Promoting Well-Being in Schools and the Community

UNIVERSITY OF MIAMI
SCHOOL of EDUCATION
& HUMAN DEVELOPMENT



Samantha Dietz, Ph.D., LCSW

Assistant Scientist sdietz@miami.edu

Isaac Prilleltensky, Ph.D.

Dean and Professor isaac@miami.edu

School of Education and Human Development University of Miami



Outline

- 1. Public Health Approach
- 2. Mattering
- 3. Wellness
- 4. Fairness
- 5. Community Well-Being
- 6. Online Intervention



UNIVERSITY OF MIAMI SCHOOL of EDUCATION & HUMAN DEVELOPMENT



Public Health Approach

Public Health Approach Aims

- Improve health of entire population and reduce health inequities among population groups
- Build on strengths and assets of individuals, families and communities



Health, Safety and Well-Being

Prevent social problems that jeopardize health and public safety

Provide maximum benefit for largest number of people

Promote healthy lifestyles

Research disease processes; injury prevention; detection and control of infectious diseases



Social problems lead to:

- Injury, disability, premature death
- Significant health disparities disproportionately affecting certain groups
- Increase risk of poor health outcomes (chronic diseases)



How Public Health Approach Works

- Target key risk factors-Context matters
- Teamwork/capacity building across sectors (e.g., education, mental health, substance abuse, law enforcement, policy makers, economic development, etc.)
- Solutions meet basic human needs at population level (environmental), not just those at-risk



Four Steps

1. Define Problem

- -collect info (data driven)
- -"who", "what", "when", "where", "how"

2. Identify Risk and Protective Factors

- -Causes and correlates
- -Factors put people at risk
- -Factors protect people (avoid/reduce problem)

Four Steps cont...

- 3. Develop and Test Strategies & Programs
 - -Use gathered info to design interventions
 - -Implement
 - -Evaluate for efficacy
- 4. Ensure widespread adoption (share results)
 - -Tell what works
 - -Tell which parts didn't work
 - -Scale up



Mattering

UNIVERSITY OF MIAMI

SCHOOL of EDUCATION & HUMAN DEVELOPMENT



Recognition and Impact

Prilleltensky 10

Meaning-Making

- Human beings engage in meaning-making through their struggles to matter and to thrive (Frankl, 2006).
- Dean Prilleltensky suggests that most of the ways to make meaning revolve around mattering and thriving, which entail fairness and wellness, respectively (Prilleltensky, 2012, p. 151).



Mattering



domination <----> helplessness



entitlement <----> invisibility

Recognition

Impact

Mattering Moments

RECOGNITION

Signals received from world

- presence matters
- what we say has meaning
- acknowledged in interpersonal situations
 - Room, Family, Work and/or School,Community at large

IMPACT

Sense of agency

- what we do makes a difference in the world
- other people depend on us



Mattering Continuum

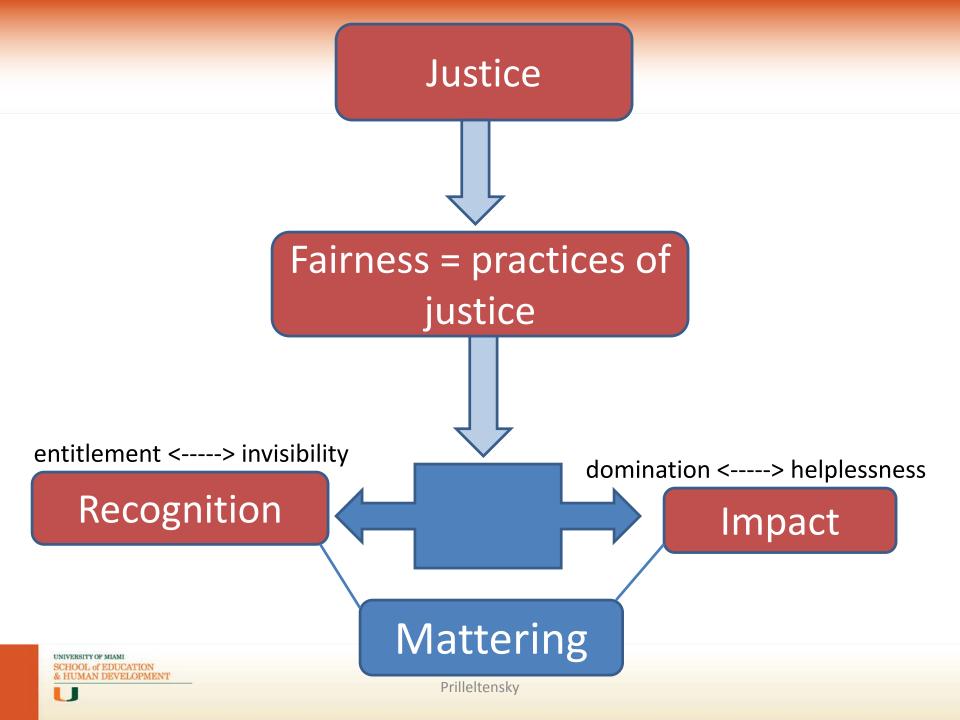
RECOGNITION

entitlement <-----> invisibility

Mattering Continuum

IMPACT

domination <-----> helplessness



Situational Forms of Justice

Interpersonal Relations

- occupational or school settings, community contexts, and policy arenas.
 - feel recognized or ignored, helpless or influential, valued or forgotten
- Entire groups of people (disabilities, minorities)
 - Rights forgotten



