



A life worthwhile: scoping future service offers

SJOG Research Series

May 2019

Dr Jamie Mackrill

Summary

What makes your life worthwhile?

At SJOG we asked this question to 112 people across 12 services.

Whilst we recognise the uniqueness of every individual the aim was to understand whether there are any key categories that are important for people and to consider how as an organisation, SJOG are able to support these.

We found that relationships, meaningful activities, and health and wellbeing are the primary themes that contribute to a life worthwhile.

Following this, there is greater variation across the themes of leisure, faith and environment.

This report details this research and compares and contrasts it with academic research in the area of health and wellbeing, happiness, and social determinants of health.

We conclude by drawing parallels with the social determinants of health and use this to identify future service offers.

1.0 Introduction

Albert Einstein wrote that only a life lived for others is a life worthwhile. Robert F. Kennedy wrote in 1968 that;

“gross national product does not allow for the health of our children, the quality of their education or the joy of their play. It does not include the beauty of our poetry or the strength of our marriages, the intelligence of our public debate or the integrity of our public officials. It measures neither our wit nor our courage, neither our wisdom nor our learning, neither our compassion nor our devotion to our country, it measures everything in short, except that which makes life worthwhile”.

Both emphasise that wellbeing, happiness, and health are not dependent solely on quantitative factors. Health, wisdom, happiness, culture, and values contribute to a life worthwhile (Loewenstein, 2009).

Although there is philosophical work done on the topic, there is a need to understand the individual differences and commonalities of what makes a person's life worthwhile and consider how this influences the support that a charity such as SJOG provides.

When people discuss what makes a life worthwhile, the things that are talked about contribute to a happy and healthy life. Health in this context does not relate to solely the physical health of the body but a much broader notion.

Aboriginal Health and Medical Research Council of New South Wales, Australia define health not just the physical wellbeing of the individual but also the social, emotional, and cultural wellbeing of the whole community, in which each individual is able to achieve their full potential as a human being, thereby bringing about the total wellbeing of their community.

1.1 Aim

The aim of this research was to ask the people who access services, staff, and volunteers of SJOG what makes their life worthwhile. Through capturing the answers to this it was possible to evaluate what the charity does and what it could do in the future to support people in the way that is important to them.

2.0 Method

The research was conducted using a semi-structured discussion at 12 services across the UK. This report details the results to a single question “what makes your life worthwhile?”. This question was used as a conversation started to a broader discussion about the organisation. Each service provided a group to take part in the discussion. Group size varied from service to service depending on availability of people to attend and the number of people who use and work in the service.

2.1 Process

Each member of the group was asked to draw a picture of themselves and around the outside six arrows. At the end of each arrow they were asked to write something that made their life worthwhile (see figure 1). An example was given and the group was reminded that there were no right or wrong answers. Where individuals needed support this was given to allow them to complete the task and ensure it was inclusive for all.

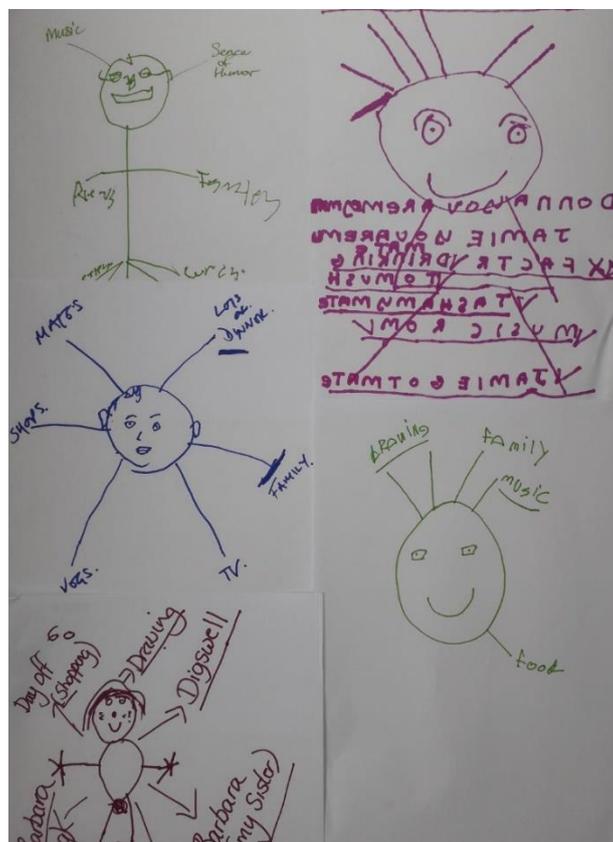


Figure 1 – some examples of the drawings completed during the consultation

Each discussion session lasted 60-90 minutes depending on the group size and the task took around 20-30 minutes at the start of the session.

