

## **Research Regarding Large-Scale Efforts to Improve Wellbeing**

Summary Comments for the GKEN Conference by Fran Kelleher

Thesis – Wellbeing does not have a well settled, universal definition. It is a multi-faceted concept that can operate at many levels from the individual to all of humanity in scale. Most documented attempts to improve wellbeing focus on individuals' health and wealth. Where large-scale societal wellbeing is addressed and measured, the methodologies tend to add up the individuals in the society on aspects of health or economic wealth and then rank or compare countries. However, as many who have worked in foreign aid or economic development can attest, the components of wide-scale wellbeing can touch upon the tension between individual wellbeing versus the common good.<sup>i</sup> If an Emir in an Arab gulf state flush with cash from oil sales can give each citizen access to healthcare and a sufficiently high income without the citizens getting education or jobs, and without having decision making input into their government, is this a society with high wellbeing? I will not attempt to directly answer this question. Instead, I will try to show that little work has been documented about wellbeing on a large-scale, in part because wellbeing is comprised of multiple components, some of which are more important at the individual level, and some at the community/societal level. When you add in unique cultural histories, multiple religious belief sets, and evolving understandings about natural resources and environmental sustainability, the issue of defining wellbeing becomes more difficult. This yields a challenge to organizations that wish to work on a large-scale to promote wellbeing because each society will present a mosaic of positions across the relevant characteristics of wellbeing. Further, there is no clear universal endpoint towards which all such developmental work should aim. However, multiple incremental opportunities exist in every community and nation even if the endpoint is not clear.

## **GKen Research into Large-Scale Wellness Initiatives**

### **1. Initial Research**

The project began with a phone call from Jon Comola asking if I might point him towards someone who could do some research on large-scale efforts around the world to improve wellbeing. Jon mentioned efforts in Qatar and the Netherlands. Intrigued, I took the project on myself. My initial goal was to generate “case summaries” of wellbeing initiatives as follows:

- I. Identify large-scale projects anywhere in the world that have attempted to improve the wellness/wellbeing of a significant population/geographic area.
- II. Document the major aspects of the program in terms of:
  - a. Purpose
  - b. Definition of “Wellness” or “Wellbeing”
  - c. Scope – Number of people; geography; what was measured?
  - d. Funding – Source, Level, Duration
  - e. Implementation features – Duration, mode of intervention
  - f. Impact – What changed? How much did it change?

My own research in Google on “Wellbeing” returned many opportunities for massages at health spas, but no large-scale international projects aimed at improving the wellbeing of a population. After discussions with Bonnie Sakallaris, and Soeren Mattke and great information being sent to me by Bonnie and Gary Earl, it became clear that this is not a straightforward research project. Bonnie’s information showed how many organizations are trying to track improvements in health – at least 21 organizations are tracking health, happiness or reported wellbeing. Most of these organizations track data available in the U.S., or through international organizations such as OEDC, or WHO. These data track birth weight, life expectancy, immunization rates, auto accident deaths, etc. A few, like Gallup, do their own surveys which gather people’s perceptions of their health (both physical and mental) or level of happiness. Aside from WHO vaccination initiatives, the work identified had very little in the way of large-scale planned interventions with measured outcomes, these efforts mainly consisted of annual reports of health status metrics and rankings based on those metrics. It often isn’t clear why one country does better or worse or whether differences observed are the result of a particular initiative.

### **2. Community Level Work**

Initiatives such as those by the Samueli Institute work at the nexus of individuals and communities and cover both physical and mental wellbeing. Working with battle hardened men and women returning from war, the Samueli Institute supports **scientific** exploration of **healing** processes with a goal of **transforming health care** to support reintegrating soldiers into their families and society. Going beyond traditional medicine, Samueli seeks

an evidence base for non-pharmaceutical solutions to stress, traumatic memories, and pain management, with a focus on active and self-care complementary and integrative medicine options—including mind-body, physically oriented and sensory art therapies.

Other organizations aimed at the community level include HICcup, which is sponsoring a contest to find places they call “Wellville” -- where you don't need to be sick to get better.” They hope to find models and activities that will produce health as shown by measurable improvements in both medical and social indicators over the next 5 years. Work by organizations that seek to improve the environment from air pollution, contaminated water and other forms of pollution also tend to work at the community level to create a better environment for people. The challenge is whether these initiatives are scalable to a country level or can work across diverse geographic, political and economic conditions.

### **3. Large-scale Work**

Moving to the State or national level, work has mainly focused on improving the health and economic metrics previously mentioned. However, there also is a movement to have policy address the wider area of wellness not adequately captured in health and economic statistics. Ed Diener and Martin Seligman push for the current “haphazard” measurement of wellbeing to be addressed with more rigor and primacy.

“Although economics currently plays a central role in policy decisions because it is assumed that money increases well-being, we propose that well-being needs to be assessed more directly, because there are distressingly large, measurable slippages between economic indicators and well-being. In this report, we outline some of these and propose that well-being ought to be the ultimate goal around which economic, health, and social policies are built.

