

Do Something Different in West Norfolk

“Insanity: doing the same thing over and over again and expecting different results”

Albert Einstein

Authors:

Mr Martin Slater, *Partnership Delivery Manager, Borough Council of King's Lynn & West Norfolk.*
Mr Ian Burbidge, *Policy & Partnerships Manager, Borough Council of King's Lynn & West Norfolk.*
Professor Ben (C) Fletcher, *Professor of Psychology, University of Hertfordshire & Director, Do Something Different.*
Professor Karen J. Pine, *Professor of Psychology, University of Hertfordshire & Director, Do Something Different*
Mr Ray Richards, *Director, Do Something Different*

Introduction

We are all habit machines. We spend much of our time on autopilot, doing things because we've done them before. We're in a routine, in flow of habits initiated by any number of environmental triggers including people, places, times and feelings. We are oblivious to quite how habitual we are.

Many of these habits are good for us, some are not.

In Fairstead and West Walton, two deprived communities in West Norfolk, the 'Do Something Different' methodology has been tackling these 'not so good habits' head on.

The Do Something Different Methodology

Do Something Different takes a different approach to other behaviour change methodologies. It focuses on the need to change what people **do** if real behaviour change is to be achieved. Thinking something different on its own is rarely enough to change a person's behaviour.

Most methodologies work on the basis of:



The assumption being that if people think something different, this will automatically lead to them doing something different as a result. Unfortunately, for many people, knowing that they should get up in the morning and get the kids ready for school, knowing that they should look for work, knowing that they shouldn't buy a new TV because they're already in huge debt is rarely a guarantee they will do it.

The reason for this is 'autopilot'. Our brains are habit machines, always looking for ways to save energy by automating processes. They have to be, we wouldn't be able to cope if our brains didn't create automatic habits. **But**, not all these habits are positive and thinking something different isn't enough to override autopilot.

So, the Do Something Different methodology starts by helping people to Do Something Different. The secret is to provide programme participants with regular but small tasks (called Do's) e.g.

- Take a different route to the shops today
- Say hello to someone you normally ignore today
- Sit in a different place to watch TV today
- Contact an old friend today

Do's are not demanding, or punitive, yet they break down habit chains and increase behavioural flexibility. They result in different experiences and then a change in thinking follows, meaning people become more able to embrace change.

The methodology can be used by all, irrespective of educational level. Other approaches that address negative thought patterns or require introspection are beyond the capability of many people.

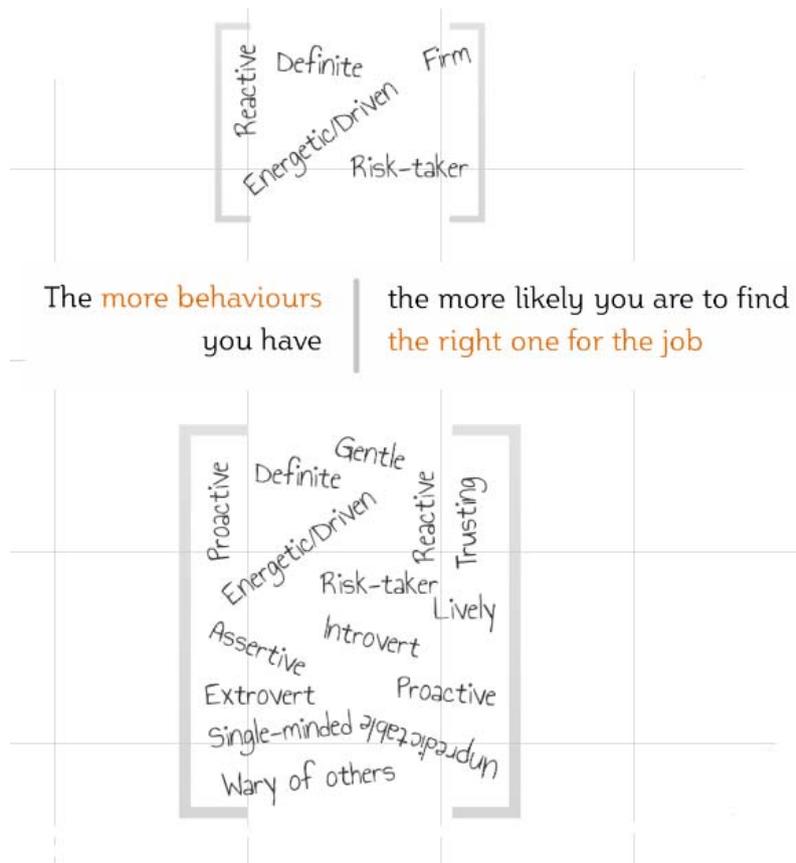
Education and other behaviour change methodologies often fail to bring about lifestyle changes because they rely on willpower, which is an extremely limited resource.

