Adult learning, health and well-being – changing lives

JOHN FIELD, UNIVERSITY OF STIRLING

Abstract
It is increasingly important for adult educators to articulate more clearly their understanding of the benefits and outcomes of adult learning. This paper reviews existing evidence of the impact of participation in education, and particularly explores the relevance of recent studies of how learning has influenced adults’ health and well-being. Overall, the balance of evidence suggests that learning has clear, identifiable positive effects for both well-being and health. Adult educators should, though, treat these findings with care. The relationships are probabilistic, and do not imply that all individuals will benefit in the same ways from any type of learning; and in most cases, the effects seem relatively small. However, given the well-known challenges of persuading adults to improve their health or well-being by other means, this evidence is important, and confirms practitioners experiences of the transformations that learning can produce in people’s lives.

Introduction
What does adult education do? And how does it affect learners’ lives? Practitioners often tell spell-binding stories about people who grow and shine as persons, or communities who hold their heads high. But are these more than individual anecdotes? The answers to these questions matter a great deal. While many people will see adult education as a good thing in its own right, even as symbolic of a civilised way of living, this is not enough to persuade policy makers that it is a public good which merits public funding. Equally importantly, it means that adult education is all too easily overlooked by many public agencies whose remit is not directly educational. So the question of what impact people can expect when they take an adult course is an important one for policy and practice, for learners and providers, as well as for researchers, who are interested in the different ways in which adult learning can change people’s lives.
This paper explores the ways in which adult learning appears to affect health and well-being. This is relatively new territory for researchers, who only recently have started to pay serious attention to the social outcomes of adult learning. And although researchers have had plenty to say about the personal outcomes of learning, most of it has been based on a relatively narrow evidence base. This paper assesses and builds on recent studies that use advanced statistical techniques to explore longitudinal data, following people’s behaviour over time, and trying to establish what influence adult learning appears to have on a person’s life course. I start, though, by placing this important body of research in the wider context of policy interest in the wider outcomes of learning.

Assessing the wider outcomes of learning

For most European policy-makers the primary goals of education are to promote the twin aims of economic prosperity and social cohesion. As the European Council recently put it, education and training support wider policy goals by equipping citizens with the skills and competences which the European economy and European society need in order to remain competitive and innovative, but also by helping to promote social cohesion and inclusion (European Council 2011). This marks an important shift over time, with competitiveness and inclusion rising to the top of the agenda, while the personal and democratic functions of education are being relegated to a subordinate position, if not actually disappearing from view. The European Commission proposal to merge the Grundtvig programme for adult education into its Leonardo initiative for vocational training neatly exemplifies this wider trend.

Many adult educators see this trend as an important, even critical loss (Biesta 2006). Certainly it represents a change from earlier, more generous definitions of lifelong education, such as those espoused by the Council of Europe and the United Nations Educational, Social and Cultural Organisation (UNESCO) in the early 1970s (Field 2006, 10-18). Even if policy makers still envisage a continuing public role for adult education in respect of economic performance and social inclusion, that role is becoming more narrow and circumscribed. It is also increasingly subject to measurement, with a focus more on outcomes than on inputs (Ioannidou 2007).

Elsewhere I have suggested that this is part of a wider process of change within the welfare state, which can be understood at least partly as an attempt by public

---

1 To be explicit, I am not criticising qualitative research as such. I am only saying that all types of research method have their limitations, including small scale qualitative studies. And longitudinal survey studies, of course.
sector managers to convince politicians and the wider public of the value of the services that they provide (Field 2006). Other commentators, including the Irish researcher Fergal Finnegan, see this trend as part of a wider shift towards what they call neo-liberalism, by which they mean a preference for marketisation of services and massive reductions in the role of the state (Finnegan 2008). Either way, the search for measurable evidence which can inform decision-making has become an important feature of contemporary public policy, and adult education is no exception. This has been very visibly the case at European level, where the Lisbon agreement empowers the European Commission to develop policy in a number of new areas, including education, through what it called the ‘open method of co-ordination’. In practice, this involves an attempt to use new techniques of public management to steer the complex policies of the European member states in a common direction; one of those techniques has been the development of quantitative (and sometimes qualitative) benchmarks and indicators against which Member States can be compared and evaluated (Lange and Alexiadou 2007).