Well-being

UNIVERSITY OF MIAMI
SCHOOL of EDUCATION
& HUMAN DEVELOPMENT



Multiple Domains
Multiple Connections

Definition of wellness

 Wellness is a positive state of affairs in individuals, relationships, organizations, communities, and the natural environment, brought about by the balanced satisfaction of objective and subjective needs across various domains of life. Pathways to wellness include behavioral, emotional, cognitive, interactional, contextual, informational and sequential approaches. In addition, wellness is determined by prevailing conditions of justice across life systems.

Wellness Synergy: I COPPE Domains of life

Interpersonal well-being

Community well-being

Occupational well-being

Physical well-being

Psychological well-being

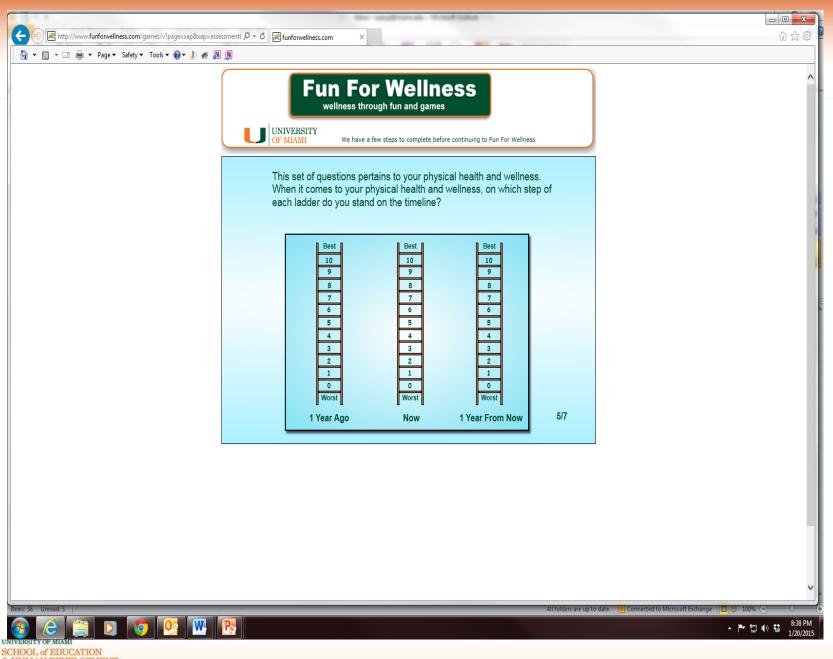
Economic well-being

Correlations among I COPPE domains, overall well-being, and comparison measures (Prilleltensky et al., Journal of Community Psychology, 2015).

	Overall Well-Being	Comparison Measure
Interpersonal well- being	.52***	.43***
Community well-being	.55***	.59***
Occupational well- being	.63***	.58***
Physical well-being	.70***	.59***
Psychological well- being	.63***	.61***
Economic well-being	.71***	.74***
***p<.001		



