

# Wellbeing Areas of Research Interest

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By Nancy Hey, Ingrid Abreu Scherer and Joanne Smithson  
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## About the authors

Nancy Hey, Executive Director at the What Works Centre for Wellbeing 2014-2024 and implementation lead for government, public policy and work.

Ingrid Abreu Scherer, Senior Civil Society Lead at the What Works Centre for Wellbeing 2015-2024.

Joanne Smithson, Head of Implementation and Learning at the What Works Centre for Wellbeing and implementation lead for local government and health sectors 2019 - 2024.

This report was also developed with support from Dr Judith Grant, Dani Payne at the Social Market Foundation, Professor Annette Boaz and Dr Kathryn Oiver.

## About the What Works Centre for Wellbeing

We are an independent collaborating centre and the aim of our work is to improve wellbeing and reduce misery in the UK. We believe that this is the ultimate goal of effective policy and community action. By accelerating research and democratising access to wellbeing evidence, we develop and share robust evidence for governments, businesses, communities and people to improve wellbeing across the UK.

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## Summary

The aim of the What Works Centre for Wellbeing has been to make evidence about wellbeing robust, relevant and useful and communicate it well to those who can and do use it, building a learning system for wellbeing.

Looking ahead, we recommend robust, strategically developed and meaningful research to help the UK to:

- understand personal, family, community and national wellbeing and its drivers;
- inform confident and proportionate decision making about what government, business and civil society can do to improve wellbeing and reduce wellbeing disparities;
- ensure that wellbeing is sustainable for the future.

In general, our recommended approach to evidence generation is

- a) where evidence is more developed, roll out and scale appropriately, doing more robust evaluations;
- b) where there are evidence gaps, develop a good-quality foundational evidence base, including using data analysis and high quality qualitative evidence;
- c) keep collating and reviewing progress.

With these Areas of Research Interest (ARI) we aim to inform those who fund and provide research about some of the most important questions and challenges facing wellbeing in the UK. This ARI document brings together the research recommendations from over 90 projects with Practice In Need of Evidence - PINE - from the last ten years.

The overall ambition for wellbeing research is to continue to move towards Living Evidence Reviews of the global knowledge on the areas outlined in this document.

## The five wellbeing areas of research interest

1. Population wellbeing and wellbeing inequalities
2. Wellbeing in working age
3. Place and community wellbeing
4. Loneliness and connection
5. Methods and measures for wellbeing

These ARI build on the ten years of our collaborative research and experience, and those of our partners. Specifically, they draw on

- our research findings;
- our public dialogues across the UK;
- the statistics on national wellbeing;
- our understanding of what professionals in all sectors - the engines of action and research - need so they can act with appropriate confidence to improve, sustain and maximise wellbeing through their work both paid and unpaid.

They have been generated as part of securing the Centre's legacy. Following our closure on 30 April 2024, we hope that collective learning about wellbeing continues to grow at the pace it has over the last ten years.

## Summary of priorities for future research

### 1. Population wellbeing and wellbeing inequalities

- Establish living reviews of interventions to support wellbeing, and extend the scope of the What Works Review of Life Satisfaction to include observational studies of policy changes.
- Carry out conceptual, indicators and What Works reviews of interventions that improve under-researched components of wellbeing including eudaimonia, affect and experiential wellbeing, as well as autonomy, agency and control.
- Understand wellbeing and wellbeing inequalities across the life course and at different levels, especially for under-researched topics and

populations such as family wellbeing, disability and wellbeing, children and young people's wellbeing, financial wellbeing and wellbeing at the end of life.

- Review the drivers and interventions that support wellbeing in specific contexts and sectors, including health, information and advice, climate and weather, and digital wellbeing.

## 2. Wellbeing in working age

- Understand how work and health interact and how to improve work and health outcomes together.
- Review active labour market and inclusive work policies to understand what is effective in supporting progression into work.
- Develop deeper understanding and a 'what works toolkit' of workplace interventions based on the [key drivers of wellbeing at work](#): Relationships, Health, Security, Environment and Purpose.
- Develop more causal evidence about the links between workplace wellbeing and productivity in different industry sectors.
- Understand what works to mitigate and reduce burnout.
- Evaluate approaches to effectively support line managers and employees with terminal illness.
- Understand why and how education and learning is effective for different people. Review of the contexts and mechanisms that enable wellbeing through adult learning and skills interventions.

## 3. Place and community wellbeing

- Identify, understand and develop approaches to address wellbeing disparities, focusing on those groups and areas where inequalities have the greatest effect.
- Produce, disseminate and deploy local area data on individual and community wellbeing in a more timely, granular and harmonised way. Review how the [Different People Same Place model](#) performs at different spatial scales.
- Identify the protective and risk factors for creating and sustaining thriving communities, and understand the impact of sequencing, interrelations, causes and order effects.