Wider interest in the evidence base for policy provides the context in which researchers have paid increasing attention to the outcomes of adult learning. This paper now turns to examine the evidence for claims that lifelong learning has a measurable impact on people’s lives. In particular, it explores research into the impact of adult learning on individual well-being and health, and on social capital (defined here as active engagement in civil society). A recent AONTAS report argued that such research is valuable partly because it shows how investment in adult learning can help reduce state spending in other policy areas, and partly because it confirms the role of adult learning in promoting participation, democracy and equity (Bailey, Breen and Ward 2010, 11). In short, it enables us to argue that adult learning has a public value.

**A strengthening evidence base**

Researchers have had little to say about the wider effects of adult learning until relatively recently. By contrast, we know a great deal about the economic consequences of adult learning, though we probably don’t know as much as we think we do. At the level of the individual, much recent research suggests that while adult education has a positive influence on people’s earnings and employability, the average effects are relatively small (for example see Jenkins et al 2003). However, adult learning has a larger impact for some people. First, there is good evidence of a clear return, and possibly increasingly so, to improvements in basic adult skills (e.g. De Coulon, Marcenaro-Gutierrez and Vignoles 2007).
Interestingly, in an international context, the value of basic skills in the UK labour market is comparatively high (Hansen and Vignoles 2005). This may reflect the high proportion of UK adults with comparatively poor basic skills as compared with other some other countries; if so, then it is worth noting that this is a pattern that Ireland broadly shares with the UK. As well as showing clear returns to improved basic skills, there is also some evidence that adult learning can sometimes deliver greater benefits to women, and delivers them faster than to men (Blanden et al 2010; Jenkins 2006). This almost certainly reflects the way in which women can use educational credentials to help compensate for other relative disadvantages within the labour market.

To summarise, much recent UK research shows that participating in adult learning is likely to improve their economic situation. While this improvement is relatively small on average, it is larger for women than for men, and larger still for people who improve their basic skills. These studies are based on the analysis of large longitudinal data sets, such as the British Cohort Studies (most analyses tend to use the 1970 and 1958 birth cohorts) or the British Household Panel Survey. The main advantage of the latter is that it allows us to look at people of different ages; the birth cohort surveys may be better-suited to allowing us to make informed judgements about cause and effect, but by their nature each survey sample is taken from only one generation. Nevertheless, these are large scale sets of data, and for around a decade they have been increasingly used to study the wider social and personal consequences of adult learning. While much of the initial work has been Scandinavian and British, it has inspired considerable international interest, and has started to influence international thinking about the collection of data on adult participation in learning (Schuller and Desjardins 2007).

Improvements in one’s economic prospects clearly have a wider impact on one’s life course. There is a relationship between well-being and prosperity, though the relationship becomes much weaker among high earners. And high incomes are also generally associated with good health, for some obvious reasons. There has also been a heated debate in Britain recently over a recent study that presented a wide range of evidence, from a number of different studies, which were said to suggest that life chances were affected as much by relative levels of material equality as by absolute levels of wealth (Wilkinson and Pickett 2009). But health and well-being do not depend only on economic circumstances; they also depend on socio-cultural and individual factors.
There are good reasons for considering well-being to be among the most important outcomes of adult learning. Research into well-being has burgeoned in recent years, and there is no reason to suppose that its relevance is less at a time of hardship and recession. Well-being can be defined as ‘a dynamic state that refers to individuals’ ability to develop their potential, work productively and creatively, build strong and positive relationships with others, and contribute to their community’ (Beddington et al 2008, 1057). It is separate from but related to ideas about positive mental health, with the relationship being understood in terms of resilience and flourishing, and where mental health is seen as more than simply the absence of infirmity or disease (Huppert 2009). The use of this idea has been attacked from a Marxist standpoint as a distraction from the underlying structural causes of poor health, including poor mental health (Ferguson 2008), and from a radical conservative perspective as somehow tending to diminish our view of the human subject (Ecclestone and Hayes 2009).