2.1 Study sample

A total of n= 112 people took part of which n= 60 were people who are supported by SJOG services, n= 37 were staff, and n=15 were volunteers.

The people who are supported by SJOG used services ranging from residential care, supported living, and day services.

The specific needs of each person varied, consisting of those with learning disabilities, enduring mental illness, acquired brain injury, and physical disabilities. The sample demographic was not distilled beyond grouping as the focus was on the results as a whole rather than interrogating within and between group differences.

A total of 107 completed sheets were used for the analysis. Five sheets were not used as participants decided they did not wish to share them following the discussion.

2.2 Data analysis

All drawing transcripts were coded using thematic analysis to extract key themes and categories (Strauss & Corbin, 1998). The coding schedule was developed by methodically analysing each drawing transcript.

Where categories were similar (e.g. interests such as crafting or drawing) these were grouped under a single category. Only categories that recorded a frequency count >n=5 were used a grouping under a high level theme

Axial coding concluded the analysis whereby related themes and categories were explored (Gibbs, 2007) and constructed forming a conceptual model, thus allowing greater interpretation of the results (Green & Thorogood, 2009). The flow and links of the model were developed through logical interpretation of the relationship between themes and analysis of the literature supporting each theme. Group comments were noted to ensure the context was correctly interpreted.

3.0 Results and discussion

Table 1 presents the results of the main themes that emerged from the discussions with the categories that created these.

Relationships was the main theme with 91.6% of people having reporting families as making their life worthwhile. Meaningful activities (46.7%) was the second mostly reported theme. Health and wellbeing included enjoying food and being able to engage in sport or some sort of exercise. These represented 23.4% of responses. Leisure was also important (19.6%) along with faith (19.6%) and lastly the environment (9.3%).

Table 1 – results of “what make your life worthwhile?”

Theme	Category	Percentage (%)	Frequency
Relationships	Family	91.6	98
	Friends	67.3	72
	Pets	19.6	21
	Support workers	10.3	11
	Community	11.2	12
Meaningful activities	Work	46.7	50
	Education/learning	9.3	10
	Special interests	6.5	7
	Gardening	5.6	6
	Activities (general)	10.3	11
Health and wellbeing	Food	23.4	25
	Sport (exercise)	12.1	13
	Health (personal health)	13.1	14
Leisure	Music	18.7	20
	Going out	19.6	21
	Travelling	10.3	11
	Shopping	11.2	12
	Free time (Inc. Holidays)	19.6	21
	Alcohol	7.5	8
	Laughing / happiness	9.3	10
	TV/radio	7.5	8
Faith	Faith	19.6	21
Environment	Home	9.3	10
	Wildlife	8.4	9

3.1 Framing the insights

A conceptual model was developed that depicts the main themes that contribute to a life worthwhile with smaller themes contributing to categories that have greater individual differences (Figure 2). The model is not linear, as each theme interacts across each to create the different features and activities within a person's life.

It should be noted that the model is created based on frequency of categories and themes rather than individuals providing a rank order based on what is most important to them. This was because the focus is on understanding the broad make-up of categories and themes.

