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25<sup>th</sup> September 2017

# **Mental Wellbeing Impact Assessment: A Toolkit for Wellbeing**

Presenter: Nerys Edmonds

# Learning outcomes

- Background and development
- Context: The relevance of MWIA to the Wellbeing of Future Generations Act and public health priorities in Wales
- The evidence base underpinning the MWIA framework and Toolkit
- Knowledge of the MWIA wellbeing and resilience framework and methodology
- Knowledge of the application of MWIA in a range of sectors and settings
- The benefits and outcomes from using MWIA

# Mental Well-being Impact Assessment

## A toolkit for well-being

Mental Well-being Impact Assessment (MWIA) enables people and organisations to assess and improve a policy, programme, service or project to ensure it has a maximum equitable impact on people's mental well-being.

Published by the National MWIA Collaborative (England)  
May 2011

## Members of the National MWIA Collaborative (England)



Jude Stansfield  
Kate O'Hara



South London and Maudsley NHS Foundation Trust



# A Toolkit for Wellbeing

- Not only about impact assessment
- ***"Is relevant to anyone wishing to refocus or focus their work to specifically achieve wellbeing outcomes" ...***

*Gregor Henderson, National Lead for Wellbeing and Mental Health at Public Health England*

# MWIA:

Provides an evidence based framework for improving wellbeing through commissioning processes, project and, service design and delivery, community engagement and impact assessment

- Aims to increase positive impacts on mental wellbeing and minimise or prevent potentially negative impacts.

# MWIA

- Provides an evidence based **framework** on the protective factors (determinants) of mental wellbeing and resilience at a population level that can be applied across sectors and settings to help plan and design policies and services
- Supports the **integration** of mental wellbeing into policy, programmes, services
- Enables **collaboration** between policy makers, commissioners, services and communities
- **Co production** and co-design of interventions and services
- Taps into **what is important** to your target audience/setting/community **for their wellbeing**
- Can support with identifying relevant **wellbeing indicators** for evaluation and population wellbeing assessments

# Range of MWIA tools:

Depth of evidence



Checklist  
framework



Desktop  
Screening  
Assessment  
Toolkit



Workshop  
engagement  
materials



Full  
MWIA



Level of collaboration, engagement, co-production



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# Policy context

- Wellbeing of Future Generations Act
- The Mental Wellbeing of adults and children and young people is a key indicator in both the Public Health Outcomes Framework and National Wellbeing Indicators
- Public Health Wales strategic plan and priorities
- Social Services and Wellbeing Act
- Planning Act, Local Development Plans
- Programme for Government: Employability; Community Resilience; Empowerment.

# Public Health Strategic Plan

- The Public Health Wales Strategic Plan 2017-20 has highlighted mental wellbeing as a key priority area and that that more work is needed to improve **how we measure and describe mental health and wellbeing**
- The long term strategy will be based on the Global Burden of Disease study which identifies mental and substance misuse disorders as the **second largest cause** of years lived with disability in Wales

# Learning from Well-being Assessments

- “There is generally a lack of consideration of the **wider determinants** of poor **mental health**”
- “As PSBs move to well-being planning **more thought** needs to be given to **how communities and services can foster good mental well-being**, as well as addressing mental health problems”
- Mental health was largely **framed** in the assessments as a problem to solve rather than **understanding the assets that can help promote and protect good mental health and wellbeing**.

## New approach to building resilient communities announced

Communities and Children Secretary Carl Sargeant today set out plans for a new approach to building

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Do we have a clear and shared understanding of (mental) wellbeing and resilience?  
If we don't, how do we plan and design programmes and measure progress?

Comisiynydd Cenedlaethau'r Dyfodol Cymru Future Generations Commissioner for Wales

# Well-being in Wales: Planning today for a better tomorrow



# Wellbeing

- **Wellbeing** is understood to be "...a positive physical, social and mental state; it is not just the absence of pain, discomfort and incapacity. It requires that basic needs are met, that individuals have a sense of purpose, that they feel able to achieve important personal goals and participate in society. It is enhanced by conditions that include supportive personal relationships, strong and inclusive communities, good health, financial and personal security, rewarding employment and a healthy and attractive environment." (DEFRA, HM Government 2009)

