Positive Social Psychology:

A Multilevelled Inquiry into Socio-Cultural Wellbeing Initiatives

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Although the field of positive psychology has made great strides in developing interventions for wellbeing, many of these are aimed at individuals, designed to engender adaptive psychological qualities and skills. As such, relatively little attention has been paid within the field to the socio-cultural factors that influence health and wellbeing. However, there is an emergent body of work that does focus on these factors, as summarised in this paper. Using Urie Bronfenbrenner's (1977) multileveled ecological systems theory as a framework, the paper provides an overview of socio-cultural wellbeing interventions and research at multiple levels of scale (microsystems, mesosystems, exosystems, macrosystems, and ecosystems). In doing so, the paper has two main aims: (a) to show how positive change in wellbeing can be affected by the strategic manipulation of socio-cultural contextual factors; and (b) to suggest ways in which the adoption of such a contextual approach can inform policy making.

Keywords: society; culture; wellbeing; intervention; politics; economics; systemic

Introduction

Recent years have seen the emergence of positive psychology (PP), which can be defined as 'the science and practice of improving wellbeing' (Lomas, Hefferon, & Ivtzan, 2014a, p.ix). However, although the field has flourished, it has also attracted criticism, prominent among which is that it pays insufficient attention to the social context of wellbeing (Becker & Marecek, 2008). This lacuna is reflected in a prominent model within the field, Lyubomirsky, Sheldon, and Schkade's (2005) analysis of factors contributing to variance in subjective wellbeing. Drawing on genetic studies (e.g., Lykken & Tellegen, 1996), the model proposes that approximately only 10% of the variance is shaped by social circumstances, while 50% is determined by genetics, and 40% by 'intentional activities.' The prominence and influence of this model – and of related discourses around the relative unimportance of context (e.g., Seligman, 2002) – has been such that, in applied terms, the field has largely focused on creating individual 'positive psychology interventions' (PPIs). This has meant an emphasis on strategies and tools to develop psychological skills that fall within the compass of 'intentional activities' (Sin & Lyubomirsky, 2009), such as gratitude practices.

Unfortunately, Lyubomirsky et al.'s (2005) model has tended to be misunderstood and misapplied within the field: although the model expresses population variance, prominent texts and speakers frequently commit the ecological fallacy of assuming that the 10% figure for social circumstances necessarily applies to every person within that population. However, in actuality, context *does* matter for wellbeing. To give just one illustration of this, men in the lowest socio-economic class in England are almost three times more likely to suffer from a common mental disorder than those in the highest (Equality and Human Rights Commission, 2011). There are manifold reasons why this might be the case, including that people in disadvantageous social positions are more exposed to factors that are detrimental to health and wellbeing, from lower levels of income (Lund et al., 2010) to higher levels of stressors such as crime (Helliwell & Putnam, 2004).

Unfortunately, as noted, these social dimensions of wellbeing have often been overlooked in PP; this omission has been criticised, rather polemically, by Becker and Marecek (2008, p.1771) who write that 'To suggest that self-help exercises can suffice in the absence of social transformation is not only short sighted but morally repugnant.' However, in recent years, PP has gradually begun to pay more attention to the social dimensions of wellbeing (Lomas et al., 2014). Indeed, there is arguably much more of a focus on the socio-cultural aspects of wellbeing within PP than its critics give it credit for. Moreover, from an applied perspective, we are seeing increasing efforts to develop strategies to *promote*

wellbeing at a social level, from community-based interventions (Wall et al., 2009), up to governmental policy being influenced by a wellbeing agenda (Office for National Statistics, 2011). Indeed, socially-focused initiatives to engender wellbeing have been on-going for decades in various applied fields, from social work to education. Such initiatives have also been included within this paper – not in the sense that these now 'belong to' PP, but simply that PP can and should engage with work pertaining to wellbeing that has been undertaken in other related fields.

Such initiatives arguably still fall within the compass of PP, as their primary focus remains on psychological outcomes, such as measures of subjective wellbeing (Diener et al., 1985). That said, this paper submits that it is worth conceptualising this emergent batch of socially-focused wellbeing initiatives as a specific sub-field within the broader discipline of PP, one which we might refer to as 'positive social psychology.' The paper then, has two main aims: (a) to give an overview of the literature and practices within this sub-field, thereby showing how positive change in wellbeing can be affected by the strategic manipulation of socio-cultural contextual factors; and (b) to suggest ways that the adoption of such a contextual approach can inform public policy. The paper thus aims to heed the recent plea by Quaglio et al. (2015, p.242) for 'closer integration of research evidence' into policy making, by providing indicative examples of how this might be accomplished with regard to wellbeing.