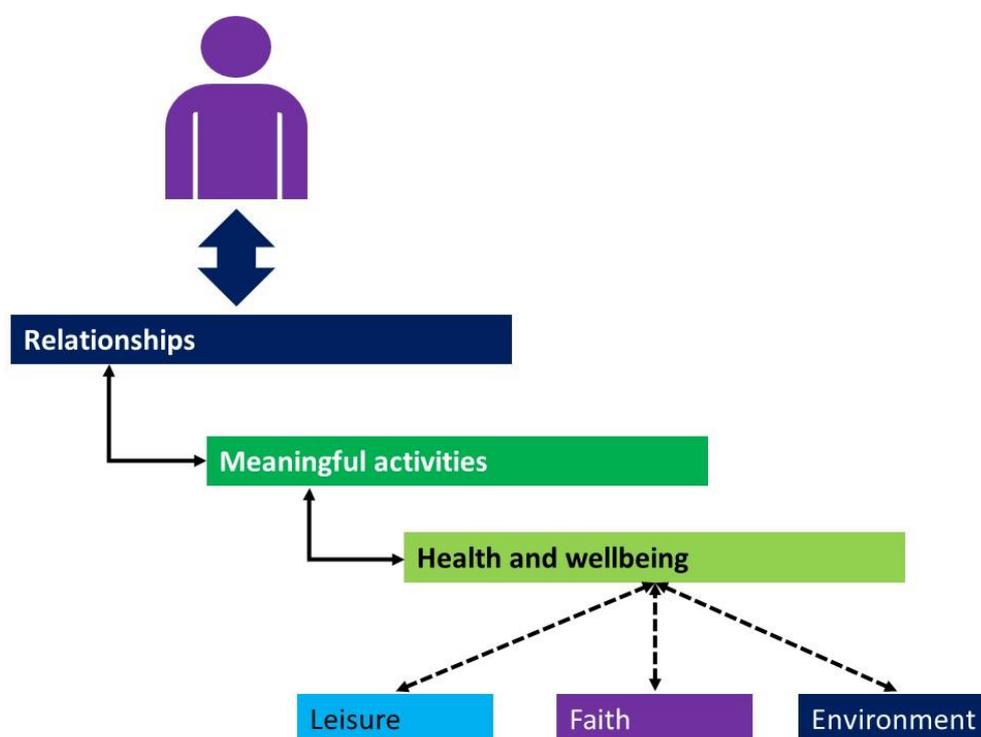


Figure 2 – Conceptual model of a life worthwhile based on the results.

Evidence suggests that poor health, separation, unemployment and lack of social contact are all strongly negatively associated with our subjective wellbeing (or happiness) (Dolan et al, 2008). The results presented here represent similar primary themes of;

- Relationships (social contact)

- Meaningful activities (work or employment)
- Health and wellbeing (health)

These primary themes are more uniform across all the participants of the research (see figure 2). Secondary themes of leisure, faith and environment. We describe each theme of the model and implications below.

3.1 Primary themes

3.1.1 Relationships

Perhaps unsurprisingly family and friends were the most consistent category that made people's lives worthwhile. Relationships in a broader sense were important, those of community and where we might find them, in a church or as several people mentioned, the pub.

People who are more socially connected to family, friends, or their community are happier and live longer, healthier lives with fewer physical and mental health problems than people who are less well connected (Mental Health Foundation, 2016). Happy and positive friendships and feeling part of community life can protect from the damaging health effects of social isolation (Uchino et al., 1996)

For people who we support who might not have broad relationships and communities, there needs for provision that can offer opportunity to build relationships. At Olallo house in London, which supports people who are homeless, it was commented that the people living there help each other, developing a community within the space.

"They [residents] don't have much but I saw one give away a new pair of socks when they don't have much themselves" (volunteer)

Although specific demographics were not collected, the need to have relationships is key throughout age groups.

A positive family life provides a child with opportunities for a healthy life by creating the early life foundations for them to feel loved and valued (Allen and Donkin, 2015). Therefore, it is important that as an organisation SJOG is able to meet the needs of different ages and facilitate positive relationships across communities.

Relationships with staff were also important. The people who are supported and those who provide support both benefit from the reciprocity of the relationships that are made and the care that is provided. One resident commented that the home provided a sense of future even if they are in old age:

"We know that we are old but the staff treat us as if our lives will go on and on. There is a real belief in a great future here." (resident)

Perhaps it is unsurprising that social contact is important for happiness and living a life worthwhile particularly when we live in a society that is plagued with loneliness and isolation.

The importance of pets and particularly cats and dogs was apparent in how people spoke about them. They prevent a sense of isolation and loneliness and also purpose to the day. People do not own pets specifically to enhance their health, rather they value the relationship and the contribution their pet makes to their quality of life (McNicholas et al., 2005). For people using our supported living service one resident said *"I just love my cat"*. The importance and value of these relationships should not be underestimated and can help people live independent lives more happily.

