

Diversity and inclusiveness, wellbeing and openness to change: the effects of a Do Something Different programme in a global organisation

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Abstract: This paper investigates the extent to which a person's ability to behave in an inclusive manner, respecting diversity and embracing others' differences, correlates with other aspects of their personality. Also under investigation is the impact a person's inclusive behaviour has on their own mental and physical wellbeing. To examine these issues we report on the relationships between four variables – inclusiveness, wellbeing, behavioural flexibility and openness to change – measured during a six-week workplace Do Something Different programme completed in a global organisation. Our results are based on an analysis of data from 1,153 working age employees.

Key findings

- Results showed that wellbeing and openness to change are strongly linked to diversity and inclusiveness behaviours – the more inclusive a person is, the better their wellbeing, and the more open they are to change, including change in the workplace.
- Higher levels of behavioural flexibility were associated with more inclusiveness, greater openness to change and better wellbeing.
- Increases in diversity and inclusiveness behaviour resulting from participating in the Do Something Different programme were associated with improvements in wellbeing and increased openness to change. The hypothesis that changes to inclusiveness brought about by the Do Something Different intervention were responsible for the increases in wellbeing and openness to change was supported by a “dose-response relationship” – those people whose inclusiveness increased more experienced greater improvements in wellbeing and openness to change.
- As well as looking at the overall relationships between inclusiveness, wellbeing and openness to change, we also examined the detailed relationships between the constituent elements of each variable with the other scales. These analyses confirmed the overall picture and supported the idea that developing diversity and inclusiveness behaviours is likely to improve different aspects of wellbeing including physical health, coping, decision-making, happiness, feeling valued, talking to others, having meaning in life and close relationships.

Background to inclusiveness, wellbeing and openness to change

Research on the effects of workplace diversity and inclusiveness has often considered only the effects on members of minority groups. For example, Enchautegui-de-Jesus et al [1] studied how the psychological well-being of ethnic minority workers was affected by the presence of different proportions of co-ethnic colleagues. Results demonstrated that workers from ethnic minorities have better outcomes in a racially diverse workplace:

“We found that levels of psychological functioning were better for respondents who worked with a midlevel proportion of co-ethnics than for those in workplaces with tokenism or a minority concentration. At the extremes of the distribution of co-ethnic workers, with ‘none’ on one hand or ‘all’ on the other, psychosomatic complaints were at the highest level, and life and job satisfaction were at the lowest level.” [1]

Badgett et al [2] reviewed 36 studies with results about the workplace experiences of LGBT employees, finding that:

“LGBT-supportive policies and workplace climates are linked to greater job commitment, improved workplace relationships, increased job satisfaction, and improved health outcomes among LGBT employees.” [2]

What we report on here, by contrast, is the personal benefit that all people can reap by maintaining an inclusive, open, outward-looking attitude at work. Inclusive working practices extend to a wide range of behaviours, such as being able to adjust one’s communications style to work with people from different cultures, building relationships with people from a very different background to one’s own, and being prepared to speak up to challenge stereotyping and prejudicial behaviour in others.

There is good reason to think that an inclusive, open attitude to other people should be related to wellbeing. According to psychologist Vanessa King, “feeling connected to other people is at the heart of happiness” [4]. Moreover, all of our interactions with other people affect wellbeing, not just those with family and close friends:

“While our close ties are really important for happiness, our more casual (or ‘looser’) connections matter too. Building our connections where we live can positively impact how we feel, increasing our sense of security and well-being. When people know and trust their neighbours they feel safer and have a greater sense of belonging. This doesn’t mean you have to be best friends with everyone. Even just recognising neighbours’ faces, smiling or saying hello makes a difference and means people are more likely to look out for, and help, each other. And making these small connections can pave the way for closer ones.” [4]

In this paper we report an analysis of the relationships between inclusiveness, wellbeing and openness to change in a large sample of employees in a global organisation. The methodology allows us to examine these relationships at one point in time (before an intervention), as well as over time. We were able to analyse how a six-week Do Something Different intervention, designed to increase diversity and inclusiveness behaviours, affected well-being and openness to change.

Methodology

Our data is from a personalized Do Something Different programme designed to help employees in a global organisation to become more inclusive in their working practices. The six-week, digitally delivered

programme measured and developed inclusive working practice, for example, adjusting one's communications style to work with people from different cultures, building relationships with people from a very different background to oneself, and speaking up to challenge stereotyping and prejudice. Because the programme was designed to promote diversity and inclusiveness this made it possible to examine whether changes in inclusive behaviours over time also resulted in changes to wellbeing and openness to change. Employees completed a set of diagnostic questionnaires before and after the intervention, including measures of inclusive working practices, wellbeing, openness to change and personality.

Participants

The data are drawn from 1,153 working age adults who were offered the intervention by their employer and completed the pre-intervention questionnaire. This group were also offered the chance to complete the diagnostic questions on completion of the Do Something Different intervention, although there was no requirement on them to do so. Nearly a quarter of the staff ($n = 261$) chose to complete the post-intervention questionnaire six weeks later, allowing us to compare the effects of the intervention on the areas measured.

The diagnostic questionnaires

Inclusive working behaviours scale:

All participants completed an online seven-item self-report questionnaire about the inclusiveness of their work practices. They reported how often they performed particular diversity and inclusiveness behaviours, such as "Speak up when you hear stereotyped comments about people or groups". Answers were entered by moving a slider labelled from "never" to "a lot", and slider positions were converted to numbers from 0 (never) to 100 (a lot).

The seven items in the scale were: adjusting behaviour to work with people from different cultures, mixing with people very different to oneself, proactively building new relationships at work, seeking input from quieter people, disengaging when with certain people or when hearing particular accents (scored in reverse), speaking up against stereotyping, and choosing to work with people from other areas of the business. Summing each person's values gave them a diversity and inclusiveness score ranging from 0 to 700. The questions form a reliable scale, with a reasonable Cronbach's $\alpha = 0.70$.

Wellbeing scale:

Participants completed an online eight-item wellbeing scale covering both feeling and functioning aspects of wellbeing. For each item participants were asked to say, thinking about their life in the past month, how much they agreed with a statement such as "I have felt valued/appreciated". Answers were entered by moving a slider labelled from "a little" to "a lot"; slider positions were then converted to numbers from 0 (a little) to 100 (a lot).