# Wellbeing

- *"The concept of **wellbeing** comprises two main elements: feeling good and functioning well. Feelings of happiness, contentment, enjoyment, curiosity and engagement are characteristic of someone who has a positive experience of their life. Equally important for **wellbeing** is our functioning in the world. Experiencing positive relationships, having some control over one's life and having a sense of purpose are all important attributes of wellbeing"* (New Economics Foundation 2008)

# Mental wellbeing

- *"This is a dynamic state, in which the individual is able to develop their potential, work productively and creatively, build strong and positive relationships with others, and contribute to their community. It is enhanced when an individual is able to fulfil their personal and social goals and achieve a sense of purpose in society" (Government Office for Science 2008).*



# Mental health

- “**Mental health** is a state of well-being in which an individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively and is able to make a contribution to his or her community” (WHO, 2004) “

# Background and development of MWIA

- Developed as part of a strategy to improve mental wellbeing at population level
- Aimed to achieve maximum mental wellbeing gain from mainstream policies, services, assets and new investment already in the community
- And to engage and enable mainstream settings across sectors to understand and measure their impact on mental wellbeing....integration
- Initial toolkit was developed and tested by South London and Maudsley NHS Trust with regeneration and health inequalities projects in South London (2002 – 2004) funded by the Health Action Zone

- NHS North West region and Liverpool Uni. started to contribute to the development leading to the second version published with support from Dept. Health England (CSIP North West 2007)
- Used on two major regional programmes: Capital of Culture (Liverpool), Well London
- Large regional and national capacity building action learning programmes funded by DH and Local Government Improvement Agency 2010 -12
- National and regional learning networks
- Third version published in 2011 with support from Dept Health (National Mental Health Development Unit) based on practice based learning. MWIA Collaborative England.

- MWIA has been used on well over 900 projects that we are aware of.
- International use is increasing: Australia; Chile, Portugal.
- Schools, workplaces, regeneration, green spaces, arts, housing, health service redesign, obesity, physical activity, wellness services, early years, voluntary sector .....
- Recommended tool for improving population mental wellbeing by Public Health England and EU Joint Action on Mental Health

# Joint Action on Mental Health and Well-being

## MENTAL HEALTH IN ALL POLICIES

Situation analysis and recommendations for action



Co-funded by  
the European Union



**MWIA is a  
recommended  
tool**



**Psychosocial pathways and health  
outcomes: Informing action on health  
inequalities**



**Mental health promotion and  
prevention training programmes**

Emerging practice examples



Protecting and improving the nation's health

**Prevention Concordat for Better  
Mental Health:**  
Prevention planning resource for local  
areas



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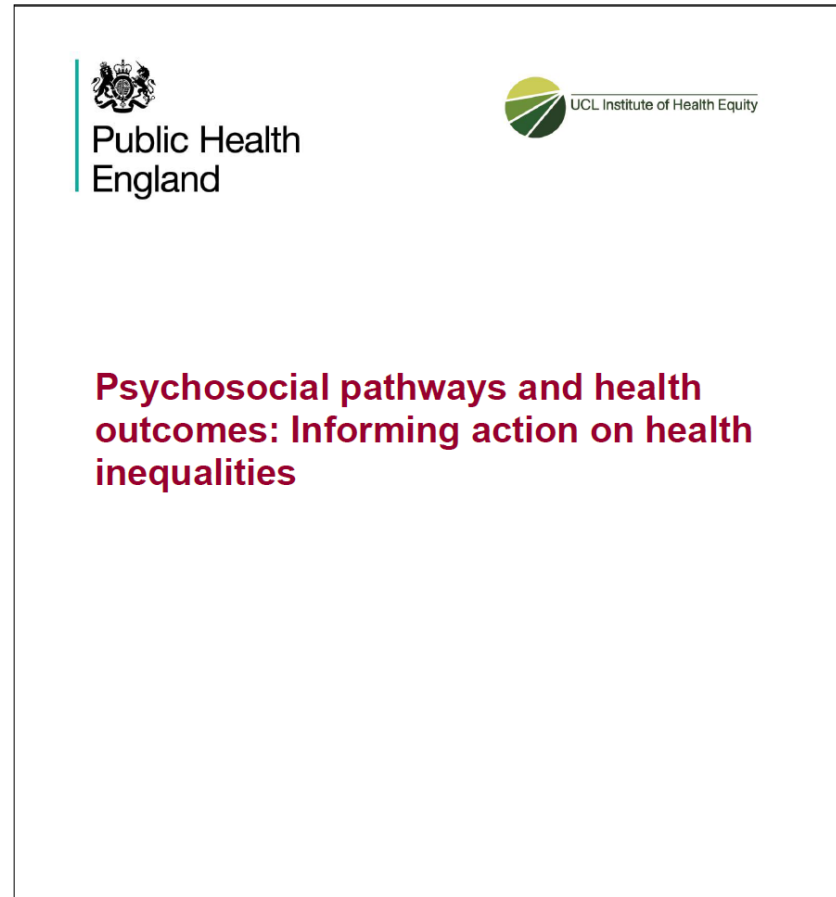
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# MWIA is based on evidence:

