The complex territory of well-being: contestable evidence, contentious theories and speculative conclusions

This paper brings together evidence and theories from a number of disciplines and thinkers that highlight multiple, sometimes conflicting understandings about well-being. We identify three broad strands or themes within the literature(s) that frame both the nature of the problem and its potential solutions in different ways. The first strand can be categorised as the 'hard' science of well-being and its stagnation or decline in modern western society. In a second strand, social and political theory suggests that conceptualisations of well-being are shaped by aspects of western culture, often in line with the demands of a capitalist economic system. A third theme pursues the critique of consumer culture's influence on well-being but in the context of broader human problems. This approach draws on ecology, ethics, philosophy and much else to suggest that we urgently need to reconsider what it means to be human, if we are to survive and thrive. Although no uncontroversial solutions are found within any of these themes, all play a necessary part in contributing to knowledge of this complex territory, where assumptions about the nature of the human condition come into question.

DEBATE

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Writings on well-being span multiple fields and disciplines, including positive psychology, neuroscience, evolutionary psychology, economics, sociology, social and cultural anthropology, cultural studies, philosophy, theology, ethics and ecology. Over three thousand studies on this topic have been published since the 1960s (Nettle, 2005). This suggests that the field of well-being is a significant human problem that spans many fields of knowledge (Ehrlich, 2000). Given this breadth, our intention is not to provide a literature review but to synthesise some complex evidence, contentious theories and speculative conclusions from a range of disciplines and a variety of thinkers. We acknowledge that, inevitably, much is over-simplified in our deliberate framing of these literatures in terms of three main strands or themes. These differ in terms of how 'the problem' and its solutions are conceptualised,

depending on whether researchers are drawing on psycho-biological, economic, socio-cultural or other forms of knowledge.

Although all three strands draw on scientific (and other) forms of knowledge, the first strand in the debates might best be described as the 'harder' or more quantitative application of science to the problems of well-being – although, as we shall see, facts are intertwined with values. This is, arguably, the dominant strand in the debates we outline. The use of numbers and evidence of an orthodox nature has an obvious appeal for public health. Less obviously, a second strand, derived from socio-cultural and political theory, suggests that both scientific and popular conceptualisations of well-being are culturally constructed, often in line with the demands of a capitalist economic system. Many within public health will be equally attracted to arguments based on social constructionism. More controversially, social and cultural theorists also

argue that consumer capitalism is pathological for individual and social well-being, yet fulfils particular psychological needs that arise from modern forms of society. Most radical of all, perhaps, is a third strand drawing together evidence and theories from such diverse fields as ecology, ethics, philosophy and spirituality to suggest yet a different understanding of the problem, based on alternative views of the human condition. We find that the nature of what it means to be human is an implicit question within all three themes.

'Hard' science

Findings from genetics suggest that our disposition towards subjective well-being has a strong genetic component (roughly 80%). Individuals typically exhibit a psychological set point: levels of happiness return to, or close to, a baseline after both positive and negative experiences. Across societies, well-being when converted to an average measure appears to even out at about 70%, although there are also 'league tables' of well-being across countries (Veenhoven, 2005). Human developmental plasticity means that early environment and upbringing are also influential (Keverne, 2005): often estimated at around 10% of a person's well-being. This does not appear to leave much capacity for change. Nevertheless, research by key figures in the field suggests that our mental and emotional well-being can and should improved (eg. Frederikson, 2005; Huppert, 2005).

Some writers assume that humans are 'designed' or 'programmed' to seek happiness (Schoch, 2006; Layard, 2006). Others argue that the apparent superiority of positive emotions arises mainly because they feel good and are associated with beneficial situations (Nesse, 2005). However, Nesse cautions that our feelings and motives may benefit our genes at the expensive of the quality of our lives (Nesse, 2005). Evidence from psychology and neuroscience suggests that neural structures and chemistry render us vulnerable to damaging social comparisons, through evolutionary drives to rivalry and competition, which in turn motivate us to pursue 'positional goods' (career, wealth, fame, material possessions). If we are 'wired for competition' rather than happiness by our evolutionary psychology, this explains our urge to stay on the hedonic treadmill and practise the relentless accumulation of positional goods – an otherwise irrational, zero sum game, when others are in similar social positions.