3.1.2 Meaningful activities

Meaningful activities give purpose to a day. People wrote that work was important and for those that are not able to engage in paid work, having meaningful activities are key. For example, carrying out infection prevention duties in one of the care homes made one resident with a learning disability feel worthwhile and gave value to the day.

Engagement in meaningful activities has been significantly correlated with satisfaction with life as a whole and can be positive in reducing depression and mental illness (Goldberg et al., 2002). Meaningful activities are appropriate for a wide range of groups; those with dementia (Vernooij-Dassen, 2007), those living in residential care (Morely, 2014), and those returning from illness (Edwards, 2006). Activities do not need to be paid and should offer variety of experience to suit everyone's tastes and needs.

Csikszentmihalyi (1999) wrote about the flow experience, or the state of total involvement in an activity that requires complete concentration that contributed

to a sense of happiness. Digswell Community and Gardening Project offers a range of meaningful day activities predominately for people with learning disabilities. The people involved in the discussions spoke to said that gardening and the activities they take part in contribute to making their life worthwhile (see figure 1).

Good education and skills can help build strong foundations for supportive social connections, accessing good work, lifelong learning and problem solving, and feeling empowered and valued (Health Foundation, 2018). Therefore, meaningful activities provide value to people that are supported through services and the staff that work with them.

People with the lowest healthy life expectancy are three times more likely to have no qualifications compared with those with the highest life expectancy (ONS, 2017).

Through providing opportunities for meaningful activities we are able to support those who are most vulnerable but these also benefit the staff who deliver the projects through the meaningful work that they do. Nicholas Pearce reports that purpose is a driver of profit. Whether we are thinking about profit from an economic perspective, from a human perspective, or from a social perspective, profit is enhanced by purpose (Harvard Business Review, 2019). Helping people have worth through meaningful activities is part of this. A single approach to providing these is not possible. Instead, offering mechanisms for people to choose is key.

Employment is of course part of meaningful activities and should be presented as an opportunity for anyone who has the ability to undertake employment. Good work provides opportunities to afford basic living standards; participate in community and social life; support lifelong healthy habits; and feel a sense of identity, self-esteem, purpose, and reward (Stansfeld and Candy, 2006).

3.1.3 Health and wellbeing

The theme of health and wellbeing included categories of food (23.4% responses), health (13.1%) and exercise (12.1%). Food is a social activity in many cases. Research has shown that food-related wellbeing is strongly associated with physical health but that it also contributes to hedonic and emotional uplift (Area et al., 2014). Poor diet is the one of the biggest risk factors for preventable

ill health in England (Health Foundation, 2018) and so food is an important aspect of individual's health and wellbeing.

The value of individuals own health and wellbeing was mentioned as contributing to a life worthwhile. This was not reported as highly as expected and this may be down to people viewing this as a by-product of the other factors that create value for them.

Exercise (12.1% of responses) was reported. This was not necessarily a specific sport, but taking part in some sort of physical activity with the purpose of exercise e.g. walking. It has been shown that a physical activity can enhance wellbeing along with physical health of individuals especially when pairing with a training plan (Carmel, 2005). It is unsurprising that for those who take part in forms of exercise, it is an important part of their lives.

3.2 Secondary themes

3.2.1 Leisure

Down time is important for everyone. Research has shown that leisure time physical activity involvement is significant predictor of optimism, life satisfaction, positive affect, and psychological well-being for older adults with a high level of loneliness. It enhanced positive emotions for older adults with loneliness and positive emotion is an important factor in protecting individuals from illnesses (Kim et al., 2017).

Music was the most common leisure activity and provides an accessible, interactive, sensory experience for people with learning disabilities, physical disabilities and enduring mental illness. Technology development in the area is considering how devices can be made more accessible to enhance independence for people with disabilities. Lancioni et al., (2018) assessed an upgraded smartphone-based program to foster independent leisure and communication activity of eight participants with mild to moderate learning disabilities, sensory or sensory-motor impairments, and limited speech skills. They found that through the more accessible technology participants were able to undertake longer periods of activity independently. Ensuring individuals can access everyday technology may improve their access to leisure experiences particularly those of music.

