Community Wellness: Co-Creating Communities where Humans Thrive



Dr Karen Sankey, Founder, Trauma trained Health Inclusion GP and Therapeutic Coach, Community Wellness

| Contact: karens@community-wellness.co.uk

The Challenges:

- NHS on brink of collapse.
- · Widening health and social inequities.
- Stress and burnout epidemics.
- Focus on symptoms and illness, diagnoses and labels.
- · Chronic illness and disease rates rising.
- Pandemic of mental ill health.
- Increased reports of disconnection, loneliness and lack of purpose.
- Medical model separates and treats the mind, body systems as different entities.
- Health care staff retention and recruitment crisis.

Community Wellness Model:

- · Rebuilding what makes us human.
- Creating places where people can heal and connect in genuine community.
- Human centric, whole person approach.
- Focus on the origins of human distress and illness and addressing unmet human need.
- Inclusive, accessible, non hierarchical and non-judgemental culture.
- Asset based supporting individuals to have agency for their own health.
- Founded in the science of traumatic stress, neuroscience and Human Givens psychology.
- Offering a range of social, creative and nature-based activities and therapeutic interventions.
- **Leadership** -we flip the natural hierarchy supporting participants to become community leaders.

Research

- Bangor University is conducting an evaluation of the services provided by Community Wellness.
- A realist evaluation, identifying not only what works, but the context services work in and why
 they work, in combination with a social value analysis to provide a holistic evaluation.
- Protocols for the literature reviews of the realist and social elements have been published in academic journals or are currently being reviewed for publication.
- Data collection is ongoing and is informed by literature reviews, observational data and advise from an expert panel.
- Indications are that Community Wellness adds the following to its participants lives:
 - 1. A unique atmosphere that is both welcoming and therapeutic
 - 2. A series of activities / services that address the individual in a holistic manner
 - 3. A proxy relationship function
 - 4. Respect

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Participants:

- Age 2 years to 86 years
- 34% under 18yrs
- 54% on medication at entry point
- 41% employed

Community of Partnerships:



Operational Model:



Reimagining Primary Care:

Community Wellness started for the most marginalised, but now people from all walks of life including GPs, counsellors and coaches are asking to be trained and supported as part of this movement.

Enablers:

- An award- winning transformational model that is tried and tested
- Increasing demand for an alternative approach to the biomedical approach by paying and non-paying customers
- A network of health and helping professionals requesting training

Barriers:

 A mismatch between strategy and funding priorities

Impact:

- 91% of participants report an improvement in wellbeing after attending 1 CW session
- Testimonials confirm reduced medication use, recovery from trauma, reconnection with purpose and even prevention of suicide

"I've tried to kill myself several times, but thanks to this group, I won't try ${\bf again."}$ Nicola, participant

"Community Wellness saved my life." John, participant

"I've been a GP for 28 years and the Community Wellness Project has been the single most transformational service offered to my patients in all my time in practice." Dr Tanner - GP

Next steps:

- Secure sustainable funding funding ended Nov 24
- Formalise Associate model
- Commercialise the CW model
- Expand the tried and tested educational and training offers for Primary health care professionals and organisations (currently working with the Deepend network of GP practices)
- Roll out of workplace wellbeing offers