



A RESEARCH AGENDA FOR THE HAPPIER LIVES INSTITUTE

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Aims of the Happier Lives Institute

The Happier Lives Institute (HLI) aims to address the following question: how can we most effectively use our resources to improve global well-being? [Governments](#) and [policy organisations](#) are starting to take well-being, as measured through self-reported happiness and life satisfaction, as the measure of social progress instead of GDP. There are now [active efforts](#) to determine which policies should be adopted to increase well-being. However, there is relatively little evidence-based guidance available for individuals or organisations who want to help people become happier around the world. HLI intends to fill this latter gap.

HLI's Vision: a world where everyone lives their happiest life.

HLI's Mission: to provide rigorous research that informs those seeking to make people's lives happier.

This document

As of October 2019, we are still in the process of finalising our research priorities. We are, and have been, consulting with HLI's stakeholders (individuals and organisations we think would, or could, be interested in our work) as well as leading academics in the field. This document summarises our current thinking on the overall structure of our planned research. It sets out a non-exhaustive and non-prioritised list of topics that we would like to be addressed. Our previous research agenda can be found [here](#).

Summary of our plan

There is a [substantial and fast-growing](#) academic literature on subjective well-being (SWB), self-reports of people's happiness and life satisfaction. This research is primarily emerging from the fields of economics and psychology. We consider SWB scores the best available means of measuring well-being and so determining how best to increase it.

Our research falls into two streams: [theoretical](#) and [applied](#). The former concerns various outstanding questions about well-being and its measurement – issues that need to be addressed about whether,

when, and how to make use of the SWB research. The latter pertains to ‘cause prioritisation’: if we aim to improve global well-being, what are the most pressing problems to work on and what are the best means of making progress on them? We expect this applied research to reveal new theoretical issues.

1. Theoretical research: well-being and its measurement

If we want to find the most effective ways of increasing well-being, we need to know what it is and how it should be measured.

1.1 What does well-being consist in?

Following Parfit (1984), philosophers standardly differentiate three accounts of well-being, that is what makes someone's life go well for them: hedonism (well-being consists in happiness), desire satisfactionism (well-being consists in getting what you want), and the objective list (well-being may consist in happiness and/or satisfied desires in addition to other things, e.g. wisdom, love, friendship, and autonomy). Arguably, it is essential to settle which theory of well-being is correct if we want to increase it (although see next project).

While there is already a large philosophical literature evaluating the ‘pros’ and ‘cons’ of the different theories of well-being, there may be some new avenues to pursue. One is how plausible it is to say well-being consists in life satisfaction (an evaluation that one's life is going well overall). Social science research into SWB tends to rely on measures of life satisfaction, but it is not clear where life satisfaction fits in within the three ‘standard’ accounts of well-being listed above or whether this is a problem. Another is the importance of living a meaningful/purposeful life. There are nascent attempts to measure meaning as a separate component of SWB besides happiness and life satisfaction - many believe it is valuable if individuals live more meaningful lives. However, it is unclear what it means to say something is ‘meaningful’ or what relationship ‘meaning’ has with well-being and morality.

Selected academic literature:

- Crisp, R. (2006). Hedonism Reconsidered. *Philosophy and Phenomenological Research*, 73(3), 619–645.
- – – –. (2008). Well-being. *Stanford Encyclopedia of Philosophy*.
- Haybron, D. M. (2016). Mental State Approaches to Well-Being. In M. D. Adler & M. Fleurbaey (Eds.), *The Oxford Handbook of Well-Being and Public Policy* (Vol. 1).
- Parfit, D. (1984). *Reasons and Persons*. Oxford University Press.
- Nussbaum, M. C. (2012). Who is the happy warrior? Philosophy, happiness research, and public policy. *International Review of Economics*, 59(4), 335–361.
- Sumner, L. W. (1996). *Welfare, happiness, and ethics*. Clarendon Press.
- Wolf, S. R., & Koethe, J. (2010). *Meaning in life and why it matters*. Princeton University Press.

