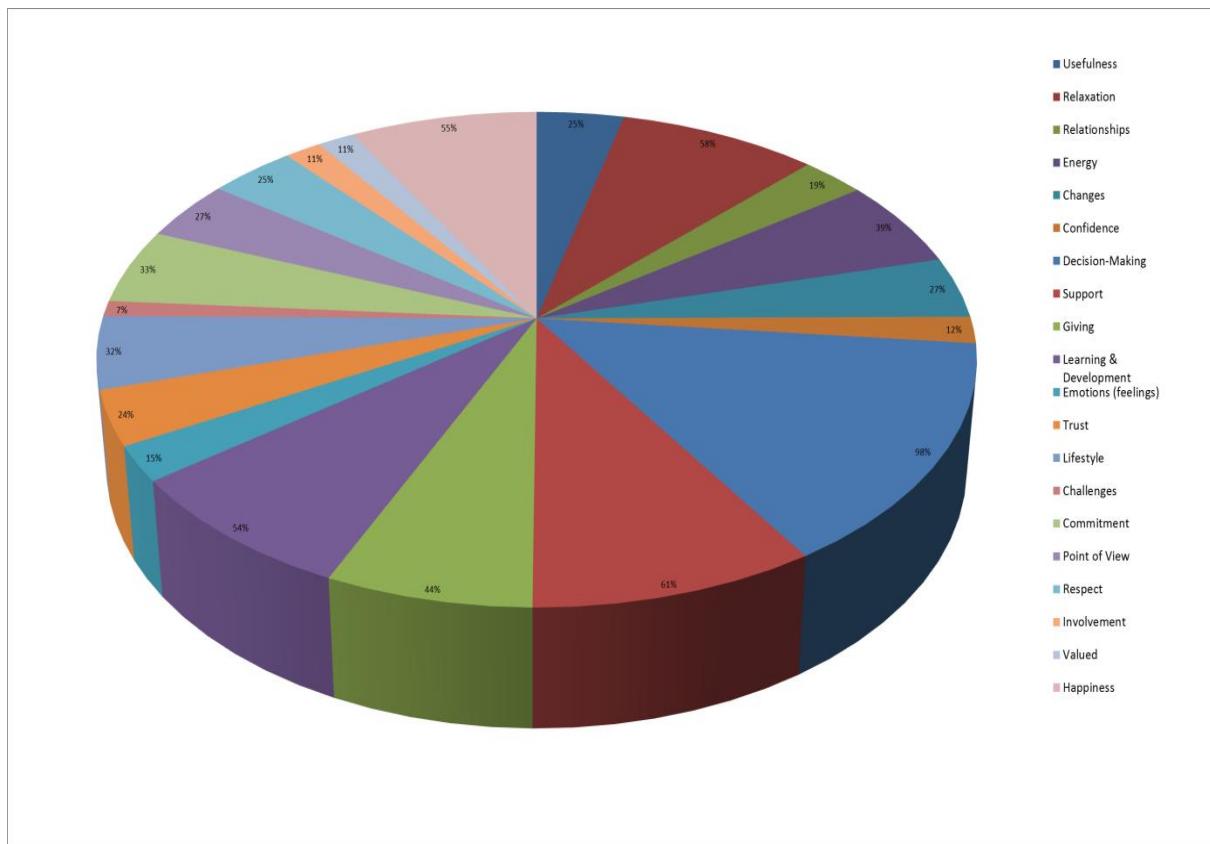


Figure 83: Differences in Themed Usage between Community Participants and Managers

The smallest difference is challenges with 7% followed by valued and involvement with 11% and trust at 12%. The biggest difference is support 61%, followed by relaxation at 58%, decision-making and happiness at 55% and learning and development at 54%.

To understand this more fully the wellbeing themes are put in order of usage for community participants and managers in Table 10: Wellbeing Themed Order of Usage by Community Participants and Managers. Themes that are the same in order of usage are usefulness and confidence. Those with one difference are trust, respect and point of view. Relationships have 2 differences in order of usage. The largest difference is happiness with 13 then relaxation with 10 followed by lifestyle, energy and valued with 9. There is a difference of 8 between support and decision-making. The primary usage order for community participants started with relationships followed by happiness and lifestyle. The primary usage order by managers is learning and development followed by support and relationships. The last of the community participant usage order is trust at 18 followed by confidence and lastly decision-making.

Table 10: Wellbeing Themed Order of Usage by Community Participants and Managers

Wellbeing Theme	CP	Manager	Wellbeing Theme	Manager	CP
Relationships	1	3	Learning & Development	1	7
Happiness	2	15	Support	2	10
Lifestyle	3	12	Relationships	3	1
Involvement	4	7	Point of View	4	5
Point of View	5	4	Usefulness	5	5
Usefulness	5	5	Giving	6	10
Learning & Development	7	1	Involvement	7	4
Emotions (feelings)	8	12	Valued	7	16
Energy	8	17	Respect	9	10
Support	10	2	Changes	10	15
Giving	10	6	Commitment	10	17
Respect	10	9	Lifestyle	12	3
Challenges	10	16	Emotions (feelings)	12	8
Relaxation	10	20	Decision-Making	12	20
Changes	15	10	Happiness	15	2
Valued	16	7	Challenges	16	10
Commitment	17	10	Energy	17	8
Trust	18	17	Trust	17	18
Confidence	19	19	Confidence	19	19
Decision-Making	20	12	Relaxation	20	10

The last of the manager usage order is trust at joint 17 followed by confidence and relaxation last. There are a number of close similarities and a number of large differences but all the themes are used by both community participants and managers. The key differences are happiness and relaxation with energy and valued close behind followed jointly by lifestyle, support and decision-making.

5.5. Pilot Wellbeing Semi-Structured Interview Results

These results are split into demographic data, semi-structured interview overview, individual semi-structured interviews and the questionnaire.

5.5.1. Pilot Wellbeing Semi-Structured Interview Demographic Data

The breakdown of participant data can be found in Appendix: Demographic Data of Participants from Pilot and Main Wellbeing Interviews. Gender divide in the Pilot shows an equal split in the study of 50% male and 50% female. Country of Origin divide in Pilot Wellbeing Community Participation Semi-structured Interviews shows 83% of participants in the pilot are from England and other from the Philippines. Age divide for pilot participants evidences that 33% are under 18 years old, 33% are 19-36 years old with the remaining evenly split between 37-54 years old and 73-90 years old.

Occupation divide for pilot participants shows that 33% are students, the rest are evenly split between retired, unemployed, employed full time and employed part time. Post Code Area divide for Pilot Participants for Wellbeing Community Participation Semi-structured Interviews shows that 33% of pilot participants are from NE3 and 67% are from NE5. Both postcodes are in Newcastle upon Tyne. There are no disabled participants in the pilot study.

5.5.2. Pilot Wellbeing Semi-Structured Interview Overview Results

The pilot semi-structured interviews were trialled with 6 participants. The details are in Appendix: Demographic Data of Participants from Pilot and Main Wellbeing Interviews. Table 11: Pilot semi-structured interviews detailed distance travelled shows the semi-structured interview process in detail. The interviews take between 40 minutes and 3 hours and averaged at about 1 hour 20 minutes to go through all twenty themes. Second interviews averaged about 40 minutes. Table 11: Pilot semi-structured interviews detailed distance travelled shows the detailed scaling of each participant at the baseline scaling, present interview, desired scaling and an overall average scaling of each participants baseline, present and desire scaling. As participant scaling's uniquely subjective to them there is no overall pattern. Each scaling is unique to the participant thoughts and experiences. However you can clearly see movement forwards with all participants. The participant results are coloured for ease.

Table 11: Pilot semi-structured interviews detailed distance travelled

Wellbeing Distanced Travelled																		
Participant Coding	Baseline scaling						Present scaling						Desired scaling					
	P1	P2	P3	P4	P5	P6	P1	P2	P3	P4	P5	P6	P1	P2	P3	P4	P5	P6
Usefulness	8	3	8	7	2	0	8	6	8	7	7	9	10	9	8	9	8	9
Relaxation	2	1	5	2	6	0	4	4	5	8	6	7	8	8	10	10	6	9
Relationships	9	4	8	0	6	5	9	7	8	9	6	5	10	9	8	9	7	5
Energy	2	7	6	9	7	2	7	7	6	9	7	8	7	9	8	9	10	9
Changes	9	3	7	7	1	3	9	5	7	7	8	9	9	7	8	9	8	9
Confidence	3	4	8	4	7	2	8	7	8	5	7	8	8	8	8	8	7	9
Decision-making	5	7	7	7	3	8	9	7	7	7	5	8	9	7	9	9	8	8
Support	4	5	7	3	4	3	4	8	10	3	4	10	8	8	10	7	6	10
Giving	9	8	8	7	7	2	9	8	10	7	7	8	9	9	10	10	7	9
Learning and Development	10	7	7	8	9	6	10	9	9	8	9	8	10	10	9	9	9	10
Emotions (feelings)	2	7	7	3	4	5	5	7	7	8	6	5	8	9	8	9	7	5
Trust	5	8	6	10	6	7	5	8	6	10	6	7	8	10	7	10	8	7
Lifestyle	5	5	8	9	3	4	7	5	8	9	6	6	9	7	9	10	6	8
Challenges	2	7	7	8	7	6	8	7	7	8	7	9	8	8	8	9	8	9
Commitment	9	6	9	9	9	4	9	6	9	9	9	7	9	8	9	9	9	8
Point of View	3	7	7	8	3	5	8	7	7	8	5	9	8	8	7	9	5	10
Respect	4	8	7	8	7	5	8	8	7	8	8	7	8	8	7	8	8	7
Involve-ment	0	9	7	8	5	4	7	9	7	8	5	7	8	9	7	9	6	7
Valued	6	7	4	10	5	4	6	9	4	10	5	7	9	9	8	10	7	8
Happiness	1	6	7	0	6	1	5	8	7	9	6	7	8	9	10	9	8	9
Average Scaling from all Headings	4.9	5.95	7	6.35	5.35	3.8	7.25	7.1	7.35	7.85	6.45	7.55	8.55	8.45	8.4	9.05	7.4	8.25

Participants rate subjectively, dependent upon their own experiences, which helps make it more realistic to their own wellbeing. Participants prioritise their wellbeing improvement actions dependent upon which wellbeing theme they see as a priority at any one time. Their first interview sets their baseline and any movement forwards from then is classed as distance travelled towards their desired state which can be seen in Figure 84: All Pilot Semi-Structured Interviews Distance Travelled. When the graph is enlarged you can see more clearly if there are any group issues at a glance. P2 has the scaling figures labelled to show an example of one participant's journey. In usefulness P2 rated 3 as their baseline interview, 9 as their desired and then 6 at their present interview. P2's average for all themes is 5.95 for the baseline, 8.4 as their desired and 7.1 is their present scaling. The themes can be extracted and graphs made from the themes. This graph is followed by a themed analysis table.

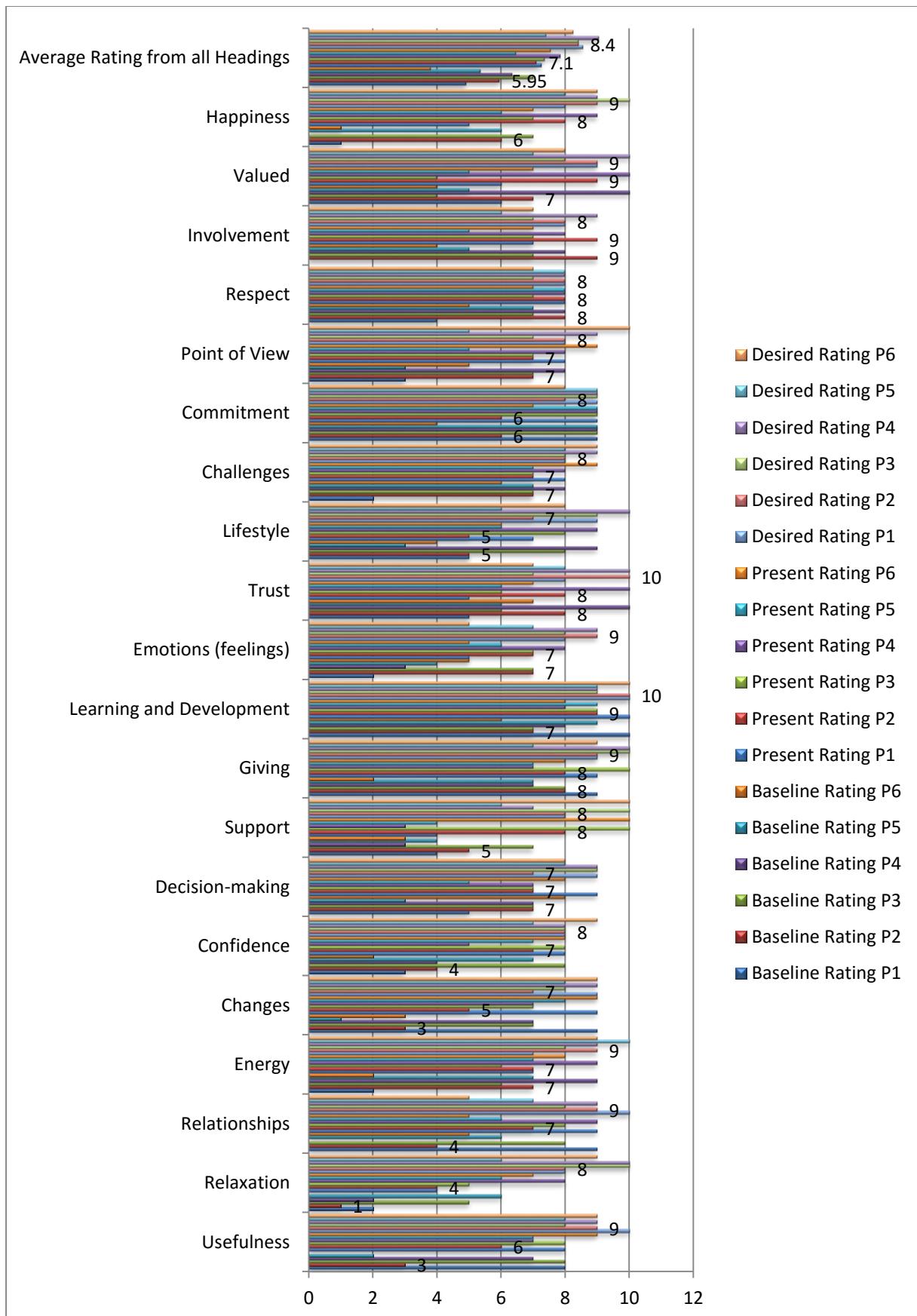


Figure 84: All Pilot Semi-Structured Interviews Distance Travelled

Table 12: Wellbeing Themed Analysis of Pilot Wellbeing Semi-Structured Interviews

Participant Coding	Wellbeing Themed Baseline Average	Wellbeing Themed Present Average	Wellbeing Themed Desired Average	Wellbeing Themed Average Distance Travelled	Wellbeing Themed Percentage of Average Distance Travelled
Usefulness	4.7	7.5	8.8	2.8	68%
Relaxation	2.7	5.7	8.5	3.0	51%
Relationships	5.3	7.3	8.0	2.0	75%
Energy	5.5	7.3	8.7	1.8	58%
Changes	5.0	7.5	8.3	2.5	75%
Confidence	4.7	7.2	8.0	2.5	75%
Decision-making	6.2	7.2	8.3	1.0	46%
Support	4.3	6.5	8.2	2.2	57%
Giving	6.8	8.2	9.0	1.3	62%
Learning and Development	7.8	8.8	9.5	1.0	60%
Emotions (feelings)	4.7	6.3	7.7	1.7	56%
Trust	7.0	7.0	8.3	0.0	0%
Lifestyle	5.7	6.8	8.2	1.2	47%
Challenges	6.2	7.7	8.3	1.5	69%
Commitment	7.7	8.2	8.7	0.5	50%
Point of View	5.5	7.3	7.8	1.8	79%
Respect	6.5	7.7	7.7	1.2	100%
Involvement	5.5	7.2	7.7	1.7	77%
Valued	6.0	6.8	8.5	0.8	33%
Happiness	3.5	7.0	8.8	3.5	66%

Table 12: Wellbeing Themed Analysis of Pilot Wellbeing Semi-Structured Interviews shows an overview of all pilot participants wellbeing results with a themed view. The average baseline for usefulness is 4.7. The latest average review is 7.5 which evidences an average distance travelled of 2.8. The average desired scaling is 8.8 which gives the average distance travelled is 68%. The lowest distance travelled is trust which has not moved forwards at all and the highest movement forwards is respect at 100%. The bulk of wellbeing themed average distanced travelled percentages are between 33%-79%. The 33% being feeling valued and the 79% being able to see others point of view.

Figure 85: Average Scaling for Wellbeing Heading between the Pilot Participants shows the average for the wellbeing heading for the baseline, present and desired scaling's. Looking at respect all participants feel they have fully achieved respecting others. A lot of participants

rated this as already achieved in their baseline interviews which can be seen in the individual participant graphs in Pilot Wellbeing Semi-Structured Individual Results.

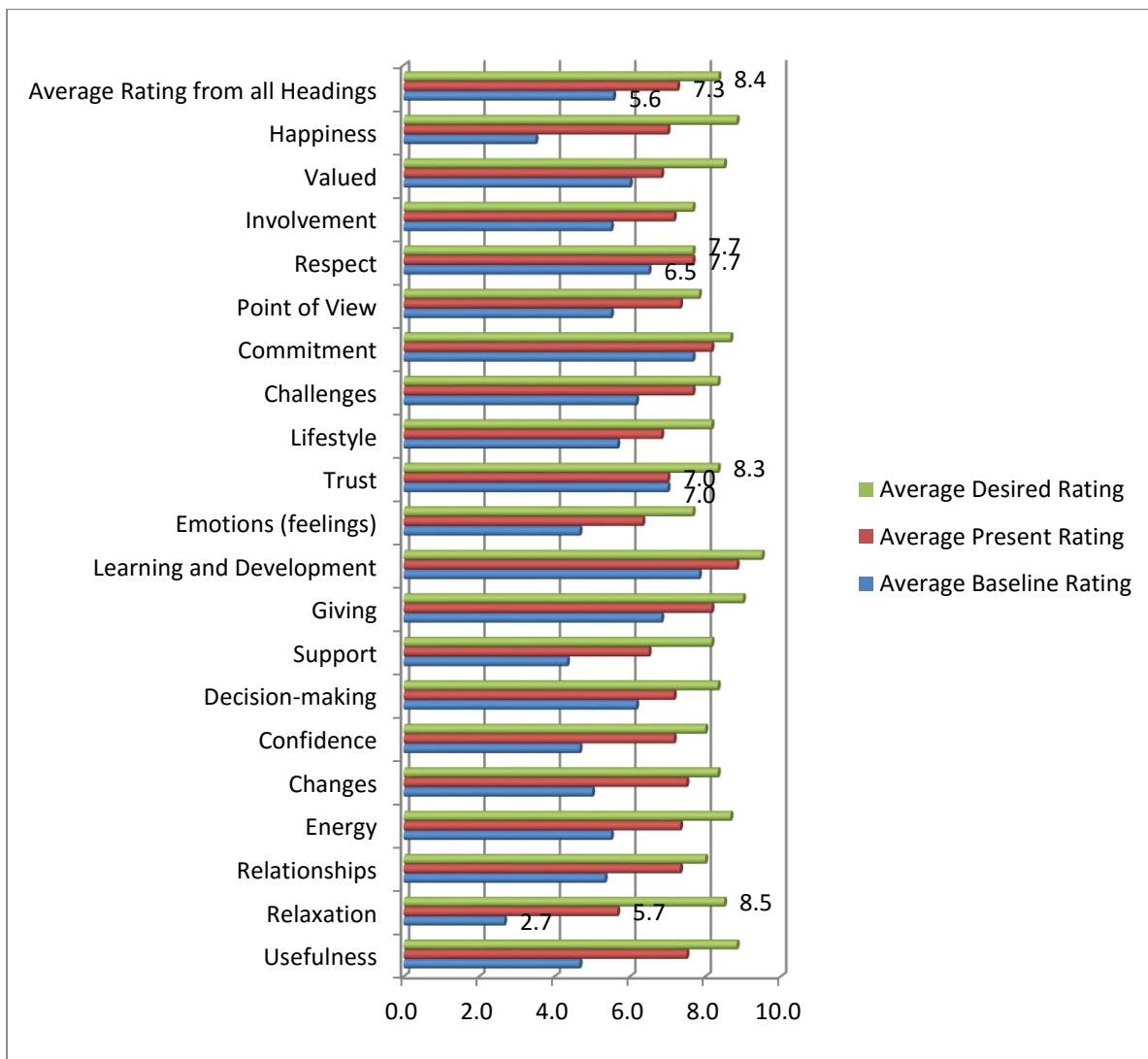


Figure 85: Average Scaling for Wellbeing Heading between the Pilot Participants

The heading with the biggest difference between the present scaling and desired scaling is relaxation. These differences are clearer in Figure 86: Pilot Participant Differences in Achieved and Desired in Wellbeing Interview. This graph uses the baseline scaling as zero and the desired as the top score. This graph is much easier to compare achievements under each theme and identify priorities.

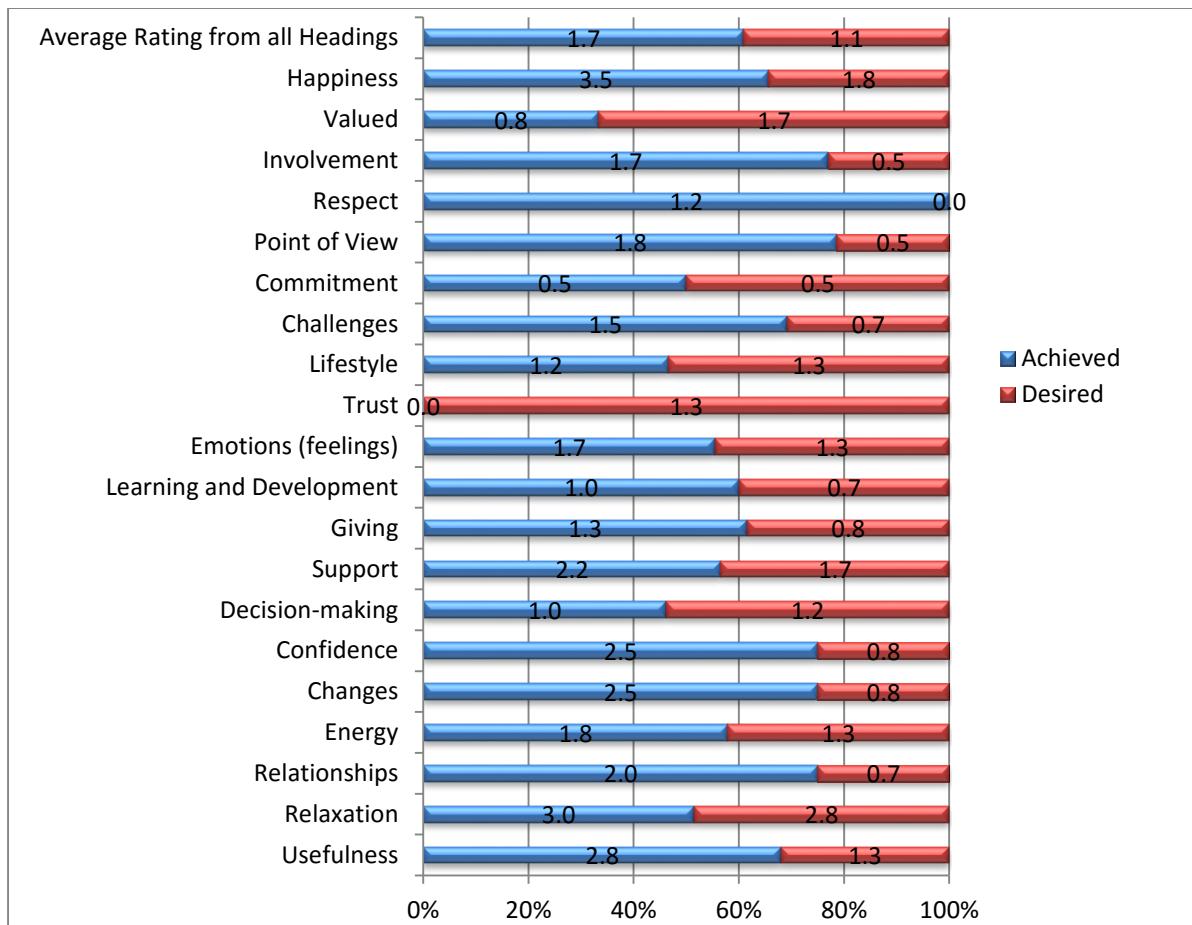


Figure 86: Pilot Participant Differences in Achieved and Desired in Wellbeing Interview

Pilot Participant Percentage of Distance Achieved across All Headings and Remaining Desired shows the average scaling for all headings the participants have already moved forwards to their desired status from their baseline status of 5.6 to their desired status of 8.4. The latest review is 7.3 so that is a 61% move forwards and 39% left to go. Average Pilot Participant Lifestyle Percentage Achieved and Remaining Desired Status shows that 47% movement has been achieved and 53% is still needed. These percentages can be broken down for each individual participant as evidenced in Table 13: Percentage of distance Travelled for Each Pilot Participant. The table shows the breakdown for each participant in percentage terms of how far they have travelled to their desired scaling under each theme and an average overall scaling from all their headings. This shows that overall each participant travelled towards their desired scaling between 44%-87%. This data is taken in thematic form to view more clearly how the results are broken down. This ability to reflect, watch and record distance travelled and the techniques used to achieve this supports participants to understand and master their wellbeing.

Table 13: Percentage of distance Travelled for Each Pilot Participant

Percentage of distance travelled						
	Percentage of distance travelled to present state from prior lower scaling/baseline					
Participant Coding	P1	P2	P3	P4	P5	P6
Usefulness	0%	50%	100%	0%	83%	100%
Relaxation	33%	43%	0%	75%	100%	78%
Relationships	0%	60%	100%	100%	0%	100%
Energy	100%	0%	0%	100%	0%	86%
Changes	100%	50%	0%	0%	100%	100%
Confidence	100%	75%	100%	25%	100%	86%
Decision-making	100%	100%	0%	0%	40%	100%
Support	0%	100%	100%	0%	0%	100%
Giving	100%	0%	100%	0%	100%	86%
Learning and Development	100%	67%	100%	0%	100%	50%
Emotions (feelings)	50%	0%	0%	83%	67%	100%
Trust	0%	0%	0%	100%	0%	100%
Lifestyle	50%	0%	0%	0%	100%	50%
Challenges	100%	0%	0%	0%	0%	100%
Commitment	100%	100%	0%	100%	100%	75%
Point of View	100%	0%	100%	0%	100%	80%
Respect	100%	100%	100%	100%	100%	100%
Involvement	88%	0%	100%	0%	0%	100%
Valued	0%	100%	0%	100%	0%	75%
Happiness	57%	67%	0%	100%	0%	75%
Average Scaling from all Headings for each Participant	64%	46%	45%	44%	55%	87%

Participants have travelled between 0-100% for usefulness. This is subjective to each individuals thought connections with their past present and future. One participant may think the movement forwards warrants no change in the scaling another may feel the same action is moving forwards 25%.

Figure 87: Average Distance Travelled under each Theme for All Pilot Participants evidences the average percentage of all pilot participant distance travelled from their baseline

scaling to their desired scaling throughout the research. The lowest distance travelled is trust, lifestyle and challenges at 33% and the highest is respect with 100%. There is a big difference between respect and the next theme at 79% which is commitment. Perhaps respecting others is a difficult one for participants to open up to initially or they may all be good at respecting others.

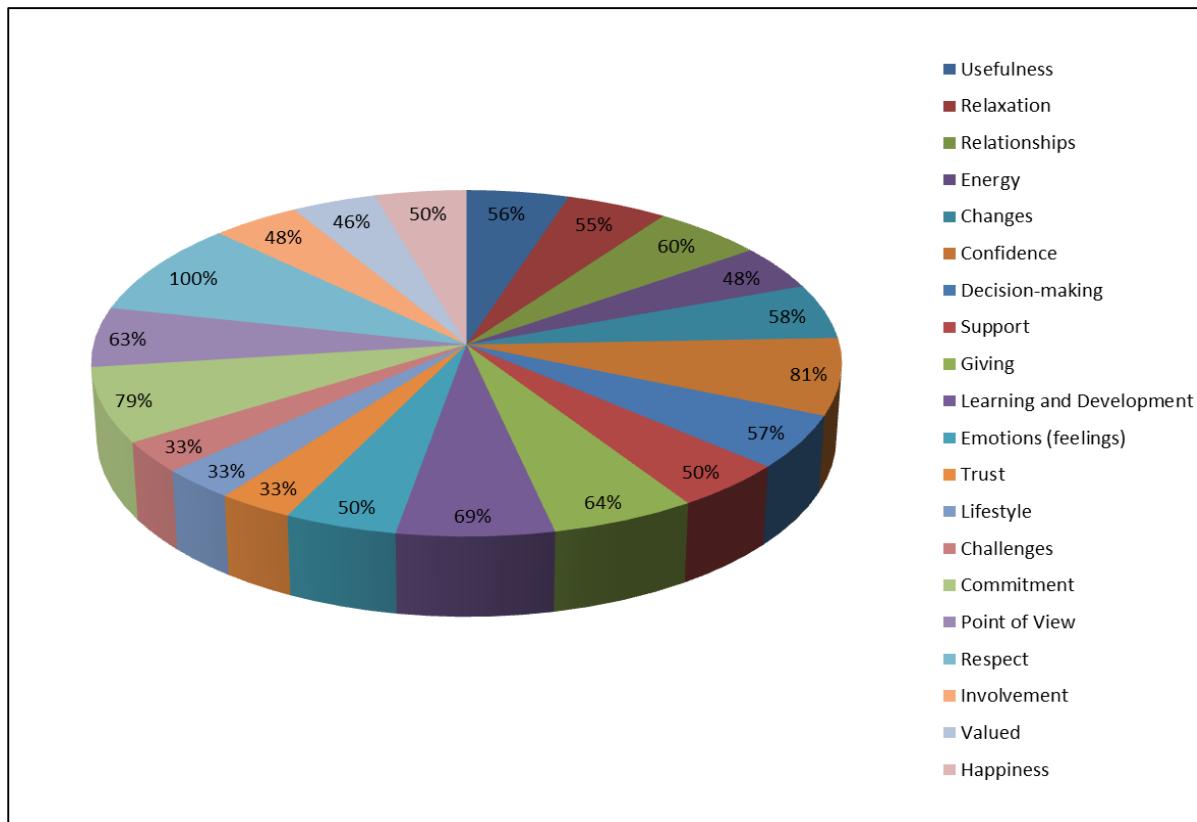


Figure 87: Average Distance Travelled under each Theme for All Pilot Participants

In Table 14: Table of Pilot Average Distance Travelled from Semi-structured Interviews evidences that all 6 pilot participants are travelling forwards in their wellbeing. The average Baseline scaling is 5.56, the present scaling average is 7.27 and the average desired scaling 8.34. Participants will not always travel forwards as circumstances change for people, e.g., there may be a death in the family which could put someone back, understanding where you have been and how you motivated yourself to move forwards in the past can support someone to move forwards again. This understanding of the make-up of your social interactions and how others respond is a key to mastering your wellbeing and moving forward. The semi-structured interview with the 20 themed areas research is certainly looking positive in the early stages of this research.

Table 14: Table of Pilot Average Distance Travelled from Semi-structured Interviews

Pilot Average Scaling from all Headings							
Participant Coding	P1	P2	P3	P4	P5	P6	Average of all
Baseline scaling	4.9	5.95	7	6.35	5.35	3.8	5.56
Present scaling	7.25	7.1	7.35	7.85	6.45	7.55	7.27
Desired scaling	8.55	8.4	8.4	9.05	7.4	8.25	8.34

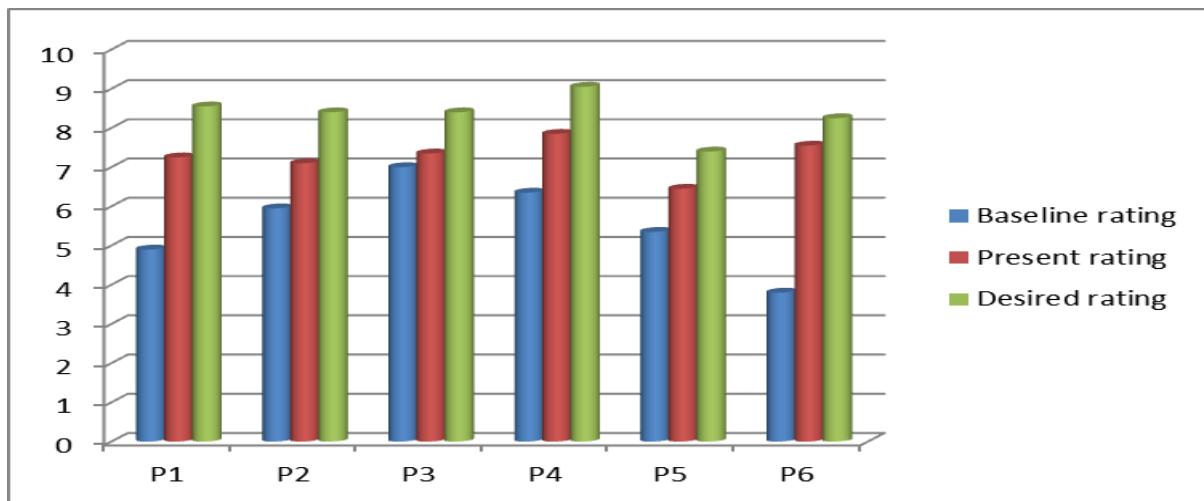


Figure 88: Pilot Participant Average Distance Travelled Over All Headings

In Figure 88: Pilot Participant Average Distance Travelled you can see clearly that each participant has moved forwards at varying rates as each person is unique, e.g. their motivation levels at any time, outside factors that affect their ability to focus on their chosen actions to help them move forwards. This is an overview and individual headings may not have moved forwards or may have stayed static as seen in Figure 84: All Pilot Semi-Structured Interviews Distance Travelled. Once participants reach their desired state of a wellbeing theme they stay there until they reset their desired state or something happens for them to drop their present scaling.

5.5.3. Pilot Wellbeing Semi-Structured Individual Results

Pilot participant one (P1) is in their early twenties and travelled 64% to their desired scaling overall which was shown in Table 13: Percentage of distance Travelled for Each Pilot Participant.

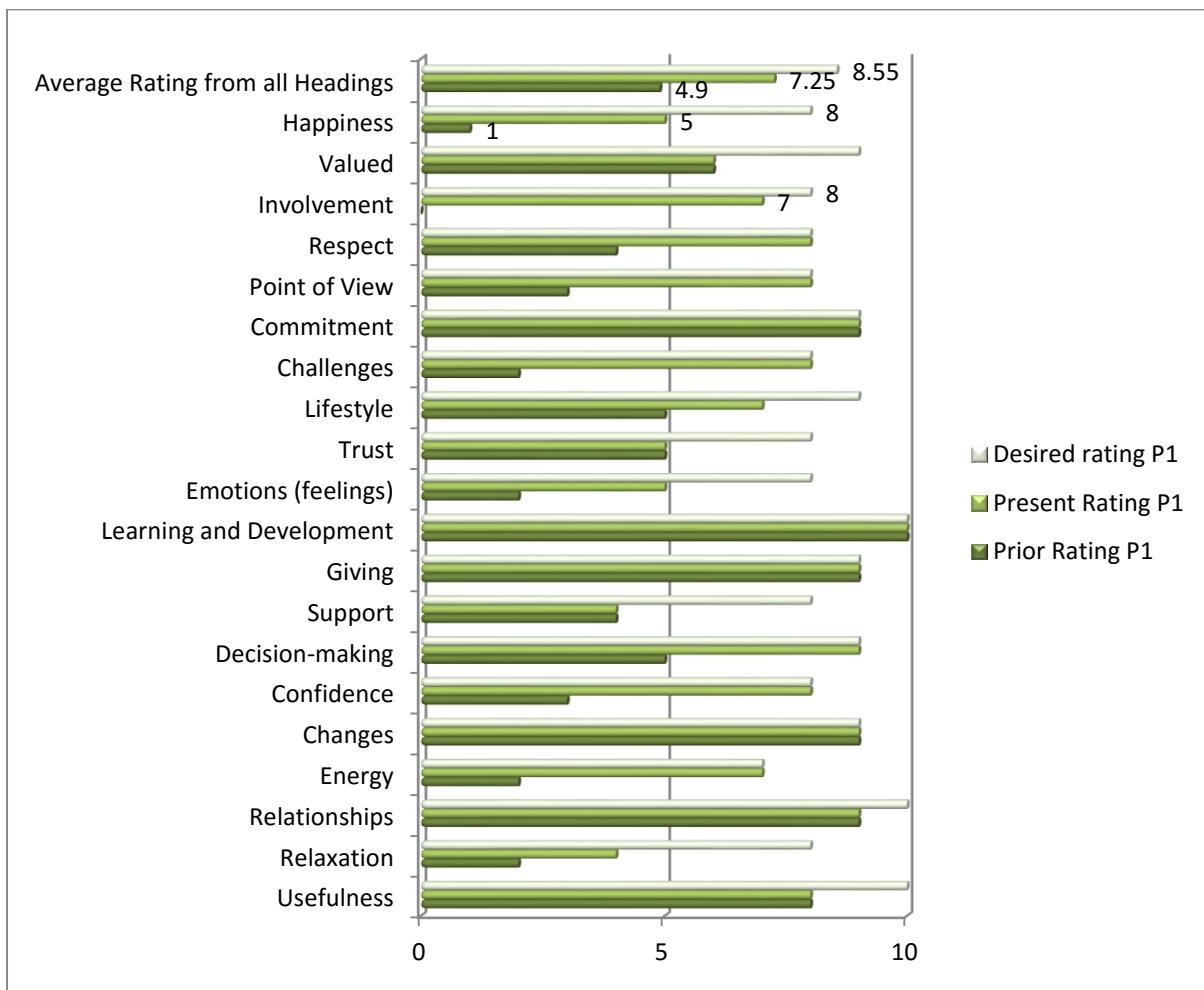


Figure 89: Pilot Semi-structured Interview Data for Participant One

Taking a more detailed look at the pilot participant research evidences the following data in Figure 89: Pilot Semi-structured Interview Data for Participant One has a baseline of 1 for happiness, has managed to move to 5 at their last interview and still desires to move to 8. This means 57% achieved and 43% remaining. P1 has now gained some new wellbeing tactics by travelling from their happiness baseline at 1 to their present status at 5 and as such feels more able and motivated to achieve their desired 8. In Appendix: Pilot Wellbeing Baseline Reasoning P1 stated that they had a good understanding of people and meeting new people helps them in many areas but P1 struggles with their relationships at home.

Appendix: Pilot Wellbeing Actions to Move to Desired Scaling shows P1 would like to achieve independent accommodation and a job. Appendix: Pilot Wellbeing Community Actions to Move towards Desired Scaling for P1 shows that they would love to community participate with young people and share some of their life experiences. P1 felt they could help others to not slip into the same mistakes they had made. P1 did start to achieve their targets by gaining a job and independent accommodation but found there were pregnant and had a lot of difficulties throughout the pregnancy and had to give up work as they were still in a probationary period. P1 now has a beautiful baby boy and has recently got back into the job market. P1 shows 66% achievement towards their overall desires with 34% to achieve their full desires. P1 has progressed in their wellbeing headings overall from 4.9 to 7.25 although P1 has been unable to community participate due to work and childcare issues.

P1 has made their greatest movement in involvement from 0-7. P1 in involvement evidences 87% movement towards their desired status and only 13% left to fulfil their achievement. P1 did this through gaining employment, chasing up old friends and building new relationships at work. P1 feels more involved in society and less isolated. You would expect someone to put these issues under relationships but they obviously see the issues in the family as issues holding them back under relationships whereas P1 sees work relationships as a route to involvement. This is someone who is clearly struggling from a lack of attachment. P1 was taken under protective order as a young child and after a couple of years in various foster families was eventually adopted. P1's adoptive family were given P1's baby brother first and then midst struggling to cope with a new baby were given P1. It sounds like the pressure for the adoptive parent's was high with a lack of appropriate support and P1 has never managed to build a secure attachment. It is more difficult to build a secure attachment with children over 2 years (Becker-Weidman et al, 2012). P1 is trying to change their point of view but has just been diagnosed as bipolar and although tries to be positive is struggling and keeps slipping back.

Pilot participant two (P2) is a teenager still at school and travelled 46% to their desired scaling overall which was shown in Table 13: Percentage of distance Travelled for Each Pilot Participant. P2 scaling data is evident in Figure 90: Pilot Semi-Structured Interview Data for Participant Two. In Appendix: Pilot Wellbeing Baseline Reasoning it evidences their initial

scaling in usefulness is their knowledge of animals which P2 would like to develop more. P2 thought a community participation action would help them to move forwards with usefulness. P2 moved 50% towards their usefulness desires. P2 thought that working as a community participant for an animal shelter would be useful to help them to develop their knowledge of animals which is evident in Appendix: Pilot Wellbeing Community Actions to Move towards Desired Scaling. P2 now volunteers at the PDSA this has helped them tremendously with feeling more useful and confident about their future and later in building new relationships. P2 has moved on 50% in usefulness and 75% in confidence.

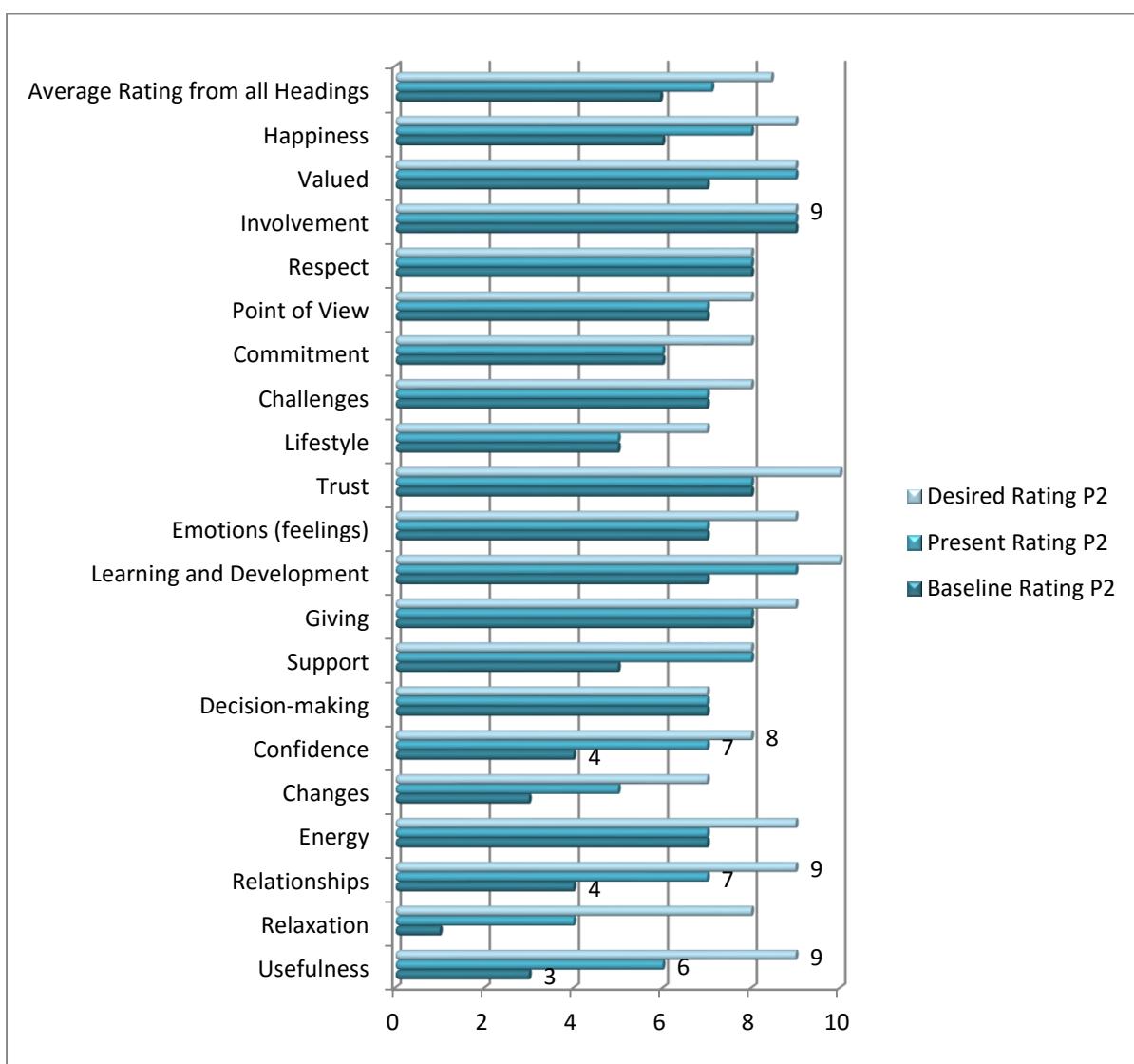


Figure 90: Pilot Semi-Structured Interview Data for Participant Two

The 75% achievement in confidence is evident. P2's lowest movement forwards is involvement as they felt they were already at 100% with a 9 scaling for their baseline, present and desired. 221

scaling. P2 felt if they continued to go out with friends and keep up to date with conversations they could sustain their 100%. P2 felt in relationships that they needed to improve in talking to people in particular their family, improving making conversations and join more clubs. P2 moved on previously through growing confidence within groups and felt they needed to re-join the netball club. P2 met this by getting involved in netball and other groups at school and the PDSA.

P2 did have a setback during the research when they and their partner split up so P2 has done well to move forward in this area with 60% achievement evident. P2 said they were constantly paranoid about their recent partner as their prior partner had cheated on them. P2 ruined their recent relationship through that paranoia. P2 decided to read some books on the subject area to understand their feelings and help them to move forwards. P2 recognises their mistakes and is working through them. P2 has recently started to date again and is being careful with their behaviour and feels good about themselves, is more social and is improving their communication skills. P2 uses reflection and actions to move forwards and is more aware of their behaviour. P2 also spoke to their last partner just to apologise and clear the air as they see each other regularly and wanted to “clear the air”. P2 said they both feel more comfortable when they see each other and are able to say hello. P2 is content and can see this as a learning curve in life.

Pilot participant three (P3) travelled 45% to their desired scaling overall which was shown in Table 13: Percentage of distance Travelled for Each Pilot Participant. P3 scaling data is evident in Figure 91: Pilot Semi-Structured Interview Data for Participant Three. In Appendix: Pilot Wellbeing Baseline Reasoning it evidences them was quite negative regarding life and the whole process. They did not believe in giving anything to charity and thought that the research would be a waste of time. They wanted to earn more money, have more and better holidays, gain a higher position to gain more power and improve their lifestyle. They could not see how they could do this at first. They were using a CD at night time which tells users they are successful, can achieve, etc. They said when they feel low it makes them feel good but they does not get thoughts on how to progress this. Going through the process they decided to apply to upgrade their qualifications to enhance their chance of gaining a management position which they thought would give them more power, money and a better

lifestyle. Whilst working towards their management qualification they were given a promotion with a higher paid job. P3 is happier but still not satisfied with their lifestyle partly because their partner left them and they feel they need a partner to enjoy holidays and going out.

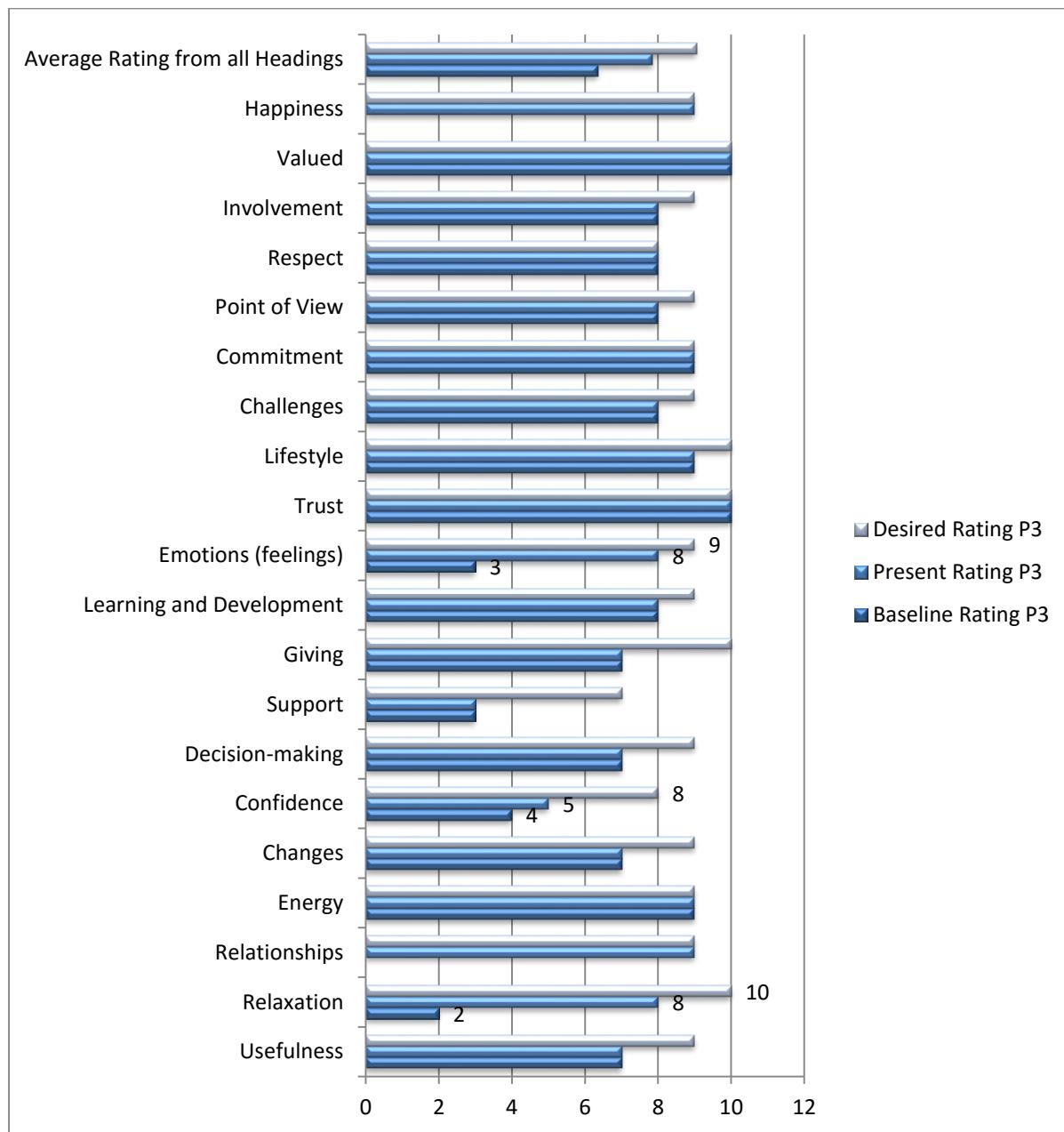


Figure 91: Pilot Semi-Structured Interview Data for Participant Three

They did manage to move up in their emotions with their baseline at 3 achieved being 5 taking them to an 8, the desired status is 9. This gives them an 83% movement towards with P3s desired status evident in emotions. This was a struggle for them for a while but they now have

settled with another partner and feel their emotions have vastly improved. P3 is still not happy with their job and are doing more training to go freelance hence the lack of movement on learning and development. They still do not believe in giving to charity or participating in the community and thinks that “those who do are not thinking of themselves”. Overall they have moved from 6.35 to 7.85. P3s biggest movement is in relaxation from 2 to 8 they state this is due to their promotion as the prior manager caused a lot of needless stress for them. Their confidence has also risen from 4 to 5, P3 states this is due to the promotion and finding a new partner. P3 has had a difficult time but has still managed to make an improvement in their wellbeing.

