



**HorseSense** for Life  
Enriching People's Lives.



## A SOCIAL RETURN ON INVESTMENT

### The social impact created by HorseSense for Life CIC

*Dr. Natalie Lynch ~Involvement Innovation Ltd*

**Horse Sense for Life** is a registered Community Interest Company. We have a network of qualified and professional practitioners experienced and trained to deliver the Eagala model of psychotherapeutic and personal development programmes throughout the UK.

We work with individuals, families, young people and groups to resolve real life dilemmas. Our methods provide a powerful and effective alternative to traditional therapies.

In 2014 Horse Sense for Life commissioned Involvement Innovation Ltd. as an independent research-er. Trials with clients were carried out to quantify the effectiveness of Equine Assisted psychotherapy and learning. This research is ongoing, however primarily results already show high success rates.

We undertook this exercise to provide the necessary information for commissioners of our service.

**Leading the way...** Whilst extensive global research and clinical trials exist to evidence the effectiveness of the Eagala model, not much of this is as yet UK based.



Part of the Eagala network

For more information about Horse Sense for Life and the services we provide visit: [www.horsesenseforlife.org.uk](http://www.horsesenseforlife.org.uk)  
Or email [askme@horsesenseforlife.org.uk](mailto:askme@horsesenseforlife.org.uk)



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## Executive summary

**Involvement Innovation Ltd** undertook this Social Return on Investment (SROI) to evaluate the impact of Horse Sense for Life CIC (HSFL) for a range of stakeholders. Using SROI we will evidence whether Equine Assisted Therapy (EAT) delivered by Horse Sense CIC results in a change in outcomes for the clients who participate and other stakeholders (e.g. wider society). This evaluation will enable HSFL to measure and demonstrate the impact that it makes and improve service delivery by ensuring that activities create the desired outcomes. Demonstrating value for money, wider societal impact and improved wellbeing of participants is critical to HSFLs sustainability.

The report is based on the concept of *Social Return on Investment (SROI)*, which is an established way of attaching monetary values to social outcomes. The purpose of doing this is to ascertain the value for money offered by investments made in *HSFL*.

Overall this research shows that HSFL creates **£241,801.03** of social value. Through conducting this SROI we are able to demonstrate that for every £1 of investment **£4.65** of social value is created.

### Conclusions

Although a single counselling session delivered by HSFL (£150) is more expensive than a talking therapy (average of £45 per session) this research shows that HSFL offers better value for money. Some HSFL clients felt the change they experienced after 6 sessions of horse therapy was similar to that achieved after 6 months of a talking therapy, whilst other clients failed to achieve any positive outcomes with a talking therapy. These findings therefore strongly indicate that EAT should be commissioned alongside side other forms of therapy; especially for those where other therapies have failed to achieve the desired outcomes.



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## About Horse Sense for Life CIC

Horse Sense for Life (HSFL) offer a range of services and programmes aimed at both individuals and organisations. HSFL uses Equine Assisted Therapy (EAT) to provide an experiential approach for clients to work through their issues in an open, safe and non judgmental manner. Programmes are tailored to each client and in a typical session clients interact with horses in a field whilst the HSFL team observes and gives feedback, using 'clean<sup>1</sup> language'. The horses interact in a unique way and it is believed that their behaviour mirrors the clients feelings.

### HSFL clients

Clients approach HSFL to address a wide range of issues; there is therefore no typical client. Some clients present with more serious issues such domestic abuse, depression, self-harm and child abuse. Others attend because they need to make important life decisions. The next section considers the research evidence for EAT.

## Research into Equine Assisted Therapy

This review covers perspectives on why EAT is effective and the clients and problems with which it tends to be most effective. It does not consider material relating to the therapeutic effects of horse *riding*. The majority of EAT takes place in the USA, with the result that most of the literature cited is from there.