- Review of the evidence on what factors **promote and protect mental wellbeing at an individual, community and structural level by Dr Lynne Friedli**
- Consideration of health inequalities – factors that influence relative risk of mental health problems across the life course
- A detailed assessment framework
- Health Impact Assessment methodology



# Psychosocial Pathways to Health Inequalities 2017



# Assessment framework



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# Core protective factors for mental wellbeing

- Enhancing control
- Building resilience and community assets
- Facilitating participation and inclusion
- Wider determinants on mental wellbeing

# Population mental wellbeing and inequalities focus

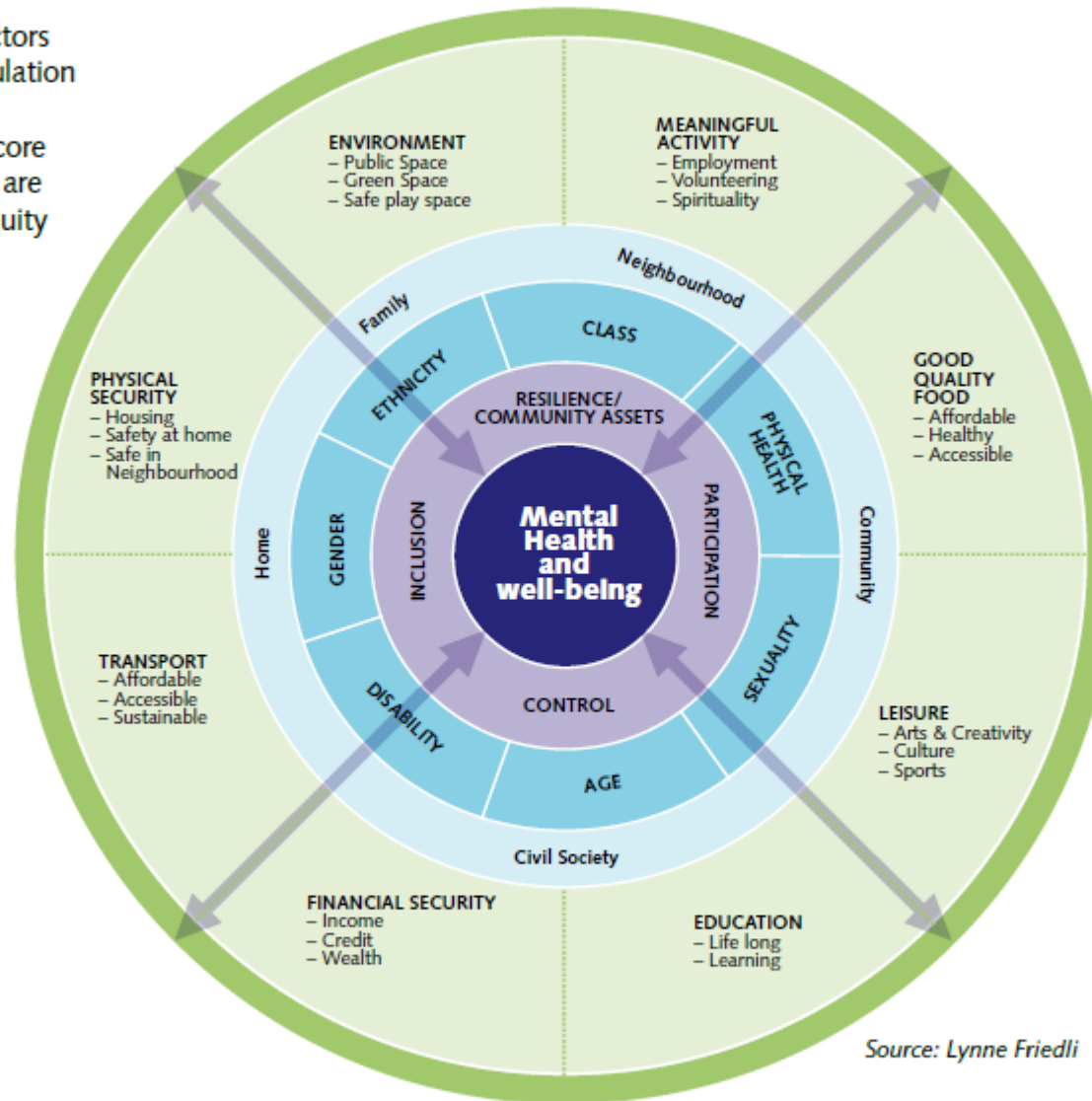
## A focus on key life stages

### Who will be impacted?

- Early years, adolescence, later life
- Gender
- Race and ethnicity
- Socioeconomic position
- Physical health
- Disability
- Sexuality and transgender
- Other population groups e.g. Looked after children, carers

Figure 2.2: A dynamic model of mental well-being for assessing mental well-being impact

The four protective factors are influenced by population characteristics, wider determinants and the core economy. All of which are influenced by levels equity and social justice.



Source: Lynne Friedli

Equity and social justice

Wider determinants

Social relationships and the core economy

Population characteristics

Four protective factors

Lynne Friedli  
MWIA Collaborative  
April 2009

# Dealing with complexity

- The MWIA framework can be very useful in refining and identifying the priority determinants of mental wellbeing relevant to a specific population and setting/ context.
- This can help make interventions/plans to promote better wellbeing more specific and effective

# Application of MWIA

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# Range of MWIA tools:

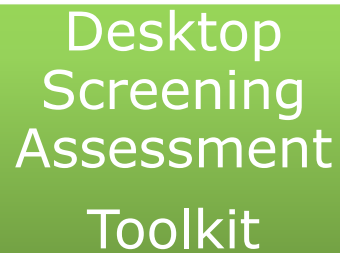
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# Mental well-being checklist

Are specific protective factors being addressed appropriately – at the individual and community level?

ENHANCING CONTROL	✓
<b>Individual level</b>	
<b>A sense of control</b> e.g. setting and pursuit of goals, ability to shape own circumstances	