Well-being, though, cannot be so easily dismissed. It has significance for the wider community as well as for learners themselves; and as well as being desirable in itself, it also has further consequences. For learners, a positive outlook on the future and a sense of one’s ability to take charge of one’s life are indispensable to further, continuing successful learning. Well-being is also associated with better health, higher levels of social and civic engagement, and greater resilience in the face of external crises (Cooper et al 2010). Conversely, the absence of well-being is a cause for wider concern. The recent growth of research into lifelong learning and well-being is therefore an important development.

Social and personal well-being
Researchers have long been interested in the influence of adult learning on personal development, while experiences of the impact of education on learner confidence and self-esteem are frequently mentioned in the professional literature. A considerable body of recent research has explored the relationship between adult learning and well-being. While much of this is positive, participation in learning also has a downside, and there is some evidence that for some people, in some circumstances, learning can be associated with stress and anxiety, and erode factors that have helped people maintain good mental health.

A number of recent studies, including the research undertaken by AONTAS, have drawn on learners’ self-reported judgements of mental health. In her review of community learning, Veronica McGivney reported that participation in learning has positive consequences for mental health (McGivney 1999).
Another British study, based on a survey of people short-listed for adult learning awards, found that almost nine out of ten reported positive emotional of mental health benefits, albeit among what is clearly a rather select sample (Aldridge and Lavender 2000). Another study found that four-fifths of learners aged 51–70 reported a positive impact on such areas as confidence, life satisfaction or their capacity to cope (Dench and Regan 1999). German survey data provide further support for this view (Schleiter 2008), as do the findings of the AONTAS study of community education (Bailey, Breen and Ward 2010, 147). In Britain, there is also experience from projects involving health providers in referring selected patients to learning opportunities (James 2004).

These studies of self-reported wellbeing have recently been supplemented by longitudinal studies. Analyses of cohort survey data show that accredited learning appears to protect individuals against depression, though it seemingly has little or no impact on happiness (Feinstein et al 2003). Participation in learning also has an impact on adults’ levels of life satisfaction, which is an important aspect of well-being, as well as showing gains among learners in optimism and self-rated well-being (Feinstein et al 2003, Hammond and Feinstein 2006). These changes should be understood in the context of the greater confidence and sense of agency that many adult educators have witnessed among their learners. So, again using longitudinal data, Feinstein and Hammond (2006) found that learners were more likely to report gains in self-efficacy and sense of agency (perceived control over important life choices) than non-learners. Again, this is consistent with findings from the AONTAS study of community education (Bailey, Breen and Ward 2010, 148-9).

**Healthy bodies**

It would be consistent with general theories of agency and self-efficacy for active learners to experience overall health benefits as a result of their learning. Here, the longitudinal survey findings are particularly important. Most surveys of self-reported health tend to rely on respondents’ responses, usually to questions about positive health behaviour; for instance, the AONTAS survey asks whether people smoke less, but does not allow for them to say they smoke more (Bailey, Breen and Ward 2010, 152). The longitudinal surveys usually collect data about actual behaviour, as well as self-reported accounts of change; and because they cover such a wide range of issues, and are not confined to the population of learners, they allow for comparisons of different groups and different effects. Thus Feinstein and Hammond used the 1958 cohort survey to compare changes in the health behaviours of learners and non-learners between the ages of 33 and 42,
showing that participation in learning had positive effects in terms of smoking cessation and exercise taken. The same authors also found a growth in self-rated health among those who participated in learning as compared with adults who did not (Feinstein and Hammond 2004, Hammond and Feinstein 2006). Sabates and Feinstein (2006) found that adult learning was positively associated with the probability of taking up cervical screening for women. While the effect sizes are small ones in all these studies, again it is important to note that adult values and behaviour rarely change much, so this finding is of consequence.

