Sharing is Caring & Giving is Winning
An Evaluation of a Gift Based Wellbeing Initiative During the COVID-19 Pandemic

ABSTRACT

The COVID-19 pandemic has been the defining health crisis of our generation. In the UK healthcare industry, where pre-pandemic surveys already demonstrated high levels of stress, it is imperative that actions are taken to support the mental wellbeing of staff from its expected psychological fallout. Feasible, low cost and time efficient interventions are warranted. Rewards-based incentives may carry promise.

Our group distributed 129 free wellbeing packages to junior doctors in a busy London Hospital. Open-ended and anonymised surveys were used to gather qualitative data on their effect. Data was analysed thematically and collated into 5 core themes: Emotional Response, Reaction to Initiative, Reaction to Product Choice, Gratitude and Feeling Valued.

Overall, the significant majority of respondents (n=50, 96%) were highly appreciative of the intervention, deeming it both useful and relevant to supporting their mental health. This study bears useful findings for other organisations looking to implement similar low-cost wellbeing strategies.

Keywords: COVID-19, Mental Health, Wellbeing, Support, Healthcare Professionals

Shafiah Muna Abdul Gafoor1 & Navneet Kandhari2
1 St George’s University Hospitals NHS Foundation Trust
2 Royal Brompton and Harefield Hospitals

Correspondence to shafiah.abdulgafoor@nhs.net

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INTRODUCTION

The emergence of the Severe Acute Respiratory Syndrome Coronavirus 2 (SARS-CoV-2) and resultant Corona Virus Disease (COVID-19) pandemic has been the defining health crisis of our generation. Its rapid imminence demanded the swift adaptation of healthcare and public facing services, and in a period of great uncertainty and risk, the vulnerabilities of healthcare professionals and their working environments became widely acknowledged. In order to respond to potential workforce shortages and increased clinical demand, various changes were made to junior doctor training and deployment. Alongside reduced formal training, many faced unfamiliar and daunting challenges, leading to anxiety-eliciting realities and apprehension amongst trainees 1,2. Moreover, infection-control and shielding legislations resulted in staff having to self-isolate for recommended periods, preventing individuals from reaching out to their social support networks; ultimately augmenting morale injury and potential burnout 3.

Overtime, the psychological sequelae from caring for patients with COVID-19 became increasingly apparent, with up to 45% of healthcare staff reporting symptoms of moderate-to-severe depression, anxiety 4, insomnia, self-doubt and distress 5. Common explanations for this include fear of personal infection and concern of infecting their loved ones 2. Interestingly, these findings are in keeping with psychological responses to previous infectious epidemics, where common predictors of distress amongst healthcare professionals included feelings of vulnerability or loss of control, concerns about personal health or family and feeling isolated, long working hours, and lack of support or vital equipment 4,5. As with other global crises, the COVID-19 pandemic can be divided into emotional phases; ‘initial impact’, ‘heroic’, ‘disillusionment’ and ‘recovery’ 6. The emotional downslope seen during the long-lasting disillusionment phase requires the greatest outlay of supportive efforts. Institutions are encouraged to ensure sustained supportive services are in place for the acute phases and aftermath when risk of burnout and psychological stress are at their peak. With respect to the potential impact of COVID-19 on UK healthcare staff, this finding is particularly important to recognise as pre-pandemic surveys of the workforce already showed high levels of work-related stress, low morale, and risk of burnout 4,7.

There is evidence that the NHS can support wellbeing through providing services that improve health and productivity. Given that NHS staff are directly involved in healthcare provision, efforts to protect and promote their mental wellbeing are a justifiable goal 8. Indeed, poor staff wellbeing has been linked with suboptimal patient outcomes 9. Moreover, doctors providing direct care for patients with COVID-19 are more susceptible to mental health problems 10, thereby reinforcing the need for organisations to psychologically support their staff 11. Despite this recognised ‘need’, there has been poor adoption and implementation of wellbeing services in healthcare. The barriers for this include cultural factors, unreal expectations of mental or physical resilience, stigmatisation of mental health disorders resulting in poor user uptake of services, and organisational factors including financial constraints and logistical challenges with coordinating leave and shift work 4,12. The need for simple solutions, feasible within the context of a pandemic with respect to organisational and cost factors is warranted.

