

First Australian Positive Psychology in Education Symposium
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Teaching happiness: Does it work and is it necessary?

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The parable of the drowned

- Individual vs population perspectives on wellbeing.
- Epidemiology: causes of cases can differ from causes of incidence.
- Need to enhance wellbeing across the spectrum.
- A parable.

Q 1: Does it work?

‘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 “hyping of hope” also erodes reverence for hard work, patience, scholarship, self-discipline, self-sacrifice, due diligence and the other time-honored components of success.’

Steve Salerno
eSkeptic, 15 April 2009

‘Happiness lessons’

- Lack of evidence of lasting benefits.
- May make matters worse.
- Neglects alternatives – eg, exercise.
- Imposes social control and conformity – ‘a profound intrusion’.
- Takes focus off social determinants.
- Example of the self-esteem movement.

Source: Craig 2009

‘Teachers’ contribution to young people’s well-being is first and foremost as *teachers*, not as surrogate psychologists or mental health workers. 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.’

Carol Craig

Well-being in schools: The curious case of the tail wagging the dog?, 2009

Centre for Confidence and Well-being

Q 2: Is it necessary?

- Patterns and trends in young people’s wellbeing a vexed issue.
- Horwitz & Wakefield: ‘epidemic of depression’ an artifact of diagnosis, the medicalisation of ‘normal sorrow’.
 - Changes to diagnostic criteria.
 - Lack of compelling explanations for increases.

‘... none of the currently available instruments for screening young people takes the context of distressing feelings into account. Thus none can discriminate normal adolescent emotionality from mental disorder.’

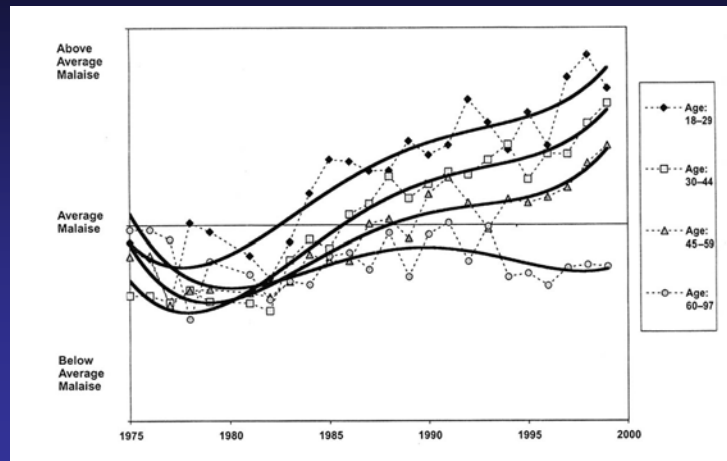
Horwitz and Wakefield
The Loss of Sadness, 2007
(cited in Craig, 2009)

A synthesis approach

- Time trends in youth mental health
- Cross-sectional studies
- Expert opinion
- Public attitudes
- Trends in explanatory variables

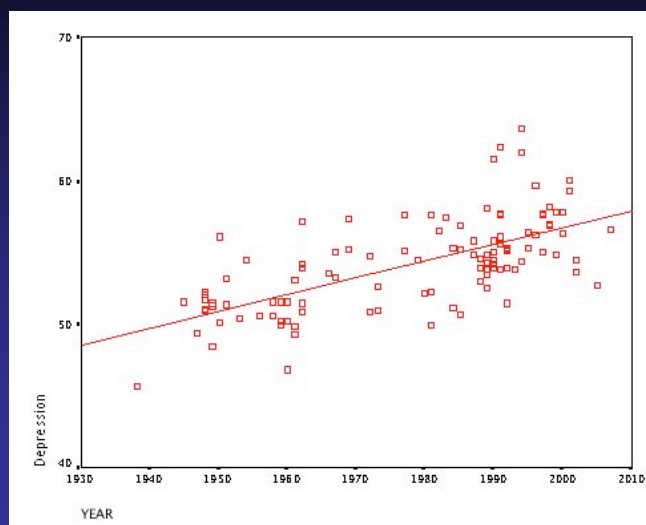
Source: Eckersley, in press

Growing generation gap in malaise USA, 1975-1999



Source: Putnam 2000

MMPI depression scale scores US college students, 1938-2007



Source: Twenge et al (sub)

