The Butterfly Effect: A Legacy Through Kindness

Paviglianiti, Nicola

Please forward all correspondence to: Nicola Paviglianiti, Student
Faculty of Health Sciences
School of Health Studies, Room 338
Arthur and Sonia Labatt Health Sciences Building
Western University
London, Ontario, CANADA, N6A 5B9
1 (403) 702 4843
npavigli@uwo.ca

Abstract:

The Butterfly Effect: A Legacy Through Kindness was a health promotion initiative at Western University involving a class of 348 students voluntarily participating in completing “random acts of kindness” to encourage positive health and wellbeing. Students were empowered to take a leadership role during the 3 weeks of implementation, and hundreds of anonymous submissions of kind acts were received. The impact on the youth involved and the greater community included increased class cohesion, belonging, and positive mental health outcomes in the area of stress, confidence, and self-exploration. There was also evidence of students’ continuation of random acts of kindness and the formation of new habits, as well as increased awareness to the needs of others following the intervention. It is believed that this experience can provide a strong base to guide similar youth led initiatives in a variety of settings to facilitate positive health and community outcomes in the future.

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Have you ever heard of a university student who was excited to participate in a course project worth no marks or course credit just weeks before final exams? What if I told you there was a class of 348 young university students (including myself) who agreed to voluntarily complete such a project together? *The Butterfly Effect: A Legacy Through Kindness* was a project with a focus on mental health promotion and campus wellbeing that was led by youth for youth.

The initiative had one simple and specific goal: come together, complete and chronicle as many random acts of kindness (RAK) as possible before the end of the Autumn semester. Little did I know I would become a leader of the project, the impact it would have on me and those around me, or how it would grow wings and fly.

It was midway through the September - December semester of 2013 and I was sitting in a large hall preparing for another two-hour second year Health Studies university class on the topic of health promotion. Every other student around me was quiet, and like myself, was getting laptops and paper ready for note-taking.

“AN IDEA”

My professor, Dr. Jennifer Irwin, stood at the front of the class with these two words on her first lecture slide. She described her experience at the grocery store the night before: she had passed a plastic produce bag to the person waiting behind her before grabbing her own. The reaction of happiness and gratitude she received from this simple gesture shocked her, and she experienced her own joy in being able to help someone else. From this inspiration she proposed a health promotion project to our entire class where collectively we would make simple acts of
kindness a part of our every day life, and complete as many as possible before the end of the term. Our class unanimously agreed by a show of hands that we would participate.

Following the “idea”, the lecture continued as usual with the designated lesson. However, on a personal level I could not escape the story. Is it such a big deal to give someone a bag? In my university studies I am constantly taught about the importance of our living conditions as factors in health and wellbeing. The term *Health Promotion* had been defined for us during the first class. From the Ottawa Charter for Health Promotion (World Health Organization [WHO], 1986), Health Promotion is a “process of enabling people to increase control over, and to improve, their health”. Determinants of health were also discussed. I considered further how small actions, like my professor proposed, could be used to facilitate the process of health promotion, increase health and wellbeing, and create a positive environment. Random acts of kindness are simple, free of cost, and all they require is positive behavior which every person is capable of. Perhaps, with a little further encouragement my class could create significant positive change.

Following the lecture, I arranged to meet with the professor to see if I could help take her “idea” of kindness further. It seems to me that nearly every young person I know is on social media to stay connected, and I assumed this would be a key avenue to reach out to my peers and other youth to raise awareness. I initiated an anonymous Facebook page where RAK submissions could be contributed and showcased. I also proposed the idea of formally researching the project, through means of an online questionnaire. The questionnaire was designed to investigate how the project impacted my classmates, and would provide an avenue for further student perspectives. The manuscript containing findings from the questionnaire is currently in development, and completion is expected in the Spring of 2016.
The next class lecture involved the expansion of the “idea” and the Facebook page was formally announced. It was not just me who took a leadership role, my peers of all different talents and skills voluntarily came together to collaborate and contribute as well. An avenue for email submissions was established, and one student volunteered to administer a Twitter account. Name ideas for the project were anonymously submitted by students and voted on collectively. *The Butterfly Effect: A Legacy Through Kindness* was chosen, and I believe the rationale that accompanied the anonymous student submission sums up our intentions perfectly:

“*Since our random acts of kindness resonate in the actions of those whom we influence, we are generating our own gust of wind. Through enough subsequent actions, our kindness can affect thousands. Anyone who recognizes the importance of our actions may choose to carry out their own random acts and in continuation of more and more along the way.*”

The idea did not take long to take flight, and the mentality of 348 students seemingly became “What can I do?” and “Where can this go?” I could feel there was a sense of eagerness and agreement to continue the project as a class. Submissions of RAK began rapidly fluttering in through direct email and social media outlets from individuals who were being touched and motivated. Less than twenty-four hours after the launch of the Facebook page, there were already more than 260 official ‘likes’ and hundreds more had viewed the posts. The exact number of Facebook postings that appeared on the site for the duration of the course was not formally documented, although as the Facebook page administrator, I never posted a RAK of my own because there was never a need or lack of public contribution.
Students around me were finding innovative means to be involved and take ownership in the project. For example the Student Council was contacted to help promote the initiative, and campus TVs were used to raise awareness of the campaign. As a student leader familiar with the project, I was also invited to write an article in the campus newspaper. The final product made the front page and sparked wide attention. *The Butterfly Effect* was also reaching individuals around the world as was evident in the communications received. Messages and submissions of RAK that were being completed and witnessed were sent from people from across Canada, as well as from other countries. These individuals had heard of the project directly from project participants, had read the newspaper article or had seen posts on social media. A simple selfless act was making all the difference, and the anonymous submissions spoke for themselves (Figure 1).
It is impossible to determine how many people were reached and impacted by the project because one RAK likely motivated another RAK, and not all were recorded or shared with us. A personal highlight for me was a submission from a student about how she had been inspired by a kind deed that was done for her. As a result, the individual enrolled to be tested as a bone marrow donor to continue the kindness further.