The Areas of Work-life model identifies six key determinants of burnout including job workload, individual control, reward, sense of workplace community, fairness, and values 13, all of which can be addressed by organisations to mitigate burnout risk and improve the workplace environment (Table 1). Many of these domains are likely to be further endangered by the pressures of COVID-19. Certainly, workload and control may suffer due to increased clinical demand and need for adherence to protocol, and the ability to maintain a community will be impacted by social distancing and shielding measures. Given these factors, reward and recognition remain viable options to target within the constraints of a COVID-19 adapted landscape. Indeed, measures taken to improve recognition can help promote workplace morale 14 and allow individuals to tolerate a greater workload 15.
Various methods for rewarding staff efforts and behaviour exist. These range from monetary and social incentives such as free parking, consumable items, and discounted offers on wellbeing related services (such as gyms) or dedicated calm rooms. Intrinsic incentives, where individuals derive feelings of reward from the job itself, can be supported through organisation awards or peer-led schemes, such as GREAT-ix which recognises admirable work ethic. Of these rewards-based interventions, gift giving can be seen as a simple and relatively low-cost endeavour. These traits are important to recognise for the feasibility of these initiatives are limited by institutional logistical and budgetary factors.

From a psychological perspective, gift giving is a central aspect of human behaviour, allowing individuals to communicate feelings of appreciation, strengthen social bonds and improve connections. These benefits are further enhanced through the expression of gratitude, altogether culminating to develop a more humanised and adaptable workforce.

End-user acceptability and uptake is another important consideration, and whilst positive results have been noted when individuals are offered an unexpected gift, the evidence for a care-package based intervention in the healthcare setting is limited. Our study therefore aimed to investigate the acceptability and effects of a care-package based intervention on supporting staff mental wellbeing during the COVID-19 pandemic.

**METHODS AND MATERIALS**

<table>
<thead>
<tr>
<th>Domain</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Workload</td>
<td>The balance between job demands and human ability to meet them</td>
</tr>
<tr>
<td>Control</td>
<td>The degree of professional autonomy employees have in their workspaces</td>
</tr>
<tr>
<td>Reward</td>
<td>The sense of feeling recognised and rewarded for work</td>
</tr>
<tr>
<td>Community</td>
<td>The level of social interaction and connection with others at work</td>
</tr>
<tr>
<td>Fairness</td>
<td>The extent to which employees are being treated equitably and with respect</td>
</tr>
<tr>
<td>Values</td>
<td>The degree to which the organisational values match the personal values of their employees</td>
</tr>
</tbody>
</table>

**Table 1 - Areas of Work-life (adapted from Leiter, 2006)**

**Research team and reflexivity**

The research project was conducted by two junior doctors, male and female, at both foundation and core-medical training levels respectively. No relationship was established between participants and researchers prior to commencing the study. Participants were aware of the goals of the project when the packages were distributed. No bias was correlated to researcher selection; prior to, during and after the research project.

**Participant selection**

Participants were selected based on *purposive sampling* methodologies. Our research subjects were selected based on the specific criterion of being junior doctors at a specific hospital in London.

**Care Package Content**

To optimise end-user acceptability, relevant, meaningful care packages with useful products were needed. Psychologists claim that wellbeing is equivocal to ‘psychological wealth’ which takes happiness and mental-health into consideration, but scientists argue that physical health remains a core component of mental wellbeing. Based on these concepts, we aimed to focus our packages (Image 1) on the concepts of ‘improved physical health’ and ‘enhanced psychological wealth’ in the aim of supporting mental wellbeing amongst junior doctors.

**Multivitamins**

Micronutrient status can impact psychological mood. Studies have revealed that Vitamin D...
deficiency is prevalent in the UK and its supplementation can improve mental health and quality of life. Dysregulation in Vitamin-C levels have also been linked to depression. Based on these findings, we felt distributing supplements would be an ideal way to encourage overall health and improve mood amongst the junior doctor cohort.

Refillable water bottles and healthy snacks
Junior doctors working intense schedules often experience compromised break-times, resulting in reduced oral intake and fluid depletion. Refillable water bottles, herbal teas and snacks may be potential solutions to this. Water bottles aim to encourage hydration and are environmentally friendly, herbal teas have shown benefit in reducing anxiety in some individuals, and cereal bars have been linked to increased energy levels and happiness when consumed during working hours.

Souvenirs and bags
Souvenirs form an important component in life altering experiences and individuals may enjoy reminders of significant moments in their lives. Therefore, we felt that distributing ‘thank you’ mugs and magnets would help us demonstrate ‘gratitude’ and help recognise the efforts of healthcare professionals during the pandemic. Tote bags are environmentally friendly, reusable and increasing in popularity. We therefore decided to distribute our products in colourful bags which can later be kept as a memorable keepsake.