### Horses and Therapy.

Much of the literature in this area concentrates on evidence that EAT works, paying scant attention to why it works. However that there is a unique connection between humanity and horses is beyond doubt given the close relationship between the two species which has persisted for centuries. Horses have served as beasts of burden and a mode of transport, and in doing so have also provided human beings with companionship. They figure prominently in mythology, sometimes associated with healing and remain important in contemporary culture.

Responses to horses during therapy are often powerful. This may be because of an unusual combination of characteristics horses possess. On the one hand they are large and powerful, but at the same time, being prey animals, they are nervous and highly sensitive. This combination has been particularly effective at helping aggressive young men to learn different behaviours when they realise that defiance and aggression are not effective with horses; horses will simply leave if they encounter such behaviour. Arguably the characteristics that allow horses to be acutely aware of predators make them very sensitive

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<sup>1</sup> Clean Language helps a client discover and develop symbols and metaphors without being influenced by the phrasing of a question.



to the emotions of humans, which can be mirrored by the horse<sup>2</sup>. Furthermore horses are typically aware of conflicting emotional cues from humans which arise through deception, deliberate or otherwise. According to Roberts: *Horses respond to the internal state of the person, no matter how much the person tries to disguise it*. In the wild, a key survival skill is to communicate fear to other members of the herd, a skill, which seems to allow them to communicate on an emotional level with humans.

Horses display this sensitivity without being judgemental. They cannot know how attractive someone is, nor how successful they might be in their lives. Clients can be much more confident about this element of a horse's behaviour than is possible with a human.

### Does EAT Work?

Most of the available literature on EAT is based on case studies, or groups of case studies, exploring to what extent the process is effective. Each study, taken in isolation can be criticised for being too small in scope to draw conclusions about EAT generally, but taken together, they provide compelling evidence that it can be an effective therapy.

A thread running through this literature is the idea that EAT is particularly effective with "difficult" cases, in other words cases where other therapies have not proved to be effective. However it's not clear to what extent this is simply because EAT, as a non-standard therapy, is used only when conventional therapy has failed. Thus we can say that it is effective in certain "difficult" circumstances, but the absence of material on straightforward cases makes it difficult to say anything at all about them.

A key feature of EAT is that it is a non-verbal therapy which makes it particularly effective where talking therapies have failed, cases which would usually be considered "difficult". For example Schulz et al (2007) describe EAT as being effective with children traumatised by witnessing family violence, noting that the worse the trauma, the more effective the therapy. Mann (2002) showed significant benefits to youth offenders from following an EAT programme after earlier therapies had failed. Related to this is that in some cases, the client does not realise that therapy is taking place, and so are less likely to resist, if resist is what they would otherwise do. Lentini and Knox review a range of effective treatments with children and adolescents who would traditionally be described as "difficult", almost all of which show good results<sup>3</sup>.

EAT has proven particularly effective with the following client groups (although the lack of research in this area means the list can be expected to be incomplete): Violent offenders,

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<sup>2</sup> Frewin, K & Gardiner, B (2005) *New Age Or Old Sage? A Review Of Equine Therapy*. In *the Australian Journal Of Counselling Psychology*, 6, pp13-17.

<sup>3</sup> Lentini, J.A. & Knox, M (2009) *A Qualitative and Quantitative review Of Equine Facilitated Psychotherapy With Children And Adolescents* *The Open Complimentary Medicine Journal* 2009, 1, 51-57



vulnerable young people, gang members, substance abusers, victims of violent crime, sexual or not, ADHD, family therapy, Post-Traumatic Stress Disorder and depression. It can also be used for people seeking personal development.

The literature doesn't make specific claims about cost effectiveness, although it is implied. It is to be expected that EAT would be more expensive per hour than talking based therapies because of the cost of keeping horses. However in cases (typically those which are particularly difficult) where conventional therapies do not achieve acceptable results but EAT does, it would be reasonable to expect EAT to offer better value for money. In the absence of specific research on value for money, it is not possible to quantify this element.

