

Eckersley R. 2009. Teaching happiness: hope or hype? Unpublished article based on keynote address to the First Australian Positive Psychology in Education Symposium, held in May 2009 at Sydney University.

Teaching happiness: hope or hype?

*More schools are putting happiness on the curriculum. But does it work and is it necessary, asks **Richard Eckersley***

In what it claims is a world first, Geelong Grammar School has adopted a 'whole school' approach to education using positive psychology principles. The school recognises, it says, that young people today need strategies to deal successfully with modern life. The new direction has been developed in consultation with one of the founders and most prominent advocates of positive psychology, American Professor Martin Seligman, and includes a new \$16-million centre for wellbeing.

Geelong Grammar is not alone. Many other schools are adopting 'happiness' programs, the latest development in efforts to enhance students' wellbeing and social and emotional skills. Sydney University hosted in May 2009 the First Australian Positive Psychology in Education Symposium, attended by over 160 people, most teachers, from around Australia and New Zealand.

There are two contentious aspects of applying positive psychology, the 'science of happiness', in schools. The first concerns whether intervention is effective - or might even make matters worse. The second relates to whether young people's psychological wellbeing is under threat and so justifies intervention (although the programs are aimed at enhancing positive qualities, not just reducing the negative).

Steve Salerno, the author of 'SHAM: How the self-help movement made America helpless', says in eSkeptic, the newsletter of the Skeptics Society, that 'the notion that the riddle of success is more easily solved by *attitude* than *aptitude* may be one of the more subtly destructive forces in American society'. 'In a society already veering ominously towards narcissism, this "hying of hope" also erodes reverence for hard work, patience, scholarship, self-discipline, self-sacrifice, due diligence and the other time-honored components of success.'

A more scholarly critique is that of Carol Craig, the chief executive of Britain's Centre for Confidence and Wellbeing. Once a strong supporter of positive psychology applications, Craig has recently had a change of heart. In a new report reviewing the literature on social and emotional skills learning (including positive psychology), she cites several reasons: the lack of evidence of lasting benefits and the possibility it may harm students by increasing their emotional self-absorption; it can overlook effective alternatives such as physical exercise; it amounts to social control, the imposition of moral conformity, and a profound intrusion in students' lives; and it draws attention away from the wider social causes of mental health problems.

'Teachers' contribution to young people's wellbeing is first and foremost as *teachers*, not as surrogate psychologists or mental health workers,' Craig says. 'If well-being were to become an integral part of the curriculum as ...advocates propose, we would certainly have a curious case of the tail wagging the dog.'

Both Salerno and Craig cite the example of the self-esteem movement in the US in the 1980s and 1990s. Intended to boost young people's self-esteem and so protect them against mental health problems, the movement has been a failure, blamed for a decline in educational standards and an epidemic of narcissism.

Craig pointed me to a recent newspaper report of an evaluation of positive psychology lessons introduced in a US high school in 2003. The researchers have found only 'modest' outcomes, with a 'lot of null results', including in happiness and several related measures. 'Certainly we were hoping for a lot more and expecting a lot more,' one says.

Craig links her arguments to whether the concerns about young people's wellbeing are justified, drawing on a 2007 book, 'The Loss of Sadness', by American social scientists, Allan Horwitz and Jerome Wakefield. They argue that today's 'epidemic of depression' is an artifact of changing diagnostic criteria, which have cast a wider net over our emotions and resulted in the medicalisation of 'normal sorrow'. For example, they say none of the available instruments for screening young people takes the context of distressing feelings into account. 'Thus none can discriminate normal adolescent emotionality from mental disorder.'

Horwitz and Wakefield also say it is hard to explain any sustained, real rise in mental disorders. In an email exchange, Horwitz told me, 'It's hard to think of factors that ought to be associated with changing rates of mental illness (e.g. poverty, unemployment, violence, child abuse, mobility, etc.) that are rising steadily as opposed to fluctuating across time.'

My own views on these two questions are these. Salerno is right to criticise the hyping of positive thinking in our culture (a prime example being that 21st century snake oil, 'The Secret'), but is wrong to lump this in with more scientifically based programs. Craig's doubts, being based on a wide reading of the literature, deserve attention.

Even proponents of positive psychology acknowledge the need for careful, long-term evaluation. Some teachers question whether positive psychological qualities can be taught in the class room because, as one told me, students need to be in a safe and trusting environment to be self-reflective. We do need to consider aspects of social control, but this could be said of all education, and the distinction between social control and social welfare is probably always blurred. I have long argued the need to address the social determinants of youth problems (Craig says she has come around more to my point of view.)