SCHOOL of EDUCATION



UNIVERSITY OF MIAMI SCHOOL of EDUCATION & HUMAN DEVELOPMENT

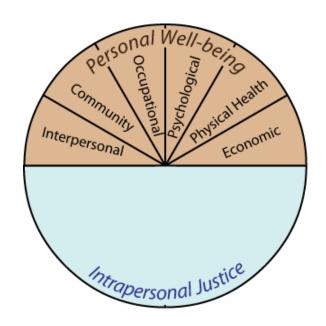


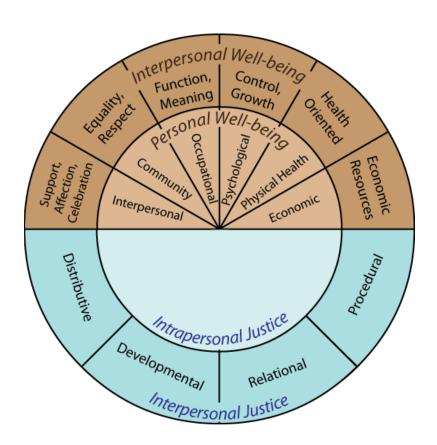
Fairness

Multiple Domains
Multiple Connections

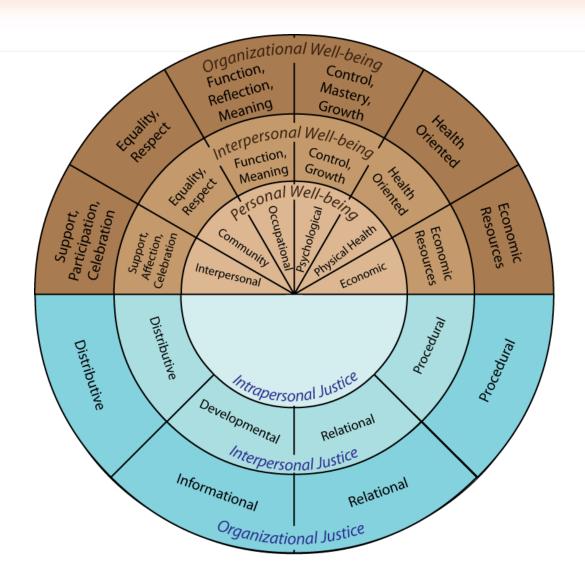
Prilleltensky 23

Wellness and Fairness

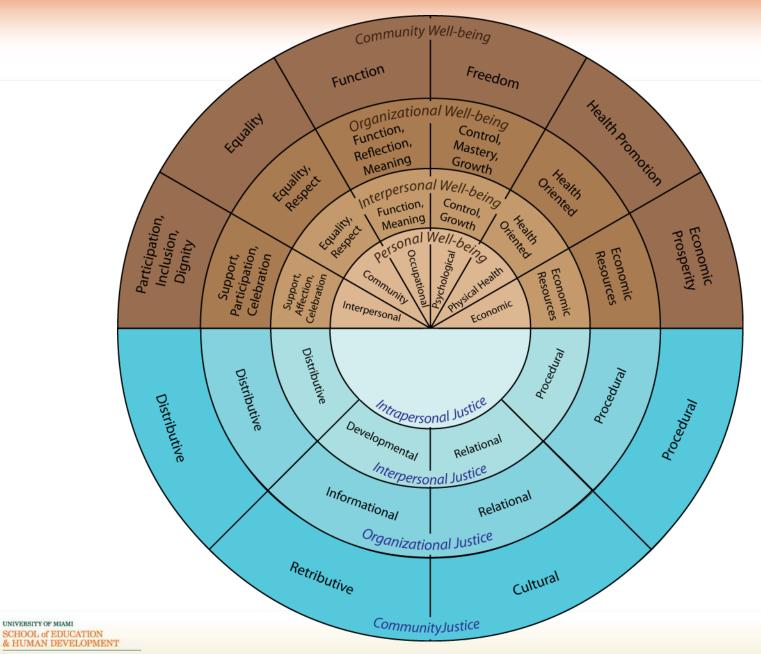










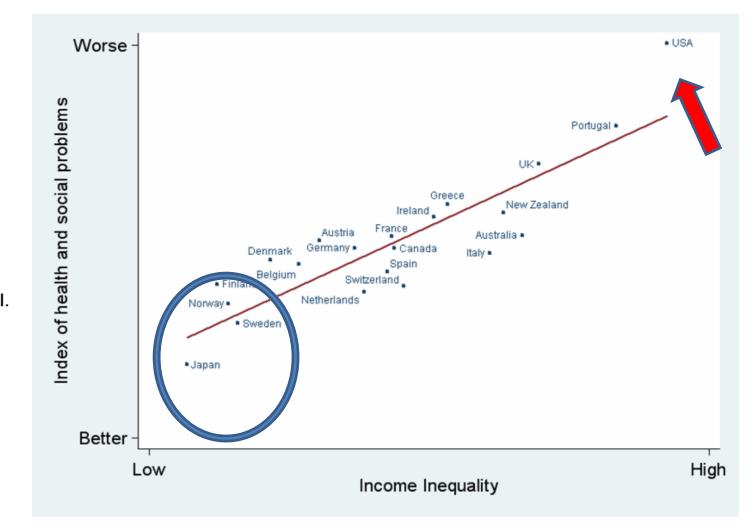


UNIVERSITY OF MIAMI

Health and Social Problems are Worse in More Unequal Countries

Index of:

- Life expectancy
- Math & Literacy
- Infant mortality
- Homicides
- Imprisonment
- · Teenage births
- Trust
- Obesity
- Mental illness incl. drug & alcohol addiction
- Social mobility





Source: Wilkinson & Pickett, The Spirit Level (2009)

www.equalitytrust.org.uk





Wellness as Fairness

	Systems of Wellness					
	Individual	Relational	Organizational	Communal	Environmental	
Objective elements	+health - illness	+networks -isolation	+resources - lack of resources	+social capital -lack of trust	+clean air -pollution	
Subjective elements	+efficacy -lack of control	+voice -repression	+support -isolation	+belonging -rejection	+safety -fear	
Values	+autonomy -lack of power	+caring -neglect	+participation -marginality	+diversity -discrimination	+protection of resources -depletion of resources	
Fairness	My due/Our due	Your due/Our due	Its due/Our due	Their due/Our due	Nature's due/Our due	