In the remaining lectures for the course I could feel my peers were more engaged and a sense of community was developing among the group. It even became hard to find a seat in the lecture hall because individuals not even enrolled in the class were attending due to the positive
atmosphere. I felt more connected with my classmates, and we developed a special sense of pride working together on something that mattered to us. The last day of class was an emotional one to say the least, and I sent the hundreds of Facebook RAK I had collected to the professor. The submissions were compiled from the various avenues into a single document and it was distributed to the class and to anyone who wanted to see the lasting legacy. I printed a copy of this document for myself and also sent it to my family. I know I will always treasure the submissions and what they symbolize.

Just as the project was gaining momentum, it was the end of the semester and our time together as a class. Submissions from all outlets decreased greatly upon completion of the academic school year. However, in Autumn of 2014 when university classes resumed there appeared to be renewed project engagement. The subsequent year of students in the health promotion course took interest and expanded the initiative. A social media Instagram account with the hashtag #kindtagious was created to compliment previously established submission avenues. The Facebook page I administer continues to receive submissions and has surpassed 1000 ‘likes’. In October of 2014, the University hosted a mental health and wellness initiative presentation on campus about kindness, given by Dr. Jennifer Irwin, related to *The Butterfly Effect*. The Student Council and other campus clubs have also created formal events that incorporate RAK to facilitate project sustainability. As I am researching the initiative further, I am finding meaning and motivation in the anecdotal reports of the lasting impact it had on students and I know that the legacy is being continued.

*The Butterfly Effect: A Legacy Through Kindness* was successful as a youth health promotion project in part, because it was voluntary, and there was never an obligation to participate.

Parallel to Rothman’s Framework of locality development in community health promotion
Rothman & Tropman, 1987), the community was mobilized, and the project was process
oriented to address shared problems. The fact that the course was a health promotion course also
benefited the project by making it relatable to the material and lessons. We learned about health
promotion tenets during lectures and we experienced the application of health promotion project
planning, implementation strategies, and evaluation, through our project. While we were all
working to create a positive community and increase the wellbeing of others, I feel that I was the
one who benefited most. Engaging in kindness is an evidence-based intervention with research to
underscore both its physical and mental health benefits (Luks, 1988; Musick and Wilson, 2003;
Thoits and Hewitt, 2001; Weinstein and Ryan, 2010). Through my own project participation I
found myself happier, less stressed, and more confident. As suggested by the Broaden and Build
Theory (Fredrickson, 2001), positive emotions such as the ones I experienced through
participation in The Butterfly Effect have lasting impacts on personal growth and social
connection.

I also developed new habits and perspectives that I have maintained as a result of the project
and I am now more aware of my surroundings and where I can make a difference in the lives of
others. For example, in the evenings I regularly phone my grandma knowing she gets lonely, and
I shovel the snow off my neighbor’s walkway every time I do my own.

At the heart of health promotion action is community empowerment and ownership (WHO,
1986). The Butterfly Effect enabled youth to actively address mental health, an issue that
mattered to them. A perceived sense of ownership was created as a result of my class’
involvement in the project from beginning to end, with everyone given multiple opportunities to
contribute meaningfully. Minker (1990) suggested that the community should be at the center of
health promotion practice; in the current project, placing ownership with young people
established a capacity for sustainability. For example, everyone could vote on aspects of the project, had opportunities to contribute ideas, could submit actions, or engage friends and family in the project. *The Butterfly Effect* also provides evidence that young people are a resource for new, innovative ideas in health promotion and in the creation of initiatives. While the professor sparked the initial idea and supported students along the way, the strengths-based, empowering nature of the project drew youth to want to be involved along with their cohort.

Health promotion action supports personal and social development (WHO, 1986), and the utilization of kindness fosters individual growth and learning. In relation to mental health promotion, Friedli (1999) suggests that strategies should build resourcefulness and resiliency through the development of skills related to life, coping, communication, and relationships. Performing RAK created circumstances that allowed youth to practice and strengthen these skills and the project enabled students to develop supportive relationships. The diversity and uniqueness of every person participating and every situation shared were valued. Participants in the project seemed to feel more respected and connected to the community. For example, I noticed more students interacting with each other rather than the usual student autonomy or cliques often seen in large classes. I could also see there was an increase in participation and attention paid in the course as a whole. Personally, I have never been more excited to attend a lecture or felt more engaged and interested in the material.

As I move forward in my health studies, I have learned that it is crucial not to overlook small actions when considering health and wellbeing. We are constantly striving for the latest resource or innovative technology to facilitate positive mental health, but the answer is often right in front of us in our everyday interactions. After witnessing and experiencing personally how *The Butterfly Effect* project transformed my class and the University community, I believe that
purposeful RAK initiatives should be used further in mental health promotion initiatives toward creating supportive environments. A next step for the project could be to include *The Butterfly Effect* in University mental health programming for students at other campuses outside the institution where it originated. The project could also potentially be utilized in other settings that involve students or communities of youth. For example, what might the impact of RAK be among vulnerable youth? How could it be used to transform a youth athletic team, or a conference, or camp for young people? I believe the possibility for kindness to add up and create a positive culture and community of overall wellness is endless.
References