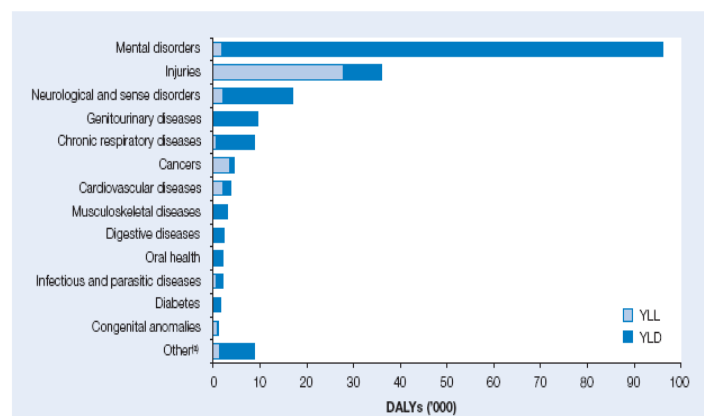
Trend in adolescent mental health – UK, 1986 -2006, by income



Source: Collishaw et al, 2007

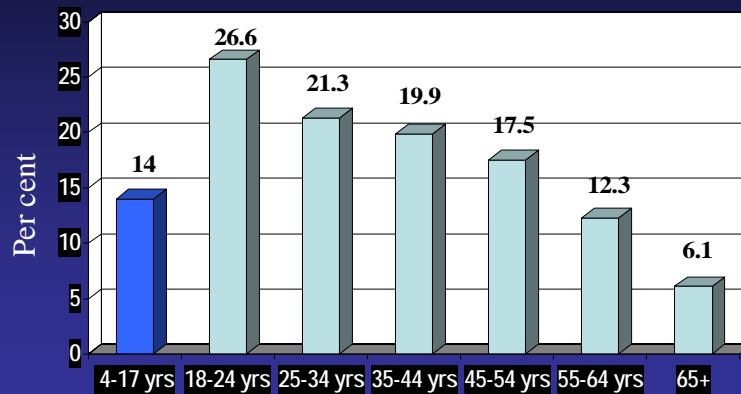
Burden of disease in Australia age 15-24, 2003

Total burden of disease and injury—DALYs



Source: AIHW, 2007

Mental health problems Australia, by age



Source: ABS, 1998

Age

Student social and emotional health, Australia, Prep to Y12

- 89% of students say they are happy.
- 40% display 'lower levels of social and emotional wellbeing'.
- From 20-50% say they:
 - Worry too much (42%)
 - Are very nervous or stressed (31%)
 - Have felt hopeless, depressed...stopped regular activities (20%)
 - Lose their temper a lot...are mean to others (35%)
 - Have difficulty calming down (48%)

Source: Bernard, 2007

Young Australians' wellbeing

- Australian Temperament Project, age 23-24.
- 40% with depression, anxiety, antisocial behaviour and/or illicit substance use, including:
 - 16% moderate or severe depression
 - 16% moderate or severe anxiety
 - 20% binge drink more than once a week
 - 14% used marijuana in past month
 - 12% used other illicit drug in past month
 - 10% antisocial behaviour

Source: Smart, Vassallo, 2008

‘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.’

Richard Layard, co-author
A Good Childhood, 2009
The Children's Society (UK).



The world of today's children

'...we are deeply concerned at the escalating incidence of childhood depression and children's behavioural and developmental conditions.

'[Children] cannot adjust to the effects of ever more rapid technological and cultural change. They still need...real food...real play...first-hand experience of the world...and regular interaction with real-life significant adults.

Letter to the UK *Telegraph*, 12/9/2006
signed by 110 child health, development experts



There is 'a growing sense among parents that childhood is at risk because the daily environment in which children live is perceived to be increasingly less safe, stable and predictable.'

The changing face of parenting
Australian Childhood Foundation, 2005

Perceptions of quality of life

‘Australians fear that Australia’s social fabric is fraying under the influence of global economic pressure, rampant materialism, drugs and a less courteous, less ethical society...The current mood is characterised by self-absorption and escapism, nurtured by disengagement from political and social issues.’

Ipsos Mackay
Mind and Mood 2006

Today’s ‘social evils’

Joseph Rowntree Foundation consultation found:
‘a strong sense of unease about some of the changes shaping British society’.

Top concerns: a decline in community; individualism, consumerism and greed; and a decline in values.

More concrete concerns: the decline of the family; young people; drugs and alcohol; poverty and inequality; immigration; and crime and violence .

Health trends - explanations

1. Structural changes – eg, poverty, inequality, work-life pressures, family breakdown, mobility.
2. Cultural changes – eg, excessive materialism, individualism.
3. Increasing media impacts – eg, violence, envy, consumerism, disengagement, brain effects, lack of sleep.
4. Decline of religion – ‘packages’ many sources of wellbeing.

Health trends – explanations (cont)

5. Dietary changes – eg, less omega 3; implicated in mood disorders, heart disease.
6. Comorbidity – eg, drug use and mental illness.
7. Environmental degradation – eg, exposure to toxic chemicals, global warming.

Education: The peril

Children who are not well, physically and mentally, are more likely to be poor students, difficult to teach, and less likely to achieve their full potential in life.

Education: The promise

- The challenge includes, but goes beyond, enhancing individual health and 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.