The eight items measured: coping with problems, finding it easy to talk to others, finding it easy to make decisions, feeling valued, feeling happy, feeling like life has meaning, having good physical health and the quality of one's closest relationship. Summing each person's values gave them a wellbeing score ranging from 0 to 800. The Cronbach's α is 0.84.

The questionnaire is similar to the Warwick–Edinburgh Mental Wellbeing Scale which was developed by an expert panel within the medical community to enable the "monitoring of mental wellbeing in the general population and the evaluation of projects, programmes and policies which aim to improve mental wellbeing" [3].

Openness to change scale:

Participants completed a four-item questionnaire about their openness to change, with items such as “How frequently do you look for new ways of doing things?” and “How much do you enjoy change at work?”. Each item was answered on a slider from “not very” to “very”, and slider positions were converted to numbers from 0 (not very) to 100 (very). The four aspects were: being open-minded, enjoying change, enjoying change at work, and looking for new ways of doing things. Summing each person’s values gave them an openness to change score ranging from 0 to 400. The questions form a reliable scale, with Cronbach’s $\alpha = 0.81$.

Personality Behaviour Rater:

Personality was measured by the online Behaviour Rater, which is an adapted short-form version of the behavioural flexibility scale from Fletcher & Stead’s FIT Profiler [5]. The Behaviour Rater is explained fully in Fletcher & Pine [6]. The Cronbach’s α of the original scale is 0.91 [7]. Briefly, the participant is presented with as a 6x5 grid where each of the 30 cells contain a short description of a behaviour (consisting of a single label, but with a hover button showing more explanation). Participants are instructed to choose “the behaviours below that best describe you; select as many or as few as you like, so long as they describe how you generally are”. The 30 behaviours consist of 15 opposite pairs, such as “Extroverted” and “Introverted”, “Trusting” and “Wary of others”, and “Group-centred” and “Individually-centred”. Behaviours are arranged in the grid so that opposite behaviours are not located near each other. The number of behaviours that a person selects yields a score of their behavioural flexibility, from 1 to 30.

Overview of the intervention

Employees on the Do Something Different Diversity and Inclusion programme began by completing an online diagnostic suite about their working habits in respect of diversity and inclusiveness, wellbeing, openness to change and personality. The inclusiveness and personality diagnostics were used to personalise their programme, so people were only asked to try out behaviours that were not already part of their behavioural repertoire. Then, over the following six-week period, each participant was sent 15 small activities, called “Do’s”, to carry out. Do’s were delivered digitally during their normal working day and supported by other material such as motivational messages. Participating employees also had access to a ‘Do Zone’, an online community where they could share their experiences in a variety of forms and also record their progress.

Some of the Do’s directly related to the inclusive working practices asked about in the diagnostic questionnaire. For example, a participant who had said that they rarely spoke up when hearing stereotyped comments about people or groups would be given the Do

“Be alert for comments made that certain people or groups may be sensitive to. Speak up to challenge them.”

Someone who had said that they didn’t often mix with people from very different backgrounds would get the Do

“Today identify someone outside your usual group and actively engage with them. Arrange a coffee or chat and/or get their input on a work matter.”

Other Do's aimed more generally to encourage people to explore different ways of behaving, again determined by their pre-intervention diagnostics. For example, a person who did not identify themselves as group-centred might be given the Do:

“Be more of a team player today. Organise something everyone can take part in (e.g. family, friends, colleagues).”

By focusing on actions — doing — rather than just thinking, Do's bring about actual behaviour change rather than simply offering information; they are positive actions, small steps towards a bigger goal and are designed to be fun and motivating.

The diagnostic suite of questions was made available again to employees at the end of the programme, so they could re-measure themselves if they wished.

Comparison of participants completing the post-intervention questionnaire with those who only completed the pre-intervention questionnaire

We thought that people who completed the post-intervention measures might be more open to change than those who only completed the pre-intervention measures because, by engaging with the intervention, they showed more willingness to engage in activities they were not used to doing. There was indeed a significant difference in openness to change between the groups (Welch's t -test $t(415.3) = 2.48$, $p = 0.014$; t -tests are two-tailed throughout unless otherwise specified): those completing the post-intervention measure had a mean pre-intervention openness to change score of 290.8 (SD = 59.2), whereas those who completed only the pre-intervention measures had a mean score of 280.6 (SD = 58.8).

The post-intervention group also differed from the pre-intervention-only group in terms of overall wellbeing and diversity and inclusiveness scores, having a higher mean pre-intervention wellbeing score of 579.0 (SD=108.7) compared to 545.4 (SD=119.1) for the pre-intervention-only group (Welch's t -test $t(458.2) = 4.31$, $p = 2.0 \times 10^{-5}$) and a higher mean pre-intervention diversity and inclusiveness score of 463.6 (SD=88.2) compared to 445.0 (SD=91.1) for the pre-intervention-only group (Welch's t -test $t(435.3) = 2.97$, $p = 0.003$). Below we investigate in detail the relationship between the three core variables.

Results

1. Inclusiveness is associated with wellbeing and openness to change

Initial relationships between inclusiveness, wellbeing and openness to change

We performed correlational analyses on the pre-intervention data to see whether inclusiveness was related to wellbeing or openness to change. The Pearson correlation coefficient between the diversity and inclusiveness scores and the wellbeing scores was highly significant statistically, $r(1151) = 0.38$, $p = 7.2 \times 10^{-42}$ (throughout, p -values for correlations are calculated using a two-tailed t -test). This indicates that people who are more inclusive have better wellbeing scores.

The correlation coefficient between the diversity and inclusiveness scores and the openness to change scores was also highly significant, $r(1151) = 0.52$, $p = 6.1 \times 10^{-82}$, indicating that people who are more inclusive are more open to change.