Pilot participant four (P4) travelled 44% to their desired scaling overall which was shown in Table 8: Percentage of distance Travelled for Each Pilot Participant.

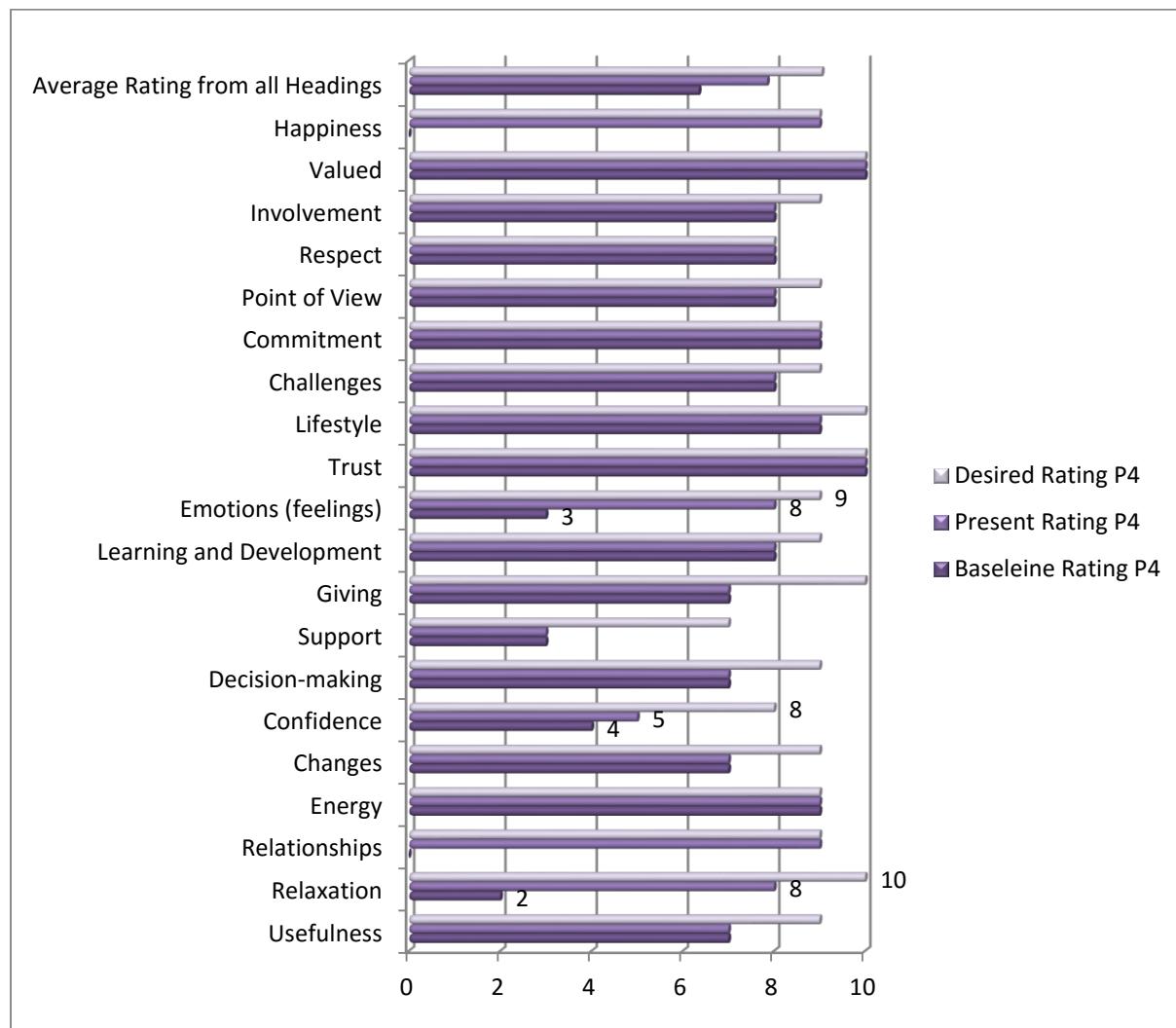


Figure 92: Pilot Semi-Structured Interview Data for Participant Four

P4 interview data is evident in Figure 92: Pilot Semi-Structured Interview Data for Participant Four which initially shows them as being content in many arrears which can be seen with valued, respect, commitment, trust and energy. P4's partner recently died and they were keen to do the interview to help them refocus their life. P4's reasoning, day to day actions and community participation actions are evident in Appendix: Pilot Wellbeing Baseline Reasoning, Appendix: Pilot Wellbeing Actions to Move to Desired Scaling and Appendix: Pilot Wellbeing Community Actions to Move towards Desired Scaling.

P4 thought they could use their experience gained in caring for their late partner, who suffered from Alzheimer's, to help them feel more fulfilled towards their wellbeing. They decided to get in touch with the Alzheimer's Society who had given P4 and their partner support whilst they were ill and ask what community participation roles they had. P4 was offered a role and has now been community participating with the Alzheimer's society for several months doing activities with Alzheimer's and dementia patients in a local day centre. Unfortunately the day centre is closing and they are looking at a similar role elsewhere. They are grateful to be able to breakdown and simplify a wellbeing route for themselves. P4 think community participation has been a true life saver in helping them improve and expand in areas they thought were already fulfilled, such as feeling they had more energy, feeling more valued and trusted. Participating is helping build their confidence where they have moved from 4 to 5, refocusing their emotions where they have moved from 3 to 8 and consequently balancing their relaxation levels where P4 has made their biggest movement from 2 to 8 which is an 80% increase. Partly due to the fact that they had put so much energy that was put into caring for their partner they could not relax till they found an outlet to take over which was community participation.

P4 is planning to travel abroad and visit places they have always wanted to see. They feel this will help them feel more involved with other people on the trips and it is a challenge that also improves their lifestyle. They feel they should be giving more support to their family but with such a big family P4 feels they are spread too thinly which is why they have not moved on in usefulness and giving. P4 feels stuck in a catch 22 with community participation which has helped build them up so much but struggles with giving and feeling useful to their children. P4 feels they can never improve on point of view as they could never see the point

of view of a rapist. P4 thinks there is always something new to learn and that life is always changing and they cope but never feel totally comfortable about all the changes which is why they have left it static.

Pilot participant five (P5) has travelled 55% to their desired scaling overall which is shown in Table 8: Percentage of distance Travelled for Each Pilot Participant. P4s overall average started at 5.35 and they have already moved to 6.45. P5 was struggling with the changes in their life having moved from the Philippines a couple of years previously. P5 felt they were not listened to and was struggling missing their family from the Philippines and the activities they used to do. P5's scaling is evident in Figure 93: Pilot Semi-Structured Interview Data for Participant Five.

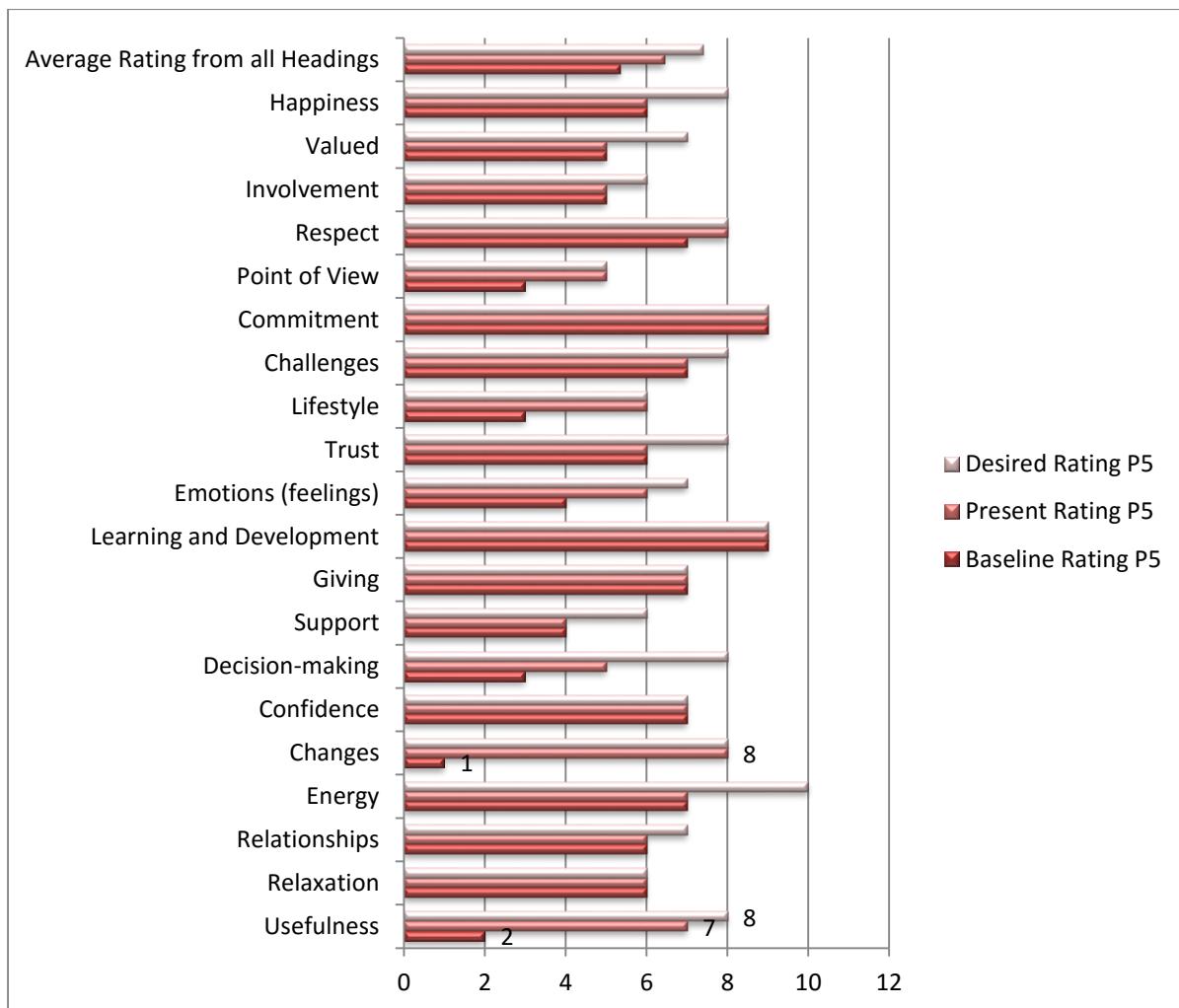


Figure 93: Pilot Semi-Structured Interview Data for Participant Five

Appendix: Pilot Wellbeing Baseline Reasoning, Appendix: Pilot Wellbeing Actions to Move to Desired Scaling and Appendix: Pilot Wellbeing Community Actions to Move towards Desired Scaling evidence their reasoning, day to day actions and community participation actions under P5. P5 thought of numerous ways that community participation could help them and numerous rolls they thought they could get involved in. It was suggested they focus on one role to start with true to their desires they initially went on to community participate for St Oswald and the National Citizen Service. P5 with their friends continue to raise funds for various community projects by organising and running fundraising events, mainly band nights across the city. P5's biggest movement is on change where they have moved from 1 to 8 which is their desired state so they have moved on 100%. This is closely followed by usefulness where they have moved from 2 to 7 an 87% distance travelled, leaving 13% to their desired state.

P5 is planning on going to university to study psychology and is presently working towards this goal. P5 did have some initial difficulties with some of the language used and several times the questions had to be asked in another way to be understood. P5 has only been in the UK for a few years and English is not their mother tongue. This could prove to be a major issue in an information communication system and needs to be researched further.

Pilot participant six (P6) has travelled 87% to their desired scaling overall, which was shown in Table 13: Percentage of distance Travelled for Each Pilot Participant. P6 interview data is evident in Figure 94: Pilot Semi-Structured Interview Data for Participant Six. P6 has suffered from depression but is on the road to recovery and appears to have worked out their issues and is more aware of their needs and limitations. P6 was not happy with their present employment and an opportunity was available through the university teaching in China. P6 thought this was a fantastic idea and was quickly signed up and moved out to work in China. Originally P6 did not know what they were walking into in China so could not put in actions to sign up to community participation in China. They were proud of the 2 community awards they won at university for community participation supporting numerous societies at the university as well as setting up a recycling project.

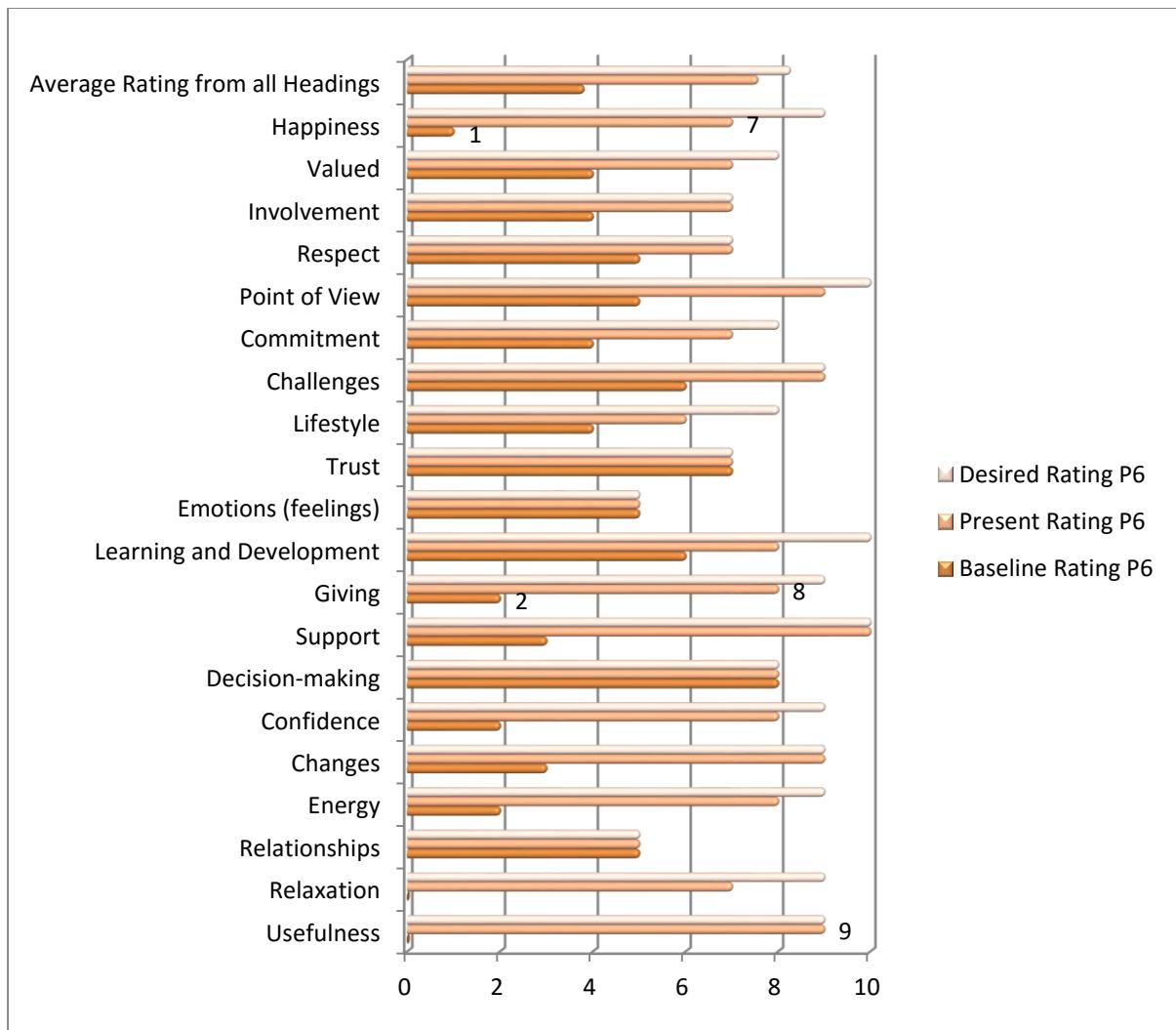


Figure 94: Pilot Semi-Structured Interview Data for Participant Six

They were unaware of the possibilities for community participation in China but certainly did not rule it out. They said they would definitely get involved in helping out in the community wherever they could. They are presently setting up a new English school in China on top of their own paid teaching role. P6 is extremely happy and has just got engaged and said their community participant roles have taught him many things over the years and that P6's experiences help him develop skills. They think there will be more opportunities to take on other roles in the future but the present project is time consuming so it will be a while before P6 can take on any additional community participation. P6 managed to move from 2 to 8 with 1 left for their desired state. This is an 86% move forwards with 14% left to their desired state. P6 achieved this by helping strangers when they see someone in need, e.g. they were up a mountain a month ago when they saw a woman crying in the snow. She had been badly beaten by her husband and had tried to run away but fell and twisted her ankle on top of her

injuries from her beating and hypothermia starting to set in. P6 carried her back down the mountain over their shoulder to a farm they had seen half way up and asked if they would take care of her, initially they said no until P6 offered to pay them to take the woman in and look after her till she was well. P6 said it made them feel really good and give them a boost although P6 did say they nearly collapsed themselves a few times carrying the woman down the mountain and it was a struggle getting back to their friends still up the mountain as they were so tired. P6's friends were so impressed P6 gone to so much effort so the woman was taken care of. P6 said if they had left her there she would have suffered frost bite or even died from hypothermia, P6 wanted to make sure she was safe but was conscious they had left their friends alone up the mountain and they were relying on them so P6 had to go back up. Paying ensured the woman's life and that they could get back to ensure the safety of their friends. P6's community experience at university supporting the society groups made them aware of the issues of others abroad. P6 became a mediator with the societies in the university. P6 was so dedicated in supporting the societies they stayed up till 2am with two ethnic groups in dispute until P6 supported them to come to a peaceful agreement. P6 gained press coverage twice for their community participation roles. P6 initially stated they did not believe in scaling a ten but did later for support. P6 has moved from 3.8 to 7.55 over all the headings, 87% to their desired state. P6's biggest movement forwards was in feeling useful which they had moved from 0 to 9, 100% to their desired state. Having felt all those fantastic emotions with all the community participation roles at university, feeling useful was obviously a major loss to P6 being able to regain this through their work and community participation in China made a big difference in their life.

5.5.4. Pilot Wellbeing Questionnaire

The table of results can be found in Appendix: Pilot Wellbeing Questionnaire. Question 1 focuses on the preparation. Question 1a: Do you feel that the background information to the research was adequate? 1a evidences 100% of participants stating yes the background information was adequate. Question 1b: How might the background information to the research have been improved? 1b evidences no suggestions to improve the background information. Question 1c: Do you feel confident in using the scaling tool? 1c evidences 100% of participants stating yes they feel confident using the scaling tool. Question 1d: What might increase your confidence in using the scaling tool? 1d evidences one participant suggesting

using the research information to evidence and encourage people as to why they should use the scaling tool. Question 1e: Do you believe the scaling tool is useful to you? 1e evidences 83% of participants believes the scaling tool is useful to them. Question 1f: Any further comments on the scaling tool? 1f gave the following comments: You can actually see where you want to be. It helps me see where I want to be under the different wellbeing themes. It makes me think about what I want and how to get it. It would be good if people could get help from the online system in low scoring areas, e.g. share prior success stories, suggest self-help and where to go for help, etc.

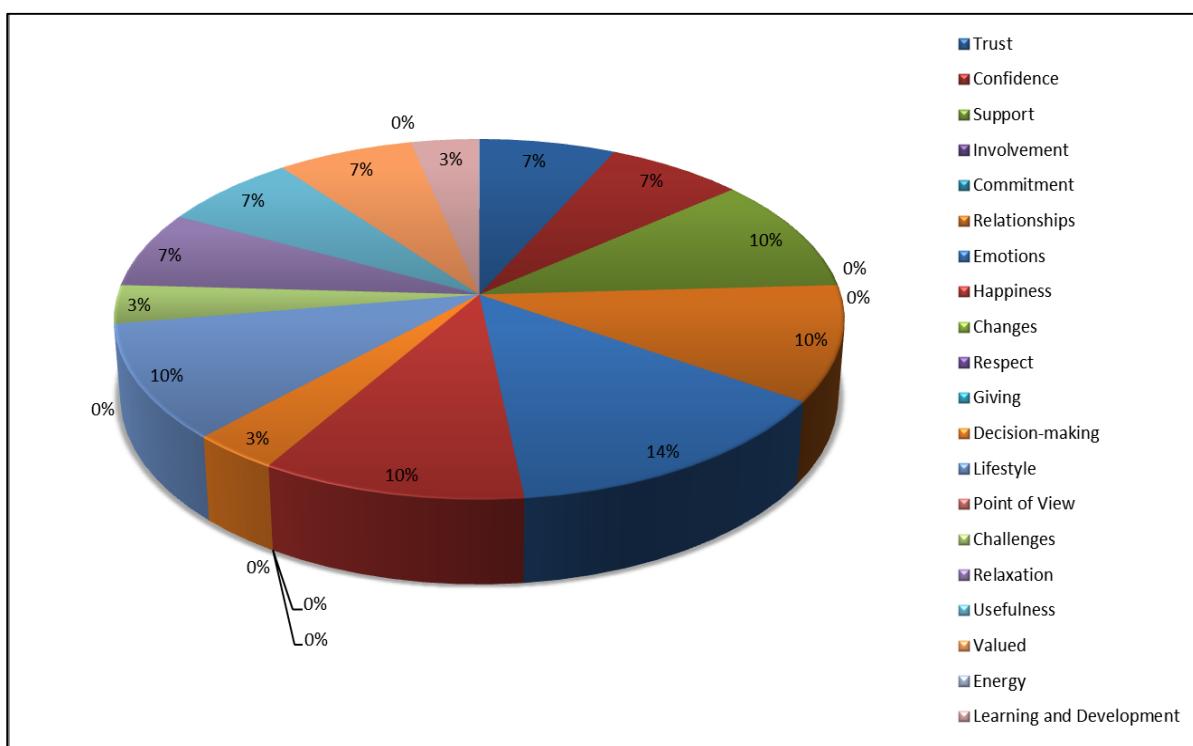


Figure 95: Pilot Questionnaire 2c - Which were the 5 most important headings discussed with regards to your wellbeing?

Question 2 focuses on the frame of reference. Question 2a: Are the current headings within the life board frame of reference appropriate to you? Resulted in 83% of participant's state the wellbeing headings are appropriate for them. Question 2b: How could the wellbeing frame of reference is improved? The results evidenced the following feedback: 33% made no suggestions, 33% stated no improvement needed, 16% stated be more specific with different relationships, e.g., family and or friends and 17% stated for online version have assistance with further explanations. Question 2c: Which were the 5 most important question headings discussed with regards to your wellbeing? Figure 95: Pilot Questionnaire 2c - Which were the

5 most important headings discussed with regards to your wellbeing? Evidences the most important headings were Emotions as the most important heading with 14%; support, happiness, lifestyle and relationships with 10% each; trust, commitment, relaxation, usefulness and valued take 7% each; decision-making, challenges, learning & development take 3% each while point of view, respect, changes, involvement, giving, commitment and energy do not come in the top 5 on this occasion.

Question 3 investigates the interview environment. Question 3a asks was the interview appropriate? The participants answered with 100% yes the interview appropriate. Question 3b asks if privacy, time, space or comfort were lacking in the interview. The participants stated 100% privacy, time, space and comfort where not lacking in the interview. Question 3c asks how the interview environment could be improved for them. Resulted in 17% stated having scented candles and 17% stated with an online version ask people to find a quiet relaxing place and have options to skip a question or go back would improve the interview for them.

Question 4 focuses on how you feel that the process contributes to various pointers. Question 4a: Do you feel the process will help you achieve your aims/objectives? Question 4a - How do you feel the process helps you achieve your aims/objectives? Evidences 17% feel it considerably helps achieve aims/objectives, 50% feel quite significantly and 33% feel it helps a little to achieve their aims/objectives. Question 4b asks do you feel the measure of movement will be useful to you. Results showed 83% of participants agreeing that the measure of movement would be useful to them.

Question 5a asks does the process identify priorities for support and or intervention. The results showed that 17% strongly agree and 83% agree that the process identifies priorities for support and or intervention. Question 5b asks do you feel the process contributes to a new perspective on your current circumstances, and seeing the big picture. 100% of pilot participants agree the process contributes to a new perspective on your current circumstances, and seeing the big picture. Question 5c asks do you feel the process contributes to identification of strategies that have worked in the past. 100% of pilot participants agree the process contributes to identification of strategies that have worked in the past. Question 5d asks do you feel the process contributes to exploration of options for

the future. Pilot Question 5d - Do you feel the process contributes to exploration of options for the future? Results evidence 50% of pilot participants strongly agree, 33% agree and 17% neither agree nor disagree the process contributes to exploration of options for the future. Question 5e asks do you feel the process contributes to a means of setting goals. Results evidence 67% of pilot participants agrees and 33% strongly agree the process contributes to a means of setting goals. Question 5f asks do you feel the process contributes to a means by which you can take responsibility for your future. Pilot Question 5f - Do you feel the process contributes to a means by which you can take responsibility for your future? Results evidence 17% strongly agree, 50% of pilot participants agree and 33% disagree the process contributes to a means by which you can take responsibility for your future. Question 5g asks do you feel the process contributes to a realisation of the progress/achievements you have already made. The results evidence that 33% of pilot participants strongly agree and 67% agree the process contributes to a realisation of the progress/achievements you have already made. Question 5h asks do you feel the process contributes to a means of improving your self-awareness. The results evidence that 33% of pilot participants strongly agree and 67% agree the process contributes to a means of improving your self-awareness. Question 5i asks do you feel the process contributes to a means of improving your confidence. The results evidence that 67% of pilot participants agree and 33% disagree that the process contributes to a means of improving your confidence. Question 5j asks do you feel the process contributes to a means of improving your self-esteem. Pilot Question 5j – ‘Do you feel the process contributes to a means of improving your self-esteem?’ evidences 17% of pilot participants strongly agree, 33% agree and 50% disagree the process contributes to a means of improving your self-esteem. Question 5k asks do you feel the process contributes to a means of measuring your wellbeing indicators. The results evidence that 33% of pilot participants strongly agree and 67% agree the process contributes to a means of measuring your wellbeing indicators. Question 5l asks do you feel the process contributes to your action plan. The results evidence 33% of pilot participants strongly agree and 67% agree the process contributes to your action plan. Question 5m asks do you feel the process contributes to recording documentation that is easy to use. The results evidence 83% of pilot participants agrees and 17% strongly agree the process contributes to recording documentation that is easy to use.

Question 6a asks would you feel comfortable using an automated computerised system. 100% of pilot participants agreed they would feel comfortable using a computerised system. Question 6b asks what kind of screen background would you like. Pilot Question 6b – ‘What kind of background screen would you like?’ shows 33% of pilot participants would like a background screen of the beach, 33% countryside, 17% mountains and 17% plain. Question 6c asks would you have a preference of voice. 50% of pilot participants said yes and 50% no preference. Question 6d asks which voice_preference participants would like. The pilot participants said 67% either and 33% prefer female. Question 6e asks if pilot participants have an accent preference to which 83% had no preference and 17% preferred a funny accent. Question 6f asks would you prefer to be interviewed by an interactive character which can laugh and react to you on the screen or would you feel happy just having a voice. Pilot Question 6f – ‘Would you prefer to be interviewed by an interactive character which can laugh and react to you on the screen or would you feel happy just having a voice?’ shows 34% of pilot participants would like an avatar, 33% either an avatar or just a voice and 33% just a voice. Question 6g asks would you want to be able to view your distance travelled. 100% of pilot participants would like to be able to view their distance travelled. Question 6h asks would you want to be able to access/save/print your action plan. 100% of pilot participants would like to be able to access/save/print their action plan. No pilot participants left any further comments in question 7 any other comments.

5.6. Main Wellbeing Semi-Structured Interview Research

The following section details the results of the main wellbeing semi-structured interview ethnography, an overview of the pilot and main ethnography results, the main wellbeing semi-structured interview results grouped and individual details, an overview of the pilot and main semi-structured interview results, the main wellbeing questionnaires and an overview of the pilot and main questionnaires.

5.6.1. Main Wellbeing Semi-Structured Interview Ethnography

The breakdown of participant data can be found in Appendix: Demographic Data of Participants from Pilot and Main Wellbeing Interviews which has been broken down in the following figures. The male female divide in main wellbeing community participation semi-structured interviews shows a split of 43% female and 57% male. Country of origin divide in

main wellbeing interview shows 72% of participants in the pilot are from England and the remaining from Thailand and Pakistan. Age Divide shows that there are 43% are 19-36 years old, 14% are 37-54 years old, 14% are 55-72 years old and 29% are 73-90 years old. Occupation Divide shows that 28% of pilot participants are students, 29% are retired, 29% are unemployed and 14% are part time employed. Post Code Divide for Main Participants shows that 57% of pilot participants are from NE6 and 15% are from NE8, 14% are from NE20 and 14% from NE63. 71% of participants from the main wellbeing interviews in a community participation context are not disabled and 29% are disabled.

5.6.2. Main Wellbeing Semi-Structured Interview Results

Table 15: Main Wellbeing Semi-Structured Interview Data evidences the data from the main research for each participant in baseline scaling, present/latest scaling, desired scaling and average scaling at the bottom.

Table 15: Main Wellbeing Semi-Structured Interview Data

	Baseline Scaling							Present Scaling							Desired Scaling						
	M1	M2	M3	M4	M5	M6	M7	M1	M2	M3	M4	M5	M6	M7	M1	M2	M3	M4	M5	M6	M7
Usefulness	6	3	3	6	1	6	3	8	3	5	10	7	9	9	9	10	8	10	9	9	9
Relaxation	3	7	2	0	1	2	0	7	7	7	5	3	10	2	8	8.5	7	10	7	10	10
Relationships	3	3	10	10	2	5	10	3	3	10	10	6	5	10	9	9	10	10	8	5	10
Energy	6	0	6	0	1	4	1	6	0	6	6	4	9	6	10	10	8	10	8	10	8
Changes	3	6	10	0	3	7	1	3	6	10	3	6	7	3	7	8	10	10	7	10	6
Confidence	4	7	2	4	1	5	1	6	7	7	10	3	9	6	9	10	7	10	8	10	8
Decision-making	7	10	7	6	3	5	5	7	10	7	10	3	8	5	7	10	7	10	6	10	7
Support	10	0	4	5	2	3	6	10	0	4	5	2	3	6	10	4	7	10	5	6	6
Giving	7	10	10	10	2	8	7	7	10	10	10	7	8	7	7	10	10	10	7	8	7
Learning and Development	2	8	10	0	0	10	6	6	8	10	7	9	10	6	8	8	10	7	9	10	6
Emotions (feelings)	1	2	10	0	1	10		6	10	10	10	3	10		9	10	10	10	6	10	
Trust	3	10	0	3	2	1		3	10	6	10	6	7		6	10	6	10	8	7	
Lifestyle	3	3	8	5	2	7		6	3	8	5	4	7		8	8	8	10	7	10	
Challenges	4	9	5	8	3	8		4	9	5	8	6	8		7	9	8	8	8	9	
Commitment	3	10	10	5	7	6		3	10	10	5	7	10		8	10	10	5	8	10	
Point of View	3	8.5	10	4	3	7		5	8.5	10	10	7	7		5	8.5	10	10	8	10	
Respect	3	8	10	4	8	9		8	8	10	10	8	9		8	8	10	10	8	9	
Involvement	2	10	5	10	2	7		8	10	5	10	8	7		8	10	5	10	9	7	
Valued	1	10	6	5	3	7		6	10	6	10	7	7		9	10	6	10	8	10	
Happiness	1	3	10	5	2	6		7	3	10	10	5	10		9	10	10	10	8	10	
Average Scaling from all Headings	3.75	6.4	6.9	4.5	2.45	6.15	4	5.95	6.8	7.8	8.2	5.55	8	6	8	9	8.35	9.5	7.6	9	7.7

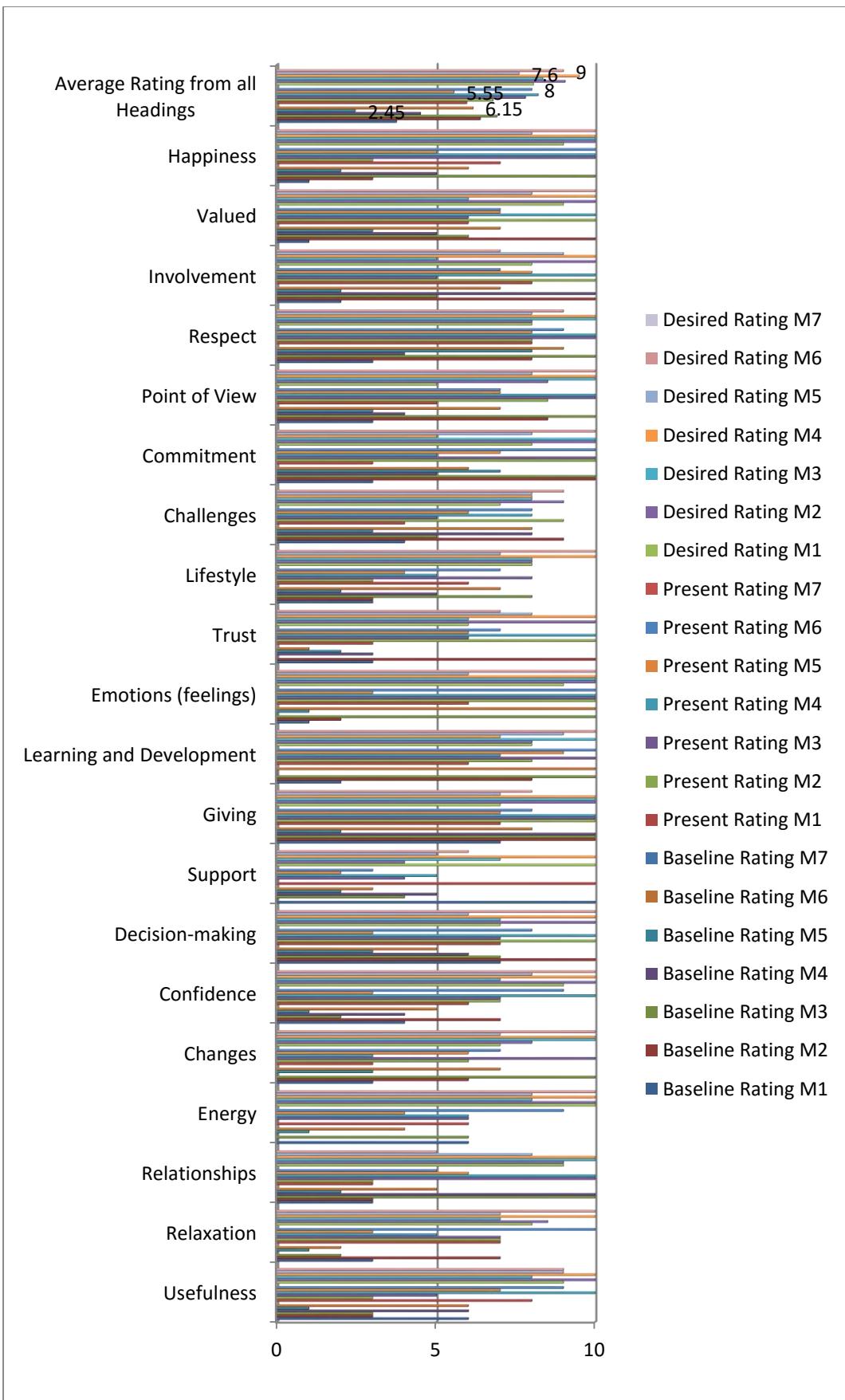


Figure 96: All Main Wellbeing Interviews in Community Context

These are subjective to each participant. To make this slightly more objective the baseline is taken as zero and the desired as ten to work out the percentage of their distanced travelled. This worked well in the pilot and so the main system has stayed the same. The change to the interview incorporated more descriptive language or alternatives in the semi-structured interview when people did not understand what was being asked of them. As there were requests for advice and self-help this was also given during the interview. Figure 96: All Main Wellbeing Interviews in Community Context shows an overview of the scaling from the main research. It shows the subjectivity of individuals as peoples scaling vary under each themed heading. Average for all headings for M6 baseline is 6.15, 8 for present scaling and 9 for desired. In comparison M5 baseline is 2.45, 5.5 for the present scaling and 7.6 for desired.

Table 16: Wellbeing Themed Analysis of Main Wellbeing Interviews average headings show 75% of the wellbeing headings are 40% and over. Those under 40% are relationships, changes, support, lifestyle and challenges.

Table 16: Wellbeing Themed Analysis of Main Wellbeing Interviews

Wellbeing Themed Headings	Baseline Themed Average	Present Themed Average	Desired Themed Average	Distance Travelled	Distance Travelled Percentage
Usefulness	4.0	7.3	9.1	3.3	63.9%
Relaxation	2.1	5.9	8.6	3.7	57.1%
Relationships	6.1	6.7	8.7	0.6	22.2%
Energy	2.6	5.3	9.1	2.7	41.3%
Changes	4.3	5.4	8.3	1.1	28.6%
Confidence	3.4	6.9	8.9	3.4	63.2%
Decision-making	6.1	7.1	8.1	1.0	50.0%
Support	4.3	4.3	6.9	0.0	0.0%
Giving	7.7	8.4	8.4	0.7	100.0%
Learning and Development	5.1	8.0	8.3	2.9	90.9%
Emotions (feelings)	4	8.2	9.2	4.2	80.6%
Trust	3.2	7.0	7.8	3.8	82.1%
Lifestyle	4.7	5.5	8.5	0.8	21.7%
Challenges	6.2	6.7	8.2	0.5	25.0%
Commitment	6.8	7.5	8.5	0.7	40.0%
Point of View	5.9	7.9	8.6	2.0	75.0%
Respect	7.0	8.8	8.8	1.8	100.0%
Involvement	6.0	8.0	8.2	2.0	92.3%
Valued	5.3	7.7	8.8	2.3	66.7%
Happiness	4.5	7.5	9.5	3.0	60.0%

Figure 97: Average Distance Travelled under each Wellbeing Theme for All Main Participants shows that all participants struggled in travelling forwards in requesting support. In the 0-25% scaling there are relationships, support, lifestyle and challenges. In the 26-50% scaling there are energy, changes, decision-making and commitment. In the 51-75% scaling there are usefulness, relaxation, confidence, point of view, valued and happiness. In the 76-100% scaling there are giving, learning and development, emotions, trust, respect and involvement. The lowest distance travelled is support with 0% and the highest is respect with 100%. Lifestyle and challenge were seen as low traveller's forwards in the pilot as well as the main research.

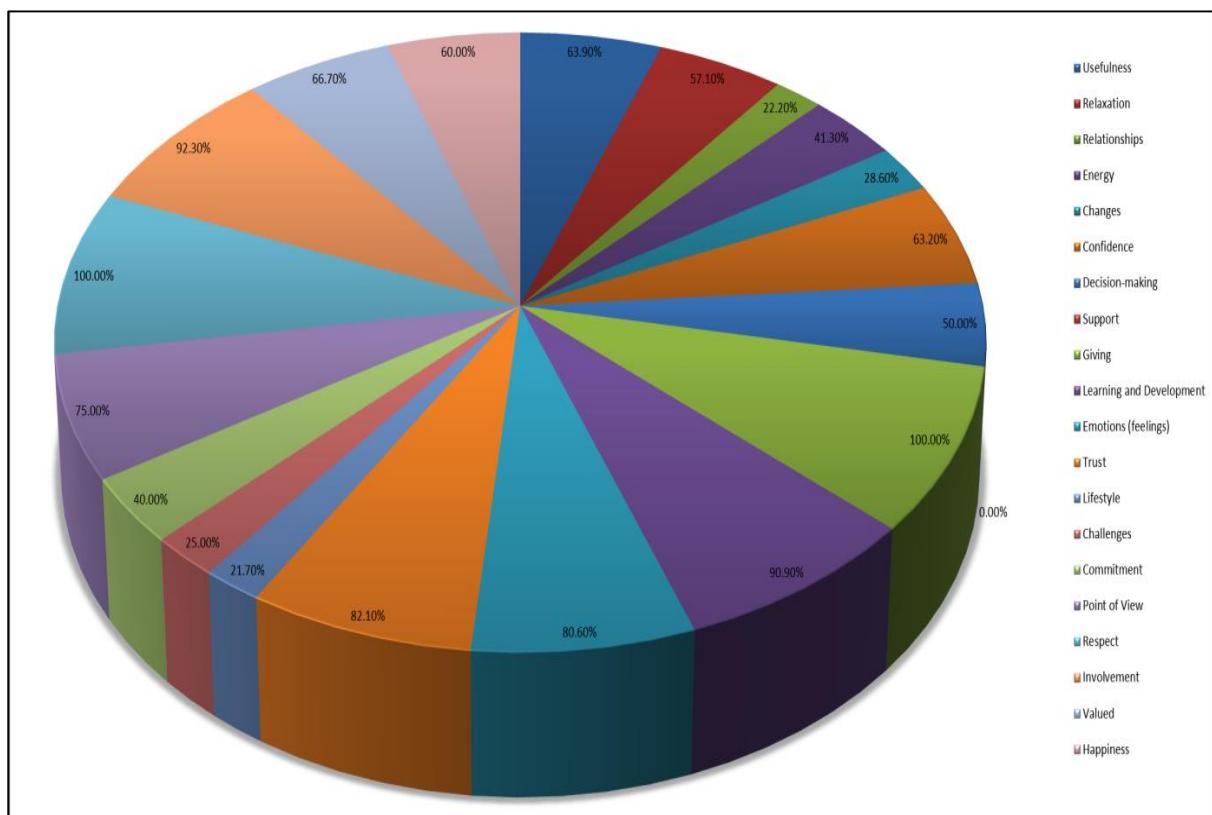


Figure 97: Average Distance Travelled under each Wellbeing Theme for All Main Participants

Figure 98: Wellbeing Themed Analysis of Main Interview Averages shows all the baseline averages are between 2.1 and 7.7 which is a 5.6 variance. The present/latest averages are between 4.3 and 8.8 which is a 4.5 variance and the desired averages are between 6.9 and 9.5 which is a 2.6 variance. The variance gets progressively smaller.

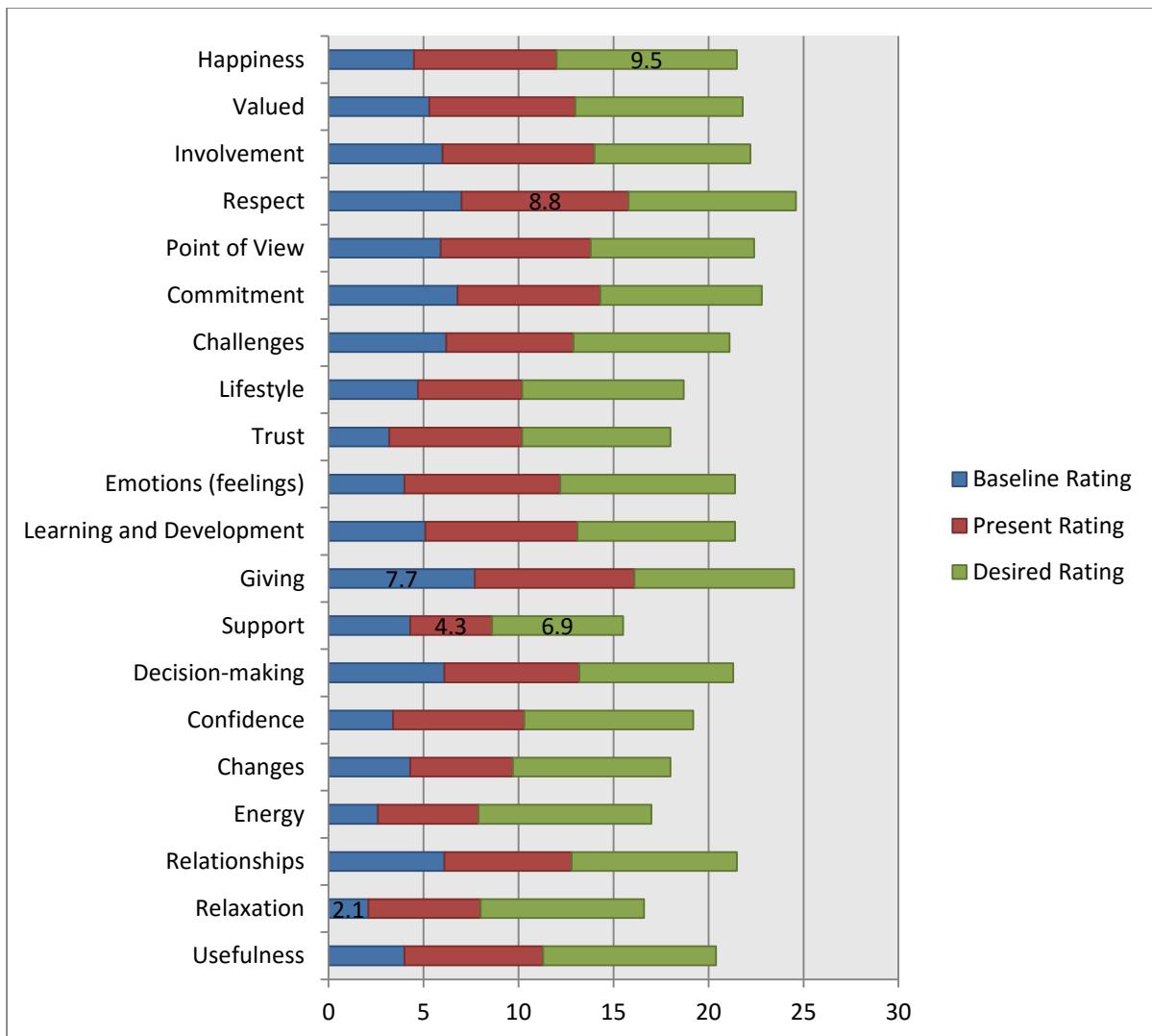


Figure 98: Wellbeing Themed Analysis of Main Interview Averages

Figure 99: Main Participant Differences in Achieved and Desired in Main Wellbeing Interview shows in graphical format the distance travelled and the distance needed to travel in a much easier format. The format has been changed so the wellbeing headings all relate to a 100% and it is easier to compare the headings against each other. You can clearly see respect and giving as fully achieving with 100% and support as not having moved forwards at all. The average decision-making travel is 50% to the present scaling and there is 50% to achieve to reach the desired average. Usefulness average distance travelled is 3.3 or 63% with 1.9 or 37% to the desired state. In an online version for the public these could be rearranged to show the highest travelled wellbeing headings first and the headings in need of more actions last or vice versa depending on individual.

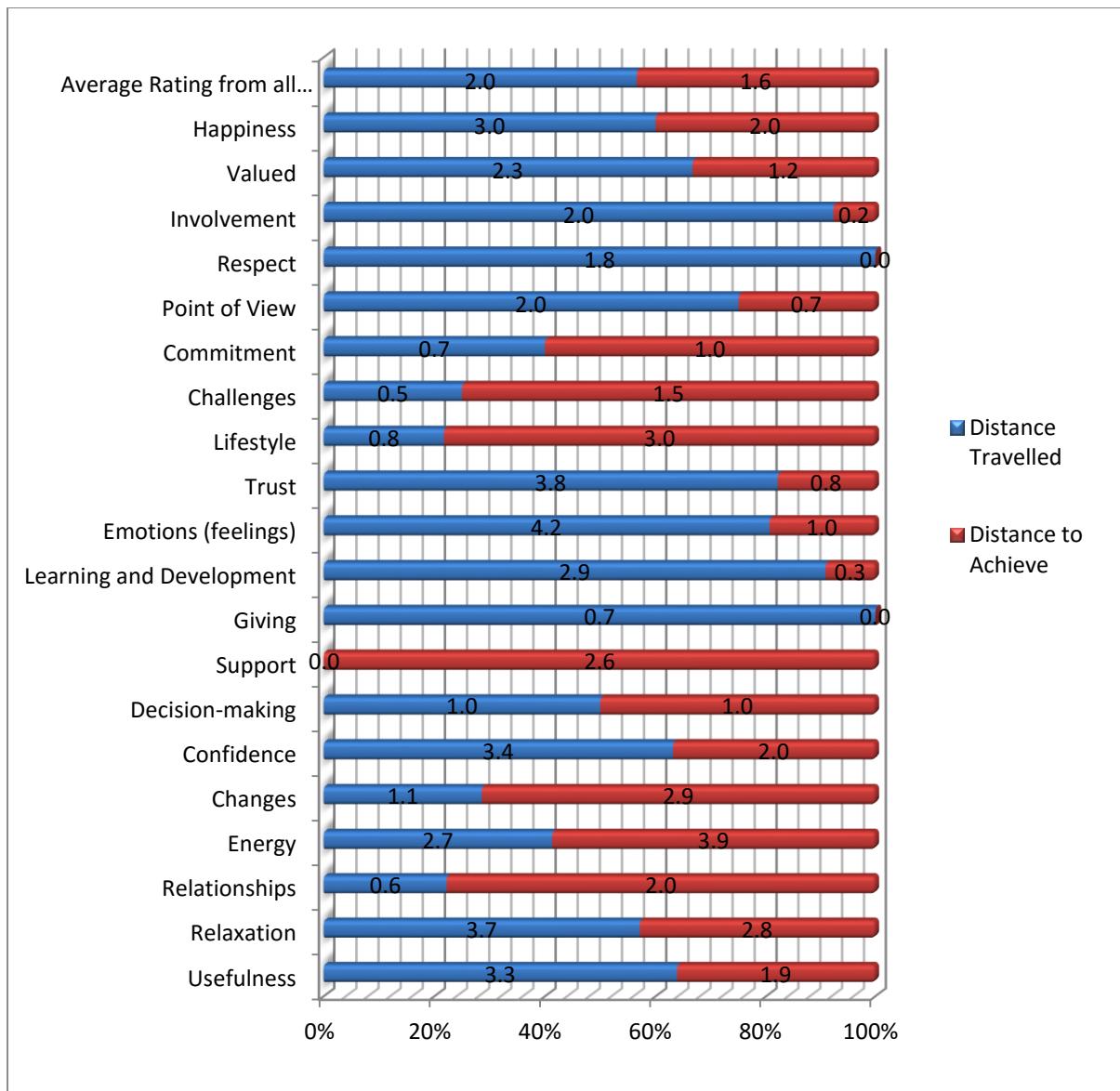


Figure 99: Main Participant Differences in Achieved and Desired in Main Wellbeing Interview

Table 17: Average Distance Travelled from Main Wellbeing interviews evidences all 7 participants are travelling forwards in their wellbeing. The average baseline is 4.89; the average present scaling is 6.90 and the average desired scaling 8.46.

