

# **Out of the Blue: freedom from the real cause depression Melbourne workshop evaluation**

## **Background**

Around 359 million people worldwide (source: World Health Organization) suffer with depression and emotional shutdown. We often learn at an early age to keep our emotions in check, under wraps, hidden, and that it is easier to keep feelings or emotions at bay, especially the 'unwanted' ones that create discomfort for our loved ones or are judged by society as inappropriate.

**Out of the Blue** was designed to get to the root cause of any sign of shutdown and depression and set yourself free of any limitation. In this workshop you are guided to be open to the energy, passion, and joy of life.

This paper reports on the results of the *Out of the Blue 2½-day Workshop* held in Melbourne, Australia on the 21<sup>st</sup> to 23<sup>rd</sup> February 2014.

## **Program designer and facilitator**

Kevin Billett (CEO and co-founder of *The Journey*) is an inspiring model of the possibility of becoming totally free from the trap of depression. Having suffered from chronic depression for over 20 years, he used journeywork to get to the very root of it and is now a living example of the liberation from the shackles of depression. Kevin has now taken this work further in his *Out of the Blue 2½-day Workshop*, in a very inspired way, to help others set themselves free.

Jan Henderson (Representative for The Journey in Australia and New Zealand) coordinated the planning and 'behind-the-scenes' running of the workshop.

Twenty-four delegates and 23 trainers attended the Melbourne workshop (n=47). Prior to commencing the workshop, 41 (87.2%) participants agreed to complete the 21-item self-report *Depression, Anxiety and Stress Scale (DASS<sub>21</sub>)* questionnaire.

## **Aim:**

To measure any changing levels of distress reported by participants before, and 4-weeks after attending the program.

## **The measurement tool: The DASS<sub>21</sub>**

**It is important to know that this is not a diagnostic questionnaire; it is only a snapshot in time of how distressed people may have been feeling at each time point.**

In completing the questionnaire, the participant is asked to indicate the presence of a symptom over the previous week. Each item is scored from 0 (did not apply to me at all over the last week) to 3 (applied to me very much or most of the time over the past week).

- The DASS is a quantitative measure of distress along the axes of depression, anxiety (symptoms of psychological arousal) and stress (the more cognitive, subjective symptoms of anxiety).
- It is **not** a categorical measure of clinical diagnoses.
- Emotional syndromes like depression and anxiety are intrinsically dimensional – that is, they vary along a continuum of severity (independent of a specific diagnosis).
- The *DASS<sub>21</sub>* was used in this context to show any change that may have occurred following the workshop.

## Results

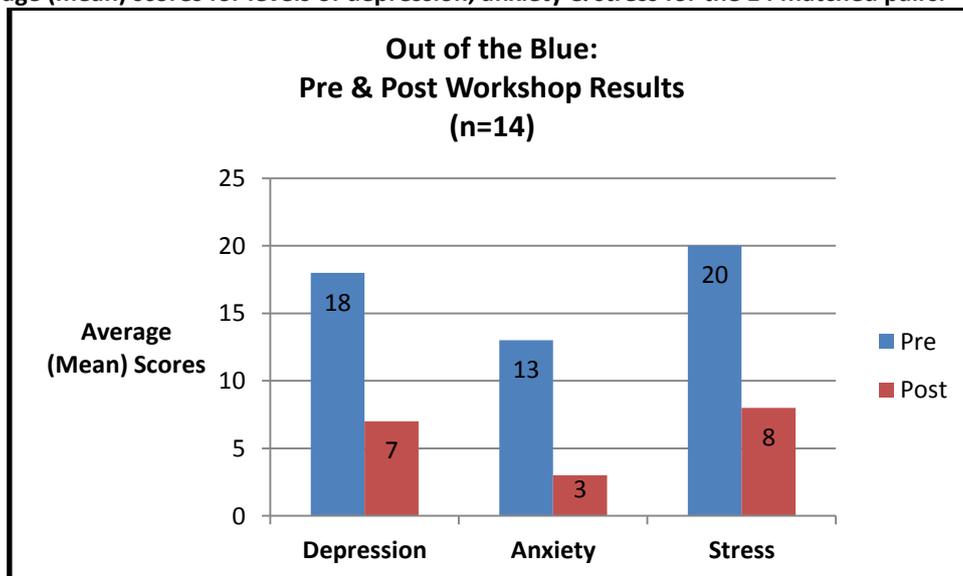
The following are the results of the *Out of the Blue* 2½-day Workshop held in Melbourne, Australia on the 21<sup>st</sup> to 23<sup>rd</sup> February 2014.

Pre-workshop questionnaires were completed in paper format just before commencement of the workshop. Participants chose their own identifying code. The post workshop questionnaire was completed 4-weeks after the workshop, using the SurveyMonkey online software, because participants were from all over Australia.

Forty-one participants completed the pre-workshop questionnaire and 19 completed the post-workshop questionnaire. Following the workshop, some people had forgotten their identity code, resulting in only 14 participants with both pre and post responses (i.e. matched pairs) being available for overall analysis.