Approaching Companies
Forty-five companies were approached via e-mail. Here, we stated our current concern with morale amongst junior doctors, and how a wellbeing pack may be able to boost spirits. In total, we received 19 responses, of which 9 respondents were able to donate to the project. On summation, the care packages consisted of one tote bag, Vitamin C capsules, Vitamin D tablets, a protein drink, a protein cereal bar, a NHS ‘Heroes’ fridge magnet, a NHS ‘heroes – thank you’ mug, beauty cream samples, a refillable water bottle, herbal tea bags and a thank you card. The bags were compiled individually and placed in large cardboard boxes for ease of distribution.

Package distribution
The delivery of the care packages took place over a one-month period in February 2021. Packages were distributed at teaching sessions, socially distanced events and directly to high acuity wards where staff would have faced difficulties in leaving their clinical duties to collect them. Packages were also left in designated office spaces for individuals to collect at their own convenience. In total 129 packages were delivered.

Data collection
Six weeks after circulation of the packages, a six-item questionnaire was distributed to 129 junior doctors in April-2021 via email and SMS messaging to complete at their convenience. Responses were submitted anonymously.

Numerous scales for measuring wellbeing exist. We based our theoretical framework and survey design on content analysis. We were keen to extrapolate both relational and conceptual analyses within our qualitative research; therefore, the final subjective item within our 6-item questionnaire was an open-ended question, requesting respondents to ‘write a few sentences on their thoughts on the wellbeing packages’. By adopting a thematic analysis, we were able to identify, analyse and report themes within the data set, representing some level of pattern or meaning.

Thematic Analyses
The relevance of a theme is largely dependent on the prevalence of the theme across the entire data set. Some researcher judgment is necessary to determine what a theme is. Thematic analyses are often divided into deductive and inductive approaches. An inductive methodology suggests that the themes identified are strongly linked to the data themselves, whereas a deductive analysis is driven by the researcher’s interest in the subject area. We decided to proceed with an inductive approach which allowed the data to determine our themes.

RESULTS
109 junior doctors were approached and 52 responses were established. The reason for 77 non-respondents were not identified. One data-coder coded the data for this research project. The coder was also the co-author and researcher, and was therefore aware of the
description pertaining to the coding tree. Ultimately, the themes were derived from the data manually. We extrapolated the data corpus for individual data items. Within the 52 responses we received, we systemically achieved 99 individual data items. Following thematic analysis, five themes were identified from the data set: Emotional Response (ER), Reaction to Initiative (RI), Reaction to Product Choice (RPC), Gratitude (G) and Feeling Valued (FV). Participant quotations have been presented to illustrate the themes elicited in the study (Table 2).
<table>
<thead>
<tr>
<th>No.</th>
<th>Data items</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Made me feel warm inside</td>
</tr>
<tr>
<td>2</td>
<td>Made me tear up</td>
</tr>
<tr>
<td>3</td>
<td>I loved it so much!</td>
</tr>
<tr>
<td>4</td>
<td>Definitely boosted morale!</td>
</tr>
<tr>
<td>5</td>
<td>Restores my faith in humanity</td>
</tr>
<tr>
<td>6</td>
<td>Put a smile on everyone’s faces</td>
</tr>
<tr>
<td>7</td>
<td>Heart touching!</td>
</tr>
<tr>
<td>8</td>
<td>This made me cry!</td>
</tr>
<tr>
<td>9</td>
<td>After a challenging few months, this is definitely something that cheered me up!</td>
</tr>
<tr>
<td>10</td>
<td>It made my day</td>
</tr>
<tr>
<td>11</td>
<td>Mentally has had such a positive impact on me</td>
</tr>
<tr>
<td>12</td>
<td>It’s the exact pick me up and recognition that was needed</td>
</tr>
<tr>
<td>13</td>
<td>Think it’s very important to have a few memories about the difficult times we’ve been through</td>
</tr>
<tr>
<td>14</td>
<td>Heart touching!</td>
</tr>
<tr>
<td>15</td>
<td>Such a beautiful idea</td>
</tr>
<tr>
<td>16</td>
<td>A very thoughtful idea</td>
</tr>
<tr>
<td>17</td>
<td>The sweetest thing ever</td>
</tr>
<tr>
<td>18</td>
<td>Lovely idea!</td>
</tr>
<tr>
<td>19</td>
<td>Well done to those involved!</td>
</tr>
<tr>
<td>20</td>
<td>Lovely</td>
</tr>
<tr>
<td>21</td>
<td>Great idea</td>
</tr>
<tr>
<td>22</td>
<td>Such a lovely idea!</td>
</tr>
<tr>
<td>23</td>
<td>Brilliant concept</td>
</tr>
<tr>
<td>24</td>
<td>A thoughtful and unexpected idea</td>
</tr>
<tr>
<td>25</td>
<td>It was lovely to get this</td>
</tr>
<tr>
<td>26</td>
<td>Really thoughtful</td>
</tr>
<tr>
<td>27</td>
<td>well received by myself and everyone I’ve spoken to</td>
</tr>
<tr>
<td>28</td>
<td>this was and is a fantastic scheme, one which I hope propagates further.</td>
</tr>
<tr>
<td>29</td>
<td>Nicely put together</td>
</tr>
<tr>
<td>30</td>
<td>Very thoughtful</td>
</tr>
<tr>
<td>31</td>
<td>Thank you for organising this!</td>
</tr>
<tr>
<td>32</td>
<td>this is definitely something that cheered me up!</td>
</tr>
<tr>
<td>33</td>
<td>The wellbeing pack has been such a thoughtful and wonderful gesture that my kind NHS colleagues organised amidst the covid pandemic.</td>
</tr>
<tr>
<td>34</td>
<td>Absolutely lovely thought</td>
</tr>
<tr>
<td>35</td>
<td>Lovely idea!</td>
</tr>
<tr>
<td>36</td>
<td>Very nice to receive the package!</td>
</tr>
<tr>
<td>37</td>
<td>Such a lovely idea</td>
</tr>
<tr>
<td>38</td>
<td>I think it is such a wonderful and thoughtful idea! Love it! 😊</td>
</tr>
<tr>
<td>39</td>
<td>should be encouraged in other hospitals</td>
</tr>
<tr>
<td>40</td>
<td>The wellbeing pack has been such a thoughtful and wonderful gesture</td>
</tr>
</tbody>
</table>
41 To be honest I felt like the overriding message here was “don’t get sick and don’t eat lunch because we need you to keep working”.