Table 17: Average Distance Travelled from Main Wellbeing interviews

Main Average Scaling from All Headings								
Participant Coding	M1	M2	M3	M4	M5	M6	M7	Average of All
Baseline Scaling	3.75	6.38	6.9	4.5	2.5	6.2	4	4.89
Present Scaling	5.95	6.78	7.8	8.2	5.55	8	6	6.90
Desired Scaling	8.05	9.05	8.35	9.5	7.6	9	7.7	8.46

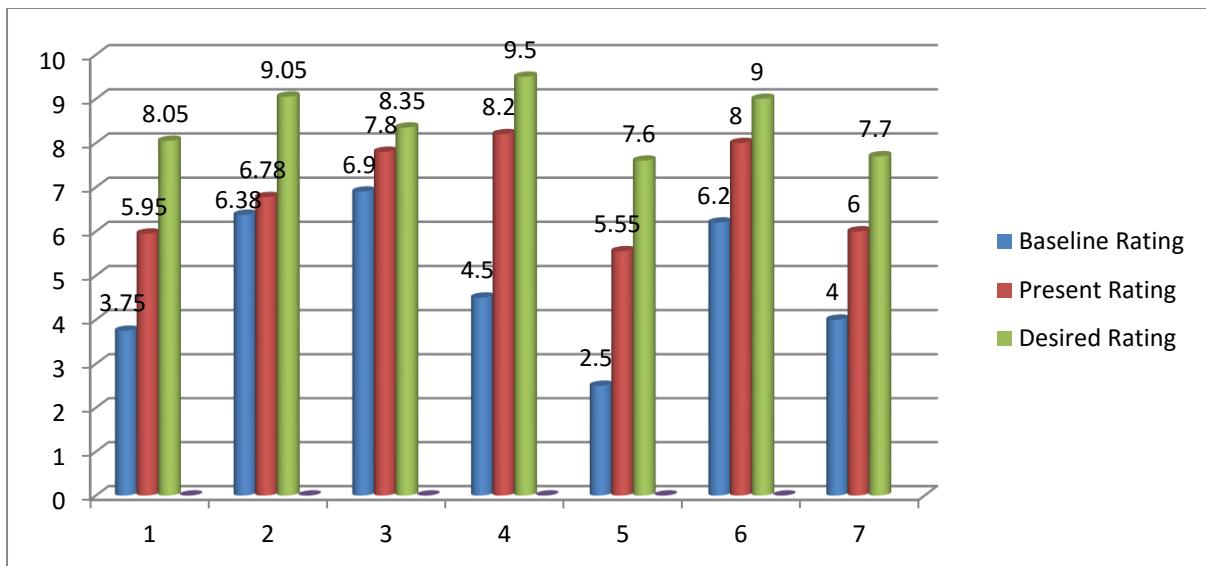


Figure 100: Main Wellbeing Participant Average Distance Travelled

Figure 100: Main Wellbeing Participant Average Distance Travelled evidences M2 as having travelled the shortest distance at 0.4 and M4 has travelled the longest distance with 3.7.

5.6.4. Main Wellbeing Semi-Structured Individual Results

Moving onto the individual results of the main wellbeing research, M1 is a twenty year old British student which is evidenced in Appendix: Demographic Data of Participants from Pilot and Main Wellbeing Interviews. In Figure 101: Participant M1 Main Wellbeing Interview M1 rates emotions as 1 in their baseline interview their reasoning for this is they struggle with their emotions regarding their parents but this improves over time evidenced in Appendix: Main Wellbeing Baseline Reasoning. In Appendix: Main Wellbeing Actions to Move to Desired Scaling evidences M1 arranged to spend more time with their parents. M1's parents were split up and they were struggling in particular with their relationship with their dad. After some discussion in this area M1 decided to arrange to meet their dad to play badminton and if and when they felt comfortable they could go for a drink with him after. M1 would have to be strong with their mum and let her know they love her but need to have contact with their dad too so they can make their own decisions about their father's behaviour. M1's scaling increased to a 6 in their latest review and they still want to move forwards to 9.

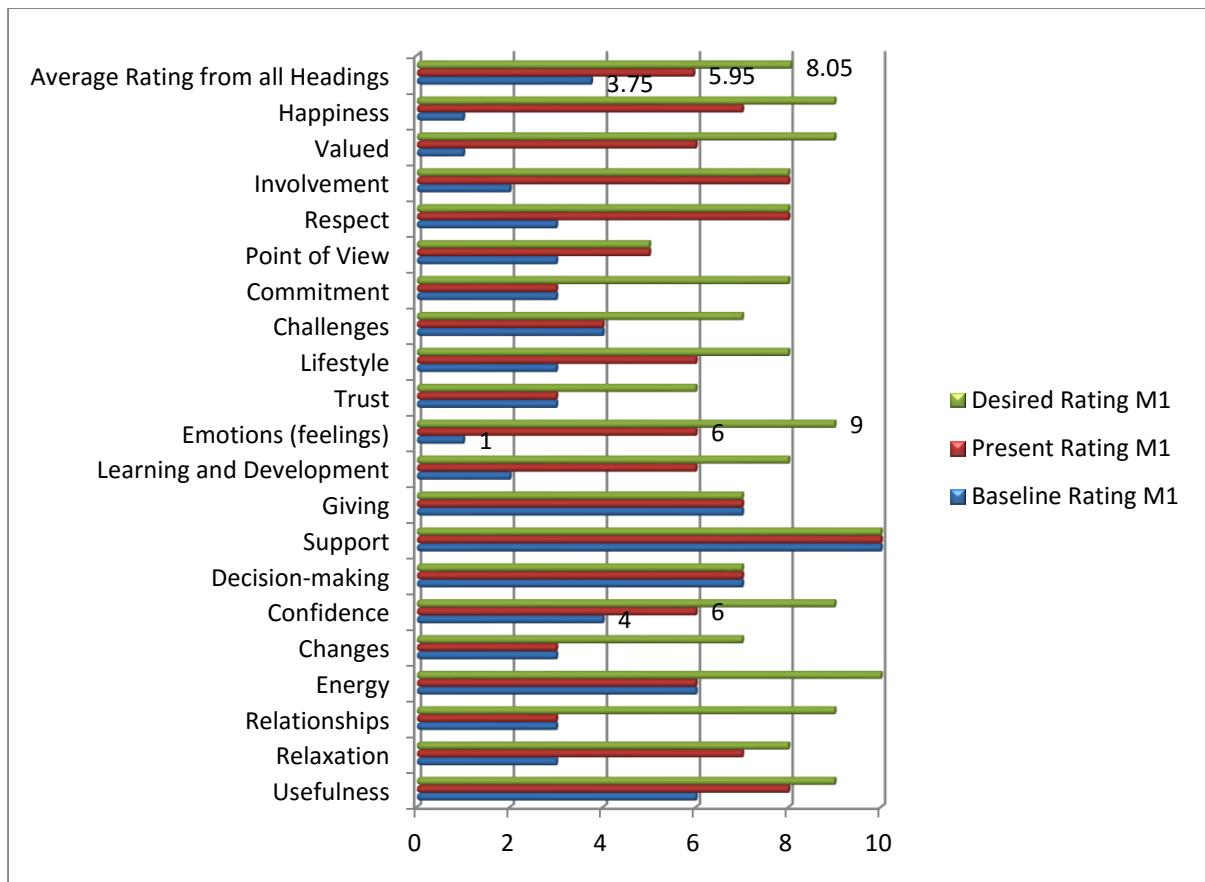


Figure 101: Participant M1 Main Wellbeing Interview

M1 percentages for emotions evidences 56% distance travelled to the present state and 44% to travel to the desired state. In Appendix: Main Wellbeing Community Participation Actions to Move towards Desired Scaling for emotions M1 did not think community participation could help in this area as the issue was his parents however once they revived his community participating at the swimming pool they felt much more useful and it helped improve relaxation, energy levels, coping with changes and their confidence level as well. M1 percentages for confidence evidences 40% distance travelled to the present state and 60% to travel to the desired state. M1 stated in Appendix: Main Wellbeing Baseline Reasoning that they used to sing in band and play the piano, they had confidence in music and speaking to people. M1's action to increase their confidence was to aim for a first degree which evidenced in Appendix: Main Wellbeing Actions to Move to Desired Scaling. A recent update call to M1 revealed that M1 is stressed with their work. I reminded them that they said singing and playing in the band helped them previously so they are going to try and link up with a band, as M1's prior band where all over the UK, to help build their confidence and help them relax.

The reason M1 did not add singing and playing in the band initially to help them was because the band is not together anymore.

M2 who is British and retired in their eighties evidenced in Appendix: Demographic Data of Participants from Pilot and Main Wellbeing Interviews. In Figure 102: Participant M2 Main Wellbeing Interview M2 rates emotions as 2 in their baseline interview their reasoning for this is they struggle with their emotions regarding the family but this improves over time evidenced in Appendix: Main Wellbeing Baseline Reasoning.

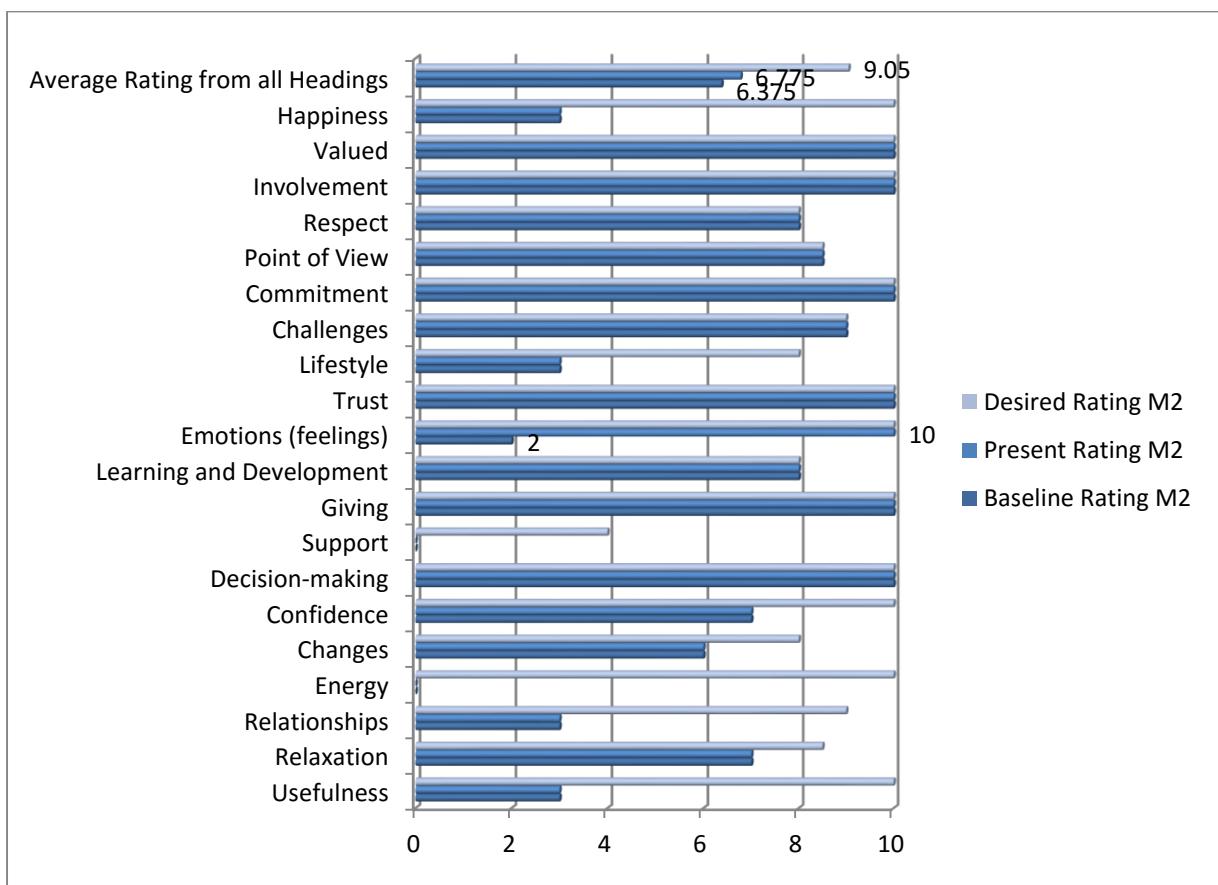


Figure 102: Participant M2 Main Wellbeing Interview

In Appendix: Main Wellbeing Actions to Move to Desired Scaling evidences they would never look backwards, always look forwards however they also arranged to spend more time with their family too which made a big difference in their latest formal review. They did set an action for requesting support from the family but they did not go through with it because they were worried if they asked for support the family would think they were not capable of watching the little ones. M2 has been a keen community participant in the past and really misses it but they are not physically able to get to organisations to help anymore. In their 242

review they had talked to the family and with her deceased partner and emotionally settled themselves to move and was looking at bungalows hence the increase from 2 to 10 in emotions and we arranged to review in a few months.

In the latest update they said they had just gone into a home rather than buying a bungalow due to a fall. M2 said they feel like their partner is still with them in the home and they still talk to them. M2 said they request support when they need it which M2 has never really been able to do. M2 has made some new friends and met up with an old acquaintance so they are content in the home and feel safer. M2 said although the family do come and visit M2 no longer looks after the grand/great grandchildren and misses that. M2 asked if they could run the bingo session at the care home and was told yes. They said they had spiced it up by asking the participants, relatives and workers to donate unwanted gifts, sweets, biscuits, etc., into a box for prizes. M2 loves this little role and it gives the staff/volunteers the opportunity to do other work so they useful. They said they were much happier and had people around them all the time now so they do not feel lonely. This update was given on the phone so there are no new ratings and sadly this participant passed away before a formal interview could be held.

M3 who is a disabled unemployed 34 year old from Pakistan which is evidenced in U Appendix: Demographic Data of Participants from Pilot and Main Wellbeing Interviews. M3 was concerned they might lose their benefits due to not being able to find suitable work. In Figure 103: Participant M3 Main Wellbeing Interview rates usefulness as 3 in their baseline interview their reasoning for this is M3 struggles with pressure and needs to be strong and have more confidence. M3 could not think of an action for this in their day to day life but did think that a community participation roll would help them in feeling useful and a number of other wellbeing areas. In M3s latest review they said they had started a community participation role in their local community centre which is helping M3 feel useful which has risen to 5. M3 also is improved in confidence from 2 to 7. Areas M3 thought they could not improve such as respect, commitment and giving which they gave a 10 previously have improved. They were grateful at their last review and treasured their community participation role which was seated work on a computer. M3 feels there is light at the end of the tunnel

and appeared extremely happy. They were hoping that this role would help them to find employment and the management committee said they would give a reference.

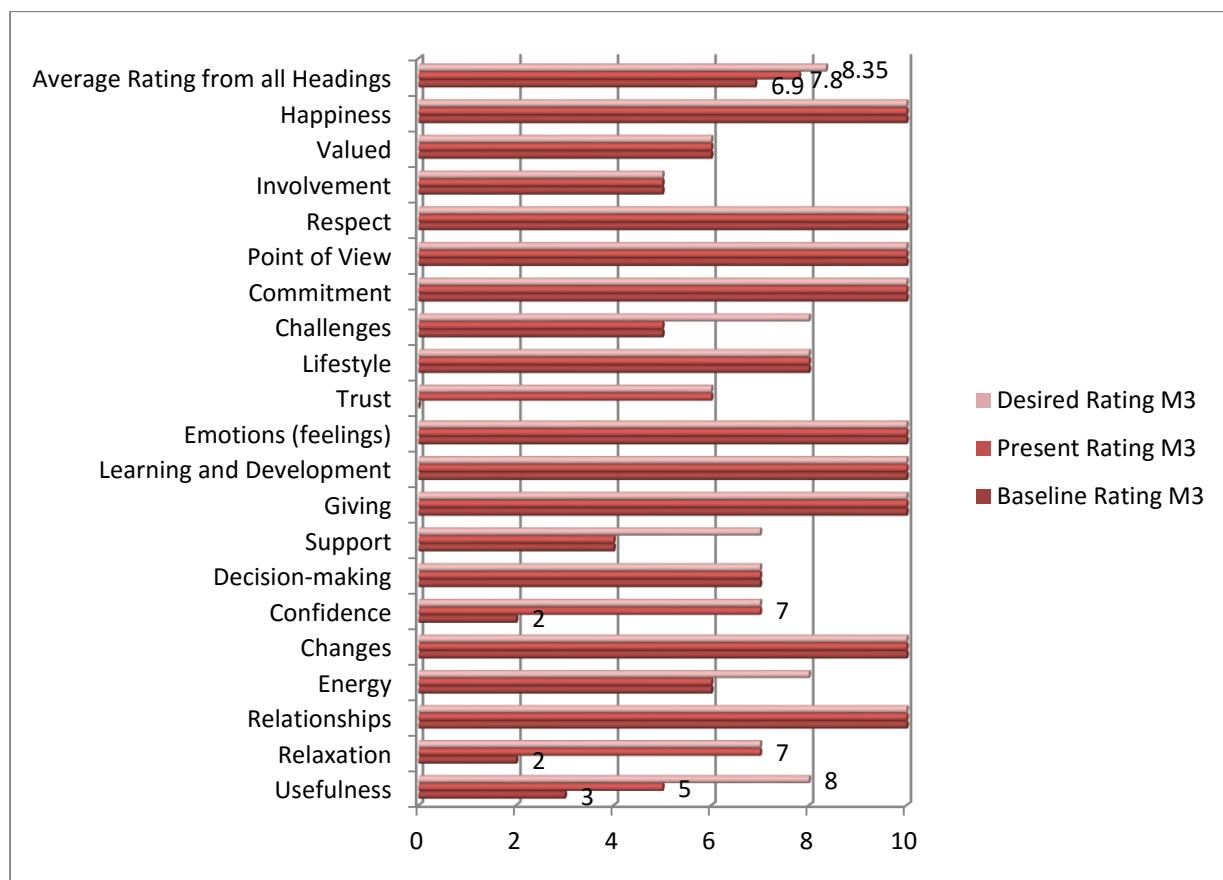


Figure 103: Participant M3 Main Wellbeing Interview

This is evidenced in VV Appendix: Main Wellbeing Baseline Reasoning, WW Appendix: Main Wellbeing Actions to Move to Desired Scaling evidences and Appendix: Main Wellbeing Community Participation Actions to Move towards Desired Scaling. M3 percentages for usefulness shows M3 has travelled 40% towards their desired state and has another 60% to travel to full achievement. M3 was grateful at their last review and feels there is light at the end of the tunnel and appeared extremely happy.

M4 is a retired British 63 year old which is evident in U Appendix: Demographic Data of Participants from Pilot and Main Wellbeing Interviews. In Figure 104: Participant M4 Main Wellbeing Interview evidences their average baseline as 4.5, their latest review at 8.2 and their desired average as 9.5. M4 rates their latest review for energy at 6 which is 60% distant travelled with 40% still to travel. M4 started swimming and increased the amount of time they community participate with the church which has increased their energy levels.

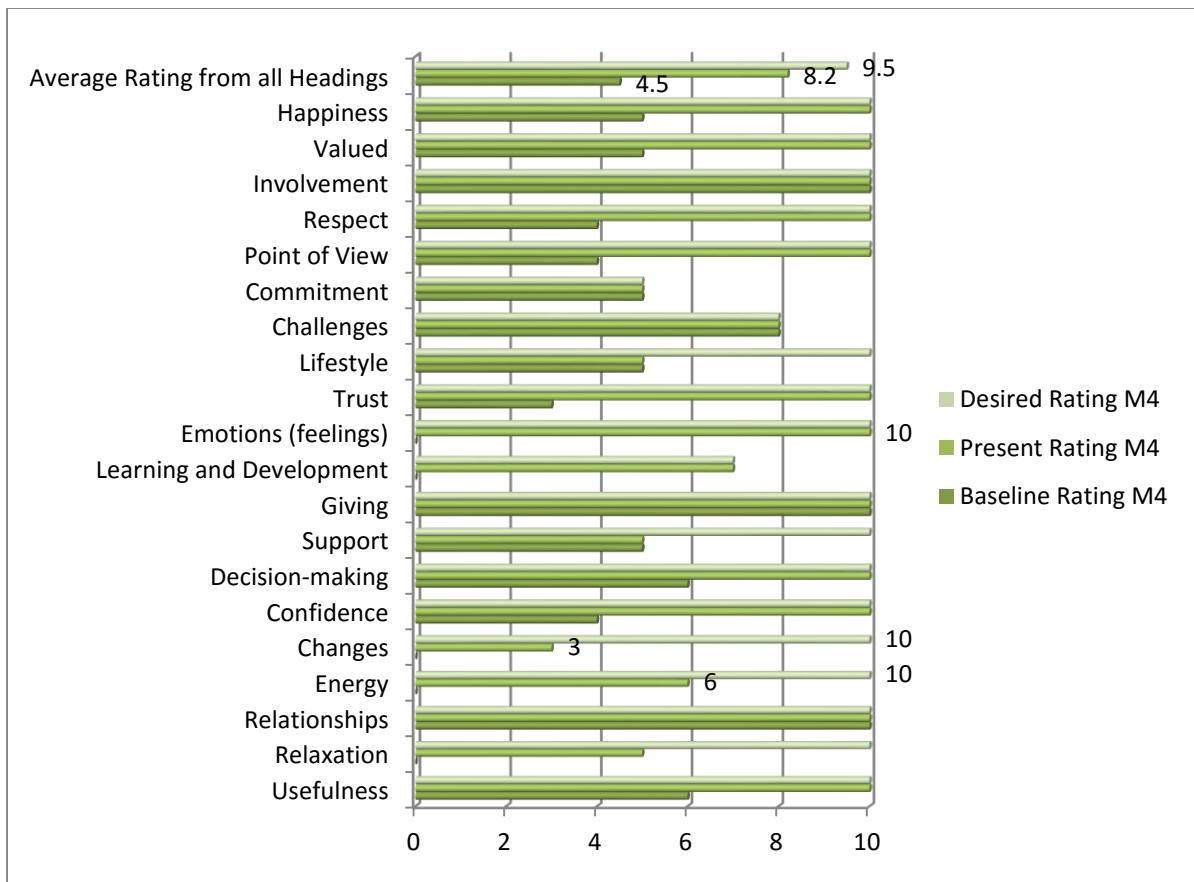


Figure 104: Participant M4 Main Wellbeing Interview

This is evidenced in Appendix: Main Wellbeing Baseline Reasoning. In Appendix: Main Wellbeing Actions to Move to Desired Scaling. In M4's baseline interview their reasoning for a zero with emotions is they struggle with their emotions regarding the family but this improves greatly at their latest review by giving a lot of time and energy to their daughter and granddaughter to help them move on and make some major decisions. M4 feels they have gained value in the family and has more awareness and respect for their daughter. M4 struggles with changes such as retiring and basically not having enough money. M4 feels they need to ask the family to help and not be afraid to ask. M4 manages to move to 3 or 30% in their latest review due to the support they gave their family but is worried if they ask the family for support it might cause problems again and M4's emotions are settled now so they were going to think about that one.

M5 is a part-time, British, employed 55-year-old. Figure 105: Participant M5 Main Wellbeing Interview evidences their overall wellbeing average baseline as 2.45, their latest review as 5.55 and their desired as 7.6. M5 was not happy about themselves and felt they

needed to get fit. They set the challenge of going swimming which they progressed and moved forwards and moved forward 2 in lifestyle and 3 in energy. M5 felt they had some issues with work and that it was knocking the passion out of them, they felt left out, their point of view was not being taken on board so M5 did not feel involved, valued or useful. M5 set themselves the challenge of arranging to chat to their line manager. M5 said they would try to look at things from their manager's point of view. This is evidenced in Appendix: Main Wellbeing Baseline Reasoning and in Appendix: Main Wellbeing Actions to Move to Desired Scaling. Their latest review looked much better, showing a 75% distance travelled and 25% left to travel.

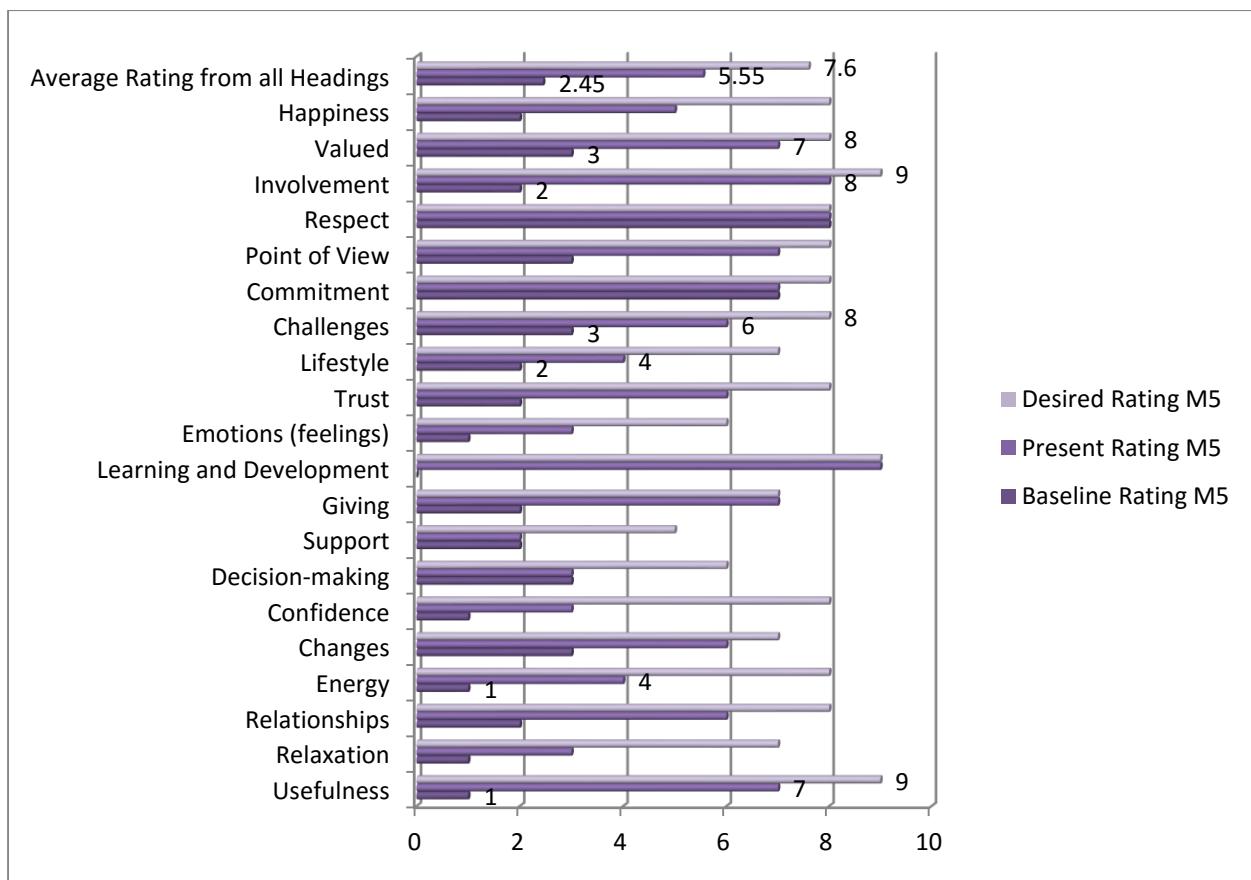


Figure 105: Participant M5 Main Wellbeing Interview

M5 had a great meeting with their manager and feels more valued now. They have moved ahead with their own community project and feel more useful evidenced in Percentages for Usefulness as they have move forwards by 74% with 25% to achieve.

M6 is a 22 year old student from Thailand. Figure 106: Participant M6 Main Wellbeing Interview evidences M6 feeling accomplished in involvement, respect, emotions, learning and development, giving and relationships. M6's baseline average scaling from all headings is 6.15, their present status as 8 and their desired as 9.

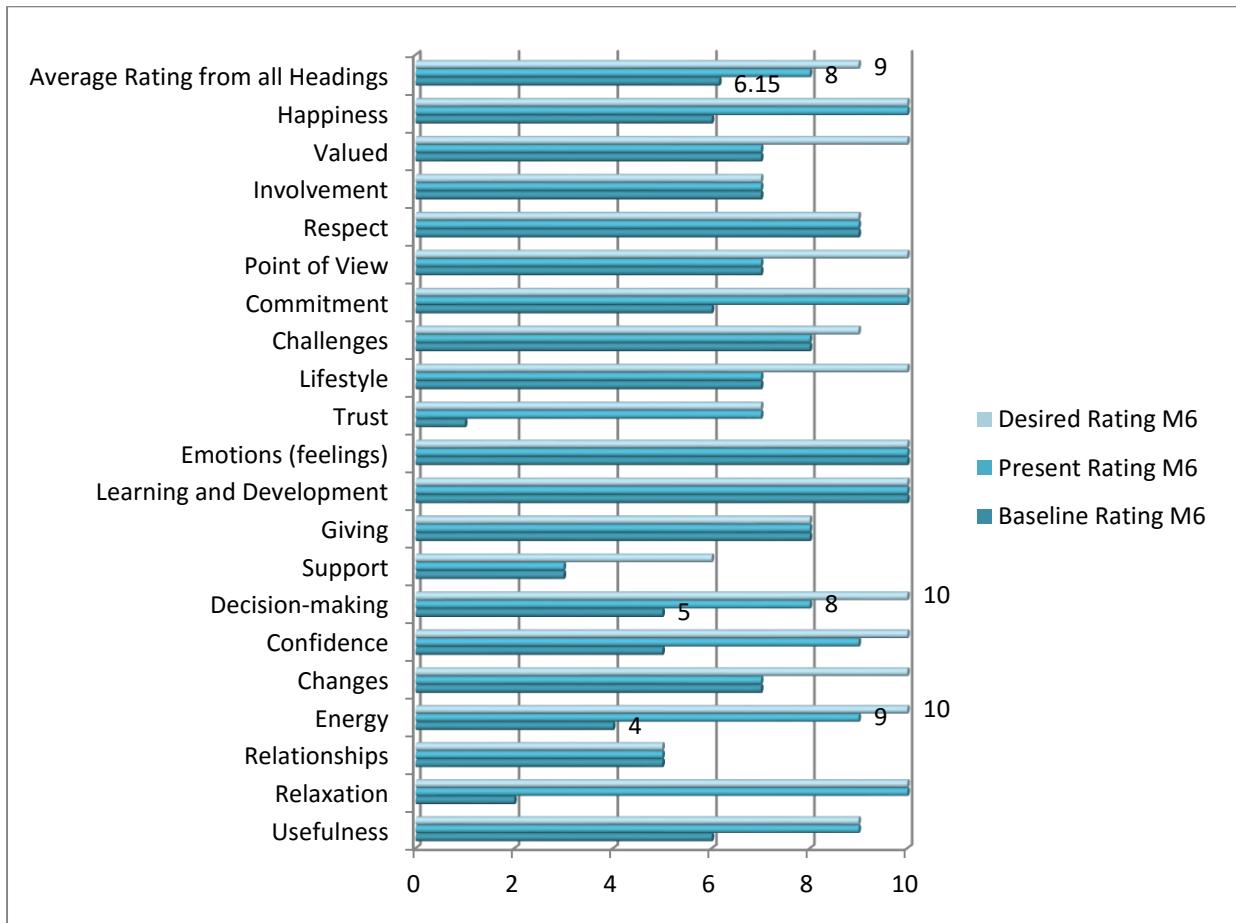


Figure 106: Participant M6 Main Wellbeing Interview

M6 rates their decision-making baseline as 5, their latest review as 8 and their desired as 10. M6 gained the 5 by reflecting on their responsibilities at work and taking pride in that to help make decisions. Participant M6's percentages in decision-making evidences their improvement in this area as they considered the relationship between themselves and the problem, what they should do and for what purpose which helped them move forwards 60%. M6 still has 40% to travel to their desired state and continues to use the same successful actions. This is evidenced in Appendix: Main Wellbeing Baseline Reasoning and in Appendix: Main Wellbeing Actions to Move to Desired Scaling.

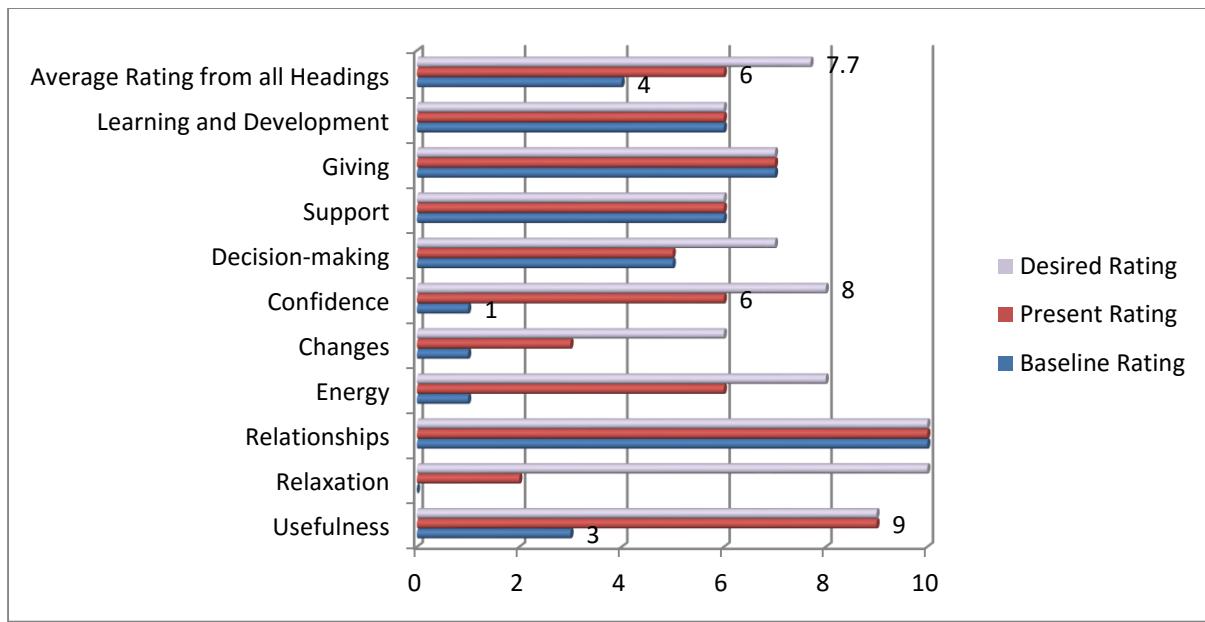


Figure 107: Participants M7 Main Wellbeing Interview

Participant M7 is British, unemployed and aged 51. M7 is a recovering mental health participant. M7 was concerned that they were going to lose their benefits and this was playing on their mind. They seemed to think that the interview might be linked to their benefits assessment. People with severe stress tend to focus on what is playing on their mind and struggle to focus on anything else so the initial interview only completed the first ten themed headings and the review followed suit. The initial theme on usefulness they managed to answer with reasonable ease as they proudly shared their community participation role. Figure 107: Participants M7 Main Wellbeing Interview evidences their average baseline scaling from all headings as 4, M7s present scaling as 6 and their desired as 7.7. M7 latest review shows a distance travelled from 6 to 9 which is 100% which they gained through their community participation role. Confidence is evidenced in M7 percentage for confidence with a 71% distance travelled in the latest review and 29% distance to travel to desired status. This was gained by meeting and speaking to people in their community participation role. This is evidenced in Appendix: Main Wellbeing Baseline Reasoning and in Appendix: Main Wellbeing Actions to Move to Desired Scaling.

5.6.3. Overview of Wellbeing Semi-Structures Interviews Demography from Pilot and Main Research

The breakdown of participant data can be found in Appendix: Demographic Data of Participants from Pilot and Main Wellbeing Interviews evidencing a split of 54% female and 248

46% male. It shows 77% of participants in the pilot are from Britain and the remaining 23% is shared equally between the Philippines, Thailand and Pakistan. The age divide for pilot and main wellbeing interviews shows that 15% are under 18 Years old, 39% are 19-36 years old, 15% are 37-54 years old, 23% are 55-72 years old, 8% are 73-90 years old and 0% are 91+ years old. The occupational divide for pilot and main participants shows that 31% of pilot participants are students, 23% are retired, 23% are unemployed, 15% are part time employed and 8% full time employed. The post code divide for pilot and main wellbeing interviews shows that 15% of pilot participants were from NE3, 31% from NE5, 31% from NE6 and 7% from NE8, 8% from NE20 and 8% from NE63. 85% of participants from the pilot and main wellbeing interviews in a community participation context were not disabled and 15% were disabled.

5.6.5. Overview of Pilot and Main Semi-structured Interview Results

Table 18: Overview of Pilot and Main Semi-Structured Interview Wellbeing Themed Results

Participant Coding	Wellbeing Themed Baseline Average	Wellbeing Themed Present Average	Wellbeing Themed Desired Average	Wellbeing Themed Average Distance Travelled	Wellbeing Themed Percentage of Average Distance Travelled
Usefulness	4.35	7.4	8.95	3.05	66%
Relaxation	2.4	5.8	8.55	3.35	54%
Relationships	5.7	7	8.35	1.3	49%
Energy	4.05	6.3	8.9	2.25	50%
Changes	4.65	6.45	8.3	1.8	52%
Confidence	4.05	7.05	8.45	2.95	69%
Decision-making	6.15	7.15	8.2	1	48%
Support	4.3	5.4	7.55	1.1	29%
Giving	7.25	8.3	8.7	1	81%
Learning and Development	6.45	8.4	8.9	1.95	75%
Emotions (feelings)	4.35	7.25	8.45	2.95	68%
Trust	5.1	7	8.05	1.9	41%
Lifestyle	5.2	6.15	8.35	1	34%
Challenges	6.2	7.2	8.25	1	47%
Commitment	7.25	7.85	8.6	0.6	45%
Point of View	5.7	7.6	8.2	1.9	77%
Respect	6.75	8.25	8.25	1.5	100%

Participant Coding	Wellbeing Themed Baseline Average	Wellbeing Themed Present Average	Wellbeing Themed Desired Average	Wellbeing Themed Average Distance Travelled	Wellbeing Themed Percentage of Average Distance Travelled
Involvement	5.75	7.6	7.95	1.85	85%
Valued	5.65	7.25	8.65	1.55	50%
Happiness	4	7.25	9.15	3.25	63%
Average of All	5.27	7.13	8.44	1.86	59.15%

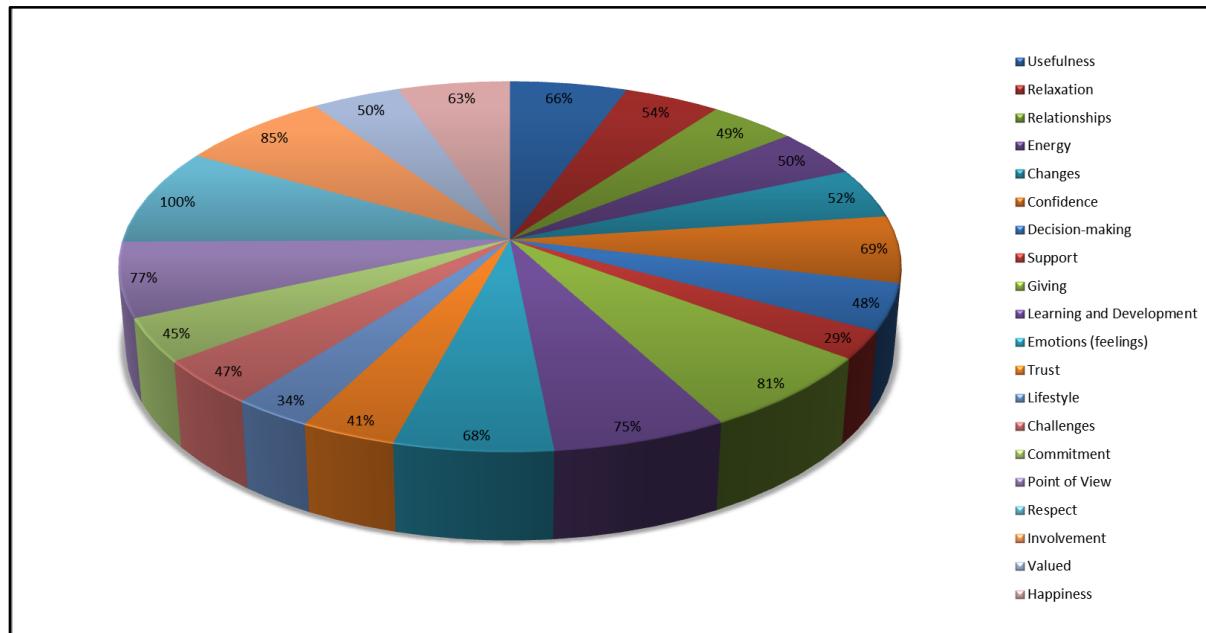


Figure 108: Average Desired Achievement from Pilot and Main Wellbeing Research

5.6.6. Main Wellbeing Questionnaire Results

The questionnaire was slightly changed from the pilot partly due to feedback in the pilot and to try and gain more information to support the development of an online system. The results are as follows:

1. a. Do you feel that the background information to the research was adequate? 100% said the background information was adequate.
- b. How might the background information to the research have been improved? No participants made any suggestions for improvements.
- c. Do you feel confident in using the scaling tool? 100% said they felt confident using the scaling tool.
- d. What might increase your confidence in using the scaling tool? No participants made any suggestions for improvements.

- e. Do you believe the scaling tool is useful for you? 100% believe it is useful to them.
- f. Any further comments on the scaling tool? The following comments were made:
- Helped provide numerical means of happiness.
 - Saying where you are, have been or the way to go is easy to visualise using the scaling tool.
2. a. Are the current headings within the life board frame of reference appropriate to you? 100% said the frame of reference was appropriate to them.
- b. How could the wellbeing frame of reference be improved? No participants made any suggestions for improvements.

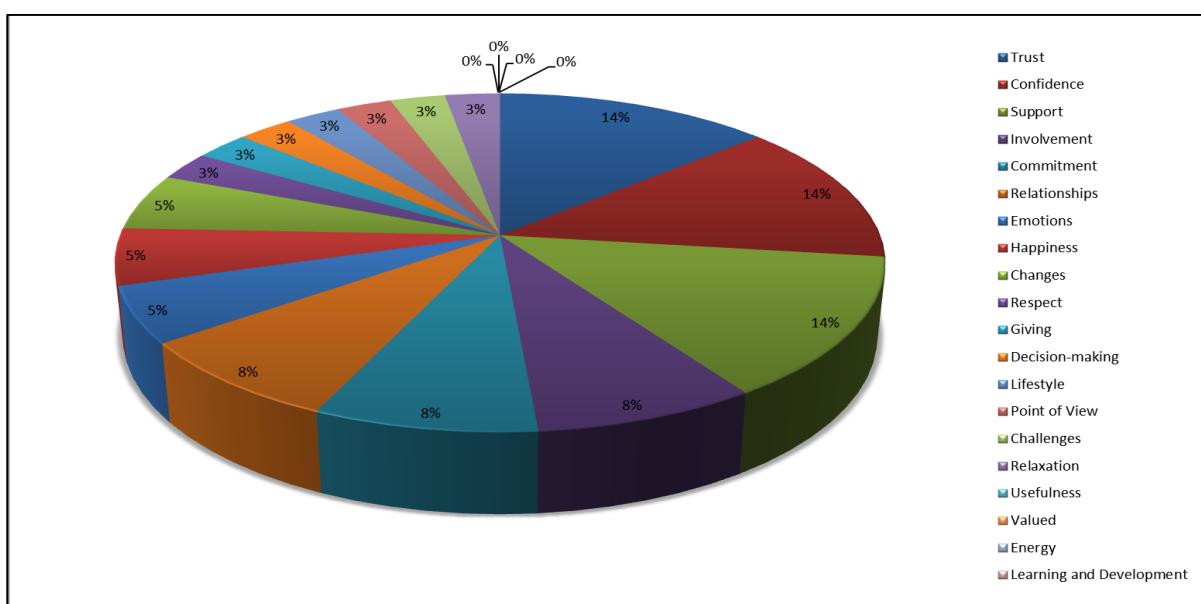


Figure 109: Top Wellbeing Themed Heading Preferences for Main Wellbeing Interviews

- c. Which are the 5 most important headings with regards to your wellbeing? Figure 109: Top Wellbeing Themed Heading Preferences for Main Wellbeing Interviews evidences that 14% chose Trust/Confidence/Support, 8% chose Involvement/Commitment/Relationships, 5% chose Emotions/Happiness/Changes, 3% chose Respect/Giving/Decision-making/Lifestyle/Point of View/Challenges/ Relaxation and 0% chose Usefulness/Learning and Development/Valued/Energy in their 5 most important headings.
3. a. Is the interview environment appropriate? 100% said the interview environment was appropriate to them.

- b. Were any of the following lacking – Privacy, space, time or comfort? 100% are happy with the interview setting.
4. a. Do you feel that the process helps you towards achieving your wellbeing aims and objectives? 71% strongly agree and 29% agree the process helps towards achieving their wellbeing aims and objectives.
- b. Do you feel that the process motivates you as you watch your progression through your distance travelled towards your goal? 43% strongly agree and 57% agree the process contributes to motivating them as they watch their progression through their distance travelling towards their goals.
- c. Do you feel that the process contributes to identification of priorities for support/intervention? 57% strongly agree and 43% agree the process identifies priorities for support/intervention.
- d. Do you feel that the process contributes to a new perspective on the current circumstances, and seeing the big picture? 29% strongly agree and 71% agree the process contributes to viewing a new perspective on current circumstances and seeing the bigger picture.
- e. Do you feel that the process contributes to identification of strategies that have worked in the past? 29% strongly agree and 71% agree the process contributes to identification of strategies that have worked in the past.
- f. Do you feel that the process contributes to exploration of options for the future? 29% strongly agree and 71% agree the process contributes to exploration of options for the future.
- g. Do you feel that the process contributes to a means of setting goals? 57% strongly agree and 43% agree the process contributes to a means of setting goals.
- h. Do you feel that the process contributes to a means by which you can take responsibility for your future? 29% strongly agree and 71% agree the process contributes to a means by which they can take responsibility for their future.
- i. Do you feel that the process contributes to a realisation of the progress/achievements you have already made? 43% strongly agree and 57% agree the process contributes to a realisation of the progress/achievements they have already made.

- j. Do you feel that the process contributes to a means of improving your self-awareness? 43% strongly agree and 57% agree the process contributes to a means of improving their self-awareness.
- k. Do you feel that the process contributes to a means of improving your confidence? 29% strongly agree and 71% agree the process contributes to a means of improving their confidence.
- l. Do you feel that the process contributes to a means of improving your self-esteem? 14% strongly agree and 86% agree the process contributes to a means of improving their self-esteem.
- m. Do you feel that the process contributes to a measure of your wellbeing indicators? 29% strongly agree and 71% agree the process contributes to a measure of their wellbeing indicators.
- n. Do you feel that the process contributes to a contribution to your action plan? 57% strongly agree and 43% agree the process contributes to their action plan.
- o. Do you feel that the process contributes to recording documentation that is easy to use? 43% strongly agree and 57% agree the process contributes to recording documentation that is easy to use.
5. a. Would you feel comfortable using an automated computerised system? 29% strongly agree 43% agree 14% neither agrees nor disagrees and 14% disagrees they would feel comfortable using an automated computerised system which is shown in Question 5a - I would feel comfortable using an automated computerised system.
- b. What kind of background music would you like? Shows 57% said any music, 29% said none and 14% said Mozart.
- c. Question 5c - What kind of screen background would you like? Evidences 57% of participants said any, 15% countryside, 14% lake and 14% beach.
- d. Would you have a preference of voice? 57% prefer a voice and 43% have no preference.
- e. If yes which gender? 14% prefer a female voice and 86% would accept either male or female.
- f. Do you have an accent preference? 100% said they had no accent preference
- g. Would you prefer to be interviewed by an interactive character which can laugh and react to you on the screen or would you feel happy just having a voice? Question 5g - How

would you prefer to be interviewed? Shows 43% said they were happy with either, 29% said just a voice, 14% requested printed on the screen no voice and 14% prefer face to face interview.

- h. Would you like a relaxation exercise at the beginning or during the process? 57% would prefer a relaxation exercise and 43% are not bothered.
 - i. Would you want to be able to save/print your action plan? 100% of participants want to be able to save and print their results.
 - j. Would you want to be able to measure your distance travelled? 100% want to be able to measure their distance travelled.
 - k. Can you suggest anything else to support the interview online for you? No suggestions for improvement were given.
6. a. Would you be interested in reviewing your distance travelled with a further interview in the future? 86% would like further interview/s.
 - b. Would you be interested in updating your interview with the online version once it is completed? 71% are interested in using a trial online interview.
7. Any other comments? No comments were made.

5.6.7. Overview of Pilot and Main Wellbeing Questionnaire Results

- 1a. 100% of participants feel the background research information is adequate.
- 1b. How might the background information to the research be improved? No participants made any suggestions for improvements.
- 1c. 100% of participants feel confident using the scaling tool.
- 1d. What might increase your confidence in using the scaling tool? No participants made any suggestions for improvements.
- 1e. 92% of participants feel the scaling process is useful to them.
- 1f. Participant comments are “it helps provide numerical means of happiness”, “it helps saying where you are, have been and want to go” and “it is easy to visualise using the scaling tool”.
- 2a. 92% of participants feel the wellbeing headings are appropriate to them.
- 2b. For an online version the participants recommend to have assistance with further explanations, e.g. explain that a relationship can be family, friends, work colleagues, etc.

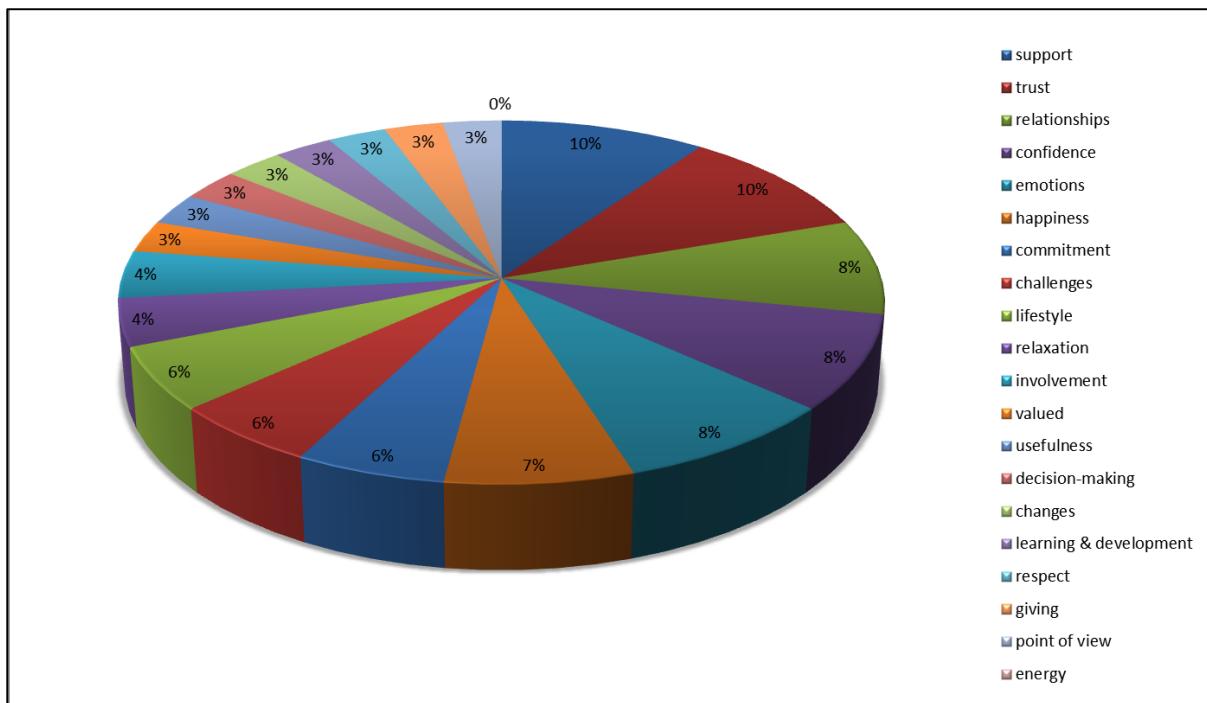


Figure 110: Top Wellbeing Themed Heading Preferences for Pilot and Main Overview of Wellbeing Interviews

2c. The top wellbeing themed headings preferences are shown in Figure 110: Top Wellbeing Themed Heading Preferences for Pilot and Main Overview of Wellbeing Interviews with 10% for support and trust, 8% for relationships, confidence and emotions, 7% for happiness, 6% for commitment, challenges and lifestyle, 4% for relaxation and involvement, 3% for valued, usefulness, decision-making, changes, learning and development, respect, giving and point of view and 0% for energy. The only wellbeing heading not to be picked in participants top 5 was energy although it was initially chosen by a M2 but dropped when she realised she had chosen 6 headings instead of 5.