In order to bring conceptual order and clarity to these tasks, the paper will organise the literature under discussion according to Bronfenbrenner's (1977, pp.514-515) influential experimental ecology. Bronfenbrenner recognised that the individual person (i.e., physical and psychological functioning) is embedded within four socio-cultural levels of increasing scale, as well as within a temporal dimension (the 'chronosystem'). The four socio-cultural levels are: the microsystem (an 'immediate setting containing that person'); the mesosystem ('interrelations among major settings'); the exosystem (an 'extension of the mesosystem embracing other specific social structures'); and the macrosystem ('overarching institutional patterns,' such as 'economic, social, educational, legal, and political systems'). This paper examines these four levels in turn, followed by an additional contextual level not present in Bronfenbrenner's original model, namely the environmental ecosystem. It will introduce indicative applied interventions and strategies that have been developed to promote health

and wellbeing[1] at each of these five levels, and explore the policy implications of research in these areas.

First though, it is vital to note the importance of considering the 'person in context,' since people are (a) differentially affected by context, and (b) differentially responsive to interventions. With (a), this means that people differ in their socio-cultural contexts and thus in their wellbeing needs. Although this seems like an elementary point, it is often glossed over in PP (as discussed above in relation to Lyubomirsky et al.'s (2005) model). For instance, the further down the socio-economic scale people are, the more their wellbeing appears to be contextually determined, and thus the greater the impact of changing these contextual factors.

Take income for example. Overall, this has a relatively weak correlation with wellbeing of around .2 (Lucas & Schimmack, 2009). However, this correlation is itself meditated by affluence, with a trend of diminishing marginal returns (Blanchflower & Oswald, 2004). At the lower end of the income scale, there is a robust correlation with wellbeing; as people and societies become wealthier, overall levels of life satisfaction tend to rise, since people are increasingly able to satisfy basic biopsychosocial needs. However, once income rises above the point at which most such needs are satisfied, further increases are no longer matched by comparable rises in wellbeing, a phenomenon known as the Easterlin (2001) paradox. Such findings suggest that there would be a greater (cost-effective) benefit in encouraging pay rises for people on the lowest incomes than in providing an equivalent rise for an equivalent number of people who already enjoy relatively high incomes.

Regarding (b), new research is beginning to shed light on individual differences in the extent to which people are susceptible to contextual influences, and hence to interventions which target context. For instance, Pluess and Belsky's (2013) 'Vantage Sensitivity' model suggests there may be a genetic component to such susceptibility, with people differing markedly in developmental 'plasticity.' Some people appear to be greatly affected by both

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[1] 'Health' and 'wellbeing' are contested concepts, encompassing multiple meanings (de Chavez et al., 2005). Both can be construed as incorporating multiple dimensions, including physical, emotional, and social aspects. As such, the terms overlap, and are often used synonymously. Reflecting these considerations, this paper: (a) uses the terms interchangeably, albeit with a preference for 'wellbeing'; and (b) uses both as umbrella labels to encompass a range of positive functioning, i.e., physical, emotional, and/or social. The context in which the terms are used will make the specific meaning clear.

adverse environments (in a negative way) and nurturing environments (in a positive way), whereas others are relatively 'immune' (neither unduly affected by adversity nor boosted by affluence). Corroborating this, Pluess and Boniwell (under review) have found that vantage sensitivity – as indexed through perceptual processing sensitivity – predicted children's responses to a resilience intervention (in terms of its impact on depression outcomes). While such research is in its infancy, and has yet to really filter into applied practice, it points the way ahead to more targeted approaches.

Thus, by being cognizant of these two points, we can develop a more sophisticated and cost-effective approach to policy making, directing interventions to the people and populations who are most likely to benefit from them. For instance, given limited resources for implementing an intervention, based on the examples above (which are not exhaustive), it would make sense to prioritise the most socio-economically deprived sectors of society, and within that population to focus on people with higher levels of vantage sensitivity. Of course, there are many other factors that could be taken into account. For example, wellbeing interventions are often found to have greatest relative benefit for those with poorer mental health, partly because such people have more scope for improvement (Phillips et al., 2012). Thus, the targeting in our hypothetical scenario could be refined further, prioritising within the already highly specified population (low socio-economic status and high vantage sensitivity) people suffering from poor mental health. While only hypothetical, this example gives an illustration of potential targeting approaches.

