
Supporting *Wellbeing in
Healthcare* Research in UK
Universities

SCOPE

Background

A significant increase of wealth and health in the Western world over the past 50 years does not appear to have produced an equivalent increase in societal happiness, at least not using traditional measures.

A growing level of interest is now being directed at the science or economics of 'wellbeing' or 'happiness'. This is reflected in levels of popular interest and the increasing volume of academic research that considers wellbeing and its determinants.

In 2010, David Cameron the UK Prime Minister launched the *National Wellbeing Programme* to 'start measuring our progress as a country, not just by how our economy is growing, but by how our lives are improving; not just by our standard of living, but by our quality of life'. The UK government is now collecting measures of national wellbeing to provide a fuller picture of how society is doing by supplementing existing economic, social and environmental measures.

Subjective well-being (SWB) is used as an umbrella term for how people think and feel about their lives. Decades of research have demonstrated relatively robust determinants of a person's SWB such as the effect of income, unemployment, age, gender and education. Health is an important determinant of SWB and studies have consistently shown a strong relationship between SWB and physical and psychological health.

There are significant positive associations between health and SWB, so that people who rate their general health as 'good' or 'excellent' tend to experience better SWB compared to those who rate their health as 'fair' or 'poor'. The impact of specific physical conditions on SWB has also been demonstrated with heart attacks, strokes and other chronic conditions seen to reduce SWB. SWB can provide useful insights to clinicians and policymakers. For example using SWB shows us that people can adapt very well to substantial disabilities, with research finding that the length of time an individual has experienced a condition reduces the impact of the disability.

Why is all this important? There is a clear two-way relationship between wellbeing and health: health influences wellbeing and wellbeing itself influences health. Knowledge of

this is important to patients, clinicians and policy makers. SWB provides us with a marker of overall 'wellness' and has the potential to be used to determine how conditions and treatments affect people in the experience of their lives. SWB may provide a sound basis for healthcare resource allocation decisions, which are notoriously difficult to make. Should the NHS fund a new biological treatment for rheumatoid arthritis or intensive physiotherapy services? Wellbeing measures may provide additional information on what actually works for patients and their families. The existing evidence base on the use of SWB in health is not as strong as it needs to be to make important policy recommendations and there are important avenues for future research.

An investment in wellbeing and health research

The Lord Leonard and Lady Estelle Wolfson Foundation is considering supporting research in UK universities that strengthen the evidence base for wellbeing research in health.

This funding will support capacity building in the discipline. Alongside supporting the next generation of Lecturers and Professors, it aims to encourage novel and innovative research programmes in wellbeing in UK hospitals and universities. The investment will promote cross-disciplinary working between economists, psychologists, clinicians and policymakers. Funding will be used to build a network of wellbeing academics working in the health domain across UK universities and international partners.

The Charitable Trust is looking to support up to three different Lectureships at different universities for 3 -5 years. Maximum funding per University is £100,000 and we expect to see evidence of how institutions will also support and sustain these roles in the long term. Particular areas the research may focus on could include;

1. Measurement of SWB in health

SWB as a measure of overall 'wellness' has the potential to be used as a marker for how conditions and treatments affect people in the experience of their lives. There are different ways of measuring SWB that range from single item measures (e.g. 'how satisfied are you with your life overall') to SWB scales (e.g. satisfaction with life) and several item measures (e.g. GHQ12). More research needs to be undertaken on how we can best measure SWB across patient populations and the public to better inform researchers and policymakers.

2. Health determinants of SWB

The current literature relies on a great many small-scale studies to determine the health factors associated with SWB. There has been an over reliance to date on correlation studies that do not account for other variables. More weight needs to be given to larger scale studies that account for unobserved individual effects. We will look to support research that can better determine the impact of different conditions or treatments on SWB.

3. Strategies to enhance SWB as a route to better health

A number of studies have previously demonstrated that positive emotions and optimism had a beneficial impact on cardiovascular health and on immune functioning. There is evidence that interventions that are successful in improving subjective wellbeing can have beneficial effects on aspects of health. For example, meditation and relaxation training have been found to increase positive affect and to reduce blood pressure. We are looking for further evidence on the relationship of SWB to health and response to disease or treatment.

4. Mental health and wellbeing

It is no surprise that there is a close relationship between psychological health and wellbeing. Bust mental health has been demonstrated to be the single biggest predictor of life satisfaction, affecting relationships, employment and physical health. Whilst cost effective treatments exist, only a quarter of people who would benefit are in treatment. We will support research directed at trying to enhance access to mental health services that have the express aim of improving wellbeing.

5. Societal determinants of wellbeing

Economic and social conditions – and their distribution among the population – will substantially influence both individual and group differences in health and subjective wellbeing. We will support research that investigates what role social determinants such as income, education and employment have on wellbeing and health statuses. Enhancing our knowledge in this area will facilitate policy-orientated approaches to promoting wellbeing.

The Lord Leonard and Lady Estelle Wolfson Foundation **Application for Funded Lectureship**

Name of institution:
Name of department:
Name of department head:
Name of administrative contact:
Contact address:
Contact phone number:
Contact email:
Start date:
End date:
Total value of grant requested: (£)

1. The Research Project

<p>Please summarise the activities that you plan to undertake as part of the funded Lectureship. Indicate the timeliness and importance of the planned work, and place it in the context of current knowledge.</p> <p>Max 300 words</p>	
<p>What are the specific objectives of the Lectureship?</p> <p>Max 200 words</p>	
<p>What features of the host institution will make it particularly well-suited to successfully achieve the objectives and deliverables of this programme? Emphasise any complementary expertise, facilities and academics in your institution that will enhance this area of research.</p> <p>Max 200 words</p>	
<p>What are the main longer term outcomes you are expecting from funding?.</p> <p>Max 200 words</p>	

2. Sustainability and capacity building

Please give a description of how you and your group/department/institution plan to further develop your expertise with this funding, providing information about potential funding sources that might support it. Max 200 words	
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3. Supporting Documents

Please provide signed letters of support from: Head of Department (or equivalent) of the Institution	
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