Travelling was important and, although holidays were mentioned, travelling within the locality where they live was important in making their life worthwhile – perhaps contributing to a sense of community. Travelling has the function of being enjoyable but also as a means to experience new places and spaces which people enjoy. A key challenge to overcome is ensuring there is accessible transport available.

The United Nations, reported that transport is not an end in itself, but rather a means to access what people need: jobs, markets and goods, social interaction, education, and a full range of other services contributing to healthy and fulfilled lives (United Nation, 2016). Championing and giving access to accessible transport systems is key to ensuring that people can live meaningful and independent lives, where they have choice and control. This is an important role for charities such as SJOG.

3.2.2 Faith

Currently SJOG provide support eight religious services. Those who have lived a life in religious orders have given a life in service and the continuity of the themes of their lives are important when they are supported in older age. Meila (1999) found that the main themes of life important to aging religious communities were: faith, family, education, friends, community, caring for others, and prayer. In the research presented here n=21 people said faith was important to them.

Looking at the results from table 1 we can see the themes highlighted by Meila (1999) are present around relationships, meaningful activities and faith. Therefore, there needs to be support of the individual to express their faith in the support provided. This is particularly important in our religious services. Merrier (1992) showed that retirement is viewed as a developmental process as ageing orders move through a phase of continued productivity into a phase where personal rewards of aging are valued.

3.2.3 Environment

Health is influenced by how surroundings make people feel and the opportunities they provide. Good places, spaces and buildings enable people to be more physically active, feel safe and secure, use facilities and services, and

socialise and play (Health Foundation, 2018). Providing a sense of home is key to creating a healthy environment. For some residents of residential homes these are a place for life and so a sense of home is key in providing a sense of wellbeing and reducing chances of depressive symptoms (Potter et al., 2017). This links to having choice and control over the environment and enabling them to take ownership of decisions about their place and space.

In the community, a healthy home is affordable, warm and stable. It has been shown that housing support for vulnerable people helps keep them healthy and that every £1 invested delivers nearly £2 of benefit through costs avoided to public services including care, health and crime costs (Audit Commission, 2009). Therefore, appropriate housing support and the development of supported living initiatives is of benefit to the socio-economic environment in which they are located.

Green space is part of this. There is growing evidence of the benefit to wellbeing of experiencing encounters with wildlife (Bell et al., 2018) and that green spaces can be a 'product' delivered to the community directly contributing to improved public mental health (Burls, 2007).

3.3 Where does SJOG contribute?

The people who took part in the research asked to mark where they thought SJOG contributed to the categories that make their life worthwhile. Some of the people who are supported through services said that the support enables them to do all the things that make their life worthwhile (marking all categories). Others were more specific. The areas indicated were;

- Friends (relationships)
- Support workers (relationships)
- Community (relationships)
- Going out (leisure)
- Work (meaningful activities)
- Activities (meaningful activities)
- Home (environment)

Although the research did not look in detail into how the services and organisation contribute at an individual level, it is notable that themes of health and wellbeing and faith were not consistently mentioned. This might be because

there are interactions beyond the organisation (e.g. with health professionals and other services) that facilitate these activities. Further work can look specifically at how service elements contribute to the categories that make a person's life worthwhile in a more robust way.

4.0 Limitations

There are limitations with this work. Firstly, the demographics of each person who took part was not captured. This limits the analysis to focus on the entire cohort rather than looking at the individual differences based on age, sex and disability. Nevertheless, it has provided a means to consider the categories that are important to the stakeholders of SJOG as a collective. Future work can address this and also looks to rank the order of importance to inform where SJOG can deliver services that have impact in people's lives.

5.0 Final thoughts

In reflecting on the findings here there are many synergies with categories that are described as the social determinant of health put forward by the Health Foundation in 2018. The results presented here indirectly indicate that people value the components that lead to a healthy life and we might also say, a worthwhile life.

By integrating the social determinants of health with the model developed through this work (see figure 3), it is possible to consider how as an organisation, SJOG can contribute holistically.