As a final point, it is also worth highlighting the multiple mechanisms through which socio-cultural interventions may promote positive change. Essentially, in considering the 'person in context,' some interventions focus on 'improving the person' (i.e., enabling them to better adapt to their context), and some on 'improving the context' (i.e., rendering it more conducive to wellbeing). As will be seen, person-centred interventions – which include strategies aimed at multiple people (e.g., targeted at whole families) – are more likely to be found at the level of the microsystem. Then, as we proceed up the levels, initiatives are more likely to be structural and systemic, aimed at altering the environment itself. And so, with that in mind, let us explore the five levels in turn.

Microsystems

The microsystem refers to the immediate social setting of the person, such as their workplace. Among the PP literature that *has* taken the social dimensions of wellbeing into account, it has usually been limited to this level, to what Bellah et al. (1996, p.xxv) call 'social in the narrow sense.' That is, most social research in PP has focused on the importance of relationships,

which are consistently found to be the most important contextual factor affecting individual wellbeing (Helliwell & Putnam, 2004). Such research is of course valuable; calling it narrow simply means it focuses on the relationships themselves, rather than exploring wider systemic factors that influence such relationships.

In theoretical terms, there are numerous ways to consider the role of interpersonal relationships in wellbeing. Quality relationships are a potential gateway to some of the most elevated emotional states (Becker, 1992). More functionally, relationships (e.g., within the home) can offer 'protection' effects, such as division of labour, and emotional support (Arrindell & Luteijn, 2000). More generally, strong relationships are constitutive of social capital (Bourdieu, 1986), e.g., as sources of social support that can buffer against stress (Umberson & Montez, 2010). From an applied perspective, we are beginning to see a wealth of interventions designed to promote health and wellbeing at a microsystem level. We will focus on three key microsystems here: family, school, and work.

With the family, there are numerous interventions designed to facilitate 'positive parenting' (Latham, 1994), i.e., conducive to children's wellbeing and development. For instance, Sanders' (1999, p.71) Triple-P Positive Parenting Program is a multi-levelled family support intervention, designed to 'reduce the prevalence of behavioural and emotional problems in preadolescent children.' A meta-analysis of 55 Triple-P studies concluded it was effective in producing 'positive changes in parenting skills, child problem behavior and parental well-being' (Nowak & Heinrichs, 2008, p.114). Moreover, a cost-effectiveness analysis by Mihalopoulos et al. (2007) concluded that Triple-P was a dominant intervention, since the amount it saves (e.g., in terms of dealing with conduct disorder) far outwieghs its costs (until the reduction in prevalence falls below 7%). This is but one of many evidence-based family interventions that have been developed, as outlined by the United Nations Office on Drugs and Crime (2010) in a comprehensive review of 24 of the most well-validated.

There are also many interactions designed to facilitate good familial interaction generally. For instance, there are PPIs based around mindfulness – a meditation practice aimed at enhancing awareness – focusing on family dynamics such as childbirth and parenting (Warriner, Dymond, & Williams, 2013) and couples therapy (Wachs & Cordova, 2007). Studies suggest that the awareness facilitated through mindfulness can ameliorate parental stress, and enhance familial relationships (Bögels, Lehtonen, & Restifo, 2010). In general (beyond parenting specifically), the efficacy of mindfulness-based interventions is

beyond doubt (Shonin et al., 2013). As such, the key question now regards its cost-effectiveness.

A few such analyses are beginning to emerge, albeit usually only in medical contexts; for instance, van Ravesteijn et al. (2013) compared mindfulness-based cognitive therapy (MBCT) with 'enhanced usual care' (EUS) in treating persistent medically unexplained symptoms. While the bootstrapped costs were comparable (a non-significant difference of €6269 for MBCT vs. €5617 for EUS, with MBCT costing €450 per person), MBCT was more effective (QALY of 0.674 vs. 0.663), with an Incremental Cost-Effectiveness Ratio of €56,637 per QALY gained. Similar analyses in other domains, including family behaviour and relationships, are beginning to be undertaken; for instance the University of Oxford Mindfulness Centre is currently collaborating with the Oxford University Hospitals NHS Trust maternity service to introduce and evaluate a Mindfulness-Based Childbirth and Parenting programme throughout the UK (Warriner et al., 2013).

There is likewise a burgeoning literature on promoting wellbeing at school, with a proliferation of social and emotional learning (SEL) programmes. The emergence of SEL initiatives itself reflects macro-system trends, such as policies targeting social and emotional literacy in schools, as encouraged by the UK Department for Education and Skills (2007), and the recent 'Curriculum for Excellence' in Scotland, described by Thorburn (2014, p.206) as 'educating for well-being.' From a PP perspective, SEL programmes fall within the compass of the field of 'positive education' (Seligman et al., 2009, p.293), defined as 'education for both traditional skills and for happiness.'

