## Compendium of Emotional Well-Being Measures

Introduction and Purpose:

The Mental Health Services Act (Proposition 63) identifies 8 long-term outcomes expected as a result of expanding prevention and early intervention (PEI) programs across the state of California:

Exhibit 1: MHSA Outcomes Mediated by Emotional Well-Being

- Reduced prolonged suffering,
- Reduced stigma and discrimination,
- Reduced incarceration,
- Reduced removal from home,
- Reduced suicide,
- Reduced school drop-out,
- Reduced unemployment, and
- Reduced homelessness.
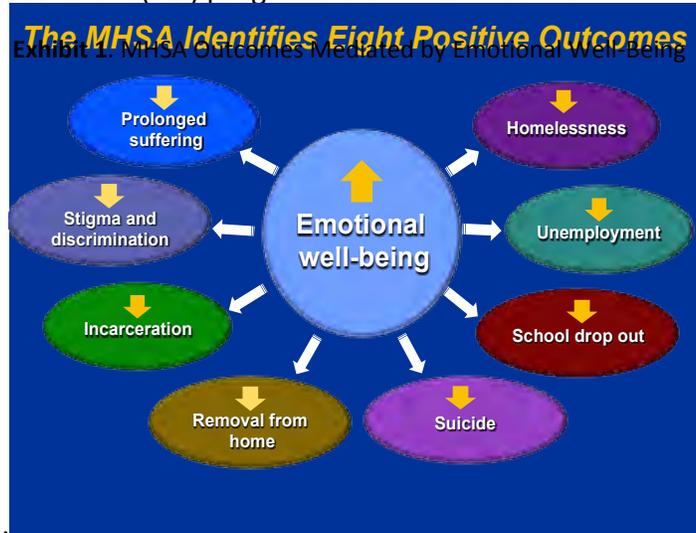
In the RAND and SRI team's provision of training, technical assistance and capacity building (TTACB) to support California counties with their PEI activities, we developed resource materials on measures of youth and adult *emotional well-being*. Based on a substantial body of research and the statewide evaluation logic models produced by RAND (Watkins, Burnam, Okeke, Setodji, 2012), we identified emotional well-being as a mediator to MHSA's long-term outcomes, as well as an important indicator in its own right (see exhibit 1).

Our team created the compendium of emotional well-being measures to assist counties in incorporating cross-program outcome assessment into their evaluation plans, and to help meet the following TTACB objectives:

- Strengthen community capacity to formulate and conduct evaluations, and to use appropriate data and analytic techniques to inform planning and resource allocation.
- Establish baseline indicators and methods of tracking and analyzing community level indicators.
- Engage stakeholders in evaluation efforts and increase capacity to understand and utilize outcome data through focused group training, providing accessible resources, and consultation.

Methods:

To compile information about potential measures that might be suitable for countywide PEI implementation, we reviewed several existing compendiums of measures (e.g., *Measuring the Promise: A Compendium of Recovery Measures, Volume II*, which provides detailed summaries of current recovery-related instruments for adult mental health system stakeholders to use in research and evaluation; *From Soft Skills to Hard Data: Measuring Youth Program Outcomes*,

which summarizes information about tools to measure youth progress in developing important social-emotional skills that cut across academic achievement and other distal youth outcomes), reviewed peer-reviewed articles on measuring emotional well-being and related concepts, and searched national registries of evidence based practices to identify measures used in rigorous studies of prevention and early intervention mental health programs.

For the 50 measures culled from these sources, we summarized each measure's characteristics and rated its feasibility and utility based on the following:

- Face validity (Do the items seem to measure something useful?)
- Feasibility (Are there fees to use the measure? What is the burden of administration?)
- Psychometric properties (Is the measure sensitive to change? Does it show documented reliability and validity?)
- Appropriateness for diverse populations (Is the measure age appropriate, culturally appropriate, available in multiple languages?)
- Availability of comparable data at the state or national levels.

We applied global ratings to each measure (i.e., *highly recommended*, *recommended*, and *not recommended*). These ratings heavily weighted feasibility and appropriateness for diverse populations to reduce potential barriers that counties could face in implementation. In general, we rated tools as *not recommended* if they were cost prohibitive, not well-supported with psychometrics, not available in multiple languages, and/or too lengthy.

We compiled information on two Excel worksheets (one describes measures for adults, one describes measures for youth), including links to relevant web pages and citations. In total, we identified 11 *highly recommended* measures (7 adult, 4 youth), 10 *recommended* measures (4 adult, 6 youth), and 29 *not recommended* measures (13 adult, 16 youth).

How to Use the Compendium:

Be clear on your definition of well-being. In our search for youth and adult measures of emotional well-being, we came across measures of many different constructs including disease-specific measures (where well-being is defined as the absence of symptoms of anxiety or depression, for example), interpersonal strengths, psychological functioning, resiliency, and quality of life. We focused on the measures specifically related to constructs defined here: (1) emotional well-being as a broad symptom assessment, and (2) psychological functioning, measuring an individual's ability to meet daily demands at home, in the community, at school—and even find enjoyment in those daily activities. You will need to make sure you have consensus with your stakeholders (e.g., advisory board, programs, community representatives) on how your county defines emotional well-being before selecting a measure.

Be clear on your priorities for a measure. Ask what is most important to your stakeholders, such as: ease and meaningfulness of interpretation, cost, cultural competence, sensitivity of the measure across the age span, availability in multiple languages, appropriateness for low literacy

levels? For example, would you choose a long but free measure over a short but expensive measure?

What other criteria do you have to consider? Rather than assessing solely the availability of translations, it is important to assess whether the items are culturally appropriate. We recommend that in your review of the measures, you consider literacy level, availability of different administration formats (e.g., verbal, written, pictorial), and relevance to special populations (e.g., ethnic groups, LGBTQI, SMI, older adults, TAY).

Also, it may be important to consider whether a measure includes subscales and/or total scores. Subscales make reporting more complex, but can provide useful information across multiple dimensions. A measure without a total score (or any scores) such as epidemiological surveys (e.g., the California Health Interview Survey) can make simple comparisons across multiple items more difficult to report.

Finally, you should consider how to manage the data. Does the measure allow for low cost data management and scoring processes such as hand scoring or Web-based scoring? Consider a plan for data entry, matching repeated measures with the same clients, data monitoring/cleaning, scoring, and synthesizing results.

Work collaboratively to get stakeholders on board. Getting multiple programs to agree to a common measure will likely be difficult. So be clear what the advantages and disadvantages to using a common measure could be, and be prepared to work through those challenges with your program partners and other stakeholders.

Recognize caveats and limitations of this compendium. This compendium of 50 measures of emotional well-being does not necessarily include all tools available to measure the concept—other measures may exist. In addition, the ratings of each measure reflect the RAND and SRI team members' reviews and perceptions according to operationalized criteria, but these opinions and recommendations do not necessarily represent the views of the institutions they represent or the funder, CalMHSA.

*On the next 4 pages please zoom to 75% to view.