Wellness as Fairness

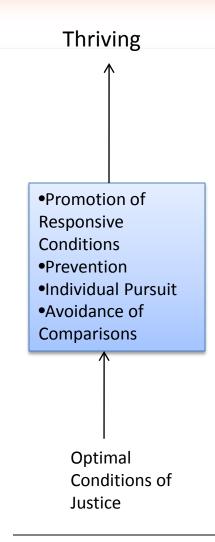
Wellness Continuum

Fairness Continuum



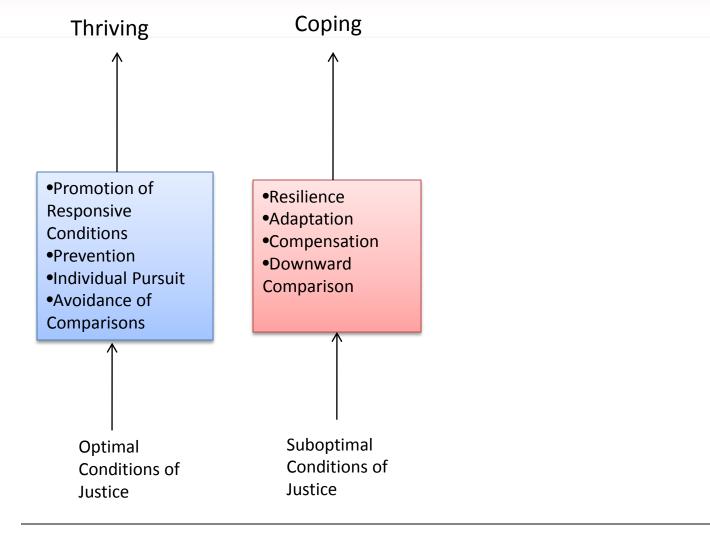
Fairness Continuum





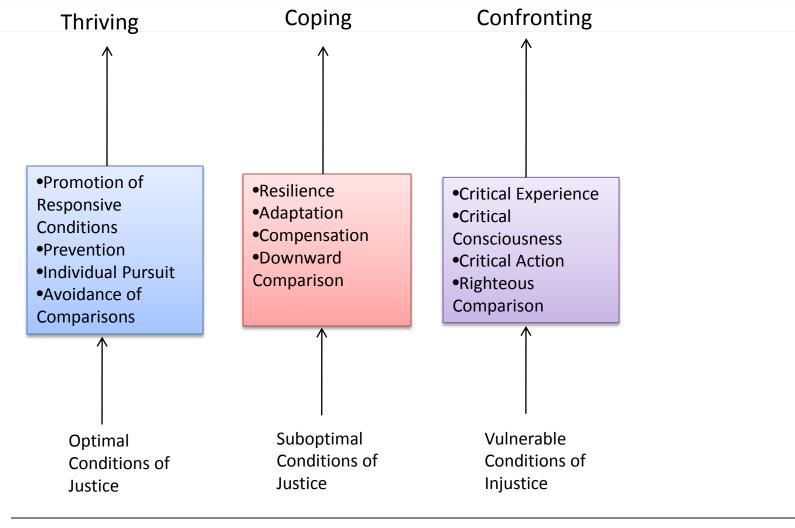
Fairness Continuum





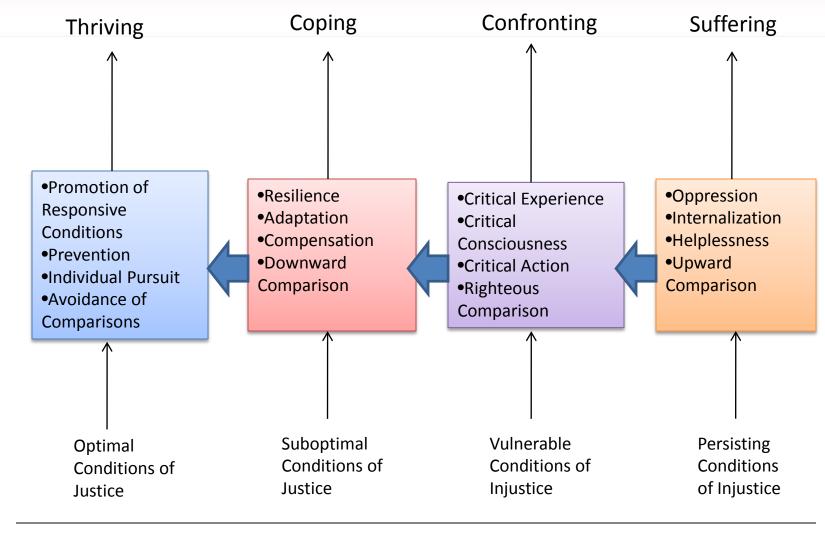
Fairness Continuum





Fairness Continuum





Fairness Continuum





UNIVERSITY OF MIAMI

SCHOOL of EDUCATION & HUMAN DEVELOPMENT



Community Well-Being

Strategies for Change

What is Community Well-Being?

Objective indicators

- level of child abuse
- access to health care
- number of homeless
- number of parks and green space
- Income
- Education
- Crime

Subjective indicators

- Sense of community
- Level of volunteerism
- leadership of churches in developing community cohesion
- members of the community feel supported by their neighbors
- Satisfaction with life domains
- Quality of organizations
- Soundness of policies





The Problems of DRAIN approaches

Drain Approach

- Deficits-based
- Reactive
- Alienating
- Individual-focused

Problems

- Too little
- Too late
- Too costly
- Too unrealistic





UNIVERSITY OF MIAMI



The Promise of SPEC approaches

SPEC Approaches

- Strengths-based
- Prevention
- Empowerment
- Community-change

- Built to last
- Start early
- Give voice & choice
- Return \$\$\$\$





Organizations with a Strength-based orientation

- Perceive recipients of services and community members as having strengths
- Recognize that service recipients learn to cope with difficult situations and develop resilience
- Identify and build on individual and community assets, resilience, and ability to thrive in difficult situations