1.2 How important is it to settle what well-being consists in?

If it turned out that different measures of well-being suggested the same practical priorities, then it would be a moot point which theory of well-being is true. Research shows that measures of life satisfaction and happiness often have the same correlates, although sometimes differ in the strength of how much circumstances affect one rather than the other; for instance, mental health has a bigger impact on happiness than life satisfaction. It would be useful to investigate whether and when our priorities are sensitive to which account of well-being (and/or measure of SWB) is preferred.

Selected academic literature:

- Boarini, R., Comola, M., Smith, C., & Manchin, R. (2012). What Makes for a Better Life? In *OECD Statistics Working Papers*.
- Clark, A. (2016). SWB as a Measure of Individual Well-Being. In M. D. Adler & M. Fleurbaey (Eds.), *The Oxford Handbook of Well-Being and Public Policy* (Vol. 1).
- Kahneman, D., & Deaton, A. (2010). High income improves evaluation of life but not emotional well-being. *Proceedings of the National Academy of Sciences of the United States of America*, 107(38), 16489–16493.
- Luhmann, M., Hofmann, W., Eid, M., & Lucas, R. E. (2012). Subjective Well-Being and Adaptation to Life Events: A Meta-Analysis on Differences Between Cognitive and Affective Well-Being. *Journal of Personality and Social Psychology*, 102(3), 592–615.

1.3 Can well-being be measured in theory?

A long-standing worry is that it is not possible, even in theory, to measure well-being. This concern is typically raised when well-being is thought to consist in subjective states such as happiness or life satisfaction on the grounds that subjective states are not measurable. The recent consensus in philosophy of science seems to be that well-being is, in principle, measurable in just the same way that intelligence and personality are. This consensus relies on the ‘construct validation’ theory of measurement. Thus, claiming well-being is not measurable because construct validation was false would lead to the arguably implausible conclusion that huge swathes of social science, which also rely on construct validation, are mistaken. Given the importance of the measurability of well-being, it would be useful to know if construct validation is mistaken and, if it is, how we should proceed instead.

Selected academic literature:

- Angner, E. (2013). Is it possible to measure happiness?: The argument from measurability. *European Journal for Philosophy of Science*, 3(2), 221–240.
- – – –. (2011). Are subjective measures of well-being ‘direct’? *Australasian Journal of Philosophy*, 89(1), 115–130.
- Alexandrova, A. (2012). Well-Being as an Object of Science. *Philosophy of Science*, 79(5), 678–689.
- – – –. (2016). Is well-being measurable after all? *Public Health Ethics*, 10(June), 1–15.
- Alexandrova, A., & Haybron, D. M. (2016). Is Construct Validation Valid? *Philosophy of Science*, 83(5), 1098–1109.
- Hausman, D. (2015). *Valuing health: Well-being, freedom, and suffering*. OUP.

1.4 Assuming well-being can be measured in theory, are the current measures valid in practice?

A measure is deemed ‘valid’ if it succeeds in capturing the underlying construct it is supposed to be capturing. One might accept that well-being can be measured in theory but deny that the current measures are, in fact, valid. Social scientists often tend to claim the balance of evidence shows measures of subjective well-being are valid because they behave in the way we expect them to. For example, we expect richer people to be more satisfied, at least up to a point, and that is what the data shows, indicating the purported measures of life satisfaction do measure life satisfaction. Have social scientists been too hasty in reaching this conclusion? Are the critics of SWB measures too critical? There are several reviews of this topic already, but there may be some value in a dispassionate review of these reviews.

Selected academic literature:

- Diener, E., Lucas, R., Schimmack, U., & Helliwell, J. (2010). Well-Being for Public Policy. In *Well-Being for Public Policy*.
- Diener, E., Inglehart, R., & Tay, L. (2013). Theory and Validity of Life Satisfaction Scales. *Social Indicators Research*, 112(3), 497–527.
- Dolan, P., & White, M. P. (2007). How Can Measures of Subjective Well-Being Be Used to Inform Public Policy? *Perspectives on Psychological Science*, 2(1), 71–85.
- Dolan, P., Peasgood, T., & White, M. (2008). Do we really know what makes us happy? A review of the economic literature on the factors associated with subjective well-being. *Journal of Economic Psychology*, 29(1).
- Layard, R. (2005). *Happiness: Lessons from a New Science*. London: Allen Lane.
- OECD. (2013). *Guidelines on Measuring Subjective Well-being*.
- Pavot, W. (2018). The Cornerstone of Research on Subjective Well-Being: Valid Assessment Methodology. *Handbook of Well-Being*, 83–93.
- Plant, M. (2019). *Doing Good Badly? Philosophical Problems Related to Effective Altruism*. D. Phil. Dissertation, University of Oxford, chapter 4.