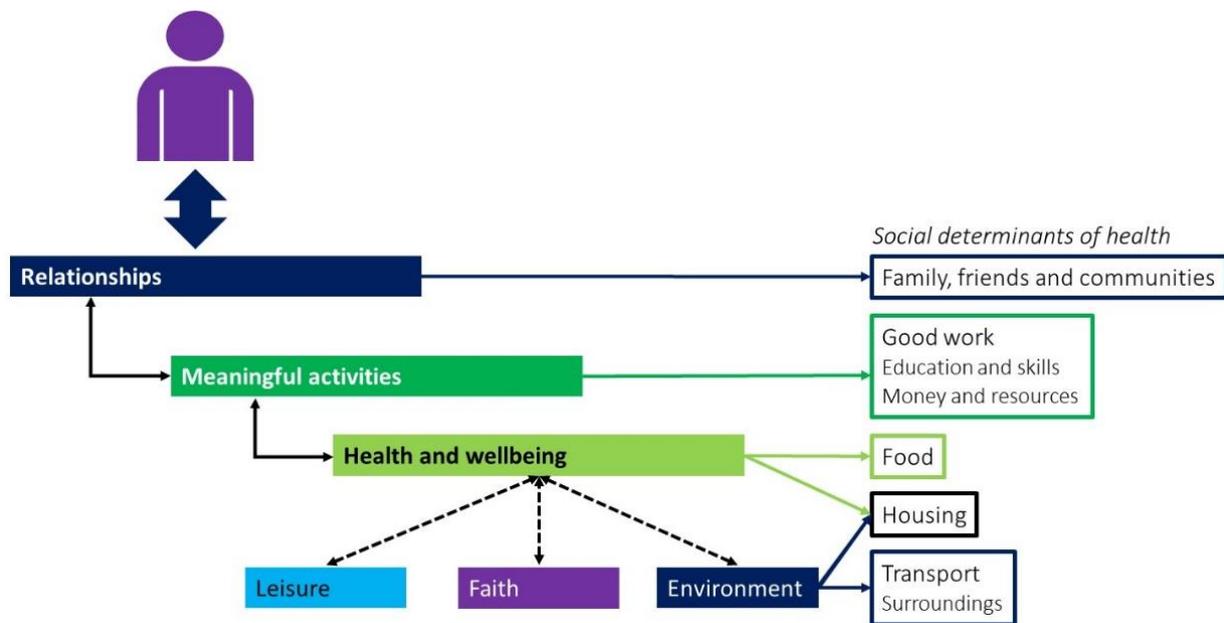


Figure 3. Model of a life worthwhile integrated with the social determinant of health put forward by the Health Foundation, 2018.

The social determinants of health are, and can be, facilitated by services provided by SJOG. As has been described, relationships are created through work between the people we support and the staff.

Meaningful activities and work opportunities that enable the people we support to develop skills, take part in training and education are important to maintain and develop. Social enterprise can be a facilitator of this, assisting in developing sustainable models of service provision. Money and resources flow from this enabling people to purchase goods and take part in leisure activities. Financial literacy is an important life skill and a service has been designed to deliver this to the people we support.

Health and wellbeing can be supported through healthy food and exercise activities. The current provision of residential homes can guarantee that good food is provided in these places. In the community, working in partnership to ensure people access healthy diets is an area to consider. At Olallo house in London, freshly prepared food is provided to the residents and is offered to others who are homeless in the local area. Empowering people to have the skills to cook is a necessity in order to sustain healthy eating behaviours.

Housing support can ensure that the environments are homely with individuals having choice and control over them, both in their décor and in facilitating them to take ownership and responsibility. Although transport can be provided

through adapted minibuses, it is important to be a voice that champions accessibility to make sure that transport and the built environment is fully inclusive and available for people with a range of disabilities.

Through considering the social determinants of health in this way it is useful in identifying opportunities for innovation. The insights captured through this work mean that the new initiatives and development can be mapped on to what is important for people, ensuring that we meet the needs of the people we support in the fullest sense.