### Summary

There is a small but convincing body of evidence that Equine Assisted Therapy can be effective, especially in circumstances usually considered to be difficult. It is less clear why EAT works, but it seems likely that the unique characteristics of horses, especially their sensitivity and ability to communicate are important.

## Rationale for this research and SROI

As a result of the recent recession there have been significant cuts to public funding and therefore changes to how third sector organisations secure funding. There has been a greater need for organisations to demonstrate the difference they make, especially since the arrival of the Social Value Act 2010 and the move to payment by results.

Although the economy is now recovering recent economic downturn has had wider societal impacts; the public were affected by high unemployment, uncertain employment in addition to a reduction in community support organisations<sup>4</sup>. For some these events will have had a negative impact on wellbeing.

Although NHS funded counselling is available to many there are often long waiting times and clients have little choice about the type of counselling they would like to receive. Little research has been carried out into the impact of Equine Assisted Therapy so this SROI will provide evidence for whether SROI should be routinely offered to patients alongside other forms of therapy by funders.

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<sup>4</sup> (L Ferry:2011 - Budgeting and governing for deficit reduction in the UK public sector: act one 'the comprehensive spending review')





## SROI Principles

SROI follows a set of principles put forward by the *SROI Network*; these are<sup>5</sup>:

- involvement of stakeholders
- a focus on understanding what changes
- valuing the things that matter
- including only things that are material
- avoiding over-claiming
- transparency
- verification of the results

A key element of SROI guidelines is to be conservative about impacts made. This means that where there is doubt about outcomes, the lower estimate is used, and that where no measurement is possible, the outcome is ignored. This means that SROI consistently underestimates the social value of the services it analyses. This is done to ensure that no claims are made which cannot be substantiated.

## SROI Methodology

This section describes the stages that are necessary for completing this SROI.

### Stage 1. Setting Parameters and Impact Map

#### Boundaries

- Create the framework for analysis – this involves deciding what part of the organisation is to be measured and preparing background information. In this case the scope of analysis are the counselling sessions that HSFL deliver.
- Describe how the organisation works and decide on the time period for measurement.

#### Stakeholders

- Identify the stakeholders who experience change (associated with the investment)

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<sup>5</sup> A guide to Social Return on Investment (January 2012). The SROI Network: Accounting for Value



- Ensure materiality (the accountancy term for ensuring that all areas needed to judge an organisations performance are captured) is used to select stakeholders.

#### Impact Map

- Consult/engage stakeholders to aid the design of the theory of change to describe how the organisations activities affect key stakeholders.

### Stage 2: Data Collection

#### Indicators

- Through stakeholder engagement identify appropriate indicators to evidence outcomes.

#### Data Collection

- Use appropriate data collection tools to evidence whether change has taken place and show the incidence of these outcomes.
- Decide on an appropriate benefit period for each outcome and the extent to these drop off overtime.

#### Valuation

- Use existing research and databases to generate proxies to attach monetary values to outcomes.

### Stage 3: Model and calculate

#### Create a cost-benefit model

- Calculate the present value of benefits and investment (SROI ratio)
- Consider displacement<sup>6</sup>, attribution<sup>7</sup> and deadweight<sup>8</sup> for each outcome

### Stage 4: Report

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<sup>6</sup> Displacement is the assessment of how much an outcome has displaced other outcomes

<sup>7</sup> Attribution is the assessment of how much has the outcome was caused by the contribution of other organisations or people

<sup>8</sup> Deadweight is a measure of the amount of outcome that would have happened even if the activity had not taken place



## Report

- Consider and report the SROI that the HSFL creates
- Through sensitivity analysis identify key facts that affect the SROI ratio

The following sections will outline how this methodology was applied to HSFL.

## Scope and Stakeholders

### Scope of The Analysis

This SROI is intended to understand and quantify the value created by HSFL. It will be used to:

- Better understand how HSFL contributes to positive changes in the lives of clients and other stakeholders
- Demonstrate the wider impacts of HSFL
- Identify possible improvements to HSFL
- Provide evidence to future investors that HSFL provides value for money.

