Can we teach people to live happier and more pro-social lives? Are there cost-effective and scalable interventions? And could the effects be sustained over time? Christian Krekel and colleagues have evaluated the impact of Exploring What Matters – a local community course that aims to promote mental wellbeing.

Happier lives: exploring what matters
For decades, enormous research effort has been put into exploring what makes people happier (Diener et al, 1999; Layard et al, 2014). At the same time, there is growing evidence showing that being happier is an important predictor of life outcomes, including health and longevity (Danner et al, 2001), productivity and income (De Neve and Oswald, 2012; Oswald et al, 2015) and even compliance with restrictions during Covid-19 lockdowns (Krekel et al, 2020).

Yet questions about whether and how we can teach people to live happier and more ‘pro-social’ lives remain largely open. Answering them is important, particularly in view of the Covid-19 crisis, in which social distancing measures and social isolation affect millions of people. Apart from the fears that oneself, a family member or a friend might contract the disease, the impacts of these measures and our starkly altered daily routines constitute some of the mental wellbeing costs of the crisis.

Before the pandemic, we evaluated the impact of the ‘Exploring What Matters’ course, a local community intervention aimed at promoting mental wellbeing and pro-sociality in the general, healthy adult population.

The course consists of eight consecutive weekly sessions, each lasting up to two and a half hours. Each session builds on a thematic question, for example, what matters in life, how to find meaning at work or how to build happier communities. Participants discuss these topics and then use behavioural activities such as goal-setting and social commitment tools that help to translate discussions into action.

The course is run by Action for Happiness, a registered charity in England, which has become a global movement with more than 175,000 members across 180 countries. CEP’s Richard Layard was a founder and its patron is the Dalai Lama, who helped to launch the course in London in 2015.

The course is led – normally face-to-face – by non-expert volunteers (lay people, screened for their motivation and skills) in their local communities, making it highly cost-effective and scalable. As such, 431 courses have already been completed in 26 countries.

In the context of the current crisis, interventions such as Exploring What Matters may gain in importance: they can play a vital role in alleviating some of the mental wellbeing costs of the crisis, allowing people to connect virtually and exchange over meaningful matters, and redirecting some of their attention towards the positive.

Strong positive effects on subjective wellbeing, mental health and pro-sociality

Figure 1 plots measures of life satisfaction, mental health (PHQ-9 for depression and GAD-7 for anxiety) and social trust of participants before and after taking the course. The course had strong positive effects on most outcomes:

- First, between baseline (t=0) and endline (t=1), the course strongly improved the scores of Group 1 participants (who took the course during this period), whereas those of Group 2 participants remained constant.
- Second, between endline (t=1) and follow-up (t=2), the course strongly improved the scores of Group 2 participants (who took the course then) in a similar fashion, while those of Group 1 participants were sustained or even continued to improve in the longer term.

Figure 2 shows the effect sizes more clearly: the course significantly increased subjective wellbeing by between 47% and 63% of a standard deviation. These are large effects. For life satisfaction, for

![Average scores of groups at different points in time](image)

Notes: Life satisfaction and social trust are measured on scales from zero to ten, PHQ-9 for depression on a scale from zero to 27, and GAD-7 for anxiety on a scale from zero to 21. N=383 (146 at t=0, 133 at t=1 and 104 at t=2). Confidence intervals are 95%.
Sources: Own data collection, own calculations.
example, the effect size corresponds to an increase of about one point on a zero-to-ten scale – more than being partnered as opposed to being single (+0.6) or being employed as opposed to being unemployed (+0.7) (Clark et al., 2018).

Likewise, in terms of mental health, the course significantly reduced both PHQ-9 (depression) and GAD-7 (anxiety) scores, respectively, by about 50% and 42% of a standard deviation. In terms of pro-social attitudes, we find that it significantly increased both compassion towards strangers and social trust in general, respectively, by about 38% and 53%.

What were the mechanisms through which these positive impacts came about? We find that after taking the course, participants reported feeling more knowledgeable of what contributes to a happy and meaningful life. They also knew more about what matters to them personally; they felt more able to do things to improve their own wellbeing and the wellbeing of others; and they reported practicing mindfulness or meditation more often, treating themselves in a kind way more often, connecting with other people, and doing something kind or helpful for others.

