

Using the Rickter Scale Method to Measure Genuine Personal Well-Being: Case Study

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The Community of Well-Being Initiative aims to support a culture of individual, organizational, and community well-being, utilizing the Gallup Well-Being Index and the Rickter Scale Method. A systemic approach to well-being has been developed to create an effective system with practical measures that supports developmental changes within both individuals and organizations. This paper presents a case study of one individual, JP, who was empowered to recognize new potential after a single Rickter Conversation. JP's response is reflective of the journeys undertaken by countless individuals who have encountered the Rickter Scale Method. Based on Neurolinguistic Programming, thinking, feelings and behavior (neuro) are systematically changed (programmed) by means of language (linguistics) in the Rickter Scale Method.

Keywords: individual well-being, community well-being, Rickter Scale Method, neurolinguistic programming

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The Collaboratory in Dayton, OH, provides infrastructure for people and organizations to collaboratively develop community initiatives that generate new economic, civic, and creative opportunities. The goal is to create a healthier, more thriving region. A current Collaboratory initiative is the Community of Well-Being Initiative (CoWBI), which aims to move residents of the Dayton region from where they are now to where they want to be through individual, organizational, and community action to support a culture of mutual well-being. For over a decade, Dayton has received high-profile media attention. In August 2008, Dayton was recognized by Forbes Magazine as one of the nation's 10 Fastest Dying Cities (Zumbrun, 2008). Fast-forward ten years, to September 2018, an online/ProPublica's documentary, "Left Behind America," featured Dayton as the manifest example of what has happened to too many great American cities and the people who live there: They are left behind or, in many cases, left out (Dotan, 2018). The CoWBI is based on a new model that addresses economic injustice, systemic racism and environmental degradation and recognizes

that people are more important than money. This new model alters how we define and measure success, because what we measure is what we value.

The Collaboratory's model uses a two-pronged approach to measure well-being in action in the Dayton region, utilizing two tools: the Gallup Well-Being Index and the Rickter Scale Method. The Gallup Well-Being Index will get down to the census tract level, providing deep insight into where the gaps and opportunities are (Gallop, 2015; Sears et al., 2014). The Rickter Scale Method will provide the framework for qualitative data gathering through deep individual and community conversations that, taken in the context of the Gallup Well-Being Index, will create a new human-centered approach to community investment and economic development that is data-informed (George, 2013). The federally-designated Miami Valley Regional Planning Commission (MVRCP) district plus Clark County is a microcosm of America and an ideal laboratory for citizen-driven transformation. Across the seven counties, one can find a hollowed-out urban core, suffering from the loss of good-paying manufacturing jobs, struggling with the effects of systemic racism and generational poverty, both Black and White; inner- and outer-ring suburbs, which run the gamut from challenged to thriving; small town America; agriculture; and rural communities. And with a combined population of 815,000, it is small enough to wrap our arms around, yet big enough to get deeply into America's most intractable challenges, including the economy and employment, education, health and wellness, justice, housing, transportation, environment, and media.

The CoWBI will use the Rickter Scale Method to engage at the individual, organizational and neighborhood levels to identify the current and desired states of well-being, design action plans to realize those desired states, and measure progress along the way. The Rickter Scale Method consists of three components: the Journey Board, Structured Dialogue, and Theoretical Design. Rickter's scaling system allows for measurement of progress over time from the current state toward the desired state. A systemic approach to well-being has been developed to create an effective system with practical measures while supporting developmental changes within both individuals and organizations (George & Sice, 2014). At the individual level, the trained Rickter Navigator uses Well-Being Mapping to positively engage the individual, facilitate productive interaction, produce a comprehensive profile of individual need, employ meta performance conversation to motivate the individual to take ownership of goals and responsibility for their own action plan (Martins & McNeil, 2009), provide a measure of personal outcomes and 'distance traveled,' and offer evidence for evaluating the effectiveness of service provider support and intervention (George, 2013; Family and Youth Services Bureau, 2021; Hughes, 2010; Rolfe, 2003).