- 3a. 100% of participants feel the interview environment is appropriate to them.
- 3b. Were any of the following lacking – Privacy, space, time or comfort? 100% of participants are happy with the interview setting.
- 3c. Participant suggested feedback comments are if the interview is online people should be asked to find a quiet relaxing place, e.g. scented candles, etc. and have an option to skip a question or go back.
- 4a. 100% of participants agree a little up to strongly agree the process helps towards achieving their wellbeing aims and objectives (NB in the pilot research they were asked a little - considerably and in the main research they were asked if they agree/strongly agree so amalgamated).

- 4b. 83% of participants say yes they feel the measure of movement will be useful to them and 17% say no it will not.
- 4c. 92% of participants agree or strongly agree and 8% disagree the process motivates them as they watch their progression through their distance travelling towards their goals.
- 4d. 58% of participants strongly agree 42% agree the process contributes to identification of priorities for support/intervention.
- 4e. 85% of participants strongly agree 15% agree a new perspective on your current circumstances, and seeing the big picture.
- 4f. 85% of participants strongly agree 15% agree the process contributes to identification of strategies that have worked in the past.
- 4g. 34% of participants strongly agree, 58% agree, 8% neither agree nor disagree the process contributes to the process contributes to exploration of options for the future.
- 4h. 46% of participants strongly agree 54% agree the process contributes to a means of setting goals.
- 4i. 23% of participants strongly agree, 62% agree, 15% disagree the process contributes to a means by which they can take responsibility for their future.
- 4j. 38% of participants strongly agree, 62% agree the process contributes to a realisation of the progress/achievements they have already made.
- 4k. 38% of participants strongly agree, 62% agree the process contributes to a means of improving their self-awareness.
- 4l. 16% of participants strongly agree, 69% agree, 15% disagree the process contributes to a means of improving their confidence.
- 4m. 15% of participants strongly agree, 62% agree, 23% disagree the process contributes to a means of improving their self-esteem.
- 4n. 31% of participants strongly agree, 69% agree the process contributes to a measure of their wellbeing indicators.
- 4o. 46% of participants strongly agree, 54% agree the process contributes to their action plan.
- 4p. 31% of participants strongly agree, 69% agree the process contributes to recording documentation that is easy to use.

- 5a. 15% of participants strongly agree, 69% agree 8% neither agree or disagree and 8% disagrees they would feel comfortable using an automated computerised system
- 5b. 57% of participants would any kind of music, 29% none and 14% Mozart.
- 5c. 31% of participants would like any background, 23% countryside, 7% lake, 23% beach, 8% mountain and 8% plain.
- 5d. 46% of participants have a voice preference and 54% have no voice preference.
- 5e. 17% of participants prefer a female voice and 83% say either.
- 5f. 92% of participants have no accent preference and 8% accent preference of a funny voice
- 5g. 15% of participants for an online interview prefer an avatar, 38% either, 31% just a voice, 8% printed no voice and 8% prefer a face to face interview.
- 5h. 57% of participants prefer relaxation exercise and 43% are not bothered.
- 5i. 100% of participants would like to be able save/print their interview data.
- 5j. 100% of participants would like to be able to measure their travel. Nobody suggested any improvements.
- 5k. No participants could suggest anything to support an online interview.
- 6a. 86% of participants would like a further interview in the future.
- 6b. 71% of participants are interested in using an online version of the interview.
- 7a. No participants gave any other comments.

5.7. Conclusion

The twenty wellbeing themes are corroborated with the academic literature, validated with the daily use in the spiritual reflections. The open interviews confirms the wellbeing connection further. The unique views of community participants and community managers validates the social interactions and the paradigm of oneness. This evidences that further awareness is necessary in wellbeing needs in this instance with community participation as some themes are evident from totally different priorities and viewpoints from community participants and managers. The pilot semi-structured interviews with their unique tipping points in this instance for community participation prove to be useful in supporting individuals to move forwards in their wellbeing. The pilot identified minor issue regarding language. The main interviews take on board the results from the pilot and TOI by adding

language clarification, alterations recommended for the questionnaire, signposting and examples of anonymous experiences. The questionnaires and other forms of feedback show positive approval of the process and distance travelled data shows positive movement forwards. It also captures stressful times in individual's lives, supports them to recognise issues and reflect on prior skills to move forwards quickly. The pilot and main semi-structured interviews and supporting questioning take on board issues regarding information communication system development. There is clearly an interest in a public use online system in a number of formats. Those struggling with mental health could particularly benefit from being able to dip in and out of an online system to suit their needs. Just as the world is complex and may issues interlink so often do the responses to several themes which again motivates people to strive for more. Wellbeing is not about personal gain. P3 focuses his life on personal gain and even in his response to usefulness he said "he felt he was very useful to others" but then followed that by a negative of "but they are never grateful". There needs to be rules of engagement and reminders with any future information communication system so that only positivity is used and recorded. We cannot read people's minds and we do not know just because someone has not said something that they are not grateful. People need to feel pride because they have been useful to someone and leave the thought at that. It means retraining your mind. Meditation, mindfulness and mindsight are good ways to support this journey (Germer, 2009; Johnstone, 2012; Siegel, 2010b). It is not easy to meditate but it is a useful process to regularly participate in and helps to move away from the focus of negativity (Hooge, 2014; Johnstone, 2012).

The semi-structured interviews show a progressive reduction in variance from the baseline to the desired focus via the present status. This could be due to the wide spectrum of uniqueness spread throughout the research (Salvatore, 2013). People's minds are too busy with thousands of other things distracting them (Dimitrov, 2003). As we learn to master our wellbeing the variance progressively reduces as we learn to focus, manage and control our wellbeing (Wolfgang, 2011). The participants have a clearer picture of what they would like and the actions of how to get there as they learn what works well for them. What interacts with the mind, brain and social interactions causes responses similar to Figure 13: Complex Adaptive System for Wellbeing Community Participation (adapted from McElroy, 2003). For each theme and tipping point this complex process takes place and often with a constant

influx of additional information. Basically each individual designs their own path or route in life. The semi-structured interview supports individuals to relook at the start of their path to reflect and understand the successes and redesign their route appropriately taking on board behavioural change so as to enhance their wellbeing and others.

Organisations could learn and develop or redesign the way they work using the same process, e.g., someone entering into a care home may need to feel useful. That could be calling out the bingo numbers or being part of a history group. Everyone is unique and all have different needs. Some of those needs might match numerous others but all their needs and past experiences will not match and what they can cope with or ability will match. It's like making a patchwork quilt where all the pieces are not the same size. Whoever is making it will mix and match till they are happy with the design so they feel motivated and in control of their destiny. Organisations need to understand more about the people within and their needs (Brooks, 2009; Burnes, 2009; Fernandez, 2011). Having happy staff, patients, participants, clients, members, students, etc. means supporting them to design a positive route which takes their needs and the needs of others into account (Seligman, 2003). People give a lot more when they feel they are part of the decision making even if they do not get what they fully want (Goleman, 1996). Throughout this research complexity and design have played an interconnecting role just as they do in day to day life (Johnson, 2005).

The questionnaires are showing a clear interest in an information communication system utilising this wellbeing process with lots of optional choice so people can design their own unique wellbeing route with a motivational set up.

Chapter 6: Framework for Introduction of Wellbeing in a Community Context

6.1. Introduction

The purpose of this chapter is to explore the resulting formations of wellbeing thematic connections, verify insights gained from the literature, the open interviews and spiritual reflections. The mini case studies have given a good insight into wellbeing issues and how they affect individuals. They also evidenced the importance of creating the right focus, e.g. positivity. What you focus on grows. Focus on positive actions. Complexity is evidenced throughout this research with the paradigm of oneness as a continuum (George, 2014). Thoughts are subjective to participant's conception and their complex interconnections. The route for this research was complexity which uses design for clarification. Participants uniquely design their wellbeing routes utilising in this instance community participation tipping points. The paradigm of oneness is prevalent with all the local social interactions connecting and flowing within the community. The process encompasses the complexity and subjectivity of individuals mind, body and spirit whilst encouraging participants to reflect, self-assess, interpret and design their own route to wellbeing. The semi-structured interview process is analysed, validated with theorematic deduction and hermeneutical qualitative data which is interpreted to educe a conceptual framework for wellbeing in a community context and the recommendations for a wellbeing information communication system.

6.2. Wellbeing Themes

The twenty wellbeing themes evident on page 211 connect with academic literature, spiritual reflections and open interviews via theorematic and hermeneutical deduction. Wellbeing as portrayed in Chapter One in the History of Wellbeing evidences a focus on wellbeing for thousands of years, from the beginning of mankind, with documented evidence from the early years of life around the Nile and the observations of philosophers such as Aristotle (2009), Democritus, Plato et al (2007) and Socrates (Bergdolt, 2008; Kraut, 2007). Moving on to the last century we had Maslow with his established hierarchy of needs and in his later years an understanding of transcendence where you interact with others in a positive, caring, reflective and understanding way (Maslow, 2010, p.30). There was greater understanding of attachment theory with Bowlby (2005a), Siegel and Bryson (2012) evidencing that attachment can have a major effect on people throughout their lives. The

developing evidence about the effect of appreciation, gratitude and positivity which has been an inspiration in this research (Cooperider & Whitney, 2005; Seligman, 2003; Siegel, 2013; Whitney & Trosten-Bloom, 2010). Meditation, mindfulness and living in the now which have been used in many ancient practices such as Buddhism are now more fully understood with how the brain reacts to these from psychologists such as Kabat-Zin (2005), Siegel (2012b) and spiritual teacher Tolle (2005, 2011). These can be used to help calm the mind and reduce stress. How wellbeing effects organisations has been heightened by specialists such as Goldratt (2008), Rath & Harter (2010) and the Beth Johnson Foundation (BJF, 2011). Positivity releases chemicals into the body which have positive effects and negativity releases chemicals that have a negative effect on your body. Positivity, respect and understanding of behaviour and points of view are just a few pointers of great importance in organisations (Brooks, 2009). Psychological prosperity and positivity can develop from societal networks, in particular those that actively support the development of quality relationships such as spiritual, religious, community organisations and specialist online groups (Aristotle, 2009; Culliford, 2011; Maslow & Lowry, 1999; Siegel, 2015). How it affects communities has been advanced by specialists such as Burns & Taylor (2001), Gilchrist (2009) and Putnam, Feldstein & Cohen (2005) who impart evidence of the local habitat or community offering quality and fulfilment of life. Wellbeing is complex with its social interactions of past and present; interplay between subjective and objective factors; the focus of the mind, lifestyle and many other pointers. This complexity is also recognised in Siegel's (2007) Mindsight Wheel of Awareness.

The twenty wellbeing themes evident in the literature correlate with the open interviews in both functional and dysfunctional organisations throughout the transcriptions. They were not always mutually connected sometimes at opposites but definitely connected and can have a major effect on individual's wellbeing. The twenty themes were relevant for all the participants whether it was a positive or negative connection. When wellbeing themes are against each e.g., community participant and manager, evident in the dysfunctional organisation interview. This clearly helps to prove the need for a wellbeing information communication system to benefit community participants, managers and community organisations as a whole.

The research within the literature review (1.2. History of Wellbeing, 4.1. Literature Review), the spiritual daily reflections Figure 78: Spiritual Daily Reflections & the Wellbeing Themes and the community open interviews Figure 83: Differences in Themed Usage between Community Participants and Managers evidences that the 20 wellbeing themed areas identified below positively connect as key themes throughout each area:

- | | |
|----------------------------|-------------------------|
| 1) Usefulness | 11) Emotions (feelings) |
| 2) Relaxation | 12) Trust |
| 3) Relationships | 13) Lifestyle |
| 4) Energy | 14) Challenges |
| 5) Changes | 15) Commitment |
| 6) Confidence | 16) Point of View |
| 7) Decision-making | 17) Respect |
| 8) Support | 18) Involvement |
| 9) Giving | 19) Valued |
| 10) Learning & Development | 20) Happiness |

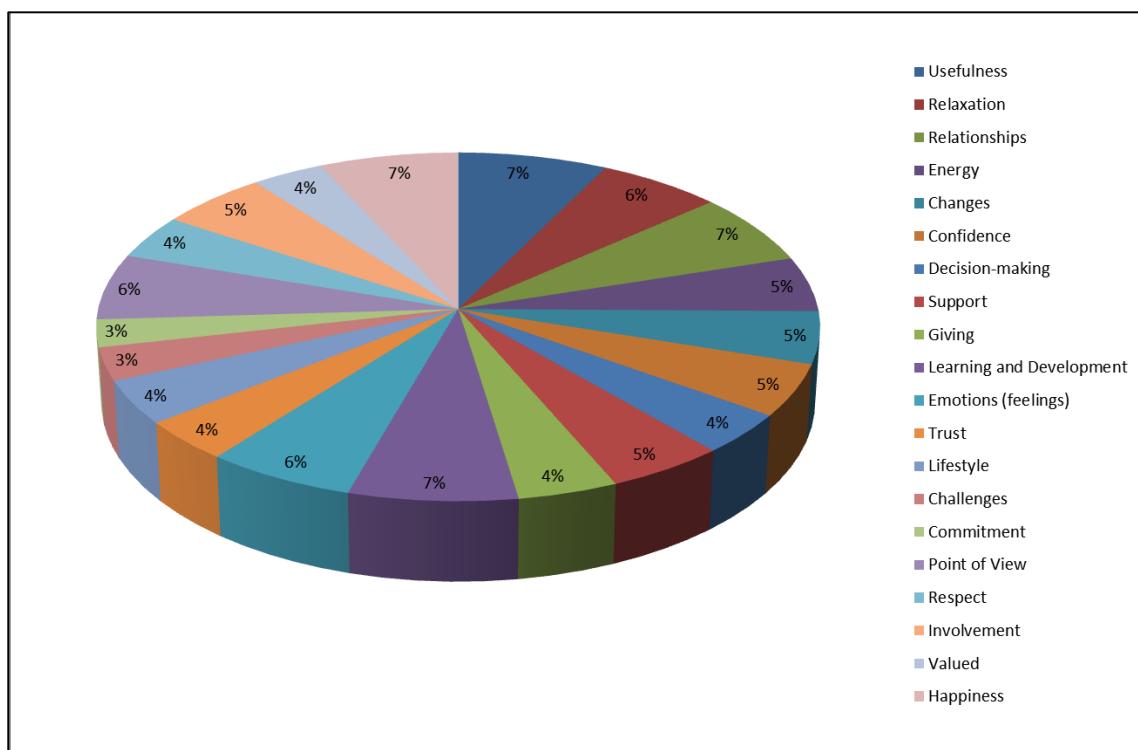


Figure 111: Average Percentage of Wellbeing Themed Usage across Wellbeing Research

Figure 111: Average Percentage of Wellbeing Themed Usage across Wellbeing Research evidences all wellbeing themes are between 3% and 7% of usage across the open interviews, pilot and main wellbeing semi-structured interviews. This shows that all heading in the wellbeing theme are important and useful to participants. Even energy which was not chosen in anyone's top 5 choices has been used by 5% which is not the lowest usage as this was claimed by challenges and commitment. This graph could vastly change with larger numbers of participants.

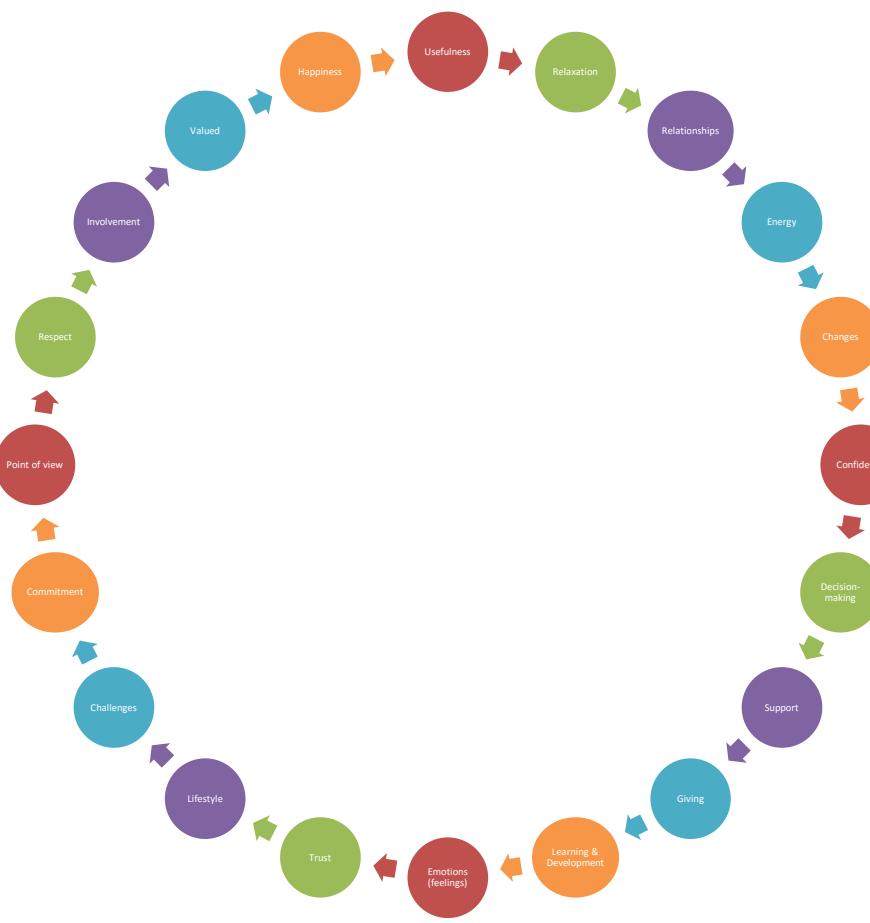


Figure 112: Themed Wellbeing Wheel

The wellbeing themes portray the wheel of wellbeing seen in Figure 112: Themed Wellbeing Wheel. All the wellbeing themes need to be included for everyone as the themes that rate highly now are obviously well managed by that participant and the way they manage it may be transferrable to another theme. If you fall back at a later date it is much easier to move forward knowing and understanding how well you have managed this area of your wellbeing. Sometimes one action can cause a ricochet of multiple improvements over the

wellbeing themes and other times several actions are needed to make an improvement in just one theme. This is evident in the discussions in both the open interviews and the wellbeing interviews. Viewing this and monitoring the effect of actions helps us to master the way we live our lives and how it affects others.

This highlights the need for managers to understand their community participants needs and not to use them to do work they do not want to do themselves without checking their ability. Interesting was the fact that the manager had started as a community participant in that organisation as they wished to gain from a post by travelling thus changing their lifestyle and giving them some happiness. They gained a feeling of value and respect from being able to make major decisions. They felt they gained from the positive energy of the founder of the organisation and learnt how to meditate and relax. The key things they wanted and were given by the founder of the organisation were the key things they did not give to their community participants. People need to reflect and understand their own development actions so they can support new community participant's needs. It is important to look at others points of view ensuring they feel valued and respected, allow them to make decisions and share your positive energy.

In the mini case study there is a discussion about being extremely stressed due to taking on board a community participant role to set up and out of school club. The community participants coped with the stress by living on the successful achievements of setting up each new section of the club. Once the club was fully set up there was no more to achieve so the community participants started to feel the stress more and missed the time they lost with their families and so they inspected and interviewed 8 other club owners before transferring the club and regaining their free time.

Notably relaxation, lifestyle and happiness do not always match between managers and the community participants. This is natural as managers are looking at the business instead of looking at it from the community participant's point of view. This is often the same in businesses and is where managers are asked to look at the workers point of view, to know and understand your team and their needs (Dewe & Cooper, 2012; D. Norman, 2002; Wodzianski, 2008b). In reality you can see this kind of relationship in many places such as the pupil-teacher, student-lecturer relationships. All the themes have and do entail daily

interaction for the human race over thousands of years and give focus to people's identity, self-evaluation, behaviour, emotion, values, beliefs, service and confidence. People need to feel useful, have a balance of relaxation and challenges. Individuals need interaction with people to feel involved. They need to earn respect by giving it. They need to embrace change and adapt by learning and developing. They need to embrace a satisfactory lifestyle to feel happy, trust to be trusted and value people to feel valued. People need to have and share their positive energy and to use it effectively to benefit all. People need to be able to make decisions by understanding everyone's point of view. They need to make commitments and fulfil them to feel the emotions and pride when they achieve and give/share with others. They also need to be able to accept support and build up confidence. These mix of wellbeing themes and how they support wellbeing overall are never ending and are unique to individuals.

The twenty wellbeing themes are also clearly recognised within the spiritual domain in directing people to lead positive spiritual lives see Appendix: Daily Reflections Wellbeing Themed Table. This can also be related to religion and community spirit. People regard these stories in different ways. In the spiritual domain many participants meditate both early morning and evening (Larry Culliford, 2011). Both spiritual and religious organisations generally meet at least once a week to share their practice. This is a time to share their positive energy, support and teach each other. Usually a story is told with a message directing participants to think about their behaviour and recommending an appropriate route and or change in behaviour. Smaller groups often discuss these to help them understand the true meaning. Meditating is a time of peace and tranquillity, of calming the mind which is why often people say they got an answer to an issue. This is because you clear your mind and allow a fresh look at any issues as you come out of your meditation. The wellbeing wheel of awareness works in a similar way. Participants are asked to relax sit up with a straight back, the same way people meditate. You are asked to focus your attention on your breathing, feel the heightened awareness of the breath, you then focus on sounds, any taste in your mouth or smell in the air, moving on to the body and where it is interconnected with the floor, seat and your clothes. You work through a relaxation of the whole body process including internal organs until your body is at a natural state. This initial process is about relaxing and clearing or cleaning the mind and body. This is the same way that participants start when meditating.

When people meditate they try to stay in this natural state and keep their mind clear and free. So these differing relaxation processes mutually connect. However these routes take time to master. For those whose minds are stressed and overactive it can take years to master. The wheel of awareness having worked through sensations and observations into the river of consciousness adds in experience, reflection, perception, mindsight, understanding others feelings, conceptualisation, the known and finally working through into the hub and mindful awareness (D. J. Siegel, 2007b, pp.74-75). This is an excellent route for wellbeing but again can take time to master. The wellbeing interview works through a similar process but more quickly by using reflection, self-measuring, goals and achievement as a motivator. The wellbeing interview route can also use relaxation exercises as and when needed along with other sensational tools such as colour, pictures and music. Meditational practice can also be recommended as a tool to calm the mind and improve health in the longer term. Often people need to be able to see quickly where they are and identify a route forwards. The wellbeing interview gave this on all cases in this research which shows a positive, mutual Connection in both the pilot and main wellbeing interview studies.

The way the wellbeing themes are utilised varies and how often varies with individuals having unique experiences in the past and present; and having different needs and aspirations for the future. Some people may never see issues of need under a wellbeing theme and others may constantly see their being issues in that wellbeing theme. To community managers and community participants again the wellbeing themes are evidenced as playing a key role. The importance of each theme varies to community participants and managers depending upon the culture, service and role they are involved in. When community managers were asked what they needed from community participants they were clear that they needed to have a strong interest and someone to make a commitment to their community organisation, they needed to respect the existing members and to both give and show trust (George et al, 2012). The detail given from the community participants regarding their interactions with community organisations over time is showing that each wellbeing theme moves up and down with order of importance depending upon what is happening in their life. They could see how differing roles have helped them at different times of their lives. They took pride in the support they have or are giving. Some clearly took on roles to support them at that point in their life, e.g. experience to gain employment, to gain excellent affordable childcare or to

be around people to help them move on in their life. Some community participants created additional stress for them to participate in the community and still saw the benefits and took pride in what they achieved. So by achieving and gaining that feeling people take on additional stress. They also gained respect from others which also gives a feeling of positive energy from others as they are grateful, respectful and happy with those giving time and energy to support them. This is positive energy which is evident as creating a drive and wellbeing feeling to help individuals move forwards and keep supporting others as well as themselves. The wellbeing themes mutually relate and connect establishing an orderly connection between the literature review, the daily reflections and the open community interviews.

Spiritual and/or religious reflections are helpful in getting people to reflect on their behaviour but not on how they should do it. The reflections are usually told in a story format that comes from the master or god of your choice. This can often be cryptic for people especially those struggling with mental health issues by stress or ability as they can't work out the meaning of the story. The stories are also subjective to the person and their line of thought and what they gain may not be what was originally intended from the lesson. Plain simple language stops confusion in comprehension.

In the open interviews the language was left to the person talking and encouragement was given from the interviewer when clarification was needed or when relating to what was being said. It was relaxed, natural and open conversation. People were not asked to stick only to positives as understanding the negatives people hold can help to counteract these issues before they appear for others. It also helped to structure the way questions are asked under each wellbeing theme so as to encourage positivity.

6.3. Interview Process

The literature review, spiritual reflections and open interviews paved the way to the structuring of the themes in the semi-structured interviews to promote wellbeing development. The interviews are proven to enhance motivation by individuals reflecting upon their prior successes. The emotion developed taking pride in those successes is converted into motivation by capturing and identifying with new actions for wellbeing development. Where participants could not think of a useful action to benefit themselves under that theme the

participants took the community participation tipping point as a new approach to act and move forwards.

Reflection, the setting and measuring of goals and recognition of achievement play a key part in motivation (Rollnick, 2008). This is proven in the semi-structured interviews and verified with the questionnaires from the research. There are several tipping points with each theme as the participants are motivated by the recognition and understanding of the small steps they took in the past to get to where they are today. So when they are asked how they can get to where they would like to be or how they can sustain where they are now they know how they can do that. The majority of participants managed to produce productive actions. However those who have not been lower, have always been low or are suffering from extreme stress do need obvious signposting and or optional examples of experiences to identify with and link their emotions and motivation too (McDonagh et al, 2004). Once participants align with an action they are motivated to act. Introducing the additional more focused tipping point of community participation was productive especially for those struggling with severe stress and or depression. From the pilot and main research 92.3% thought that tipping into community participation would help them with their wellbeing. If this process was used by businesses and the final tipping point was, e.g., “How useful do you feel you can be to other people in the organisation?” and “How could you break that down into small actionable steps?” The improvement of participant’s wellbeing and the organisations wellbeing could be phenomenal. Another example could be “How relaxed do you feel in the organisation at this time in your life?” and “How does that make you feel?” These organisational tipping points need to be explored in businesses.

The wellbeing semi-structured interview works with individuals with a variety of experiences including attachment disorder which P1 appeared to be suffering from. Someone suffering from attachment disorder could benefit from using this process regularly to support them to understand the routes of their behaviour and to focus on positivity and building up that attachment. Comprehension of those positive traits they have successfully used in the past supports the development of mindsight. Individuals recognised where their thoughts come from and the consequences of their reactions and consequential behaviour (Bailey, 2001; Bowlby, 2005a; Siegel, 2012). Parents and or carers of children could also benefit from this system especially in the early years to note what they were doing and saying just before

a reactive behaviour occurs in their child. It is not a quick fix and it is important to remember that it takes time and effort to work through any issues. As life progresses new issues may arise that can retrigger reactions. Regular use of the system can help people to work through issues much quicker and master their wellbeing. A wellbeing system would be used like a positive diary to reflect and move forwards using positivity and conscious discipline (Bailey, 2001; Hooge et al, 2014).

Participant two (P2) struggled with what they termed as paranoia in relationships carried from experiences in prior relationships causing new breaking points (rare-leadership.org, 2014). There are many things that trigger reactions and participants were becoming self-aware making it easier to change their behaviour. They recognise and work at retraining themselves by becoming aware of their past and present behaviour, how it affects others and the consequences to themselves. Seeing the evidence of what works well has supported participants to appreciate the changes in their enriched behaviour (Cooperrider & Whitney, 2005). An information communication system that could store their action notes on this and help them monitor, reflect and manage their behaviour.

Community Participation has helped participants gain experience for their future careers (P1, P2, P5 & M3); alleviate loneliness in particular through the loss of a partner (P4 & M2); make use of redundant skills (P4 & M2); develop services needed for family and friends (M4, M5 & M6) and as a recovery process from stress and depression (P6, M1 & M7). It improves the quality of life for those individuals (Joseph Rowntree, 2006).

Where a participant is self-centred (P3) the process does improve their lives but the process needs to ensure all questions asked stick with positivity and appreciation under each theme. Examples of other similar experiences and positive change supports comprehension and motivation to change (Ardichvili et al, 2003).

The language used in interviewing was clarified in different places with participants where English was not their first language (P5, M3 & M6), e.g. "What is on your mind?" clarified with "What do you presently think and feel regarding?". Within a short space of time this terminology is now being used commonly around the world on Facebook and Siri. Clarification was also asked of some of the themed questions. The only way to gain more

realistic guidance on language was to evaluate larger numbers of interviews with numerous different cultures (Salvatore et al, 2013). Fortunately an opportunity arose with the evaluation of the Leonardo Da Vinci Transfer of Innovation. The research was effective in being able to evaluate language and validate the process over a two year period. Language can have different meanings and alternative clarifications of all themes were developed.

Participants got quite involved with their interviews and you could see the change in mood and emotions as they spoke (Lo, 2011). This emotion is cleverly attached to their chosen goal of each theme. Those suffering from stress or depression in particular benefitted from optional examples and the community participation tipping point. On one occasion one participant (P6), on the verge of tipping back into depression took a risky option and attached to it straight away (Siegel, 2012). It was successful for them but several options should be offered so they can work towards or fall back to more than one option to ensure success (Lo, 2011). Just as risk management has a fall back option it would be useful to offer in future a fall back option if participants feel their chosen option is high risk. In particular for those suffering from ill mental health so they have attached to a second option should the risky option fall through. Recognition of this emotion and use with an information communication system such as milo could be very beneficial to individuals who need extra help such as children and those struggling with ill mental health.

All these interviews have shown how each individual has found their own unique wellbeing path. Key areas were attachment, paranoia, anxiety, employment advancement, loss of partner, feeling useful in the community and personal development.

The Transfer of Innovation demonstrates the validity of process with 519 semi-structured interviews. The participants travelled forwards at varying rates. The big data provided evidence enhanced support to be given to participants. When the right support is in place participants thrive. The organisations did not all perform the same but there were differing circumstances in each group. The earth quake in Italy had a major effect on people. Language was a major player as practitioners were often interviewing participants who struggled as their mother tongue was not that of the practitioner. Some of the practitioners indeed struggled with the English training. Accurate translations are vital with various options to clarify understanding.

The process and framework must be kept in the positive so that participants follow that positive psychology route. In particular for G1 where the initial participants had severe mental health issues and were committed to live in centres. They were asked questions where the participants had no control which encouraged negative responses. Asking participants this type of question highlights even more what these participants/clients have lost and what they don't have control over and can make people more depressed. Questions need to allow for positivity and forwards travel to progress. They have 2 options one is to allow more decision-making for participants under the present questioning or to change the questioning so that the participants have clear control of or the option to take on that control when they feel confident. Readily available information and systems to support that progression is vital.

The participants in the research were positive about how the process helps them to see the bigger picture. The interviews are thereby wakening beneficiaries to choice, ownership and responsibility. Overall the semi-structured interviews prove that they are a valuable qualitative tool in supporting individual's aims, of recognising and valorising skills and competencies acquired by individuals. The questionnaire results show that participants find the process beneficial. The participants in awareness of themselves, the choices to move forwards and ownership of their action plan. Having that self-ownership means taking responsibility for your actions and understanding yourself. Unfortunately in this research the participants did not have access to any online system to record their data and were only given paper formats of their distance travelled graphs. There is a clear need for an online system with a printing function. Being able to look back and reflect on prior successful actions taken, increases awareness of positive actions and acts again as a motivator.

Main participant one (M1) a student who focused on the stress and negativity regarding their university work and family life. They wished they could have regular interviews to keep them on the right track. M1 could benefit from regular use of the framework online to remind them to focus on positivity and use the positive traits they have used in the past. When people suffer serious stress they need access to the framework as often as possible which could be working on the actions and recording each day what they have done towards them with reminders of positivity. Asking what they are grateful and or appreciate today and can these good feelings help them to positively move forwards with their actions. If used on a regular basis by student support this system could keep students like M1 focused on

achieving. M1 stated their preference was a face to face interview but said they could use an online system. An information communication system data could act as an interim and speed up any face to face interviews and make them more productive. It could also pave the way for independent monitoring and mastering of their thoughts, feeling and behaviour for the future.

Main participant two (M2) whose partner had passed on. This person was lonely and relished the time spent doing the interview as it gave them something to do and focus on. They were happy to use an online system They felt that at their time of life they should not expect to gain anything and as such scaled a lot of themes at their desired optimum. Their plan was to move into a bungalow to make life easier for themselves. M2 was extremely happy in the last conversation as they had gained so many positive changes. They were excited about their new experiences and singing the praises of the interview. However what they planned in the process is not how it turned out although there was a discussion about the option of moving into a care home and that they could ask to take on a community participation role to satisfy the need they expressed they missed in the initial interview. Perhaps this seed for thought helped them to make the move to a care home instead of a bungalow after they had a scare after falling in the house. They appeared to have enjoyed their last couple of months in the home. Sadly the scaling for this last update is not available and as they passed away just before the last review meeting was planned. It appears that this process could be used to pave the way for people needing to move in care homes and as a continuum once a resident. If the residents were happy to share this information it could lead to vast improvements of wellbeing in homes by simple changes, e.g., giving residents a responsible role, allowing residents to choose their colour scheme, music, ensure they have rich pictures around them, favourite pieces of furniture, clothes, perhaps even mood lighting. The needs should be supported by the family when moving in as well as the care home. Families could support their relatives to use a wellbeing information communication system before entering a care home and during to ensure their wellbeing improves or stays static if that is their aim. Any change can cause distress and stress so by giving as much choice as possible it allows those needing to go into care some control.

Main participant three (M3) was not able to find work due to their disability. M3 feels there is light at the end of the tunnel and appeared extremely happy after their last interview.

M3 had not previously thought of community participation as a route to appropriate employment. They were worried they would lose their benefits but the benefits interviewer agreed with the idea and also signed them up for a computer course. The wellbeing interview helps individuals to plan and achieve developing soft and hard skills for employment. The tipping point for community participation worked well for M3's general wellbeing but also as an employment route. The benefits agency could use this system to support people into work (Orton, 2011; McKeown, 2011).

Main participant four (M4) was worried about their data being shared. Their reasoning for this they were not comfortable about sharing personal information and were concerned their identity might be disclosed even though reassurance was given that it is anonymised and they would be known as a code. At first M4 was also sceptical about an online system for the same reason but when they were told they could make up a name and email to ensure it was anonymised they were open to an online or preferably a personal information communication system as they felt the process had benefitted them. Post code details for online data should only collate the area and not the street for example for Tyne and Wear only the initial letters and numbers would be requested, e.g., NE15. No streets or street numbers should be collated. This should be promoted so as to reassure people and/or a personal non trackable download should be available. If these are adhered to data collated can be used to benefit people indirectly without risk of breaking the Data Protection Act (1998).

Main participant five's (M5) experience is captured in Figure 113: Mini Case Study 4 - Organisational Change. The organisational changes in their work place had not been properly discussed prior to the changes or promoted in a way that made this worker feel party to the cause. They felt their wellbeing was not important enough for management to take the time to understand and respect their needs. The actions developed in the wellbeing interview involved arranging a meeting with their manager to raise their concerns, to develop an external community participation project to satisfy the needs not being fulfilled at work and to develop their health through exercise. They were enthusiastic about their decisions. (M5) was happy with the wellbeing process and is keen on using an online information communication system. They can clearly see the benefits of sharing anonymised overviews for people to share wellbeing issues, actions and success stories.

Mini Case Study 4 (Wellbeing interview with Voluntary Sector worker)

In a wellbeing interview a voluntary sector worker described their working life as “knocking the passion out of me and getting in the way of me feeling a useful person”. They felt that due to funding reductions the organisation was moving away from its core support role, which is what they signed up for. Their first suggestion was to look for a new job. This was discussed and reflected upon. They identified other options of moving forwards. The worker decided to draw up proposals that would satisfy all needs to a certain level and discuss it with her line manager. They also decided to start up a voluntary project dear to them locally to satisfy that burning need to still have face to face hands on interaction where they lived.

Figure 113: Mini Case Study 4 - Organisational Change (George & Sice, 2014)

They particularly likely using the scaling board and thought the physical movements were a clear distraction from the interviewer and help to portray the full story. They thought it helps to feel the feelings as you scale which makes you remember it all. They thought it was best to move away quickly from the sad issues and focus on the positive route forwards. This is a key pointer and should be outlined up front with users of the process so they focus on the now (Tolle, 2011). An online system definitely needs to have a slider that is moved by a mouse or finger with a touch screen so they can benefit from these feelings that help to reflect and learn (Chapman, 2005).

Main participant six (M6) is a student. This participant meditates daily is already progressively working to improve their wellbeing. M6 did think the process was good but in reality they already have a good system in place for their wellbeing. The process would add benefits to their system of recording their positive moves forward and watching their distance travelled. What they were impressed the most with was the additional tipping point to advance wellbeing and could clearly see the benefits of this.

Main participant seven (M7) a recovering mental health participant found the tipping point for community participation extremely helpful as they could not think of any actions before this was raised. M7 was under a lot of stress as they were under review for their benefits. As a recovering mental health participant this additional stress could have sent them

into a relapse. M7 was struggling with the initial interview questions and could not focus on a route forwards as they kept returning to their benefits review. Long term stress causes individuals to focus on the problems. What you focus on grows as was depicted in the cycling mini case in Figure 9: Mini Case Study 2 - Depicting a Blind Spot. The focus became on the lamppost instead of turning away from it. Offering a route out with a tipping point for community participation made the interview start to flow. For severe mental health sufferers they may benefit from shared experiences with optional routes out as another door opener to a tipping point. Once people feel that recognition they will tip into that idea and attach to it as their own helping them to move forwards. Opening the focus or uncovering a blind spot helps people to change and move forwards (Scharmer, 2010b).

The wellbeing interview has been carefully constructed taking on board the positioning of each question within the interview so as to be mindful of the journey taken through the interview. The evaluation of this led to the confirmation of the thematic framework and recommendations for further research for the development of a wellbeing information communication system. The wellbeing interview is a wellbeing resilience wheel in this case within community participation and is depicted in Figure 114: Wellbeing Resilience Wheel. The wheel can be adapted to general wellbeing or to any organisational wellbeing by changing the tipping point at the end of each interview theme. The interview has proven successful in the main wellbeing interviews with positive travel forwards throughout all the themed headings evidenced in Figure 98: Wellbeing Themed Analysis of Main Interview Averages. An overview of the semi-structured interviews shows that the wellbeing interview is proven with all wellbeing themes travelling forwards as between 29% -100% in Table 20: Overview of Pilot and Main Semi-Structured Interview Wellbeing Themed Results. Starting with a general wellbeing theme in usefulness as an opener and closing with a general wellbeing theme in happiness. Happiness incorporates anything else that can be causing issues so the participant can work on them.



Figure 114: Wellbeing Resilience Wheel

The wellbeing questions follow a mix of behavioural, emotional and questions so as to space out the challenging questions for participants. Positivity is a key focus for helping people to move forwards so recognising where you have or are managing your life soundly helps (Hooge et al, 2014).

The different ways of viewing information are helpful and can help participants understand where they are, where they need to be and act as a motivator as they confirm their achievement. Different people prefer different things to motivate them so a variety of styles and colours are needed. The process should make things simple for people to understand and use whilst working with their unique feelings towards pictures and colour.

The participants of the wellbeing research were positive about the process in their questionnaires. They found the additional community participation tipping point particularly useful. The process encourages participants with positivity to develop their identity behaviour, self, emotions, confidence, beliefs, values and service within the twenty wellbeing

themes. The process is proven as valid in moving people forwards with their own motivational route. The language should take on board positive psychology throughout an information communication system.

The semi-structured interviews all proved the process to be valid by the statistical evidence, the distanced travelled by participants towards their personally designed route. The participants present verbal thoughts of where they presently feel they are in each theme, where they have been, how they moved forwards in the past and where they would like to be and how they can achieve this. The participants recognise their present status; reflect on their past realising self-awareness of their past, causality to the present and future development through empowerment and action. The language used in the semi-structured interviews is positive and the example experiences given all had successful track records. The examples were explained enthusiastically with emotion to transfer that emotion and motivation which was successful.

Where there was a lack of understanding of language alternative clarification was given. It would be best to have a couple of explanations for each theme and questioning in particular for people where English is not their first language so any translations are fully qualified. The clarifications set in the main semi-structured interviews were useful as several participants English was not their first language and these clarified the meaning.

6.4. Information Communication System

Many pointers from the literature explored direction for an online information communication system such as Milo the virtual boy or avatar which directed that questioning in the questionnaire which was favoured by 37% with another 43% also happy to use it (Molyneux, 2010). Having calming exercises and bodily awareness sessions to help develop the mind to support improved performance in the wellbeing process (Rimer, 2011; Siegel, 2010b). Factors such as colour, rich pictures and music all creating emotions to calm, motivate and innovate again creating chemical releases into the brain to stimulate the mind (Levitin, 2008; Siegel, 2012a; Wills, 2006). Using a choice of these in the design of an information communication system will enhance the wellbeing process for individuals (McDonagh, 2004). The practitioners found the information communication system to be quite complicated at times and numerous recommendations were requested for change. Some of those were

major changes such as being able to input the information automatically without having to change the page for each section. The participants were not allowed to input into the system or view their distance travelled unless they requested a print off of their results and their practitioner had access and permission to print off for them.

There needs to be major simplification for public use in a user friendly manner. This needs to have many variations for people so that people can pick a chart format that they can relate to and helps to motivate them. There are numerous different ways of producing the information gained in a format that can be chosen by individuals to aide their way of thinking. Individuals understand things easier in a format that works for them as we are all unique with different thought patterns and abilities (Dimitrov & Kopra, 1998; Salvatore et al., 2013; Siegel, 2012b). This was clearly evident in how participants wanted the system developed to support them 5.6.7. Overview of Pilot and Main Wellbeing Questionnaire Results, e.g. if the interview is online people should be asked to find a quiet relaxing place, e.g. scented candles, etc. and another participant suggested having an option to skip a question or go back. Participants also had some similar and some different views about what motivates them. 92% of participants agree or strongly agree the process motivates them as they watch their progression through their distance travelling towards their goals. They said “it helps provide numerical means of happiness”, “it helps saying where you are, have been and want to go” and “it is easy to visualise using the scaling tool”. The physical sliding of the finger helps with the interaction and memory of prior experience and to picture what participants would like in the future (McDonagh et al , 2004). Participants understand much quicker the bigger picture.

The participants were keen on the visual graphics that could be used in an online interview process with all liking a background from a plain colour to scenic views. Colours and pictures are evident as having calming and mind healing properties (Wills, 2005). The majority of participants were also interested in having music playing in the background which is also evident as having relaxing and even mind healing properties (Levitin, 2008). 92% of all the participants said they would be confident to use an online system. Considering the ages of the participants spanned from 14- 82 that is an excellent feedback especially as they were party to a hand held practical process. The questionnaires reveal a female voice would be satisfactory to everyone. There was a request for some humour which might work well as it creates emotion and emotion is a motivator but perhaps it should be an option rather than a

definite. The majority of people would prefer or be content with just a voice although avatars were quite popular too. All users would either like or not mind a relaxation exercise on the system. The wellbeing system needs to be able to save and print information including graphical options of distance travelled. The majority of participants are interested in an online version of the interview and 86% would be interested in further interviews.

The system needs to be able to be adapted to individuals wellbeing need such as the colour setting not only from a sight point of view as highlighted in the setting up of the TOI website but also as a motivational tool producing the release of appropriate chemicals to give positive feelings and motivation (Bonds, 1999; Wills, 2006). That same motivation and positive chemical release giving those happy feelings can also be gained from music, singing, pictures rich in positive memories and physical exercise (Norton, 2015; Rimer, 2011; Siegel, 2007a, 2010a; Solli et al., 2013). These motivational factors and even the graphics of an online system can be a motivational factor and certainly ease of use is (David, 2011; Fisher, Erdelez, & McKechnie, 2005; Nikhil et al., 2011; Rollnick et al., 2008; Wolfgang, 2007). The IMS has clearly been set up for management and gives good overviews of distance travelled under different ethnology headings. You can clearly view where different ethnographic groups benefit or struggled with the various themes. This would be useful in a big data format for the NHS and various government and educational sectors. The IMS gave good information regarding how many interviews have been completed by each practitioner and how well their participants were travelling forwards. It gave ethnographic splits.

You always get people going into a system and just playing with it to see what it does but big data means that the statistics and routes forward are verifiable and the few that are just playing the data are lost within the many. Dealing with peoples wellbeing means that it is too risky to have a system that automatically allows suggested routes forward to be shared as there should be no negativity shared and any risk of that means that at least initially the routes forward need to be manually shared by a professional to reduce any risks (Hirschfeld & Lammel, 2005; Steen, Manschot, & De Koning, 2011). The TOI interviews highlighted some clear areas for development for the organisations. The practitioners from G3 initially had concerns that the right support or signposting was not available for their participants. This was raised with management to set in place. Any information system must ensure links are in place to guide and support participants (Hirschfeld & Lammel, 2005;

Steiner et al., 2014). G2 had great difficulty working with the migrants as there was a clear language barrier (Salvatore et al., 2013; Sice, Mosekilde, & French, 2008b; Yoon & Chung, 2011). Accurate translations are vital with various options to clarify understanding. In the pilot and main wellbeing research the understanding of words was queried a couple of times. It is vital to have an alternative explanation of what is required at each step to promote clarity (Dimitrov, 2003).

In the TOI practitioners admitted causing some anguish for participants by delving too deeply into the past instead of touching upon it to remember the positive route forwards. An automated system would not do this as the questions would be set to the correct level. The system could benefit from more direct wording to talk individuals through this and ensure the focus is on remembering the positive successes.

The types of graphics in the IMS were limited and options should be developed to view distanced travelled. In the Wellbeing research a number of different graphics were offered. Figure 99: Main Participant Differences in Achieved and Desired in Main Wellbeing Interview shows in single lines the actual distance travelled to the present and how much is still to achieve. This new format may also help more if what actions have been taken can be viewed down the side of each theme this way they can see if those or similar actions can be used to help with other headings individuals are struggling to move forwards with. There could also be an option to view examples of what actions others have taken with similar experiences where the keys words match. A design choice of optional graphs, colours, music, background picture and additional supportive material viewed alongside can act as a motivator for future use. Human computer interaction is a key in wellbeing to create emotion and motivation (McDonagh et al, 2004).

Mindfulness and Mindsight are key to helping community participants and community organisations manage their wellbeing and move forwards in their lives. We are all subjective in our scaling but by monitoring and reflecting we can become objective in how to improve our wellbeing. When community groups were asked what they needed from community participants they were clear that they needed to have a strong interest and make a commitment to their community group, they needed to respect the existing members and to

both give and show trust. This is evident in Figure 115: Mini Case Study 5 - Respect and Trust (George & Sice, 2014), these are classic examples of respect, disrespect and broken trust.

Mini Case Study 5

(Based on an interview with a CEO from a Voluntary Sector Organisation and interviews with two community participants from another)

The CEO talked about how they expect respect from their community participants and try to give respect to community participants which relies on gut feelings that do not always work well. However they offered for the first time all their community participants to come out with the staff for the Christmas meal. It showed great respect and the community participants valued this invite. They knew another CEO who was upset because their staff team would not invite the community participants and it caused friction in the organisation.

Similar to this a manager in a Voluntary Organisation was passing jobs that they were in their paid role to unpaid community participants who had not signed up to do this work and then complained they had not completed the jobs they had signed up to do. The community participants had joined the organisation to help pull their lives back together after major trauma in their lives. Due to this trauma they had lost the confidence to raise the issue and became stressed. This showed a major disrespect for the community participant's wellbeing. They also broke the trust given to them in that role.

[Figure 115: Mini Case Study 5 - Respect and Trust \(George & Sice, 2014\)](#)

The twenty themes and accompanying questions are proven useful in the framework. The additional tipping points were also proven as a useful tool to aiding individuals to look at new routes to wellbeing using community participation in this instance. Other pointers to be taken on board for an information communication system would be options of use with voice, written words, avatars, language options for clarification, music, colour, rich pictures, breathing exercises, warm up exercises to expand the mind, spark up connections in the brain and warm to your spirit. The framework can develop relationships, control of emotions and even the development of individuals intellect by recognition, reflection of the past and present to make informed decisions about the future and what to focus on, what needs development and working towards those aims.

6.5. Conceptual Framework

The conceptual framework is presented in the context of wellbeing themes, the interview process and information communication system.

6.5.1. Wellbeing Themes

The twenty wellbeing themes identified in the literature review, including spiritual literature clearly relate within community participant and community manager comprehension of community participation. The knowledge evidenced from this research shows that wellbeing and community participation are interlinked. The Leonardo Da Vinci Transfer of Innovation research also evidenced a link to wellbeing. The literature evidences wellbeing as interlinking to all social interactions that a person comes into contact with in any format. Having optional tipping points at the end of each theme is like signposting or giving optional routes forwards. As adults you manage your own wellbeing to support a healthy mind and body. Community participation can be a useful tipping point for wellbeing when asked at the right point within the process. Community participation helps many people to move forwards in their wellbeing. Each theme is unique to each participant and the levels of focus vary depending upon their need. Wellbeing needs to be taken on board by community organisations. They need to recognise and understand participants' needs so that they gain the right calibre of person they need to enhance the organisation and community participant's wellbeing. There needs to be a balance of different types of community participant within each organisation from short term to long term, from come and go as you please to set times. All should be respected and valued regardless of their levels of commitment. Wellbeing is a hot topic and one of the key academics in this field is Daniel Siegel (2010) with his wheel of awareness. The twenty wellbeing themes fit into the wheel of awareness. Figure 116: The Twenty Interlinking Wellbeing Themes in a Community Context shows each wellbeing theme is bouncing around the rim of the wheel of awareness.



Figure 116: The Twenty Interlinking Wellbeing Themes in a Community Context

6.5.2. Interview Process

All are interconnected and the complex social interactions including experiences and knowledge that go with these themes travel to the hub to help people make decisions about their life. In this instance community participation is used as a tipping point to aid this evidenced in Figure 117: Themed Wellbeing in a Community Context enclosed with Social Interactions. The process encourages mindsight and mindfulness. The reflective process used encourages participants to review successful actions in the past that have aided them to move forwards in their wellbeing creating a greater awareness of thoughts and behaviour and how we connect with the world in local social interactions.