<b>Belief in own capabilities and self determination</b> e.g. sense of purpose and meaning	
<b>Knowledge skills and resources to make healthy choices</b> e.g. understanding what makes us healthy and being able to make choices	
<b>Maintaining independence</b> e.g. support to live at home, care for self and family	
<b>Community / organisation level</b>	
<b>Self-help</b> provision e.g. information advocacy, groups, advice, support	
<b>Opportunities to influence decisions</b> e.g. at home, at work or in the community	
<b>Opportunities for expressing views and being heard</b> e.g. tenants groups, public meetings	
<b>Workplace job control</b> e.g. participation in decision making, work-life balance	
<b>Collective organisation and action</b> e.g. social enterprise, community-led action, local involvement, trades unions	
<b>Resources for financial control and capability</b> e.g. adequate income, access to credit unions, welfare rights, debt management	
<b>Other?</b>	

INCREASING RESILIENCE AND COMMUNITY ASSETS	✓
<b>Individual level</b>	
<b>Emotional well-being</b> e.g. self esteem, self worth, confidence, hopefulness, optimism, life satisfaction, enjoyment and having fun	
<b>Ability to understand, think clearly and function socially</b> e.g. problem solving, decision making, relationships with others, communication skills	
<b>Have beliefs and values</b> e.g. spirituality, religious beliefs, cultural identity	
<b>Learning and development</b> e.g. formal and informal education and hobbies	
<b>Healthy lifestyle</b> e.g. taking steps towards this by healthy eating, regular physical activity and sensible drinking	
<b>Community / organisation level</b>	
<b>Trust and safety</b> e.g. belief in reliability of others and services, feeling safe where you live or work	
<b>Social networks and relationships</b> e.g. contact with others through family, groups, friendships, neighbours, shared interests, work	
<b>Emotional support</b> e.g. confiding relationships, provision of counselling support	
<b>Shared public spaces</b> e.g. community centre, library, faith settings, café, parks, playgrounds, places to stop and chat	
<b>Sustainable local economy</b> e.g. local skills and businesses being used to benefit local people, buying locally, using Time Banks	
<b>Arts and creativity</b> e.g. expression, fun, laughter and play	
<b>Other?</b>	

