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Cathie Hammond^a

^a University of London, UK

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Impacts of lifelong learning upon emotional resilience, psychological and mental health: fieldwork evidence

Cathie Hammond*
University of London, UK

This paper presents findings from a fieldwork study concerning the impacts of learning upon health. In-depth biographical interviews were conducted with 145 adults about the effects of learning throughout their lives. In addition, 12 group interviews were conducted with practitioners about their perceptions of the effects of learning upon their students.

Participation in lifelong learning had effects upon a range of health outcomes; well-being, protection and recovery from mental health difficulties, and the capacity to cope with potentially stress-inducing circumstances including the onset and progression of chronic illness and disability. These effects were mediated by relatively immediate impacts of learning upon psychosocial qualities; self-esteem, self-efficacy, a sense of purpose and hope, competences, and social integration. Learning developed these psychosocial qualities through extending boundaries, a process which is quintessential to learning.

However, not all educational experiences had positive effects upon health outcomes. Provision that generated positive health outcomes matched the interests, strengths and needs of the learner. Provision differed in terms of levels of support and challenge, the type and mix of students, and level and content. The interests, strengths and needs of each learner were unique and determined by their background and current circumstances, which include the stage in their life course when they participate in learning.

Introduction: links between lifelong learning and health outcomes.¹

In relatively wealthy countries, individuals who have stayed in formal education for longer and who have gained higher qualifications tend to enjoy better mental and psychological health than their less well-educated counterparts (e.g. Burnette & Mui, 1994; Montgomery & Schoon, 1997; Vega Deinstmaier *et al.*, 1999). There are three

*DfES Centre for Research on the Wider Benefits of Learning, Bedford Group for Life Course and Statistical Studies, Institute of Education, 20 Bedford Way, London WC1H 0AL UK. Email: ch@cls.ioe.ac.uk

possible explanations for this finding. One is that those with poorer psychological health during the time that they are in education are more prone to dropping out or achieve lower grades. The second is that certain characteristics – for example, positive experiences of parenting and/or cognitive ability – may predispose individuals to better psychological and mental health outcomes and to educational investment and success (Kjelsberg, 1999). The third explanation is that education improves mental and psychological health. See Grossman & Kaestner (1997) and Hammond (2002) for fuller discussions.

Using longitudinal datasets that track the same sample of individuals throughout their lives, it is possible to test whether education affects health. Findings fail to provide evidence that education does not affect health, and most reviews infer that education does indeed have positive effects upon a variety of health outcomes (e.g., Grossman & Kaestner, 1997; Hartog & Oosterbeek, 1998; Ross & Mirowsky, 1999). Recent analyses of national British datasets suggest that levels of qualifications protect individuals from obesity and depression, but that the health effects are not universal and vary depending upon the level of qualification gained, whether it is an academic or vocational qualification, and the gender of the learner (Feinstein, 2002). These findings highlight the importance of understanding more fully the processes through which learning affects health outcomes.

The purpose of this paper is to explore just that issue. Educational research into the immediate ‘soft’ outcomes of learning suggests that learning can develop a number of psychosocial qualities including self-confidence (Dench & Regan, 1999; Carlton & Soulsby, 1999), self-efficacy (Wertheimer, 1997; Kubzansky *et al.*, 1999), self-understanding (Cox & Pascall, 1994), competences, communication skills, civic engagement (Parry *et al.*, 1992; Emler & Fraser, 1999), and a sense of belonging to a social group (Jarvis & Walker, 1997; Emler & Fraser, 1999). These psychosocial outcomes of learning may promote attitudes, practices, and life circumstances that are conducive to positive health outcomes.

The fieldwork research described here provides an opportunity to investigate pathways linking learning with health outcomes. It adds to what is already known because few (if any) qualitative studies have investigated the health-related effects of learning beyond immediate psychosocial outcomes. The use of biographical interviews meant that both immediate and longer term outcomes of learning could be explored. In addition, these outcomes were discussed in the context of the many other factors that influenced respondents’ lives.

Another aspect of the research which is unusual, if not unique, is that it involved in-depth interviews with so many (145) respondents. Interviewing large numbers does not of itself add much to a qualitative study of this kind. But interviewing respondents with a wide range of life experiences – especially learning experiences – does because it provides information relevant to the identification of those aspects of learning experiences that are important in generating positive health outcomes for individuals who share particular characteristics.