Perhaps the most prominent such intervention is the Penn Resilience Program (Gillham et al., 1990), a 12 session course aimed at engendering resilience. A meta-analysis of 17 studies on this found it was effective at reducing depressive symptoms relative to a passive control group (but not compared to an active control group) (Brunwasser, Gillham, & Kim, 2009). However, a UK implementation for the Department of Education, involving Year 7 pupils in 22 schools across three Northern local authorities, produced equivocal results, with initial positive effects (e.g., in academic attainment and wellbeing) fading by the one year follow-up (Challen et al., 2011).

Overall, SEL programmes are thought to have a beneficial impact: a meta-analysis of 213 studies found these were generally successful in reducing conduct and emotional issues, and in enhancing SEL and academic skills (Durlak, Weissberg, & Pachan, 2010). Detailed cost-effective analyses of a range of such initiatives have been provided by Belfield et al. (2015). The 4Rs Program (Reading, Writing, Respect and Resolution) was estimated to have

a net value gain of $5,370 per pupil (costing $2,590 each). Its efficacy derived from enhancing emotional intelligence and reducing aggression, which was calculated to impact positively not only on school attainment, but future outcomes such as job prospects (hence the estimated cost-benefit utility).

Of greater relative value was the Positive Action program (a school based curriculum to promote positive thinking, actions and self-concept), with a net gain of $3,926 per pupil (at a much lower cost of $510 each). Outcomes driving its efficacy included reduced bullying (which otherwise has a punitive economic cost) and substance abuse (which might otherwise lead to future criminality). Even greater cost-benefit value was found with Life Skills Training (a classroom intervention to reduce violence and substance abuse), with a net gain of $2,660 per pupil (costing only $130 each), which likewise achieved its value through predicted reductions in current and future criminality. Given such outcomes (i.e., a focus on addressing conduct disorder and therefore future behavioural issues), SEL initiatives such as these reach out beyond PP (with its focus on wellbeing), with relevance to other applied fields such as social work and even criminal justice rehabilitation. Such estimations give some indication of the value of SEL initiatives – of which many more exist – and provide strong arguments in favour of more widespread policy-driven implementation.

Finally, efforts are being made to understand and promote wellbeing at work, as reflected in the emergence of paradigms like positive organizational scholarship (Cameron, Dutton, & Quinn, 2003). The Job Demands-Resources model (Demerouti et al., 2001) views wellbeing at work as a function of the trade-off between resources (rewarding or supportive aspects of work) and demands (job stresses). If the former exceeds the latter, the result is engagement, i.e., 'a positive, fulfilling work-related state of mind that is characterized by vigor, dedication, and absorption' (Schaufeli, Bakker, & Salanova, 2006, p.702); conversely, if demands outweigh resources, the likely result is work-related stress, and eventually burnout. Consequently, strategies have been developed to promote the 'drivers' of engagement (Crabb, 2011), including psychological drivers (e.g., a sense of purpose), physical drivers (e.g., health and safety), and socio-cultural factors (e.g., organisational values and leadership quality).

The importance of wellbeing at work is now widely recognised; for example, the American Psychological Association (1999) have established a Psychologically Healthy Workplace Program, which assesses workplaces on five categories: health and safety, work-life balance, and employee involvement (in decision making), development, and recognition. Moreover, many employers worldwide have developed initiatives to enhance wellbeing,

ranging from highly specific measures (e.g., active standing or walking desks to promote health; Gilson et al., 2012) to more systemic and comprehensive initiatives[2]. While there is great diversity among such initiatives, a review by Berry, Mirabito, and Baun (2010) suggested the best programmes were characterised by: multileveled leadership; wide scope (mental and not just physical health); individuation (tailored programmes and outcomes); accessibility; and skilful communication (of the goal and nature of the intervention).

While one would hope that employee wellbeing would be valued for its own sake, the persuasive buy-in for organisations is the return on investment of such initiatives can offer; for instance, Berry et al. (2010) report that a programme instantiated by Johnson and Johnson had given a return of $2.71 for every dollar spent (saving the company approximately $250 million on healthcare costs between 2002 and 2008). Indeed, a comprehensive report by the World Health Organization on 'Healthy Workplace' initiatives concluded that these were equally the 'Right Thing' (from an ethics perspective), the 'Legal Thing' (from a regulatory perspective) and the 'Smart Thing' (from a business perspective) to do (Burton, 2010).

Mesosystems

Turning now to the mesosystem, this refers to the interaction between microsystems. This level reflects the recognition that people 'exist in inter-locking contexts' which together affect functioning (Sheridan et al., 2004, p.7). Although mesosystems have tended to be rather overlooked in PP, there is some good work we can draw upon here. Much of this work is at the intersection of the three microsystems above: work-family, and school-family.