To show these relationships in a more concrete way, we categorised people as low, medium or high in each of the three areas, according to their scores. For diversity and inclusiveness the ranges were: low = up to 350, medium = 351 to 550, high = more than 550. For wellbeing the ranges were: low = up to 400, medium = 401 to 600, high = more than 600. For openness to change the ranges were: low = up to 200, medium = 201 to 300, high = more than 300. The following 3x3 table shows the breakdown of participants into groups by diversity and inclusiveness, and wellbeing:

	Low wellbeing	Medium wellbeing	High wellbeing
Low diversity and inclusiveness score	28	100	27
Medium diversity and inclusiveness score	80	476	291
High diversity and inclusiveness score	5	47	99

The pattern of results shows a strong relationship between the two variables as predicted ($\chi^2(4, N = 1153) = 87.86, p = 3.8 \times 10^{-18}$). The table gives us the following probabilities:

- A person with a low diversity and inclusiveness score had an 18% chance of having low wellbeing, a 65% chance of having medium wellbeing and a 17% chance of having high wellbeing.
- A person with a medium diversity and inclusiveness score had a 9% chance of having low wellbeing, a 56% chance of having medium wellbeing and a 34% chance of having high wellbeing.
- A person with a high diversity and inclusiveness score had a 3% chance of having low wellbeing, a 31% chance of having medium wellbeing and a 66% chance of having high wellbeing.

Therefore:

- Someone with a high diversity and inclusiveness score was about four times more likely to have high wellbeing, compared to someone with low inclusiveness.
- Someone with a medium diversity and inclusiveness score was twice as likely to have high wellbeing, compared to someone with low inclusiveness.
- Someone with a high diversity and inclusiveness score was very unlikely (only 3% chance) to have low wellbeing.

For diversity and inclusiveness and openness to change the breakdown is as follows:

	Low openness to change	Medium openness to change	High openness to change
Low diversity and inclusiveness score	37	101	17
Medium diversity and inclusiveness score	51	494	302
High diversity and inclusiveness score	1	33	117

Again the results show a strong relationship ($\chi^2(4, N = 1153) = 193.77, p = 8.2 \times 10^{-41}$). The table illustrates that 77% of the high inclusiveness group showed high openness to change, compared with only 11% of the low inclusiveness group.

Pre- to post-intervention changes

Table 1 shows a comparison of the pre- and post-intervention scores for diversity and inclusiveness, wellbeing and openness to change only for those employees who completed both pre-intervention and post-intervention diagnostic questionnaires. It is clear from Table 1 that all scores increased over the course of the intervention. All the increases in mean scores were statistically significant using paired sample *t*-tests (one-tailed).

The *changes* in diversity and inclusiveness, wellbeing and openness to change scores that participants experienced over the course of the intervention were also analysed using correlational statistics. We reasoned that if inclusiveness and wellbeing really are connected, we would expect to find that those people who experienced the biggest increases in inclusiveness also show the biggest increases in wellbeing. In medical terminology this dose-response relationship is often taken to indicate a possible causal relationship.

The correlation between the changes in diversity and inclusiveness scores and the changes in wellbeing scores is indeed statistically significant, $r(259) = 0.32, p = 1.9 \times 10^{-7}$: the more someone's inclusiveness increased, the more their wellbeing scores improved. Changes in scores for diversity and inclusiveness and changes in scores for openness to change were also highly correlated, $r(259) = 0.42, p = 7.4 \times 10^{-13}$.

The relationship between improvements in diversity and inclusiveness scores and increases in the other measures is illustrated another way in Figure 1. The first group of bars shows the percentage increase in the average wellbeing and openness to change, for all participants (i.e. the same percentages shown in Table 1). By contrast, the second group of bars shows the percentage increase in wellbeing and openness to change for the 121 participants whose diversity and inclusiveness rose by at least 5 points per question; the increases in wellbeing and openness to change were correspondingly larger for these people. Similarly the third and fourth groups of bars show the percentage increases for the 72 and 32

	Pre-intervention		Post-intervention		p-value	Percentage increase
	Mean	St. dev.	Mean	St. dev.		
Diversity and inclusiveness	463.6	88.2	488.2	89.3	7×10^{-8}	5.3%
Wellbeing	579.0	108.7	597.6	103.5	0.001	3.2%
Openness to change	290.8	59.2	296.4	53.9	0.031	1.9%

Table 1: Comparison of the pre- and post-intervention scores for inclusiveness, wellbeing and openness to change.