The Rickter Scale was developed in 1993 by Keith Stead and Rick Hutchinson for use with young offenders and their families (Wood & Stead, n.d.). It was created as a response to client need, the majority socially excluded, to overcome barriers to education, training, and employment. This required measurement of genuine personal achievement - from chaotic lifestyle to stability, stuck state to responsibility and planning to find a fresh sense of direction. Between 1994 and 2021, more than 20,000 practitioners from 6,000 organizations in 23 countries received training in the Rickter Scale Method. We conservatively estimate that over 1.5 million Rickter Structured Dialogues have been conducted on a one-to-one basis.

In 2021, Scottish national award-winning educationalist Martin Dennis Timoney was commissioned by Keith Stead to co-create The Rickter Scale Method 2.0. Their shared passion and determination to support others motivated them to focus on the widespread impact that Covid-19 had made on the world community. Both took to writing and testing new Rickter Scale Method language that would refine the original concept, sharpen the language, and bring a wider theoretical perspective that would enable a modern strategic approach to individual engagement. A combined 60 years of teaching experience in behavior management and metacognition performance resulted in Stead and Timoney developing *rickterscale.world*. Recognition of the need to support remote and hybrid performance through technology led to the creation and launch of Rickter Scale Academy, which will assist the Collaboratory in its new community well-being initiative.

The Rickter Scale Method: Philosophy and Practice

The Rickter Scale Method was specifically designed to help individuals overcome barriers to education, training, employment, and social inclusion – from chaotic lifestyle to direction and purpose, from apathy and denial to aspiration and ambition (George, 2013; Family and Youth Services Bureau, 2021; Hughes, 2010; Rolfe, 2003). Centered around maximizing well-being, it is focused on motivational assessment, evaluation, and goal setting. The Rickter Scale Method offers an effective approach to reframe and refine the congruent physiological and structural shift in metacognition and regulation. It empowers individuals to understand their own thinking and to articulate the emotional correlation, while engaging in metacognitive activities. This includes planning a fresh approach and perspective to current thoughts and emotions, identifying appropriate and potential change strategies, evaluating progress, and monitoring comprehension. The Rickter Scale Method supports capacity for personal growth and self-regulation and managing one's own motivation for performance change. Implementing a metacognitive change strategy enables individuals to develop a powerful sense of agency in their personal performance and increase awareness, knowledge, and control over their own situation.

Given the research evidence surrounding metacognitive knowledge and performance, with a particular focus on personal development (Nietfeld & Shraw, 2002; Pressley et al., 1987; Schraw & Dennison, 1994; Thiede et al., 2003), the challenge is how best to make such performance explicit. For this, the Rickter team created an accessible and practical metacognitive framework and strategies to support the process by embedding a pedagogical approach to determine positive outcomes:

- Constructivism is based on the belief that performance and growth change occurs as individuals are actively involved in a process of meaning and knowledge construct (Fox, 2001). They are the makers of meaning and knowledge.
- Collaboration is the situation in which the individual and practitioner learn and develop understanding together (Barkley et al., 2014). Both are engaged in structured dialogue to define opportunity to capitalize on resources and skillset, by gathering information, evaluating ideas, monitoring progress and, more specifically, focusing on the premise that knowledge can be harnessed, whereby individuals actively interact by sharing experiences and dialogue.
- Inquiry-based is the form of active participation that starts by posing questions, problems, or scenarios in tandem with presenting established facts and portrayal of a desired state and smooth path towards knowledge and transformation (Bell et al., 2010). Inquirers identify and research issues against questions posed to develop their knowledge and to create understanding on how best to shift from present state circumstance.
- Integrative learning is the basic theory describing a movement toward integrated approaches to the given situation, by helping individuals make connections from a holistic perspective (Awbrey et al., 2006). It involves bringing together traditionally separate subject matters, so that individuals can grasp an authentic understanding of 'global' impact and separated correlation being brought together towards the whole situation.
- Reflective action is the process where individuals think over their traditional practice, against the newfound approach, analyzing how old thinking and emotion might be improved or changed for better outcomes (Leitch & Day, 2000). Some points of consideration in the reflection action process might be what is currently being done, why it is being done, and what significant interaction requirements might be required to make the necessary shift towards change.
- Self-efficacy refers to an individual's belief in the capacity to reframe thinking and to execute behaviors necessary to produce specific performance attainments (Bandura, 1999; Margolis & McCabe, 2006). It reflects confidence in the ability to exert control over one's own motivation, behavior, and circumstance.