Organizations with a prevention orientation

- Work to prevent problems before they occur
- Identify and reduce risk factors and promote protective factors in individuals, families, and communities.
- Take action to decrease the chances that a particular problem will affect a person, group, or an entire community

Organizations with an empowerment orientation

- Believe community members should have voice and choice in issues and decisions that affect their lives
- Aim to increase the power of individuals, groups, and entire communities
- Encourage the sharing of decision-making power and control over resources with community members



Organizations with a community-change orientation

- Believe that some of the problems that individuals and entire communities face result from community and living conditions
- Remove barriers to services and supports
- Work to address the root causes of the problems people and communities face
- Promote social policies that enhance wellbeing and people's ability to thrive
- Create new systems or structures that enhance citizen participation and wellbeing



Fun For Wellness: Promoting Wellness Online

UNIVERSITY OF MIAMI
SCHOOL of EDUCATION
& HUMAN DEVELOPMENT



Market Analysis

- 72% of American households play computer or video games
- The average game player age is 35
- 43% of online game players are female
- \$ 56 billion industry in 2011



The financial costs of being unwell

- Costs of absenteeism: \$ 74 billion
- Costs of obesity: \$ 147 billion
- Costs of mental health: \$ 200 billion
- Costs of smoking deaths: \$ 92 billion
- Costs of diabetes: \$ 174 billion



The human costs of being unwell

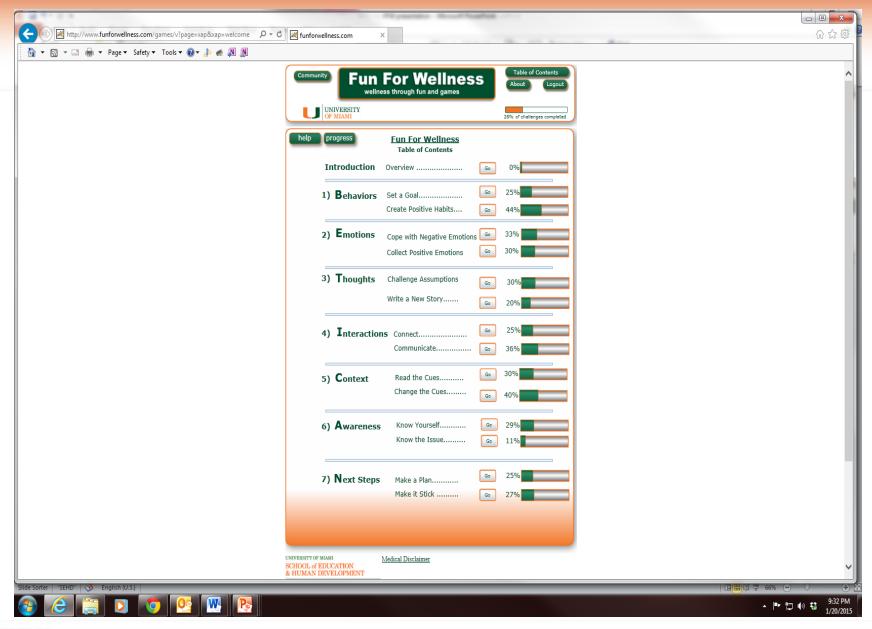
- Illness
- Divorce
- Conflict
- Child abuse
- Bullying
- Anxiety
- Bankruptcy