Figure 117: Themed Wellbeing in a Community Context enclosed with Social Interactions

Advanced use of the process could see mindsight development with a greater understanding of one's inner self or world. Siegel (2012) links the interactions of the mind, brain and relationships. The researched wellbeing process uses emotions to cultivate motivation which is transferred into actions which enhance the participant's knowledge and understanding of oneself and their local social interactions (Goleman, 1996). People can support their wellbeing by learning about themselves and others and using this awareness to enhance their wellbeing. Individuals should use a wellbeing system or diary to help them record and reflect upon their positive behaviour and positive reactions from others. Negativity does not enhance your wellbeing it only keeps you in a negative area.



Figure 118: Wellbeing Resilience Wheel in a Community Context

Some people struggle to initially move into the Wellbeing Community Participation Wheel because they are unaware of the negativity in their life seen in Figure 118: Wellbeing Resilience Wheel in a Community Context. This is the conceptual framework evidencing the development and knowledge gained from the research.

6.5.3. Information Communication System

To develop resilience skills before using the Resilience Wheel individuals could work through each of the senses to explore and develop those skills. Being more aware of yourself and your surroundings helps. To explore and learn about your sight and how that affects you, try putting colour film over your glasses or if you don't wear glasses just look through colour film sheets or buy some colour paddles to look through. There is research that gives a general

over view of how colour affects people but it is not 100% as people are unique so it's best to experience this for yourself. Wear the glasses with a different colour whilst performing set tasks that involve relaxing, problem solving, reflecting, motivating and making you feel happy. Be aware of your thoughts and feelings and note how each colour makes you feel. Do this numerous times until you have mastered how colour affects you. You can them use colours to enhance your life by using colours to help your mood, e.g., wearing a certain colour to make you feel happy, change your colour scheme on your computer to help you study or to help calm you down if something upsets you. Change your colour scheme in different rooms to support what you learn about yourself or buy various colour lights to help enhance your day to day life. Thoughts and emotions can be enhanced with music so explore different types of music and the affect they have during different activities as for colour. Take note of how each type of music or indeed each song effects your emotions. Learn what to avoid a certain times and what to use to enhance the tasks in daily life. Various different tastes can affect our emotions so again work through how tastes make you feel and learn what types of food to avoid for different tasks and what types of food to use to enhance tasks. Touch can also make us feel different things so explore and note your feelings when you touch different things, e.g., water, food, materials, people, etc. Note any items of clothing where the texture and colour make you feel much happier or confident. Use this knowledge to positively boost your life. Note which colours make you feel negative and avoid them.

Positive stimuli produce positive reactions in your body which make you feel good. Individuals should learn and note what these are and use them. Note just as life changes what promotes the release these positive stimuli can change so ongoing reviewing and adjusting is needed. Be more aware of what makes you stressed and what makes you relaxed and change your patterns of behaviour to enhance positive feelings. When you are noting your experiences think of the physical effects your sensory experiences give you. What relieves aches, pains and headaches? What removes that feeling of intense stress? Physical activity reduces stress and keeps your body in better working order as it releases good endorphins (chemicals) in your body. These chemicals enhance the connections in your brain and can reconnect lost connections helping wellbeing further (Siegel, 2007). Explaining this and showing evidence to individuals will enhance their use and act as a motivator. All this knowledge needs to be captured for use in an information communication system.

Table 19: Knowledge Gained for Information Communication System

Twenty Wellbeing Themes	Areas of self-investigation	Tipping point options *	Motivation or Problem solving	Process	Calming	Information communication system
Usefulness.	Identity.	Family.	Colour.	Physical feel in scaling.	Emotion recognition	Voice.
Relaxation.	Behaviour.	Friend/s.	Music.	Visual or touch read and stress		Written word.
Relationships.	Self .	Work.	Rich pictures.	of movement to button.		Avatar.
Energy.	Emotions.	Social group.	Experiences.	promote		Game – children.
Changes.	Confidence.	Health provider.	Positivity.	Reflection.		Positivity.
Confidence.	Beliefs .	Inspiring			Rich pictures.	Emotion recognition.
Decision-making.	Values.	Care provider.	quotation.	Acknowledge successes.		Stress button to activate calming.
Support.	Service.	Learning provider.	An inspirational passage read.	SMART goals & actions.	Colour.	Offer example situation & action taken.
Giving.		Student support.	Physical scaling.		Music.	
Learning & Development.		Agencies.	Knowledge.	Mindful reminder.	Poetry.	
Emotions (feelings).		Sports facility.	Signposting.	Positivity and focused tasks.	Calming	
Trust.		Community participation.	Encouragement.	appreciation	quotation	Copy and paste.
Lifestyle.		Others	Positive feelings gained throughout process.	Optional graphs & colour to show distance travelled.		Quick access to other areas.
Challenges.			Ease of use.	Simplistic input.		Ability to skip sections or mark to come back to.
Commitment.			Ownership of design.	Tap screen to record scaling.		Ease of use.
Point of View.				Progressive more in depth questioning as consciousness develops.		Ability to move backwards and forwards.
Respect.				Allow time for mindsight / mindfulness / mediation.		Options of view.
Involvement.				How does that make you feel?		Voice recognition.
Valued.						Breadcrumbs.
Happiness.						Ability to add links e.g. meditation walk through.
						Variety of view, save & print options.
						Effective focus on the interfaces between people and computing devices.

To convert the conceptual framework and supporting knowledge into an information communication system the research needs to be effectively incorporated evidenced in Table 19: Knowledge Gained for Information Communication System. *The tipping point heading gives examples of where participants would get most benefit to develop their wellbeing at this point in time to decide which tipping point to use.

6.6. Guidelines for Users

The wellbeing process is a structured route which follows a set of wellbeing themes and questioning Table 19: Knowledge Gained for Information Communication System. The process uses a scaling board with a slider which must be started at 5. Users must keep their finger on the scaling board slider as much as possible as this connection supports the reflection of the past and motivational feelings of the present and future. The process starts by asking the user to scale how they feel about a theme and detail what is on your mind regarding this scaling. This gives the user an awareness of their present views regarding this theme. The user is then asked to think back where their scaling may have been worse and take their finger briefly back to this point and move forwards quickly back to their present scaling. This allows the user to feel the positivity in moving forwards and help them to remember what they did to move forwards so they can reuse these skills. They gain Mindsight of where their issues started which helps to put things into perspective. Details need to be recorded at each stage so it is not lost and can be used more easily by the users in the future. The user is then asked where they would like to be in the future. Moving the finger forwards again gives that positive feeling. The next question needs to be managed carefully as users can struggle particularly if the scaling has not been lower than their present. The user is then asked how can they achieve this or sustain their scaling if they have kept it at their present scaling. Using prior skills should be the priority. If this is not possible users can be asked to imagine they have woken up and they are now living their life at their future scaling and to note what has changed and how it changed. They are then asked to identify their goals and small steps to achieve this. Shared experiences can be used but need to be verbally shared with the emotion of the story teller so that the emotion is shared and felt creating the much needed motivational attachment to the goal. The goal should be positive, mindful and broken into small steps with a completion date given for each. This is when the process review should be set. If the user struggles with the goals do not dwell on this they can come back to it. The process then allows for an additional tipping point which in this research was community participation but this could be whatever the user feels will be of most benefit to them. This again allows an alternative option to move forwards. The process is repeated for each theme. The timescale between reviewing should be set dependent upon the goal completion dates so the completion works as motivation. This process can act as a self-monitoring process supporting users to master their wellbeing.

6.7. Framework Evaluation and Concluding Remarks

Overall the process provides a successful route which helps people to identify and overcome barriers that encompasses factors such as motivation, self-efficacy, creative problem-solving, critical reflection and persistence. It does this in a systematic way which is repeated as and when necessary. This repetition helps individuals and organisations to learn more about individual's ability to move forwards. It basically provides a reflective diary for participants to identify themselves and their behaviour, emotions, confidence, beliefs, values and the service they give. The participants portray unique information under each heading which is unique and logical to them although. This shows that no matter how an individual's thought processes work it captures individuals meaning related to their unique experiences, thoughts, situation and what connects each theme for them. This process is not about trying to stick people into a box it recognises that people are unique and works with that uniqueness. The scaling recorded are true to each individual and helps individuals to recognise the barriers and understand how much the barriers impact each themed heading. The process could be used worldwide by anyone with appropriate translations. Language is an issue which again can relate to peoples unique way of understanding (Szostak, 2011).

Reflecting back to Figure 16: Validation of Adapted Rickter Process for Empowering Wellbeing (Adapted from Sousa, 2014, p.218) the paradigm of oneness is all around as all the themes connect in local social interactions to other local social interactions which connect infinitely. These psychological connections are subjective and unique to individuals and can change over time dependent upon experiences and knowledge. Understanding oneself helps and using this process empowering people towards their set aims in the process. The mixed methods approach has provided both qualitative and quantifiable data which supports validity in psychological research (Sousa, 2014; Holtzhausen, 2001). It has proven to be trustworthy in taking on board subjective experience to combine with evaluative measures to monitor moving forwards with wellbeing for each individual (Appendix TT-WW and Figures of distance travelled throughout chapter five). The process with its adaption for community participation has proven trustworthy as it manages oneness of those local social interactions in reflection, empowering, adaptability and subjectivity. The additional tipping point for community participation was particularly helpful for those suffering from stress to visualise a way forwards. The results validate the participant's movement forwards towards their goals

(Appendix TT-XX). The goals allowed for interpretation of the oneness in the past, present and future by individuals developing mindfulness and encouraging mindsight as individuals understand their behaviour. Mindsight and mindfulness of the past, present or future generates a rationality of meaning. The wellbeing process was developed and adapted with a tipping point for community participation (Appendix TT-XX). The data showed that the process consistently supports individuals to reflect and understand their past, present and future. Ongoing usage encourages mindfulness and mindsight. The process produces measurements for individuals to see and self-motivate movement forwards. This is evident throughout chapters four and five in the numerous figures evidencing semi-structured interview results. This rationality creates infinite impact to all concerned and further afield as participants become empowered in their wellbeing. The process has proven reliability and consistency in wellbeing (Appendix TT-XX). This research suggests the paradigm of oneness is most appropriate in developing approaches for wellbeing. In the context of community and participants aged 14 plus the contribution to knowledge is the unique framework and adaption of the process for empowering wellbeing. The process was amended and is transferrable in other wellbeing contexts.

Chapter 7: Conclusion and Recommended Future Research

7.1. Introduction

The final chapter concludes the contribution to knowledge, reviews the research objectives and recommends future directions.

7.2. Critically evaluate the literature in wellbeing in a community context to identify relevant wellbeing themes

Twenty wellbeing themes were identified in the literature review in Chapter 1: Wellbeing in a Community Context. The themes were proven as wellbeing descriptors within the spiritual daily reflections and open interviews in the third sector, evident in Appendix N - P. Daily issues under those themes were clarified in Appendix Q. The themes were used to set the scene for the semi-structured interviews identified in Table 5: Pilot Wellbeing Semi-Structured Interview Summary and Table 6: Main Wellbeing Semi-Structured Interview Summary. The questions were developed carefully around each theme to take on board the types of issues raised.

7.3. Evaluate the application of complexity and design insights into understanding wellbeing in a community context to inform the research method/paradigm

The insights and synergy of complexity and design are evident in Chapter 2: Synergy of Design and Complexity for Wellbeing in a Community Context. Design is utilised to work through the complexity of wellbeing and to develop the research method evident in Chapter 3: Methodology. Everything is interlinked in the complexity of wellbeing and is the basis for the paradigm of oneness evident in 3.1. Research Paradigm.

7.4. Conduct primary research to validate and further develop the themes and process

This research investigates and clarifies human experience and behaviour in both employability and wellbeing in a community context evident in Chapter 4: Validation of the Semi-structured Interview Process and Chapter 5: Results. The researcher designed the method and gathered qualitative and quantitative evidence which is structured for usability by both the participant and researcher (Creswell, 2007). The participant uses the process and data gained for self-assessment, self-awareness and iterative trustworthy self-development (Polkinghorne, 2005; Morrow, 2005). The researcher uses the qualitative and quantitative

data for analysis and validation (Sousa, 2014). The preliminary research is used to further develop the themes and process evident in Chapter 4: Validation of the Basic Semi-Structure Interview Process with the Transfer of Innovation and in 3.4.7. Improve the Wellbeing Themed Semi-Structured Interview & Questionnaire. The objectives of research were accomplished by rigorous testing with the TOI & wellbeing research to validate the phenomenological method, thematic and conversation analysis, language used, process, and adaptions (Rennie, 2012). The basic process was verified with the TOI and language was clarified. Motivational tipping points are unique to each person and change throughout their lives. The additional tipping points functioned well in the twenty wellbeing themed areas. They are created when people are asked people “how can community participation support you” in each wellbeing theme. This encourages people to think about this as an option to support their wellbeing at a time when they have reflected and understood their needs in a that theme and are motivated to act. It is a prime time to encourage a tipping point for community participation.

This research opens doors for many organisations by adding to or changing the last question in each wellbeing theme, for example “How can the student support services help you to feel useful to other people?” or “How can the care home help you to feel useful to other people. This could open doors for student support, care homes, work places, educational establishments, family counselling, etc. This encourages participants to share exactly what their needs are in any wellbeing themed area so their needs are better understood to themselves and those who support them and can be catered for suitably. Supporting individual wellbeing uniqueness means happier more content participants (community participants, workers, students, etc.) who value, trust and give more to an organisation they feel are supporting their wellbeing development.

7.5. Design and evaluate a developmental framework for wellbeing in a community context

The framework is presented in Chapter 6: Framework for Introduction of Wellbeing in a Community Context and particularly Figure 116: The Twenty Interlinking Wellbeing Themes in a Community Context. Third Sector organisations have more chance of retaining the participant for longer when they feel connected (Maslow, 1987). This echoes the comment from the World Health Organisation who believes that “the health sector cannot achieve good

mental health alone. The determinants of mental health are often outside the remit of the health system, and all government sectors have to be involved in promoting mental health" (WHO, 2011). Take this further and state all organisations should be involved. To create emergence or change in human behaviour people need to be more aware of themselves and others from an earlier age. This process converted online could satisfy that need and support development of the human race. Numerous motivational and supporting factors have been found for such a system, e.g. exercise of the mind/body to calm the mind and body; colour, music, pictures to calm and/or motivate; meditation, mindsight and mindfulness to encourage reflection and awareness of ourselves and others behaviour (Siegel, 2012; Germer, 2009; Schooler, 2013; Wills, 2006; Solli, 2013; Komito, 2011; Allott, 2011; Diener, 2002; Williams, 2011).

7.6. Contribution to Knowledge

The contribution to knowledge of this research is: 1. a framework for introduction of wellbeing in a community context that takes complexity, simplifies it for individuals and supports them to design their own route for wellbeing; 2. The application of the framework in employability and wellbeing in the context of community participation; 3. Recommendations for design of an online system for self-use in the context of wellbeing. The wellbeing framework is distinguished as a contribution to the emerging field of interpersonal neurobiology as it aligns to Siegel's (2007) "Wheel of Awareness".

7.7. Limitations

The research is grounded in rich qualitative and quantitative data. The wellbeing research however is limited to nineteen participants and three organisations in the context of community. Only community participation was used as a tipping point in this research so the research is limited to 'Wellbeing in the Community'. The use of the framework in other contexts will require the relevant adaptation.

7.8. Recommended Further Research

If this were a public online system the big data gathered would help in particular the NHS with rising mental health concerns to make interventions much quicker and as such more effective. It would also help the government to assess areas of need for funding input. If developed further for use with children and those suffering from low ability, for example,

through an x-box game such as 'Milo' from an educational and psychology point of view children's issues could be identified much earlier and they can work through them before they exacerbate and or the correct interventions can be put in place (Molyneux, 2010). It can help children to become aware of their behaviour much earlier and improve behaviour at school by them watching their graphs improve. They could be done in a star format in line with school star charts. Children could review where they have succeeded in the past and regain that positive feeling every time they review it. It would continue to encourage good behaviour especially if each child has their own print off for home and regular access to the system at school and online. Big data here would inform the physical areas and types of need in each theme. Interventions can be put in place much quicker by schools, NHS and government. This would help with child abuse or neglect, obesity, behavioural problems, learning and development, rising poverty levels, family support, etc.

In the community organisations the data can be used to help support individuals wellbeing as well as developing organisational wellbeing. It is probably easier for volunteer roles to be changed to suit their needs than it is in a work place environment. However work places can benefit from this wellbeing system by improving individual wellbeing and working towards improving the organisational wellbeing. Improving wellbeing in the work place is often not about needing to change roles but about changing attitudes and behaviour of individuals including management. A work place where individuals are looking out for each other, valuing each other, taking on board each other's points of view, etc., is a much more positive environment and encourages giving of support, accepting it, learning and development. People become more aware of their behaviour and its effect. They can reflect on successful behaviour and take it on board to make themselves feel the achievement and be motivated. If everyone in the work place is doing the same this creates a positive and co-operative work place environment. In reality if this process was put online it could be used by any organisation by simply changing the tipping point by asking how this organisation can help you to achieve. The key beneficiaries in universities could be students and student support as well as staff and the organisational culture.

This research could be followed up by developing this interview into an online information communication system which enables individuals to tailor the system to their needs at various times of their life. This could be completed by having a choice of inputs such as their work

organisation, education, social group/s, carer/s, friend/s, family, community participation, and etcetera into the system so tipping points could be created automatically (Gladwell, 2001). The system could take advantage of others success stories to suggest optional positive actions for those who cannot see a way forward (Rimer, 2011). This should only be suggested after numerous ways of trying to get individuals to find ways to move forwards themselves. Individuals must listen to the emotional stories of others so they relate to the emotion and reflection of others so they attach to an optional route forwards. A system of this kind could be used to see what the positive long term effect is of using an online wellbeing interview on child development, in particular with reference to mental health (Irons, 2013). It could support children to develop a mastery approach to their wellbeing using reflection and using tried and tested actions from their past and support carefully thought out new actions they can see they could achieve. It could support children to be more mindful and use mindsight as a daily practice.

Other key areas could be with mental health, offenders, NHS, care systems such as children removed from their homes, adults in need of support, etc. The list is endless. The big data could give direction to interventions needed in various areas much quicker and so save the government money in the long run. It could identify trends and raise awareness within intelligence of unrest brewing (Thackara, 2006). The system can be developed in different formats depending on the participants, e.g. in a game format, an online interview with various tailoring options such as colour, voice, pictures, calming exercises, mindfulness, mindsight, meditation, music, virtual human, etc. (Levitin, 2008; Salmon, 2007; Siegel, 2010b; Williams, 2011; Wills, 2006). However the systems are developed they would collect and collate the same themed big data which could change the world of tomorrow in a positive way (Buxton, 2007; Rimer, 2011). This data can be used to proactively boost support in areas of need before crisis level is hit. It can also help develop much better sign posting for people to help themselves before reaching crisis level (WHO, 2012). It could give a greater insight into the way people think and behave. It can support children from an early age to master their thoughts and behaviour encouraging emergence in the human race of greater understanding of their wellbeing and others (Bailey, 2001; Chapman, 2005; Mowles, 2012; Sangiorgi, 2011; Stacey, 2001).

Appendices

A. Appendix: Positive Choices

Please complete this form if you would like to access the Positive Choices Service.

Personal Information

Title: _____ First Name: _____ Surname: _____

Address : _____

Telephone Number: _____ Mobile: _____

E-mail: _____

Date of birth: _____ Gender: Female Male

Do you consider yourself to have a disability? Yes No

If yes, how will this affect your ability to volunteer?

- | | |
|---|--|
| <input type="checkbox"/> Bangladeshi | <input type="checkbox"/> Other white background |
| <input type="checkbox"/> Black African | <input type="checkbox"/> Pakistani |
| <input type="checkbox"/> Black Caribbean | <input type="checkbox"/> White and Asian |
| <input type="checkbox"/> Chinese | <input type="checkbox"/> White and black African |
| <input type="checkbox"/> Indian | <input type="checkbox"/> White and black Caribbean |
| <input type="checkbox"/> Other Asian background | <input type="checkbox"/> White British |

Please tick the box that currently applies to you:

- | | |
|--|---|
| <input type="checkbox"/> School pupil | <input type="checkbox"/> Part time student |
| <input type="checkbox"/> Full time student | <input type="checkbox"/> Unemployed |
| <input type="checkbox"/> On government programme | <input type="checkbox"/> Retired |
| <input type="checkbox"/> Employed part time | <input type="checkbox"/> Employed full time |

What are you hoping to gain from the service?

- | | | |
|--|--|---|
| <input type="checkbox"/> Gain confidence | <input type="checkbox"/> Increase independence | <input type="checkbox"/> Improve health |
| <input type="checkbox"/> Help to access volunteering | <input type="checkbox"/> One to one support | <input type="checkbox"/> Other _____ |

Please add anything else that you wish to tell us in connection with your application

Please return completed form to: xxxxxxxxxxxx

B. Appendix: PhD Research Gantt Chart

Task	2011					2012					2013					2014					2015					Deliverable						
	Jan-Apr	May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	June	July	Aug	Sept	Oct	Nov
IPA Completion & Submission	■																														IPA	
Read literature	■	■	■	■	■	■	■	■	■																					Literature Review & Endnote		
IPA Approval	■																													Research Agreed		
Ethics Applied For	■																													Ethical Forms & Procedures Documented		
Ethics Approval		■																												Ethical Approval Given		
Finalise objectives		■																												Objectives written		
Draft literature review		■	■	■	■																									Literature review draft		
Gather Wellbeing Spiritual Reflections & Analyse						■	■	■	■																				Analyse Reflections against Themed Wellbeing Headings			
Read methodology literature		■	■																											Notes on methodology & Endnote		
Devise research approach		■	■	■																										Research approach written		
Draft research strategy & method			■	■	■																									Strategy & method written		
Open Interviews with Community Participants & Managers						■	■	■	■																				Open Interviews held			
Transcribing						■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■										
Develop interviews & questionnaires																														Questionnaire completed		
Pilot test & revise interview & questionnaire										■	■	■	■																Revised questionnaire completed			
Input data																														Data collated		
TOI Evaluation										■	■	■	■	■	■	■	■	■	■	■	■								TOI Interim and Final Evaluation Reports			
Administer interview & questionnaire																														Responses written onto questionnaires		
Input data																														Data inputted		
Break in PhD																	■	■											A daughter			
Analyse data										■	■																		Write notes on analysis			
Draft findings chapter																														Findings chapter written		
Update literature read																														Update literature review & Endnote		
Complete remaining chapters																														Remaining chapters written		
Submit to tutor & await feedback																														Draft report submitted to tutor		
Revise report for submission																														Finalise report for submission		
Print, bind & submit report																														Print, bind & submit report		
Viva																														Viva		

C. Appendix: Ethics

1) Ethics Consent

APPENDIX A



SCHOOL OF COMPUTING, ENGINEERING AND INFORMATION SCIENCES Ethics and Data Protection Policy Monitoring

Project monitoring - Form A (for staff research or PhD projects – or relevant student projects with ethical concerns)
(To be completed for every research and/or consultancy project where there are potential ethical issues and risks)*
If applicable

Project Name/Research Title*: Community Participation and the Use of Information and Communication Technologies

Project Code*:

Collaborating Organisation(s)*: NCYP, Mind, Newcastle and Durham Council

PART ONE: STAFF

Describe staff and staffing issues		
Which staff/students are working on the project?		Please give details of all staff/students who are working on this project. Karen George, Dr Petia Sice, Prof. Bob Young, Dr Jeremy Ellman, Prof. Safwat Mansi and Graeme Arnott
1. Have all members of staff/students working on the project satisfactorily completed Section Two (Ethics) of monitoring form ?	Yes/ No	If No explain measures in place to ensure ethical practice. TBC
2. Have all members of staff/students working on the project satisfactorily completed Section Three (Health and Safety) of monitoring form?	Yes/No	If No, explain measures in place to ensure the safety of project participants. TBC
3. Have all members of staff/students working on the project satisfactorily completed Section Four (Data Management) of monitoring Form?	Yes/No	If No explain measures in place to ensure compliance with data protection policies and procedures. TBC

PART TWO: ETHICS

Describe measures in place to ensure ethical practice.		
5. Does the research involve human subjects?	Yes	If yes, please describe measures in place to ensure ethical practice See Appendix B-E
6. Does the research involve vulnerable human subjects (such as children, young/elderly people, disabled people, asylum seekers)?	Yes	If yes, please describe measures in place to ensure ethical practice e.g. police clearance such as a Criminal Records Bureau CRB Check, liaison with parents/carers/schools Have requested CRB forms from University as my last CRB was 2004 Consent forms have been drafted - see Appendix B-E
7. Is the research subject to external ethics committees and/or external organisations' research governance procedures?	No	If yes, please give details
8. Does the research have mechanisms for informed consent?	Yes	If yes, please give details See Appendix B-E for appropriate forms

9. Have the necessary copyrights or permissions been obtained – or conversely agreements obtained for open publishing if applicable?	Yes	If yes, please indicate whether a formal written form or verbal agreement exists. Verbal at present but have agreed to sign need formal paperwork from university.
10. Is the research likely to be subject to any legal matters?	No	e.g. libel, Data Protection or Human Rights, Health and Safety, Public Liability, Bio-ethics etc.
11. Are the outcomes of the research likely to be sensitive for individuals and/or groups?	No	If yes, please describe what account has been taken in the research design and dissemination policy.
12. Has the funder placed any restrictions upon the research?	No	If yes, please give details
13. Do all intellectual property right rest with the researcher/university?	Yes	If no, please give details
14. Does the research involve blood, tissue, human or animal testing?	No	If yes, please give details of degree of direct involvement together with external agencies and committees involved.
15. Does the research comply with university and/or government policy regarding environmental regulations?	Yes	If no, please give details

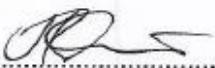
PART THREE: HEALTH AND SAFETY

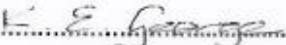
If applicable please give details of measures e.g. working in teams, mobile telephones; informed police TBC		
16 Have appropriate mechanisms been put in place to ensure the safety of the researcher?	Yes/No/na	
17 Have appropriate mechanisms been put in place to ensure the safety of human subjects?	Yes/No/na	e.g. monitoring that research is taking place in the way it was designed; keeping a check on the research process TBC
18. Have appropriate health and safety issues been evaluated where work will be conducted both within the university and/or at external sites?	Yes/No/na	If no, please give details. If yes please confirm that the work will be covered by the collaborating organisation's health and safety policy and/or also the university policy (also that insurance cover is provided). TBC
19. Does the research comply with Government statements regarding biological warfare	Yes	If no, please give details

PART FOUR: DATA MANAGEMENT

20. Have storage and handling arrangements been put in place to ensure the confidentiality of data collected?	Yes	The tapes and any personal information will be kept secure and confidential. They will be kept by Karen George until the end of the project including verification time. They will then be disposed of in line with Northumbria University's retention policy. The coding and questionnaires will not be kept together. The responses will be stored securely until they have been audited, after which they will be destroyed in accordance with Northumbria University (2010) and the Data Protection Act (1988)
---	-----	--

21. Have arrangements been put in place to ensure that data is used exclusively for the defined purposes of this project, and/or with the agreement body?	Yes	The project will be explained to participants and they will be given an information sheet. Consent will be requested. All names and details will be kept confidential and will not appear in any printed documents. Anonymous summaries will be produced from the discussions to be used in the project report and in other publications. None of the participants will be identified in the project report or in other publications based on this project. Copies of any reports or publications will be available on request to participants.
22. Are technical and organisational measures in place to safeguard personal data collected?	Yes	The tapes and any personal information will be kept secure and confidential. They will be kept by Karen George until the end of the project including verification time. They will then be disposed of in line with Northumbria University's retention policy. The coding and questionnaires will not be kept together. The responses will be stored securely until they have been audited, after which they will be destroyed in accordance with Northumbria University (2010) and the Data Protection Act (1988)
23. Are measures in place to ensure that data is not processed in any way as to cause damage or distress to any individual, organisation or data subject?	Yes	Anonymous summaries will be produced from the discussions to be used in the project report and in other publications. None of the participants will be identified in the project report or in other publications based on this project. Copies of any reports or publications will be available on request to participants

Principal Investigator/Supervisor signature:  Date 14/04/2011

Student signature: *if applicable  Date 13/4/11

Assessors:	Date
Name (in full):	
Signature:	
Name (in full):	Date
Signature:	

SECTION SIX - Completion of outstanding revisions/amendments:

Having considered this student's further application for Initial Project Approval, revised as detailed in section five, I/we confirm that the requested amendments/revisions have been satisfactorily completed and I/we recommend to the School Research Committee that the application should now be approved.

Assessors:	
Name (in full):	email from Daniel Wainwright Date 24/6/11
Signature:	
Name (in full):	Date
Signature:	

ASSESSMENT BY SCHOOL RESEARCH COMMITTEE

Following receipt of the attached report from the School Assessor(s) and all supporting documentation, including, where appropriate, confirmation of ethical approval for the research and Enhanced Disclosure from the Criminal Records Bureau, this application was considered by SRC on (date):

Application and research programme approved by SRC on (date):

Application not approved by SRC (reason(s)):

Signature of Chair of School Research Committee:	Date:
<i>R Barra</i>	6/07/2011

FOR PHD STUDENTS ONLY

SRC member nominated by SRC to Chair PhD student's subsequent Mid-Point Progression Review Panel

Name:	
-------	--

2) Enhanced Disclosure

Enhanced Disclosure		disclosure
Page 1 of 2		
Applicant Personal Details		
Surname: GEORGE		Disclosure Number: 001336283082
Forename(s): KAREN ELIZABETH		Date of Issue: 13 SEPTEMBER 2011
Other Name(s): ARMSTRONG, KAREN ELIZABETH		Employment Details
Date of Birth: 25 MARCH 1963		Position applied for: PHD STUDENT
Place of Birth: NEWCASTLE UPON TYNE		Name of Employer: NORTHUMBRIA UNIVERSITY
Gender: FEMALE		Countersignatory Details
		Registered Person/Body: UNIVERSITY OF NORTHUMBRIA AT NEWCASTLE
		Countersignatory: RICHARD CASSIDY
Police Records of Convictions, Cautions, Reprimands and Warnings		
NONE RECORDED		
Information from the list held under Section 142 of the Education Act 2002		
NONE RECORDED		
ISA Children's Barred List information		
NONE RECORDED		
ISA Vulnerable Adults' Barred List information		
NONE RECORDED		
Other relevant information disclosed at the Chief Police Officer(s) discretion		
NONE RECORDED		
Enhanced Disclosure		
This document is an Enhanced Criminal Record Certificate within the meaning of sections 113B and 116 of the Police Act 1997.		
THIS DISCLOSURE IS NOT EVIDENCE OF IDENTITY		
GPO Box 165, Liverpool, L69 3JD Helpline: 0870 90 90 844		
Continued on page 2		
© Crown Copyright 2011		

Use of Disclosure information

The information contained in this Disclosure is confidential and all recipients must keep it secure and protect it from loss or unauthorised access. This Disclosure must only be used in accordance with the Criminal Record Bureau's (CRB) Code of Practice and any other guidance issued by the CRB. Particular attention must be given to the guidance on the fair use of the information in respect of those whose Disclosure reveals a conviction or similar information. The CRB will monitor the compliance of Registered Bodies with this Code of Practice and other guidance.

This Disclosure is issued in accordance with Part V of the Police Act 1997, which creates a number of offences. These offences include forgery or alteration of Disclosures, obtaining Disclosures under false pretences, and using a Disclosure issued to another person as if it was one's own.

This Disclosure is not evidence of the identity of the bearer, nor does it establish a person's entitlement to work in the UK.

Disclosure content

The personal details contained in this Disclosure are those supplied by or on behalf of the person to whom the Disclosure relates at the time the application was made and that appear to match any conviction or other details linked to that identity.

The information contained in this Disclosure is derived from police records, and from records held of those who are unsuitable to work with children and/or vulnerable adults, where indicated. The police records are those held on the Police National Computer (PNC) that contains details of Convictions, Cautions, Reprimands and Warnings in England and Wales, and most of the relevant convictions in Scotland and Northern Ireland may also be included. The CRB reserves the right to add new data sources. For the most up to date list of data sources which are searched by the CRB please visit the CRB website.

The Other Relevant Information is disclosed at the discretion of Chief Police Officers or those of an equivalent level in other policing agencies, who have been approached by the CRB, with due regard to the position sought by the person to whom the Disclosure relates.

Disclosure accuracy

The CRB is not responsible for the accuracy of police records, or records of those who are deemed unsuitable to work with children and/or vulnerable adults.

If the person to whom the Disclosure relates is aware of any inaccuracy in the information contained in the Disclosure, he or she should contact the Countersignatory immediately, in order to prevent an inappropriate decision being made on their suitability. This Countersignatory will advise how to dispute that information, and if requested arrange for it to be referred to the CRB on their behalf. The information should be disputed within 3 months of the date of issue of the Disclosure.

The CRB will seek to resolve the matter with the source of the record and the person to whom the Disclosure relates. In some circumstances it may only be possible to resolve a dispute using fingerprints, for which consent of the person to whom the Disclosure relates will be required.

If the CRB upholds the dispute a new Disclosure will be issued free-of-charge. Details of the CRB's disputes and complaints procedure can be found on the CRB's website.

Contact us

Post:	Criminal Records Bureau PO Box 165 Liverpool L69 3JD	Telephone:	Disputes Line: Welsh line: Minicom: General Information:	0870 90 90 778 0870 90 90 223 0870 90 90 344 0870 90 90 811
Web:	www.crb.gov.uk	Email:	CustomerServices@crb.gsi.gov.uk	

If you find this Disclosure and are not able to return it to the person to whom it relates, please return it to the CRB at the address above or hand it in at the nearest police station.

The CRB and Disclosure logos are registered trademarks in the UK under licence numbers 2263661 and 2263664 respectively.

End of Details

disclosure disclosure disclosure disclosure disclosure disclosure

3) Background Information on the Wellbeing Interviews with Community Participation

Tipping Points Characterised for Beneficial with Online Mediation

The ***information gathered*** from this research will be used for a thesis. The thesis will be used to develop a wellbeing interview which encourages more people to participate in the community (volunteer). Your individual information will be anonymous and confidential. This is classed as de-personalised data and cannot be tracked back to you. The information will be destroyed once the research has been verified, which will be approximately 6 months after the research has been completed.

The ***aim*** of the study is to produce a framework to help associations gain more volunteers (community participants). The interview consists of 20 sections and it will take approximately 90 minutes to complete.

Responses require truthful answers in order for the research to provide credible data for your associations. This will enable me to help associations by writing a credible thesis.

Should you wish to have a copy of the report, upon completion, please request a copy through your association or via my email?

If you are unsure about any questions please ask.

Thank you

Karen George (PhD Researcher)

i. Appendix: Ethics Research Forms Used

**4) Background Information on Research Questionnaire for Wellbeing Interviews with
Community Participation Tipping Points Characterised for Beneficial with Online
Mediation**

The **information gathered** from this survey will be used for a research thesis. The thesis will be used to develop an online wellbeing interview which encourages more people to participate in the community (volunteer). Your child's / individual information will be confidential and will only be used as a statistic, e.g. percentage of males/females, age, etc. agree/disagree with statement. This is classed as de-personalised data and cannot be tracked back to you / your child. The questionnaires will be destroyed once the research has been verified, approximately 6 months from the completion of the research.

The **aim** of the study is to produce a wellbeing interview framework to help community organisations to gain more volunteers (community participants).

The **questionnaire** contains 7 sections and it will take approximately 10-15 minutes to complete.

Please read each question and tick the most appropriate box, which you feel truthfully represents reality in your organisation. This will enable me to help associations by writing a useful report.

Please ignore the numbers and letters in brackets, e.g. (1A). This is coding for the analysis. Following are some examples of the types of question and how you should tick them.

.....

.

Please only tick one box unless you are asked in italics to tick more than one box. If you wish to leave a comment on a particular section please do so only in the comment box. Should you wish to have a copy of the report, upon completion, please request a copy through your Community Organisation or via my email?

If you are unsure about any questions please ask.

Thank you

Karen George (PhD Researcher)

5) Video and / or Photography Consent Form

Project Title: Wellbeing Interview with community participation tipping points characterised for beneficial with online mediation

Name of the Researcher or Project Consultant: Karen George

Name of participant:

Participating Organisation:

I have had the project explained to me by the researcher/ consultants and been given an information sheet. I have read and understand the purpose of the study.	<input type="checkbox"/>
Any video / photographs of me / the child named below may be used to promote the project /association / partners involved via screening for public viewing, used in written reports, for training purposes or similar reasons.	<input type="checkbox"/>
We retain all rights to print / screen / view your / child's photographs / video footage	<input type="checkbox"/>
I have been given a copy of this Consent Form.	<input type="checkbox"/>
Name:	
Name of legal guardian (if needed):	
Address:	
.....	
Telephone No:	
Email address:	
Signed:	Date:

Researcher/Project consultant: I confirm that I have explained the project to the participant and have given adequate time to answer any questions concerning it.

Signed: Date:

D. Appendix: Pilot Wellbeing Interview Questionnaire

Questions	Answers			
	Agree Strongly	Agree	Disagree	Disagree Strongly
1. Preparation				
a. i. Do you feel that the background information to the research was adequate?				
ii. How might it have been improved?				
b. i. Do you feel confident in using the scaling board?				
ii. What might increase your confidence further?				
c. i. Do you believe the scaling board is a useful tool for you?				
ii. Comments	Please state:			
2. Frame of Reference	Agree Strongly	Agree	Disagree	Disagree Strongly
a. Are the current headings within the Frame of Reference appropriate to you?				
b. How could the Frame of Reference be improved?	Please state:			
c. Which were the 5 most important questions asked?	1. 2. 3. 4. 5.			
3. Interview Environment	Agree Strongly	Agree	Disagree	Disagree Strongly
a. Was the interview environment appropriate?				
b. Was any of the following lacking?	Privacy	Time	Space	Comfort
c. How could you improve the environment for the interviews?	Please state:			
4. Use of the Process	Not at all	A little	Quite Significantly	Considerably
a. Do you feel the Process will help you achieve your aims/objectives?				
b. Do you think the measure of 'movement' will be useful to you?	YES		NO	
5. Specific outcomes for you. Do you feel that the Process contributes to the following?	Agree strongly	Agree	Disagree	Disagree strongly
a. Identification of priorities for support/intervention				
b. A new perspective on current circumstances, and seeing the big picture				
c. Identification of strategies that have worked in the past				
d. Exploration of options for the future				
e. A means of setting goals				
f. A means by which you can take responsibility for your future				

g. A realisation of the progress/achievements you have already made				
h. A means of improving your self-awareness				
i. A means of improving self-confidence				
j. A means of improving self-esteem/self-efficacy				
k. A measure of your wellbeing indicators				
l. A contribution to your action plan				
m. Recording documentation that is easy to use				
6. Computerised System	Agree strongly	Agree	Disagree	Disagree strongly
a. I would feel very comfortable using an automated computerised system?				
b. What kind of screen background would make you feel comfortable, e.g. sitting room, beach, stars, river, countryside, etc.?	Please state:			
c. Would you have a preference of voice, e.g. male/female/ accent?	Yes	No	If YES please state:	
d. Would you prefer to be interviewed by an interactive character which reacts to you on the screen or would you feel happy just having a programmed voice?	An interactive character	Just a voice	Either	Other (Please state)
e. Would you want to be able to save/print your action plan?	Yes		No	
f. Would you want to be able to view the distance travelled?	Yes		No	
7. Any other comments:	Please state:			

E. Appendix: Leonardo Da Vinci TOI Training Evaluation Questionnaire

Participant Name: _____ Date: _____
Organisation: _____ Venue: _____

0 = Not at all 10 = Entirely/very

1. To what extent were the course aims and objectives met?

0 1 2 3 4 5 6 7 8 9 10

Comments:

2. How motivating was the training for you?

0 1 2 3 4 5 6 7 8 9 10

Comments:

3. To what extent do you feel you now understand the theory underpinning the process?

0 1 2 3 4 5 6 7 8 9 10

Comments:

4. How clear are you about using the information gathered by using the process to inform an effective participant action plan?

0 1 2 3 4 5 6 7 8 9 10

Comments:

5. How competent do you feel in using the process now?

0 1 2 3 4 5 6 7 8 9 10

Comments:

6. How confident do you feel about using the process with your participants?

0 1 2 3 4 5 6 7 8 9 10

Comments:

7. How comfortable do you feel about using the process?

0 1 2 3 4 5 6 7 8 9 10

Comments:

8. How effective was the Trainer's style in meeting your course needs?

0 1 2 3 4 5 6 7 8 9 10

Comments:

9. To what extent do you feel you have an adequate system of staff supervision?

0 1 2 3 4 5 6 7 8 9 10

Comments:

10. To what extent do you feel you have an adequate network of referral agencies?

0 1 2 3 4 5 6 7 8 9 10

Comments:

11. To what extent do you feel that your organisation offers an adequate environment for participant interviews?

0 1 2 3 4 5 6 7 8 9 10

Comments:

12. How adequate do you feel your organisation's action planning procedures are for participants?

0 1 2 3 4 5 6 7 8 9 10

Comments:

13. In what ways do you think the process will be useful to you and your participants?

14. How do you think future training could be improved?

Thank you / Grazie / Danke (schön) / Ευχαριστώ Karen George

F. Appendix: Leonardo Da Vinci TOI Practitioner Interim Questionnaire

Date questionnaire was completed:	
Name of Practitioner:	
Organisation you work for:	
Town/region where you work:	
Description of your target participant group:	

Please answer all questions in English as fully as possible

Preparation

1. Do you feel that the training you received in using the process was adequate? YES
NO
2. How might it have been improved?
3. Do you feel confident now in using the process YES NO

What might increase your confidence further?

4. Do you believe the process is a useful tool to use with your participants? YES NO

Further comments:

5. Have you received support/encouragement from your Manager in using the process?
YES NO

Frame(s) of Reference

6. Are the current headings within the “Life-board” ‘Frame of Reference’ appropriate to your participant group? YES NO
7. How specifically could the “Life-board” ‘Frame of Reference’ be improved?

Interview Environment

8. Where have you used the process?

- No use yet
- In an office
- In a car
- In the participant's own home
- In a public place
- Elsewhere

9. Was any of the following lacking?

- Privacy
- Time
- Space
- Comfort

10. How could you improve the environment for semi-structured interviews?

11. To what extent is your use of the semi-structured interview with participants likely to be interrupted?

- Very likely
- Quite likely
- Unlikely
- Not at all

Use of the Process

12. How much has the semi-structured interview been used?

- No participant use yet
- Number of initial 'baseline' interview with participants =
- Number of review interviews with participants =

13. What criteria determine which participants you use the semi-structured interview with?

- Time available
- The participant's attitude
- Other (please specify)
- Your opinion of its usefulness to the participant
- The sort of information you require

14. Please give a brief summary of a case study where the process was used and proved to be of value:

15. Please give a brief summary of a case study where the process was used, but proved not to be of value:

16. Please indicate which categories of participant you have used the process with and how many of each: Male Female Under 18 yrs. 18 - 21 22 - 25 26 -49
50+

17. How would you summarise what it is you are working to achieve with your participants?

18. Do you feel the process helps you achieve these aims/objectives?

- Not at all
- A little
- Quite significantly
- Considerably

19. Please indicate how this measure of 'movement' has been perceived by:

- The organisation/practitioners:
- The participants:
- No reviews yet

Specific outcomes for staff - Do you feel that the process contributes to the following?

20. A means of eliciting significant participant information

agree strongly agree disagree disagree strongly

21. a means of improving team communication about individual participants

agree strongly agree disagree disagree strongly

22. a means of improving communication with external agencies regarding individual participants

agree strongly agree disagree disagree strongly

23. a standardised structure for interviewing participants

agree strongly agree disagree disagree strongly

24. evidence of your effectiveness in terms of demonstrating your support/intervention with participants

agree strongly agree disagree disagree strongly

25. clarification of participant needs/limitations/barriers/options

agree strongly agree disagree disagree strongly

26. a measure of the participant's soft indicators

agree strongly agree disagree disagree strongly

27. a contribution to the participant's action plan

agree strongly agree disagree disagree strongly

28. recording documentation that is easy to use

agree strongly agree disagree disagree strongly

Specific outcomes for participants - Do you feel that the process contributes to the following?

29. identification of their priorities for support/intervention

agree strongly agree disagree disagree strongly

30. a new perspective on their current circumstances, and seeing the big picture

agree strongly agree disagree disagree strongly

31. identification of strategies that have worked in the past

agree strongly agree disagree disagree strongly

32. exploration of options for the future

agree strongly agree disagree disagree strongly

33. a means of setting goals

agree strongly agree disagree disagree strongly

34. a means by which they can take responsibility for their future

agree strongly agree disagree disagree strongly

35. a realisation of the progress/achievements they have already made

agree strongly agree disagree disagree strongly

36. a means of improving their self-awareness

agree strongly agree disagree disagree strongly

37. a means of improving self-confidence

agree strongly agree disagree disagree strongly

38. a means of improving self-esteem/self-efficacy

agree strongly agree disagree disagree strongly

39. Any other comments:

Thank you / Grazie / Danke (schön) / ΕυχαριστώK Karen George

G. Appendix: Leonardo Da Vinci TOI 'Life-Board' Questions for Employability Participants

1. Employment/Training/Education

How happy are you with your Employment/Training/Education?

Ten: you are very happy with your Employment/Training/Education.

Zero: you are not happy with it at all.

2. Accommodation

How happy are you with your accommodation?

Ten: you are very happy with your accommodation.

Zero: you are not happy with it at all.

3. Money

How happy are you with your money situation?

Ten: you are very happy with your money situation.

Zero: you are not happy with it at all.

4. Relationships

How happy are you with your relationships? This can include any relationships.

Ten: you are very happy with your relationships.

Zero: you are not happy with them at all.

5. Influences

How much are you influenced by others to do things that you really don't want to do?

Ten: you are very influenced by others.

Zero: you are not influenced at all.

6. Stress

How stressed are you at this time in your life?

Ten: you are very stressed.

Zero: you are not stressed at all.

7. Alcohol

How much is alcohol a part of your life?

Ten: alcohol is a large part of your life.

Zero: alcohol is not part of your life at all.

8. Drugs

How much are drugs a part of your life? (This can be anything that you think are drugs: medication, coffee, cigarettes, etc.)

Ten: drugs are a large part of your life.

Zero: drugs are not part of your life at all.

9. Health

How happy are you with the state of your health?

Ten: you are very happy with the state of your health.

Zero: you are not very happy with it at all.

10. Happiness

How happy are you at this time in your life?

Ten: you are very happy.

Zero: you are not happy at all.

H. Appendix: Leonardo Da Vinci IMS Usability Questionnaire

Date questionnaire was completed:	
Name of Practitioner:	
Organisation you work for:	
Town/region where you work:	
Description of your target participant group:	

Please tick all only one box in each line and answer in English

IMS Usability Questionnaire						Please tick appropriate boxes			
Information Management System						Male	Female		
Age	18- 30	31- 40	41- 50	51- 60	61 plus	Are you a regular internet user?			
							Yes	No	
Nos.	Usability & Navigation Questions					Strongly Agree	Agree	Disagree	Strongly Disagree
1	The IMS responds too slowly to inputs								
2	I would recommend the IMS to my colleagues								
3	The instructions and prompts are helpful								
4	The IMS has sometimes stopped unexpectedly								
5	Operating the IMS is full of problems								
6	I sometimes don't know what to do next with the IMS								
7	I enjoy my sessions with the IMS								
8	I find that help information is not very useful								
9	If the IMS stops it is not easy to restart it								
10	Working with the IMS is satisfying								
11	The way the IMS information is presented is clear and understandable								
12	The documentation on the IMS is clear and understandable								
13	There is never enough information on the screen when it is needed								
14	I feel in command of the IMS when I am using it								

15	I think the IMS is inconsistent				
16	I would like to use the IMS every day				
17	I can understand and act on the information provided by the website				
18	There is too much to read before you can use the IMS				
19	Tasks can be performed in a straightforward manner using the IMS				
20	Using the IMS is frustrating				
21	The IMS has helped me overcome any problems I have had using it				
22	The speed of the IMS compares well with other websites				
23	I keep having to go back to my IMS training information				
24	It is obvious that practitioner needs have been fully taken into consideration				
25	There have been times in using the IMS when I have felt quite tense				
26	The organisation of the menus or information lists seems quite logical				
27	The IMS allow the practitioner to be economic with keystrokes				
28	There are too many steps required to get something to work				
29	Error prevention messages are not adequate				
30	It is easy to make the IMS do exactly what you want				
31	The IMS has not always done what I was expecting				
32	The IMS has a very attractive presentation				
33	The amount or quality of help information is adequate				
34	It is relatively easy to move from one part of a task to another				
35	It is easy to forget how to do things with the IMS				

36	The IMS occasionally behaves in a way which cannot be understood				
37	The IMS is really very awkward				
38	It is easy to see at a glance what the options are at each stage				
39	Most times I have to ask colleagues for help when I use the IMS				
40	Navigating the IMS is easy				

Please check you have ticked each item.

If you would like to make a comment about the website with regards to something that has not been raised above please do so now:

.....

.....

Thank you / Grazie / Danke (schön) / Ευχαριστώ

Karen George

I. Appendix: Leonardo Da Vinci TOI Final Practitioner Questionnaire

Please answer the following questions by double-clicking to select a box of your choice:

1) How much does the Process improve your understanding of your participants' needs?

😊😊 considerably 😊 quite significantly 😈 a little 😈😊 not at all

2) How much does the Process help you identify areas of support and resources needed for your participants?

😊😊 considerably 😊 quite significantly 😈 a little 😈😊 not at all

A. How much does the Process improve your measurement of participants' progress?

😊😊 considerably 😊 quite significantly 😈 a little 😈😊 not at all

B. How much does the Process help you to measure the impact of your support and interventions with your participants?

😊😊 considerably 😊 quite significantly 😈 a little 😈😊 not at all

C. How much does the Process improve your participant review process?

😊😊 considerably 😊 quite significantly 😈 a little 😈😊 not at all

D. How much does the Process improve your quality of work with participants?

😊😊 considerably 😊 quite significantly 😈 a little 😈😊 not at all

E. Is there anything about the Process you would want improved for the benefit of you or your participants?

Yes No If yes please state:

F. How useful do you find the IMS system and reports?

😊😊 considerably 😊 quite significantly 😈 a little 😈😊 not at all

G. Is there anything about the IMS you would like improved for you or your participants?

Yes No If yes please state:

J. Appendix: Leonardo Da Vinci TOI Final Managers Questionnaire

Please answer the following questions by double-clicking to select a box of your choice:

1) How much does the Process help to measure the impact of the Practitioners' intervention

😊😊 considerably 😊 quite significantly 😈 a little 😈😊 not at all

2) How much does the Process help you, as a Manager, to review your team's work?

😊😊 considerably 😊 quite significantly 😈 a little 😈😊 not at all

3) How much does the Process help identify new support needs or resource needs?

😊😊 considerably 😊 quite significantly 😈 a little 😈😊 not at all

4) How much does the Process help your team improve the quality of their work?

😊😊 considerably 😊 quite significantly 😈 a little 😈😊 not at all

5) How much does the Process help to provide evidence for your funders and stakeholders?

😊😊 considerably 😊 quite significantly 😈 a little 😈😊 not at all

6) How useful do you find the IMS system and the reports it produces?

😊😊 considerably 😊 quite significantly 😈 a little 😈😊 not at all

7) Is there anything about the Process or IMS that you would like to be improved to support

the needs of your organisation? Yes No If yes please state:

K. Appendix: Leonardo Da Vinci TOI Final Participant Questionnaire

For this Questionnaire, Practitioners could use the sliding scale board, or simply ask the questions below and record the participants' answers.