Methodology²

Between February and August 2001, 145 adults living in a rural part of Essex, Nottingham, and North London were interviewed about the meanings that learning had held for them throughout their lives. Respondents were selected in order to represent maximum diversity in terms of background characteristics and types of learning experienced. The interviews were one-to-one, in-depth, biographical, and lasted between one and three hours. Respondents talked about education and learning experienced throughout their lives and the meanings of these experiences. In addition, twelve group interviews were conducted with teachers and group leaders concerning their perceptions of the effects of learning upon students' lives. Gaining the perspectives of practitioners as well as learners was valuable because it provided evidence for the validity of learners' accounts.

All the interviews were recorded, transcribed and analysed manually using a combination of inductive and analytical approaches. Five researchers were involved in this process and every transcribed interview was analysed by at least two researchers to test the reliability of interpretations. The findings presented below are themes that emerged from analysis of all 145 transcripts.

Findings³

Respondents' accounts provide consistent evidence that learning can lead to improved well-being, increased efficacy, protection and recovery from mental health difficulties, and more effective coping, including coping with physical ill-health (Box 1). These findings are presented under the headings of five groups of psychosocial qualities developed through learning that may be thought of as mediating the effects of learning upon these health-related outcomes; self-esteem and self-efficacy, identity, purpose and hope, competences and communication, and social integration.

Self-esteem and self-efficacy

Self-esteem is the dimension of individual difference that spans an individual's feeling of their own value. Self-efficacy refers to an individual's belief in their ability to control events in their lives which have significance for them.

Increased self-esteem is a widely documented 'soft' outcome of learning. The findings bear this out. Every practitioner group and respondents of all ages, ethnic backgrounds, occupations, educational backgrounds and residing in all three areas where the interviews were conducted mentioned increased self-esteem as a central outcome of their learning (Box 2).

Increased self-esteem was described in terms of feeling better about one's abilities and feeling better about oneself in relation to others—students, contemporaries, friends, members of the family, and others in a very general sense:

Like you're a little bit more worthy ... You're a part of the society. You're going out and doing something. (Gabby)

Box 1. Effects of learning upon health outcomes

Well-being:

“I think what has got me through this year is the fact that I’m enjoying the course so much” (Evelyn)

Efficacy:

“College has helped me to become what I want to become. It has given me the opportunity to do what I want to do. [...] more able to make your own choices yourself, like running life” (Billy)

Coping effectively with adversity and change:

“I’m glad I had my degree and my education to fall back on [...] It’s a tremendous absorber, a shock-absorber” (S)

“I think I had to get out and do something for myself. I felt bogged down at times and you can’t really carry on like that forever because I get stressed and can’t cope with it” (Nadine, 30)

Protection and recovery from mental health difficulties:

Physical education *“was my survival [...] It stopped my probably having personal episodes”* (Adam)

“My communication with people really improved, and [...] the way I was dressing. I wanted to get up in the morning” (Kali)

Dealing with physical ill-health:

“I’ve got one man who has MS, and it [adult education]’s transformed his life. Fom having lost his job and having really no future, he’s discovered he’s got relatives all over the world, and his life has changed. I visit him quite regularly and his house has changed. He’s got a computer, he’s got shelves of information, photographs that he never had before” T26FEB)

In contrast, some respondents described negative experiences within the education system during which they had failed to learn and which had undermined their self-esteem:

I used to feel like a deadhead [...] I thought, ‘I can’t cope with this. I haven’t got a clue about this’. And I felt really, really dim. (Nadine)

The effects of negative school experiences sometimes lasted into adulthood.

Increased confidence had positive effects upon well-being, and simultaneously, the enjoyment derived from courses had positive effects upon confidence. For example, Danielle was a mother with small children who had been caring for her sick mother:

I’d really come down and the confidence and the buzz I’d got from working had totally gone within a matter of nine months I would say, so when I came to this course it took me a few weeks to get back in the rhythm of learning again I really took off, back in a sort of learning situation, doing my homework etc, and I really enjoyed it. I thoroughly enjoyed it, and my confidence came back up. (Danielle)

Many respondents described how learning had given them the confidence to take control of their lives—to take on more active social roles, to try out new things, and to tackle issues rather than brush them under the carpet. It had empowered many learners to take additional courses and apply for jobs. Some respondents described

Box 2 Characteristics of respondents who talked about aspects of well-being as outcomes of their learning