### Stakeholders

Stakeholders are defined as individuals or organisations who experience change as a result of the programme being analysed. *Table 1* (Appendix 1) presents the rationale for including or excluding stakeholders in the SROI analysis according to the principle of materiality.

### The Theory of Change

An SROI analysis focusses on the outcomes or changes that occur for the participants who take part in an organisations activities. This SROI therefore tells the story of how HSFL creates change for its participants and the impact these changes make to the participants themselves and to wider society. The theory of change identifies changes or outcomes, both expected and unexpected, brought about by the activity being investigated for the various stakeholders identified. The Theory of Change identifies processes which link interventions to project investment, activities, outputs and outcomes; the relationship between these factors is depicted as the Theory of Change which is presented overleaf in Table 2.



Table 2

Stakeholder	Activity	Outputs	Outcomes
Client	Taking part in sessions	Number of clients reporting improvements on wellbeing, quality of life, relationships, employment prospects	Highlighted in initial assessment: Improved wellbeing, increased social circle, improved quality of life, improved relationships
Friends & Family	Time	Less dependency from loved one Less stress/worry for loved one	Improved Wellbeing
Health organisations		Clients visit their GP less and take less prescription drugs.	Reduction in GP prescription and consultations

Depicting how interventions drive change is a powerful tool for strategic planning because it allows different interventions to be evaluated in terms of their effectiveness and the value for money they offer.

## Stakeholder Engagement

There was no engagement with health professionals because it was impossible to ascertain which individuals should be spoken to, nor was it clear that they would be able to identify the impact of this programme. However information exists locally and nationally on outcomes that this counselling clients experience.

As with other research into EAT our sample was small so we can't be confident about how representative our findings are. However the assumptions upon which the SROI calculations have been based upon have been conservative to compensate for this. The process of engaging stakeholders began by consulting HSFL staff and clients at an open day. Facilitated discussions allowed for in-depth exploration of how HSFL activities contributed to the outcomes experienced by participants and wider society. Further engagement happened through the form of surveys and interviews with HSFL clients. The data collected formed the basis HSFLs Theory of Change. The theory of change formally describes how inputs and activities lead to specific outputs and how these lead to immediate and long term outcomes.



This underpins the analysis and the outcomes shown in the final column of the theory of change in Table 2 (pg 10).

### Identifying Outcomes

By engaging those affected by HSFLs work and understanding what changes for them it is possible to measure and value what changes for them; this is crucial to understanding the true impact of any service. A saturation sampling approach was taken to identify changes that occur for participants. Saturation sampling involves engaging stakeholders until all outcomes have been identified (e.g. no extra information is produced by additional engagement). The outcomes that were identified for HSFLs participants were used to design a participant survey so that respondents could indicate the degree of change they had experienced for each outcome. The outcomes generated through this process are outlined as follows:

## Outcomes that clients experience

### Improved Mental health

Before my sessions with Selina I was very depressed. Everything was an effort....getting out of bed, eating. Even going out and meeting friends. In the end they just stopped asking me out, they got sick of me saying no. Anyway whizz forward to today. I'm now completely different. I have so much more get up and go. I've tried other counselling over the years but this had such a deeper impact. The horses are amazing, I don't know how this [Equine Assisted Therapy] works, but it's had a huge impact on me.

**Sandy aged 52**

### Greater quality of Life

Clients report feeling more confident and having more self esteem and that this had led to them having a greater quality of life.



I am so much more confident now. By working with the horses I was able to understand myself more. Before I didn't understand how anyone could like me. When I first went in the field with the horses it was like they didn't want to know. It's funny, by working with Horse Sense I started to understand my feelings more, as I became more confident the horses would approach me more. It's true, they do mirror your feelings. Now that I have my confidence back life is so much better

**Carol aged 42**

## Reduced social isolation

It is common for people with poor mental wellbeing to find social interactions difficult. Many clients comment that as their mental wellbeing improves their social interactions also improve.