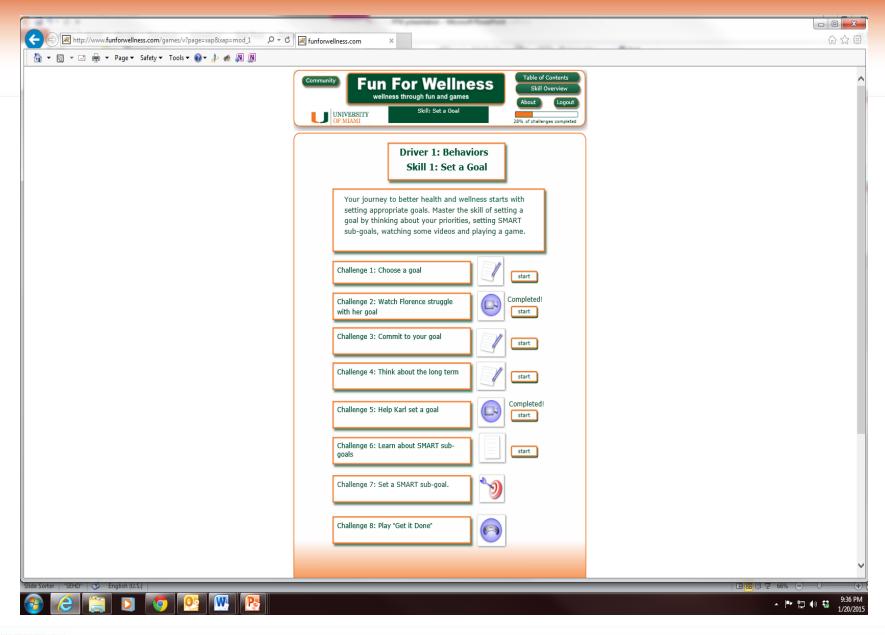


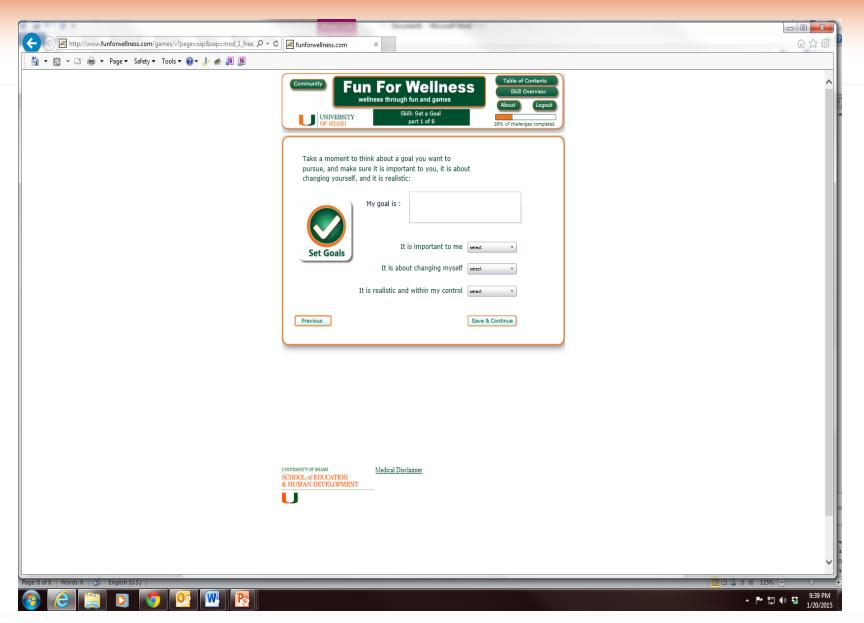
Essentials

- 1. Self-directed online program
- 2. Addresses six domains of well-being
- 3. Leverages seven drivers of change
- 4. Uses assessments, videos, games, exercises, forums, rewards, and brief coaching sessions