FACILITATING PARTICIPATION AND INCLUSION	✓
<b>Individual level</b>	
<b>Having a valued role</b> e.g. volunteer, governor, carer	
<b>Sense of belonging</b> e.g. connectedness to community, neighbourhood, family group, work team	
<b>Feeling involved</b> e.g. in the family, community, at work	
<b>Community / organisation level</b>	
<b>Activities that bring people together</b> e.g. connecting with others through groups, clubs, events, shared interests	
<b>Practical support</b> e.g. childcare, employment, on discharge from services	
<b>Ways to get involved</b> e.g. volunteering, Time Banks, advocacy	
<b>Accessible and acceptable services or goods</b> e.g. easily understood, affordable, user friendly, non-stigmatising, non-humiliating	
<b>Cost of participating</b> e.g. affordable, accessible	
<b>Conflict resolution</b> e.g. mediation, restorative justice	
<b>Cohesive communities</b> e.g. mutual respect, bringing communities together	
<b>Other?</b>	

Are the wider structural determinants being considered?

WIDER DETERMINANTS (often at a socio-economic / environmental/ structural level)	✓
<b>Access to quality housing</b> e.g. security, tenure, neighbourhood, social housing, shared ownership, affordable and appropriate	
<b>Physical environment</b> e.g. access to green space, trees, natural woodland, open space, safe play space, quality of built environment	
<b>Economic security</b> e.g. access to secure employment (paid and unpaid), access to an adequate income, good working conditions, meaningful work and volunteering opportunities	
<b>Good quality food</b> e.g. affordable, accessible	
<b>Leisure opportunities</b> e.g. participate in arts, creativity, sport, culture	
<b>Tackling inequalities</b> e.g. addressing relative deprivation and poverty	
<b>Transport access and options</b> e.g. providing choice, affordability and accessibility	
<b>Local democracy</b> e.g. devolved power, voting, community panels and increasing community participation	
<b>Ease of access to high quality public services</b> e.g. housing support, health and social care	
<b>Access to education</b> e.g. schooling, training, adult literacy, hobbies	
<b>Challenging discrimination</b> e.g. racism, sexism, ageism, homophobia and discrimination related to disability, mental illness or faith	
<b>Other?</b>	

## Section 3

1

2

3

4

5

6



### Mental Well-being Impact Assessment (MWIA) Screening Toolkit

This section of the MWIA Toolkit is designed to be used as a 'stand alone' process for making an initial assessment of a proposal. It does not constitute an MWIA in its own right.





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NHS CONFEDERATION



South London and Maudsley

NHS Foundation Trust



# Workshop methodology

- MWIAs bring together a range of stakeholders in a dialogue to share their perspectives on wellbeing and what the most important wellbeing impacts of a proposal are for the target population.



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# Measuring what matters to people

- This can enable outcomes monitoring to become user designed and more closely linked to what people feel is most important for their wellbeing in that particular context.

# Full MWIA

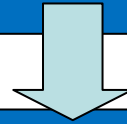
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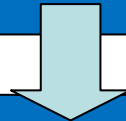
**Screening – Deciding - Should you carry out an MWIA?**



**Scoping – How you will carry out the MWIA**



**Appraisal process – gathering & assessing the evidence**



**Identification of potential positive or negative impacts**



**Identification of recommendations and writing of report**

**Identification of indicators**

for monitoring impacts of proposal on mental well-being  
and implementation of recommendations

Population health profile

Evidence used in  
MWIA

Qualitative  
perspectives  
from key  
stakeholders  
and people  
affected

Literature review



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# How has MWIA been applied: some themes