Basic demographics	Self-esteem	Self-understanding, identity	Doing something for oneself	Purpose, hope
Female	Yes	Yes	Yes	Yes
Male	Yes	Yes	Yes	Yes
Aged 16 – 19	Yes	Yes		
Aged 20 – 24	Yes	Yes	Yes	
Aged 25 – 34	Yes	Yes	Yes	Yes
Aged 35 – 50	Yes	Yes	Yes	Yes
Aged 51 – 64	Yes	Yes	Yes	Yes
Aged 65+	Yes	Yes	Yes	Yes
White British	Yes	Yes	Yes	Yes
White other	Yes	Yes	Yes	Yes
Black African	Yes	Yes	Yes	Yes
Black Caribbean	Yes	Yes		
Black British	Yes	Yes	Yes	Yes
Mixed race	Yes	Yes	Yes	Yes
Indian	Yes			
Pakistani	Yes		Yes	
Bangladeshi	Yes		Yes	Yes
Asian other	Yes	Yes	Yes	Yes
Camden	Yes	Yes	Yes	Yes
Nottingham	Yes	Yes	Yes	Yes
Tendring	Yes	Yes	Yes	Yes
Occupation at time of interview	Self-esteem	Self-understanding, identity	Doing something for oneself	Purpose, hope
Middle class	Yes	Yes	Yes	Yes
Working class	Yes	Yes	Yes	Yes
Housewife/nd	Yes	Yes	Yes	Yes
Student	Yes	Yes	Yes	Yes
Retired	Yes	Yes	Yes	Yes
Unemployed	Yes	Yes	Yes	Yes
Prev education				
No quals	Yes	Yes	Yes	Yes
Level 1	Yes	Yes	Yes	Yes
Level 2	Yes	Yes	Yes	Yes
Level 3	Yes	Yes	Yes	Yes
Level 4+	Yes	Yes	Yes	Yes
Family details				
Single	Yes	Yes	Yes	Yes
Cohabiting	Yes	Yes	Yes	Yes
No children	Yes	Yes	Yes	Yes
One child	Yes	Yes	Yes	Yes
Two children	Yes	Yes	Yes	Yes
Three children	Yes	Yes	Yes	Yes
Four+ children	Yes	Yes	Yes	Yes
Yngst under 4	Yes		Yes	
Yngst 4 to 7	Yes	Yes	Yes	Yes
Yngst 8 to 11	Yes	Yes	Yes	Yes
Yngst 12+	Yes	Yes	Yes	Yes

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how participation in adult learning had given them confidence to visit places that they would not otherwise have visited, such as art galleries, museums, libraries, and to travel abroad.

Increased efficacy and self-esteem positively affect the ability of individuals to cope with potentially difficult situations. For example, participation in evening classes gave Elsa confidence that she would be able to cope after her husband left her with three small children, and the confidence that Denise developed through a course in ICT helped her to face the fact that there was something seriously wrong with her son's development and to seek appropriate help. Consuela experienced severe difficulties when she moved to London as a teenager with little knowledge of the language or the country, and her previous school experiences in Venezuela contributed to her sense of self-worth and a belief that things would turn out well in the end, which sustained her through her difficulties:

Those memories [of school] helped me to be able to say, 'You can do it, of course you can. You're more than able to do it if you just keep focusing. Move on, carry on, and you will make it. One day, you will make it'. (Consuela)

Several respondents described how confidence developed through participation in learning had sustained their mental health. Gareth had a history of drug dependency and depression. Following rehabilitation and therapy, he enrolled in a further education college. He explains the value of his educational experience in terms of rebuilding his self-esteem:

For me, it [Further Education]'s been brilliant. My confidence has gone right out of the roof. Apart from anything else, a lot of people had written me off, you know—my parents, my family, and friends. And it's nice that people can treat me with a modicum of respect again. (Gareth)

Marjorie had recurrent mental health difficulties that led to her early retirement. She attended courses at a centre used predominantly by people who had experienced mental health difficulties, and describes the therapeutic value of confidence built through participation in learning:

The courses are very valuable. It's taught me to build up my confidence again. It's taught me I can achieve something at the end of it, and something that I'm making—like if it's stained glass—I've actually—I can sit back and say, 'Yes. I made that'. The course tutor taught me how to do it and showed me how to do it, and I can actually do it now and I feel quite proud about that. I find it very therapeutic. (Marjorie)

The effects of learning upon confidence also contributed to how respondents dealt with physical ill-health. Greater self-esteem and self-efficacy (acquired through learning) can combat fears of ill health and its consequences and lead to more positive attitudes in relation to health. For example, Billy explained that:

It [Further Education] has made me more determined to beat the doctors [...] You control your own fate. Fate does not control you. (Billy)

Education also empowered individuals to seek new lifestyles better suited to changing health status:

Helen [name has been changed] is currently off work on long-term sick with a back injury, and has gone from somebody with absolutely zero confidence the first time I saw her [...] and now she's bursting with confidence. She's fantastic! She can't wait to go on to another course. She wanted to go and get another job. She's not interested in going back to the factory any more. She wants to go and get an office job. (N27Tutors)

Aspects of the learning experience that have an impact upon self-esteem

We have seen that educational experiences can have negative effects upon self-esteem. This raises questions about which aspects of learning are important in relation to the promotion of self-esteem.