With work-family, the main mesosystemic factor in the health and wellbeing literature is work-life balance, the first element of the American Psychological Association's (1999) Psychologically Healthy Workplace Program. The importance this has been recognised by governments. For instance, the UK government launched a consultation on flexible working rights in 2011, with the overall consensus being that it generally enhanced outcomes such as productivity and retention (Smeaton, Ray, & Knight, 2014). For instance, case studies of companies like IBM have found that flexible working arrangements (e.g., telecommuting) have saved millions of dollars, ranging from enhanced retention – the average turnover cost per employee is estimated by the Chartered Institute of Personnel and Development (2011) at £8,200 – to reduced building/energy costs (Caldow, 2009). Other flexibility solutions include onsite childcare, which an Australian survey found increased the odds of above par

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[2] Of course, for large organisations, such systemic initiatives could arguably be classified as exosystem or even macrosystem strategies.

productivity by 1.75 (Brandon & Temple, 2007). Based on such findings, new working flexibility measures (e.g., regarding parental leave) were implemented into law as part of the Children and Families Act 2014 (Smeaton et al., 2014).

Also relevant here are initiatives encouraging adaptive mesosystemic behaviours; for example, recognising that one of the central mesosytemic burdens is commuting (between microsystems), programmes have been created to encourage active commuting, i.e., walking or cycling. Such initiatives can have a range of positive outcomes. First, there are benefits in terms of health. For instance, a range of 'Fitter for Walking' initiatives were conducted with deprived communities across Northern England; these were calculated to have generated significant financial savings due to decreased mortality (as a result of the health benefits of walking), with positive benefit-to-cost ratios of between 0.9 and 46 to 1 (Sinnett & Powell, 2012). Businesses can also benefit; one recent study identified the cost-per-workplace of a walk-to-work initiative as just £441, arguing that this was more than recuperated, not only from the health benefits of fitter employees, but also outcomes such as increased productivity and savings from reduced provision of car parking facilities (Audrey et al., 2015). Finally, such initiatives also have positive environmental impacts (as discussed further below).

There is also good work emerging on the school-family nexus, recognising that these have a 'bidirectional, reciprocal influence over each other' (Sheridan et al., 2004, p.11). This perspective is often overlooked; as Prilleltensky, Nelson, and Peirson (2001, p.157) put it, 'we typically psychologize children's problems and ignore the social and political context in which their problems occur.' However, mesosystemic strategies are starting to be developed, such as family-centred positive psychology (FCPP) (Sheridan et al., 2004). FCPP establishes partnerships between families and schools through 'conjoint behavioural consultation' – 'a structured, indirect form of service delivery in which parents and teachers are joined to work together to address the academic, social, or behavioural needs' of vulnerable or challenging children (p.10). A mesosystemic version of the Penn Resilience Program has also been developed, in which parents are encouraged to themselves use the resilience skills taught on the course, and to support their child's use of these at home; a pilot study found this reduced depression and anxiety in children relative to controls, with effects remaining longitudinally (one year later) (Gillham et al., 2006).

A particularly prominent and well-validated intervention is Families and Schools Together (FAST), a multifamily programme created by McDonald et al. (1997). Designed to build protective factors for children and their parents (e.g., social capital), FAST has been endorsed by bodies such as Save the Children in the UK (Lindsay, Cullen, & Wellings, 2011)

and the United Nations Office on Drugs and Crime (2010). It involves 8 weekly groups (run by the FAST team), in which families attend the school to participate in joint activities with their children, and thereafter 22 monthly groups run by parents themselves. FAST is particularly (though not exclusively) aimed at disadvantaged families, who are more likely to suffer from low social capital (with all its attendant risks, e.g., poorer educational outcomes), and moreover are more likely to benefit from participation in the program. Randomised controlled trials have found the intervention successful in promoting various positive outcomes, from social capital to educational attainment (McDonald et al., 2006). The importance and cost-effectiveness of early interventions to address the pernicious and long-lasting effects of socio-economic inequality has been recognised by the UK government (Department for Work and Pensions, 2011). Indeed, FAST was one of the programmes featured in the successful Parenting Early Intervention Programme, which ran from 2008 to 2011 in all English local authorities (Lindsay et al., 2011). At a cost of just £160 per child, Save the Children thus argue that FAST is highly cost-effective, and should be adopted far more widely.