That game is played with a particular vengeance in western societies, where we have seen an unprecedented growth in wealth and comfort over recent decades. Yet, although many causes of suffering that afflicted us in the past have also been eliminated or reduced, average levels of well-being have not increased (Nesse, 2005). For economists, this lack of increase in happiness is a paradox that needs explanation (Shah & Marks, 2004; Layard, 2006). The conjunction of psychological with economic forms of evidence suggests that increases in income, once past a threshold where basic needs are satisfied, produce diminishing returns in well-being (Easterlin, 1974). Even among those who have succeeded in achieving goals valued in such societies (eg. personal status and material wealth), large numbers apparently remain deeply unhappy (Easterbrook, 2004). There is also speculation about the increasing misery caused by inharmonious social relations, the multiple uncertainties associated with living in modern society, and inappropriate life goals (Layard, 2006).

Yet this 'hard' science of well-being also suffers from conceptual problems (Seedhouse, 1995). Some researchers distinguish between psychological well-being (positive mental health) and subjective well-being (happiness). Other researchers use a multiplicity of terms that may be used as virtually synonymous: eg. preference utility, positive feelings, positive emotions, emotional health, positive affect, positive mental health, positive functions, life satisfaction, subjective well-being, and happiness. The two main traditions in happiness research are empirical investigations of subjective well-being, and speculative reflections on the good life. While peer-reviewed publications on well-being are usually clear about which conceptualisation is in use, the distinction may be blurred when research findings are distilled for dissemination to a popular audience.

There is also the issue that judgements about hedonic well-being and life satisfaction are matters for the person concerned, while judgements about what constitutes a 'good life' are open to the judgement of others. This has led some researchers to suggest that people who achieve a sense of meaning in their lives are happier than those who live from one pleasure to another (eg. Layard, 2006). As Nettle has pointed out, this approach smuggles an evaluative moral framework into research (Nettle, 2005).

Influential figures from the research communities of happiness economics and the Positive Psychology movement suggest that improved levels of individual well-being can be achieved by behaving compassionately towards others and by valuing what we have instead of what

we would like to have, rather than seeking possibly unattainable goals that, once achieved, would not make us happy anyway (eg. Seligman, 2002; 2005; Layard, 2006). This is a remarkably repetitive refrain across the literatures (eg. Lane, 2000). While this seems sound advice, it is also potentially politically reactionary: it suggests, for example, policies to restrict social mobility in order to keep families and communities together (Layard, 2006). Other policy solutions have also been proposed, such as redistributing wealth to allay anxieties about relative social position, or banning advertising to children. Solutions to the problem of static well-being are also cast in individualist and biomedical terms: from drug treatments, talking therapies, such as cognitive behavioural therapy (CBT), and meditation as a way of reducing stress and enhancing well-being for the minority experiencing mental illness, to personal psychology modification for the reasonably discontented majority (Layard, 2006). None are uncontroversial or straightforward to implement.

In sum, there is now a substantial and growing evidence base about the factors that contribute to, or detract from, positive mental health and well-being. Claims are based on empirical evidence generated primarily through survey work and experimental approaches, though it is evident that there are tensions within the science(s) and that a degree of speculation and moral judgement creeps in. Much of the evidence about well-being remains correlational, and even where a causal relationship is believed to exist, its direction may be unclear. A further problem for a public health audience is the conflation of the determinants of individual well-being with the determinants of population well-being. A focus on individual well-being may view social inequalities as unproblematic; a focus on social or population well-being would not.

Cultural and social influences
A number of socio-cultural responses to both the claims and the conclusions of the 'hard' science can be discerned. These coalesce around the dominant cultural influence of North America in implicitly shaping both the nature of the problem and its solutions. Such arguments echo the 'crisis of modernity' arguments referred to above, but reach different conclusions.