Social capital
One possible explanation of greater agency and self-efficacy is that learners have become better at connecting with others. Such connections in turn can have very well-documented consequences for democracy and participation. The positive relationship between adult learning and civic engagement is virtually a foundational myth for many of the individuals and organisations involved in adult learning. Finding evidence for its reality is therefore not simply of academic interest.

Survey data demonstrate a close association between participation in adult learning and engagement in a variety of social and civic activities (Field 2005). Participation in learning tends to enhance social capital, by helping develop social competences, extending social networks, and promoting shared norms and tolerance of others (Schuller et al 2004). The AONTAS survey showed similar trends among community education participants in Ireland, though with stronger effects for community engagement and relatively weak effects for participation in the formal political process (Bailey, Breen and Ward 2010, 127-8). This pattern might have been expected, given the local and non-formal character of much community based learning.

Learning also appears to strengthen people’s support networks. A survey of over 600 literacy and numeracy learners in Scotland over time showed significant increases among females and older people in the proportion going out regularly; greater clarity about future intentions on community involvement; and a rise in the number who could identify someone they could turn to for help. The learners were particularly likely to have extended their ‘bridging’ networks, through contacts with tutors, other staff and fellow students (Tett and Maclachlan 2007). This is consistent with the AONTAS study, where one very clear finding was a self-reported tendency among learners to be willing to talk to new people (Bailey, Breen and Ward 2010, 129).
Taken together, these findings suggest that adult learning has positive direct effects on well-being. There is also some support for the view that adult learning has some positive effects on health. While most of the quantitative studies suggest that the effect size is comparatively small, this is by no means to suggest that it is trivial. Given that policy-makers repeatedly find that influencing the behaviour of adult citizens is difficult, and sometimes downright impossible (as illustrated by the limited success of public health campaigns in many countries), it is highly significant that adult learning has these positive results, both for individuals and for collective groups more widely. Of course, these findings are usually at the aggregate level, and they tend to rest on bodies of evidence that take little account of the experiences of people who drop out along the way, or who are deterred from enrolling by poor provider behaviour. For some people, experiences of learning are deeply unsatisfactory, and the next section explores this issue further. But we should not lose sight of remarkably consistent findings from research that suggests an overall positive influence of adult learning on the way people feel about themselves and their lives.

**Negative outcomes of learning**

It is natural to focus on the positive consequences of learning, especially when so many researchers come from a background of practice. Nevertheless, participation in learning can sometimes have negative consequences; far from improving people’s well-being, it can actively damage it. This is rather different from acknowledging that serious learning can be demanding, even painful, yet worthwhile in the longer term. The study of people nominated for Adult Learners’ Awards – a sample that is likely to be biased towards comparatively successful learners – found that, while there were many benefits, most of their respondents also experienced ‘disbenefits’ such as stress, broken relationships and a new dissatisfaction with one’s present way of life (Aldridge and Lavender 2000).

One factor here is that adult education can evoke – even if unintentionally – unpleasant and stressful experiences from people’s earlier lives. A study of adult basic education participants found that anxieties were particularly acute “if elements of the learning environment recalled people’s previous negative experiences of education or authority, or other traumatic or painful events from their histories” (Barton et al 2007). Further, although learning can help extend some social networks, it can also disrupt existing ones (Barton et al 2007, Field 2009). This is inseparable from the processes of social mobility and change that learning produces. In particular, while it tends to extend those wider and more heterogeneous networks that some social capital analysts call ‘bridging ties’, it can
also disrupt ‘bonding ties’, such as close kinship and neighbourhood connections. And while bonding ties can often form a barrier to social and geographical mobility, they can also provide access to types of social support that can be extremely important in times of trouble (Field 2008). This can in turn increase vulnerability to ill-health, including poor mental health, and undermine resilience.