1.5 To what extent are individuals' self-reported well-being scores comparable?

If two people report that their happiness has increased by 1-point on a 10-point scale, how confident should we be that each has become happier by the same amount? More technically, the question is one of whether SWB scales have the property of 'interpersonal cardinality'. Assumptions on this topic vary: some researchers assume SWB scales are merely ordinally comparable, whereas others assume they are cardinally comparable. Some assume scales are cardinally comparable within a single culture but not across cultures. This topic does not appear to have received much careful scrutiny. (Note the discussion of whether measures of well-being are cardinal is distinct from that of whether well-being itself is cardinal; this discussion assumes it is). Further work is required to (a) determine the necessary and sufficient conditions for interpersonal cardinality, (b) assess whether those conditions are, in fact, met, (c) understand what should be done if individuals' 'raw' SWB scores are not cardinally comparable, (d) consider to what extent our priorities are sensitive to our answer to (a) - (c).

Selected academic literature:

- Kristoffersen, I. (2017). The Metrics of Subjective Wellbeing Data: An Empirical Evaluation of the Ordinal and Cardinal Comparability of Life Satisfaction Scores. *Social Indicators Research*, 130(2), 845–865.

- – – –. (2011). The Subjective Wellbeing Scale: How Reasonable is the Cardinality Assumption? In Economics Discussion / Working Papers. The University of Western Australia, Department of Economics.
- Krueger, A. B., & Schkade, D. A. (2008). The reliability of subjective well-being measures. *Journal of Public Economics*, 92(8–9), 1833–1845.
- van Praag, B. M. S. (1991). Ordinal and cardinal utility. An integration of the two dimensions of the welfare concept. *Journal of Econometrics*, 50(1–2), 69–89.
- – – –. (1993). The Relativity of the Welfare Concept. In *The Quality of Life* (pp. 362–385).
- Ng, Y. (1997). A case for happiness, cardinalism, and interpersonal comparability. *The Economic Journal*, 107(445), 1848–1858.
- – – –. (2008). Happiness studies: Ways to improve comparability and some public policy implications. *Economic Record*, 84(265), 253–266.
- Plant, M. (2019). *Doing Good Badly? Philosophical Problems Related to Effective Altruism*. D. Phil. Dissertation, University of Oxford. Chapter 4
- Taylor, T. (2014). Adaptation and the Measurement of Well-being. *Ethics and Social Welfare*, 8(3), 248–261.

1.6 How should we compare improvements to the quantity vs quality of lives?

Prioritisation requires that we can compare improvements to the quality and quantity of lives. The most common measure of SWB is life satisfaction, which is measured on a 0-10 scale. To make the comparison, a ‘neutral’ point equivalent to non-existence needs to be assigned to the 0-10 scale. It is not yet obvious which method should be used to determine how to do this is a principled way nor, even supposing such a method were agreed on, if there is existing data that might be needed to settle the question. The natural thought would be to say the middle point on the scale - 5/10 - is the neutral point. This has the controversial implication many of those in the developing world have lives ‘not worth living’ e.g. average life satisfaction in Kenya is 4.4. If it is 0, then individuals cannot express an overall dissatisfaction with their lives. Where the neutral point is taken to be will likely have substantial practical implications about how best to increase well-being. A related question is whether such concerns apply to all SWB scales, or just those for life satisfaction – happiness scales often come with a neutral point ‘built in’.