These metacognitive self-evaluations influence all manner of human experience, including the outcomes for which people strive, the amount of energy expended toward achievement, and likelihood of attaining levels of behavioral performance and personal growth. The Rickter Scale Method engages individuals in a process involving Socratic questioning, setting realistic outcomes relevant to their own unique circumstances, and contributing to a comprehensive action plan. The trained Navigator adheres to six Rickter Scale Method steps: a) undertake a baseline measurement; b) explore the baseline profile; c) identify desired state and outcomes; d) create an action plan; e) record interview data; and f) review and create a summative report that maps the individual's journey. This process also reflects the Rickter Scale Method's aim to raise consciousness around Choice, Ownership, Responsibility and Empowerment.

The Rickter Scale Method is designed to engage the individual in the power of consciousness and the power of measurement by using a digital Journey Board to explore both present and desired states to set goals by scaling and thereby producing a self-determined action plan. The Journey Board has a range of well-being questions and sliders for each topic which are developed in collaboration with the individual's service provider. The sliders can be moved along the tracks from 0 to 10, enabling the user to scale how they feel about each topic. The Rickter Scale Method thus provides the user with a point of focus and, through its design, highly engages individual users to see the bigger picture, see connections between their answers to different topics, and take responsibility for their own future. It removes the focus of the session from the interviewer, thus helping to break down barriers and build rapport more quickly.

In the Rickter Scale Method, the individual engages with a seemingly very simple series of questions – a structured dialogue, in which they are enabled to identify key elements of their current circumstances and recall skills and strategies that have worked for them in the past. Then by continuing to use different perceptual positions and very precise linguistic devices, they are encouraged to explore possibility in terms of their preferred future, make informed choices, take responsibility for their own goals, and contribute to an action plan. By attaching their own emotions to the experience of their chosen desired state and goals, the individual creates powerful motivational drivers. Because of its multi-sensory design, the Rickter Scale Method works with any combination of preferred learning, retention, and expression styles. This paper presents a case study of one individual, JP, who was empowered to see new possibilities after a single Rickter interview. JP's response to the Rickter interview is reflective of the journeys undertaken by countless individuals who have worked with professionals trained in the Rickter Scale Method.

Method

Participant

The participant in this case study (JP) was a young man in his late twenties who was referred to a social services center. The father of several young children, he was not married or employed and complained of hearing voices that encouraged him to drink. He subsisted on the streets and, by his own account, lived "a hard, difficult life." In the recent past he had made three failed suicide attempts and admitted at his first interview that he thought about suicide every day. JP was provided with informed choice and consented to participating in this research. Data for this paper were obtained from a pre-recorded podcast in which the participant (pseudonym provided) gave written approval for the taping of their responses to questions with the understanding that the information would be shared publicly while maintaining their anonymity. All identifying information for the participant has been suppressed. IRB approval was waived, as this research involved no more than minimal risk to the participant.

Procedure

In the first Rickter session, the interviewer conducted structured dialogue with JP. The interviewer presented JP with the Journey Board with a frame of reference that listed ten topics on the left side of the board: 1) Employment/Training/Education; 2) Accommodation; 3) Money; 4) Relationships; 5) Influences; 6) Stress; 7) Alcohol; 8) Drugs; 9) Health; and 10) Happiness. JP expressed feeling nervous and upset at the sight of the Board, not certain about its purpose, but he held the board in his hands for the entire session.

During the session, the interviewer followed the Rickter Scale Method. For the first topic listed on the board (Employment/Training/Education), he asked JP, "How happy are you with your employment situation? Ten: you are very happy with your employment situation. Zero: you are not happy with it at all."