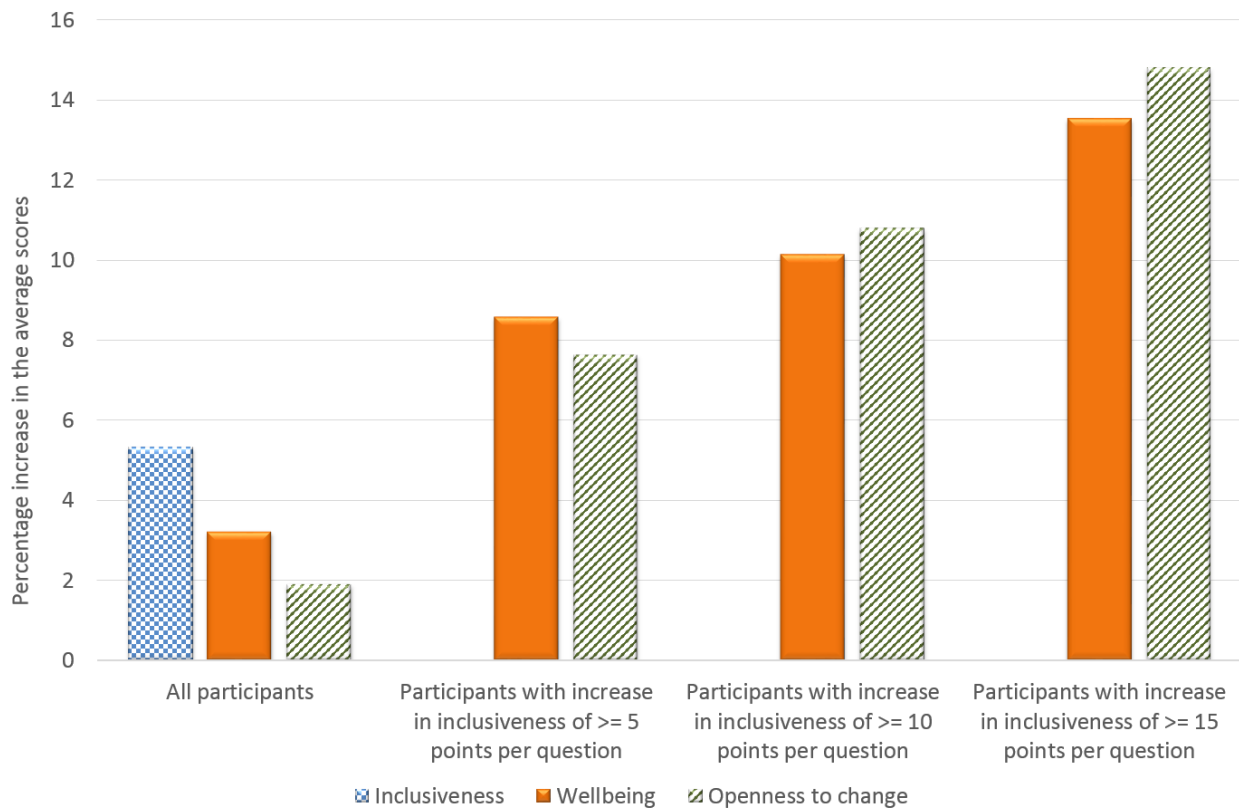


Figure 1: Comparison of the pre- and post-intervention data confirms that the intervention delivered not only increases in inclusive working practices, but also improvements in wellbeing and openness to change.

participants respectively whose diversity and inclusiveness score rose by at least 10 and 15 points per question; the increases in the other measures are correspondingly more dramatic.

To confirm the strength of the relationships observed between the three key variables, we carried out two more sets of correlation tests: on the relationships between the various post-intervention scores, and on the pre-intervention scores just for those participants who went on to complete the post-intervention questionnaire.

These correlations are shown in Table 2, which for viewing convenience also includes the correlation results already given for pre-intervention scores and changes in scores. We see that the post-intervention correlations are the highest.

	Diversity and inclusiveness versus:	Pearson <i>r</i>	<i>p</i> -value
Pre-intervention (all participants)	Wellbeing	0.38	7.2×10^{-42}
	Openness to change	0.52	6.1×10^{-82}
Pre-intervention (only those completing the post-intervention questionnaire)	Wellbeing	0.45	1.8×10^{-14}
	Openness to change	0.59	2.3×10^{-25}
Change from pre- to post-intervention	Wellbeing	0.32	1.9×10^{-7}
	Openness to change	0.42	7.4×10^{-13}
Post-intervention	Wellbeing	0.56	1.0×10^{-22}
	Openness to change	0.67	7.6×10^{-35}

Table 2: Correlations between inclusiveness, wellbeing and openness to change, using pre-intervention scores, post-intervention scores and changes in scores over the course of the intervention.

Although not central to this paper, we also correlated the simplest measure of behavioural flexibility taken from the Behaviour Rater (the number of personality dimensions chosen) with each of the three core variables. As predicted, all of these were statistically significant indicating that the more behavioural dimensions a person reported having, the more inclusive they were ($r(1151) = 0.14, p = 9.6 \times 10^{-7}$), the better their reported wellbeing ($r(1151) = 0.10, p = 0.0045$) and the more open to change they were ($r(1151) = 0.14, p = 2.2 \times 10^{-6}$).

Using a more sophisticated behavioural flexibility measure (a complex score of ‘facilitatory’ and ‘inhibitory’ behaviours) the correlations with each of the core variables was very strong: $r(1151) = 0.41, p = 1.8 \times 10^{-48}$ with diversity and inclusiveness, $r(1151) = 0.34, p = 1.7 \times 10^{-32}$ with wellbeing and $r(1151) = 0.45, p = 7.7 \times 10^{-58}$ with openness to change.

2. Which aspects of diversity and inclusiveness are the best predictors of wellbeing and openness to change?

Initial relationships between aspects of inclusiveness, wellbeing and openness to change

In the Background section we gave reasons for suggesting that inclusiveness is related to wellbeing. Results given in the previous section confirmed our hypothesis: people who are more inclusive tend to have higher wellbeing. We also found a similar positive relationship between inclusiveness and openness to change. In this section we look more deeply into these relationships, by breaking the diversity and inclusiveness scores down into their seven components and analysing these separately.

Table 3 shows – for the employees who completed both pre-intervention and post-intervention measures only – the changes in each of the seven diversity and inclusiveness items. The intervention produced improvements in all seven areas, with the improvements being highly statistically significant for all but one area (p -values from one-tailed t -tests are shown in the table).

We then conducted a regression analysis, using the wellbeing score as the dependent or outcome variable and the answers to the seven diversity and inclusiveness questions as explanatory or independent variables. We performed this analysis first for the pre-intervention scores for all participants, finding that (as expected) the seven diversity and inclusiveness questions explained a significant proportion of the variance in wellbeing scores ($R^2 = 0.15, F(7,1145) = 29.18, p = 3.3 \times 10^{-37}$). We then repeated the analysis for: the pre-intervention scores of just those people who completed the post-intervention questionnaire ($R^2 = 0.25, F(7,253) = 12.08, p = 2.7 \times 10^{-13}$), the post-intervention scores ($R^2 = 0.34, F(7,253) = 18.71, p = 4.7 \times 10^{-20}$) and the changes from pre to post ($R^2 = 0.13, F(7,253) = 5.60, p = 5.1 \times 10^{-6}$). Figure 2 plots the resulting coefficients, with error bars displaying one standard error either side of the estimate.

The coefficient for an aspect of diversity and inclusiveness estimates the increase in wellbeing score that would be associated with a one-point increase in the score for that aspect (assuming all other aspects stayed the same).

The pattern of results shows that all aspects of diversity and inclusiveness appear to be positively associated with wellbeing. It is also apparent that proactively building new relationships plays a particularly important role.