Success.

When the teacher hands you an essay that you've done and you've got a level three, it's a real sense of achievement. And that—that can only boost your self esteem. (Gareth)

It was not only those respondents with relatively few educational qualifications and lacking in confidence generally who mentioned that success in adult education boosted their confidence. Violet is an example of a highly successful respondent whose success in adult education increased her self-esteem. Now retired, she has a post-graduate degree, has worked in the civil service, and also has five children, but nevertheless remarked with great pride and satisfaction that she had made pottery that 'looks half decent'.

Respondents felt especially positive about successful learning on courses that were perceived as challenging. In addition, parents engaged in education during periods when they were also caring for children talked about the challenges of juggling varied responsibilities, and spoke with pride and satisfaction about their success in doing so. Respondents who made tangible craft products experienced a great sense of achievement, and others took pride in written work that was their own. Several respondents mentioned that recognition of their achievements by others was important in terms of building confidence:

At home, you don't get recognition and nobody says, 'You've done a good job of cleaning the floor'. They only notice when it hasn't been done. [At college] you get recognition of achievement. You feel the achievement. You've done something. (Doris)

On the other hand, failure to succeed could undermine confidence. In many instances the effects were long lasting and not confined to the specific area of failure. For example, Naomi describes the effects of poor achievement in maths at secondary school upon her subsequent social confidence. Clearly, her feelings of social inferiority in her thirties cannot be wholly attributed to failure in maths at school, but her account quite clearly connects this school-time failure with a lack of social confidence in her adult life:

I always [...] feel as though I'm not [...] quite on the same level as everybody else [...] Not finding it quite so easy to talk about things that are going on in the world, [...] intellectual

type things. And I sort of feel scared and a bit inferior. [...] I never had any confidence when I was at school [...] We had a school reunion last year [...]. When I walked into the room, I still felt like I was perhaps not so good as them. [...] I still felt like they must think, 'Oh, there's Naomi', you know. 'The one that used to mess about. Thick at maths'. And I still felt that about myself. (Naomi)

What then helps people to *succeed* in education? Respondents mentioned three aspects of education – support and encouragement from teachers, support and encouragement from classmates, and the right level of challenge.

Participation in a group. Social confidence was built up through being forced to participate in a group class, something which many respondents found difficult at first, but which made them realise that they could manage and enjoy social interactions. Helping others, as a direct result of learning also gave confidence 'a big boost'.

For individuals who have specific difficulties and lack confidence in particular areas it can be advantageous to learn with students who share the same difficulties. For example, Angela, who has dyslexia, found college easier than school for this reason. Similarly, individuals who have recently experienced or are experiencing mental health difficulties appear to benefit from learning in centres designed to promote mental health, possibly because learning with others experiencing similar difficulties is less threatening than learning in a more mixed group. Through these experiences of learning, individuals may develop confidence and eventually move on to learning in more mixed groups.

Support and encouragement from teachers. The importance of support and encouragement was mentioned by many students who had not previously achieved educational success and by tutors teaching courses at relatively low levels. The quote below, however, which comes from the account of a respondent who had completed a qualification at NVQ Level 3 demonstrates that support and encouragement are important for the development of self-esteem at higher levels also.

It wasn't just me on the foundation. Other people were supported and made to feel good about their art and they had some talent [...] I think people do know deep down that they can do something, but they quite often need another person to activate that if they're not confident enough. (Louise)

Ethos. The ethos of a class and an educational establishment can contribute to individuals' self-respect. Penny, who came from a poor family background and has no qualifications describes how her experiences in school built up her self-esteem:

We were taught to value ourselves as people. That you all have something of quality. That you might not be the brightest at things, but everyone has something to contribute and we actually felt we were important. We were encouraged to think that, although you might

not be the brightest one in the class, you had other attributes, and you were always taught never to, as it were, run yourself down, that you'd got plenty to offer, even though you weren't top of the class all the while. We were all equal. We valued each other equally but we realised none of us were the same, that we all had different attributes. (Penny)

Identity, self-understanding, and the capacity to think independently

Although self-understanding, a sense of identity, and the capacity for independent thought are conceptually distinct, they are closely associated in the accounts of many respondents. That is why they are treated together here. For example, here is a quote from the account of Gareth. He is talking about the ways in which counselling affected him.