Exosystems

Moving up to the exosystem, this refers to the wider 'social structures' that 'impinge upon or encompass' the microsystems (Bronfenbrenner, 1977, p.515). One way to conceptualise this level is through the elastic notion of 'community' (from local neighbourhoods, up to larger social aggregations like cities and even nations). There is a rich body of literature emerging on the impact of community factors on health and wellbeing. For instance, a comprehensive analysis by Burke et al. (2009) identified 120 factors, aggregated into six main categories: necessary human and social services; neighbourhood support; green areas and natural environment; social make-up of people; neighbourhood affordability; and (absence of) negative community factors (e.g., crime). From an applied perspective, any action to enhance such community factors could loosely be termed a wellbeing intervention. We can look at this issue in two main ways: bottom-up strategies (undertaken by/with specific community groups) and top-down strategies (systemic initiatives, driven by local authorities). Of course, both types of strategies are influenced by macrosystemic processes, as discussed below. Nevertheless, we can still examine exosystemic interventions on their own terms.

Beginning with bottom-up community wellbeing interventions, there are many such initiatives in the literature. We shall just mention a few to give a sense of the possibilities in this arena. Some are focused specifically on health. For example, Munro et al. (2004) report that a community-based exercise programme for older adults had a significant impact on

health outcomes and health-related quality of life; moreover, the initiative was more cost-effective than most existing medical interventions, with an incremental QALY gain of 0.011 per person in the intervention group, at an incremental cost per QALY ratio of €17,174.

There are also more ambitious community wellbeing initiatives, such as the 'Well London' project, which aims to improve health behaviours among the city's most deprived communities (Wall et al., 2009). This is a co-production collaborative project, working with local communities to identify and meet their specific needs, featuring a range of health and wellbeing initiatives, including: 'Healthy Spaces' (improving public spaces to encourage physical activity); 'Active Living' (informing residents about healthy local resources); 'Be Creative, Be Well' (cultural activities to foster social capital); and 'DIY Happiness' (fun activities). Initial analyses suggest the project has a positive impact on numerous health and wellbeing metrics at a community level (Phillips et al., 2012).

The Well London project was one of a raft of initiatives funded by The Big Lottery Fund's £160 million Well-being Programme. A final report on this by the Centre for Local Economic Strategy and the New Economics Foundation (2013) assessed the relative efficacy and value of the different programmes, reporting average increases on various scales (of 1-10). The most successful for improving overall wellbeing was 'Branching Out,' which taught horticultural skills to people with mental health needs, with an average wellbeing increase of 4.9-5.8. In terms of life satisfaction, the most effective was 'Plymouth – Well-being,' which worked with isolated people to develop social networks, with an average increase of 4.5-7.1. For healthy eating, the most successful was a 'Chances4Change Active' project encouraging healthy workplace commuting, with an average increase of 7.2-9. Across the various projects, participants with the lowest baseline levels of wellbeing gained the most, corroborating the point above about targeting initiatives at those who stand to benefit most.

Community wellbeing can also be improved through top-down local authority planning. Again, we can just mention a couple of examples to give a sense of the possibilities here. Many such initiatives are based on the concept of 'neighbourhood effects,' the idea that 'arrangements in human space may significantly affect human behaviour' (Harcourt, 1998, p.278). One such example is the 'broken windows' theory of policing: this holds that signs of social disorder (e.g., broken windows) lead to an influx of more serious criminal activity, due to the perception that policing is ineffective in that area; thus, the strategy involves aggressively targeting 'quality of life crimes' (minor disorder like vandalism) in order to prevent more serious crime (Wilson & Kelling, 1982). This has been adopted as a policing

strategy by some U.S. cities, where it has arguably contributed to reductions in crime levels (Kelling & Bratton, 1998).

Another example of 'neighbourhood effects, the concept of 'shared spaces' (Jacobs, 1985). Modern cities tend to prioritise motor traffic in the design of public spaces, rendering these unwelcoming to pedestrians; Jacobs thus argued for re-shaping the urban architecture to redress this balance, for example by the seemingly radical idea of removing traffic signs and markings, thereby compelling drivers and pedestrians to interact more considerately. In a pilot trial in Makkinga (Holland), this served to reduce traffic speeds by over 40%, where previous measures had achieved only 10% reductions (Hamilton-Baillie, 2008). The concept is beginning to be implemented more widely, including by the UK government (Department of Transport, 2011). Both of these initiatives intersect with other programmes addressed in this paper; for instance, safe, shared spaces are more likely to encourage active commuting (Sinnett et al., 2011).