However, I've tended to move the other way. Once sceptical, I now agree we need these school-based programs (assuming they work). When social conditions are hostile to wellbeing, as they are today, individuals (and schools on their behalf) need to take more personal responsibility for looking after it. This brings me to the question of whether the trends in young people's wellbeing justify such interventions.

It is true we are seeing a medicalisation of psychological suffering in the sense that more people are seeking treatment (although many people with mental illness are still

not being treated). But this development does not explain away the evidence of increasing illbeing. It is a complex and vexed issue.

In my own work, I have used a ‘triangulation’ approach to try to cut through the contradictions and ambiguities, using evidence based on trends over time in mental health problems, cross-sectional studies of their age distribution; expert opinion, public attitude surveys, and trends in various explanatory factors.

Thus we have seen rises in youth suicide between the 1960s and 1990s in many Western nations; some, but not all, studies show rising rates of emotional and behavioural problems in adolescents (possibly peaking in the past decade). Surveys show young people have much higher rates of disorders (about 25% over a year in Australia) than older people.

The eminent British economist, Lord Richard Layard, a co-author of the recently-released report of the Children’s Society’s inquiry, ‘A Good Childhood’, says: ‘Our evidence showed clearly how stressful life has become for many children in all social classes. We identified a common thread in these problems, which is excessive individualism in our culture.’

The Joseph Rowntree Foundation’s consultation with Britons on today’s ‘social evils’ found ‘a strong sense of unease about some of the changes shaping British society’. The top concerns were: a decline in community; individualism, consumerism and greed; and a decline in values. More concrete concerns were: the decline of the family; young people (as victims and perpetrators); drugs and alcohol; poverty and inequality; immigration; and crime and violence.

So there are plausible explanations involving long-term, sustained social trends – not only the rising materialism and individualism identified in these inquiries (and in my own work), but also changes in the family, media and communications, religion, diet and environmental pollution. Evidence implicates all these factors in mental health problems.

Taken separately, none of these studies or streams of evidence is conclusive. Taken together, they provide a coherent and compelling (if still provisional) argument that young people’s wellbeing is being jeopardised. And, as a colleague commented, if there isn’t a problem, why is Geelong Grammar spending millions of dollars on its wellbeing program?

Children who are not well, physically or mentally, are more likely to be poor students, difficult to teach, and less likely to achieve their full potential in life. We need to address this issue through school programs to enhance individual wellbeing (provided they are shown to be effective in the long term).

At the same time, I remain sceptical that such programs are enough, that they will improve the wellbeing of whole populations (as distinct from some individuals), because they do not address directly the social influences.

Consider this quotation: ‘Many people make life unnecessarily difficult for themselves by dissipating power and energy through fuming and fretting....We do not

realise how accelerated the rate of our lives has become, or the speed at which we are driving ourselves. Many people are destroying their physical bodies ...[and] they are tearing their minds and souls to shreds as well.'

It is taken from Norman Vincent Peale's 'The Power of Positive Thinking', published in 1953. One of the first and best-known of self-help books, it sold tens of millions of copies; it was succeeded by thousands of other books in the genre that have sold in the hundreds of millions, if not billions. We have seen a huge growth of the personal growth industry. Yet would anyone agree that the situation Peale describes has improved? Clearly the solutions the industry offers have failed at the social level (which is essentially Salerno's argument).

While some people can stand against the pull of mainstream culture to maintain their wellbeing, and more can be taught to, most continue to be swept along by the cultural current. We need to change its direction.

So the challenge in education must go beyond efforts to boost individual wellbeing. It must embrace a wider, social perspective that draws its legitimacy and inspiration from the fundamental goal of education: to give young people a better understanding of themselves and their world so that they can, in turn, lead fuller, healthier lives and contribute more, as citizens, to creating a better society.

We need to make wellbeing a central purpose of all education, not just the aim of specific wellbeing programs.

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Reading:

Carol Craig: Wellbeing in schools,

www.centreforconfidence.co.uk/projects.php?pid=56

Steve Salerno: Positively misguided,

www.skeptic.com/eskeptic/09-04-15.html#feature

Richard Eckersley: Never better – or getting worse? The health and wellbeing of young Australians, www.australia21.org.au/Publications.htm