Publication review: Foresight Mental Capital and Wellbeing reports
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CITATION
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Abstract
This paper reviews the Foresight report on Mental Capital and Wellbeing. The report describes how biological, psychological and social factors affect us across our lifespan and help us develop resilience.

Keywords
wellbeing; mental capital

Foresight project: Mental Capital and Wellbeing
‘Foresight’ (http://www.foresight.gov.uk/index.asp) is a project group within the Department for Science. It has the task of reviewing key areas of science that will have a significant impact upon the UK and the rest of the world in the next 10 to 80 years. This makes the reviews produced unique in that they are trying to identify the future development of research and policy for the lifetime of a person born when the review is being carried out. Foresight has reviewed a number of areas of importance to the UK such as such as “The Detection and Identification of Infectious Diseases” and “Flood and Coastal Defences”. In 2008 they published a series of documents under the broad heading of “Mental Capital and Wellbeing” (see overview by Beddington et al., 2008). The content of this review shapes the way in which we will understand mental wellbeing and mental ill-health in future years.

The project was developed through inviting groups of senior academic and practical experts to review the current literature and consider its importance for mental capital and wellbeing across the lifespan. The work has been carried out in a number of key areas including children, adolescents, learning, work life, mental ill-health and older adults. The work produces a number of visual ‘maps’ which show how
the factors reviewed in each area fit together in a dynamic structure, including multiple and complex biological, psychological and societal issues. The reviews take a life-long developmental approach, looking at how positive and negative influences (including biological, environmental and wider social determinants) from birth to old age affect the development and utilisation of mental capital and wellbeing.

What is wellbeing?
Wellbeing is an important concept. The coalition government is proposing that it should be measured as an outcome or indicator of the health of the UK. The Foresight project defines wellbeing as “…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.”

What is mental capital?
The Foresight reviews see mental capital as the resource we use to maintain wellbeing throughout our lives, and in particular as the resource that makes us resilient in the face of the difficulties in life that we all face. They say that mental capital “…encompasses a person’s cognitive and emotional resources. It includes their cognitive ability, how flexible and efficient they are at learning, and their “emotional intelligence”, such as their social skills and resilience in the face of stress. It therefore conditions how well an individual is able to contribute effectively to society, and also to experience a high personal quality of life. …the idea of “capital” naturally sparks association with ideas of financial capital and it is both challenging and natural to think of the mind in this way”.

Why are these important?
A person’s mental capital and mental wellbeing crucially affect their path through life and support the healthy functioning of families, communities and society. Beddington et al. (2008) summarise the key challenges and findings of the project as:

- **Boosting brain power in young and old.** There is huge scope for improving mental capital through different types of intervention. The genetic contribution to mental capital is well below 50% in childhood, rising to more than 60% in adulthood and old age.
- **What science could do in the early years.** Cognitive neuroscience is already uncovering neural markers, or biomarkers, that can reveal learning difficulties as early as in infancy.

- **Early detection of mental disorders.** The challenge of tackling mental ill-health is considerable. There is great potential in improving diagnosis and treatment, and in addressing social risk factors such as debt.
- **Learning must continue throughout life.** This can have a direct effect on mental health and wellbeing across all age groups, and has particular promise in older people.
- **Changing needs for a changing workplace.** The workforce is changing both in demographics and in the demands placed on it. Workers’ mental wellbeing is an important factor when attempting to improve the mental capital of economies and societies.

The five-a-day program for wellbeing
In translating the significant research on wellbeing reported in the review the project has come up with a core set of behaviours that they recommend will develop mental capital and maintain wellbeing.

Their ‘five-a-day’ programme for mental wellbeing suggests that we should:

- **Connect:** Developing relationships that are mutually supportive with family, friends, colleagues and neighbours will enrich our lives.
- **Be active:** Sports and hobbies such as gardening or dancing, or just a daily stroll, will make you feel good and maintain mobility, fitness and wellbeing.
- **Be curious:** Noting and reflecting on the beauty of both everyday and uncommon moments helps you to appreciate what matters to you.
- **Learn:** The challenge and satisfaction of learning a new skill such as playing a musical instrument, learning to cook or fix a bike brings sense of fun and confidence to our lives.
- **Give:** The reward of helping friends and strangers and supporting local activities develops your individual happiness and that of the wider community.

Conclusions
The content of the Foresight review is of utmost importance to the Cumbria Partnership NHS Foundation Trust and its partners. It will be valuable and challenging for us to explore how these activities can form the basis of a healthy lifestyle for Cumbria Partnership NHS Foundation Trust employees, employees of partner organisations, service users and carers. We will further consider the areas identified in the review in future issues of the journal.
Introduction

Measuring outcome of clinical interventions is essential from a number of perspectives:

1. Current government policy puts outcome as one of the three core areas of quality (the other two being patient safety and patient experience; Darzi, 2008);
2. Within a service line management approach, outcome is part of the quality profile that is balanced with activity and cost in the delivery of a pathway (http://www.monitor-nhsft.gov.uk/sites/default/files/Monitor_Conf_briefing_sheets_FINAL.pdf); and
3. Regardless of government or organisational focus it is professionally and ethically essential that clinicians ensure that the services that they provide meet users needs in the most effective and appropriate manner.

However, despite a number of ‘drivers’ to utilise routine outcome measures, clinicians routinely report their infrequent use (e.g., Hatfield & Ogles, 2004). There are models that might be useful in understanding why outcome measures are not more frequently used. For example, Moulding, Silagy and Weller (1998) suggest a model of practice change, which draws upon “diffusion of innovation theory, the trans-theoretical model of behaviour change, health education theory, social influence theory and social ecology”. Their proposed framework emphasises the importance of a multi-faceted pre-implementation assessment of:

(a) readiness of clinicians to adopt the guidelines into practice, (b) barriers to change as experienced by clinicians and (c) the level at which interventions should be targeted (Moulding, Silagy & Weller, 1999, p.177).

One method for assessing the barriers to change is force-field analysis. This method is based upon Lewin’s (1951) model of change, which states that any situation can be understood as a ‘frozen’ equilibrium maintained by a balance of driving and restraining forces (see Figure 1).

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References
For all reports associated with the project go to http://www.bis.gov.uk/foresight/our-work/projects/current-projects/mental-capital-and-wellbeing/reports-and-publications

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