Existing academic literature:

- Frijters, P. (1999). *Explorations of welfare and well-being*. Thela Thesis Amsterdam.
- Peasgood, T., Mukuria, C., Karimi, M., & Brazier, J. (2018). Eliciting preference weights for life satisfaction: A feasibility study.

Existing informal discussion:

- Foster, D. (2019). [Health and happiness: Some open research topics](#).

1.7 What should we do if we can't measure well-being using SWB scores?

HLI plans to prioritise problems using SWB. Supposing we still want to increase happiness and/or life satisfaction but we can't measure them, what should we do instead? Should we return to the 'standard' approaches used in policy making and in the effective altruist community, i.e. intuitive judgements of researchers and/or members of the public about how bad various outcomes are that are used to construct QALYs and DALYs? What is done instead would presumably turn on what the particular issue with SWB scores is.

Existing academic literature:

- Bronsteen, J., Buccafusco, C. J., & Masur, J. S. (2012). Well-Being Analysis vs. Cost-Benefit Analysis. SSRN Electronic Journal.

1.8 How can we convert between different metrics in terms of their effects on SWB?

Much conventional prioritisation analysis relies on indirect measures of well-being such as income and standardised health metrics, namely QALYs and DALYs. While the effects of income on SWB are reasonably well-studied and estimated, the relationship between SWB and health metrics is less clear. Here are two example problems: how many 'life satisfaction points' - equivalent to a 1-point increase on a 10-point scale for one year - is equivalent to one QALY or DALY? Given QALYs and DALYs are based on individuals' intuitive judgements of the badness of health states, and research indicates these are predictably inaccurate, how should we adjust Q/DALY weightings to account for this?

Existing academic literature:

- Dolan, P., & Metcalfe, R. (2012). Valuing Health. *Medical Decision Making*, 32(4), 578–582.
- Layard, R. (2016). Measuring wellbeing and cost-effectiveness analysis using subjective wellbeing. What Works Centre for Wellbeing
- Mukuria, C., Rowen, D., Peasgood, T., & Brazier, J. (2016). An empirical comparison of well-being measures used in the UK (Vol. 2017). Vol. 2017.
- Mukuria, C., & Brazier, J. (2013). Valuing the EQ-5D and the SF-6D health states using subjective well-being: A secondary analysis of patient data. *Social Science & Medicine*, 77, 97–105.

Existing informal discussion:

- Foster, D. (2019). [Health and happiness: Some open research topics.](#)

2. Applied research: cause prioritisation in terms of subjective well-being

Assuming well-being can fruitfully be measured through reports of happiness and life satisfaction, the next question to ask is "What are the best ways of increasing global well-being?" Research questions in this category range from 'broad' topics, which enhance the general understanding of the priorities, to 'narrow' topics focusing on specific means of increasing well-being. These will be roughly set out starting with broader and then moving to narrower topics.

Potential broader research projects

2.1 What is the most useful methodology for cause prioritisation?

A popular claim among members of the [effective altruism](#) (EA) community is that different problems should be prioritised according to an evaluation of their scale, neglectedness, and tractability. What is the relationship between this evaluation and estimating the cost-effectiveness, on the margin, of particular solutions to those problems? Is this the best method to use? Is there anything else to be used instead?

Existing academic literature:

- MacAskill, W. (2015). *Doing Good Better*. Faber & Faber.
- – – – (2018). Understanding Effective Altruism and Its Challenges. In *The Palgrave Handbook of Philosophy and Public Policy* (pp. 441–453).
- Plant, M. (2019). *Doing Good Badly? Philosophical Problems Related to Effective Altruism*. D. Phil. Dissertation, University of Oxford.

Existing informal literature:

- 80000 Hours. (2019). [How to compare different problems in terms of impact](#).
- Cotton-Barratt, O. (2016). [Prospecting for Gold](#).
- Dickens, M. (2016). Evaluation Frameworks (or: When Importance / Neglectedness / Tractability Doesn't Apply).
- Halstead, J. (2019). [The ITN framework, cost-effectiveness, and cause prioritisation - EA Forum](#).
- Open Philanthropy Project and Karnofsky, H. (2014). [Narrowing down U.S. policy areas](#).
- Wiblin, R. (2016). [The Important/Neglected/Tractable framework needs to be applied with care](#).