The benefits of changing the way you are and the way you behave is that others around you then react differently as your changed behaviour provokes a new response from the world and others around you.



When people do something different they invariably find the experience is a positive one. They remember how much fun it can be to Do Something Different. Gradually, with the help of the programme they start to experiment with behaving slightly differently. Maybe being a bit more or less assertive than they'd normally be, maybe being a bit more or less of a risk-taker or more or less spontaneous.

This process expands their behavioural flexibility or put another way it expands their behavioural toolkit because, for example, the more someone walks away from a situation that could get them into trouble the more able they are to walk away from a situation that could get them into trouble.



This process leads to people becoming more resilient, more able to cope with situations, with what life throws at them. Ultimately they become less anxious, less stressed, their mental and physical wellbeing improves and they very often report feeling happier. Their comfort zone has expanded.

The Do Something Different methodology has the advantage that:

- The intervention can be delivered by existing non-specialist staff.
- Community-based workers can be trained over a period of two days to deliver the intervention
- It is well-received by clients who perceive benefits quickly.
- It can be used with individuals and groups, and also with families including children.
- It is a generic behaviour change programme and so can be applied to a range of problems (e.g. smoking, alcohol misuse, family dysfunction, poor diet, unemployment, debt, anti-social behaviour) without the need for specialists in each domain.
- It is backed up by the academic research in psychology and neuroscience (particularly research on brain plasticity)

If the wellbeing of society is to improve we have to find new ways of transforming the behaviour of the most troubled individuals and families. Interventions that provide information, education or incentives assume that people will willingly take the messages on board and then act in ways that reflect their best interests. Most don't.

Our research is clear that current methods fail because inertia and ingrained habits stop people adopting new lifestyles. It's not that people don't want to change, they simply default to doing what they have always done because the human brain is designed to automatise as many behaviours and processes as possible.

Do Something Different in West Norfolk: A Success Story

In 2008, a new project was started as a partnership between the University of Hertfordshire and the Borough Council of King's Lynn and West Norfolk, local NHS trusts, and other local partners.

The aim was to provide community organisations, local agencies and residents a simple but effective behaviour change tool to improve the health and wellbeing of people living in the most disadvantaged areas.

Over 150 staff from Mind, SureStart, Home Start, local school Parent Support Advisors, Learning Catalysts and NHS health staff and many other organisations have been trained to become Do Something Different Coaches. Since being trained they have used the methodology with chronic service users, targeting issues such as smoking, obesity, alcohol abuse, anxiety, depression, parenting and family functioning.

Diagnostic information on a range of measures has been collected both pre and post intervention. After a Do Something Different programme of six weekly sessions the West Norfolk data shows a marked or significant improvement on the following measures of physical and mental health:

- Increase in frequency of exercise (rose from 1.82 to 4.18 days per week)
- Increase in fruit/vegetables consumed per day (from 2.31 to 3.31 portions per day)
- Improved physical health ratings (from 2.88 to 3.23 self-rated physical health)
- Improved life satisfaction ratings (from 2.46 to 3.12 on a 5 point satisfaction scale)
- Smoking reduction or cessation (100% quit rate at 4 weeks)
- Weight loss (1lb lost for every Do Something Different session attended)
- Fewer cases of clinical depression (47% moved from clinical to normal range)
- Reduction in levels of anxiety (35% moved from clinical to normal range)
- Greater coping skills (15% improvement in coping)

The project in West Norfolk is already demonstrating the efficacy of Do Something Different on a wide range of health and social behaviours. By quickly re-skilling existing NHS and other agencies' staff to use the tool, Do Something Different is not only more effective it is also less expensive than the alternative specialist services.

The Science Behind Do Something Different

Do Something Different is derived from a branch of psychology called FIT Science. FIT stands for *Framework for Internal Transformation*, founded by Professor Ben (C) Fletcher and developed over more than thirty years. FIT people have more satisfying jobs and relationships. They have greater physical and mental wellbeing, and are able to behave with high levels of self-responsibility.

At the core of the FIT person, Professor Fletcher discovered, is behavioural flexibility, or the ability not to be driven by one's habits and natural tendencies. Professor Fletcher was the first to uncover a link between behavioural flexibility and a person's Body Mass Index.

In 2004 he presented a paper showing that individuals with a high BMI had low behavioural flexibility. He went on to publish trials showing that increasing a person's behavioural flexibility, by Do Something Different, lowered their BMI.

The Do Something Different tool has been further proven in PhD studies of health, personal projects, parental stress and a number of academic journal articles. It is also the subject of three books applying the methodology to various wellbeing related issues.

