Keynote Speech professor Jennifer Cumming, University of Birmingham
Opening Academisch Jaar, 6 september 2021

Good afternoon and many thanks for the opportunity to speak to you about this year’s theme of wellbeing. It is an honour to virtually participate in your opening ceremonies and I look forward to one day visiting you in person.

My name is Professor Jennifer Cumming and I am the co-Director of the University of Birmingham’s new transdisciplinary research centre for Urban Wellbeing.

The Centre has a focus of tackling wellbeing challenges from local to global levels. As an EUniwell partner like yourselves, the University has a strong focus on wellbeing research and impact.

I am also the Primary Investigator of the SPRINT project and will use this as an example of the type of wellbeing research we are conducting at the University.

As a Chartered Psychologist and Applied Researcher in Sport and Exercise Psychology, I have spent the last 20 years of my career investigating well-being and performance in a variety of groups including elite athletes, professional dancers, and young people experiencing homelessness.

My take on wellbeing will therefore come from a psychological perspective but wellbeing is a topic that studied in many different disciplines including Arts and Humanities, and the Social, Natural, and Medical Sciences.

Learning that Leiden University has made wellbeing your theme for this year was music to my ears because wellbeing is an important issue.

For example, the United Nation has made good health and wellbeing one of their sustainable development goals. This goal seeks to ensure health and wellbeing for all, at every stage of life.

Another driver is the worldwide public health concern over the high prevalence of mental health problems and how these contribute to disease burden and disability. Before the Covid-19 pandemic, it was estimated that 1 in 6 people would experience common mental health problem in a week.

This figure has changed to 1 in 4 during the pandemic, which has also had a negative impact on other aspects of our health well-being, particularly for those who experience inequalities such as low income, insecure work, and long-term physical and/or mental health conditions.

These as well as other drivers help to reinforce wellbeing as highly relevant and timely to address in this coming academic year and beyond.

But, let me explain what I mean by wellbeing. Although this is a contested term that holds different meaning across cultures, simply put: wellbeing is a combination of feeling good and functioning well.

We can understand wellbeing as the quality of people’s lives. It is a dynamic state that is enhanced when people can fulfil their personal and social goals.

This idea is captured by the World Health Organisation’s definition of positive mental health, a term that is used interchangeably with wellbeing.

The WHO define a state of wellbeing as one in which you realise your own abilities, can cope with the normal stresses of life, can work productively and fruitfully, and are able to make a contribution to your community.

Although this definition focuses on individual experiences of wellbeing, we can also understand how we are doing as communities, a nation, and globally.

For example, community wellbeing might be the “liveability” of a community, such as access to housing, transport, arts and culture, nature, infrastructure and so on.
We can also understand wellbeing in relation to objective measures, which are based on material, tangible, and quantitative indicators.

These could be indicators of material resources, such as household income, food, and housing as well as social attributes, such as education, and health, social networks and connections.

In other words, these capture a societal perspective of what is necessary for a “good life” and tend to be used by government to understand the wellbeing of their citizens to inform policy decisions in areas such as the economy, health, and education.

For example, the Index of Multiple Deprivation is a measure of relative levels of deprivation. Birmingham is the second largest city in England and has high level of deprivation, with 40% of the population living in the 10% most deprived areas of the country.

This is illustrated by this map of Birmingham, with the darkest shading being the most deprived areas.

These inequalities are also apparent by looking at the life expectancy of its citizens. There is a 10-year gap in life expectancy between those living in Birmingham’s richest vs. poorer areas, which is illustrated here using the trainline map with life expectancy indicated for people living near each of its stations.

There is also growing awareness that we need to go beyond health and economics to have a fuller picture of how society is doing. The OECD’s indicator of regional wellbeing enables you to understand the impact of where you live on your quality of life.

On this slide, you see a comparison of the West Midlands (the region where Birmingham is found in the UK) and South Holland on 11 topics. A score is calculated for each topic so you can compare places and topics within and across countries.

Having comparable measures of regional wellbeing makes it easier to understand whether government policies and initiatives are working to achieve higher wellbeing for its citizens.

We can also understand wellbeing in relation to subjective measures. These use people’s judgements and reactions to their life such as by measuring positive emotional experiences of happiness and contentment, as well as negative emotional experiences of anxiety and loneliness.