Figure 3 shows the corresponding results for openness to change, again for pre-intervention scores for all participants ($R^2 = 0.30, F(7,1145) = 70.14, p = 2.2 \times 10^{-84}$), pre-intervention scores for just those

	Pre-intervention		Post-intervention		p-value	Percentage increase
	Mean	St. dev.	Mean	St. dev.		
Adjusting behaviour to work with people from different cultures	73.1	19.2	75.8	16.7	0.00979	3.7%
Mixing with people very different to oneself	71.8	20.4	73.1	18.8	0.14404	1.8%
Proactively building new relationships at work	63.2	21.7	65.9	21.4	0.00652	4.3%
Seeking input from quieter people	64.8	20.3	68.7	18.9	0.00042	6.0%
Disengaging when with certain people or when hearing particular accents (scored in reverse)	66.6	24.7	71.1	23.1	0.00394	6.8%
Speaking up against stereotyping	62.0	21.7	66.8	19.2	0.00011	7.8%
Choosing to work with people from other areas of the business	62.1	21.3	66.8	19.8	0.00004	7.5%

Table 3: Comparison of the pre- and post-intervention scores for the seven aspects of diversity and inclusiveness. The intervention produced improvements in all aspects of inclusiveness.

people who completed the post-intervention questionnaire ($R^2 = 0.37$, $F(7,253) = 20.90$, $p = 4.0 \times 10^{-22}$), post-intervention scores ($R^2 = 0.45$, $F(7,253) = 29.83$, $p = 6.9 \times 10^{-30}$) and changes from pre to post ($R^2 = 0.22$, $F(7,253) = 10.29$, $p = 2.4 \times 10^{-11}$).

All aspects of diversity and inclusiveness appear to be positively associated with openness to change. This time three aspects appear to be more important than the others: adjusting behaviour to work with

people from different cultures, proactively building new relationships and choosing to work with people from other areas in the business.

We have reported the “raw” regression coefficients here, rather than standardised coefficients, because it allows direct comparison of the coefficients from pre-intervention, post-intervention and change data, and allows an interpretation of the values in terms of points of wellbeing (respectively points of openness to change) per point of diversity and inclusiveness. However, we attach the caveat that there are small differences in the standard deviations of the seven areas of diversity and inclusiveness, as shown for instance in Table 3.

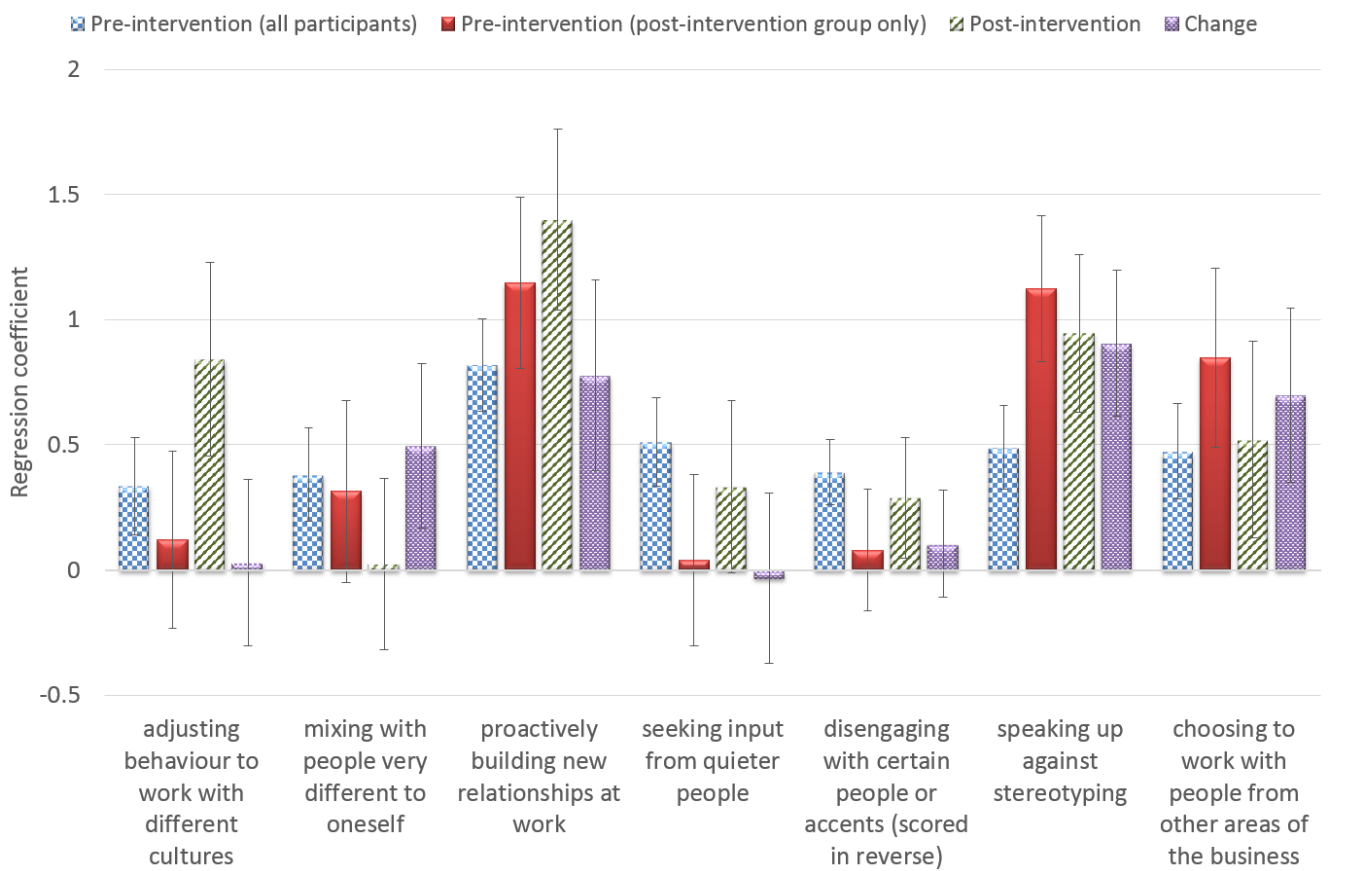


Figure 2: Regression coefficients for the seven diversity and inclusiveness questions as explanatory variables of wellbeing scores.