I had to leave my old life behind, I felt alone and very isolated. I saw details of Horse Sense For Life in the hostel where I was staying. I decided to call up and I've never looked back. Working with Selina and the horses enabled me to get my confidence back. I started to make new friends, this made so much difference. Since then I've now moved out of the hostel and rent my own home and I plan to set up a business.

**Amy aged 43**



## Improved relationships with loved ones

As clients work through their problems many refer to how their relationships have improved with friends and family.

I always took those close to me for granted. As my life spiralled out of control I started to drift apart from those close to me and this made things much worse. Without my sessions with the horses I don't think I'd be close to my family again. I've tried other forms of counselling before. Nothing works like this. When I feel my life start to slip back I go back to Horse Sense For Life

**Adam aged 56**

## Reduced likelihood of harm through suicide

Some clients mention feeling suicidal when they started their sessions at HSFL.

I felt terrible before I started my sessions. I was in such a dark place, it's hard to say...but at times I wanted to end it. I'll never know whether I would have acted upon it but thanks to Selina I'm now in a much better place.

**Sarah aged 32**



## Improved wellbeing of family

The family of clients are also impacted by their loved ones improved wellbeing.

My sessions with Selina were arranged for me. I have Asperger's and sometimes find life overwhelming. I've had counselling before where I have to talk to a stranger and I always hated how one-sided it was, I never knew what they were thinking. Whereas I never felt judged by a horse. After sessions with Selina I was able to cope with life more. I left home and started university, my family now worries about me less.

**Robert aged 21**

## Reduction on GP visits and prescription costs

I used to be like a yoyo, up and down all the time. When I was down I would go to the doctor who would give me something for it. I never go now though, I feel I've finally broken the cycle. Through my sessions with Horse Sense I now understand why I feel low which means I can see things much better now.

**Tracey aged 40**





## Data Collection

It is believed that the most robust method for demonstrating change for evaluation is to collect baseline and follow up data for each outcome (to show distance travelled)<sup>9</sup> However for this SROI we asked survey respondents to estimate the change they had experienced. We did this because retrospective pre-test can be a more accurate measure of pre-intervention behaviour because participants may not accurately assess the pre-programme attitudes and behaviours<sup>10</sup>. By the end of the programme their new understanding of the programme may affect their follow-up scores so post and follow-up scores might not be directly comparable. Therefore we were confident that using a retrospective pre-test method would generate robust 'distance travelled' data.

## Programme Impact

This section examines the impact of HSFL sessions on clients with reference to the other factors that may influence outcomes.

To avoid over claiming the impact that HSFL makes we must consider the effects of deadweight, attribution and displacement. The effect of these three factors on the overall impact are expressed as percentages and then deducted from the total impact.

### Deadweight

Deadweight takes into account how much of the outcome would have occurred anyway; even if the service did not exist. To estimate deadweight local and national data was examined to ascertain whether change was happening elsewhere. Deadweight is expressed as a percentage which is then deducted from the total impact. Table 4 (Appendix 3) shows for deductions for deadweight for each outcome.

### Attribution

In many cases change happens because many organisations work together or because of friends and families efforts. Clients were consulted about how much change could be attributed to HSFL. Many clients approached HSFL because they felt that other forms of

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<sup>9</sup> New Economics Foundation

<sup>10</sup> J.Allen, K.Nimmon (2007). Retrospective pretest: A practical technique for evaluation; Journal of industrial teacher education pp27-42. Vol 44 no.3



therapy had failed to achieve the desired outcomes. Clients felt that the improvements that they experienced were entirely attributable to their sessions with HSFL. Whilst participants did not identify any other contributing factors, influences or services we opted for an attribution of 5% to guard against the possibility of over-claiming. This recognises that there might be other unforeseen factors that contributed toward the change that clients experienced.

