

The pursuit of happiness



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Is the positive psychology movement more style than substance?

THE recent Happiness & its Causes conference held in Sydney had some 50 speakers and an audience of several thousand people. In comparison to the previous year's conference, when the Dalai Lama was the keynote speaker, the media coverage was limited and decidedly cynical.

One major metropolitan newspaper reported that there was a "happy-clappy, back-slappy feel to the, uh, congregation",¹ raising questions about how the positive psychology movement is viewed. Does it have more style than substance?

Should the medical profession also be sceptical about the increasing interest in happiness?

As a clinical psychiatrist, I have yet to have a patient present seeking 'happiness'. Depressed patients have a more

fundamental objective – relief from the 'psychological pain'. However, while clinical depression and happiness may be poles apart, it would be unwise for practitioners to view the happiness movement as mere pop psychology.

Large amounts of research using sophisticated and intriguing measurement techniques have provided a greater understanding of genetic, chemical and environmental influences on wellbeing. We recognise that, while individuals have their own homeostatic 'set point', wellbeing levels can be modified – and that societal and political strategies can change community levels of wellbeing.

It has proved important to differentiate state (hedonic) happiness and eudemonic happiness (wellbeing), as pursuit of the former does not lead to the latter, and links to 'health status' exist only with wellbeing levels.

A seminar session that quoted from studies overviewed by Dan Gilbert, a professor of psychology at Harvard University, evocatively informed the conference attendees that an individual's happiness level declines after they have children and that it doesn't return to its previous level until the children have left home.

Professor Martin Seligman, a renowned author and psychologist from the University of Pennsylvania who is currently establishing a wellbeing program at Geelong Grammar, subsequently

challenged Professor Gilbert for focusing on 'happiology', and provided evidence showing that children increase their parents' sense of wellbeing.

People in Western countries have been increasingly encouraged to eliminate the causes of suffering (e.g. hunger, sickness) and to employ labour-saving devices, with the view that this would lead to happiness.

But the opposite has occurred. As the GDP has increased in Western regions, wellbeing and happiness have either not increased or actually decreased. Such findings have led to the recognition that happiness can't be pursued or chased, and that there is a need to 'slow down' and recognise that wellbeing comes from leading a more meaningful life rather than pursuing pleasure.

An issue not addressed at the conference was the recent suggestion of an


It is unwise to view the happiness movement as mere pop psychology

intriguing gender difference in subjective wellbeing. Stevenson and Wolfers from the University of Pennsylvania showed that, whereas in the 1970s women reported higher levels of wellbeing than men, the converse is now true, particularly among younger men and married men.²

The decline in wellbeing levels in

women is similar for those engaged in external work and those who remain at home. The authors of that report suggest that the decline may reflect women being pressured to be successful in their work, in making a contribution to society and to take leadership positions in their community.

For doctors, the topic can be considered personally and in relation to how to interact with patients. At the personal level, Professor Seligman's hierarchy is relevant – a career is better than a job, and a calling is better than a career. The ingredients that build to wellbeing – compassion, caring, reciprocity, purpose and meaning – are all potential ingredients in the medical profession, while some of the micro strategies that build to wellbeing can be built into counselling of many patients.

Only the very cynical should dismiss the positive psychology movement.  By definition.

References

1. *Sydney Morning Herald*, 14 May 2008 <http://www.smh.com.au/text/articles/2008/05/13/1210444428945.html>
2. Stevenson B, Wolfers J. The Paradox of Declining Female Happiness. The Wharton School, University of Pennsylvania. <http://bpp.wharton.upenn.edu/betseys/papers/Paradox%20of%20declining%20female%20happiness.pdf>