Videos



Interpersonal



Physical



Psychological



Economic



Occupational



Community



Psychological
UNIVERSITY OF MIAMI
SCHOOL OF EDUCATION
& HUMAN DEVELOPMENT



Physical



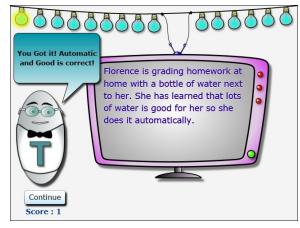
Interpersonal

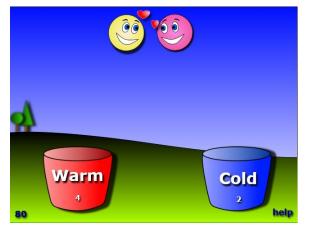


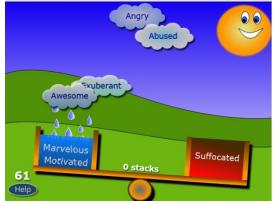
Mini-Games Teach Wellness















BET I CAN

UNIVERSITY OF MIAMI
SCHOOL of EDUCATION
& HUMAN DEVELOPMENT



Strategies for Change

BET I CAN: Seven scientific principles to promote well-being

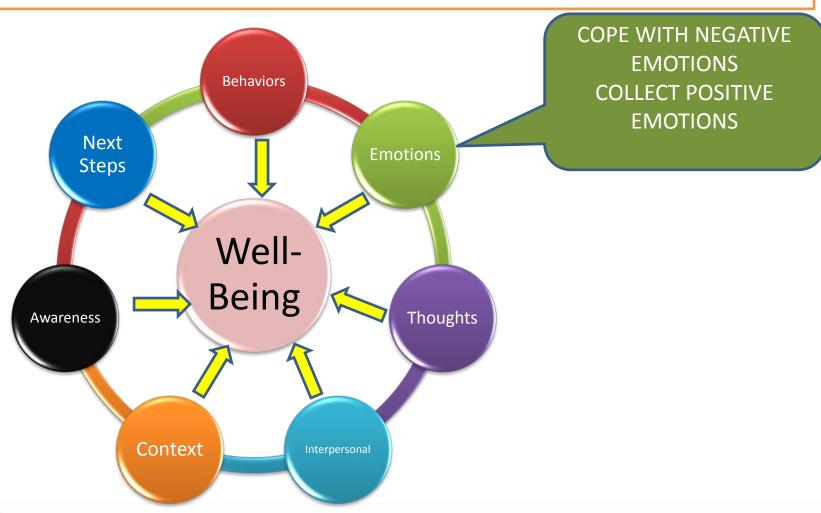




BET I CAN STRATEGIES

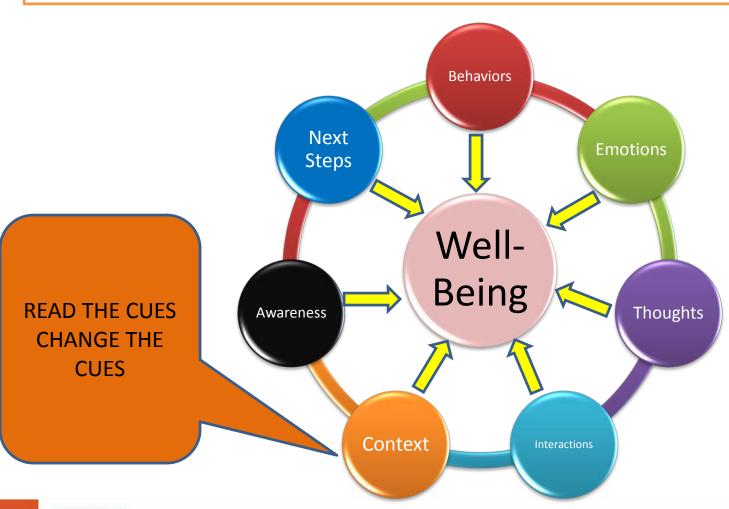








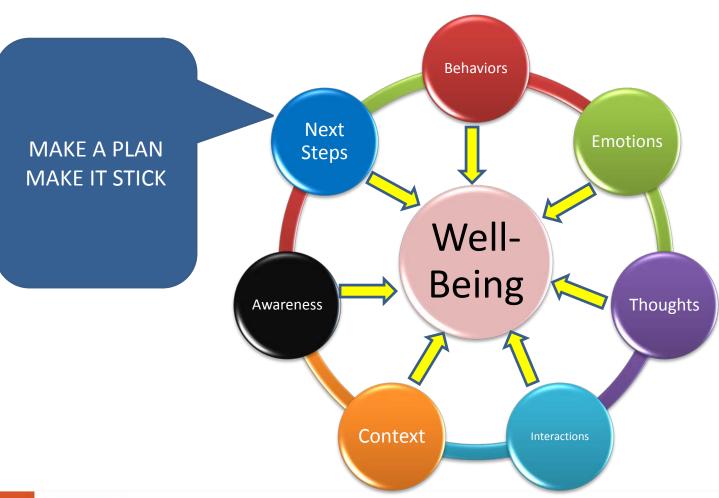
















Study I Preliminary results: N=107

- 91% of people said that they got something useful out of the games
- 93% said that they enjoyed playing the games
- 95% said that they enjoyed the overall experience
- 76% said that they learned some specific techniques to improve their well-being
- 94% said that they could relate to the concepts covered in the game



Study II Preliminary results of RCT

- Randomized controlled trial (RCT) tested efficacy of Fun For Wellness (FFW)
- 500 UM faculty and staff
- Well-Being surveys before randomization, 30days, 60-days
- Intervention and control group 30-day access
 - FFW or Placebo Control Website



Analyses & Findings

CACE methodology

Class 1: non-compliers- intervention participants who did not complete any Fun For Wellness challenges along with most of the control participants

Class 2: Compliers- completed FFW challenges and some control participants

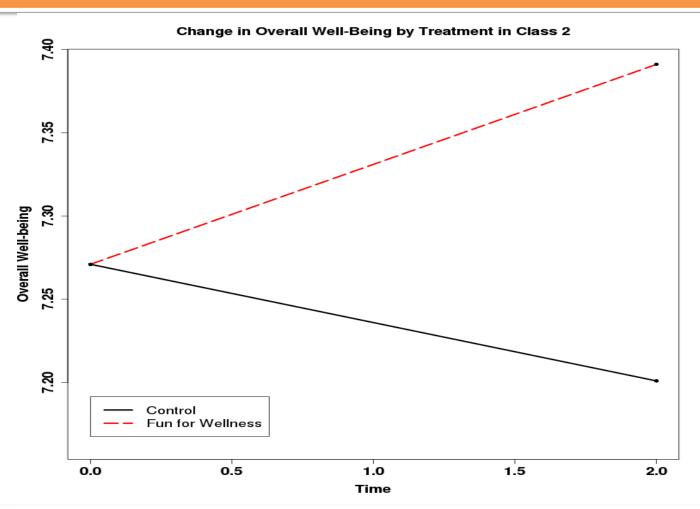
Class 2 is group of interest for these analyses



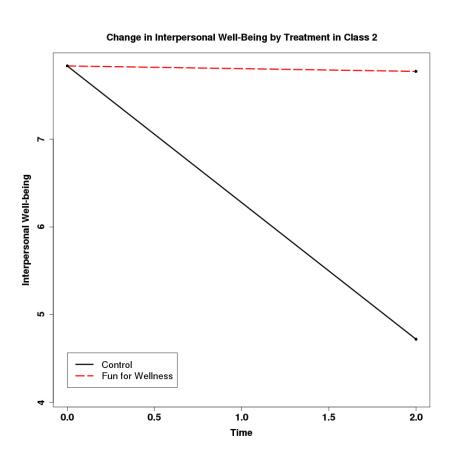
Within Class 2 Findings

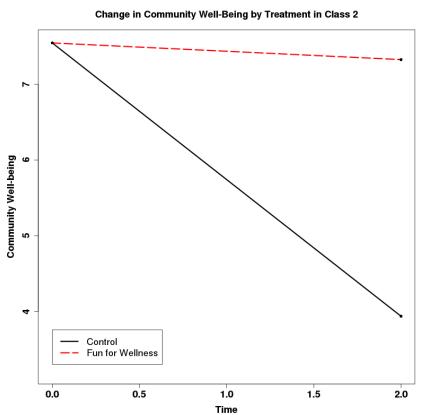
- Compared to controls, Fun For Wellness had either a protective or promotive effect
- Protective effect is the prevention of decline in well-being, compared to controls, whose well-being went down considerably
- A promotive effect refers to improvements in well-being over time