JP put his finger on the slider and moved it to zero, proclaiming he was indeed very unhappy. The interviewer asked JP, "So, what's on your mind here?" Keeping his finger on the slider, JP spoke about his suicide attempts and his abusive father. He revealed that his father had slashed his face, stabbed him, hit him with hammers and a mace. The interviewer asked JP about his desired state. "So, where would you like it to be now?" JP moved the slider across the board to a ten. In keeping with the structured dialog, the interviewer asked JP to describe what was now different and if he was in a position to leave the past behind and what he could do himself to make the situation better. With prompting from the interviewer, JP began putting an action plan together.

In keeping with Rickter philosophy and protocol, when JP completed his action planning for the Employment topic, the interviewer asked, "And how does that make you feel?" The expression on JP's face changed immediately, reflecting positive emotion. He smiled and relaxed. JP remarked that it was the first time that someone asked him how he felt and that no psychiatrist had ever inquired how he, JP, could make the situation better.

To provide an anchor for JP as he planned for the next steps in his journey, the interviewer put his hand on JP's shoulder. The interviewer picked up key words in what JP was saying and looked for ways to reframe that language, to help make sense out of nonsensical ideas and expressions that were out of sync with his behavior. JP and the interviewer shared a deep meaningful conversation about JP's intention to commit suicide, how it would affect JP's children. The interviewer worked with JP to teach him to manipulate his thoughts and ideas, by asking himself, "Why am I allowing voices to take over? Why kill myself?" JP had years and years of not being in control of his thoughts and ideas. In one Rickter session, he pledged to take control.

Results

Second Rickter Session

One week later, JP returned to the interviewer's workplace. He was in a buoyant mood, smiling and bubbly. When asked to indicate his present level of happiness with his employment situation on the Journey Board, he moved the slider to a ten and proclaimed aloud that he definitely felt like a ten. When asked to explain his feelings, JP replied that when he held his finger on the slider, he felt calm and didn't hear voices. He admitted the voices were still there, but they weren't strong.

The interviewer inquired what had changed from the week before, what had happened. JP's reply was immediate and simple, "I'm happy, I'm confident." He remarked that he was feeling a zero last week but was now a ten. Sitting shoulder to shoulder with JP, the interviewer noted that there was a fundamental shift in how JP felt about his situation. JP agreed that he had experienced a change in his emotional state, in his understanding and thinking, and that he had stopped listening to his voices. He declared that he was no longer taking a back seat to his voices.

JP continued to explain the change in his frame of mind. He remarked, "I'm a different person. I'm growing, I'm buzzing!" Using the Rickter structured dialogue, the interviewer asked JP what hap-

pened for that change to occur. JP replied that the interviewer was better than any psychiatrist that he had ever seen, that his interaction with the interviewer was the first time that "somebody speak to me and ask me how I feel." JP admitted to having trust issues with his father, given his father's history of abusing him, but that he felt he had established trust with the interviewer. According to JP, having someone speak to him and ask him how he felt made his confidence "build up."

When asked on a scale of zero to ten about his thoughts about suicide, JP replied adamantly that he was at a zero. He exclaimed, "I feel alive!" He also noted that, if he killed himself, he would not be able to see his children. He concluded that the Rickter Scale had changed his life.

Third Rickter Session

Two weeks after the first Rickter session, JP returned to the interviewer, once again in a buoyant mood. In line with a fundamental principle of the Rickter Scale philosophy, the interviewer did not ask JP to go back to baseline or to his desired state. Instead, he stood with JP in the center of the floor and pointed to his left, saying, "Look over there. Look at your past. What do you see?" Then he pointed across the room in the other direction. "Look over there in the other direction. This is your future, what do you see?" He directed JP to move to the future position.

With JP standing in the future position while the interviewer stood in the present, the interviewer asked JP what he saw in the present. JP replied that he now saw things in a different perspective. Whereas he used to think of suicide every day, he now understood that the past doesn't define who he is. He can grow from experiences in the past and make preparations for the future. When asked by the interviewer how he felt on a scale of zero to ten, JP immediately responded that he felt like a ten out of ten. The voices in his head were quieter, and he could now hear his own voice.