42 The products were well thought out

43 I feel the vitamins were a great touch

44 I carry my water bottle into work every day now.

45 Honestly, the bag and the magnet were the only ones worth keeping

46 The skin care products were amazing, the face needs some serious TLC after a long time of facemask wearing.

47 The cup and water bottle were a nice touch too.

48 It's not often as health care professionals we get goodies provoked out for.

49 The items were very relevant to us as medical SHOs as well

50 especially loved the mug with the lovely NHS design and the vitamins which are much needed after working through covid).

51 I particularly liked the magnet and bag!

52 The mug was also very sweet.

53 I liked how personal the gifts were!

54 thank you card made me feel really appreciated!

55 Great range of actually useful healthy products!

56 Loved the bag and magnet in particular!

57 The supplies within the pack are incredibly useful, especially the vitamins!

58 I really enjoyed my tea and treats!

59 The bag is just beautiful!

60 Was a very nice bag of goodies to receive

61 Multivitamins and a shake are not exactly useful.

62 People have just not been bothered to pick up their wellbeing bags since that’s what we got.

63 To be honest, nothing in that bag was interesting or enjoyable to me.

64 If you wanted to put a smile on my face, honestly a bag of Percy Pigs, while not healthy, is all I needed.

64 Many thanks to all the companies that contributed

65 We are very thankful.

66 Thank you

67 Thank you!

68 Thank you for organising!

69 thank you :)