I'd been in counselling prior to rehab for many years anyway—going from loving it to hating it, you know, to using it as a tool for my own advancement [...] Understanding myself more. Coming to terms with my past and dealing with situations in the present better than I had done in the past. Finding that I could be independent; I didn't need to be perfect. I always thought I had to be perfect, anything other than perfect wasn't good enough. And I don't feel that anymore. I can be the best that I can be, and I strive to attain that. (Gareth)

Respondents of all ages, occupations, and levels of education, of all varieties of family structure, and from all ethnic backgrounds except for Indian, Pakistani, or Bangladeshi (perhaps because relatively few respondents of these ethnic backgrounds were interviewed) talked about self-understanding, a sense of identity and independent thought as outcomes of learning (see Box 2). Practitioners also described self-understanding and growing independence as outcomes of the courses that they taught.

Eamon, like other respondents who mentioned increased self-understanding as an outcome of their learning felt very positively about the experience. Doris' experience of rediscovering her sense of identity through adult education after a period of intensive childcare was shared by many mothers of small children:

Basically, I'm just a person. I'm not somebody's mum. And that's what I've learnt. I was just there for everybody else. Then it's like, 'You've got a name'. (Doris)

Nadine was able to explore her identity as part of her ancestral family through a course in family history. Phillippa is an identical twin, who found that going to a different college from her twin developed her independent sense of identity. However, Billy did not find FE conducive to exploring his identity as a gay man. Similarly, Derek, who describes himself as Black British, Black European, and Black Caribbean, did not explore his black identity within his formal education ('No, it's never come up'), although this happened informally through reading, television, and oral tradition. Jean represents those individuals who feel that education does not influence one's identity to any significant degree:

You always know who you are from the start. It's just that as time goes on, you get more confident. (Jean)

Several respondents talked about how education had enabled them to think more independently:

[Adult education] seems to open your mind and you are thinking for yourself. Whereas before [...] you just go along with everybody else. (Naomi)

Edgar's comment illustrates the way in which different influences are compared and evaluated against one another as an individual develops their own opinions:

You learn from your family what's right and what's wrong and what you should do and that you shouldn't do. And then [...] as you get more educated, you understand why what they said might be right. [...] Education tells you a bit about all the aspects of it, so you can pick out to go your own way. (Edgar)

Educational experiences which had discouraged independent thought tended to be at school.

Greater self-understanding and independence are potentially empowering and have positive implications for psychological health, efficacy, and fulfilment. However, personal development can lead to conflict and difficulty because it 'challenges the status quo'. The level of difficulty that this poses depends in part upon the rest of one's life. Thus, increased self-understanding, a clearer sense of identity, and independent thinking can contribute both positively and negatively to health outcomes.

Understanding one's situation within a wider context can put personal difficulties into a perspective that makes them easier to cope with. Several respondents mentioned that this understanding helped them to deal with potentially difficult situations, such as caring for small children, and making changes as their children became less dependent. Immigrants arriving in London with little or no English found adult education helpful because it enabled them to re-establish their identities.

Regaining identity was mentioned by Elsbeth—one of the (few) respondents interviewed who talked about her mental health problems—as an important outcome of her classes in relation to the recovery and protection of her mental health. Elsbeth mentioned that craft classes provided the opportunity to express her tensions and frustrations in ways that were not damaging to her psychological health or to anybody else. In fact, venting her emotions could be fun and productive.

Independent and critical thinking is crucial in order to understand and evaluate health messages. For example, Denise had a son with Asperger's syndrome. The condition was not diagnosed until he was at school, but before then it was painfully apparent to his mother that something was wrong. Denise's school education had led her to accept unquestioningly information in books and information from professionals and experts:

When I was at school, you sat there and you were taught and you kept quiet [...] 'This is how it is. Don't question it' [...] You would just accept. It was the same at college to a degree. (Denise)

Because her son had an unusual condition, which was not mentioned in the books or recognised in her son by professionals, this led Denise into feelings of confusion, self-doubt and guilt. However, once a diagnosis was obtained, her scientific training at

masters level, which had taught her to critically evaluate information, enabled her to tackle her son's disabilities in a positive manner:

It [the masters course] helped in finding things out and questioning them [...], whereas before I'd have swallowed it whole. [...] Because I've done the MSc, I can reject some of the things because they're scientifically based and I've done the Sciences [...] 'Where's your evidence?' It's this way of thinking, isn't it, in a science based way. (Denise)

One aspect of the experience of learning that relates to autonomy is that learning often represents an activity or focus of interest that is first and foremost for the learner, and which may be separate from the rest of their life. Learning that develops critical awareness, self-understanding and autonomy provides distraction from worries, a positive focus of interest and an element of routine, and it can therefore promote well-being, protect mental health, and help individuals to cope with adversity and ill health.

