

Interim Evaluation of an Integrated Approach to Improving Health and Wellbeing in County Durham, UK

Background: The County Durham Wellbeing for Life (WFL) service was developed in recognition that the previous 'silo' approach to provision of single-issue lifestyle services had made little impact on inequalities. It involves targeting the most disadvantaged communities locally, as well as specialist populations at increased risk of poor health. The model draws on evidence relating to the clustering of unhealthy behaviours, coupled with calls for behaviour change to be addressed in a more integrated and holistic manner. The service launched on 1st April 2015 and this paper reports interim findings from the academic evaluation.

Methods: The impact of the WFL service is being evaluated via secondary analysis of routinely collected monitoring data, which includes EQ-5D™ and the short Warwick Edinburgh Mental Wellbeing Scale (SWEMWBS). Data have been analysed descriptively to examine key characteristics of the WFL user population (n=1345). Appropriate statistical analyses have been performed to assess changes amongst those with data available at pre- and post-intervention periods (n=224).

Results: WFL users are predominantly female (73.4%), white British (97.6%) and living in the least affluent areas (80.4%). Mean BMI at baseline was 32.9kg/m² (s.d. 7.7). Pre/post analysis of the intervention data revealed significant improvements across all outcome measures. These were: BMI, physical activity, alcohol intake, self-efficacy, self-rated health, quality of life and mental wellbeing. Furthermore, the largest changes were observed in those with the least positive results at baseline.

Conclusions: The interim evaluation findings are being used to inform commissioning decisions and future WFL service delivery in County Durham. They also add to the evidence base around complex, community-based interventions that aim to tackle multiple health-related behaviours using an integrated wellbeing approach.

Main messages

1. An integrated wellbeing approach can be used to reach those living in disadvantaged areas
2. Improvements in health, quality of life and wellbeing were observed amongst service users