References

- Aboriginal Health and Medical Research Council of New South Wales. *Definition of Aboriginal Health*.
- Allen, M., and Donkin A. (2015). *The impact of adverse experiences in the home on the health of children and young people, and inequalities in prevalence and effects*. UCL Institute of Health Equity.
- Ares, G., De Saldamando, L., Giménez, A., & Deliza, R. (2014). Food and wellbeing. Towards a consumer-based approach. *Appetite*, 74, 61-69.
- Audit Commission. (2009). *Building better lives: getting the best from strategic housing* (local government). Available from: www.bl.uk/collection-items/building-better-lives-getting-the-best-from-strategichousing-local-government
- Bell, S. L., Westley, M., Lovell, R., & Wheeler, B. W. (2018). Everyday green space and experienced well-being: the significance of wildlife encounters. *Landscape Research*, 43(1), 8-19.
- Burls, A. (2007). People and green spaces: promoting public health and mental well-being through ecotherapy. *Journal of public mental health*, 6(3), 24-39.
- Carmeli, E., Zinger-Vaknin, T., Morad, M., & Merrick, J. (2005). Can physical training have an effect on well-being in adults with mild intellectual disability?. *Mechanisms of ageing and development*, 126(2), 299-304.
- Csikszentmihalyi, M. (1999). If we are so rich, why aren't we happy?. *American psychologist*, 54(10), 821.
- Dolan, P., Peasgood, T., & White, M. (2008). Do we really know what makes us happy? A review of the economic literature on the factors associated with subjective well-being. *Journal of economic psychology*, 29(1), 94-122.
- Edwards, D. F., Hahn, M., Baum, C., & Dromerick, A. W. (2006). The impact of mild stroke on meaningful activity and life satisfaction. *Journal of stroke and cerebrovascular diseases*, 15(4), 151-157.
- Gibbs, G. R. (2007). *Analyzing qualitative data*. Sage.
- Goldberg, B., Brintnell, E. S., & Goldberg, J. (2002). The relationship between engagement in meaningful activities and quality of life in persons disabled by mental illness. *Occupational Therapy in Mental Health*, 18(2), 17-44.
- Green, J., & Thorogood, N. (2009). In-depth interviews. *Qualitative methods for health research*, 2, 93-122.

Harvard Business Review. (2019). Idea Cast URL:<https://hbr.org/ideacast/2019/04/why-people-and-companies-need-purpose>

Kim, J., Lee, S., Chun, S., Han, A., & Heo, J. (2017). The effects of leisure-time physical activity for optimism, life satisfaction, psychological well-being, and positive affect among older adults with loneliness. *Annals of leisure research, 20*(4), 406-415.

Lancioni, G. E., Singh, N. N., O'Reilly, M., Sigafoos, J., Alberti, G., Perilli, V., & Buono, S. (2018). An upgraded smartphone-based program for leisure and communication of people with intellectual and other disabilities. *Frontiers in public health, 6*, 234.

Loewenstein, G. (2009). That which makes life worthwhile. In *Measuring the subjective well-being of nations: National accounts of time use and well-being* (pp. 87-106). University of Chicago Press.

McNicholas, J., Gilbey, A., Rennie, A., Ahmedzai, S., Dono, J. A., & Ormerod, E. (2005). Pet ownership and human health: a brief review of evidence and issues. *Bmj, 331*(7527), 1252-1254.

Mental Health Foundation. (2016). *Relationships in the 21st century: the forgotten foundation of mental health and wellbeing*.

Morley, J. E., Philpot, C. D., Gill, D., & Berg-Weger, M. (2014). Meaningful activities in the nursing home. *Journal of the American Medical Directors Association, 15*(2), 79-81.

Office for National Statistics. (2017). *An overview of lifestyles and wider characteristics linked to Healthy Life Expectancy in England*:

Potter, R., Sheehan, B., Cain, R., Griffin, J., & Jennings, P. A. (2017). The impact of the physical environment on depressive symptoms of older residents living in care homes: A mixed methods study. *The Gerontologist, 58*(3), 438-447.

Stansfeld S., and Candy B. (2006). Psychosocial work environment and mental health – a meta-analytic review. *Scand J Work Environ Health. 32* (6) :443–62.

Strauss, A., & Corbin, J. (1998). *Basics of qualitative research techniques*. Thousand Oaks, CA: Sage publications.

Uchino BN, Cacioppo JT, Kiecolt-Glaser JK. (1996). The relationship between social support and physiological processes: a review with emphasis on underlying mechanisms and implications for health. *Psychological Bulletin. 119* (3): 488

United Nations Secretary-General's High-Level Advisory Group on Sustainable Transport. (2016). *Mobilizing sustainable transport for development*.

Vernooij-Dassen, M. J. F. J. (2007). Meaningful activities for people with dementia. *Ageing and Mental Health. 11* (4). 359-360