Aspects of learning that lead to greater self-understanding, a clearer sense of identity, and independent thinking

Learning as something for oneself was mentioned in relation to the development of a clearer sense of identity and independence frequently, and by respondents from almost every background and age group (see Box 2), but especially by individuals who were coping with difficult and demanding lives. Groups that did not mention this aspect of learning were certain ethnic groups, probably because numbers in these categories were small, and 16 to 19 year olds, who (mostly) are not returning to learning and may not see education as a positive choice.

Respondents talked about the importance of the content of their learning in relation to the development of self-understanding and independence. Subjects that encourage reflection (Counselling, Access Planning, Anthropology, and travel) are particularly effective in terms of growth, although some respondents had found the reflective aspect of classes too challenging. This highlights a more general finding, namely that learning is valuable when it provides individuals with challenges they can meet, but may be damaging when those challenges are beyond the individual's capabilities.

The creative arts—art, crafts, drama, dance, opera, singing, and creative writing—were mentioned because they opened people up, enabling them to re-evaluate issues, express their feelings, and grow as people:

I think certainly doing the MA, it stretched my brain intellectually, but it's interesting because doing the course last year and the course this year and various courses [opera and music] I found that's opened my mind much more, rather than stretched my intellect. (Ingrid)

Family history contributed to a more grounded and better contextualised sense of identity. Basic survival techniques were mentioned by two respondents, who both reported that they led to a very basic sense of independence.

The few respondents interviewed who had studied at masters level mentioned that this level of education promoted independent thinking and critical evaluation of information.

Purpose and hope

Many respondents mentioned purpose or hope as outcomes of learning, mostly in terms of progression to better jobs or further education. Box 2 summarises evidence that respondents from a wide range of backgrounds mentioned that these outcomes of learning were important to them, although, interestingly, this does not include any respondents under 25.

In the most general sense, respondents talked about brighter futures, doing something worthwhile, and awareness of more opportunities. Others talked more specifically about education as a ‘voyage of discovery’ that had led to discovery of occupational direction. Foreign students who initially studied English reported that participation in college had led to the formation of realistic goals and ways of pursuing them. Not surprisingly, obtaining qualifications was mentioned as a means to progression.

Some respondents described being given unhelpful ‘guidance’ at school or being made to study subjects that did not interest them. Others had been restricted in career progression because they were qualified in areas that no longer interested them, but were not qualified in areas that did. These experiences had undermined purposefulness and optimism about the future.

Having a sense of purpose and hope put immediate difficulties into a wider perspective, and provided distraction from unpleasant or stress-inducing areas of life. This contributed to positive psychological health and helped respondents to cope with potentially difficult situations. For example, many parents of small children mentioned that participation in learning helped them to cope with lives dominated by childcare and domestic chores. Learning was seen as a first step in readjusting their lives as their children gained independence.

For individuals forced to take early retirement as a result of chronic illness or disability, education can contribute to the formation of a positive attitude towards the future and a means through which alternative occupations can be explored and achieved.

In addition, education offers an alternative lifestyle and purpose to individuals who have adopted lifestyles that are seen as destructive to themselves and to the communities they live in. For example, Grace was excluded from school, became involved in fraud, but after having a child turned to learning in the form of access courses as an alternative way of life. Daisy comes from a background dominated by exclusion and dependence upon drugs and describes education as ‘a way out’ – a route out of self-destruction.

Clearly, learning that raises hopes that are not met may have damaging effects. Jason’s story illustrates this point. Jason qualified and worked as an accountant in his home country of Kenya before he fled to London as a refugee. In London, his previous training went unrecognised and he had to start his career from scratch. Acceptance of this situation was very difficult for Jason, and his wife describes him going through a period of depression. Clearly, other factors to do with his experience of seeking asylum in an unfamiliar country may have contributed to this

depression, but crushed aspirations were cited very clearly in his account and that of his wife.

Aspects of learning that lead to hope and purpose

Confidence in one's abilities is fundamental to a sense of purpose and hope. This is illustrated by an extract from Stacey's account, in which she describes how loss of confidence in her ability to draw discouraged her from pursuing her interest in art, which at the time of her interview had become an extremely fulfilling part of her life:

This was in a primary school and [...] I got this picture that was labelled 'Watt Tyler-dead'. It was this person lying in a pool of blood. And I got something like A minus for the writing and D for the picture. And it was such a clear comment that you are rubbish at drawing but you're not bad at writing. Those sorts of little tiny things stay with you and make you think – It's a confidence thing and that's also, I suppose, why I wasn't committed to do it to say, 'Right, I'm going to do art "O" level'. (Stacey)

Learning, especially when accompanied by information and guidance regarding the future can provide the opportunity for individuals to try things out and discover where their strengths and interests lie, and where they do not. On the other hand, forcing students to study subjects that do not interest them (experienced as 'pointless' and 'irrelevant'), resulted in disengagement from the education system and led to a loss of purpose and hope. For example, schools and careers advisers that emphasised academic subjects had led to respondents failing to recognise their potential interest and love for the creative arts.