The interviewer inquired about what had changed, what was different. Without hesitation, JP responded, "My thoughts." JP believed that he could now control his thoughts and interrupt unwanted patterns of thoughts and behaviors. After years and years of not being able to control his thoughts and behaviors, JP was taking control. He was happy, and the voices were happy. The voices will always be there, JP explained, but he was taking control. JP felt like a different person. Now a ten out of ten, JP remarked that he was not accustomed to being in this state of mind.

Discussion

Like JP, people come out of a Rickter session feeling better about themselves. Drawing upon the precepts of Neurolinguistic Programming (NLP), the Rickter Scale Method operates at all neurological levels, especially the higher levels of beliefs, values, identity, and spirituality where change is likely to be generative (Bandler & Grinder, 1975, 1976). NLP is a motivational and communication model that was developed in the 1970's and is used today in various areas, such as mental health therapy, sales, leadership development, and child discipline (Dilts, 1983, 1990; Kuhn, 2000). Individuals and groups who have used the Rickter Scale Method have not only been able to overcome specific barriers and challenges in their lives, but they have moved on significantly. The use of Rickter for many has been a watershed, a catalyst, a means of sense-making in terms of their own lives and who they are. NLP and the Rickter Scale Method bring together conversation-, behavior-, hypno- and body-oriented approaches. In the process, thinking, feelings and behavior (neuro) are systematically changed (programmed) by means of language (linguistics).

The Rickter Scale Method uses metacognitive self-evaluation to influence human experience by measuring specific levels of behavioral performance and personal growth. The result is coherent transformation: a breakthrough that is reflected in a change in thoughts and feelings that are consistent over time. The Collaboratory's CoWBI will utilize the Rickter Scale Method to assess the pursuit of well-being in both individuals and their communities.

Further case studies and empirical research on the use of the Rickter Scale Method is recommended. To date, the Rickter Scale Method has been utilized and studied across Europe with homeless and

runaway youth as well as other marginalized populations (Family and Youth Services Bureau, 2021; George, 2013; Hughes, 2010; Rolfe, 2003). This case study should be replicated in other regions of the United States to provide further evidence that can be generalized to a larger population.

References

- Awbrey, S. M., Dana, D., Miller, V. W., Robinson, P., Ryan, M. M. & Scott, D. K. (2006). *Integrative learning and action: A call to wholeness*. New York, NY: Peter Lang Publishers.
- Bandler, R., & Grinder, J. (1975). *The Structure of magic, Vol. 1: A book about language and therapy*. Palo Alto, CA: Science and Behavior Books.
- Bandler, R., & Grinder, J. (1976). *The Structure of magic II: A book about communication and change*. Palo Alto, CA: Science and Behavior Books
- Bandura, A. (1999). Self-efficacy: Toward a unifying theory of behavioral change. In R. F. Baumeister (Ed.), *The self in social psychology* (pp. 285–298). New York, NY: Psychology Press.
- Barkley, E. F., Major, C. H., & Cross, K. P. (2014). *Collaborative learning techniques: A handbook for college faculty (2nd ed.)*. San Francisco, CA: Jossey-Bass.
- Bell, T., Urhahne, D., Schanze, S., & Ploetzner, R. (2010). Collaborative inquiry learning: Models, tools, and challenges. *International Journal of Science Education*, 3(1), 349–377.
<https://doi.org/10.1080/09500690802582241>
- Dilts, R. P. (1983). *Roots of Neuro Linguistic Programming*. Capitola, CA: Meta Publications.
- Dilts, R. P. (1990). *Changing Belief Systems with NLP*. Capitola, CA: Meta Publications.
- Dotan, S. (2018, September 11). Left Behind America. *Frontline / ProPublica*, Episode 16.
<https://www.pbs.org/wgbh/frontline/documentary/left-behind-america/>
- Family and Youth Services Bureau (FYSB, 2021). Core outcome areas literature review: Compendium of measures for core outcome areas for runaway and homeless youth.
<https://www.rhyttac.net/assets/docs/Resources/Full%20Literature%20Review%20on%20Core%20Measures%20Final.pdf>
- Fox, R. (2001). Constructivism examined. *Oxford Review of Education*, 27(1), 23–35.
<https://doi.org/10.1080/03054980125310>
- Gallup. (2015). Gallup Well-Being™ Index: Methodology Report for Indexes
<http://www.gallup.com/poll/195539/gallup-healthways-index-methodology-report-indexes.aspx>
- George, K. (2013). Scaling New Heights in VET: Adapting the Rickter® Scale Process to improve and monitor the journey of marginalized groups towards employability. European Commission, DG Education and Culture (pp. 1–97).
<https://researchportal.northumbria.ac.uk/en/publications/scaling-new-heights-in-vet-adapting-the-rickter-scale-process-to->
- George, K., & Sice, P. (2014) Emergence of wellbeing in community participation. *Philosophy of Management*, 13(2), 5–18. <http://dx.doi.org/10.5840/pom20141328>
- Hughes, D. (2010). The Rickter Scale Method: Making a difference.
<http://www.rickterscale.com/assets/docs/Rickter%20Paper%20Dr%20Diedre%20Hugest%20Master%2017%20Nov%202010.pdf>
- Kuhn, D. (2000). Metacognitive development. *Current Directions in Psychological Science*, 9(5), 178–181.
<https://doi.org/10.1111/1467-8721.00088>
- Leitch, R., & Day, C. (2000). Action research and reflective practice: Towards a holistic view. *Educational Action Research*, 8(1), 179–193. <https://doi.org/10.1080/09650790000200108>