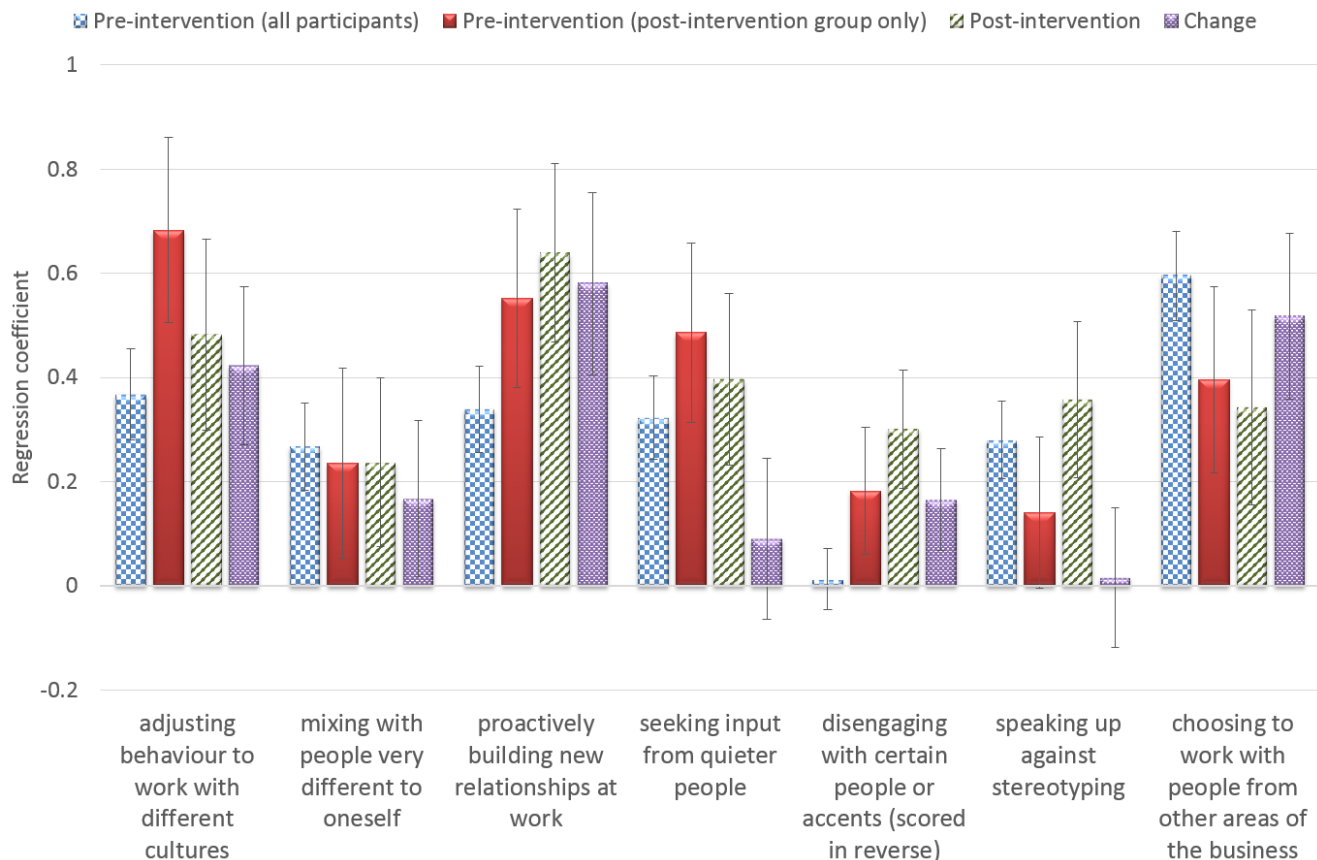


Figure 3: Regression coefficients for the seven diversity and inclusiveness questions as explanatory variables of openness to change scores.

3. Analysis of specific areas of wellbeing and openness to change

We have demonstrated that inclusiveness is associated with wellbeing and openness to change, and we identified the aspects of diversity and inclusiveness that seem to play a particularly important role in these relationships. In this section we consider which aspects of wellbeing are most strongly related to inclusiveness and which aspects of openness to change are most strongly related to inclusiveness.

Initial relationships between inclusiveness and the aspects of wellbeing and openness to change

A correlational analysis on the pre-intervention data was conducted to see whether inclusiveness was statistically significantly related to each specific underlying dimension of wellbeing and openness to change. The Pearson correlation coefficients are shown in Table 4 and Table 5. Because we are interested in comparing the results for each underlying dimension, we now additionally report 95% confidence intervals for the correlation coefficients, calculated using Fisher's z.

Inclusiveness is significantly correlated with each of the underlying dimensions of wellbeing. This includes physical health, where the link to inclusive working practices is the least obvious. Finding it easy to talk to others is the aspect of wellbeing that is most strongly related to inclusiveness, which

would seem to make sense. The correlations for openness to change are generally stronger than those for wellbeing. *A priori*, perhaps, one might not expect health and wellbeing areas to be as strongly linked to inclusiveness as openness to change which seems important for inclusiveness. The most strongly related aspect is looking for new ways of doing things.

WELLNESS VARIABLE	Pearson <i>r</i>	<i>p</i> -value	95% confidence interval
COPING	0.28	1.2×10^{-21}	0.22 - 0.33
TALKING TO OTHERS	0.38	1.9×10^{-40}	0.33 - 0.43
DECISION MAKING	0.31	1.0×10^{-27}	0.26 - 0.36
FEELING VALUED	0.28	4.3×10^{-22}	0.23 - 0.33
HAPPINESS	0.26	1.3×10^{-19}	0.21 - 0.32
MEANING IN LIFE	0.30	3.0×10^{-25}	0.25 - 0.35
PHYSICAL HEALTH	0.14	3.9×10^{-6}	0.08 - 0.19
CLOSE RELATIONSHIPS	0.19	2.5×10^{-11}	0.14 - 0.25

Table 4: Correlations between diversity and inclusiveness scores and the eight aspects of wellbeing, together with confidence intervals, based on pre-intervention data.