Conclusions
The evidence is, on balance, persuasive. Adult learning influence people’s income and employability, as well the attitudes and behaviours that affect people’s mental well-being. In principle the benefits could be assigned an economic value, which could then be set against the costs of investing in adult learning. In practice, there are enormous data weaknesses, the relationship seems to be non-linear, and adults’ life-courses are complex and highly context-dependent, so it is highly unlikely that a realistic cost–benefit analysis is feasible or even worthwhile (some might argue that it is better not to know, either because the answer might be inconvenient or because they think it tends to reduce everything to cash). Nevertheless, even if we cannot assign a simple economic value to the well-being that people derive from learning, in general the evidence suggests a clear positive relationship. These effects can be found for some general adult learning as well as vocational learning, and they are particularly marked for basic literacy and numeracy.

A number of qualifications need to be made. First, at best these are probabilistic relationships; their existence does not mean that everyone who takes a course will feel happier and better about themselves. And it is in the nature of longitudinal data that the findings are related to events and experiences that are now in the past; predicting the future on the basis of probabilistic findings is extremely shaky. Second, in all the studies reviewed above, the effect sizes are relatively small. Even so, the findings are reasonably consistent, and we know – for example from health promotion campaigns or health and safety training – that attitudes and behaviour in adult life are entrenched, so even small shifts are significant. Third, it is not possible to be confident about causation, as it is possible that unobserved factors might explain both findings. This can only be clarified through further research. Fourth, much of the quantitative research takes learning as a given, and does not identify those features and types of learning that are particularly likely to promote well-being. Fourth, virtually none of the research on the benefits of learning identifies its costs. None of the studies I have seen even attempts to identify the costs of achieving a particular benefit. This reduces its value for policy makers, who are required to compare
any potential intervention with other ways of achieving similar ends (Behrman 2010). Finally, there are some areas of well-being and health where there is no evidence – at least, not yet – of well-being effects from education and training. In our ageing European societies, it is particularly important that we still lack any evidence on the relationship between learning and dementia, nor do we know yet whether participating in adult learning can counter infant-acquired or genetic disabilities such as dyslexia or ADHD (though it is possible that it can help to address some of the problems that these disabilities produce). We should not over-state the case.

Despite the inevitable limitations of any body of research, and allowing for the gaps, I believe that the longitudinal studies represent a major advance in our knowledge of the economic, individual and social impact of learning. They provide a basis on which further work may develop. This remains, then, a ripe area for further research (Desjardins 2008). It has, of course, benefitted from an explosion of interest in empirical studies of learning and its benefits, and this in turn reflects a growing policy concern for evaluating the impact of particular interventions. The importance of this research for adult learning is, though, troublesome and difficult: it shows that adult learning has positive consequences for a variety of policy domains such as health policy or public welfare, but of course these areas lie outside the responsibility of public educational authorities. It is therefore up to professionals involved in adult learning to take their case to health authorities or social work authorities if they wish this research to influence public policy.

To return to my starting point, adult learning does indeed change lives. More accurately, it offers people resources that they can use to make changes in their own lives. These changes may be particularly important for those who have benefited least from initial education. What we do not yet know fully is what kinds of resources help people to make what kinds of changes. What we do know is that very practical capabilities – sometimes spoken of disparagingly as ‘basic skills’ or even ‘merely instrumental’ – can have dramatic consequences for people’s lives. Beyond that, the evidence simply tells us that adult learning provides resources that can help fuel important changes, but cannot be seen as a ‘pedagogic aspirin’ that works instantly for everyone. But we can be reasonably confident that at its best, adult learning encompasses the instrumental and practical, but also transcends it to offer what Raymond Williams (1983) called ‘resources for a journey of hope’.
References


