

FIT and coping with stress

Stress is frequently perceived as having an environmental or organisational cause rather than one connected with the person and their attitudes and behaviours. The FIT Framework recognises however that there is a dynamic interaction between the person and their situation and that simply changing external factors does not provide a long term solution to any stress problem. Instead FIT works at an individual level with the aim of changing perceptions, behaviours and attitudes. A small change in the person can bring about big changes in how a person perceives their job. On the other hand, the opposite is not usually true, so that major and expensive changes in work practices/cultures have little effect on the person.

FIT enables people to cope with demand and stress by increasing outer FITness (Behavioural Flexibility) and inner FITness (the Constancies) that directs behaviour. The greater an individual's Behavioural Flexibility the more likely they will have the appropriate behaviours relevant to a situation they encounter address life - both at an everyday level and when difficult circumstances arise. But having appropriate behaviours is not enough – the person also needs to be FIT in their thinking so that they can see the demands of life in such a way as to function in an optimum way. In these ways stress (e.g. anxiety and depression) are minimised.

This study sought to examine how a FIT Training programme could help to reduce workplace stress. By following the Do Something Different programme clients were encouraged to broaden their patterns of behaviour and their perceptions of their environment and their self-efficacy. Measures were taken to assess their levels of anxiety and depression and their FIT Profile, which includes a measures of outer and inner FITness (Behavioural Flexibility and the 5 Constancies). Evaluation centred on changes in all of these measures.

Participants

Thirty-four work clients participated in this study. They ranged from 19 to 63 years old and 21 of the clients were women. The criterion for the study meant that only clients who were experiencing high levels of stress (likely to be at least pre-clinical)

took part. See Table 3 for pre-intervention assessment. Clients, predominantly white collar and professional staff, were either self-referred or referred by their organisation.

Training

In an introductory session clients –

- Completed The FIT Profiler
- Completed a stress scale
- Received a 30 day Do Something Different (DSD) Diary
- Were given targets to try new things as part of DSD programme

At a final session they completed The FIT Profiler again.

Outcomes

The FIT DSD intervention was successful both in terms of increasing Behavioural Flexibility and other aspects of the FIT Framework and in reducing anxiety, depression and stress significantly. Table 1 indicates the increases in sub-scales of the FIT Profiler arising from the intervention. All were statistically significant. Only the Social Shaping score did not show changes, meaning that clients had been truthful when completing The FIT Profiler and that the changes in other scores are real.

Table 1. The effects of FIT-DSD on FIT Profiler scores (SD's in brackets)

FIT measure	Pre-intervention	Post-intervention
Overall FITness	89.7 (73.5)	198.1 (109.1)
Behavioural Flexibility	14.7 (11.1)	28.9 (14.3)
FIT Integrity	58.5 (10.1)	67.3 (6.9)
Awareness	5.5 (1.4)	6.7 (1.0)

Balance	5.4 (0.9)	6.2 (0.9)
Conscience	6.8 (1.5)	7.3 (1.0)
Fearlessness	5.1 (1.8)	6.5 (1.3)
Self-responsibility	6.3 (1.3)	6.9 (1.5)
Social shaping	.64	.67

These increases in FITness had profound effects on clients' anxiety, depression and stress scores as shown in Table 2 below. All changes were statistically significant. Correlation and multiple regression analyses confirmed that these changes were as a result of the Do Something Different programme.

Table 2: The effects of FIT-DSD on anxiety, depression and stress scores

Measure	Pre-intervention	Post-Intervention
Anxiety	13.5 (2.0)	10.2 (3.0)
Depression	12.4 (1.9)	9.1 (2.6)
Stress	4.1 (0.8)	3.2 (1.1)

Furthermore these changes meant that the FIT Training was influential in changing individual classification in terms of levels of anxiety and depression. For example, from 26 being scored at clinical levels of anxiety pre-intervention, only 8 were classified in this group post-intervention. See Table 3 for changes in classification.

Table 3: Pre- and post intervention classification of anxiety and depression

	Level	Pre-intervention	Post-intervention
Anxiety	Clinical	26	8
	Marginal	6	8
	Normal	2	18
Depression	Clinical	18	4
	Marginal	11	6
	Normal	5	24

Conclusion

The FIT training used in this study had significant and positive effects. Not only did it increase Behavioural Flexibility and FIT thinking but these increase resulted in reduced anxiety, depression and stress. The FIT training has provided an effective, easily implemented, route to reducing stress. Indeed the effects were sufficient to reduce anxiety and depression from clinical levels which suggests it may be an effective clinical tool too.