2.2 What are the world's biggest causes of lost happiness?

A large amount of healthcare priority setting by policymakers seems to be guided by the findings of the Global Burden of Disease (GBD), a report which lists how much 'health' is lost to various conditions. Would it be feasible and/or possible to estimate something similar, but in terms of SWB, rather than health? Potentially, this would cause a reorientation of global resources towards whatever the larger issues are. Would this reorientation be good overall? Perhaps it would simply move money away from existing smaller issues where resources are more cost-effective.

Existing academic literature:

- GBD 2017 Disease and Injury Incidence and Prevalence Collaborators. (2018). Global, regional, and national incidence, prevalence, and years lived with disability for 354 diseases and injuries for 195 countries and territories, 1990-2017: a systematic analysis for the Global Burden of Disease Study 2017. *Lancet* (London, England), 392(10159), 1789–1858.
- Helliwell, J., Layard, R., & Sachs, J. (2019). *World Happiness Report 2019*. (see earlier editions also)

Existing informal literature:

- Foster, D. (2019). [Health and happiness: Some open research topics, Part 2: Application](#).

2.3 What are the best current estimates of the impact different life changes have on SWB?

While the research into SWB is now vast, very little of it consists in high quality studies that indicate causation, as opposed to mere correlation, and gives estimates of effect sizes. Such estimates of the effects on income, bereavement, mental health treatment, etc. are essential for cost-effectiveness analysis. A valuable project would be to collect the latest information available, assess its rigour, and identify what the most important gaps are. Related questions in this area would be considering the nature and implications of hedonic adaptation (individuals' abilities to get used to changes) and social comparison (how life changes for one make others better/worse off) (see references in 2.5). A further project, once such gaps have been ascertained, might be to work with researchers and encourage them to collect the necessary information.

Existing academic literature:

- Blanchflower, D. G., & Oswald, A. J. (2004). Well-being over time in Britain and the USA. *Journal of Public Economics*, 88(7–8), 1359–1386.
- Clark, A. E., Powdthavee, N., Flèche, S., Layard, R., & Ward, G. (2018). The origins of happiness: the science of well-being over the life course.

- Dolan, P., Peasgood, T., & White, M. (2008). Do we really know what makes us happy? A review of the economic literature on the factors associated with subjective well-being. *Journal of Economic Psychology*, 29(1), 94–122.
- Frijters, P., & Krekel, C. (2019). *A Handbook of Wellbeing decision-making in the UK*.

2.4 Shallow cause reports

When we assess problems by their impacts on SWB (as opposed to relying on intuitive judgements of what affects well-being), a number of causes stand out as potentially high impact and unduly neglected. These include, but are not limited to: mental health, pain, drug policy reform (particularly related to novel or currently unavailable chemical treatments for mental health and pain), loneliness, lovelessness, social change, and positive education (i.e. teaching psycho-social skills). A potential initial step would be to write shallow reports into these issues considering their scale, neglectedness, and tractability with a view to identifying some avenues by which additional resources would do the most good.

Existing informal discussion (mostly giving examples of cause reports):

- 80,000 Hours. [Problem profiles](#)
- Founders Pledge. [Research Reports](#)
- Plant, M. (2017). [What are the best ways to improve world happiness?](#)
- – – –. (2018). [Cause profile: mental health](#).
- – – –. (2019). *Doing Good Badly? Philosophical Problems Related to Effective Altruism*. D. Phil. Dissertation, University of Oxford. See chapter 6.
- Open Philanthropy Project. [Focus areas](#)
- Whittlestone, J. (2017). [Animal Welfare](#)
- – – –. (2017). [The Long-Term Future](#)
- – – –. (2017). [Global Health and Development](#)

Potential narrow research topics

At present, the specific causes HLI plans to investigate in depth and compare are poverty, physical health, and mental health. While alleviating poverty and improving physical health are widely regarded as top global priorities, this is not true for mental health. When prioritising using the ‘SWB lens’, mental health seems highly neglected and a potential top priority, hence further careful work is needed to investigate the matter. Some outstanding questions follow.