OPENNESS VARIABLE	Pearson <i>r</i>	<i>p</i> -value	95% confidence interval
OPEN MINDED	0.42	2.0×10^{-50}	0.37 - 0.47
ENJOYING CHANGE	0.40	3.6×10^{-46}	0.35 - 0.45
ENJOYING CHANGE AT WORK	0.37	2.9×10^{-39}	0.32 - 0.42
NEW WAYS OF DOING THINGS	0.48	4.2×10^{-66}	0.43 - 0.52

Table 5: Correlations between diversity and inclusiveness scores and the four aspects of openness to change, together with confidence intervals, based on pre-intervention data.

	Pre-intervention		Post-intervention		p-value	Percentage increase
	Mean	St. dev.	Mean	St. dev.		
COPING	71.1	17.7	73.0	15.7	0.0336	2.7%
TALKING TO OTHERS	73.6	17.8	75.3	17.6	0.0860	2.3%
DECISION MAKING	67.6	20.8	70.8	18.4	0.0026	4.7%
FEELING VALUED	64.9	21.9	69.8	19.3	0.0002	7.6%
HAPPINESS	72.0	20.6	74.2	18.5	0.0329	3.1%
MEANING IN LIFE	76.0	19.9	77.3	18.3	0.1189	1.8%
PHYSICAL HEALTH	71.9	21.9	74.7	19.1	0.0096	3.9%
CLOSE RELATIONSHIPS	82.0	21.0	82.4	20.2	0.3659	0.5%

Table 6: Comparison of the pre- and post-intervention scores for the eight aspects of wellbeing. All had increased post-intervention.

Results from the intervention

Table 6 shows a comparison of the pre- and post-intervention scores for the eight dimensions of wellbeing. All of these show increases over the course of the intervention, and the increases were significant at $p < 0.05$ for five of the eight aspects (using a one-tailed t -test). Table 7 shows the corresponding results for the four dimensions of openness to change. Again, all aspects increased over the course of the intervention, and the increases were significant at $p < 0.05$ for two of the four aspects.

In Section 1, Table 2, we reported the correlations using the post-intervention data, and the changes from pre- to post-intervention measures. We next performed the analogous analyses for the individual dimensions of wellbeing and openness to change. Because of the volume of results we display these graphically, in Figure 4 and Figure 5 (the 95% confidence intervals are shown as error bars).

	Pre-intervention		Post-intervention		p-value	Percentage increase
	Mean	St. dev.	Mean	St. dev.		
OPEN MINDED	79.3	15.1	79.4	14.6	0.426	0.2%
ENJOYING CHANGE	71.0	18.1	73.1	16.3	0.013	3.1%
ENJOYING CHANGE AT WORK	71.0	18.5	72.2	16.9	0.103	1.8%
NEW WAYS OF DOING THINGS	69.7	20.0	71.6	18.8	0.042	2.8%

Table 7: Comparison of the pre- and post-intervention scores for the four aspects of openness to change. All had increased post-intervention.

All correlations are positive. Overall, the results for wellbeing suggest that finding it easy to talk to others is the wellbeing dimension most strongly related to inclusiveness; physical health and the quality of one's closest relationship are the least. For openness to change all four different aspects show similar effect sizes.

Summary

This paper reported on the statistical relationships between diversity and inclusiveness behaviours, wellbeing and openness to change, based on an analysis of questionnaire data from 1,153 working age adults who participated in a six-week workplace programme to promote inclusive working practices. It also reported the correlations between behavioural flexibility and each of these variables.

Our key findings are that wellbeing and openness to change are linked with diversity and inclusiveness behaviours: the more inclusive a person is, the better their mental wellbeing, and the more open they are to change, including change in the workplace.

These findings are supported with an analysis that compared the pre- and post-programme questionnaire responses, allowing us to measure the changes that occurred over the course of the inclusiveness programme. The results confirm that the intervention delivered improvements in diversity

and inclusiveness behaviours, as well as consequential increases in wellbeing and openness to change. Furthermore, the changes were dose-related, so that those people whose diversity and inclusiveness scores increased the most showed the biggest improvements in wellbeing and openness to change.

Of the inclusive working practices we considered, proactively building new relationships plays a particularly important role in wellbeing. For openness to change, three inclusive practices appear to be more important than the others: adapting one's actions and communication style, proactively building new relationships and choosing to work with people from other areas in the business. On the other side, finding it easy to talk to others is the aspect of wellbeing that is most impacted by an increase in inclusive behaviour.