1. Comfort

How comfortable are you about using the board, compared to completing a written questionnaire, or just answering a lot of questions?

10: very comfortable – 0: not comfortable at all

2. Clarity

How clear are you about what the process is being used for?

10: very clear – 0: not clear at all

3. Goals

Having used the process how clear are you about your goals and your action plan?

10: very clear – 0: not clear at all

4. Sliders

How much does moving the sliders help you to feel where you are in your life and where you would like to be?

10: it helps a lot - 0: it doesn't help at all

5. Process

How helpful is it for you to use the board in your interviews?

10: it helps a lot - 0: it doesn't help at all

6. Questions

How easy was it for you to understand the questions?

10: very easy – 0: not easy at all

7. Talking about yourself

How easy does the process make it for you to talk about yourself and the things going on in your life?

10: very easy – 0: not easy at all

8. Awareness

Having used the process how aware are you about what you've already achieved and what your skills and abilities are?

10: very aware – 0: not aware at all

9. Links

How easy is it for you to see links between the different headings on the board?

10: very easy – 0: not easy at all

10. After Interview

How positive did you feel immediately after your last interview?

10: very positive – 0: not positive at all

11. And finally: is there anything about the Process that you would like to be improved?

Yes No If yes please state:

L. Appendix: Leonardo Da Vinci New Interview Frames of Reference Headings

G1 new frame of reference:

Accommodation	Work
Appearance/Personal Hygiene	Relationships
Activities	Health
Relationships	Stress (R)
Community	Work / life balance ⇒ Freedom
Support	Support
Stress (R)	Skills
Medication	Barriers
Health	Accommodation
Progress	Cooperation

G3 new Frame of reference:

Employment / Training / Education	Reading
Relationships	Writing/Spelling
Stress (R)	Speaking
Health	Numbers
Readiness	Money
Trouble	Other Skills
Freedom	Family Life
Clarity	Personal / Community Life
Self-confidence	Working/Education Life
Happiness and Satisfaction	Expectations

G2 new frame of reference:

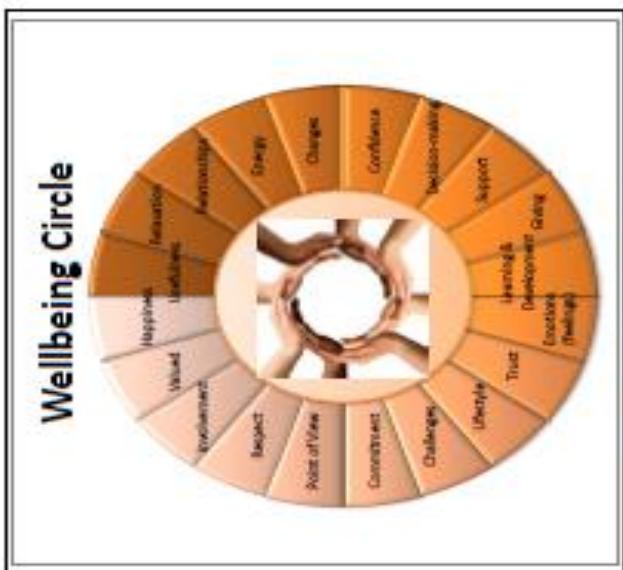
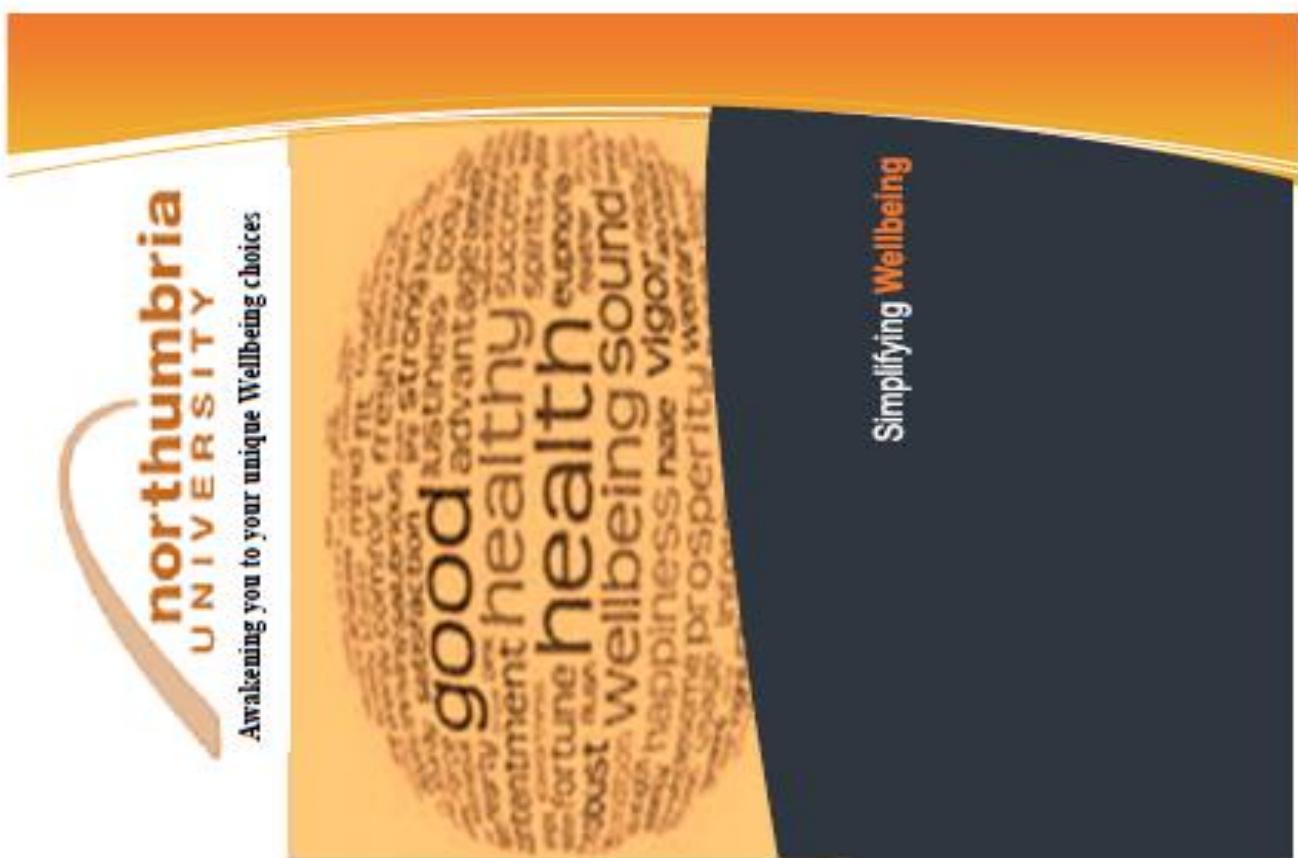
G4 new frame of reference:

M. Appendix: Main Wellbeing Interview Questionnaire

Please answer all questions as fully as possible.				
Tick ✓ appropriate responses where options are given.				
Questions	Answers			
9. Preparation	Agree Strongly	Agree	Disagree	Disagree Strongly
A i. Do you feel that the background information to the research was adequate?				
ii. How might it have been improved?				
B i. Do you feel confident in using the scaling tool?				
ii. What might increase your confidence further?				
C i. Do you believe the process is a useful tool for you?				
ii. Comments	Please state:			
10. Frame of Reference/Headings	Agree Strongly	Agree	Disagree	Disagree Strongly
d. Are the current headings within the Frame of Reference appropriate to you?				
e. How could the Frame of Reference be improved?	Please state:			
f. Which were the 5 most important questions asked?	1. 2. 3. 4. 5.			
11. Interview Environment	Agree Strongly	Agree	Disagree	Disagree Strongly
d. Was the interview environment appropriate?				
e. Was any of the following lacking?	Privacy	Time	Space	Comfort
f. How could you improve the environment for process interviews?	Please state:			
12. Specific outcomes for you. Do you feel that the Process contributes to the following?	Agree strongly	Agree	Disagree	Disagree strongly
p. Helps you towards achieving your wellbeing aims and objectives?				
q. Motivates you as you watch your progression through your distance travelled towards your goal?				
r. Identification of priorities for support/intervention				
s. A new perspective on current circumstances, and seeing the big picture				

t. Identification of strategies that have worked in the past				
u. Exploration of options for the future				
v. A means of setting goals				
w. A means by which you can take responsibility for your future				
x. A realisation of the progress/achievements you have already made				
y. A means of improving your self-awareness				
z. A means of improving your confidence				
aa. A means of improving self-esteem				
bb. A measure of your wellbeing indicators				
cc. A contribution to your action plan				
dd. Recording documentation that is easy to use				
13. Computerised System	Agree strongly	Agree	Disagree	Disagree strongly
i. I would feel comfortable using an automated computerised system?				
j. What kind of background music would you like?	Please state:			
k. What kind of screen background would you like?	Please state:			
l. Would you have a preference of voice, e.g. male/female/ accent?	Yes	No	If YES please state:	
m. Would you prefer to be interviewed by an interactive character which reacts to you on the screen or would you feel happy just having a programmed voice?	An interactive character	Just a voice	Either	Other (Please state)
n. Would you like a relaxation exercise at the beginning or during?	Yes		No	
o. Would you want to be able to save/print your action plan?	Yes		No	
p. Would you want to be able to view the distance travelled?	Yes		No	
14. Can you suggest anything else to support the interview online for you?	Please state:			
15. Wellbeing Interview Review				
a. Would you be interested in reviewing your distance travelled with a further interview in the future?	Yes		Yes	
b. Would you be interested in updating your interview with the online version once it is completed?	Yes		Yes	
16. Any other comments?	Please state:			
Thank you				

N. Appendix: Advertising Leaflet for Semi-structured Interview for Main Wellbeing Interview



WELLBEING INTERVIEW

The Wellbeing interview encompasses factors such as motivation, self-efficacy, creative problem-solving, critical reflection and patience. People differ in their ability to make decisions and are supported to enhance their self-confidence, self-esteem and self-efficacy through the interview. The process uses a special scaling board that ranks from 0 to 10. Each scale has its own logic having which has been developed uniquely for the wellbeing interview so you can take ownership and reflect on your specific needs. The interview provides a snapshot of your current situation. You will explore the reasons why you are there and where you would like to be. A series of solution-focused questions will lead you to how you can achieve this. The difference between the present state and the defined state gives information about next steps and your action plan. The interview leads to very precise, unique and enriched information. You gain clarity about your own situation with a complete picture and route to achievement. Issues are put into perspective and through the different connections, new patterns of thinking are clarified and self-awareness starts to flow. You see more positive elements and new opportunities through the solution focused approach. The process gives you a feeling of control and ownership. Especially for people who are not that confident or experienced in interview situations.

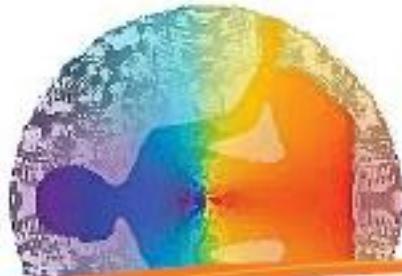
Karen George
PSC Researcher
Northumbria University
karen.george@northumbria.ac.uk

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Northumbria University Research for your Wellbeing

RESOURCE FOR YOU

When you use reflective techniques on your life it helps you to understand why you choose certain routes in your past, what you have forgotten about, achievements that are missing, & helps you to look at old and tested wellbeing routes and which is right for you and very at this present time.



HEALTH SOLUTIONS

Your health solution will be unique to you and will depend on your ability, diet and level of stress. Presently Northumbria University is offering:

- + Tai Chi
- + Going walking
- + Meditation
- + Sequence Dancing
- + Tap Dancing
- + Line Dancing
- + Zumba
- + Yoga
- + Keep Fit
- + Tai Chi
- + Even Fitter



BE CONNECTED SOLUTIONS

Would you like to meet people? You can do this through clubs, community cafes, activity groups or you can volunteer. What are you interested in, let's talk. You can also check out the following website:
<http://www.volunteering.org.uk/volunteer.aspx>
<http://www.volunteering.org.uk/volunteer.aspx>

Flexible solutions for Wellbeing

The Wellbeing Assessment Interview

supports you to identify your unique solutions. You will be amazed how much more aware of yourself you become.



FEELING USEFUL SOLUTIONS

There are many ways to make you feel useful. Helping out in the community is one. It doesn't just make you feel useful but also content and connected as you give your time, experience, and expertise for the community wellbeing. This combination makes you feel happy as well as useful. Happiness is very powerful in the realms of wellbeing.



CUSTOM SOLUTIONS
Lift up that fuzzy blanket to uncover your wellbeing needs. Each solution is developed into a unique action plan which you can follow easily. You can come back and have a second interview to see how far you have travelled towards your unique wellbeing goals. You can take a step by step showing how far you have travelled towards your goals.



FITNESS SOLUTIONS
There are various fitness solutions ranging from the gentle Tai Chi, walking and swimming to Zumba.

MIND SOLUTIONS
It is important to keep a healthy mind. An active mind can delay the onset of dementia and Alzheimer's. Look at ways to keep your mind healthy and active.



Karen George
PhD Researcher
Northumbria University
www.northumbria.ac.uk

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O. Appendix: Daily Reflections Wellbeing Themed Table

Detailed Daily Reflections Wellbeing Themed Table Disc

P. Appendix: Demography of Open Interview Participants to Support Formulation of Wellbeing Themes

Participants		Male	Female	<i>Country of Origin</i>				Age			
				England	Australia	Holland	Irish	0 - 18	19 - 36	37 - 54	55 - 73
Manager	1	1		1						1	
	2	1		1						1	
	3		1		1					1	
Community Participant	1	1				1				1	
	2	1					1			1	
	3		1	1						1	
Totals		4	2	3	1	1	1	0	3	3	0

Q. Appendix: Open Interviews Themed Wellbeing Usage

Wellbeing Headings	Usefulness	Relaxation	Relationships	Energy	Changes	Confidence	Decision-Making	Support	Giving	Development	Learning & Development	Emotions (feelings)	Trust	Lifestyle	Challenges	Commitment	View	Point of View	Respect	Involvement	Valued	Happiness	Overall Averages
M1	19	3	12	5	12	2	20	24	8	49	12	7	13	11	21	14	7	11	13	7	14	7	
M2	31	7	38	14	20	11	9	41	36	34	12	16	11	12	12	36	20	21	24	17	21	7	
M3	9	3	16	4	5	2	5	10	8	8	9	2	10	4	3	3	13	10	4	4	7	7	
Managers																							
Average use	20	4	22	8	12	5	11	25	17	30	11	8	11	9	12	21	13	14	14	10	10	14	
Total for Managers	59	13	66	23	37	15	34	75	52	91	33	25	34	27	36	63	40	42	28	24	41		
CP1	15	7	33	19	8	4	3	7	14	16	7	24	7	5	18	9	21	6	20	21			
CP2	24	14	41	15	18	12	6	20	17	26	12	9	24	19	11	26	19	24	16	25	25		
CP3	5	10	7	4	1	1	3	2	5	2	11	3	2	3	8	2	2	2	3	8	29		
CP Average Use	15	10	27	13	9	6	4	10	10	14	13	6	17	10	8	15	10	16	8	18	25		
Total for Community Participants	44	31	81	38	27	17	12	29	29	42	39	19	50	29	24	46	30	47	25	53	36		
Average Individual usage from All	17	7	25	10	11	5	8	17	14	22	12	7	14	9	10	18	12	15	9	13	13		
Average of Managers and Community Participants	52	22	74	31	32	16	23	52	41	67	36	22	42	28	30	55	35	45	27	39	38		
Difference Between Usage	15	18	15	15	10	2	22	46	23	49	6	6	16	2	12	17	10	5	3	29	16		
Percentage of Different Usage	25%	58%	19%	39%	27%	12%	55%	61%	44%	54%	15%	24%	32%	7%	33%	27%	25%	11%	11%	55%	45%		

R. Appendix: Open Interview One Example of Anonymised Transcription

M2 [REDACTED] Interview

Key: Interviewee – [REDACTED] (A), Interviewer – Karen George (B)

B: So I'm going to take notes as well as we go along. So like I said in the email if you just want to tell me some experiences basically just tell a story about volunteering it's up to which way you want to start it whether you want to talk about some good experiences or bad experiences but in the main what I'm looking at is you I suppose from your perspective as a manager because I'm going to ask volunteers later for their perspective so really it's from an organisational point of view because sometimes things work well and sometimes things don't.

A: Yeah. Right well I guess at [REDACTED] we have different types of volunteers, we have a group of people who come through as service users who then volunteer as part of their recovery and they be anything from working in the café to staffing reception, admin work, producing a newsletter and sometimes the lines between a project and volunteering are quite blurred. For example the newsletter group is a project but you could also say they are volunteers producing a newsletter for us. So that's one type of volunteer we have, another type of volunteer we get are people who have a specific skill, say photography or creative writing or at the moment animation who approach us to say would you like me to deliver a project, a group, a course on that topic and they often come in and do a time limited group. So at the minute we have got an animation project and someone is coming in supported by our staff using their specific skills to work with our participants.

B: As well as the general what I'm really interested in is trying to get the emotions of how well that works and how well that doesn't. Because sometimes it will work well and sometimes it doesn't really because what I'm looking at is to how to match people up really so that the fit is a really good fit so that someone who might have come to [REDACTED] might have perhaps been a better fit to go somewhere else and would have been idea for that organisation. So it's trying to fit people better so that you get a better experience and the volunteer gets a better experience.

A: Right. I suppose that's quite relevant with the third sort of volunteer we tend to attract who are people who are either training or qualified and want some work experience or want to enhance their CV and they come in to get some experience of what our service is erm and

in some ways I guess that group of people can be the most labour intensive to manage in terms of erm we get quite a lot of people asking to come here to do voluntary work or volunteer to improve their CV and we have to be very careful because erm it can take as much time to manage them and find things to do than they actually save for us, erm and also not everybody is comfortable working with our participant group or suitable for our participant group. So seems to be easier to manage people who come through as service volunteers or health service providers we know what the issues may be and a bit more of their need and they know us where as if someone is coming completely from outside it can be quite labour intensive for us.

B: So do you want to just lead on that a bit so maybe think of more specific things where how come that labour intensiveness comes about, do you know what I mean, so a bit more characteristics, emotions and all that.

A: Right. We want to make sure people's time here is meaningful and valued. There is tension there sometimes it feels like we are getting people to do jobs that aren't necessary. Sometimes it's not bad if people come and do six weeks with us that is not too bad.

B: So are you thinking more where it's short term?

A: We occasionally have people short term and sometimes it doesn't start as being short term but people come here to enhance their work experience with us for their CV and they get a job or go onto a course and that can be quite harder I guess because they make attachments with our service users. Sometimes I guess we do rely on them more than we should and then if they very quickly go it leaves a bit of a gap in provision. Personally I think that's a feature of volunteers really you have to be careful you don't rely on them for services. Personally I think that they can be here to enhance and to enhancing artistic services but certainly in other jobs I have seen people who need volunteers to deliver projects and I don't think you can expect quite the same commitment as from paid staff.

B: So when you were saying before about meaningful because somebody is coming and then they are going does that mean you can only pick certain roles or set certain jobs to do that for them might not be challenging enough.

A: Yes I guess so sometimes it feels like we are digging a hole to fill it back in again, you know can you sort out that cupboard, can you rearrange that file and what we are trying to do now is to move towards having proper roles and job descriptions for them to give for specific pieces of work and it feels a bit mercenary at times because some of the university graduates

seem to be desperate for work experience, which sometimes sits a bit uneasy with me and with the organisation actually that we might be able to capitalise on that to get unpaid work but I think we can provide a really positive experience if we are very careful to write a proper volunteer role description and get someone to do a specific job. At the moment again boundaries are blurred because we have a student on placement on his sandwich year doing marketing in business studies and he has been fantastic and he's writing a marketing plan and looking at social media and he has a very clear idea of what he wants to get from his placement with us. We are only covering his expenses, I guess that would count as a volunteer wouldn't it.

B: Ah yes um

A: But he is performing a distinct role in something nobody here has the expertise or the capacity to do it in terms of marketing our services and our organisation. Whereas in the past we have found we have people coming and we are finding them things to do and that can be quite dispiriting for the volunteer and quite a lot of work for us.

B: Ok I mean what you can do is you can actually talk about some specific experiences like you know but I don't need to know people's names or you can make up a name or whatever but maybe you can try and think in particular a volunteering role that worked really well and try to think of what the characteristics were as to why that really worked well and then can we look the same at a one that didn't and what those pointers were.

A: Okay well I guess our café would be a success which is entirely staffed by volunteers and it's open once a week for lunches and there is staff support there but we have a lead volunteer in there supporting a group of volunteers and that is a genuine operating café that local people come in it's not just staff. They prepare the food, clear up and sell it. It is a proper operating café and that's been phenomenally successful in terms of the kind of personal development of the volunteers involved and increasing confidence and self-esteem and what have you.

B: So did you say that just runs once a week

A: Yes

B: So would you say that there was any one particular person who has really made that a success and why.

A: Yeah there is one person and she actually works for us now but she came as a participant moved on to being a volunteer with a few guys and actually she worked on reception as well

in the café. Took the lead for the café and subsequently applied to for 2 jobs with us. She does 2 jobs with us now, she's a paid receptionist for us and she is a wellbeing worker for our wellbeing project.

B: So what characteristics does that person have that made her successful?

A: Commitment to the role, when she was volunteering, she was reliable. There was acknowledgement that it was a 2 way relationship. The organisation benefitted from her volunteering but she was benefitting from the experience, the confidence building, the volunteering role and there was almost like a willingness to do more. There was always a willingness to help where ever she could which then made it easier for her to take on new roles and ultimately to get the jobs.

B: So would you say that she had a good knowledge of the organisation before she actually got involved

A: No I don't think so well she came through as a service user. I think she learnt and she was keen to find out more as she went along. She would attend meetings and away days and it's that kind of erm I guess it's that someone who can make a difference from both sides. If someone really engages with the organisation and we treat them like a staff member who happens to not be paid then they get more included and more valued whereas somebody who just parachutes in and does their little bit and goes again maybe that doesn't work quite as well at times.

B: I think that's what I meant by knowledge of the organisation because she had a prior knowledge do you think that helped to make it more beneficial.

A: Yes well I think it's across the board really we have 30 staff and only 3 of them are full time so we have to work quite hard to make sure people still feel part of [REDACTED] and not isolated. But we almost have to remind ourselves to extend that to volunteers, that they do get the staff newsletter and that they do get invited to certain staff meetings or group briefings. This year for the first time ever we invited all the volunteers for the Christmas meal whereas that hadn't been done in the past and I don't think ever. Quite interesting because where my wife works they didn't invite the volunteers to the Christmas meal and she was quite upset they didn't and there was quite a heated discussion about it. I think it's relatively small things a relation can do to maintain the good will of a volunteer.

B: It's a bit of respect isn't it?

A: Yeah I think sometimes we, it almost slips our mind to include volunteers in some of those things where paid staff it seems to be more automatic to include them in messages and memos.

B: So really it's, don't take them for granted.

A: No, no we are trying to get better at that by making sure volunteers have role descriptions or have some kind of opportunity funded, appraisal, training and the sort of support you would give a member of staff.

B: Does everyone who comes in want to go through that kind of training and appraisal or just some people?

A: No because as I said before some people generate quite a lot of good will because it's a very well known brand for health and a lot of people know someone who has had poor mental health and want to give something back and some people do just have something to offer. We have had volunteers who have had photography skills who have taken photographs for the annual report or people who have had skills around health and safety who have written an H&S policy and set about and that sort of person wouldn't really be interested in being treated like a staff member on a day to day basis. So it's having an awareness of the different sorts of volunteers and making sure you treat them accordingly.

B: So how do you find that out then or is it just from being with them?

A: There is no mechanism is there or not for us it would just be kind of gut feeling your relationship with them and your kind of input. Yeah I've had an issue here since I've been [redacted] a year and a half. I don't always get introduced to volunteers and some of them are with us for a year in training and I bump into them in the kitchen and ask who are you then and I've tried to say to the team that they should get an induction like a staff member and every staff member gets a short chat with me and I really should have at least half an hour with a volunteer if they are going to be a regular volunteer so I can tell them a bit about the organisation because as [redacted] it's a bit embarrassing that there are strange people wandering around the building and you are not quite sure who they are.

B: So are you saying that the induction should be for staff or volunteers as well

A: yeah we try now to get back into the habit of doing these things. If I was going to be a regular volunteer what they get is an H&S talk and from the manager the history of the organisation and a [redacted]

B: So where do you think it doesn't work well then?

A: Um when one of the ways you can go a little bit wrong is when there has been a misunderstanding for whatever reason between the volunteer and between us in what the work would be. We often get, we occasionally get people who are interested in forensic psychology I think because it's a senior science and they rather come here to get some experience or volunteer and we have to kind of point out that you can't get involved in the counselling service because you can't sit in on a counselling session and sometimes I think they are disappointed if they can only get involved in the group work or the garden group or they are kind of office based and we know in the past that's been quite difficult to manage if someone really wants to get involved with psychological therapies because there is a very clear route and protocols on what you can and can't do. Also because we can see ourselves a wellbeing organisation some people may think that we are a bit like [REDACTED] may have been 10-15 years ago and its more about drop ins for people who have mental illness and there expecting to almost be like a day centre for old or something and we have to be quite clear that's not how we work and how our participants are like. So that's about vetting the volunteers and making sure they are aware and we are aware of what they are looking for. We are trying to get better at that as well as it's something that hasn't always worked that well in the past. Something else we have had slight issues with is being because of the nature of our work we do kind of have to check volunteers and get references and CRB checks and there is a little bit of resistance from volunteers sometimes for that, whether there is anything informing that or not you know people ask why do I need a CRB check to sit on reception I just want to help out. Well because you might be left one to one alone with someone who is quite distressed and anxious which, could lead to some inappropriate behaviour we need to be sure that we do what we can.

B: I know I've had a few people in the past as well who have come through that and what you tend to find out is when they were a lot younger they shop lifted or something like that and don't particularly want people to know. They think well it was 20 odd years ago and I've moved on and like whatever. I can understand but then it might not be and obviously that's were but I don't know if there's any way of trying to realise that actually there's loads of people in the same boat you know who were daft or silly when they were younger, it's neither here nor there and we're not really worried about anything like that what we are interested in is the here and now sort of thing.

A: It can cause a bit of friction can't it sometimes. Our participants mostly are classed as vulnerable adults but in terms of particularly disturbed or distressed then they could for me as [REDACTED] I'd be horrified if something horrible was to happen and it came to light that we hadn't done all we could do to check that person here even if the CRB check came back clear because I've never been caught doing something but if something horrible happened and one of our volunteers or staff members hadn't done their duty checks. I mean I know most people are fine with it but occasionally there is a little bit of resistance their and then like you say sometimes it's cause there is stuff in peoples past and sometimes it's just a little bit of indignation of being checked even though they've got nothing in their past but I think it's important to do and again if we are going to treat volunteers like staff it's that whole package isn't it that you do and there's lots of nice stuff.

B: Perhaps that's another area for research isn't it but there's there has always been a huge resistance to CRB checks from a lot of people like I say from staff as well as volunteers and the only thing that I've come across is like I say but some people like you say have got nothing on their records so why are they bothered about having a CRB check I don't know unless they think something might be there for something they definitely did and are a bit worried I don't know I suppose it's those things again why? I suppose even if you did a bit of research they wouldn't tell you the truth would they.

A: No No. Yes we have definitely come across and it is quite hard. (pause) There are lots of positives and it is quite hard to convince volunteers to have any sort of appraisal or supervision often they are not really bothered about having a regular sit down with whoever is in charge of them which we will offer them as we do a member of staff here as I think it's important to get that same sort of mechanism. Not exactly line management but some sort of supervision but most of them don't want to a lot of the time they don't want to do that because they just want to come and do this bit and go so we don't insist on it we can't insist on it but it's always offered.

B: So do you find that's a problem or ...

A: Well yeah logically it's a problem because they have to pass the quality standards to be part of [REDACTED] and they expect us to do it and I don't know if it's in the problem in the actual delivery on the ground because I guess we are small enough to know people quite well to have lots of contacts with people and certainly we always offer that kind of supervision.

B: Can you not add into your quality standards a form that says this person was offered and they sign it to say they

A: Yeah I would don't start me on quality standards erm yes it would certainly it's acceptable that it's offered but I think [REDACTED] would like everyone to have that kind of supervision erm

B: Sometimes they need it

A: Yeah yeah erm I mean we haven't had any really bad experiences with volunteers in the year and a half I have been here but I hear stories that we have had in the past and I have certainly seen not so good things happen at other places I have worked or been involved in erm. I think there was a volunteer previously that we strongly suspect was dipping their hand in the till in the café

B: I've had one of them before as well

A: It was just before I started but you know I think everyone found that really difficult to handle erm

B: I suppose it's harder if they're doing something else as well. I know when it happened to me and I had somebody who was dipping their hand in the café but at that point in time we didn't even have a proper till. The box that they were given with the money in sometimes came back with less money in than they had been given which made it a bit obvious. But I think because they had got away with it for so long they started to get careless and I felt awful because I had to ring the police and put cameras in and stuff so we had some hard evidence. It's hard because that person did lots of other things that were beneficial to the centre but other people were saying he had been bragging about it and other people were wanting to get involved so then you have to put a stop to because if you don't people think you can get away with it. I know it's hard when people are struggling financially but they need to remember that it's a registered charity. I don't know how you handled it.

A: Somebody told me ages ago but I can't remember exactly how it was handled. The person left eventually. I think they got a bit upset that they got suspected but I don't think it was ever conclusively proven but there were discussions around it and it made the volunteer feel uncomfortable and left and then the thieving stopped which is pretty strong circumstantial evidence.

B: Would these things ever come to light on a CRB but there are people who use voluntary organisations for their own gain and it's really hard to make, I don't know if you know or

whether you can think what the characteristics might be of a person who I mean have you experienced what kind of characteristics that type of person would hold?

A: You mean of someone who would abuse the position erm sometimes I think it's that kind of notion that it's a charity so it doesn't matter because it's no ones' money. I think the nature of being a charity generally can sometimes mislead people. How we are doesn't really matter erm

B: What about the individual do you think there are certain characteristics or certain things that come out do you think from the individual that you think actually this is the kind of thing they did or that was the personality that fits sort of thing?

A: Erm I don't think I have come across anyone who volunteered in this line of work who got into it just to do something nasty I think it was mostly opportunists or even the most misguided people get into volunteering and community work or community groups with the best of intentions. I don't think they're always kind of were advised or but I do think as far as I can see the motivation to get involved can often be twisted can't it you know. It's why some people get involved with committees. Sometimes people get involved with committees for the best of reasons but they become very exclusive and self-serving you know very difficult to penetrate through for new comers and stuff. There are thousands of volunteers isn't there?

B: So a lot of your volunteers are participants then

A: Yeah a lot of participants and the counselling service have a fair amount of volunteers who are qualified or training who get that experience for their CVs erm

B: So are a lot of them short term then?

A: Yeah or certainly time limited here for a year or six months. I would go for people who have a skill or IT, photography or whatever. They won't do that forever they'll do that for six months

B: So can you see any difficulties in that other than that they are only there for a short time

A: Erm I guess with continuity sometimes because there are people coming and going and the counselling service has found that with actually having volunteers that they are just about embedded and getting accepted when it seems to be time for them to go again so that can be quite difficult. But I guess it's managed because it's clear from the start that it's a time limited role. The only long term volunteers that I can think of would be the people working in the café on an on-going basis and even that personnel has changed slightly. That's the only kind of regular on-going volunteering that we have at the moment.

B: So what about your board of directors?

A: Yeah well I was thinking the trustees are volunteers obviously there is a constitutional point that they have to stand down after three years so they have a rolling process with a third of the board for three years and then another for three years

B: I would think it would be hard to get people to agree to that one but mind you I think that's partly because they are so limited with volunteers but then I know organisations where the chair has been there for twenty years and things like that.

A: I don't think that's healthy

B: No neither do I

A: We even find out ours is slightly different as some of our participants who access our service in the Westgate Centre have been coming for twenty years and they find it really hard to kind of engage with what we are doing now because it's very different to what we were doing twenty years ago and that I can imagine will be the same we have had almost yeah we have had an entirely new board of directors since I started. I think there are 2 people still on since I have started, it must have been something I said. That's quite nice because everyone is fresh, you know. Ten years ago we did that, rolling board and the other thing we are kind of wrestling with at the moment with volunteers and it goes for the directors as well is just the more general type of volunteer is to kind of covering their expenses. We feel we should to fulfil an obligation so volunteers are not out of pocket, it's a big value but some cases it can be quite a financial drain. We've got a fulltime marketing student volunteer for a year with us. We pay bus fares because it's a thousand pounds for him to get here which is cheap to get a marketing plan

B: [I suppose yeah you've got to look at it in perspective a suppose in reality haven't you]

A: yeah but you know we've got to find that from somewhere and with times being tough this could make a difference between us being in surplus or deficit next year

B: Mhm

A: So we're trying to kind of decide as an organisation how much we support volunteers and the least we can do is cover their travel costs

B: Mhm...so I mean what do you think it is in the last few years that have improved volunteering at all or do you not think that there has been any improvements

A: Erm...difficult to say because my last job, didn't really rely heavily on volunteers, er but I think something that has changed is the economic down turn and, there being less jobs and there being certainly the likes of graduates or, people finishing their a-levels who want some work experience erm, so, I guess you go back a few years it seemed a lot of volunteers were older people had a bit more spare time, erm to commit to things and would sit on committees or help out, generally in the village hall or whatever community association, whereas now even in the last six weeks we've been approached by quite a few pretty well qualified younger people who want to get some stuff on their CV really, erm...so that seems to be a little bit of a shift, erm I do know, other organisations that have sort of made, capitalising on that, and it's something we've considered you know writing a job description for every volunteer to come do a piece of work for 6 months or a year or whatever...and maybe see if we can treat it as a bit of an internship with a little bit of expenses and some small financial reward or whatever the, I haven't quite go my head round it all at the moment coz I know there are rules about not replacing a paid post with a volunteer I think an example is

B: I don't know if you've already got a paid worker

A: [yeh]

B: yes doing that

A: Right

B: You're not allowed if you were making somebody redundant but if somebody left

A: Yeh

B: You would be allowed to do so you think that the job description, is a real plus is a real benefit as it's

A: Yeh, I think it will be a benefit to the organisation because we would be able to target recruit volunteers, for specific roles we need, and with money being tight there's certain things we can't we find it hard to attract funding, in terms of say like developing new projects or whatever I mean the marketing plan would be one, erm we would've had to of paid someone to do that probably erm so if we we're looking at areas of the business that we'd need help with that someone could maybe come and do

B: So it's like a mini volunteer contract then really isn't it I suppose in reality

A: [Yeh]

B: So you think the induction is a proper description of the role or like a sort of mini contract but obviously they're not getting paid is that bringing better quality?

A: I think they're almost a response to, different types of volunteer coming forward, I could they probably go hand in hand

B: [right]

A: Erm if we're gunna advertise for someone to come and do, look at the marketing strategy for us for 6 months or a year we need to do them a role description that'd offer them more of a support you've given a paid member of staff

B: [Mhm]

A: erm whereas if someone just contacted us directly and said oh I've just retired do you need any help on reception, I don't think we would've necessarily be so formal as to write a receptionist job description and offer you know appraisals and stuff

B: [Mhm]

A: erm so that kind of shift

B: How many people do you think there are who've retired and want that kind of I mean mind you some people that have retired have got huge amounts of skills mind you not that everybody wants to use those skills when they've retired they want something which is more sort of like a suppose dropped down a level especially if they've been in jobs where they've had huge amounts of stress

A: [Yeh]

B: but I mean saying that if you drop from a job that's had high stress to like doing nothing that's when things like Alzheimer's and dementia kick in quicker so it is about healthy mind healthy body actually

A: [Yeh]

B: to do a bit of volunteering but to have a bit of a challenge I suppose there to keep your mind going so I mean how do you do anything like that is there anything that people do while they're on reception if they're eh

A: Erm, it depends on we had a few for example our chair contacted us just over a year ago who'd retired from chief exec of █, and we kind of coaxed her to come and be a trustee and quickly she became chair, erm we have had people contact us where maybe they've had, women who've stayed at home to raise children who've have left home you know now have got time on their hands erm we get that occasionally erm

B: So how do you keep them interested then I mean what kind of

A: Well they...it's difficult for someone on reception because it's quite an isolated, you know it's not a particularly exciting role sometimes but for so eh reception work is quite well with service users because it's quite often quite low pressure

B: [Right]

A: in as much as long as you happy talking to people...erm

B: So do you not give people who are on the reception then other sort of jobs to do while they're there maybes

A: Vey very often there are other admin jobs for us to admin, bits and pieces whether it be photocopying or putting information packs together or maybe it depends if they've got IT skills and stuff maybe collating photographs or taking photos off digital cameras and put them on a memory stick erm, we try and kind of obviously use people skills and interests as best as we can

B: Coz I suppose the other thing people can be doing maybes where they're on if they're if they're were interested or bored would be to do some sort of like eh even online training or if they're not IT orientated the tick box type of thing were you're sort of sitting there or whatever

A: Yeh I see but I don't, when I don't think we particularly have a kind of CPD mechanism for volunteers

B: Right

A: We've had specific examples people in the café did food hygiene course and they are required courses...but erm

B: So is that not part of the appraisal system then

A: Well it would be in if people were engaged with the appraisal

B: But they're not really are you saying then that really people don't engage with the appraisal, very few?

A: Not all not with the experience no people won't often

B: Right

A: And again it takes quite a lot of work to sort of chase them up and set the date and write it up and I think...it's an easy thing to fall by the way side if the individual is not particularly enthusiastic about engaging with it

B: And it might be something really that puts people off if they don't want to do that as well

A: Yeh

B: So you know perhaps when people are advertising they need to be saying we have this in place but we won't

A: We won't make you do it

B: Yeh uha, its I suppose or you don't even look at it I mean I suppose one of the things that I want to look at is you know what do people want to get out of it and what do the organisations want to get out of it and you know how can we sort of meet so that you get a really good match...and things and I think what you're saying is you know really perhaps drawing up mini contracts even

A: Yeh

B: But make sure there's a proper induction

A: Yeh

B: I think is the good ones

A: [Well I think that's key have a proper induction and also invite volunteers to things like the staff away days and Christmas meals]

B: Yeh, it's about valuing them really isn't it

A: Yeh, to say you know you've give us x amount of hours of unpaid work this year, and that works really well with Christmas we have sort of erm a staff planning, half day staff planning followed by a meal and we invited volunteers to that and I think that it did go down really well, erm

B: Yeh

A: And think we tried to kind of shift our mindset a little bit as an organisation to think of them more as unpaid staff, erm and that helps gunna trigger all the things you would normally do with any other staff member, bar bar one or two you know obviously but, erm

B: So if there was a particular issue with a volunteer, erm would you actually take that on board and encourage them to go and do some training or something or have a chat with them or would you, be more inclined to sort of just leave it because they're a volunteer

A: No I guess we'd have a chat with them, I don't know if we'd necessarily encourage them to do an training, it's not out of the question we wouldn't be against it erm...I mean I'm trying to think...it would probably be more around the other way were we saw some training come up with G-vox said you know we've got this instruction to book keeping training and someone in the café wanted to, we'd say oh this might be useful to you, we maybe wouldn't be as likely to do it round the other way were we say actually we think you could benefit from some, whatever quality diversity training

B: Mhm

A: Erm it'd be more opportunist thing where we see the training come through which is probably not the best way to do it but, erm I mean we'd certainly talk things through we

wouldn't just let volunteers keep on going, if we thought there was something they could benefit with addressing

B: Right

A: Erm particularly given the sensitive nature of our work

B: So how do you challenge the quality and diversity one then if there was like an issue there and if you're saying that you wouldn't mind talking to them but, you wouldn't actually send them on any training

A: [Well that's a good point coz erm, all the staff went through quality and diversity training last year which was it was in-house but we had a counsellor who had a training background so she could deliver it, erm but I don't think we offered it to volunteers, which makes a mockery of it in some ways coz a lot of them have as much if not more face to face contact with people than I do for instance

Video cut off at this point.

After this point you could see M2 look straight at the camera as the record light went off but didn't say anything. However their attitude changed a bit and they became more negative towards support and funding expenses. I couldn't understand this change until I went through the video footage.

S. Appendix: Demographic Data of Participants from Pilot and Main Wellbeing Interviews

		Pilot						Main							Totals	Percentage
		1	2	3	4	5	6	1	2	3	4	5	6	7		
Male				1		1	1	1		1			1	1	7	54% Male
Female		1	1		1				1		1	1			6	46% Female
Country of Origin	England	1	1	1	1		1	1	1		1	1		1	10	77% British
	Philippines					1									1	8% Philippines
	Thailand												1		1	8% Thailand
	Pakistan									1					1	7% Pakistan
Age	0-18		1			1									2	15% 0-18yrs
	19-36	1					1	1		1			1		5	39% 19-36yrs
	37-54			1										1	2	15% 37-54yrs
	55-72				1						1	1			3	23% 55-72yrs
	73-90								1						1	8% 73-90yrs
	91+														0	Average age is 40
Status	Student		1			1		1					1		4	31% student
	Retired				1				1		1				3	23% retired
	Unemployed	1								1				1	3	23% unemployed
	PT Employed					1						1			2	15% PT employed
	FT Employed			1											1	8% FT employed
Post Code	NE3					1	1								2	15% NE3
	NE5	1	1	1	1										4	31% NE5
	NE6							1	1	1			1		4	31% NE6
	NE8													1	1	7% NE8
	NE20											1			1	8% NE20
	NE63							1							1	8% NE63
Disability								1	1						2	15% Disabled

T. Appendix: Pilot Wellbeing Baseline Reasoning

Participant Coding	P1	P2	P3	P4	P5	P6
Usefulness	Have a good understanding of people. Can boost my confidence by meeting new people.	Have developed knowledge of helping animals but would like to develop more.		Have some experience that could use to empathise with others in a similar situation. Learning and using skills makes me feel very useful.	Friends and family how often I help. Helping people more and giving up some of your time.	Broke up with girlfriend, was on antidepressants but got new girlfriend. Need to sustain situation.
Relaxation	Struggling to build relationships at home. Self developed and learnt to cope with things. Need a sense of freedom and independence	Homework - I need to organise myself more. End of exams helped me to move on. Need to plan, make notes and prioritise.	Very Handy Less work pressure, more personal time, win lottery, less stress with Daniel.	No problems or worries, comfortable. Achieved a lot in life, good job, children, looking after husband, good friends. If felt more useful could relax more as would be satisfied.	Use bubble bath and music to relax.	Where am I headed and how can I assist myself. I need to work myself into a more financially sound situation.
Relationships	Feel confident to meet people & build a rapport. Need to improve relationships within the family but need independence to do that	Talking to people and making conversations needs improving. Moved on previously through growing confidence. Need to join more group activities.		Get to know people very well supports 2 difficulties and relaxing together. Takes time to get to know people. Communicate with individuals working together to improve and change course of action.	Close school friends need to be more in touch and others I need to not give as much.	I have the ability to develop relationships well but I seldom choose to. I am in control of my actions.
Energy	Managed to turn life around. Working with other people.	Like getting up early and going out. Used to play netball. I need to re-join the netball club.	Worn out. When I was younger had more energy, more time to myself and kept myself fit.	Doing things I want to do.	Treadmill. Out more spending less time at home. Go to gym.	I am able to get up and do many things when I want. I try new things when I want.
Changes	Previous decision to turn life around	Could not cope with moving house. I need to understand other peoples point of view through use of empathy.	Can cope with changes in technology if I set my mind to it. Changed to teaching which changed pattern of work which is easier but not in control of changes now.	Used to doing certain things in certain ways when John was ill. Now able to do lots of little things I couldn't do before but slowly getting there. Need to think things through.	Moving from the Philippines to here. Spending more time in different countries.	I think life is changing constantly and I handle it quite well.
Confidence	Changes in life by going back out and applying for jobs and going for interviews. Felt better when people said I was intelligent.	Confident in self but would not put myself forward for anything. Grew in confidence with age. Need to participate more at school.	Feel confident at work	New situations, making decisions, more confident when necessary to make decisions. Go walking. More confident in caring. When you achieve something you feel more confident.	Presentations in class	I feel very confident in most areas of my life but sometimes doubt can hinder my confidence.
Decision-making	Very independent in decision-making. More opportunities will allow me to make decisions more easily.	Quite good at deciding to do something or go somewhere.	Always been able to manage own decisions. When worked for myself it was higher. Could regain through progression at work.	Can make decisions without the confidence. Chew decisions a lot before making them. By using experience in volunteering will help clearer thinking and a more rapid response.	I struggle a bit with decision making. Need to make more decisions in life discussions, questionnaires and youth council.	Decision making is a fairly simple task. The desire to make a decision changes upon my mood.
Support	Would like to be self sufficient and deal with own issues. Develop trust with everyone.	If stuck ask for help.	I always ask for help and support. When I worked for myself I had no one to ask for help.	Love being independent and want to do things for myself. Not good at seeking support but when have I do wonder why I don't ask earlier as the support is there in the family.	Not too good at asking for help from teachers. Need to ask more often.	I know where to find the support I need and the kind of different support available in life.
Giving	People come to me with issues as I have a lot of life experience to give advice. Good to understand people.	I help when people have a problem. I can empathise more with people - if situation reversed what would I want them to do to help me?	Always been supportive to others. Stood back but always helped if people asked.	Give high support to Maureen and did to John. Feel I could give more. Volunteering - talking and listening will make me feel good.	Talking to people when crying.	I feel I offer good support for those that ask for it but sometimes refrain from involvement if not requested.
Learning and Development	Like to move on. Would like to work with people, helping them to help themselves.	Like learning about new things. Widen interests. Maths - research more & take to further education.	Always learning new things. Only drawback is funding and time to do it. Was lower when had no money or time when I was working for myself.	Open to learning new things.	Scouts	It depends on what new thing and when I am expected to learn it.
Emotions (feelings)	Still feeling a bit dependent. I need to set goals and gain self worth.	If I get angry or upset I need to control it. Research how to cope with emotions.	Tired as get worn out all the time. When younger had more energy. Need to follow through with hospital appointment.	Cry when appropriate. When feeling down go for a walk or go meet friends or go to town. Rationalise feelings and counteract them.	Stop crying about little stuff. Act more mature and take more responsibilities.	I feel I can restrain my emotions as good as the best but allowing them to flow is a different matter.
Trust	Do trust but at a certain level. Need to develop relationships and support, becoming stronger.	When people are away I don't always trust the people who are around them. I need to put more faith in people.	Same people liars, lazy and selfish. When worked for myself could hand pick work colleagues. Can do more for people in a management post which builds trust both ways.	Believe in people and willing to trust.	Telling your secrets. In Philippines was surrounded by family. Need to speak more to family on Facebook.	I can trust people after I have known them for a while or after analysing their behaviour.
Lifestyle	Getting a healthy structure to my life. Reach my goals & develop all round emotion & trust.	Do not exercise enough and eat loads of snacks but not over weight. Need to join sports club and eat more healthy.	Good lifestyle, eat healthy and try to stay fit. Can sustain with more money.	Good family and friends. Good social life, healthy, eat well, comfortable to be on own walking.	Eating less junk food and exercising more.	I do a fair amount of walking and eat good food but I do over sleep and am not nearly as active as I could be.
Challenges	Changes always present challenges.	Different work at school which I need to improve. I need to be more open to new challenges.	Usually cope very well when given the time. Need to progress my career.	Like new challenges especially active challenges.	Trying to fix problems with friends and family and try to do more intelligent stuff.	I like new challenges, it keeps life interesting. Like moving to China to teach and experience the culture.
Commitment	Strong willed	Netball and Duke of Edinburgh award not following through. Need to go back to these things I enjoyed doing.	If start something nearly always finish it.	Physical challenges easy but personal challenges are harder but work them out.	Washing the windows.	I feel I generally will always finish something I have started but sometimes I can take a while to finish it.
Point of View	Good at listening and understanding individuals takes. I need to listen to people more.	If upset or angry hard to see things from others point of view. Need to stay calm and take a step back and be aware of the real situation.	Always look at peoples point of view but don't always agree with it.	Like to be able to help and support so try to understand people. Helps improve relationships.	Debate club - understanding peoples points of view more.	I am normally very good at understanding people. In university I was given an award for using this skill. However I feel '10' is unachievable as people are too complex.
Respect	Find it easy with new people. Will continue to develop my emotions	If a difference of opinion debate but still respect.	Always respect other people but not always comfortable with what they do.	Couldn't respect a rapist. Can respect ethnicity, culture, etc.	Judging people. Listen to people more.	I find it easy to respect people, who deserve or have not shown they don't deserve respect. On the other hand, I find it more difficult to give respect to those that have shown they do not deserve it.
Involvement	Involved with friends and new people. Will develop more by being involved with new people.	Going out with friends, keeping up to date with conversations. I need to be not so dependent on other people. Need more hobbies, focused and committed activities.	Am involved with people but people need their own space sometimes.	Family and friends steady relationships very important. Like meeting new people.	Buying a house - need to speak more about my point of view to parents.	I like to be involved but not too much. It is more important that people desire to be involved with me to fend off my boredom, when necessary.
Valued	Friends and extended family. Need to value myself more and develop relationships. Need to feel more secure, develop trust and talk about feelings. Would feel value volunteering.	Feel important to those around me and it makes me feel good.	Get no thanks off people. The more you do the less you are respected. More valued when worked for myself, people were grateful and I took pride in my work. Blame the culture at work. Need to progress to management position.	Feel very valued by family and friends some more than others. It is a security.	People listening to me. In Philippines people listened more.	People ask me for help sometimes if I have a skill set they need and some people just wish to have contact with me as I do with them.
Happiness	Need to start work and gain independence. Need to reach goals and develop other bits of my life.	Happy with those around me. Exams are finished. Need to spend more time with my friends.	Too much work not enough play, lack of money and need less stress. To gain more money need to progress to management position.	Almost very happy. Quite satisfied that happy as can be as can't change the past.	New Years resolutions to be completed.	I am very privileged and have a comfortable life, however, I am still to find answers about life that comfort me to make me feel more content.