Teachers who have faced similar difficulties to students (or to members of students' families) can be important role models. For example, Faith learned sign language because her son was profoundly deaf. The teacher was also profoundly deaf and led a successful life and Faith remarks, 'It gives you hope'.

Competences and communication

Lack of basic competences excludes individuals from a range of opportunities and services. Respondents did not talk about this issue, but described how learning had enabled them to approach problems logically and with patience because they believed that problems can be fixed in the end. For example:

I won't sit here and go nuts over a problem. It's—now I know that there's information and that information is always out there. I know I can access it. I might not know where to go or what I'm looking for but I know there's a beginning to solving the problem rather than it destroying me. (Lydia)

Learning also helped people to see their difficulties within a broader context that encompassed alternative ways of tackling a problem. In emotionally charged situations, this broader context helped some respondents to 'take a deep breath' and a more effective approach.

Knowledge and understanding of health related issues can help individuals to deal with their own ill health or the ill health of somebody close to them. When Maisie's

husband was diagnosed with depression, she found out all she could about depression, which was tremendously helpful in dealing with his illness. Ede used her knowledge and understanding of health and therapeutic skills to improve her daughter's health through aromatherapy. For Denise, education enabled her to evaluate health information, and consequently understand a condition and access appropriate treatments.

Communication skills developed through education contribute to the social integration of immigrants (initially through learning English), and to people's abilities to deal with health-related systems. Respondents had learned to deal rationally and diplomatically with professionals who wield power over them, e.g. as gatekeepers to services. Education had also provided individuals with the discourse that makes it more likely that they are understood and taken seriously by health professionals:

Because I went to grammar school and then I worked in a hospital laboratory for 20 years – but because I've come from that background, you're able to talk to people at the same level. You know what to say, when to keep quiet [...] It's the same with teachers and everyone [...] You're educated to their level [...] It's like the language you use with teachers and everybody, professionals. Because I've had the education, I've got the language. (Denise).

Written communication skills were also useful in accessing health services.

If, as suggested by these findings, education enables individuals to access limited health services, then where does this leave those with lower levels of education, who may have equal or greater health needs? This outcome of education benefits the individual, but it may do so at the expense of somebody else, and consequently compounds existing inequalities by enabling the better off (educationally) to gain priority. This is an example of what is already well established in social policy circles, which is that it is on the whole the middle classes who benefit from much welfare expenditure.

Social integration

Learning experiences can have positive and negative effects upon social integration, as illustrated below:

[Participation in education has made Gabby feel] 'like you're a little bit more worthy– You're a part of society'. (Gabby)

It broke down my confidence completely, I think, and it was not necessarily confidence in myself, but confidence in my ability to communicate and make friends and just to think that people are going to be friendly. (Ingrid)

Putnam (2000) suggests that social integration has a positive effect upon physical health because healthy behaviours are reinforced, chronic levels of stress are reduced, and access to medical services is improved. Schlossberg suggests that social resources and social competences contribute to emotional resilience, which protects mental and physical health.

Many respondents mentioned how much they enjoyed relating to other students

and these sentiments were echoed in the practitioner groups. Some courses led to groups of students visiting places together that they would not otherwise have had the confidence to visit (e.g., museums, galleries, the public records office). This outcome of learning contributed very positively to well-being, illustrating the close inter-relationship between positive psychological health, civic participation, and social integration.

Some respondents mentioned that they had formed particularly close friendships with fellow students, and put this down, partly, to sharing common interests. In contrast, learning in isolation can be problematic. For example, Fern started studying for a PhD and became depressed. She gave up because she was, as she put it, 'completely on my own'.

Accounts of respondents who have suffered mental health difficulties testify to the value of learning with other people and forming peer relationships in terms of recovery and protection of mental health. In addition, meeting people in educational settings helped some respondents to deal with difficult situations. For Celia (and many other respondents with young children), contact with other students reintegrated them into the wider world that they had felt part of before having children. The social side of learning also provided distraction from anxieties and helped students to put their problems into perspective because they recognised that others face similar difficulties.

Many students from other countries had attended college to study English and had, for the first time in England, met others with whom they could share experiences and knowledge, and who became their friends. This helped them to cope with difficulties resulting from emigration.