A randomised controlled trial
To reach these conclusions, we conducted a ‘randomised controlled trial’ of six courses that took place in London between August 2016 and December 2017, including 146 participants in total.

After registering for the course online, participants were first randomly allocated to either a ‘treatment’ or ‘control’ group. They were then invited to arrive on the same day to have their baseline data collected. Only participants in the treatment group (Group 1) started their course that day, whereas those in the control group (Group 2) started theirs later, after the treatment group had finished.

Randomisation ensured that observable and unobservable characteristics were balanced between treatment and control group. We then employed a ‘difference-in-differences’ research design that compared the evolution of outcomes between the groups over time to arrive at a causal interpretation of course impacts.

Figure 2: Impacts on self-reported outcomes: subjective wellbeing, mental health and pro-sociality

Notes: Coefficients are standardised, with mean zero and standard deviation one (z-scores), using control group mean and standard deviation. They originate from a multiple regression analysis.
Controls included age, gender, marital status, education, employment, income, religion, religious practice, preference for meeting new people and making friends, health (including pregnancy), health-related behaviour (including smoking and medication usage). Robust standard errors were clustered at the participant level. N=279 (146 respondents, of which 73 were in treatment and 73 in control). Confidence intervals are 95%.
Sources: Own data collection, own calculations.

Additional analyses

Impacts on biomarkers
Besides self-reported outcomes, we also collected data on biomarkers through saliva samples. These include cortisol – a steroid hormone responsive to stress – and a range of cytokines – immune proteins involved in inflammatory response associated with mental ill-health and depressive symptoms.

We do not find that the course had significant impacts on these biomarkers at conventional levels, which is most likely to be due to small sample size. With the exception of cortisol, we find that cytokines consistently moved in the hypothesised direction: pro-inflammatory cytokines (which correlate positively with mental ill-health and depressive symptoms) were decreased, whereas anti-inflammatory cytokines (which correlate negatively) were increased.
Replication using online surveys
Since its launch in 2015, 431 courses have been completed worldwide, totalling 5,621 participants. Right from the beginning, Action for Happiness has been collecting data on course outcomes at the participant level. In particular, by means of online surveys, data on course participants’ life satisfaction, mental wellbeing, compassion and social trust have been collected. These data are high-powered and widely spread across geographical regions and over time.

Using simple before-after comparisons, we find that the course had strong positive impacts on these outcomes, of similar size as in our randomised controlled trial. Overall, this replication using online surveys confirms our findings.

Conclusion
The Exploring What Matters course shows that it is possible for people in the general, healthy adult population to live happier and more pro-social lives, by means of intervention, cost-effectively and at scale. Importantly, it shows that the effects seem to be sustained over time.

In the context of Covid-19, interventions like this could play an important mediating role when delivered online to a large number of people. Although the crisis is first and foremost about physical health, it is equally important to consider the mental wellbeing of both the physically affected and the physically unaffected (De Neve et al, 2020). While our research focused on groups meeting in-person, Action for Happiness has been working to support similar local groups getting together online.

Interventions that enable people to come together virtually, discuss matters of mutual interest and direct their attention towards the positive will help to alleviate some of the hardships associated with the crisis. Importantly, they may be preventative and provide people with protection against some of the mental wellbeing costs. Interventions like Exploring What Matters will also be even more urgently needed as we move beyond the crisis and begin to restore our face-to-face connections and community wellbeing.

There is also a potential role for policy: to the extent that people are unaware of the availability of such interventions or do not believe in their effectiveness, policy can be an effective information broker to inform people and encourage take-up.

This article summarises ‘A Local Community Course That Raises Mental Wellbeing and Pro-Sociality’ by Christian Krekel, Jan-Emmanuel De Neve, Daisy Fancourt and Richard Layard, CEP Discussion Paper No. 1671 (http://cep.lse.ac.uk/pubs/download/dp1671.pdf).

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Further reading