2.5 What is the best estimate of the effect of poverty-alleviation interventions on SWB?

Most of the evidence on SWB is acquired in low-income countries. One promising way to make people happier is by alleviating the poverty of the very poorest. A natural concern is whether evidence in the former context can be applied to the latter. What are the best current estimates of the effect of poverty programmes on their recipients and their community? A common effect of making some wealthier is that this makes others feel worse - so called 'negative spillovers'. How strong does the evidence suggest these are (a) in general and (b) for those in global poverty? Arguably, there are positive effects of making a whole society wealthier - the state can then better provide services such as policing and welfare. What impact might poverty alleviation programmes have by this path?

Selected academic literature:

- Blattman, C., Fiala, N., & Martinez, S. (2018). The Long Term Impacts of Grants on Poverty: 9-Year Evidence from Uganda's Youth Opportunities Program. SSRN Electronic Journal.
- Ball, R., & Chernova, K. (2008). Absolute Income, Relative Income, and Happiness. *Social Indicators Research*, 88(3), 497–529.
- Clark, A. E. (2017). Happiness, income and poverty. *International Review of Economics*, 64(2), 145–158.
- Clark, A. E. (2016). Adaptation and the Easterlin Paradox.
- Clark, A. E., D'Ambrosio, C., & Ghislandi, S. (2016). Adaptation to poverty in long-run panel data. *Review of Economics and Statistics*, 98(3), 591–600.
- Fleche, S., & Layard, R. (2017). Do More of Those in Misery Suffer from Poverty, Unemployment or Mental Illness? *Kyklos*, 70(1), 27–41.
- Frijters, P., Haisken-Denew, J. P., & Shields, M. A. (2004). Money Does Matter! Evidence from Increasing Real Income and Life Satisfaction in East Germany Following Reunification. *American Economic Review*, 94(3), 730–740.
- Frijters, P., & Krekel, C. (2019). *A Handbook of Wellbeing decision-making in the UK*.
- Graham, C., Zhou, S., & Zhang, J. (2017). Happiness and Health in China: The Paradox of Progress. *World Development*, 96, 231–244.
- Green, E. P., Blattman, C., Jamison, J., & Annan, J. (2016). Does poverty alleviation decrease depression symptoms in post-conflict settings? A cluster-randomized trial of microenterprise assistance in Northern Uganda. *Global Mental Health (Cambridge, England)*, 3, e7.
- Haushofer, J., & Shapiro, J. (2016). The Short-term Impact of Unconditional Cash Transfers to the Poor: Experimental Evidence from Kenya. *The Quarterly Journal of Economics*, 131(4), 1973–2042.
- – – –. (2018). The long-term impact of unconditional cash transfers: experimental evidence from Kenya.

- Plant, M. (2019). *Doing Good Badly? Philosophical Problems Related to Effective Altruism*. D. Phil. Dissertation, University of Oxford. Chapters 4 and 7.

2.6 What are the most cost-effective mental health interventions?

There are a range of treatments for mental health: they can be psychological in nature (e.g. Cognitive Behavioural Therapy, Mindfulness-Based Stress Reduction), chemical (e.g. anti-depressants, anti-psychotics), or physical (e.g. electro-convulsive therapy). Some of these can be delivered in-person, digitally, via public campaigns, as treatments, or as preventives. Among the range of options, which are the most cost-effective interventions? Presumably, this would be determined by finding their cost-effectiveness in standardised mental health scores and then converting these into SWB scores. Does this analysis change if we account for the spillover effects - the impact such interventions have on wider society? To what extent do mental health treatments work in one (cultural) context but not another? A challenge would be to identify the best interventions that philanthropists could fund now as well as the most promising programmes to (re)start.