Some of those trying to bridge the gulf between biological and cultural understandings argue that, notwithstanding the broadly biological bases and determinants of well-being, the most significant emotions we experience in everyday life depend on the particular cultural frame in which social situations are constructed (Kitayama & Marcus, 1997). Moreover, no scientific research is free from the assumptions of that cultural frame. Because most research on well-being derives from North America, that country's focus on happiness and well-being as a cultural ideal has in turn shaped how researchers understand human emotions in general (Wierzbicka, 1997). This understanding is then exported as a human universal, although critics point out that values cultivated by a culture characterised by individualism and independence (Schwartz, 2000) will fit poorly with other cultures that value social relationships and interdependence (Marcus & Kitayama, 1997).

North American values are shaped by a deeply embedded cultural script of impression management (Wierzbicka, 1997): happiness is a cultural ideal and 'cheerfulness' obligatory. Their experience is regarded as evidence of personal and social success, while negative emotions tend to be seen as evidence of failure, requiring treatment (Schwartz, 2000). This has led some to argue that this type of cultural emotional script cultivates a potentially damaging psychological view of the world (Williams, 2000; Galtung, 2005). Far from being unhealthy, they argue, it is normal to feel dissatisfied, disillusioned or depressed at times, not solely because the prevailing public ideology of happiness and personal fulfilment can be hard to measure up to, but also because of the predicaments and dilemmas all humans must face at some time or other. We must not, in other words, confuse or equate issues of emotional health with happiness and well-being, because emotional health is likely to run the whole gamut of emotions, even those deemed 'treatable'.

Social theory seldom focuses explicitly on well-being, but some of its arguments are highly pertinent here. For example, prominent social and political theorists argue that our contemporary, consumerist way of life not only serves the modern capitalist economy but also meets specific, historically unprecedented psychological needs that flow from that way of life (Hartmut, 1998; Giddens, 1991; Slater, 1997). Those needs are pathogenic in terms of our individual and social well-being. The capitalist system of production and consumption in modern western societies has resulted in widespread social change and the abandonment of traditional sources of meaning and social values (Featherstone, 1991). A sense of self and purpose in life are no longer ascribed, so their development becomes a key

task. Put simply, modernity is a recipe for identity crisis on a mass scale.

The characterisation of modernity as a mass identity crisis connects with well-being in several ways. Materialism, individualism and consumerism have become taken- for-granted elements of our culture (Miller, 1987). The identity we construct is a saleable commodity: while we may strive for an inner sense of authenticity, the self is also a 'calculable condition of social survival and success' (Slater, 1997). We 'sell' ourselves in various social markets in order to have intimate relationships, social standing, jobs and careers. The material and symbolic resources through which we produce and sustain our identities increasingly take the form of consumer goods and activities (Lury, 2003). Consumer capitalism exploits this mass identity crisis by proffering its various goods as solutions, while simultaneously intensifying the problem by providing ever more plural values and ways of being (Slater, 1997).

Under such socio-cultural arrangements, not only do a vast range of goods and services become marketised and commodified, but so do health and well-being (Gould & Gould, 2001). The commodification of well-being, for example, has led to a massive industry of 'psy-therapies' and self-help (Williams, 2000). Feelings of well-being are now sought because they are synonymous with a state of (consumer) virtue – a way of constructing 'authentic selves' and an affirmation of the consumerist values of mainstream culture (Sointu, 2005).

Slater argues that the crucial point about the intense conjuncture of self obsession and consumerism in relation to positive mental health and well-being is that conditions of modernity do not simply produce a superficial type of social conformity; indeed, they produce the very opposite (Slater, 1997). The 'other-directed' personality of modern society is driven by the desire for deep internal social conformity: we no longer strive to keep up with people simply through external appearances, but through the quality of our inner experiences. In this regard, a complex and burgeoning literature on spirituality offers a potential resource for the afflictions of the contemporary world (but one to which we cannot do justice here). For many writers, a sense of the sacred, of something beyond the material world, is not just an essential component of individual and social well-being: it is a hard-wired feature of humankind that we are not free to reject, whether we seek explanations for its existence in

evolutionary neuroscience or in a divinity (Haught, 2003). For others, spiritual awareness is to be encouraged because of the benefits it can bring to the problems of human experience, including the multiple forms of dis-ease found in modern society (Grinde, 2005).