U. Appendix: Pilot Wellbeing Actions to Move to Desired Scaling

Participant	P1		P2		P3		P4		P5		P6
Usefulness	Start new job	30.06.12							Tidy up living room and kitchen. Help with cooking.	31.07.12	
Relaxation	Gain own place	28.02.13	Homework and exam plans.	Ongoing	Exercise more and have a holiday	25.07.12					Gain work for a more financially sound position after travels.
Relationships	Gain own place	28.02.13	Rejoin netball club	31.09.12			Develop slowly to new relationships	Ongoing	Go out with friends more often.	31.07.12	30.06.14
Energy	Start new job	30.06.12			Exercise more and have a holiday	25.07.12			Go to gym with mum.	31.07.12	Exercise more and plan travel 01.09.12
Changes			Imagine I am in other persons shoes when issues come up.	Ongoing	Work as a team and prove management skills. Apply for degree	01.09.13	Try different things to improve will power and motivation.	Ongoing			
Confidence			Volunteer for assemblies and public speaking.	31.07.12							Experience in China 01.09.12
Decision-making	Start new job	30.06.12			Work as a team and prove management skills. Apply for degree	01.09.13					Gain work for a more financially sound position after travels.
Support							Take small steps with practical situations in volunteering	30.09.12	Ask teachers more for help	31.07.12	
Giving			Imagine I am in other persons shoes when issues come up.	Ongoing							Offer more support to those who don't request it.
Learning and Development	Check qualifications I need to enter university	31.7.12	Do A level Maths	31.09.13			Italian	16.07.12			Gain experience for a more financially sound position after travels.
Emotions (feelings)	Start new job	30.06.12	Research how to cope with emotions and read the power of now.		Sort out hospital appointment	06.07.12	Life experience and self control	01.01.32			
Trust			Research psychology of trust on the internet.	06.07.12	Work as a team and prove management skills. Apply for degree	01.09.13			Spend more time with family on facebook.	31.07.12	
Lifestyle	Pass driving test. Gain promotion in new job.	28.02.13	Rejoin netball club	31.09.12	Work as a team and prove management skills. Apply for degree	01.09.13	Swim and gym	30.09.12			Do more exercise and improve my sleeping patterns
Challenges	Follow action plan	28.02.13	Research opening up to challenge on the internet.	06.07.12	Work as a team and prove management skills. Apply for degree	01.09.13	Walk St Cuthberts way and walking in Ireland	12.10.12	Research about St Oswalds & PDSA	31.07.12	Gain experience for a more financially sound position after travels.
Commitment			Find subject areas I like and feel more confident to do alone if need to be so as to complete Duke of Edinburgh award.	30.06.13							Try to finish thinks quicker.
Point of View			Read the Power of Now	31.07.12							
Respect											
Involvement			Spend more time on art work	30.06.12					Speak more to parents.	31.07.12	
Valued	Start new job	30.06.12			Work as a team and prove management skills. Apply for degree	01.09.13			Speak more to parents and friends	31.07.12	Gain work for a more financially sound position after travels.
Happiness	Follow action plan	28.02.13	Set dates with friends	31.08.12	Work as a team and prove management skills. Apply for degree	01.09.13			Complete actions in this plan. Go to Mark Tonys with friends and family.	31.12.12	Gain experience for a more financially sound position after travels.

V. Appendix: Pilot Wellbeing Community Actions to Move towards Desired Scaling

Participant Coding	P1		P2		P3	P4		P5		P6
Usefulness	Volunteering with young people & sharing skills	31.01.13	Work experience at animal shelter	30.06.13		Learn new skills through volunteering at day care centre	30.09.12	Gain skills at St Oswald's.	31.12.12	
Relaxation	Volunteering with young people & sharing skills	31.01.13				Volunteering at day care centre	30.09.12			
Relationships	Volunteering with young people & sharing skills	31.01.13				Volunteering at day care centre	30.09.12	Gain skills at St Oswald's.	31.12.12	
Energy								Do a walk or a run for St Oswald's - check the internet.	31.12.12	
Changes	Volunteering with young people & sharing skills	31.01.13				Volunteering at day care centre	30.09.12			
Confidence	Volunteering with young people & sharing skills	31.01.13				Volunteering at day care centre	30.09.12			
Decision-making	Volunteering with young people & sharing skills	31.01.13				Volunteering at day care centre	30.09.12	Youth Council	31.09.12	
Support	Volunteering with young people & sharing skills	31.01.13				support from co-workers in volunteering at	30.09.12			
Giving	Volunteering with young people & sharing skills	31.01.13				Volunteering at day care centre	30.09.12			
Learning and Development						Will have to be able to control emotions through volunteering at day care centre	30.09.12			
Emotions (feelings)	Volunteering with young people & sharing skills	31.01.13				Volunteering at day care centre	30.09.12	Gain skills at St Oswald's.	31.12.12	
Trust	Volunteering with young people & sharing skills	31.01.13						Gain skills at St Oswald's.	31.12.12	
Lifestyle						Walking there and back to Volunteering at day care centre	30.09.12			
Challenges						Volunteering at day care centre	30.09.12	Taking care of animals at PDSA	31.12.12	
Commitment	Volunteering with young people & sharing skills	31.01.13	Volunteer with animal related organisation	30.06.13						
Point of View	Volunteering with young people & sharing skills	31.01.13				Volunteering at day care centre	30.09.12			
Respect	Volunteering with young people & sharing skills	31.01.13								
Involvement	Volunteering with young people & sharing skills	31.01.13				Volunteering at day care centre	30.09.12	Gain skills at St Oswald's and PDSA	31.12.12	
Valued	Volunteering with young people & sharing skills	31.01.13								
Happiness	Volunteering with young people & sharing skills	31.01.13								

W. Appendix: Pilot Wellbeing Questionnaire Results

	Pilot Research Community Wellbeing Questionnaire							
	Questions	Interviewees answers						Totals
		P1	P2	P3	P4	P5	P6	
a	Age	21	14	49	71	15	24	32.3
b	Gender	Female	Female	Male	Female	Male	Male	50/50
c	Status	Unemployed	Student	Full time employed	Retired	Student	Part time employed	33% Student, 17% Unemployed, FT employed, PT employed & retired
d	Postcode	NE5 1YB	NE5 1HG	NE5 5NR	NE5 1JS	NE3 1YP	NE3 1YP	67% NE5, 33% NE3
1	Preparation	P1	P2	P3	P4	P5	P6	Totals
1a	Do you feel that the background information to the research was adequate?	Yes	Yes	Yes	Yes	Yes	Yes	100% yes
1b	How might the background information to the research have been improved?							
1c	Do you feel confident in using the scaling tool?	Yes	Yes	Yes	Yes	Yes	Yes	100% yes
1d	What might increase your confidence in using the scaling tool?						Research information on effectiveness	Research information on effectiveness of scaling tool
1e	Do you believe the scaling tool is useful for you?	Yes	Yes	No	Yes	Yes	Yes	83% yes
1f	Any further comments on the scaling tool?	You can actually see where you want to be	Helped me see where I wanted to be in the different topics				Makes me think about what I want & how to get it. Would be good if people could get help from the system in low scoring areas.	You can actually see where you want to be. Helped me see where I wanted to be in the different topics. Makes me think about what I want & how to get it. Would be good if people could get help from the system in low scoring areas.
2	Frame of Reference	P1	P2	P3	P4	P5	P6	Totals
2a	Are the headings within the frame of reference appropriate to you?	Yes	Yes	No	Yes	Yes	Yes	83% yes
2b	How could the wellbeing frame of reference be improved?		Be more specific with different relationships, e.g., family/friends	No improvement needed		No improvements needed	For online version have assistance with further explanations, e.g. relationships can be family, friends, etc.	For online version have assistance with further explanations, e.g. relationships can be family, friends, etc.
2c	Which were the 5 most important question heading asked with regards to your wellbeing?	Support	Trust	Emotions (feelings)	Relationships	Happiness	Emotions (feelings)	Emotions 67%
		Relationships	Happiness	Confidence	Emotions (feelings)	Challenges	Usefulness	Support, Happiness, Relationships, Lifestyle 50%
		Trust	Valued	Learning & Development	Usefulness	Lifestyle	Decision-making	Trust, Confidence, Relaxation, Usefulness, Valued 33%
		Confidence	Relationships	Relaxation	Support	Support	Happiness	Decision-making, Challenges, Learning & Development 17%
		Emotions (feelings)	Commitment	Lifestyle	Valued	Relaxation	Lifestyle	Point of View, Respect, Changes, Involvement, Giving, Commitment 0%
3	Interview Environment							
3a	Was the interview environment appropriate?	Yes	Yes	Yes	Yes	Yes	Yes	100% yes
3b	Were any of the following lacking?	None	None	None	None	None	None	100% nothing lacking
3c	How could you improve the environment for the interviews?	None	None	None	None	scented candles	Online recommend quiet relaxing place & option to skip question & go back	If online ask people to find quiet relaxing place (scented candles) and have options to skip a question or go back

4	Use of the Process	P1	P2	P3	P4	P5	P6	Totals
4a	Do you feel the process will help you achieve your aims/objectives?	Considerably	A little	A little	Quite Significantly	Quite Significantly	Quite Significantly	17% Considerably, 50% quite significantly, 33% a little
4b	Do you feel the measure of movement will be use to you?	Yes	Yes	No	Yes	Yes	Yes	83% Yes 17% no
5	Do you feel that the process contributes to the following?	P1	P2	P3	P4	P5	P6	Totals
5a	Identification of priorities for support/intervention?	Agree	Agree	Agree	Agree	Agree	Strongly agree	83% agree 17% strongly agree
5b	A new perspective on current circumstances, and seeing the big picture?	Agree	Agree	Agree	Agree	Agree	Agree	100% agree
5c	Identification of strategies that have worked in the past?	Agree	Agree	Agree	Agree	Agree	Agree	100% agree
5d	Exploration of options for the future?	Strongly agree	Agree	Agree	Strongly agree	Strongly agree	Neither agree or disagree	50% strongly agree 33% agree 17% neither agree nor disagree
5e	A means of setting goals?	Agree	Agree	Agree	Strongly agree	Agree	Strongly agree	
5f	A means by which you can take responsibility for your future?	Agree	Agree	Disagree	Agree	Disagree	Strongly agree	50% agree 33% disagree 17% strongly agree
5g	A realisation of the progress/achievements you have already made?	Agree	Agree	Agree	Agree	Strongly agree	Strongly agree	67% agree 33% strongly agree
5h	A means of improving your self-awareness?	Agree	Agree	Agree	Strongly agree	Agree	Strongly agree	67% agree 33% strongly agree
5i	A means of improving your confidence?	Agree	Disagree	Disagree	Agree	Agree	Agree	67% agree 33% disagree
5j	A means of improving your self-esteem?	Agree	Disagree	Disagree	Strongly agree	Disagree	Agree	50% disagree 33% disagree 17% strongly agree
5k	A measure of your wellbeing indicators?	Agree	Agree	Agree	Strongly agree	Agree	Strongly agree	67% agree 33% strongly agree
5l	A contribution to your action plan?	Agree	Agree	Agree	Strongly agree	Strongly agree	Agree	67% agree 33% strongly agree
5m	Recording documentation that is easy to use?	Strongly agree	Agree	Agree	Agree	Agree	Agree	83% agree 17% strongly agree
6	Computerised System	P1	P2	P3	P4	P5	P6	Totals
6a	I feel very comfortable using an automated system?	Agree	Agree	Agree	Agree	Agree	Agree	100% agree
6b	What kind of screen background would you like?	Beach	Countryside	Countryside	Mountains	Beach	Plain	33% countryside & Beach, 17% Mountains & plain plus request for multiple options
6c	Would you have a preference of voice?	No	Yes	No	No	Yes	Yes	50/50 voice preference & not
6d	If yes which gender?	Either	Female	Either	Either	Either	Female	67% either 33% female
6e	Do you have an accent preference?	No	No	No	No	Yes	No	87% no preference 17% funny accent
6f	Would you prefer to be interviewed by an interactive character which laughs & reacts to you or would you feel happy just having a voice?	Either	Avatar - speaking interactive character	Just a voice	Either	Avatar - speaking interactive character	Just a voice	33% Avatar, Just a voice, either
6g	Would you want to be able to view your distance travelled?	Yes	Yes	Yes	Yes	Yes	Yes	100% yes
6h	Would you want to be able to access/save/print your action plan?	Yes	Yes	Yes	Yes	Yes	Yes	100% yes
7	Any other comments	P1	P2	P3	P4	P5	P6	Totals
	Any other comments?							

X. Appendix: Life-Board Distance Travelled for All Interviews

“Life-board” (Projects Used: 5)					
Number of individuals: 44					
	Baseline	Desired	Latest Review	Distance Travelled Baseline to Latest Review	% Movement Towards Desired State
Employment / Training	6.1	8.6	7.2	1	44.00%
Education					
Accommodation	6.9	8.9	7.2	0.3	15.00%
Money	5.1	8.1	5.9	0.9	26.70%
Relationships	6.7	8.7	7.5	0.8	40.00%
Influence (R)	4.1	2.3	3.6	0.4	27.80%
Stress (R)	6	3.8	5.3	0.7	31.80%
Alcohol (R)	1.6	1.3	1.3	0.3	100.00%
Drugs (R)	3.7	2.7	3.3	0.4	40.00%
Health	6.9	8.7	6.8	-0.2	0.00%
Happiness	6.6	8.9	6.7	0.1	4.30%
Average for all headings	6.29	8.19	6.78	0.49	
% Movement Towards Desired State Across All Headings: 25.79%					

Y. Appendix: Life-Board Distance Travelled Summary Average for G1

Number of individuals: 9 of which 0 are archived and 9 are active					
	Baseline	Desire d	Latest Review	Distance Travelled Baseline to Latest Review	% Movement Towards Desired State
Employment / Training / Education	7.9	9.1	8.3	0.4	33.30%
Accommodation	7.4	9.2	7.9	0.5	27.80%
Money	5.9	8.4	7	1.1	44.00%
Relationships	6.8	9	7.6	0.8	36.40%
Influence (R)	3.7	1.6	2.9	0.8	38.10%
Stress (R)	5.7	2.2	3.6	2.1	60.00%
Alcohol (R)	0.2	0.2	0.2	0	0.00%
Drugs (R)	7.9	6.1	7.7	0.2	11.10%
Health	7.6	9.1	7.9	0.3	20.00%
Happiness	6.6	9.2	7.2	0.6	23.10%
Average for all headings	6.47	8.39	7.15	0.68	
% Movement Towards Desired State Across All Headings: 35.42%					

Z. Appendix: Life-Board Distance Travelled Summary Average for G2

Number of individuals: 8 of which 0 are archived and 8 are active					
	Baseline	Desire d	Latest Review	Distance Travelled Baseline to Latest Review	% Movement Towards Desired State
Employment/Training/Education	5	8.1	6.3	1.3	41.90%
Accommodation	7.9	8.8	7.5	-0.4	0.00%
Money	5.5	7.9	6.3	0.8	33.30%
Relationships	7.3	8.3	7.4	0.1	10.00%
Influence (R)	3	2.1	3.6	-0.6	0.00%
Stress (R)	7.3	4.6	6.8	0.6	18.50%
Alcohol (R)	0.9	0.5	0.8	0.2	25.00%
Drugs (R)	0.8	0.8	0.8	0.1	0.00%
Health	6.9	8.5	6.9	0	0.00%
Happiness	6	8.6	6.8	0.8	30.80%
Average for all headings	6.68	8.23	6.95	0.29	
% Movement Towards Desired State Across All Headings: 18.71%					

AA. Appendix: Life-Board Distance Travelled Summary Average for G3

Number of individuals: 17 of which 0 are archived and 17 are active					
	Baseline	Desired	Latest Review	Distance Travelled Baseline to Latest Review	% Movement Towards Desired State
Employment / Training / Education	6.4	8.8	7.2	0.8	33.30%
Accommodation	6.9	8.9	7.5	0.6	30.00%
Money	4.8	8.1	5.1	0.3	9.10%
Relationships	7	8.8	7.9	0.9	50.00%
Influence (R)	4.5	2.7	3.9	0.6	33.30%
Stress (R)	5.3	4.2	5.6	-0.3	0.00%
Alcohol (R)	1.7	1.7	1.5	0.2	2.00%
Drugs (R)	2.5	1.9	2.3	0.2	33.30%
Health	7.4	8.6	6.5	-0.9	0.00%
Happiness	7.4	8.9	6.6	-0.8	0.00%
Average for all headings	6.59	8.16	6.75	0.16	
% Movement Towards Desired State Across All Headings: 10.19%					

BB. Appendix: Results of Practitioner Interim Questionnaire

Questions		Overall Responses - Percentage
1. Preparation		
a) Do you feel that the training you received in using the Rickter Scale® was adequate?	Yes	100%
	No	0%
b) How might it have been improved?	Section on interview review procedures; more detailed information about the theoretical background of the scale and more training in using the IMS.	
c) Do you feel confident now in using the Rickter Scale®?	Yes	100%
	No	0%
d) What might increase your confidence further?	33% felt unsure of how to feedback to responses, one practitioner suggests discussing strategies to recommend to participants. 66% felt they needed more practice.	
e) Do you believe the Rickter Scale® is a useful tool to use with your participants?	Yes	100%
	No	0%
f) Further comments:	Rickter is a very positive tool to use with new participants. Participants can clearly see where problems are based and actions to overcome. It is a useful evaluation tool. However there are some concerns about the use of the board with mental health participants and those who do not have the functionality.	
g) Have you received support/encouragement from your Manager in using Rickter?	Yes	100%
	No	0%
2. Frame(s) of Reference		
a) Are the current headings within the 'Lifeboard' "Frame of Reference" appropriate to your participants?	Yes	40%
	No	60%
b) How specifically could the 'Lifeboard' "Frame of Reference" be improved?	Headings too general especially for mental health patients, timely. Practitioners are starting to recognise headings useful to their participants and possible new headings for discussion in their teams.	
3. Interview Environment		
a) Where have you used the Rickter Scale®?	No use yet	0
	In an office	70%

	In a car	0%
	Participant's own home	20%
	In a public place	10%
	Elsewhere	0%
b) Were any of the following lacking?	Privacy	33%
	Time	50%
	Space	0%
	Comfort	17%
c) How could you improve the environment for Rickter Scale® interviews?		33% requested more time and privacy. 11% requested a more comfortable room.
d) To what extent is your use of the Rickter Scale® with participants likely to be interrupted?	Very likely	0%
	Quite likely	27%
	Unlikely	55%
	Not at all	18%
Comment:	Immigration legislation effects how participants can be supported.	
4. Use of the Rickter Scale®		
a) How much has the Rickter Scale® been used?	No participant use yet	0%
	Number of initial 'baseline' interview with participants =	23 baseline interviews had been held
	Number of review interviews with participants =	2 review interviews have been held
b) What criteria determine which participants you use the Rickter Scale® with?	Time available	22.20%
	The participant's attitude	22.20%
	The sort of information you require	22.20%

	Your opinion of its usefulness to the participant	33.40%
	Other (please specify)	33% felt the level of mental disorder/ functionally
c) Please give a brief summary of a case study where the Rickter Scale® was used and proved to be of value:		<p>There is a mix of ages, gender and ability. Rickter has shown how good it is at encouraging people to take more responsibility for their own life by setting their goals and continuously work towards their desired state. One woman was even excited by Rickter.</p>
		<p>Interview nr.1: the interviewed woman has a part time job as domestic care worker, she's a good relationship with the person she assisted but she considers her job not well paid and not respected/acknowledged. She has to face a difficult economical and family situation: she's recently left her boyfriend and his house, she has a problematic 16 years old- daughter, she's to pay a rent of a new house, the bills...at the moment she needs support from Social services. The action plan focuses on the research of a new/integrative job that can allow xxx to earn more money and to find a solution for all the economic difficulties she has. Because she's already assisted by Ferrara Social Services, my main responsibility will be to report the xxx's needs to the social worker and see if she can receive some further help.</p> <p>One participant was a bit unhappy with her situation. Her son is with her parents while she is in training and looks for vocational training. She has seen very clearly for the first time, that she depends very much on her parents and she isn't free to decide on her own. So now she is looking for a kindergarten.</p> <p>A woman of about 40 years who in the course of the baseline interview showed signs of having suffered from traumatic experiences (to my esteem) and saw herself at a Zero in about two third of the Lifeboard headings.</p>
c) Please give a brief summary of a case study where the Rickter Scale® was used and proved to be of value:		<p>A young woman who hasn't a vocational training. The Rickter Scale reflected her situation and the need of looking for a vocational training but it didn't show an improvement to the earlier situation without using the Rickter Scale. Another</p>
d) Please give a brief summary of a case study where the Rickter Scale® was used, but proved <i>not</i> to be of value:	Comment:	

		woman now needs intensive help, which the practitioner can barely provide.
e) Please indicate which categories of participant you have used the Rickter Scale® with and how many of each:	Male Female Under 18 18 - 21 22 - 25 26 - 49 50+	45% 55% 0% 0% 15.50% 46% 38.50%
f) How would you summarise what it is you are working to achieve with your participants?	Comment:	Possible strategies that can be applied to support people into work or training. It helps to understand participants and for participants to understand themselves, eg basic strengths 7 skills so as to find agreeable routes forward. Continued monitoring helps people to stay in vocational training. Supports psychosocial rehabilitation, psychological improvement, mental health improvement and social inclusion.
g) Do you feel the Rickter Scale® helps you achieve these aims/objectives?	Not at all A little Quite significantly Considerably Varies	0 13% 50.00% 25.00% 13%
h) Please indicate how this measure of 'movement' has been perceived by -	The Organisation/ Practitioners: The participants: No reviews yet	11% stated satisfaction for organisation/practitioners 89% no comment 11% stated without significant emotional fluctuations for the participant. 89% no comment 89% have completed no reviews yet 11% no comment
5. Specific outcomes for staff. Do you feel that the Rickter Scale® contributes to the following?		
(a) a means of eliciting significant participant information	Agree strongly	22%
	Agree	78%

	Disagree	0%
	Disagree strongly	0%
	Agree strongly	0%
	Agree	100% agree
(b) a means of improving team communication about individual participants	Disagree	0%
	Disagree strongly	0%
	Agree strongly	0%
(c) a means of improving communication with external agencies regarding individual participants	Agree	100%
	Disagree	0%
	Disagree strongly	0%
(d) a standardised structure for interviewing participants	Agree strongly	0%
	Agree	100%
	Disagree	0%
	Disagree strongly	0%
(e) evidence of <i>your</i> effectiveness in terms of demonstrating your support/intervention with participants	Agree strongly	0%
	Agree	57%
	Disagree	43%
	Disagree strongly	0%
(f) clarification of participant needs/limitations/barriers/options	Agree strongly	33%
	Agree	67%
	Disagree	0
	Disagree strongly	0%
(g) a measure of the participant's soft indicators	Agree strongly	11%
	Agree	89%
	Disagree	0%
	Disagree strongly	0%
(h) a contribution to the participant's action plan	Agree strongly	11%
	Agree	67%

	Disagree	22%
	Disagree strongly	0%
(i) recording documentation that is easy to use	Agree strongly	22%
	Agree	45%
	Disagree	33%
	Disagree strongly	0%
6. Specific outcomes for participants. Do you feel the Rickter Scale® contributes to the following?		
(a) identification of their priorities for support/intervention	Agree strongly	33%
	Agree	67%
	Disagree	0%
	Disagree strongly	0%
(b) a new perspective on their current circumstances, and seeing the big picture	Agree strongly	33%
	Agree	67%
	Disagree	0%
	Disagree strongly	0%
(c) identification of strategies that have worked in the past	Agree strongly	10%
	Agree	70%
	Disagree	20%
	Disagree strongly	0%
(d) exploration of options for the future	Agree strongly	10%
	Agree	70%
	Disagree	20%
	Disagree strongly	0%
(e) a means of setting goals	Agree strongly	44.50%
	Agree	44.50%
	Disagree	11%
	Disagree strongly	0%
(f) a means by which they can take responsibility for their future	Agree strongly	10%
	Agree	70%

	Disagree	20%
	Disagree strongly	0%
(g) a realisation of the progress/achievements they have already made	Agree strongly	11%
	Agree	78%
	Disagree	11%
	Disagree strongly	0%
(h) a means of improving their self-awareness	Agree strongly	25%
	Agree	75%
	Disagree	0%
	Disagree strongly	0%
(i) a means of improving self-confidence	Agree strongly	12.50%
	Agree	87.50%
	Disagree	0%
	Disagree strongly	0%
(j) a means of improving self-esteem/self-efficacy	Agree strongly	12.50%
	Agree	87.50%
	Disagree	0%
	Disagree strongly	0%
7. Any other comments:		33% feel Rickter applies only to people who have functionally and 11% feel Rickter is timely.

CC. Appendix: G1 New Frame Distance Travelled

G1 Frame New (Projects Used: 1)					
Number of individuals: 18 of which 0 are archived and 18 are active					
	Baseline	Desired	Latest Review	Distance Travelled Baseline to Latest Review	% Movement Towards Desired State
Accommodation	7.6	8.8	7.7	0.1	8.30%
Appearance/ Personal Hygiene	7.4	8.6	7.9	0.5	41.70%
Activities	7.2	8.4	7.9	0.7	58.30%
Relationships	6.4	8.6	7.3	0.9	40.90%
Community	6.9	8.2	7.6	0.7	53.80%
Support	8	8.8	8.1	0.1	12.50%
Stress (R)	4.3	2.6	3.6	0.8	41.20%
Medication	6.4	7.6	7	0.6	50.00%
Health	6.7	8.8	7.6	0.9	42.90%
Progress	6.6	8.7	7.7	1.1	52.40%
Average for all headings	6.89	8.39	7.52	0.63	
% Movement Towards Desired State Across All Headings: 42.00%					

DD.Appendix: G2 New Frame Distance Travelled

G2 Frame New (Projects Used: 1)						
Number of individuals: 26						
	Baseline	Desired	Latest Review	Distance Travelled Baseline to Latest Review	% Movement Towards Desired State	
Work	5.3	9.1	6.2	0.9	23.70%	
Relationships	7.7	8.6	7.9	0.2	22.20%	
Health	8.3	9	8.2	-0.1	0.00%	
Stress (R)	5.9	2.6	6.1	-0.3	0.00%	
Work / life balance	5.8	8.1	6.3	0.5	21.70%	
Support	9.1	9.3	8.5	-0.5	0.00%	
Skills	7.5	9.6	8.4	0.9	42.90%	
Barriers	7.7	8.8	8.4	0.7	63.60%	
Accommodation	7.1	9	7.8	0.7	36.80%	
Cooperation	6.8	9	7.9	1.2	50.00%	
Average for all headings	6.94	8.79	7.35	0.41		
% Movement Towards Desired State Across All Headings: 22.16%						

EE. Appendix: G3 New Frame Distance Travelled

G3 Frame New					
Number of individuals: 24					
	Baseline	Desired	Latest Review	Distance Travelled Baseline to Latest Review	% Movement Towards Desired State
Employment/Training/Education	2.8	8.3	5.4	2.6	47.30%
Relationships	7.1	8.8	8.6	1.5	88.20%
Stress (R)	6.9	2.1	4.1	2.8	58.30%
Health	6.4	8.9	6.8	0.4	16.00%
Readiness	7.5	9	8.5	1	66.70%
Troubles	6	8	7.3	1.3	65.00%
Freedom	6.3	9	7.5	1.3	44.40%
Clarity	7.6	9	8	0.4	28.60%
Self-confidence	6.4	8.5	7.6	1.3	57.10%
Happiness and Satisfaction	6.4	8.8	7.4	1	41.70%
Average for all headings	5.96	8.62	7.3	1.34	
% Movement Towards Desired State Across All Headings: 50.38%					

FF. Appendix: G4 New Frame Distance Travelled

Summary: Average for UK-NW						
	Number of individuals: 38 having completed 2 or more interviews. Total number of interviews = 251					
	Baseline	Desired	Latest Review	Distance Travelled Baseline to Latest Review	% Movement Towards Desired State	
Reading	3.6	7.4	6.2	2.6	68.40%	
Writing/Spelling	3.2	7.7	5.5	2.3	51.10%	
Speaking	3.5	6.8	6.1	2.6	78.80%	
Numbers	3.8	7.2	6.1	2.3	67.60%	
Money	7.3	8.4	8.5	1.2	100.00%	
Other Skills	7.4	8	7.5	0.1	16.70%	
Family Life (R)	4.8	3.5	3.9	0.9	69.20%	
Personal / Community Life (R)	4.2	2.8	3.1	1.1	78.60%	
Working/Education Life (R)	6.1	1.7	4.8	1.3	29.50%	
Expectations	5.4	7.2	6.9	1.5	83.30%	
Average for all headings	4.91	7.47	6.5	1.58		
% Movement Towards Desired State Across All Headings: 61.81%						

GG.Appendix: Evidence of an Individuals Actions from One Practitioner

Actions in Progress Interview					
Assigned To	Assigned On	Due By	Individuals Name	Action Required	Action Taken
xxxx	27.8.12	30.8.12	xxx	Find work; increasingly write applications	xxx is moving and has firm contact with the job centre. There are potential jobs at the new residence already researched
xxxx	27.8.12	30.8.12	xxx	Give concrete assistance in the application letter; common places research on the internet and in print media	
xxxx	27.8.12	27.9.12	xxx	xxx mental stability depends on an adequate job. They want to see that much	xxx is not as pressured as they will move midterm
xxxx	27.8.12	27.9.12	xxx	xxx asked for any assistance and help with job applications and job search	Applications in the metropolitan area of the new place of residence were created and shipped together
xxxx	27.8.12	27.9.12	xxx	xxx health status and wellbeing depends on a safe workplace and satisfactory employment	
xxxx	27.8.12	27.9.12	xxx	Find appropriate workplace	
xxxx	27.8.12	31.10.12	xxx	xxx would no longer live in a long distance relationship and clarify the family situation.	Planned move at the end of October to the significant other

HH. Appendix G1 Practitioners Evaluation Questionnaires Results

Question	considerably	quite significantly	a little	not at all	Not answered
a. How much does the process and data improve your understanding of your participants' needs?		2			
b. How much does the process help you identify areas of support and resources needed for your participants?		2			
c. How much does the process improve your measurement of participants' progress?		2			
d. How much does the process help you to measure the impact of your support and interventions with your participants?		2			
e. How much does the process improve your participant review process?		2			
f. How much does the process improve your quality of work with participants?		2			
h. How useful do you find the IMS system and reports?		2			
	Yes	No	Comment		
g. Is there anything about the process you would want improved for the benefit of you or your participants?		2			
i. Is there anything about the IMS you would like improved for you or your participants?		2			

II. Appendix G2 Practitioners Evaluation Questionnaires Results

Question	considerably	quite significantly	a little	not at all	Not answered
a. How much does the process and data improve your understanding of your participants' needs?	2	1			
b. How much does the process help you identify areas of support and resources needed for your participants?	3				
c. How much does the process improve your measurement of participants' progress?		3			
d. How much does the process help you to measure the impact of your support and interventions with your participants?		3			
e. How much does the process improve your participant review process?		3			
f. How much does the process improve your quality of work with participants?	1	2			
h. How useful do you find the IMS system and reports?	2	1			
	Yes	No	Comment		
g. Is there anything about the process you would want improved for the benefit of you or your participants?	1	1	We have already talked about this during a supervision meeting: we wanted to do further reviews with participants 2 months later they will have finished the course to record their progress in terms of employability.	1	
i. Is there anything about the IMS you would like improved for you or your participants?		2			1

JJ. Appendix G3 Practitioners Evaluation Questionnaires Results

Question	considerably	quite significantly	a little	not at all	Not answered
a. How much does the process and data improve your understanding of your participants' needs?	1	1			
b. How much does the process help you identify areas of support and resources needed for your participants?	1	1			
c. How much does the process improve your measurement of participants' progress?	1		1		
d. How much does the process help you to measure the impact of your support and interventions with your participants?					2
e. How much does the process improve your participant review process?		1	1		
f. How much does the process improve your quality of work with participants?		2			
h. How useful do you find the IMS system and reports?		2			
	Yes	No	Comment		
g. Is there anything about the process you would want improved for the benefit of you or your participants?	1	1	Not having to fill in date of interview at every action. Ability to fill in my and participants actions at same time.		
i. Is there anything about the IMS you would like improved for you or your participants?	1	1	Headings should be repeated below respective evidence and action.		

KK. Appendix Results of All Practitioners Evaluation Questionnaires

	considerably	quite significantly	a little	not at all	Not answered
a. How much does the process and data improve your understanding of your participants' needs?	3	4			
b. How much does the process help you identify areas of support and resources needed for your participants?	4	3			
c. How much does the process improve your measurement of participants' progress?	1	5	1		
d. How much does the process help you to measure the impact of your support and interventions with your participants?		5			2
e. How much does the process improve your participant review process?		6	1		
f. How much does the process improve your quality of work with participants?	1	6			
g. How useful do you find the IMS system and reports?	2	5			
	Yes	No	Comment		
h. Is there anything about the process you would want improved for the benefit of you or your participants?	2	4	1. We have already talked about this during a supervision meeting: we wanted to do further reviews with participants 2 months later they will have finished the course to record their progress in terms of employability. 2. Not having to fill in date of interview at every action. Ability to fill in my and participants actions at same time.		
i. Is there anything about the IMS you would like improved for you or your participants?	1	5	1. Headings should be repeated below respective evidence and action.		

LL. Appendix G1 Manager Evaluation Questionnaire Results

	considerably	quite significantly	a little	not at all
a. How much does the process data help to measure the impact of the Practitioners' intervention and support?		1		
b. How much does the process help you, as a Manager, to review your team's work?	1			
c. How much does the process help identify new support needs or resource needs?		1		
d. How much does the process help your team improve the quality of their work?		1		
e. How much does the process help to provide evidence for your funders and stakeholders?		1		
f. How useful do you find the IMS system and the reports it produces?	1			
g. Is there anything about the process or IMS that you would like to be improved to support the needs of your organisation?	Yes	No	Comment	

MM. Appendix G2 Manager Evaluation Questionnaire Results

Question	considerably	quite significantly	a little	not at all
a. How much does the process data help to measure the impact of the Practitioners' intervention and support?	1			
b. How much does the process help you, as a Manager, to review your team's work?	1			
c. How much does the process help identify new support needs or resource needs?	1			
d. How much does the process help your team improve the quality of their work?	1			
e. How much does the process help to provide evidence for your funders and stakeholders?	1			
f. How useful do you find the IMS system and the reports it produces?	1			
g. Is there anything about the process or IMS that you would like to be improved to support the needs of your organisation?	Yes	No	Comment	

NN.Appendix G3 Manager Evaluation Questionnaire Results

Question	considerably	quite significantly	a little	not at all
a. How much does process data help to measure the impact of the Practitioners' intervention and support?	1			
b. How much does the process help you, as a Manager, to review your team's work?		1		
c. How much does the process help identify new support needs or resource needs?	1			
d. How much does the process help your team improve the quality of their work?	1			
e. How much does the process help to provide evidence for your funders and stakeholders?		1		
f. How useful do you find the IMS system and the reports it produces?		1		
g. Is there anything about the process or IMS that you would like to be improved to support the needs of your organisation?	Yes	No	Comment	
	1	The overlays are now adapted well to the needs of our target group of job returners. We'd like to have them adapted to other participant groups as well, especially to migrants in language courses who are entering the job market. The IMS needs further adaption: 1. General revision with easier handling; 2. Adaption to German environment (i.e. different classification of migrants and alike. The reports IMS produces are OK.		

OO.Appendix All the Managers Evaluation Questionnaires Results

Question	considerably	quite significantly	a little	not at all
a. How much does the process data help to measure the impact of the Practitioners' intervention and support?	2	1		
b. How much does the process help you, as a Manager, to review your team's work?	2	1		
c. How much does the process help identify new support needs or resource needs?	2	1		
d. How much does the process help your team improve the quality of their work?	2	1		
e. How much does the process help to provide evidence for your funders and stakeholders?	1	2		
f. How useful do you find the IMS system and the reports it produces?	2	1		
g. Is there anything about the process or IMS that you would like to be improved to support the needs of your organisation?				
	Yes	No	Comment	
	1	2	<p>The overlays are now adapted well to the needs of our target group of job returners. We'd like to have them adapted to other participant groups as well, especially to migrants in language courses who are entering the job market. The IMS needs further adaption: 1. General revision with easier handling; 2. Adaption to German environment (i.e. different classification of migrants and alike). The reports IMS produces are OK.</p>	

PP. Appendix: G1 Participants Evaluation Questionnaires Results

Questions	0	1	2	3	4	5	6	7	8	9	10	Yes	No	Comment
1. Comfort: How comfortable are you about using the sliding scale board? (compared to completing a written questionnaire, or just answering a lot of questions)									4	2				
2. Clarity: How clear are you about what the process is being used for?								5	1					
3. Goals: Having used the process, how clear are you about your goals and your action plan?					1	1	4							
4. Sliders: How much does moving the sliders help you to feel where you are in your life and where you would like to be?						1	1	1	3					
5. Process: How helpful is it for you to use the sliding scale board in your interviews?							4	2						
6. Questions: How easy was it for you to understand the questions?						1	3	2						
7. Talking about Yourself: How easy does the process make it for you to talk about yourself and the things going on in your life?						2	2	2						
8. Awareness: Having used the process how aware are you about what you've already achieved and what your skills and abilities are?						2	4							
9. Links: How easy is it for you to see links between the different headings on the sliding scale board?					2	3	1							
10. After the interview: How positive did you feel immediately after your last semi-structured interview?						2	3		1					
11. Is there anything else about the process that you would like to see improved?												6		
Overall Totals	0	0	0	0	0	3	12	27	12	6	0		6	

QQ. Appendix: G2 Participants Evaluation Questionnaires Results

Questions	0	1	2	3	4	5	6	7	8	9	10	Yes	No	Comment
1. Comfort: How comfortable are you about using the sliding scale board? (compared to completing a written questionnaire, or just answering a lot of questions)								1		4				I'm very comfortable because it's an interesting and intuitive tool
2. Clarity: How clear are you about what the process is being used for?				1						4				It's very clear even because it's very easy to use.
3. Goals: Having used the process, how clear are you about your goals and your action plan?				1				1		3				It helps me to focus on goals and actions.
4. Sliders: How much does moving the sliders help you to feel where you are in your life and where you would like to be?								3		2				It helps me to visualise feelings and intentions. This modality with the sliders helped me enough.
5. Process: How helpful is it for you to use the sliding scale board in your interviews?									2	3				It's very useful because it's dynamic and engaging. It's very useful ((it helped me to think about my personal life situations through a tool that looks like a game)
6. Questions: How easy was it for you to understand the questions?					1				1	3				It's very simple because the questions are very clear. It made it very easy. It reminded me a tool I used when I was a child.
7. Talking about Yourself: How easy does the process make it for you to talk about yourself and the things going on in your life?						1			1	3				RS makes easy to talk about myself because it allows me to look at the analysed aspects in an objective way and to better focus on them.
8. Awareness: Having used the process how aware are you about what you've already achieved and what your skills and abilities are?								1		4				I'm very aware because it encourages me to evaluate goals and skills. I'm very aware now about my potentialities.
9. Links: How easy is it for you to see links between the different headings on the sliding scale board?								2	1	2				The RS board helps to visualise the connections between the different headings
10. After the interview: How positive did you feel immediately after your last semi-structured interview?								1		4				I feel very positive after the interview, because it stimulated me to think about the different aspects of my life and to enhance my awareness about goals, strategies and skills I've acquired and I want to reach in the future
11. Is there anything else about the process that you would like to see improved?											1	4		In my opinion it would be useful to make more questions about the following aspects: job, health, relationship with husband/ fiancé, family, etc. It has been a very important testing for me. It let me know the person I am, my strengths and the potentialities I didn't expect to have. I've learnt how to develop myself, how to become stronger and more self-confident. It let me discover that I'm best (more skilled and prepared) than I imagined to be. I realized for instance, that about a specific experience I gave more than I thought I could give. This tool has the power to let things inside me get out.
Overall Totals	0	0	0	0	2	0	2	0	9	5	32	1	4	

RR. Appendix: G3 Participants Evaluation Questionnaires Results

Questions	0	1	2	3	4	5	6	7	8	9	10	Yes	No	Comment
1. Comfort: How comfortable are you about using the sliding scale board? (compared to completing a written questionnaire, or just answering a lot of questions)									1	2	2			
2. Clarity: How clear are you about what the process is being used for?								2			3			
3. Goals: Having used the process, how clear are you about your goals and your action plan?							1				4			
4. Sliders: How much does moving the sliders help you to feel where you are in your life and where you would like to be?	1			1				1	1	1				
5. Process: How helpful is it for you to use the sliding scale board in your interviews?	1						1			1	2			
6. Questions: How easy was it for you to understand the questions?									1		4			
7. Talking about Yourself: How easy does the process make it for you to talk about yourself and the things going on in your life?							1			3	1			
8. Awareness: Having used the process how aware are you about what you've already achieved and what your skills and abilities are?									2	2	1			
9. Links: How easy is it for you to see links between the different headings on the sliding scale board?					1					1	3			
10. After the interview: How positive did you feel immediately after your last semi-structured interview?									2	1	2			
11. Is there anything else about the process that you would like to see improved?												5		
Overall Totals	2	0	0	0	1	1	0	5	7	11	23		5	

SS. Appendix: All Participant Evaluation Questionnaires Results

Questions	0	1	2	3	4	5	6	7	8	9	10	Y e s	N o	Comment
1. Comfort: How comfortable are you about using the sliding scale board? (compared to completing a written questionnaire, or just answering a lot of questions)	0	0	0	0	0	0	0	0	6	4	6			I'm very comfortable because it's an interesting and intuitive tool
2. Clarity: How clear are you about what the process is being used for?	0	0	0	0	1	0	0	7	1	0	7			It's very clear even because it's very easy to use
3. Goals: Having used the process, how clear are you about your goals and your action plan?	0	0	0	0	1	1	1	5	1	0	7			It helps me to focus on goals and actions
4. Sliders: How much does moving the sliders help you to feel where you are in your life and where you would like to be?	1	0	0	0	1	0	1	1	5	4	3			It helps me to visualise feelings and intentions
5. Process: How helpful is it for you to use the sliding scale board in your interviews?	1	0	0	0	0	0	0	5	2	3	5			It's very useful because it's dynamic and engaging
6. Questions: How easy was it for you to understand the questions?	0	0	0	0	0	0	2	3	3	1	7			It's very simple because the questions are very clear
7. Talking about Yourself: How easy does the process make it for you to talk about yourself and the things going on in your life?	0	0	0	0	0	0	3	3	2	4	4			The process makes easy to talk about myself because it allows me to look at the analysed aspects in an objective way and to better focus on them
8. Awareness: Having used the process how aware are you about what you've already achieved and what your skills and abilities are?	0	0	0	0	0	0	2	4	3	2	5			I'm very aware because it encourages me to evaluate goals and skills
9. Links: How easy is it for you to see links between the different headings on the sliding scale board?	0	0	0	0	0	3	3	1	2	2	5			The board helps to visualise the connections between the different headings
10. After the interview: How positive did you feel immediately after your last semi-structured interview?	0	0	0	0	0	0	2	3	3	2	6			I feel very positive after the interview, because it stimulated me to think about the different aspects of my life and to enhance my awareness about goals, strategies and skills I've acquired and I want to reach in the future
11. Is there anything else about the process that you would like to see improved?												1	13	Life aspects that could improve the rigor of the process headings would be more in line with the reality of life for someone unemployed, health, married life and family commitments?
Overall Totals	2	0	0	0	1	6	12	34	22	20	43	1	13	

TT. Appendix: Dissemination Activities in the UK

List of network groups, which are used for the presentation of SNH as well as for the distribution of Flyers and Newsletters			
Institution or Network Group	Focus	Members	Web Address
Licenced Practitioners	These are all those trained and licensed to use the Process, who currently have access to our regular Practitioner Newsletter	750 via an opt-in mailing list	www.G3-online.net www.anzianienonsolo.it www.G1.gr
Licensed Company Associates	These are all those trained and licensed as Company Associates/ Trainers, who currently receive our regular Associate Newsletter	30 Associates	
Organisations with Licensed Practitioners	These organisations receive our notifications for onward distribution to their staff via their own intranet systems	4,500 customer organisations	
University of Northumbria Wellbeing Complexity and Enterprise Group: WELCOME	WELCOME is a unique research and enterprise community. It develops ways of enhancing wellbeing and personal development through co-operation	Approximately 50 members	http://www.northumbria.ac.uk/sd/academic/ee/work/research/clis/welcome/
University of Northumbria host the final International Conference in Sutherland Building	The Conference in September 2013 showcased the results of the TOI Project, and deliver presentations which will be videoed, for onward dissemination via the internet	50+ of the 100 invited guests attended, from Education, Training and Employment agencies, and University academics	http://www.northumbria.ac.uk
The TOI and Rickter Company Website, Forum, Blog and Twitter	Use of social media for engaging with friends of participant companies, potential customers and the general public	Website has over 2000 hits per month, 120 Forum Members, 25 Blog and 10 Twitter followers	www.rickterscale.com http://www.ratingnewheightsinvet.eu/

UU.Appendix: Main Wellbeing Baseline Reasoning

	M1	M2	M3	M4	M5	M6	M7
Usefulness	Work in a lot of teams & volunteering	Can't do what I did 6 months ago as health is restricted.	Pressure need to be strong & have more confidence.	Feel very useful.	Work gets in the way as getting passion knocked out of me. Family more useful but not appreciated	I always find the best way to help my friends	Give Advice to young people. Learnt coping with illness through xxx. Built confidence giving advice to others. Life goes up and down each time.
Relaxation	Very relaxed as manage to separate myself	I am good at emptying my mind.	Just moved in so can relax without pressure.	Don't feel totally relaxed as always on the go.	Worrying about work change & funding and about my health & the dog is a nut case.	I meditate when I need to feel calm	Don't relax, always on edge as suffer pain. Chronic worrier. Need to relax, no worries, need job, happy marriage and good health
Relationships	Good at meeting new people. People remember me. There is always someone who doesn't like you.	Takes a long time to develop a relationship. Sense of person knowing.	Always good.	Happy with developing relationships.	I'm a people person but have confidence issues. Read too much into what people say.	Friendly with normal friends for someone to be a close friend they have to build up trust and respect with me.	Relationships with people here and family - caring.
Energy	Low physical and mental energy.	Inactive at the moment. Everything takes a lot of energy.	I have a bad leg so I'm limited in what I can do. I need to do a lot of relaxation. My special shoes make life easier.	I feel as if I have loads of energy but then can't be bothered. I need to build my self-confidence.	Work zaps the life out of me. I think I'm fat.	Normally feel very energised	Energy fluctuates just need to keep going, get out house meet people
Changes	Panic with change.	Need changes in my lifestyle and routine.	Good at coping with changes.	Not comfortable with change.	Quite like change, it's exciting although not always straight forward.	Easier to cope with change over time not so good with sudden change	Don't like change. Need to accept change, take ownership of change.
Confidence	Always look back, used to sing in band and play the piano. I have confidence in music and speaking to people.	Need to look at what I can do in my life and turn it around to build up my confidence and go out again.	I'm a very confident person but sometimes I need to push myself.	Sometimes don't feel confident but then again I do.	Lack confidence.	Most confidence	More confident as speaking to more people & meeting people in forum
Decision-making	Don't think too much just pick the answer. Weigh it up quickly.	Good at decision-making	Years ago made the decision to move here from London & I don't regret it.	Just do it.	Mind seeing the bigger picture and too many choices.	Consider the relationship between me and the problem, should I do it and for what purpose	Need a second opinion as to whether a good idea or not outside but not in here. Need to take control outside of here
Support	Always ask for support when I need to be 100%.	Hate asking people for help.	In the last 3 weeks went to job centre to find out what help I can get.	Not good at asking for help.	Hard at letting guard down to say struggling or need support. Don't want to be a burden.	Normally do things myself, has to be really difficult before I request help	Getting support I need don't always feel I get support I need
Giving	Good at giving support to others.	Support family a lot.	Good at giving support.		Easier to support others.	In most cases I help anyone if I can	Try to give support as much as I can
Learning and Development	I need to actively go out & read something to find an interest.	I am interested in learning new things but learning and doing is a different thing. I have good intentions.	Always interested in learning new things.	Happy where I am.	Like learning & dev. As a child under achieved. Spent the rest of my life learning. Hungry for more.	Really Like new things	Willing to Learn

Emotions (feelings)	Getting better with emotions. Struggle with parents split up.	I struggle with my emotions when alone since my husband died. Feel better when family around.	Good at controlling my emotions.	Issues with family	Couple of times ended up in tears at work where didn't want to. Like to be more practical with issues.	Manage feelings very well	
Trust	Learnt to trust properly but it was thrown back in my face.	I am good at trusting but if they break it I let them know and it's hard for them to get it back.	In a prior relationship trust was broken. I need to make sure I don't get mixed up with the wrong people.	Fine	Me telling myself things are due to a negative upbringing	When I was young I trusted everyone now I need to get to know people first so it takes longer	
Lifestyle	Don't go to the gym as regularly as I used to.	It's my capability at the minute. I need to focus on what I can do and what I have to do to get it back.	I have a good lifestyle, I home cook and my weight is stable.	Not happy with my weight and health. Need to diet.	Eating sometimes healthy & sometimes not. Work consumes my thoughts and I don't have much me time.	Need to improve ,my eating and manage my time better	
Challenges	I work in sales. Everyday there are new incentives to learn. I have problems with 1 of the senior sales team who constantly belittles me in front of others.	Cope pretty well.	This is tricky as no matter how hard you try it does not always work out.	Worry in case I fail. Don't like driving but happy where I am.	A lot chucked at me with daughters life & work. I am proactive at trying to solve things.	Like challenges	
Commitment	I need to work on this.	If I commit I always go full hog.	Good at committing to things.	Bad with diet but don't let people down so happy where it is.	Very committed to work. Somethings I'm good at somethings not.	I always finish something I have planned to do	
Point of View	I am very passive about either argue or just agree.	Pretty good at understanding others point of view.		Ok now.	1 of my strengths is to see both sides of an issue.	Everyone has different worldly experiences which affect their point of view	
Respect	Grandad is against anyone who is difference. My dad and university have helped change my respect.	Always have respect for the elderly and the young. Might not always agree.	Good at respecting others	Happy with respect.	Respect anyone regardless of difference in values.	Normally respect people unless they do something to lose my respect	
Involvement	Need someone. Used to feel very on my own even though I had lots of friends but I had no special friend. I still went out.	Important to feel involved with the children and grandchildren.	Have been involved before but sometimes too much and have to take a break.	Very important	Seeing how isolated people become makes it important to me. I have lots of friends and activities.	I am focused on my studies so need to be involved with my colleagues and lecturers	
Valued	Feel valued.	If I was not valued the children would not come. Do fell valued by the family.	Once felt useless but now going to the job centre and people are trying to help me and I feel good about it.	Feel I am valued	Husband, Kids & friends value me.	Not so valued in work as I can be replaced but it is an important role	
Happiness	I took spoke to student support when I needed to & went through all my problems. Interacted with kick boxing, which made me feel valued & wanted.	Feel miserable but happy when the family come, it always goes up.	Keep smiling and do things you like to do.	Alright where I am I get more involved and I accept my life and keep busy.	Not unhappy but need to work on frustrations and be proactive.	I am very happy experiencing a new environment and studying	