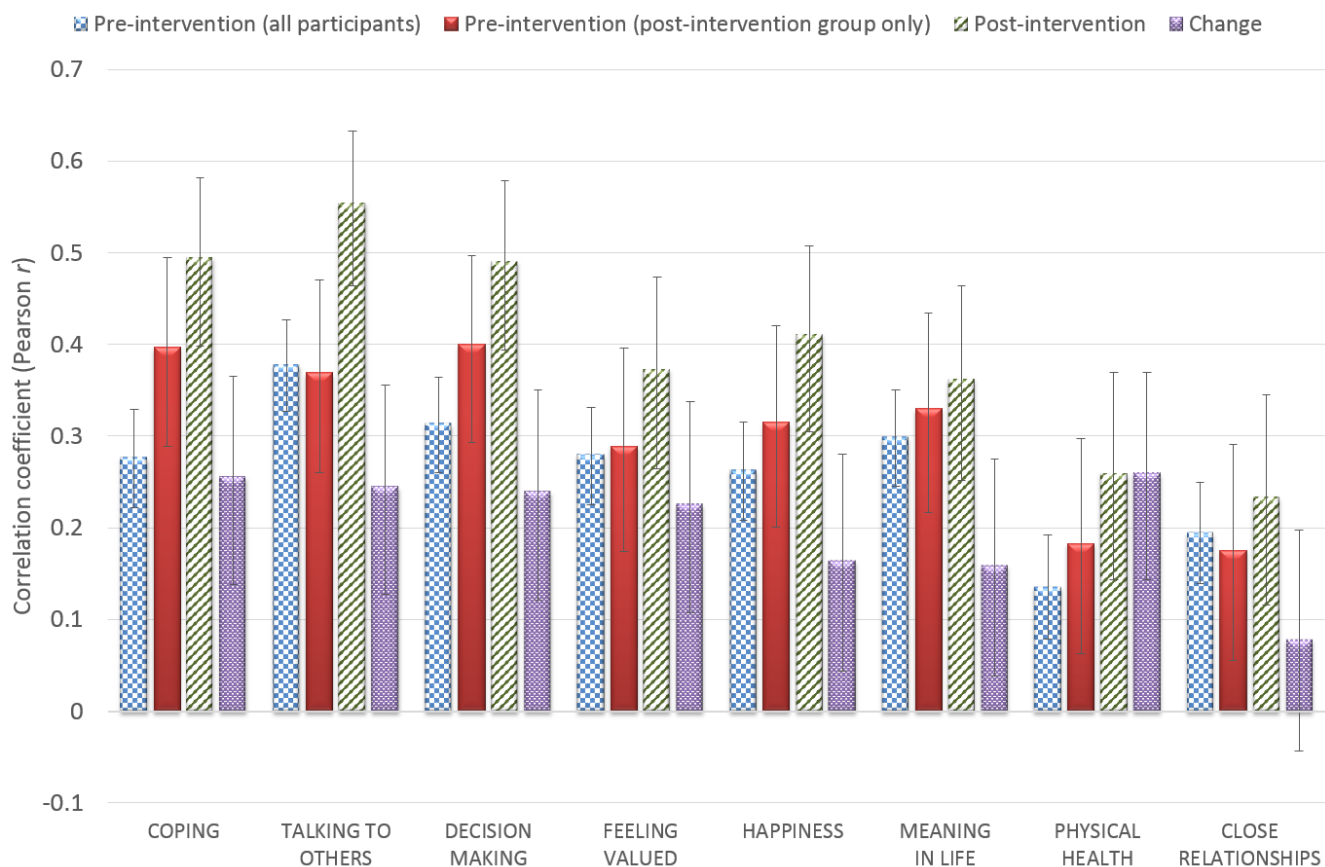


Figure 4: Correlations between each wellbeing question and the diversity and inclusiveness score.

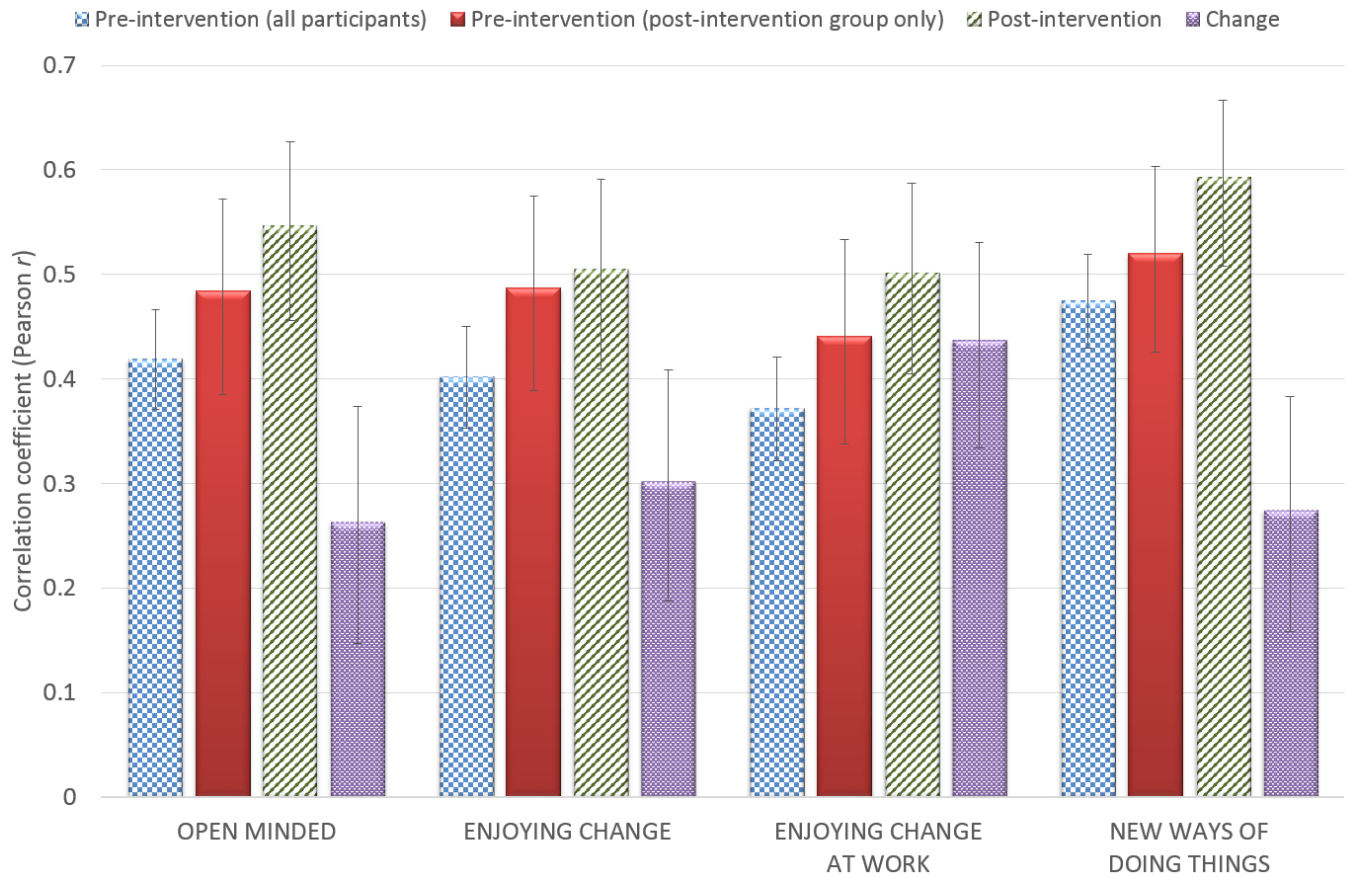


Figure 5: Correlations between each openness to change question and the diversity and inclusiveness score.

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Do Something Different is a Conscious Business based in Brighton, United Kingdom and delivering behaviour change programmes globally.

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