However, while observers acknowledge that spirituality is an area relevant to well-being that may have been unfairly neglected, they also ask whether such interests augur a genuine rediscovery of 'the sacred', or are a peculiarly western (or, perhaps, more parochially American) phenomenon (Jones, 1997). It is suggested that this resurgence of interest in matters spiritual may be simply the latest move in an increasingly commodified world, shaped by consumer impulses, and one more sign of people desperately searching to find a new commodity that can slake the thirsts others have failed to quench (Spohn, 2001).

Re-thinking the human

Our readings up to now suggest a number of diagnoses of the human condition. We have a long-established philosophical and theological heritage that suggests that humankind is the supreme goal of creation. More recently we have been offered the options of being an organism blindly driven by selfish genes of greed, lust and a desire to outstrip the Joneses, or the helpless victim of a particularly malign set of structural circumstances and cultural influences. Some of these visions of humanity offer solutions to problems of well-being, whether at the individual or social level: others see it as part of the human condition.

In the third strand of the literatures, a number of writers (eg. Kumar, 2004; Clark, 1998; Czikzentmihalyi, 2004) suggest that many of our contemporary problems derive from these divided and contradictory beliefs about what it means to be human. We also find that numerous writers move beyond the question of static or declining individual or social well-being, because they believe we have reached a turning point in the history of humankind. From this broader perspective, echoed increasingly in public debates, the links between consumer culture and diminishing well-being in modern societies is one among many indicators of more extensive human problems (McMichael et al, 2006).

In contemporary Western society there seems to be a growing awareness that we now live in a socio-cultural system dominated by materialistic and individualistic values, made manifest through our deep-seated obsession with economic growth, our

seemingly endless quest for consumer goods, and a growing sense of social alienation and fragmentation. The charge is not just that we lead shallow and individualised lives, characterised by trivial values and the loss of deeper purpose. The problem lies in the escalating growth of harmful cultural beliefs and the associated decline of much that we should value. Our increasing obsession with superficialities such as wealth, fame, physical appearance and material possessions is linked to the decline of care and concern for others and for our shared environment. These trends, combined with our neglect of the spiritual, moral and ethical aspects of life and the rise in over-consumption, driven by greed, may ultimately render the physical world uninhabitable for all humanity (Cafaro, 2001).

One of the founders of the Positive Psychology movement argues that, in order both to survive as a species and to grow in complexity, humanity must adopt a new image of what it means to be human (Csikszentmihalyi, 2004). This will involve rediscovering a reward system beyond the merely material, and seeing that young people in particular find joy in challenges and in co-operating with others. Up to now we have been engaged in creating safe, comfortable environments that we think are going to improve our lives but which, in the long run, 'actually undermine the very essence of what makes life worth living' (Csikszentmihalyi, 2004; p 364). Humanity, he warns, is unlikely to survive if we fail to address the task of avoiding in the future mistakes committed in the past (Csikszentmihalyi, 2004). Recent reconceptualisations of what it means to be human therefore express awareness that greed and sex are not the only human characteristics necessary for survival: we also need – and can demonstrate – co-operation, altruism, and even spiritual empathy with the universe at large (Clark, 1998).

(Not) the last word…
Taken together, these three strands point to the existence of multiple forms of knowledge and understanding around well-being, although we find few uncontroversial or easily applicable solutions to the problem. We suggest that the complexity of evidence, argument and counter-argument found within the different literatures requires public mental health practitioners to oscillate between the relative strengths of (uncertain) evidence and (plausible but contentious and contestable) arguments. There is an argument for deliberating on and working with the multi-layered forms of evidence and thinking outlined here because, although outwardly incommensurable, in reality all have a necessary part to play in contributing to our knowledge of this complex territory.

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