VV. Appendix: Main Wellbeing Actions to Move to Desired Scaling

	Action	Date	Action	Date	Action	Date	Action	Date	Action	Date	Action	Date
	M1	M2	M3	M4	M5	M6	M7					
Usefulness	Develop career with a new job	01.06.13					Look for a work placement for my son.	1.03.13	Meditate	8.02.13	Keep on learning by reflecting on positive times. Record in diary after 2 weeks reflect on positive achievements	Ongoing
Relaxation	Finish degree	31.05.13	Stop self - pitying.	24.03.13	Spend more quality time with the rest of the family.	28.01.13	Ring doctors. Ring dog trainer Book a massage/spa day. Start swimming weekly.	1.02.13			Watch my weight, accept praise, recognise & reflect on it & enjoy.	Ongoing
Relationships	Maintain current relationship, develop confidence & take it to work.	25.01.13	Don't pre-empt people, good in everyone get back to bowls.	24.03.13			Be more open to opportunities & focus on the why.	1.02.13			Care about family support son	Ongoing
Energy	Go to gym every other day.	28.1.13	Pursue operation and keep active around the house.	24.03.13	Follow up hospital appointment.	18.3.13	Swimming & walking	28.01.13	Same actions as relaxation.	1.08.13	Be more aware of eating and work and find a balance between the 2 so I don't feel so tired Get out more, try new avenues, meet with mate Dave	Ongoing
Changes	Gain a new job.	15.8.13	Move into a bungalow & get rid of baggage.	31.12.13			Ask others to help & not be afraid to ask.	28.3.13	Same actions	8.02.13	Meditate Support son	Ongoing
Confidence	Aim for a 1st degree	15.5.13	Start going out with friends once a fortnight & go to friends houses.	7.02.13	Follow up hospital appointment.	18.3.13			Draft resume for befriending service and discuss with manager then hand out for team. Lose weight, believe in myself & be more positive.	14.02.13	Apply for role in students union	8.02.13
Decision-making	None needed									14.02.13	Support son	Ongoing
Support	None needed		Make a visible to do list for family to clearly see.	31.01.13	Enquire what support is available with Citizens Advice.	29.1.13	Support list for home. Support mechanism to be discussed with manager	3.2.13		14.2.13	Ask people for help to make it faster	8.02.13
Giving	None needed						None needed				Asking for support outside of Here with family.	Ongoing
Learning and Development	More reading	28.1.13					None needed			8.02.13	Give advice to other service users Learn at MIND	Ongoing

									exploring new things			
Emotions (feelings)	Visit family more. Fix dates & activities with parents.	Never look backwards, always look forwards.	4.2.13	Ongoing	Not be too focused on 1 family member as its causing issues.	Ongoing	Be more aware of the whys and be proactive in setting actions.	1.02.13				
Trust	Keep talking	25.01.13					Being more aware of my thoughts & noticing the positives. Don't negatively interpret people.	1.02.13				
Lifestyle	Go to gym every other day.	Set a new goal every day. Pursue operation & recovery.	28.02.13	24.7.13	Cut out chocolate. Cut out cakes.	29.1.13	Set a complete action plan for the month.	28.02.13	Make a logical timetable including eating habits	1.08.14		
Challenges	Be more diplomatic & logical in each new challenge.	25.01.13		Follow up hospital appointment.	18.3.13		More positive thinking.	1.02.13	Apply for role in students union	8.02.13		
Commitment	Make & use work plans.	28.1.13					Set a complete action plan for the month. Be sure to commit for the right reasons.					
Point of View	None needed						Be realistic as to why people have that point of view.	1.02.13	Apply for role in students union	8.02.13		
Respect	None needed						Be realistic as to why people have that point of view.	1.02.13				
Involvement	None needed						Same actions as confidence.		Focus and work and responsibility more	8.02.13		
Valued	Make the first move call rather than text.	25.01.13					Same actions as confidence.		Successfully complete my degree and achieve my target career	1.08.20		
Happiness	Complete this action plan	16.8.13	Move into bungalow and follow action plan.	31.12.13	Complete this action plan	18.3.13	Complete this action plan	28.3.13	Always explore new things	8.02.13		

**WW. Appendix: Main Wellbeing Community Participation Actions to Move towards
Desired Scaling**

	Action	Date	Action	Date	Action	Date	Action	Date	Action	Date	Action	Date	Action	Date
	M1		M2		M3		M4		M5		M6		M7	
Usefulness	Do more voluntary hours at Jesmond Pool	25.01.13	Did volunteer previously and misses it but not physically capable		Enquire about volunteering	5.2.13			Meet friend to discuss project proposal and set a plan.	31.03.13			Chair of User Forum	Ongoing
Relaxation	Do more voluntary hours at Jesmond Pool	25.01.13							Meet friend to discuss project proposal and set a plan.	31.03.13			Giving advice to others	Ongoing
Relationships									Meet friend to discuss project proposal and set a plan.	31.03.13			Chair of User Forum	Ongoing
Energy	Do more voluntary hours at Jesmond Pool	25.01.13			Enquire about volunteering	5.2.13	Common Ground & Messy Church.	28.01.13	Meet friend to discuss project proposal and set a plan.	31.03.13	Very inspiring work	8.02.13	More energy when doing forum	ongoing
Changes	Do more voluntary hours at Jesmond Pool	25.01.13									Interacting with others and the environment at orphan house helps me cope with changes	8.02.13	Directing change in forum to leave a legacy. Applying for funding. Changing constitution	2 months
Confidence	Do more voluntary hours at Jesmond Pool	25.01.13			Enquire about volunteering	5.2.13			Meet friend to discuss project proposal and set a plan.	31.03.13			Directing change in forum to leave a legacy. Applying for funding. Changing constitution	2 months
Decision-making							My voluntary roles help	28.01.13					Directing change in forum to leave a legacy. Applying for funding. Changing constitution	2 months
Support					Enquire at Citizens advice about a voluntary role.	29.1.13	Gospel Gossip	31.1.13	Meet friend to discuss project proposal and set a plan.	31.03.13	More likely to ask for help in Orphan House	8.02.13	Get support from MIND	Ongoing
Giving											I help people more at Orphan House		Give advice to other service users	Ongoing
Learning and Development									Meet friend to discuss project proposal and set a plan.	31.03.13	Feel new spirit to explore at Orphan House	8.02.13	Learn at MIND	Ongoing
Emotions (feelings)											Orphan House opens your heart more	8.02.13		
Trust									Meet friend to discuss project proposal and set a plan.	31.03.13	Good purpose to help others so easier to trust at Orphan House	8.02.13		
Lifestyle											Orphan House helps with good suggestions and experience	8.02.13		
Challenges					Enquire about volunteering.	5.2.13			Meet friend to discuss project proposal and set a plan.	31.03.13	See a lot of challenges at Orphan House and there is spirit	8.02.13		
Commitment							As above		Meet friend to discuss project proposal and set a plan.	31.03.13	Orphan House makes me very responsible so always complete	8.02.13		
Point of View											Orphan House helps as see share more points of view	8.02.13		
Respect											Understand and respect people more at Orphan House as not focused on your self	8.02.13		
Involvement									Meet friend to discuss project proposal and set a plan.	31.03.13				
Valued									Community involvement in local area - investigate what is in the local area	30.06.13	Orphans House gives me great involvement with people	8.02.13		
Happiness	Do more voluntary hours at Jesmond Pool	31.08.12			Enquire about voluntary role	5.2.13			Meet friend to discuss project proposal and set a plan.	31.03.13	I feel very valued at Orphan House	8.02.13		
									Community involvement in local area - investigate what is in the local area	30.06.13	Orphan House makes me very happy as I do it for no profit	8.02.13		

XX. Appendix: Main Research Wellbeing Questionnaire Results

Main Research Community Wellbeing Questionnaire									
	Interviewees answers							Totals	
Questions	M1	M2	M3	M4	M5	M6	M7		
a Age	20	81	35	63	55	22	51	47	
b Gender	Male	Female	Male	Female	Female	Male	Male	43% Female & 57% Male	
c Status	Student	Retired	Unemployed	Retired	Part time employed	Student	Unemployed	29% student, unemployed and retired and 15% PT employed	
d Postcode	NE63 8NR	NE6 4RP	NE6 2EW	NE6 3NT	NE20 9BJ	NE6 5BE	NE8 2LX	57% x NE6, 14% NE8, 14% NE20, 15% NE63	
e Date	1/25/13	1/24/13	1/28/13	1/28/13	2/1/13	2/8/13	4/15/13		
Preparation	M1	M2	M3	M4	M5	M6	M7		
1 a Do you feel that the background information to the research was adequate?	Yes	Yes	Yes	Yes	Yes	Yes	Yes	100% Background information adequate	
1 b How might the background information to the research have been improved?								No suggestions	
1 c Do you feel confident in using the scaling tool?	Yes	Yes	Yes	Yes	Yes	Yes	Yes	100% felt confident using the scaling tool	
1 d What might increase your confidence in using the scaling tool?								No suggestions	
1 e Do you believe the scaling tool is useful for you?	Yes	Yes	Yes	Yes	Yes	Yes	Yes	100% Useful to you	
1 f Any further comments on the scaling tool?	Helped provide numerical means of happiness				Saying where you are, have been, want to go is easy to visualise using the scaling tool.			Helped provide numerical means of happiness. Saying where you are, have been, want to go is easy to visualise using the scaling tool.	
Frame of Reference	M1	M2	M3	M4	M5	M6	M7		
2 a Are the current headings within the life board frame of reference appropriate to you?	Yes	Yes	Yes	Yes	Yes	Yes	Yes	100% Yes	
2 b How could the wellbeing frame of reference be improved?									
2 c	Emotions (feelings)	Confidence	Trust	Trust	Confidence	Emotions (feelings)	Changes	Trust/Confidence /Support	
Which were the 5 most important question heading asked with regards to your wellbeing?	Trust	Trust	Changes	Relationships	Decision-making	Point of view	Confidence	Involvement /Commitment /Relationships	
	Relationships	Respect	Involvement	Support	Lifestyle	Confidence	Relaxation	Emotions/Happiness/ Changes/	

		Happiness	Involvement	Support	Happiness	Involvement	Trust	Support	Respect/Giving/ Decision-making/ Lifestyle/Point of View/Trust/ Challenges/Relaxation
		Commitment	Giving	Commitment	Commitment	Support	Challenges	Relationships	
	Interview Environment	M1	M2	M3	M4	M5	M6	M7	
3	a Was the interview appropriate?	Yes	Yes	Yes	Yes	Yes	Yes	Yes	100% Interview appropriate
3	b Were any of the following lacking?	None	None	None	None	None	None	None	100% Happy with setting
	Do you feel that the process contributes to the following?	M1	M2	M3	M4	M5	M6	M7	
4	a Helps you towards achieving your wellbeing aims and objectives?	Strongly agree	Agree	Strongly agree	Strongly agree	Agree	Strongly agree	Strongly agree	71% strongly agree 29% agree
4	b Motivates you as you watch your progression through your distance travelled towards your goal?	Agree	Strongly agree	Agree	Strongly agree	Agree	Strongly agree	Agree	43% Strongly agree 57% agree
4	c Identification of priorities for support/intervention?	Strongly agree	Agree	Strongly agree	Agree	Agree	Strongly agree	Strongly agree	57% strongly agree 43% agree
4	d A new perspective on current circumstances, and seeing the big picture?	Agree	Strongly agree	Agree	Agree	Agree	Agree	Strongly agree	29% strongly agree 71% agree
4	e Identification of strategies that have worked in the past?	Strongly agree	Agree	Agree	Agree	Agree	Agree	Strongly agree	29% strongly agree 71% agree
4	f Exploration of options for the future?	Agree	Agree	Strongly agree	Agree	Agree	Agree	Strongly agree	29% strongly agree 71% agree
4	g A means of setting goals?	Strongly agree	Strongly agree	Agree	Agree	Agree	Strongly agree	Strongly agree	57% strongly agree 43% agree
4	h A means by which you can take responsibility for your future?	Agree	Agree	Agree	Agree	Agree	Strongly agree	Strongly agree	29% strongly agree 71% agree
4	i A realisation of the progress/achievements you have already made?	Agree	Agree	Strongly agree	Agree	Agree	Strongly agree	Strongly agree	43% Strongly agree 57% agree
4	j A means of improving your self-awareness?	Agree	Strongly agree	Agree	Agree	Agree	Strongly agree	Strongly agree	43% Strongly agree 57% agree
4	k A means of improving your confidence?	Agree	Strongly agree	Agree	Agree	Agree	Agree	Strongly agree	29% strongly agree 71% agree
4	l A means of improving your self-esteem?	Strongly agree	Agree	Agree	Agree	Agree	Agree	Agree	14% strongly agree 86% agree
4	m A measure of your wellbeing indicators?	Agree	Agree	Agree	Agree	Agree	Strongly agree	Strongly agree	29% strongly agree 71% agree
4	n A contribution to your action plan?	Agree	Strongly agree	Strongly agree	Agree	Agree	Strongly agree	Strongly agree	57% strongly agree 43% agree
4	o Recording documentation that is easy to use?	Strongly agree	Strongly agree	Agree	Agree	Agree	Agree	Strongly agree	43% Strongly agree 57% agree

	Computerised System	M1	M2	M3	M4	M5	M6	M7	
5 a	I would feel comfortable using an automated computerised system?	Disagree	Agree	Strongly agree	Agree	Agree	Strongly agree	Neither agree or disagree	29% strongly agree 43% agree 14% neither agrees or disagrees and 14% disagrees
5 b	What kind of background music would you like?	Any	None	Any	Any	None	Mozart	Any	57% any, 29% none, 14% Mozart
5 c	What kind of screen background would you like?	Any	Countryside	Any	Any	Any	Lake	Beach	57% Any, 15% countryside, 14% lake, 14% beach
5 d	Would you have a preference of voice?	Yes	Yes	Yes	No	No	Yes	No	57% prefer voice, 43% no preference
5 e	If yes which gender?	Female	Either	Either	Either	Either	Either	Either	14% female, 86% either
5 f	Do you have an accent preference?	No	No	No	No	No	No	No	100% no accent preference
5 g	Would you prefer to be interviewed by an interactive character which can laugh and react to you on the screen or would you feel happy just having a voice?	Printed no voice	Just a voice	No prefer a face to face interview	Either	Either	Just a voice	Either	43% either, 29% just a voice, 14% printed no voice, 14% prefer face to face interview
5 h	Would you like a relaxation exercise at the beginning or during?	Yes	No	No	No	Yes	Yes	Yes	57% prefer relaxation exercise, 43% not bothered
5 i	Would you want to be able to save/print your action plan?	Yes	Yes	Yes	Yes	Yes	Yes	Yes	100% save & print
5 j	Would you want to be able to measure your distance travelled?	Yes	Yes	Yes	Yes	Yes	Yes	Yes	100% want to be able to measure distance travelled
5 k	Can you suggest anything else to support the interview online for you?								
Wellbeing Interview Review									
6 a	Would you be interested in reviewing your distance travelled with a further interview in the future?	Yes	Yes	Yes	No	Yes	Yes	Yes	86% would like further interview
6 b	Would you be interested in updating your interview with the online version once it is completed?	No	Yes	Yes	No	Yes	Yes	Yes	71% interested in using trial online interview
Any other comments									
7 a	Any other comments?								

YY. Appendix: Overview of Pilot and Main Wellbeing Questionnaire Results

Main Research Community Wellbeing Questionnaire														
Questions	Pilot Interviewee Answers						Main Interviewee Answers						Totals	
	P1	P2	P3	P4	P5	P6	M1	M2	M3	M4	M5	M6	M7	
Age	21	14	49	71	15	24	20	81	35	63	55	22	51	40.08
Gender	Female	Female	Male	Female	Male	Male	Male	Female	Male	Female	Female	Male	Male	46% Female & 54% Male
Status	Unemployed	Student	Full time employed	Retired	Student	Part time employed	Student	Retired	Unemployed	Retired	Part time employed	Student	Unemployed	33% student, 25% unemployed and 25% retired and 17% PT employed
Postcode	NE5 1YB	NE5 1HG	NE5 5NR	NE5 1JS	NE3 1YP	NE3 1YP	NE63 8NR	NE6 4RP	NE6 2EW	NE6 3NT	NE20 9BJ	NE6 5BE	NE8 2LX	15%NE3, 31%NE5, 31%NE6, 7%NE8, 8%NE20, 8%G3NE63
Ethnicity	British	British	British	British	Phillipines	British	British	Pakistan	British	British	Thailand	British	British	77% British, 7%Pakistan, 8%Thailand, 8% Phillipines
Disability	No	No	No	No	No	No	No	Yes	Yes	No	No	No	No	85% No disability 15% disabled
Preparation	P1	P2	P3	P4	P5	P6	M1	M2	M3	M4	M5	M6	M7	
Do you feel that the background information to the research was adequate?	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	100% Background information adequate
How might the background information to the research have been improved?														100% Happy with Background Research Information
Do you feel confident in using the rating tool?	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	100% felt confident using the rating tool
What might increase your confidence in using the rating tool?						More research information on effectiveness for online								Research information on effectiveness of process for online
Do you believe the rating tool is useful for you?	Yes	Yes	No	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	92% Rating useful
Any further comments on the rating tool?	You can actually see where you want to be	Helped me see where I wanted to be				Makes me think about what I want & how to get it. Would be good if people could get help from the system in low scoring areas.	Helped provide numerical means of happiness				Saying where you are, have been, want to go is easy to visualise using the rating tool.			Helped provide numerical means of happiness. Saying where you are, have been, want to go is easy to visualise using the rating tool.
Frame of Reference	P1	P2	P3	P4	P5	P6	M1	M2	M3	M4	M5	M6	M7	
Are the current headings within the life board frame of reference appropriate to you?	Yes	Yes	No	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	92% Yes to Wellbeing Headings
How could the wellbeing frame of reference be improved?	Be more specific with different relationships, e.g. family/ friends	No improvement needed		No improvements needed	For online version have assistance with further explanations									For online version have assistance with further explanations, e.g. explain that a relationship can be family, friends, work colleagues, etc.
Which were the 5 most important question heading asked with regards to your wellbeing?	Support	Trust	Emotions (feelings)	Relationships	Happiness	Emotions (feelings)	Confidence	Trust	Trust	Confidence	Emotions (feelings)	Changes	7 support, trust,	
	Relationships	Happiness	Confidence	Emotions (feelings)	Challenges	Usefulness	Trust	Trust	Changes	Relationships	Decision-making	Point of view	Confidence	6 relationships, confidence, emotions,
	Trust	Valued	Learning & Development	Usefulness	Lifestyle	Decision-making	Relationships	Respect	Involvement	Support	Lifestyle	Confidence	Relaxation	5 happiness,
	Confidence	Relationships	Relaxation	Support	Support	Happiness	Happiness	Involvement	Support	Happiness	Involvement	Trust	Support	4 commitment, challenges, lifestyle,
	Emotions (feelings)	Commitment	Lifestyle	Valued	Relaxation	Lifestyle	Commitment	Giving	Commitment	Commitment	Support	Challenges	Relationships	3 relaxation, involvement
Interview Environment	P1	P2	P3	P4	P5	P6	M1	M2	M3	M4	M5	M6	M7	
Was the interview appropriate?	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	100% Interview appropriate
Were any of the following lacking?	None	None	None	None	None	None	None	None	None	None	None	None	None	100% Happy with setting
What else would help with interview environment	None	None	None	None	None	scented candles	If online ask people to find quiet relaxing place & have option to skip a question or go back	NA	NA	NA	NA	NA	NA	If online ask people to find quiet relaxing place, e.g. scented candles, etc. & have option to skip a question or go back.

Do you feel that the process contributes to the following?	P1	P2	P3	P4	P5	P6	M1	M2	M3	M4	M5	M6	M7	
Helps you towards achieving your wellbeing aims and objectives?	Considerably	A little	A little	Quite Significantly	Quite Significantly	Quite Significantly	Strongly agree	Agree	Strongly agree	Strongly agree	Agree	Strongly agree	Strongly agree	100% agree a little - strongly
Motivates you as you watch your progression through your distance travelled towards your goal?	Yes	Yes	No	Yes	Yes	Yes	Agree	Strongly agree	Agree	Strongly agree	Agree	Strongly agree	Agree	92% agree or strongly agree 8% disagree
Identification of priorities for support/intervention?	Agree	Agree	Agree	Agree	Agree	Strongly agree	Strongly agree	Agree	Strongly agree	Agree	Agree	Strongly agree	Strongly agree	58% Strongly agree 42% Agree
A new perspective on current circumstances, and seeing the big picture?	Agree	Agree	Agree	Agree	Agree	Agree	Agree	Strongly agree	Agree	Agree	Agree	Agree	Strongly agree	85% strongly agree 15% agree
Identification of strategies that have worked in the past?	Agree	Agree	Agree	Agree	Agree	Agree	Strongly agree	Agree	Agree	Agree	Agree	Agree	Strongly agree	85% strongly agree 15% agree
Exploration of options for the future?	Strongly agree	Agree	Agree	Strongly agree	Strongly agree	Neither agree or disagree	Agree	Agree	Strongly agree	Agree	Agree	Agree	Strongly agree	34% strongly agree 58% agree 8% neither agree or disagree
A means of setting goals?	Agree	Agree	Agree	Agree	Agree	Strongly agree	Strongly agree	Agree	Agree	Agree	Agree	Agree	Strongly agree	46% strongly agree 54% agree
A means by which you can take responsibility for your future?	Agree	Agree	Disagree	Agree	Disagree	Strongly agree	Agree	Agree	Agree	Agree	Agree	Agree	Strongly agree	23% strongly agree 62% agree 15% disagree
A realisation of the progress/achievements you have already made?	Agree	Agree	Agree	Agree	Strongly agree	Strongly agree	Agree	Agree	Strongly agree	Agree	Agree	Strongly agree	Strongly agree	38% Strongly agree 62% agree
A means of improving your self-awareness?	Agree	Agree	Agree	Strongly agree	Agree	Strongly agree	Agree	Strongly agree	Agree	Agree	Agree	Strongly agree	Strongly agree	38% Strongly agree 62% agree
A means of improving your confidence?	Agree	Disagree	Disagree	Agree	Agree	Agree	Agree	Strongly agree	Agree	Agree	Agree	Agree	Strongly agree	16% strongly agree 69% agree 15% disagree
A means of improving your self-esteem?	Agree	Disagree	Disagree	Strongly agree	Disagree	Agree	Strongly agree	Agree	Agree	Agree	Agree	Agree	Agree	15% strongly agree 62% agree 23% disagree
A measure of your wellbeing indicators?	Agree	Agree	Agree	Strongly agree	Agree	Strongly agree	Agree	Agree	Agree	Agree	Agree	Agree	Strongly agree	31% strongly agree 69% agree
A contribution to your action plan?	Agree	Agree	Agree	Strongly agree	Strongly agree	Agree	Agree	Strongly agree	Agree	Agree	Agree	Agree	Strongly agree	46% strongly agree 54% agree
Recording documentation that is easy to use?	Strongly agree	Agree	Agree	Agree	Agree	Agree	Strongly agree	Agree	Agree	Agree	Agree	Agree	Strongly agree	31% Strongly agree 69% agree
Computerised System	P1	P2	P3	P4	P5	P6	M1	M2	M3	M4	M5	M6	M7	
I would feel comfortable using an automated computerised system?	Agree	Agree	Agree	Agree	Agree	Agree	Disagree	Agree	Strongly agree	Agree	Agree	Agree	Strongly agree	15% strongly agree 69% agree 8% neither agrees or disagrees and 8% disagrees
What kind of background music would you like?	NA	NA	NA	NA	NA	NA	Any	None	Any	Any	None	Mozart	Any	57% any, 29% none, 14% Mozart
What kind of screen background would you like?	Beach	Countryside	Countryside	Mountains	Beach	Plain	Any	Countryside	Any	Any	Any	Lake	Beach	31% Any, 23% countryside, 7% lake, 23% beach, 8% mountain, 8% plain
Would you have a preference of voice?	No	Yes	No	No	No	Yes	Yes	Yes	Yes	No	No	Yes	No	46% prefer voice, 54% no preference
If yes which gender?	Either	Female	Either	Either	Either	Female	Female	Either	Either	Either	Either	Either	Either	17% female, 83% either
Do you have an accent preference?	No	No	No	No	Yes	No	No	No	No	No	No	No	No	92% no accent preference 8% Accent preference
Would you prefer to be interviewed by an interactive character which can laugh and react to you on the screen or would you feel happy just having a voice?	Either	Avatar - speaking interactive character	Just a voice	Either	Avatar - speaking interactive character	Just a voice	Printed no voice	Just a voice	No prefer a face to face interview	Either	Either	Just a voice	Either	38% either, 31% just a voice, 8% printed no voice, 8% prefer face to face interview, 15% Avatar
Would you like a relaxation exercise at the beginning or during?	NA	NA	NA	NA	NA	NA	Yes	No	No	No	Yes	Yes	Yes	57% prefer relaxation exercise, 43% not bothered
Would you want to be able to save/print your action plan?	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	100% save & print
Would you want to be able to measure your distance travelled?	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	100% want to be able to measure distance travelled
Can you suggest anything else to support the interview online for you?	NA	NA	NA	NA	NA	NA								No suggestions for improvement
Wellbeing Interview Review	P1	P2	P3	P4	P5	P6	M1	M2	M3	M4	M5	M6	M7	
Would you be interested in reviewing your distance travelled with a further interview in the future?	NA	NA	NA	NA	NA	NA	Yes	Yes	Yes	No	Yes	Yes	Yes	86% would like further interview
Would you be interested in updating your interview with the online version once it is completed?	NA	NA	NA	NA	NA	NA	No	Yes	Yes	No	Yes	Yes	Yes	71% interested in using trial online interview
Any other comments	P1	P2	P3	P4	P5	P6	M1	M2	M3	M4	M5	M6	M7	
Any other comments?														

ZZ. Complexity of Community Participation Simplified through ICT Design

Work in Progress

Karen George, Dr. Petia Sice, Dr. Jeremy Ellman & Prof. Safwat Mansi
School of Computer, Engineering and Information Science, Northumbria University
Northumbria University, Newcastle upon Tyne, England
karen.george@northumbria.ac.uk
petia.sice@northumbria.ac.uk

Prof. Robert Young
School of Design, Northumbria University
Northumbria University, Newcastle upon Tyne, England
robert.young@northumbria.ac.uk

Abstract — Current UK ‘Empowering Local Communities’ policy agenda and promotion of the ‘Big Society’ are highlighting the search for practical ways of developing community participation “in press” [1]. There is a need for a better understanding of the tipping points for this participation and how ICT can make use of these. The aim of this research is to develop a frame of reference for effective community participation through ICT, applying both complexity and design perspectives to recognize the role of local interactions. Research will start by constructing a narrative of experiences to help develop semi-structured interviews. The successful outcome will be an effective and efficient, time saving framework.

Keywords - Community Participation, Information Communication Technology & Management, Complexity Theory, Big Society, Design Theory and the Third Sector.

Introduction

Charities in the Third Sector are struggling in this present financial climate as funding has reduced. They need to become more variable, especially the local community associations. They need to look for a new brand of volunteers who have the motivation and skills to survive this financial climate. The ‘Communities in control: Real people, real power’ report raises the need for the Government to find more effective ways of communicating and engaging with the community to devolve power, enabling improvements in the local community “in press” [2]. This calls for more collaborative working between Local Government and the Third Sector. Their emergent network properties need to regenerate through a two-way process of interactions with the environment to self-organize “in press” [3]. This will require community participants to have capacity and confidence. How can these participants be attracted in a

world of ‘No claims too small’ and risk assessments for everything?

Community associations compete with major charities for volunteers. These charities have kudos and publicity. How can the tipping points of community participation be used to support a better fit and encourage people to give their time?

Can a framework be designed to activity encourage participation as well as supporting the sustainability of it?

RESEARCH

A. Research Background

Current research mainly consists of studies regarding, communication and information sharing, between, the government and the public, for political gain and government business “in press” [4]. These studies do not direct attention to how ICT can benefit community participation as it emerges through local interactions and dynamics of tipping points “in press” [5]. Such benefits include:

- Regular volunteering for a non-electoral association
- Active membership in a group or association
- Participation in fund-raising e.g. cycling/walking, etc
- Other fund-raising for charitable purposes
- Community problem solving

It is important to focus on understanding the quality of interactions within community participation “in press” [6]. What are the critical tipping points¹ that motivate people to

¹“A defining moment in a series of events at which time a series of significant, often momentous and irreversible reactions occur” Encarta (2011).

participate and how can these be used to design improved information communication?

Complex adaptive systems offer an approach to represent the learning and innovation dynamics of social systems as an emergent rather than a managed process and tools for dynamic analysis of systems behaviour. Design theory focuses on narrative reflections and interactions, supporting the development of frameworks for ease of understanding "in press" [7]. McElroy's knowledge management theory using Complex Adaptive Systems is an ideal way of looking at Community Participation to develop an improved adaptive solution, "in press" [8].

B. Research Aims

To develop a frame of reference for improved community participation through ICT, applying both complexity and design perspectives to identify the role of local interactions. This is associated with both the current UK 'Empowering Local Communities' policy agenda and the 'Big Society'.

C. Research Objectives

The primary objectives are to work with sections of the government, third sector, community organisations and the general public to:

- Identify and evaluate the application of complexity and design insights into effective community participation practices;
- Conduct research, analyse statistics and qualitative data to provide improved information to link the experiences of the participants to effective community participation;
- Critically evaluate why people engage in community participation and what creates successful engagement;
- Design and evaluate a frame of reference for a comprehensive new approach for effective community participation;

D. Areas of Knowledge

The research will investigate the following areas of knowledge:

- Deliverables;
 - Customer Experience & Benefits;
 - Happiness, Wellbeing, Sustainability & Empowerment;
- Governance;
 - Politics & Policies;
 - Resources;
- Communication Modalities & Platforms;
- Disciplines;
 - Systems Thinking, Operational & Organisational Management;
 - Design Ethnography - Diversity of People & Social Barriers;

- Computer Science - Information & Communication Management;
- Complexity Science;
- Human Centred Design, Service Design & HCI;
- Activities;
 - Collaborative Practices;
 - Accountability & Measures of Success;
- Conceptual Frameworks & Theories;
 - Social Innovation;

The research is being initiated by seeking narratives of participation experiences for reflection which will be used to further develop semi-structured interviews .

PROPOSAL

The project involves an exploratory study aiming to investigate the complex characteristics of tipping points for Community Participation stakeholders through exploring the applicability of information management and ICT to support collaborative practices and multi-criteria decision making to enable positive participation experiences "in press" [9]. Building on the researcher's master's thesis the main part of the research will be focused in Tyne and Wear within the 'Big Society' context, specifically community participation with Third Sector partners and local community associations.

The initial methodology will be that of a narrative investigation following complexity theorists such as Mowles "in press" [10]. The research will then move onto sense making via semi-interviews and workshops to collect other qualitative data.

The proposed contribution to knowledge will be an improved understanding of community participation and how this knowledge can be used with ICT to benefit the Third Sector.

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AAA. Wellbeing in Community Participation

Karen George, Petia Sice

School of Computing, Engineering and Information Science, Northumbria University at Newcastle

Abstract: Wellbeing in Community Participation explores and reflects upon the literature and dialogue of experience to recommend a change of focus for matching and management of community participants. This change of focus looks at an individual's wellbeing and the affect this has within a community organisation and the affect a community organisation can have on an individual's wellbeing. To gain insight into wellbeing people need to be aware of their mind, body and energy and how this affects others and others affect them. We hear about miracles where terminally ill people have found new beliefs which coincide with a spontaneous remission of the disease. Humanity evolves in the same way and we control our own destiny. We can learn to love, respect, trust and commit to each other and work in harmony or we can foster disharmony resulting in failure of community organisations. As the economy changes community organisations are under threat of extinction as many give up and dissolve. Just as species and humanity evolve so do community groups need to evolve by ensuring the wellbeing of both the individual and the organisation.

Keywords: Wellbeing, Community, Participation, Organisation and Evolve

Introduction

The Third Sector has developed over the years and legislation has slowly caught up. Well known Third Sector organisations have impressive policies and procedures in place for the management and development of staff and community participants. They are very structured but still do not always support and develop an individual's wellbeing. This paper looks at what is meant by 'Wellbeing in Community Participation' and how refocusing the way we match and manage community participants can have positive benefits upon their lives.

The first author has an extensive experience as a volunteer and community worker with many years of service in the public and community sectors. She has participated in various community initiatives and although many of those were successful and beneficial, it was clear to her that the wellbeing of the volunteers in the process of delivery was not always addressed see the mini case.

Mini Case - Out of School Club

Having been a community participant myself on numerous occasions I can honestly say that my wellbeing was of questionable interest to some of the organisations I participated for. So long as I came and did my job that was what was needed. However, just as community organisations need to have participants that are good for the organisation it is important for the organisation to be good for the individual. For example as a Chairperson of a new Out of School Club we had great difficulty in recruiting other parents onto the committee. The realisation was that other parents just needed the out of school club service for their children but were not as desperate as the three of

us who volunteered to set it up. The funding came in phases as we successfully managed to set up each new provision. The achievement we thrived upon and it kept us going planning for the next phase. It took three years to get the club up and running as a full service with breakfast, after school and holiday provision but after three years it was a successful profit making charity. However, the three of us running it were not looking after our own wellbeing working fulltime and managing the club on top. We initially participated in this community role due to a high need for childcare, at an affordable price, so we could work. We could understand why the other working parents did not want to participate as we were stressed but we thrived on the achievement. Once we had completed the set up and expansion of the club to full provision we desperately needed some relief as our wellbeing was being pushed further and further to the back. The initial tipping point to participate relates to Maslow's needs, e.g. the need for affordable childcare to work. The tipping point to continue was the successful achievement of each phase. The tipping point to step down also relates to Maslow's needs as we were stressed and needed to improve our wellbeing. So we looked for a private company to take over the Out of School Club and donated the profit to the school. We took pride in what we achieved. This success is a lasting satisfaction that will always be there for us to reflect upon. We still had use of the service but regained our precious time with the family, provided employment for local people, reduced our stress tenfold and proudly gave a donation to the school.

Community participants do not always recognise other community participants' needs and over burden individuals either causing ill health because they do not speak up or they just leave

favouring their own wellbeing. A lot of stress has been brought on by extra pressures from Government due to the economy and legislation. There needs to be a way of effectively managing this. A change of practice will help community participants to focus on the wellbeing of themselves and others to ensure harmony and progression in positive ways within community organisations. This is a positive psychological way of looking at community participation which can be seen in the prior example in the Out of School Club. If people are more aware of their successes they can monitor and respond to their needs through appropriate practice to ensure a lasting route to move positively forwards [1]. This paper has been developed from the research on "Complexity and Design for Wellbeing in Community Participation" [2]. The focus of that research investigates how community associations could be best supported into using beneficial information communication technology for Wellbeing in Community Participation. The new framework will ease community association's path forward in a time when community participants are being tasked to take on board services that have been lost from main stream provision and offer the unemployed a positive route through community participation to paid employment.

Community Organisation Narratives

Community participants are an essential ingredient for the success of all community organisations. The Manager, CEOs and Chairperson of four community organisations were asked to narrate positive community participation experiences that enhanced everyone's wellbeing and explain why they thought they were positive. They were asked to list competencies and state why they were essential to a successful relationship with community participants. They described numerous types of community participation from those that come as part of rehabilitation to those who come to develop their experience and enhance their CV. They talked about the difficulties of short term involvement from community participants to the long term individuals who complete large amounts of work although this can cause difficulties at times with paid staff. They expressed the need for clear job roles for community participants stating what they can and can't do. Stated there is a need to find out what community participants really need and the best fit for them and the organisation. Community participants are often not keen on supervision or appraisals and there needs to be something else

developed that can act in a similar way and fit with organisations quality standards.

Table 1: Characteristics Needed for Success
Community Participation

Characteristics	1	2	3	4
Value Services	✓			
Commitment	✓			✓
Respect	✓			✓
Skills	✓			✓
Reliable	✓			✓
Knowledge				✓
Experience	✓			✓
Willingness	✓			✓
Awareness	✓			✓
Engaging	✓			✓
Inclusive	✓			✓
Goodwill	✓			
Honesty	✓			✓
Motivation	✓			✓
Open minded				✓

Wellbeing

Wellbeing seems to be used in such a wide range of contexts but generally it tends to mean a satisfying state of health, fortune and happiness. Wellbeing has also been termed as the quality of a person's life, from the environment that we live in, our education, leisure pursuits, physical and mental health, to our social belonging. Raphael et al [3] states that the "quality of life is the degree to which a person enjoys the important possibilities of their life and is based on the categories 'being', 'belonging', and 'becoming', respectively who one is, how one is connected to one's environment, and whether one achieves their personal goals, hopes, and aspirations". Examples of wellbeing stretch back to the ancient Egyptians, where it was based around the cyclic behaviour of the Nile, viewed "as a vital giver of life" [4]. People's wellbeing was then thought to be directed by gods and spirits. Prayers were seen as a way of supporting people's wellbeing. The cyclic life drew upon the wellbeing of physical and spiritual needs which evolved into a standard of hygiene for the Egyptians with the washing of dishes, clothes and personal bathing, including the removal of hair to prevent lice infestation [4]. Information on behaviour and how that affects health are well documented now supporting theoretical approaches to promote good health although individuals still choose behaviours which risk their health [5]. In the Greek pre-classical period the link between physical and spiritual for one's wellbeing was recognised. The doctors' role evolved and was given a high status until around 500 BC when their greed for money

and torturous treatments put them into disrepute [4]. A clear recognition evolved for the wellbeing of the mind with alertness and the body with food, water and fitness and supporting the development of personalities. Over the centuries there were many debates as to the link between the body and mind, e.g., if one was ill, were they both ill or vice versa? It was also recognised that over worked, torture, cold, lack of sleep, food or water affected an individual's wellbeing. A philosopher, Democritus, suggests wellbeing was directed by a positive state "moderate in pleasures and harmony in life" and that lack of self-control caused illness thus the mind and body are interlinked as the mind including the inner mind controls the body [4]. The Greeks went on to recognise the importance of qualities in life such as diet and music to improve one's wellbeing and that a balanced and rhythmic life, along with qualities of life, enhanced one's longevity.

In contemporary Western thought, wellbeing links closely to Maslow's Hierarchy of Needs, a recognised step up approach to individual's needs. Maslow [6] (identified human nature, which is to love, to develop through a process of trust and safety net building. Maslow's Hierarchy of Needs is based on physiological needs such as food and water being satisfied to start the motivation process. The World Bank [7] agrees that these human needs form the basic qualities of life. Scandinavia is identified as being one of the biggest successes for wellbeing in the Gallup poll and is thought to be due to the fact that "their basic needs are taken care of to a higher degree than other countries" for which they pay highly through their earnings [8]. High income enhances people's evaluation of their lives but does not improve their emotional well-being [9]. The next step up in Maslow's hierarchy is the need to feel safe and establish stability within the chaos of life [6]. The hierarchy moves on to a need of feeling loved and a sense of belonging [10]. Stepping up the ladder is esteem need resulting in competencies, mastery, attention and recognition from others [10]. This is followed by the aesthetic need for self-actualisation so one can maximise their potential through knowledge and fulfilment [4]. Later Maslow added another step to the ladder with transcendence, connection with others to support their potential through knowledge and fulfilment [10]. Maslow's theory has been developed further with recent research taking the understanding of wellbeing a step further into complexity and researching a more holistic view. The focus has been on identifying the subjective and objective factors of wellbeing [11].

The UK Government has taken this understanding of subjective and objective factors of wellbeing and has promoted an awareness system of wellbeing through the NHS website [12]. The NHS has developed a new wellbeing approach from research collated with the Beth Johnson Foundation [13] and a Likert scale approach developed to promote positive mental health (Tennant, et al., 2007). The drawback is that the system only gives a rating in comparison to what others have input into the system and tells the participant that they are average or that they need some help. The wellbeing theme focuses on the following five areas: connect with people, be active, take notice of what is happening, keep learning and give time, support or money to others. These five areas link into what makes people feel happy, meaningful, empower, motivated, respected and engaged [13]. These subject areas are strongly appreciated within positive psychology [1]. Psychological prosperity and positive daily feelings can also stem from societal networks that support the development of more quality relationships [14]. To recognise and understand ones wellbeing you need to be aware of the state and needs of your mind, body and energy. Individuals need to learn how to adapt to societal constraints and as such each person's wellbeing is unique within this recognition. How to monitor ones wellbeing is still an uncertainty for the government [12]. Previous research conducted by the first author has tried and tested an approach which measures individual unique wellbeing and monitors the distance travelled based on the Rickter Scale Process® [15]. This is a major improvement on the NHS system as it also gives individuals a positive plan of action and can motivate through showing the distance travelled in each area [16]. The Rickter Scale Process® involves a semi-structured interview which needs to be uniquely developed with the right questions so as to support individuals to move forwards. The success of the process is very much dependent on the adequacy of the questions asked. What questions should be asked that will truly reflect wellbeing in an effective way for the benefit of the individual, community and government? How could these questions be asked so as to promote self-evaluation? The New Economics Foundation [14] states that people evaluate their own wellbeing in two ways by summarising reflectively over time or looking at how their daily psyche or emotional wellbeing is affecting them, roughly over the last 24 hours. The more distance there is between feelings and reflection the better we are at putting that information into context for overall reflection. Hawkins [17] states each

question needs careful calibration to reflect motivation, goals and awareness level. So as to understand what questions to communicate, we need to further understand wellbeing and step further into the realms of complexity, biology, beliefs and behaviour.

Lipton & Bhaerman [18] relate evolutionary development to society with its political battles and economic changes. Just as cells work together for the functioning of the body, beliefs can make spontaneous changes to the wellbeing of the body, you can be aware of how to care for your body, mind and energy to fight disease and manage your wellbeing [18]. Everyone is part of the overall field of consciousness and we are all part of evolution as human and environmental chaos emerge to find attractor patterns [17]. This drive for survival is evolution creating a unique path of local interactions between humanity and the environment [18]. If humanity can not learn to use bygone wisdom and challenge the community struggles of today by learning to love all, humanity could well become extinct just as other species before us. What we believe affects the plans we make and the routes we take. If we always work in the negative creating dysfunctional behaviour so do our communities become dysfunctional and as such humanity follows suit. If we believe in a loving society we sow the seeds of love and create a loving functional community. Funding is being cut back from community groups who can give up and close as many have or they can look for new routes that do not rely on that funding. They need local support to find unique positive partnerships and new ways of working to survive and grow. These positive interactions are shared, repeated and reflect globally as community organisations evolve into a new species. Knight & McNaught [11] suggest a wellbeing focus be taken to support people through this time of economic and environmental change.

Community

A community is a group of people who come together for societal needs, originating from, what was termed, neighbourhoods, basically people living locally. However, there are more and more virtual communities. Communities share a strong feeling of being connected, compassion or a kinship and this can be gained through virtual communities. Putman, Feldstein, & Cohen [19] state that people relate to each other, share these strong feelings and acknowledge each other's contribution. The common interest increases the wellbeing within the community or neighbourhood is proven to reduce crime. "It is

harder for people to commit a crime against someone they know in their community and as such participating within the community increases the stability" as successful co-creation causes a reluctance to attack individuals you have shared achievement with and instead supports the development of community ownership [19]. A community provides benefits to those within it, giving them a greater voice and offering them to be part of improving their own wellbeing. The roles can effectively complement each other to build a valuable bond created with trust, commitment and respect which can bridge differences with reasoning to reach shared agreements. Creative dialogues take place to cope with complex community problems. Communities share stories and assumptions, they understand their community needs, they reflect and learn to build the appropriate community structure and benefits, harmonising and creating a common sense of purpose [20]. The young participate in dialogue and learn from the old as they become the leaders of tomorrow. It is a mass of complex connections that encourage people to trust, commit and respect their community to ensure its wellbeing. Participants are involved in deciding their own futures, the successes are theirs, the challenges are shared with people they know and understand. They are responsible for each other, a partnership and they possess the efficacy to succeed.

Communities can benefit from partnerships with the private sector to increase that power and gain more respect and funding. Although the UK Government is pushing for partnerships the structures are not in place to fully support this development within the public or private sectors [21]. Cooper [22] calls for a universal vision for wellbeing within the community so the focus is clear. Where communities are marginalised, it tends to be because of a lack of involvement with external bodies. Burns & Taylor [21] recommend finding 'simple measures for complex processes' which are meaningful to communities. Burns & Taylor [21] suggest fourteen different audits with different questions all of which only include a morsel of what is important to each community member. If the focus for involvement is individual wellbeing the community needs are formed from each individual's wellbeing needs. Why do we ask communities questions in audits that often individuals do not even understand? How can we benchmark community need, success and measure the distance travelled? Knight & McNaught [11] recommend that individuals should be able to access ways of developing their wellbeing but it is complex and subjective to

individual's feelings. However, individuals form the communities so this complex uniqueness needs to be captured. Each individual identifies themselves with different communities, including virtual communities. Community wellbeing usually reflects the commonality of its member's wellbeing which is what pulls them together, that shared understanding. A community participation wellbeing audit gives individuals and the community organisation an understanding of its participant's greatest needs and the participant an understanding of the community organisations greatest needs.

Making people more aware of others needs highlights commonality and promotes creative dialogue to find successful routes forward. What is required is that we foster an environment where our awareness of ourselves and of our surroundings is actively developed. This, however, is not enough; in addition, we need to observe the conditions under which quality of conversations is maintained, to encourage new linguistic distinctions based on new experiences and awareness to emerge. Improving quality of conversations means improving our understanding of others, of others views and assumptions [23]. Dialogue is important where we pursue a generative space encouraging opening up and engaging ourselves in listening with no other purpose than to hear what it is that is being said, whilst trying consciously to suspend our assumptions and judgements [20].

When community groups were asked what they need from community participants they were very clear that they needed to have a strong interest and make a commitment to their community group, they needed to respect the existing members and to both give and show trust [16]. Trust also needs to be evident in any research or audit held with a community. The results and suggestions given need to be shared with the whole community so as to start up dialogue and overcome issues. It would also be more effective for government, the public and private sectors to link into collaboratively overcoming issues. As the audits will be completed on-line it means local government can focus face to face time with collaborative working and funding. Funding could be focused dependent upon the audit needs and suggestions of remedy. The wellbeing audits will be individual to each person so only the high concerns will become a focus and common suggestions for remedy. The communities highlighted trust, interest, commitment and respect all fit within Maslow's Hierarchy of needs and identify with Hawkins paradigm of oneness. This follows that a community links with its environment. A

community can pull together and enhance its environment or a community can fight against each other and destroy their environment. We can clearly see this throughout history. Society holds the key to totally wipe out humanity just as it holds the key to enhance and develop it into a world of sharing, supporting, caring and positive living. People and communities who are not aware of the greater needs of humanity will only focus on their own selfish actions to satisfied an immediate need of greed without caring about the long term damage to humanity, the hatred developed and never ending cycle of destruction.

Participation

A participant is a protagonist who contributes towards achieving a common goal. Participants within a community setting are termed as social capital. In this paper a participant is any of the following: a volunteer, work experience, work team challenges, an employee on a government employment schemes, committee or board members, someone doing reparation or community service, etc. In all of these there is a commonality and centrality of local social interactions for a positive community cause. 'These relationships and interactions can evolve into wellbeing in communities' [19]. Through participation relationships develop pulling together individuals who were previously isolated into a community identity. The connection of local social interaction supports the development of wellbeing in the individuals. If individuals are brought together dependent upon their characteristics so as to create effective participation and co-create making the connections more powerful and sustainable. When participation evolves into wellbeing, it is via achievable goal setting in the community. If we look at the Out of School Club example, before the club was set up there was no out of school childcare for the pupils at that school. We firstly applied for and set up an after school club. When that was proven successful we applied for funding and set up a breakfast club. When that was proven successful we applied for funding and set up a holiday club. So we set goals in a stepped approach and as each was achieved we built on that success and set another goal. We co-created and improved our wellbeing with effective childcare and a great sense of achievement. What communities collectively agree to achieve is improved quality of life, freedom, human rights and emotional wellbeing [7]. Individuals need to feel their participation is contributing to either their needs or community need. People can

participate to satisfy their own or family needs such as needing activities for the children or day care for a relative to allow them some free time. Peoples needs do change dependent upon how life interacts with them personally. Some people participate because someone they loved has either left them or died and they need to feel connected or loved by others. They need to gain love, trust, respect and commitment from other people. These are the same needs communities request from participants. Reasons for participating link to Maslow's hierarchy of needs right up to the top where people participate to support their potential through knowledge and fulfilment [10]. Remember people's needs change and so their wellbeing goals change. A wellbeing system is needed that can cope with these changes in a participants life and help them to move forwards using their prior positive experiences to achieve this. This is a complex system of ever changing local social interactions. These local social interactions link back to Maslow's theory and to Hawkins paradigm of oneness. There are two major complex strands to community participation with new community participants and the existing community members who form the community organisations [16]. Matching the two effectively is the challenge so as to ensure the wellbeing of both. Community participation should not be allowed to diminish an individual's wellbeing neither should it create unbearable stress for a community organisation. Community organisations need to monitor and assess community participant's wellbeing and their own. They need to effectively link participants and organisations to wellbeing so as to co-create sustainability and quality of life within the present economic and environmental constraints.

Wellbeing links to our quality of life. Local and central government use information gathered locally through audits to assess how satisfied people are and what is needed to improve satisfaction. However community participation audits are so varied. Burns & Taylor [21] states a variety of audits such as "Are community groups able to run in an effective and inclusive way?" but if the groups were running effectively and inclusively this would reflect within wellbeing ratings. Surely auditing against general wellbeing ratings for participation would be simpler. Participants can then raise whatever is affecting their wellbeing rather than being channelled towards areas they had not really thought of as being an issue. ICT systems can group the common themes raised by individuals so that the greatest concerns are focused for action. If it has not been raised then it clearly is not a priority in

that persons life at that point in time. It is very difficult to motivate someone to be involved in something where they cannot see the benefits, e.g. if you state there is a shortage of out of school childcare and they do not have a child you will find it difficult to motivate that person to do something about the shortage. If you ask someone if there is a need for childcare in their area they might well say no even though there is. Questions need to be able to be asked in a way that the individual can taylor the response to themselves. Often audits are behind the times with the issues affecting people and sometimes encourage people to dwell on issues that are already solved. Individuals needs change as does the economy and the environment. Audits need to be able to reflect those changes dependant upon locality. Understandably there needs to be a balance just as people need a balance in their day to day wellbeing. However, community participation has been evidenced as increasing happiness and connections with people [3]. Naturally community participation can enhance individuals' wellbeing by meeting the needs that cannot be fulfilled within those individuals existing local social interactions.

Conclusion

Individual wellbeing cannot be found alone, it needs communities to show solidarity. Communities form society which in turn forms humanity. These complex interactions cause evolution as we influence each other. Developments in complexity science such as chaos and quantum theory, the study of consciousness and psychology are pointing towards a new paradigm of oneness, where everything is connected. Energy pervades these connections, including community spirit, the energy that flows within the community groups [24]. An individual's awareness and behaviour creates a ripple effect throughout humanity as everything is linked. Wellbeing is a measure for individual participants and communities. Happiness which is part of wellbeing is used presently as a performance indicator to measure how well countries are performing. Wellbeing data over time can be used to measure an individuals' distance travelled as well as measuring a community, a country and humanity's distance travelled. The matching and setting wellbeing goals, monitoring and managing the distance travelled motivates individuals and helps them to self organise and develop, see, review and take pride in their achievements. This also helps to improve the organisations wellbeing and harmony. Disregard for others wellbeing has

a ripple effect of catastrophe and disharmony. We need to be aware of what we do and how it affects others. If we are always positive to others they will reflect that positivity. We can learn to love, trust, and respect and commit to each other and work in harmony. As the economy changes community organisations that are under threat of extinction need to evolve just as humanity evolves. Positive people live happier and longer lives. We need positive happy participants and communities to achieve success.

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Glossary

Wellbeing

Is the state of satisfying all the complex, evolving local social interactions in life that are unique to an individual's feeling in a well state, e.g. happy, useful, (see wellbeing themes).

Third Sector

The Third sector is made up of the Voluntary Sector and Community Sector. The Voluntary Sector being large charities such as Age UK, MIND, Cancer Research, etc. The Community Sector is small charities such as your local community centres, residents associations, etc.

Community Participant

In this research is someone who participates in the Third Sector in an unpaid capacity, e.g., volunteers, work experience unpaid, reparation, probation, community development, etc.

Complexity

In this research are the endless social interactions between wellbeing and individuals.

Design

Is the unique way that this research architecture develops and utilises the complexity of wellbeing in a community context into a useful, unique and valid piece of research.

Tipping Point

In this research is a critical point where your wellbeing understanding evolves to make you decide to take a new direction.

Mindsight

Is the way people focus their mind on their internal thoughts, feelings, experiences, etc.

Mindfulness

Is acceptance and being non-judgmental to the emotions, thoughts and sensations at any point in time and being aware of other's needs.

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