Macrosystems

Of course, micro-, meso- and exosystem initiatives are influenced by macrosystem processes, i.e., 'economic, social, educational, legal, and political systems' (Bronfenbrenner, 1977, p.515). For example, the ability of local authorities to fund interventions such as FAST (McDonald et al., 1997), or engage in top-down community planning to promote wellbeing, is limited by budgetary constraints imposed by overarching political systems, e.g., central government priorities (Grimshaw & Rubery, 2012). Moreover, political systems are themselves affected by economic systems, as reflected in the reductions in state spending following the 2008 economic crash (King, 2013). Thus, it is recognised that macrosystems wield a pervasive, systemic top-down influence on wellbeing, filtered down through exo-, meso- and microsystems.

Firstly, it is increasingly acknowledged that quality of life depends to a large extent on 'effective social and political institutions' (Duncan, 2010, p.165). For example, cross-cultural analyses have shown that country-level subjective wellbeing depends on the extent to which governments uphold necessities like civil rights, thereby allowing people to experience factors that are integral to wellbeing, like self-determination (Diener, Diener, & Diener, 2009). This recognition is reflected in initiatives assessing quality of governance and its impact upon wellbeing. For example, the World Bank produces analyses of governmental quality across the globe, aggregating 350 variables into six key 'governance indicators' (Kaufmann, Kraay, & Mastruzzi, 2009): voice and accountability (e.g., civil rights); stability; bureaucratic effectiveness; regulatory framework (e.g., economic policies); rule of law (e.g.,

efficacious legal systems); and control of corruption. Such analyses reflect the understanding that governmental performance on these indices affects the wellbeing of its citizens.

Given this understanding, it is encouraging that some governments are willing to at least entertain the possibility of allowing wellbeing considerations to inform policy. An exemplar in this regard is Bhutan, which in 1972 replaced GDP as its metric of progress with the notion of Gross National Happiness (GNH) (Ura, 2008). Assessments of GNH, made by canvassing its citizens, are a function of nine domains: psychological wellbeing; time use; community vitality; cultural diversity and resilience; ecological diversity and resilience; health; education; living standards; and good governance. Crucially, from an applied stance, GNH is used by the Gross National Happiness Commission to inform policy decisions, with all policies systematically evaluated according GNH considerations.

Although Bhutan is pioneering in this regard, the possibility of wellbeing considerations informing policy have recently entered the political discourse in the UK, and indeed across the world (Everett, 2015). For instance, in 2011 the UK Office for National Statistics (2011) started gathering data on subjective wellbeing as part of its Integrated Household Survey, disseminated annually to 200,000 people, in order to create a National Well-being index. Moreover, in 2010, the Prime Minister David Cameron announced that this index would help guide policy decisions, and established an internal policy unit – the Behavioural Insight Team – geared towards this end (Bache & Reardon, 2013).

However, many advocates for wellbeing-led policy argue for governments to go still further. For instance, Seaford (2014) makes the wellbeing and economic case for policies to enhance job security. Similarly Coutts, Stuckler, and Cann (2014) argue for the health and wellbeing effects of active labour market programs (aiming towards full employment). Arguments are also made for the multiple justifications for redressing social inequality and injustice, including health, moral and economic reasons (e.g., Devereux & McGregor, 2014). For instance, aside from the moral iniquity of child poverty, Bladen, Hansen, and Machin (2008, p.15) contend that the economic benefits of eradicating this 'in terms of foregone earnings, employment and benefit savings correspond to about 1% of GDP [£13 billion at 2008 levels).'

It is worth noting that the notion of governments specifically legislating for the wellbeing of its citizenry is not without its critics. For example, drawing on anti-political philosophies such as libertarianism, some have argued that governments have no business doing this, beyond upholding minimal mechanisms to prevent harm to/by other people (Jessop, 2002). Recognising the appeal of such arguments, there are attempts to fashion

prescriptive wellbeing policies which nevertheless uphold people's freedom to eschew these, such as Thaler and Sunstein's (2003) notion of 'libertarian paternalism' (the theoretical foundation for the Behavioural Insights Team). In this, the 'choice architecture' is arranged in such a way that the desirable option (from a wellbeing perspective) is set as the default, thereby making it more likely to be chosen (by virtue of people's inertia), as used in initiatives such as automatic enrolment in pension schemes (Thaler & Sunstein, 2008).

These political considerations must themselves be appraised in the context of other macrosystem processes, such as economic systems. Although political and economic systems have tended to exist within bi-directional reciprocal relationships, recent years have seen a movement towards economic systems assuming primacy (Plehwe, Walpen, & Neunhöffer, 2005). That is, it is increasingly common for governmental policies to be driven by concerns about the needs of the financial markets (Cox, 1999), particularly since the 2008 global crash (King, 2013). For instance, widespread austerity policies have been imposed across much of the world in the name of deficit reduction, severely curtailing state spending, including on public health policies and the kinds of wellbeing initiatives outlined above (Grimshaw & Rubery, 2012).