- Programmes that want to measure and evidence their impact on wellbeing – an **outcomes focus**
- Services/projects that want to embed a framework for promoting mental wellbeing into their mainstream service delivery – **integration & improvement focus**
- Programmes that need to engage their population in improving impact on mental wellbeing and/or co-designing a programme/service – **engagement focus**
- Increasing **understanding of how programmes and policies impact on mental wellbeing**
- Often all of the above
- To influence policies, re-design of services, prioritise local strategies.....**many different ways**

# Outcomes focus

- Adult Education Merthyr Tydfil
- Lewisham Culture and Leisure Strategy – Evaluation
- St Mungo's Psychotherapy service
- Changing Minds
- Timebanks



# Integration and Improvement focus

- North Wales Gender Identity Disorder Referral and Management Pathway
- Well London
- Education system in New South Wales, Australia
- Children's Centres In Greenwich
- Bristol City Landlord Services
- Telford Single Point of Access Hub

# Engagement focus

- happier@work – King Health Partners
- Maida Hill Market - Regeneration
- Windrush Square, Brixton, Regeneration

# Case Study

- Detailed Case Study on Children's Centre's in Greenwich.
- Context – Implementing Healthy Early Years Framework with standards including one on mental health.

# Outcomes of MWIA

Insert name of presentation on Master  
Slide

## Cooke and Stansfield (2009) Review of MWIA case studies- MWIA has a key role to play in:

- Re-focusing efforts to create **better service responses** to improve well-being
- Developing **shared understandings** and coherence of mental well-being with a range of stakeholders
- Ensuring policies, programmes and projects have a **positive impact** on mental well-being
- Actively engaging all partners in service development and **fostering co-production of mental well-being**, and
- Supporting needs assessment and the development of **relevant and meaningful local indicators**.

# King (2014) First level qualitative review of MWIA, Tavistock Institute

- Is there evidence that the decisions made using the MWIA are implemented successfully?
- **YES**
- Did that lead to any measurable impact on well-being indicators for the target group?
- **Some available evidence**
- Is it possible to make a causal link between the outcome/impact of the MWIA?
- **Not yet**

“MWIA gets to the heart of well-being for the specific conjunction of proposal and target group very quickly. It enables stakeholders to grapple with what is real and meaningful... It provides a robust structure for a conversation and the creation of new plans shaped around well-being outcomes”

King (2014)



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# King (2014) Conclusion

“there is plenty of evidence outlined in this paper that MWIA does meet its objectives of orientating initiatives towards supporting the evidenced protective factors for well-being”  
(p8)



# Kings Health Partners

- Academic Health Science Centre
- Three NHS organisations plus KCL
- happier@work initiative
- MWIAs with 8 clinical teams informed the design of mental health promotion interventions for the team
- Staff engagement through MWIA workshop
- Evaluation by London Southbank University (Wills et al , 2013)



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# Results

- 183 employees completed a pre-intervention survey (52% response rate) and 71 employees completed a post-intervention survey (20% response rate)
- There were improvements recorded in mean well-being scores, psychological health scores, and productivity loss scores declined.



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# Burford et al 2017

- Review of two case studies of MWIA as a workplace wellbeing tool
- The MWIA can be used as an effective workplace assessment tool and is valuable as both a diagnostic tool and as an intervention in its own right. The MWIA generates tailored action plans focussed on addressing the organisation or team-specific issues.
- The weaknesses of the MWIA in the workplace are mainly focussed around management cooperation and commitment to the process which should be screened for prior to engaging in the full stakeholder workshop.

# Considerations for effective use of MWIA

- Timing and level of detail of proposal
- Having a clear focus and objectives
- Integration into a project or consultation plan
- Ensuring there is scope to influence, senior buy in
- Do no harm
- A good quality screening with a range of stakeholders
- Clarity on how will findings and recommendations be implemented and who is responsible
- Stakeholder engagement

# Download the toolkit and checklist here:

- <http://www.maudsleyinternational.com/media/16155/mentalwellbeingimpactassessmentatoolkitforwellbeing.pdf>
- [http://www.maudsleyinternational.com/media/16152/mental\\_well\\_being\\_checklist.pdf](http://www.maudsleyinternational.com/media/16152/mental_well_being_checklist.pdf)

# Thank you

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