Classes can also act as a forum for the exchange of health-related information. The examples given by respondents were not spectacular, but were nevertheless significant to the respondents themselves.

Some respondents had adopted health behaviours with their classmates, for example, attending a gym and changing their diets. The social side of education also led to behaviours that damage health. For example:

I did O levels at Mid Herts, but that's where I first got introduced to drugs and acid was really big at that time. And acid and education don't mix and I preferred acid to education, so that's what - it became a drug experience more than an educational experience. So I left that and carried on my drug career. (Gareth)

Conclusions

Detailed evidence concerning the mechanisms through which learning affects a variety of health outcomes has been presented here. In conclusion, I describe some over-arching issues that arise from and apply to the range of findings described above.

The immediate psychosocial outcomes of learning are central to the processes that link learning with health outcomes. The ways in which immediate psychosocial outcomes (or mediators) impact upon psychological and mental health outcomes appear to be similar across the whole dimension of psychological health, from despair

and depression at one end to positive psychological health, fulfilment, and personal growth at the other. This implies that learning can benefit the health of all individuals regardless of their initial levels of psychological and mental health.

The ways in which psychosocial mediators impact upon individuals' abilities to cope effectively with adversity, including personal ill-health and ill-health experienced by loved ones are similar to the ways in which they impact upon psychological and mental health, with the exception that competences (developed through learning) play an important role in coping, but do not appear to contribute to psychological and mental health to anything like the same extent.

Where learning has positive impacts upon psychological health, this will contribute to positive family functioning and social cohesion. Indeed, in real life, it is impossible to separate an individual's psychological health from their attitudes and practices relating to social integration and social responsibility, although conceptually and theoretically it may be useful to do so.

Education has the potential to enhance all health outcomes through enabling individuals to see their lives in a broader context. Understanding within a broader context develops new interests, provides new opportunities, and thereby generates purpose, hope, self-esteem, self-efficacy, and personal growth. There is an expansion from looking inwards to looking outwards, which has positive effects upon health along the whole of the mental health continuum and enables individuals to cope more effectively with ill health and other types of adversity.

Perhaps this conclusion is what one would expect, because learning must always be about questioning and extending boundaries. Nevertheless, it is an important one because it may be the most important aspect of learning in relation to the generation of wider benefits, and also the one that distinguishes learning from other activities that might also be beneficial to health, such as participation in work or leisure activities that involve minimal learning.

Policy makers should bear in mind which aspects of learning experiences are important in relation to the development of the positive psychosocial qualities that contribute to better health outcomes. One of the most important aspects appears to be support and encouragement. This is provided by the teacher, although the ethos of the institution appears to be critical also, and so do the attitudes of fellow students. For students whose levels of confidence are low initially, the most supportive learning environment can be a class with a high teacher to student ratio so that the teacher is able to give plenty of time to each individual, and which contains a group of students who share life circumstances and/or face similar difficulties in relation to returning to learning. In contrast, students who are more confident may benefit from learning in more heterogenous groups, which may contribute to a broadening of horizons and consequently promote positive psychological health. These findings resonate with conclusions from a survey of Further Education practitioners in England, where the importance of support and encouragement in relation to wider benefits is also emphasised (Preston & Hammond, 2002).

Providing challenges that learners can meet is important in terms of building self-esteem. If challenges are not met, the consequences can be very damaging and long

lasting. Subjects and teaching styles that encourage reflection, creativity, and self-expression are particularly important in relation to developing self-understanding and independent thinking. Wider curricula are more likely to offer opportunities for all individuals to discover their strengths and interests and so develop aspirations and plans for the future.

The interests, strengths, and needs of each learner are defined by their background characteristics and current life circumstances, and they are unique. The findings illustrate the importance of providing learning that matches these interests, strengths, and needs. Those aspects of learning that appear particularly important include levels of support and challenge, heterogeneity of the learning group, pedagogical style, and the content of learning.

Notes on contributor

Cathie Hammond is a research officer at the Centre for Research into the Wider Benefits of Learning. Recent publications include 'How education makes us healthy', *London Review of Education*, 1(1), 551–571 (2003); 'Practitioner views on the Wider Benefits of Further Education' with John Preston, *Journal of FE and HE*, 27(2), 211–222 (2003); and 'A poorly understood condition: disability living allowance and CFS/ME', *Social Policy & Administration*, 36(3), 254–274, (2002).

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2. Full details of the methodology can be found in Schuller *et al.* (2002), which can be downloaded from www.learningbenefits.net.
3. Findings and conclusions presented in this paper are given in greater detail in Chapter 3 of *The Benefits of Learning*, Routledge.

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