As shown in figure 1, the average (mean) scores for levels depression, anxiety and stress for the 14 matched pairs decreased following attendance at the workshop. N.B. these are descriptive statistics only (standard deviation and statistical significance have not been calculated). Based on the available Australian population norms (figure 3), the pre-workshop responses in figure 1 suggest a moderate level of depressive, anxiety and stress symptoms; with the post-workshop responses indicating normal levels of depressive, anxiety and stress symptoms.

**Figure 1: Average (mean) scores for levels of depression, anxiety & stress for the 14 matched pairs.**

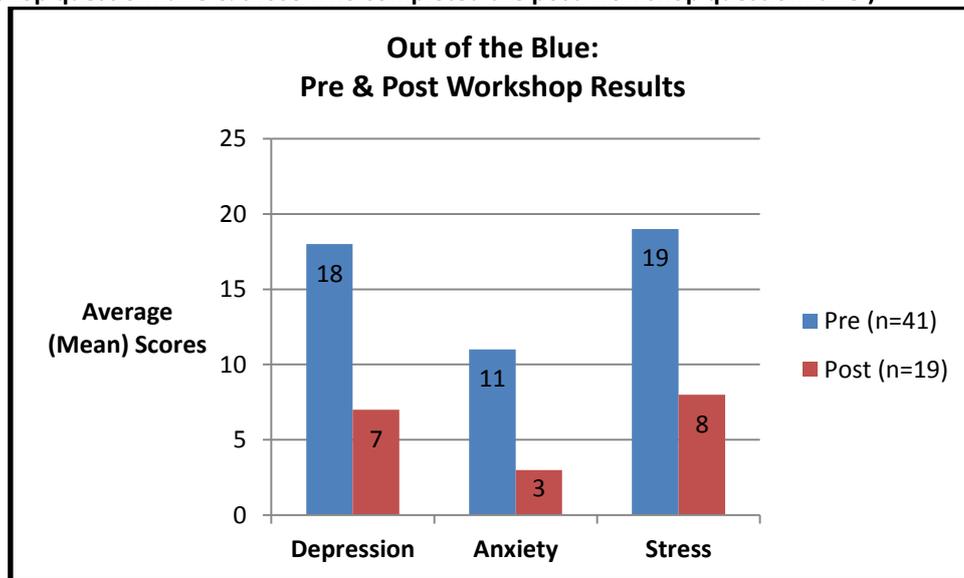


N.B. These results are for those who completed both the pre and the post survey.

The figures presented in the graph were multiplied by 2, to enable comparisons with normative Australian data that used the DASS 42-item instrument – see figure 3.

For additional information, figure 2, shows the average (mean) scores for levels depression, anxiety and stress for the two groups: 1) those who completed the pre-workshop questionnaire and 2) those who completed the post-workshop questionnaire (the 14 matched pairs are included). N.B. these are descriptive statistics only (standard deviation and statistical significance have not been calculated). Based on the available Australian population norms (figure 3), the pre-workshop group responses in figure 2 suggest a moderate level of depressive, anxiety and stress symptoms; with the post-workshop group responses indicating normal levels of depressive, anxiety and stress symptoms.

**Figure 2: Average (mean) scores for levels of depression, anxiety & stress for the two groups (those who completed the pre-workshop questionnaire & those who completed the post-workshop questionnaire.)**



N.B. In these results some participants completed the pre-workshop survey, but did not complete the post-workshop survey, and for 5 participants who completed the post-workshop survey, their code could not be matched with their pre-workshop code.

The figures presented in the graph were multiplied by 2, to enable comparisons with normative Australian data that used the DASS 42-item instrument – see figure 3.

***NB: Interpretation of results***

- The severity labels (normal, mild, moderate, severe) are used to describe the full range of scores in the population, so ‘mild’ for example means that the person is above the population mean but probably still way below the typical severity of someone seeking help (**i.e. it does not mean a mild level of disorder**).
- The individual DASS scores do not define appropriate interventions.
- They should be used in conjunction with all the clinical information available in determining appropriate management for any individual.

Figure 3: DASS Ratings based on a survey of a number of Australian samples

	Depression	Anxiety	Stress
Normal	0 – 9	0 - 7	0 – 14
Mild	10 – 13	8 – 9	15 – 18
Moderate	14 – 20	10 – 14	19 – 25
Severe	21 – 27	15 – 19	26 – 33
Extremely Severe	28+	20+	34 +

**Norms:** Normative data are available on a number of Australian samples. From a sample of 2914 adults the means (and standard deviations) were 6.34 (6.97), 4.7 (4.91), and 10.11 (7.91) for the depression, anxiety, and stress scales, respectively. A clinical sample reported means (and standard deviations) of 10.65 (9.3), 10.90 (8.12), and 21.1 (11.15) for the three measures.

Source: [www.psy.unsw.edu.au/groups](http://www.psy.unsw.edu.au/groups)