How is Do Something Different being used?

Do Something Different is currently being used and/or developed to tackle a broad range of issues for a broad range of people including:

- Stress
- Depression
- Anxiety
- Weight
- Smoking
- Family Cohesion
- Unemployment
- Alzheimer's
- Health & Wellbeing
- Diversity & Inclusiveness
- Debt Management
- Crime
- Business Start-ups
- Innovation
- Leadership
- Truancy

Contact:

Ray Richards
Do Something Different
T: 01273 781140
E: ray@dSD.me

Martin Slater
Borough Council of King's Lynn and West Norfolk
T: 01553 616279
E: martin.slater@west-norfolk.gov.uk

West Norfolk: Results So Far



Do Something Different

We measured people on a range of dimensions before and after a Do Something Different course (typically a six week programme). The results show:

1. People are less depressed and less anxious after Do Something Different

- **Depression:** Of people that showed a 'clinical' level of depression prior to the Do Something Different programme, 59% moved into the 'normal' range at the end. There was a significant reduction in the mean depression scores after completion of a Do Something Different programme.
- **General Anxiety:** Of people showing a 'clinical' level of anxiety prior to the Do Something Different programme, 72% moved into the 'normal' range at the end. There was a significant reduction in the mean anxiety scores after completion of a Do Something Different programme.

2. People adopt a healthier lifestyle after DSD

They exercise more

- Regularity of **exercise** increased by 85% from a mean of 2 to 3.7 days per week.

They have a healthier diet

- Consumption of **fruit and vegetables** increased by 18% from a mean of 3.2 to 3.8 portions per day.

They feel healthier and happier

- People's mean self-reported **physical health rating** went up by 18% after a Do Something Different programme.
- Their mean self-reported **life satisfaction rating** went up by 27% after Do Something Different programme.
- They increased their **range of behaviours** by 7% and their **flexibility** by 20% after a Do Something Different

programme, which are key elements for sustainable change.

The effects of specific Do Something Different program



Do Something Different

Healthy Weight Happy Life

- **Weight** decreased by an average of 4.7 pounds.
- **Exercise** improved by 130% from 1.7 to 3.9 times per week.
- The programme showed measurable **change** in the following areas; physical health (69% change), marriage (94% change), talking to others (174% change), dealing with people (94% change) and enjoying things outside the home (87% change).

Quit Smoking

- 88% **quit rate** at six weeks.
- **Weight** also went down by an average of 2.3 pounds.

Parenting and Family Programmes

- **Depression** decreased by 44%.
- **Anxiety** decreased by 41%.
- The programme showed measurable **change** in the following areas; marriage (49% change), children (43% change), making decisions (40% change) and enjoying things outside the home (41% change).
- **Coping skills** also improved in the same areas; marriage (12%), children (38%), making decisions (23%) and enjoying things outside the home (8%).

Teenage Programme

- **Range of behaviours** increased by 53% and **flexibility** improved substantially by 182% after Doing Something Different.
- **Physical health rating** and **life satisfaction rating** went up by 18% and 27% respectively after a Do Something Different programme.
- The programme showed measurable **life improvements** in the following areas; problems (22%), feeling valued (45%), feeling life has meaning (36%) and relationships with family (20%).

Get Unstuck from Your Rut

- **Depression** decreased by 36%.
- **Anxiety** decreased by 30%.
- People rated their **life satisfaction** to have increased 120% from low (2) to above average (3.2).



**Do
Something
Different**

Sustainable Changes

Six months after clients have finished a programme we send out a further diagnostic so we can measure the sustainability of the health improvements.

- Average **weight** decreased by 2.5 pounds after the programme, but after six months has further decreased by 8 pounds, which represents an average total loss of 10.5 pounds or 5.7% of total body weight.
- Frequency of **exercise** rose from 2 to 4.1 times per week during the programme, and after six months has decreased marginally to 3.8 times per week, representing an 80% increase from the beginning of the programme.
- Portions of **fruit and vegetable** consumption per day remained stable during the programme (3.2), and after six months have increased a further 12%.
- **Physical Health** rating increased 13% from average to above average during the programme, and increased another 2% six months after the programme.
- **Range of behaviours** increased by 2% during the programme, and after six months had increased by a further 5%.
- **Flexibility** increased by 25% during the programme, and after six months had increased by a further 2%.
- **Depression** decreased from 11.12 to 9.5 during the programme but has shown a marginal increase in the last six months to 9.9, which still represents an 18% reduction from the beginning of the programme.
- **Anxiety** decreased from 12.2 to 10 during the programme but has shown a marginal increase in the last six months to 10.6, which still represents a 20% reduction from the beginning of the programme.