However, just as there are efforts to change political systems to better serve wellbeing, there are also attempts to similarly reconfigure economic systems. For example, certain economists and think-tanks have advocated for what Haque (2011) calls a 'positive economic paradigm,' i.e., one not only concerned with profit maximisation, but with the wellbeing of people and the environment. For instance, the New Economics Foundation (NEF) is a UK think-tank which takes its motto from the subtitle of Schumacher's (1973) classic 'Small is Beautiful: Economics as if people mattered.' NEF promotes policy recommendations designed to 'transform the economy so that it works for people and the planet'; these include the 'Happy Planet Index,' which assesses societal progress by weighting the life satisfaction of countries against their ecological footprint (Abdallah et al., 2009). Calls to reform the economic sphere are also emerging in the form of progressive social movements, like the recent Occupy protests in major financial centres (DeLuca, Lawson, & Sun, 2012). Such causes are relevant to PP, as they aim towards flourishing and wellbeing – crucially, though, not an individualist person-centred form of flourishing, but one inextricably connected to equitable and just social settlements (Becker & Marecek, 2008).

Ecosystems

Finally, we might touch upon the relevance to wellbeing of the broader ecosystem, which encompasses the other layers of Bronfenbrenner's (1977) experimental ecology. The global

ecosystem was not part of Bronfenbrenner's original framework. However, this was added as an outer tier in a recent adaptation of the model by Lomas et al. (2014b), reflecting the idea that all the other levels are embedded within a still larger context of the biosphere, upon which they depend for their very existence. While the environment should ideally matter to us for its own sake, even from an instrumental human-centric perspective, it is a fundamental concern, since existentially our wellbeing depends upon the wellbeing of the environment: Earth must be capable of supporting life for flourishing to even be conceivable (Smith et al., 2013). Moreover, aside from questions of existential survival, human quality of life depends on environmental factors like air quality and access to fresh water (Boyd & Banzhaf, 2007).

Although concern for nature has existed in some form for millennia, it is only in the decades since Rachel Carson's (1962) Silent Spring that environmentalism has come to prominence as a social concern (Griswold, 2012). With increasing awareness of the existential dangers caused by anthropogenic climate change, environmental concerns have risen up the political and cultural agenda (McCright, Dunlap, & Xiao, 2013). Consequently, assessments of societal wellbeing and progress are being developed that take environmental variables into account, such as NEF's 'Happy Planet Index' (Abdallah et al., 2009), cited above. Moreover, from an applied perspective, since environmental wellbeing depends to a large extent upon human behaviour, efforts are being made to encourage people to act in more sustainable ways.

Indeed, ecological initiatives are being developed at all of Bronfenbrenner's (1977) levels of scale. For instance, at a microsystem level, there are efforts to promote sustainable energy consumption by equipping houses with smart meters that provide feedback on energy expenditure (Fischer, 2008). Here we might also consider initiatives that aim to encourage respect for and engagement with nature, e.g., wellbeing interventions involving gardening (Milligan, Gatrell, & Bingley, 2004). At a mesosystemic level, sustainable behaviour can be promoted by encouraging energy efficient travel (i.e., reducing energy consumption used commuting between microsystems), such as car-pooling (Kearney & De Young, 1995) or active commuting (Sinnett & Powell, 2012).

At an exosystem level, sustainability initiatives include the promotion of environmentally-friendly behaviours like recycling, such as interventions that attempt to position it as a cultural norm (Hopper & Nielsen, 1991), and on-going efforts to establish or enhance the provision of local recycling services (Read, 1999). At a macrosystem level, environmentalism is being promoted through policy commitments to sustainability, including regulatory initiatives such as carbon limits and trading (Spash, 2010), and efforts to develop

and utilise estimates of natural capital (Everett, 2015). More broadly, the macro-pressure of progressive social environmental movements helps provide the impetus for such policy initiatives (Griswold, 2012). Together, these programmes and strategies reflect our nascent collective efforts to promote environmental wellbeing, which in turn is so vitally important to our own wellbeing.

Conclusion

This paper has shown the value and indeed necessity of approaching wellbeing at multiple socio-cultural levels, from microsystems to the ecosystem. It is increasingly recognised that wellbeing is not simply a matter of people's individual choices and psychological qualities, but is complexly determined by socio-cultural factors at many different levels of scale. As such, from an applied perspective, our collective wellbeing will be enhanced to the extent that we are able to structure our socio-cultural environment to better promote this end. The proposed 'positive social psychology' – which this paper has attempted to introduce and summarise – will hopefully be useful going forward in helping to achieve this goal.

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