Subjective wellbeing also refers to cognitive perceptions of how satisfied we are with our lives and our sense that what we do in life is worthwhile.

For example, the Centre for Thriving Places in the UK has developed the Happiness Pulse in partnership with community, academic, government, and private sector experts.

It is a short online survey that takes 5 minutes to complete. This provides a general indicator of wellbeing as well as understanding of three different domains that shows how people think and feel about their lives, what they do that supports better lives, and how they connect with others.

1. **BE**: Captures mental and emotional wellbeing such as satisfaction with your physical health and wellbeing, and feeling what you do is worthwhile and you are useful;
2. **Do**: Measures behavioural wellbeing, includes physical activity, time spent in nature, and cultural activity; AND
3. **CONNECT**: Indicates our social wellbeing such as whether we feel close to at least a few people with whom you can share and sense of belonging to a wider group.

Here is what an individual report of the happiness pulse looks like. It can be used to better understand and act to increase wellbeing. For example, to improve on connecting, a person might:

- Talk to someone instead of sending an email
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- Put 5 minutes aside to find out someone really is
- Taking time to really listen to someone
- Join a group or club with others with a common interest

With this background in mind, I will now change focus to introducing the University of Birmingham’s Centre for Urban Wellbeing.

Why the focus on urban? Well more than half of the world’s population are now living in urban areas and, by 2050, the UN estimates this will grow to two-thirds making urbanisation one of the leading global trends of the 21st century. For the 4.2 billion+ people currently living in cities, urban growth brings opportunities but also many challenges to wellbeing.

At the University of Birmingham, we are addressing this trend through the creation of a new centre that aims to address wellbeing inequalities in urban environments by:

- Developing mutually-beneficial ways of working with policy makers and community partners; AND
- by using Birmingham and the surrounding region as a test bed for trying out local solutions that are informed by the best global evidence

The Centre for Urban Wellbeing was established earlier this year as a virtual network for academics, policy makers, and experts in urban wellbeing. In addition to establishing a policy advisory board, we are pilot testing a policy fellowship scheme to enable non-academics and academics to work closely together in meaningful and effective ways.

The Centre aims to use transdisciplinary research approaches to extend beyond usual disciplinary boundaries under 5 themes:

1. Community health is led by public health expert Prof Afroditi Stathi and focuses on preventing systemic health inequalities through community organization;
2. Imaging wellbeing is led by Prof David James who has expertise in English literature to rethink historical, political, and creative narratives of wellbeing;
3. Recovery and renewal is led by Dr Koen Bartels, an expert in social policy, to explore engaging communities in local government decision making around wellbeing;
4. Sustainable, liveable, and resilient cities is led by engineering expert, Dr Joanne Leach to understand how shaping urban form, infrastructure, and the built environment impacts wellbeing; AND
5. Wellbeing economies Is being led by Dr Laura Kudrna to look at driving alternative measures of social progress.

As part of the formation of the Centre, we have spent time building relationships with national governing organisations, community engagement initiatives, wellbeing think tanks, public health leaders, and local politicians.

Over a series of events, we provided opportunity for these diverse groups to share perspectives on urban wellbeing and consider what might be realised by working together on local and regional priorities. A key step in developing the Centre has been to establish exactly what these priorities are.

Because of the diverse groups involved and to ensure that all of our stakeholders had a voice, we used a delphi like method. This is an expert-based futures method that is widely used to inform planning and research agenda setting. It aims to achieve consensus from a group of experts using a democratic process.

Our process involved initially developing a list of research statements by engaging with the Centre’s policy advisory board, policy fellows, previous University surveys of urban policy futures, and identifying themes of open funding calls.
We then carried out three rounds of consensus building, with each round enabling us to narrow down the research statements to a final set of priorities.

Initially, we identified 79 research statements that were narrowed down to 43 and then 10 using a survey where participants were asked to rate the importance of these statements.

Then in an online workshop held this past July, our stakeholders were able to further discuss and rank these statements to arrive at our top 5.

Taking this group communication approach has proven informative such as by understanding the top 10 priorities of our external non-academic experts compared to those identified by our academics. Although there was considerable overlap, different priorities did emerge.

