

The Impact of Adult Learning on Health and Wellbeing

European Agenda for Adult Learning 2015-2017

Annexe 1



Forum for Adult Learning

NI

ECORYS



Scotland's Learning Partnership



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Research Questions

- What is the relationship between adult learning and physical and mental health and wellbeing?
- How are the health outcomes defined and measured in studies on adult learning and mental health?
- What is the impact of adult learning on individuals' empowerment and inclusion in health?
- To what extent do health professionals understand the role of learning in improving health outcomes?
- To what extent do learning professionals (tutors and leaders) recognise learning for health and wellbeing as part of their role and do they get support for it?

Education impacts on Health and Wellbeing

Feinstein et al (2002)

- Education is a mechanism that enhances the health and wellbeing of individuals because it reduces the need for healthcare, associated costs of dependence on services, lost earnings and personal suffering.
- Education, through increased information and awareness also helps to promote healthy lifestyles and positive choices, supporting and nurturing human development and relationships and personal, family and community wellbeing.
- Effect is causal and operates within multiple, multi-layered and interacting contexts. Education impacts on individuals and on each layer of context at each level.

Impact of Adult Learning on Health and Wellbeing

- Feinstein, Hammond, Preston, Sabates et al of the Centre for the Wider Benefits of Learning from 2002 to 2008.
- Dolan, Fujiwara and Metcalf (2012),
- BeLL Project Research Report (2014),
- Dinis da Costa, Rodrigues, Vera-Toscana and Weber (2014).

- Sense of self – feelings of self-worth, self-confidence and self-esteem, satisfaction and happiness with life, aspirations and expectations from life and a sense of control.
- Personal health – reduction in symptoms and pain, use of services either reducing over use of services, or better use of preventative services, as well as changes in health behaviours.
- Family – interaction within the family around issues and concerns about health and wellbeing
- Social life – increased level of social interaction within the learning environment but also getting out more – reduction in social isolation, use of leisure time and participation in civic life and volunteering.
- Work – higher aspirations to get back to work or get on at work, increased expectations from work, improved skills for work.

Systematise the benefits using the concept of 'capital'.

- Human capital – the know-how and qualifications that enable participation in the economy and society
- Social capital – networks in which people actively participate, access to individuals and groups, promotion of social integration, civic engagement and social cohesion. It refers to the norms of trust and co-operation, not as an individual characteristic but as a social one.
- Identity capital – personal resources such as self-esteem, self-efficacy, resilience and internal locus of control.

Capabilities

- *“the ability to shape one’s own life is (or can be) built and rebuilt throughout the life courses. The less people build this ability the more they are at risk of social exclusion. The more they build this ability the higher the potential to achieve personal and collective goals’*

What about teaching?

- Preston and Hammond(2002) - process is seen as important as content to the learning opportunity, though process could not occur without content.
- Hammond (2004) –*'The ethos of a class or educational establishment can also contribute to individuals' self-esteem..... Support and encouragement from teachers not only contributes to educational success, it also develops self-esteem directly'*
- BeLL (2014) - capabilities of the teacher and the opportunities to promote social interaction are fundamental in promoting the value of lifelong learning, but also to ensuring health and wellbeing impacts

Research Methodology

- Quantitative research has focussed on using big longitudinal data sets such as the National Child Development Study (NCDS) and the British Household Panel Study (BHPS)
- Qualitative research of the impact of adult learning through questionnaires, case studies and learner and practitioner testimonies has provided a wealth of evidence.

Research Methodology

- Learn2b - Hospital Anxiety and Depression Scale (HADS) and the Recovery Evaluation Form (REF).
- BIS Community Learning and Mental Health pilots: Patient Health Questionnaire (PHQ9) Depression test, the Generalized Anxiety Disorder 7 (GAD7) and the Warwick Edinburgh Mental Well-being Scale (WEMWBS)
- What Works Wellbeing Centre - evidence collection on how adult learning impacts on health and wellbeing. GDP does not equate to happiness and life satisfaction, and is not an effective way to measure social progress

- The value proposition? What would 'win' the case? What would shift policy and resources?
- Professionalisation. Restoring a collective sense of self-esteem and confidence? Sense of purpose? Capabilities and skills?