“We also argue that current measurement of well-being is haphazard, with different studies assessing different concepts in different ways, and therefore that a more systematic approach to measurement is needed. We propose that a set of national indicators of well-being be adopted and review evidence showing that these indicators will reveal important information not contained in the economic indicators.”<sup>ii</sup>

Similar comments have been made by Pope Francis drawing on a long history of Catholic social teaching, when he recently called for companies and the economy to serve the needs of human society, not the other way around. In his *Evangelii Gaudium*, he says, “Growth in justice requires more than economic growth, while presupposing such growth: it requires decisions, programs, mechanisms and processes specifically geared to a better distribution of income, the creation of sources of employment and an integral promotion of the poor which goes beyond a simple welfare mentality.” His concern highlights that it is not just the amount of economic wealth, but also how the society and economy are integrated to support human flourishing. Thus, topics of social integration become important.

When I talked with Soeren Mattke at Rand about my frustration in not finding international case studies on improvements in wellbeing on a large-scale, he consoled me by pointing out that it is not common in other countries to publish the process and result of everything you do. Equally welcome, he pointed me to some very important work that Rand has done in the Arabian Peninsula. The Rand study “Facing Human Capital Challenges in Lebanon, Oman, Qatar and UAE,”<sup>iii</sup> provided a multi-faceted comparison of 4 countries and the challenges their populations face in the coming global knowledge economy given their previous dependence on oil money and non-citizen labor forces. In the study, Qatar sounds like heaven with so much revenue generated by oil sales that the population does not need to get an education or work – they get stipends from the ruling elite.

“Qatar and the UAE can be characterized as “oil states” in that the sale of oil, rather than the production capabilities of the state’s population, is the generator of the state’s wealth (Mohammed, 2003). This, plus the lack of domestic taxation, means that wealth does not tend to circulate in the economy (Beblawi and Luciani, 1987). Reliance on natural rather than human resources for the wealth of a country has had a major impact on the other three domains of our classification scheme. When oil was discovered in the Arab Gulf region, existing family rulers became the major recipients of the income; at the same time, the rulers directed large sums of that income toward socioeconomic development projects. Before long, these Gulf states supported their citizenry through public-sector employment or social welfare while relying on expatriates to fill any perceived shortages in the skilled and unskilled labor pools.”<sup>iv</sup>

The Study goes on to say that the World Bank considers Qatar to be a “high income” state with real growth rate in its economy of almost 10%, a description that would definitely make most countries envious. In the end, the study finds Qatar’s population may be the least ready to engage in a future knowledge economy because its practice of providing citizens with stipends from the oil, with little requirement for education or work. Tragically, heaven may not last for more than one more generation. The oil eventually will run out and the grandkids will have to be educated and prepared to work. Conversely, Lebanon, which has had the least oil, has developed a better education system, a more diversified economy, and a participatory government that involves the citizens in more decision making. Which country has greater wellbeing?

#### **4. Summary Conclusions**

This review of the concept of wellbeing finds that it is comprised of multiple components, some more important at the individual level while others are of greater importance to the community/societal level. When you add in unique cultural histories, multiple religious belief sets, and evolving understandings about natural resources and environmental sustainability, the issue of defining wellbeing becomes more difficult. These factors present a challenge to organizations that wish to work on a large-scale to promote wellbeing because each society will present a different mosaic of positions across the relevant characteristics of wellbeing. Further, it is not clear that there is a universal endpoint

towards which all such developmental work should aim. However, there are plenty of incremental opportunities in every community and nation even if the endpoint is not clear.

This journey of research (lite) and reading has led me to agree with Diener and Seligman that the state of definition and rigor around what is considered “Wellbeing” needs additional work. It is clear that wellbeing isn’t just health metrics, isn’t just happiness & psychological adjustment, and isn’t just wealth. All three are important. Yet, there is something more that isn’t captured in the work being done.

Defining the missing element(s) is a wonderful challenge for the GKen meeting. As a conversation starter, the framework provided in Exhibit 1 looks at 11 components that feed into wellbeing applied to four levels from individual to all of humanity at which these components might operate. The grid is not intended to be a definitive answer to the problem of defining wellness, but a way of representing the complexity involved in a simple enough way to get one’s arms around it. Hopefully this will help the GKEN meeting participants refine the essential components, and add many more examples from the good work already done that my limited research has no doubt missed, and come up with a much better product.

**EXHIBIT I**

		Basic Survival		Health Care					Social Integration				
Components of Wellbeing		Food	Shelter / Housing	Physical	Mental	Spiritual	Natural Resources / Environment	Education	Transportation	Employment	Political Participation	Culture / Creativity	
Level of Application	Individual	●	●	●	●	●	?	●		?	?	?	
	Local Community	●	●	●	●	?	●	●		●	●	●	
	Nation / Society	●	●	●		?	●	●	●	●	●	●	
	Humanity	●	●	●	●	?	●	●	●	●	●	●	

Endnotes

ii **Beyond Money, Toward an Economy of Well-Being**, Ed Diener, and Martin E.P. Seligman, Psychological Science in the Public Interest, Volume 5, Number 1, 2004 p. 1 -2.

iii **Facing human capital challenges of the 21st century : education and labor market initiatives in Lebanon, Oman, Qatar, and the United Arab Emirates** : Executive Summary / Gabriella Gonzalez ... [et al.], A Rand Study, p. 17-18.

iv Ibid, p.17-18.