Promotive: Overall WB

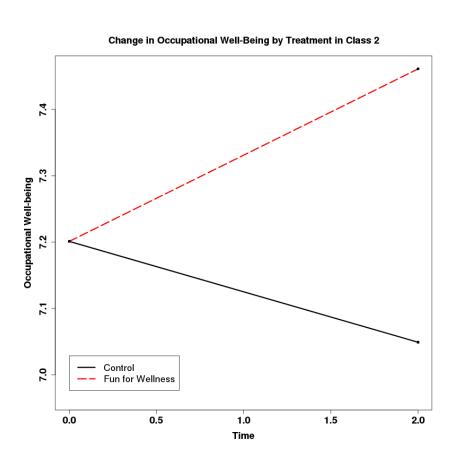


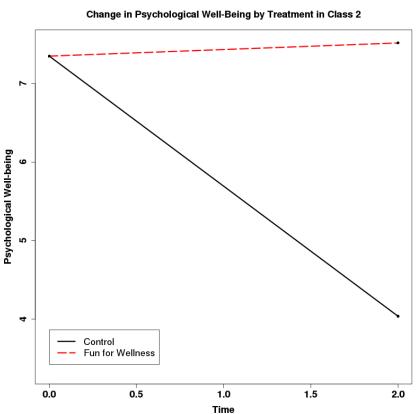
Protective: Interpersonal & Community WB





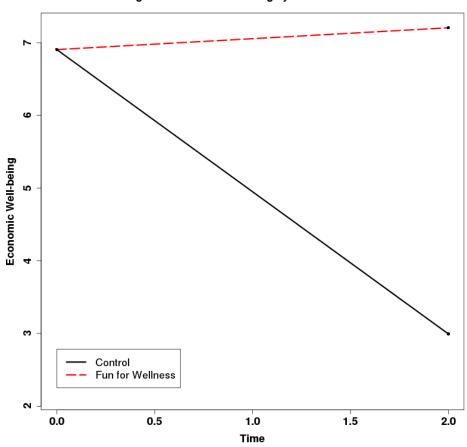
Promotive: Occupational, Psychological WB





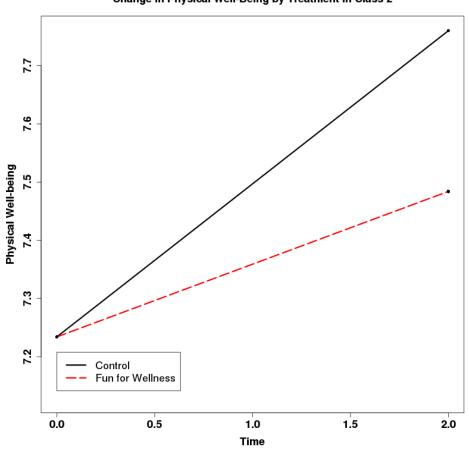
Promotive: Economic WB





Promotive < controls: Physical WB

Change in Physical Well-Being by Treatment in Class 2



Physical well-being and information

H: Robust control group information may have influenced reported well-being in the physical domain

Class 1 (non-compliers and controls)

- No significant differences in 6 out of 7 domains:
 - Interpersonal, Community, Occupational,
 Psychological, Economic
- But, significant difference in Physical domain where controls reported better well-being



Next Steps

- FFW revision to include factual information in Physical well-being domain
- FFW focus on behavioral skills and not robust factual info (e.g. nutrition, exercise, etc.)
- Strengthen intervention to complement skill building

Bibliography

Frankl, V. (2006). Man's search for meaning. Boston, MA: Beacon Press

Prilleltensky, I. (2012). Wellness as fairness. *American Journal of Community Psychology*, 49, 1-21. doi: 10.1007/s10464-011-9448-8

Prilleltensky, I. (2014). Justice and Human Development, *International Journal of Educational Psychology*, 3(3), 287-305.

Prilleltensky, I, Dietz, S., Prilleltensky, O., Myers, N.D., Rubenstein, C., Jin, Y., & McMahon, A. (2015). Assessing Multidimensional Well-Being: Development and Validation of the I COPPE Scale. *Journal of Community Psychology*, 43(2), 199-226. doi: 10.1002/jcop.21674

Schlossberg, N. (1989). Marginality and mattering: Key issues in building community. *New Directions for Student Services*, 48, 5-15.

Taylor, J., & Turner, R. (2001). A longitudinal study of the role and significance of mattering to others for depressive symptoms. *Journal of Health and Social Behavior, 42,* 310-325.



THANK YOU VERY MUCH