### Displacement

Displacement is an assessment of how much the outcome has displaced other outcomes. As many clients had tried other forms of therapy and found them to be ineffective we do not feel that positive outcomes have displaced outcomes from elsewhere.

After deducting the effects of deadweight, attribution we can attach monetary values to each outcome.

### Financial proxies

Financial approximations of value are needed to ‘value things that matter’ to stakeholders; one of the principles of SROI.<sup>11</sup> Using this approach proxies (monetary values) were applied to each indicator.

### Valuing Proxies

A range of valuation techniques exist for selecting financial proxies. This information and calculations can be found in Table 4 (Appendix 3) alongside a description of the financial proxy and the source of the proxy. An example is given below:

Outcomes	Financial Proxy	Value per stakeholder	Proxy Source	Outcome incidence (after deadweight, attribution & deadweight deducted)	Total Annual Value produced
Reduced Isolation and Loneliness	The average spending on recreational and cultural.	£805.80 per annum	Survey on household expenditure, ONS, 2010.	12.8	£101,555.00

<sup>11</sup> Nichols J, Lawler E, Nietzert E, Goodspeed T (2009). A guide to social return on investment (London: The Cabinet Office) p. 9



### Drop off

The impact of any programme will diminish overtime so it is important to reflect this when assessing each outcome. The outcome will be affected by factors outside of the programme. To adjust for the effects of drop off it is important to reduce the impact of the outcomes by deducting a percentage from the outcome each year. We do not have research data available to establish the drop off rate but in line with other SROI's on similar outcomes we have adopted a rate/percentage of 33%.

## Social Value on Investment

In the section we present the total social return on investment produced by Horse Sense for Life.

The SROI value is expressed as a ratio where the return (benefits of the programme) are divided by the value of investment.

Before the calculation is made the impact value is adjusted to reflect the present value of the projected outcomes value. This is to reflect the present day value of benefits projected into the future. The interest rate used to discount the value of future benefits is 3.5% as determined in the Government Green Book.

The total present value; at a discount rate of 3.5% is **£241, 801.03**

**The total investment needed to support 30 is £52,000**

Therefore total impact that will be created by HSFL from £52000 of investment has been calculated as follows:

$$\text{SROI} = \frac{\text{£24,801.03 (Total Present Value)}}{\text{£52,000 (Total Inputs)}}$$



## SROI Ratio

The SROI ratio for HSFL is **£4.65: 1**. This means that for every £1 of investment in HSFL **£4.65 of social value is created.**

## Conclusions

The concluding result of the research conducted by Involvement Innovation Ltd is that Horse Sense For Life delivers substantial social value; indicated by an excellent SROI ratio. With an increasing demand for counselling of services, HSFL offers excellent value for money and will be able to help more people through further investment and commissioning.



## Appendix 1

Table 1 – Stakeholder Engagement

Stakeholder	Included?	Reason	Method of Engagement
HSFL clients	Yes	The purpose of HSFL counselling sessions is to improve the lives of its clients	Interview & Surveys
Friends and Family	Yes	Friends and family are affected by their loved ones wellbeing	Common trends in previous studies and feedback from loved one
HSFL	Yes	HSFL funds and administers the programme.	Interviews
The State	Yes	Improvements in client's wellbeing will impact the state.	National and regional datasets
Funders	No	The programme is funded by HSFL, so funders have not been considered separately.	National and regional datasets



Table 2 – Theory of Change

Stakeholder	Activity	Outputs	Outcomes
Client	Taking part in sessions	Number of clients reporting improvements on wellbeing, quality of life, relationships, employment prospects	Highlighted in initial assessment: Improved wellbeing, increased social circle, improved quality of life, improved relationships
Friends & Family	Time	Less dependency from loved one Less stress/worry for loved one	Improved wellbeing
Health organisations		Clients visit their GP less and take less prescription drugs.	Reduction in GP prescription and consultations



## Appendix 2 - Program Inputs

The costs for an individual session is: **£150**

The costs of delivering sessions includes:

Business overheads: marketing, sales, accounts fees, materials

Therapist fees and insurance cover

Horses care costs (rent, feed, maintenance etc)

This SROI was calculated based upon delivering sessions to 30 clients receiving 6 sessions, creating a cost of **£27000**.