70 Really appreciated the whole thing.

71 Thank you 😊

72 Thank you so much!

73 thank you

74 Thank you for organising this!

75 Thank you to the companies and teams involved!
Table 2 - Participant responses to intervention

<table>
<thead>
<tr>
<th>Emotional response</th>
<th>Reaction to initiative</th>
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<tbody>
<tr>
<td>Fourteen separate data sets within the responses indicated that an emotional response was evoked; two respondents felt the packages were ‘heart touching’, restoring their ‘faith in humanity’. Two respondents reacted with ‘tears’ in a positive way and there was frequent reference to happiness with mention of synonyms such as ‘cheer’, ‘smile’ and ‘pick me up’.</td>
<td>This was the most frequent theme identified with twenty-seven data sets, mostly representing the overall ‘good idea’ and ‘thoughtful gesture’ that was implemented via this wellbeing ‘scheme’. Overall satisfaction was the most popular theme identified and the word ‘idea’ was positively contextualized nine times throughout the data collected. There was specific emphasis on how the packages were deemed ‘thoughtful’. Multiple respondents described the concept with adjectives such as ‘great’, ‘beautiful’, ‘sweet’ and ‘lovely’. Interestingly, there was also encouragement to initiate such ‘schemes’ in ‘other hospitals and there was hope that these ‘ideas’ will ‘propagate further’. Contrasting, one respondent stated that the ‘overriding message was ‘don’t get sick and don’t eat lunch because we need you to keep working’.</td>
</tr>
</tbody>
</table>
one’s worth keeping’. Many doctors defined the ‘gifts’ as ‘healthy’ and ‘relevant’, with specific mention to the vitamins being a ‘great touch’. The face products were also commended and were linked to the relevance to skin care after long periods of ‘facemask wearing’ during the COVID-19 pandemic. Four respondents were dissatisfied. Some felt that the ‘multivitamins and shake’ were ‘not exactly useful’ and there was mention of the package not being ‘interesting or enjoyable’. One participant highlighted they would have preferred unhealthy snacks or sweets instead.

Gratitude
Twenty-three data sets were identified. ‘Thank you’ was the most common word identified overall, with 18 mentions throughout the data set. The doctors ‘appreciated’ the ‘gesture’ and acknowledged the ‘effort’ and ‘hard work’ undertaken by the ‘companies and teams involved’.

Feeling valued
Participants felt both ‘valued’ and ‘appreciated’ which is reflected by twelve data sets within this theme. The doctors felt that the packages ‘encouraged’ them to ‘look after’ themselves and the packages were often described as ‘needed’ with mention of how in-frequent such ‘recognition’ was.

DISCUSSION

The primary aim of our project was to assess the effect of a rewards-based intervention in supporting staff mental health and wellbeing. Secondary outcomes were to gauge the feasibility of this initiative with respect to contextual factors, such as procuring items from local suppliers, and logistical issues with the delivery of our items and maintaining health and safety.

As expected, our data showed that study participants considered pandemic working conditions to be challenging and detrimental to their mental health (ER line 9). This is in keeping with other studies that have also reported burnout and exhaustion amongst the workforce.

Reassuringly, our data showed that the care packages were well received, with many participants stating that the packs made them feel a sense of happiness. A range of feedback was provided in response to package composition. Many commented positively on items that promoted physical health (RPC lines 43-44, 46, 50, 57), whereas others made frequent mention of the souvenir like items such as mugs or tote bags (ER line 13, RPC lines 5, 50, 53-54, 56) or more personal items (RPC line 53, FV line 95). Notably, two participants had negative reactions to the packages, with a lack of usefulness or perceived ulterior motives to providing free items being the main proponents of this (RPC lines 63-64, RI line 41). Despite this, most recipients felt the composition of the package was still ‘relevant’ and ‘useful’ (96%). Ultimately, the majority of responders felt that the wellbeing packages were a good initiative for bolstering morale. This supports the hypothesis that free and unexpected gifts may be a useful aid in supporting workplace mental health and wellbeing. Should other organisations aim to implement a similar intervention, it would be prudent to include a range of items to cater to an array of individual preferences and thus optimise end-user acceptability.

Given that our intervention was provided freely, it should be noted that some participants may have felt obliged to respond positively when completing the survey. To mitigate this, participants were encouraged to respond objectively and assured that their data would be collected anonymously, although we accept acquiescence bias as a limitation to our findings.

Regarding feasibility, our project was deemed acceptable with respect to time and budgetary constraints. The planning phase, which involved determination of package composition and item procurement, began in January 2021. This was achieved within 3 weeks, allowing for the creation and delivery of the care packages throughout February 2021. Package cost was minimised by reaching out to various local businesses and corporate establishments for voluntary donations. Overall, we were able to show that it is possible to procure and deliver care packages in a short time frame using a small team and limited resources. This may prove noteworthy to other organisations where time and cost are limiting factors.
REFERENCES


CONCLUSION

Whilst the long-term efficacy of care-package based interventions in supporting mental health remain to be seen, the shown perceived physical and psychological benefits of this initiative are promising. We conclude that rewards-based incentives may present a worthwhile consideration for other organisations looking for low-cost and simple initiatives to utilise in a pandemic affected workplace or where staff morale has otherwise been impaired.