It was therefore important to work towards a consensus, which was achieved in the summer workshop. The top 5 priorities that were voted on will now inform our research strategy. It is with great pleasure that I reveal these now to you.

The top 5 priorities are:

1. Healthy living environments including mental wellbeing, stimulating, safe environments and social interaction;
2. Income inequalities including access to finance, early years care, education and employment;
3. Evidence to inform incorporating wellbeing into urban planning strategies (eg tackling loneliness, energy use, air pollution);
4. Challenging the underlying economy and its assumptions including growth of consumption and production at all costs; AND
5. Access to and use of nature and green spaces, as well as tackling land ownership inequalities.

I will now illustrate how we are already tackling the priority of income inequalities in a project that I have led for the past 8 years focusing on young people, aged 16 to 24, who are experiencing homelessness or at risk with complex support needs such as mental health problems. As a result of inequalities faced by this group, many are not in education, employment, or training. This is referred to as being NEET.

In the UK, young people aged 16 to 24 years are disproportionately affected by homelessness, making up 21% of the homelessness population. The Covid-19 pandemic had made these figures even worse.

Young people experiencing homelessness tend to have complex and multiple barriers to overcome. For example, many of these young people are not only NEET but lack independent living skills and relationship skills, suffer from physical and mental health problems, as well as alcohol and drug related problems.

We have worked in partnership with St Basils, a large housing service based in the West Midlands and surrounding regions of the UK, to address this issue by co-developing the My Strengths Training for Life programme (or MST4Life). This is a strengths-based program based on approaches that I have previously used in elite sport settings to enhance athletes’ mental skills.

MST4Life has been delivered to over 600 young people and involves two phases:

1. Phase 1 is 10 sessions to help young people to identify and develop their strengths and mental skills.
2. Phase 2 enables them to practice their mental skills in a novel and challenging situation by taking them to the University’s outdoor pursuits centre in the Lake District for a 4 day/3 night residential.

The programme’s logic model illustrates how it works:
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1. By providing young people with challenging and meaningful activities, skill-building opportunities, and positive relationships with caring peers and adults;
2. They are more likely to experience short-time benefits of:
   a. Thriving (indicated in our project by improved resilience, self-worth, and wellbeing);
   AND
   b. Reducing the likelihood of unhealthy and risky behaviours.
3. These short-term outcomes then help to achieve long-term outcomes of:
   a. Engaging in education, employment, and training.
   b. Moving out of homelessness and into sustained independence.

In support of this logic model, evaluation of MST4Life has shown positive changes in young people’s resilience, self-worth, and subjective well-being from pre to post programme.

Moreover, participating in the programme increases the likelihood young people will move from NEET to engaged with education, employment, and training by 30 percentage points.

Over its life span, MST4Life has contributed to the 37% reduction in Birmingham’s statutory youth homelessness over a 5 year period when the national average increased by 34%.

Improving these outcomes has provided public sector savings from forgone tax revenues, unemployment benefits and healthcare costs leading to an estimated lifetime savings of GBP£26,000,000.

But the true impact of MST4Life is best captured by the young people themselves such as with this quote:

One young participant explained that at the end of the programme: “I have literally two jobs now, own flat coming, like literally going to view it on my birthday in a few days. You know, I’ve got a girlfriend, I’ve got my mates, my best friend, people around me, family who I need around me.”

To help achieve impact for the project, in addition to the usual academic publications, we have translated learning and evidence from the programme into knowledge translation tools such as reports, policy briefs, case studies, and toolkits, and we have made them widely available on our project website. To see these examples, you are welcome to visit the website, which is found at www.sprintproject.org.

In close, wellbeing is an important and timely topic for this academic year and beyond, can be studied from many different perspectives and at different levels.

Thank you very much again for the opportunity to speak with you as part of today’s ceremonies. I would like to extend an invitation to you to connect with us at the Centre for Urban Wellbeing as well as to get involved with the upcoming Forum for Global Challenges that University of Birmingham will host in May 2022. Health and wellbeing as well as Future Cities are just two of themes that will be featured in this major event.

Finally, I wish you all the best for a productive and fruitful new academic year that brings wellbeing to the Leiden University community.

Thank you.