- Margolis, H., & McCabe, P. P. (2006). Improving self-efficacy and motivation: What to do, what to say. *Intervention in School and Clinic, 41*, 218–227.
<https://doi.org/10.1177/10534512060410040401>
- Martins, R. K., & McNeil, D. W. (2009). Review of Motivational Interviewing in promoting health behaviors. *Clinical Psychology Review, 29*(4), 283–293. <https://doi.org/10.1016/j.cpr.2009.02.001>
- Nietfeld, J. L., & Shraw, G. (2002). The effect of knowledge and strategy explanation on monitoring accuracy. *Journal of Educational Research, 95*, 131–142.
<https://doi.org/10.1080/00220670209596583>
- Pressley, M., Borkowski, J. G., & Schneider, W. (1987). Cognitive strategies: Good strategy users coordinate metacognition and knowledge. In R. Vasta & G. Whitehurst (Eds.), *Annals of child development, 4* (pp. 80–129). Greenwich, CT: JAI Press.
- Rolfe, H. (2003). *Developing good practice in Connexions: Techniques and tools for working with young people*. London, United Kingdom: National Institute of Economic and Social Research.
- Schraw, G., & Dennison, R. S. (1994). Assessing metacognitive awareness. *Contemporary Educational Psychology, 19*, 460–475. <https://doi.org/10.1006/ceps.1994.1033>
- Sears, L. E., Agrawal, S., Sidney, J. A., Castle, P. H., Rula, E. Y., Coberly, C. R., Witters, D., Pope, J. E., & Harter, J. H. (2014). The well-being 5: Development and validation of a diagnostic instrument to improve population well-being. *Population Health Management, 17*(6), 357–365.
<https://doi.org/10.1089/pop.2013.0119>
- Thiede, K. W., Anderson, M. C., & Theriault, D. (2003). Accuracy of metacognitive monitoring affects learning of texts. *Journal of Educational Psychology, 95*, 66–73.
<https://doi.org/10.1006/ceps.1994.1033>
- Wood, N. & Stead, K. (n.d.). *Rickter Scale Method manual: A guide for practitioners using the Rickter Scale Method process*. Newcastle upon Tyne, United Kingdom: Northumbria University Lifelong Learning Programme.
- Zumbrun, Joshua. 2008. America's fastest-dying cities. Forbes.com. August 8. Forbes Magazine. America's Fastest Dying Cities.
https://www.forbes.com/2008/08/04/economy-ohio-michigan-biz_cx_jz_0805dying.html?sh=29ce8fe3180d

Author Note

Keith Stead and Martin Dennis Timoney share joint interest in rickterscale.world and Rickter Scale Academy. The other authors report there are no competing interests to declare.

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