As HSFL staff are unpaid we need to add appropriate salary costs so that we can accurately price the service

**Table 1 – Breakdown of HSFL Expenditure (Forecast)**

Item	Expenditure
Cost of 6 sessions (£150 per session)	£27000
Staff*	£25000
<b>Total Spend</b>	<b>£52,000</b>

\*Staff are currently unpaid but their time has been costed.

Selina as CEO – Full time Salary **£35,000** and **50%** of time on this activity = £17,500

Carey as Marketing manager **£30,000** and **25%** of time on activity = £7500

Total spend on delivering sessions to 30 clients is £52000



## Appendix 3 – Calculations

Table 4 – Calculating proxies

Stakeholder group	Outcomes	Indicator	Proxy	Source	Value
Beneficiary	Improved mental wellbeing (reduction in stress, depression & anxiety)	Decrease in number of clients having mental health concerns	Average cost of psychotherapy for six months (£45 per week)	VOIS database SROI Network	£1,170
	Greater quality of life	Proportion reporting an improvement in self esteem and confidence	Average cost of confidence and self esteem course.	VOIS database SROI Network	£450
	Reduced social isolation	number reporting greater social interactions	Average six month household spend on recreation and culture.	2010 survey on household expenditure: ONS	£1510.50
	Improved relationships with loved ones	proportion reporting improved relationships as a result of HSFL	Cost of 6 family counselling sessions:	Social Impact Scotland	£270
	Number of suicidal attempts avoided	proportion reporting reduction in suicidal thoughts	Cost associated with serious suicide attempt	Global value Exchange	£9190
Friends & Family	Improved relationship with loved one	Number of reporting improved relationships with loved one	Cost of 6 stress counselling sessions relating to concerns	Social Impact Scotland	£270
NHS	Reduction in medication	Number reporting reduction in medication	number of prescriptions saved (reported reductions in medication by clients)	Cost of prescription and GP consultation: Source New Economy cost Unit database	£41





Table 4 – Deduction Deadweight, Attribution & Displacement

Stakeholder group	Outcomes	Incidence	Deadweight	Attribution	Displacement
Beneficiary	Improved mental wellbeing (reduction in stress, depression & anxiety)	30	10%	90%	10%
	Greater quality of life	30	5%	90%	10%
	Reduced social isolation	15	5%	90%	10%
	Improved relationships with loved ones	15	5%	90%	10%
	Number of suicidal attempts avoided	3	5%	90%	10%
Friends & Family	Improved relationship with loved one	12	5%	70%	10%
NHS	Number of consultations saved	24	5%	90%	0



Table 5 – Calculating the social value created

Stakeholder group	Outcomes	Outcome incidence (after deadweight, attribution & deadweight deducted)	Total Added value produced	Annual Drop off	Total Value	Present Value*
Beneficiary	Improved mental wellbeing (reduction in stress, depression & anxiety)	21.9	£25,587.90	33%	£119,769.58	£108,402.74
	Greater quality of life	23.1	£10,388.25	33%	£27,229.41	£25,225.61
	Reduced social isolation	11.5	£17434.95	33%	£45,700.03	£42,336.97
	Improved relationships with loved ones	11.5	£3116.48	33%	£8,168.82	£7,567.78
	Number of suicidal attempts avoided	2.3	£21,215.12	33%	£55,608.51	£51,516.29
Friends & Family	Improved relationship with loved one	7.2	£1939.14	33%	£5,082.82	£4708.78
NHS	Reduction in medication	20.5	£841.32	33%	£2,205.25	£2042.96

Total value of benefits £241, 801.03