Selected existing academic literature:

- Chibanda, D., Weiss, H. A., Verhey, R., Simms, V., Munjoma, R., Rusakaniko, S., ... Araya, R. (2016). Effect of a Primary Care–Based Psychological Intervention on Symptoms of Common Mental Disorders in Zimbabwe. *JAMA*, 316(24), 2618.
- de Menil, V. (2015). *Missed Opportunities in Global Health: Identifying New Strategies to Improve Mental Health in LMICs*.
- Fisher, M., & Baum, F. (2010). The Social Determinants of Mental Health: Implications for Research and Health Promotion. *Australian & New Zealand Journal of Psychiatry*, 44(12), 1057–1063.
- Layard, R., & Clark, D. (2015). *Thrive: The power of evidence-based psychological therapies*. Penguin.
- Patel, V., Chisholm, D., Rabe-Hesketh, S., Dias-Saxena, F., Andrew, G., & Mann, A. (2003). Efficacy and cost-effectiveness of drug and psychological treatments for common mental disorders in general health care in Goa, India: a randomised, controlled trial. *The Lancet*, 361(9351), 33–39.
- Patel, V., Maj, M., Flisher, A. J., De Silva, M. J., Koschorke, M., Prince, M., & WPA Zonal and Member Society Representatives, W. Z. and M. S. (2010). Reducing the treatment gap for mental disorders: a WPA survey. *World Psychiatry : Official Journal of the World Psychiatric Association (WPA)*, 9(3), 169–176.
- Patel, V., Weobong, B., Weiss, H. A., Anand, A., Bhat, B., Katti, B., ... Fairburn, C. G. (2017). The Healthy Activity Program (HAP), a lay counsellor-delivered brief psychological treatment for severe depression, in primary care in India: a randomised controlled trial. *Lancet (London, England)*, 389(10065), 176–185.

- Pyne, J. M., Fortney, J. C., Tripathi, S., Feeny, D., Ubel, P., & Brazier, J. (2009). How bad is depression? Preference score estimates from depressed patients and the general population. *Health Services Research*, 44(4), 1406–1423.
- Saxena, S., Lora, A., van Ommeren, M., Barrett, T., Morris, J., & Saraceno, B. (2007). WHO's Assessment Instrument for Mental Health Systems: Collecting Essential Information for Policy and Service Delivery. *Psychiatric Services*, 58(6), 816–821.
- Thornicroft, G., Mehta, N., Clement, S., Evans-Lacko, S., Doherty, M., Rose, D., ... Henderson, C. (2016). Evidence for effective interventions to reduce mental-health-related stigma and discrimination. *The Lancet*, 387(10023), 1123–1132.

Existing informal discussion

- Halstead, J., Snowden, J., & Heoijmakers, S. (2019). [Cause Report - Mental Health](#).
- Plant, M. (2018). [Cause profile: mental health](#).

2.7 What are the top charities, careers, projects, and policies for increasing global well-being?

The objective of the foregoing analysis is to inform decision-makers aiming to increase global well-being. There are four categories in which recommendations would seem to be particularly useful: (a) charities to donate to, (b) career paths to take, (c) 'projects', new initiatives or organisations that would be particularly valuable to start (e.g. a novel mental health charity or company), (d) policies for governments to implement. We expect to produce some initial recommendations in each area before deepening our analysis into whichever area seems likely to have the greatest counterfactual impact.

Existing academic literature:

- Plant, M. (2019). *Doing Good Badly? Philosophical Problems Related to Effective Altruism*. D. Phil. Dissertation, University of Oxford. Chapters 6 & 7.
- O'Donnell, G., Deaton, A., Durand, M., Halpern, D., & Layard, R. (2014). *Wellbeing and policy*. Legatum Institute.
- Sachs, J et al. (2019). *Global Happiness and Wellbeing Policy Report 2019* (see 2018 report also)

Existing informal discussion:

- GiveWell. [Research](#)
- 80,000 Hours. [Career reviews](#)
- Charity Entrepreneurship. [Charity Ideas](#)
- Plant, M. (2015). [What Should A Utilitarian Billionaire Do To Maximise Happiness?](#)

What's next?

We are planning to hire researchers to tackle these questions very soon. Keep an eye out on our website, social media and please sign up to our [newsletter](#). We already have a team of volunteers and will be recruiting for that periodically too. If you agree with our mission of helping everyone live their happiest life and think you can support us or work with us, please email hello@happierlivesinstitute.org.