- Review the effectiveness of place-based and regional approaches to improving wellbeing outcomes. Understand the impact of place-based culture and sport events. Explore the role local leaders play in establishing the conditions for maximising wellbeing.
- Understand the effects of interventions to improve or extend access to the built, natural and historic environment on personal, family and community wellbeing.
- Understand the contexts and mechanisms that enable sport, arts and leisure interventions to support wellbeing across the life course and for people who are less likely to take part.
- Improve concepts, methods and understanding of effective interventions to support social capital, including belonging, social cohesion, trust, connectedness, participation and civic leadership, and community agency.

#### 4. Loneliness and connection

- Understand the experience and determinants of loneliness across the life course and for people in different contexts, including the roles of transitions and changing social trends, family and intergenerational connection, and peer relationships and friendships.
- Understand the distribution and drivers of loneliness for under-research groups such as children and young people, people in middle age, ethnic minority groups, disabled people, and LGBTQ+ people. Review interventions that reduce loneliness for those groups, for example at school, work, or in family settings.
- Understand the contexts and mechanisms which make psychological and therapeutic interventions effective in tackling loneliness.
- Develop proportionate and meaningful measures for evaluating loneliness across sectors and interventions, including working with practitioners and linking datasets.

#### 5. Methods and measures for wellbeing

- Translate between measures of subjective wellbeing and understand how they interact with each other, especially ONS4, WEMWBS, and measures of affect, purpose and good functioning, as well as other commonly used measures of wellbeing drivers.
- Continue to develop work on the Wellbeing Adjusted Life Years - the WELLBY, expand the range of wellbeing effect sizes for appraisal, and



continue to develop life course models of wellbeing.

- Use meaningful review methods including realist and Context-Mechanisms-Outcomes approaches to understand the theories of change of interventions and programmes.
- Develop and support the use of the [What Works Centre for Wellbeing Quality in Qualitative Evidence Framework](#)
- Use the [What Works Centre for Wellbeing Case Study Synthesis Methodology](#) to bring together and analyse practitioner evidence.

# 1. Population wellbeing and wellbeing inequalities

## Summary

- Establish living reviews of interventions to support wellbeing, and extend the scope of the What Works Review of Life Satisfaction to include observational studies of policy changes.
- Carry out conceptual, indicators and What Works reviews of interventions that improve under-researched components of wellbeing including eudaimonia, affect and experiential wellbeing, as well as autonomy, agency and control.
- Understand wellbeing and wellbeing inequalities across the life course and at different levels, especially for under-researched topics and populations such as family wellbeing, disability and wellbeing, children and young people's wellbeing, financial wellbeing and wellbeing at the end of life.
- Review the drivers and interventions that support wellbeing in specific contexts and sectors, including health, information and advice, climate and weather, and digital wellbeing.

## 1.1 Living reviews of interventions that support subjective wellbeing

The [12 Missions](#) outlined in the UK government's Levelling Up white paper cover the drivers of wellbeing. As such, by adding subjective wellbeing measures to any evaluation on levelling up activity, we can expand the evidence base on wellbeing.

As part of this, continue to move towards [Living Evidence Reviews](#) of the global knowledge on the areas outlined here, building on the following rapid reviews:

- [What works to improve Life Satisfaction?](#) – which collated high-quality evidence on effective interventions and broad drivers to inform experimental research and policy development.
- [What works to improve personal subjective wellbeing?](#) – which explored impact evaluations that use the harmonised [ONS4 indicators](#) of worthwhileness, happiness, anxiety, and life satisfaction.

- [What works to improve mental wellbeing?](#) – which synthesised the evaluation literature that uses [WEMWBS](#) to map the evidence base in relation to mental wellbeing.

## 1.2 Components of subjective wellbeing

### The subcomponents of subjective (personal) wellbeing



### 1.2.a Life satisfaction and evaluative wellbeing

Life satisfaction is a core component of subjective (personal) wellbeing. It can be defined as “a person’s cognitive and affective evaluations of his or her life”<sup>1</sup>. It encompasses a holistic view that reflects one’s perceptions, opinions, and evaluations of their circumstances.

Priorities for research:

- Continually update the [2024 rapid review on what works to improve life satisfaction](#), incorporating relevant new evidence as it becomes available: What are the long-term determinants of life satisfaction? What is the effectiveness of interventions aimed at improving life satisfaction across the life-course? What can we learn from international studies?
- What is the effectiveness and safety of interventions aimed at improving life satisfaction in areas of music, social media and relational emotion-based activities?
- What is the effectiveness of interventions aimed at improving life satisfaction for children, students and older populations, adults in the workplace; groups we know to have [low wellbeing](#) (for example unemployed individuals or those living in poverty); and marginalised groups?

<sup>1</sup>Diener, E., Lucas, R. E., and Oishi, S. (2002). Subjective well-being: the science of happiness and life satisfaction. *Handbook Positive Psychol.* 2, 63–73.

- How can multi-component interventions where we know both individual elements are effective (for example therapeutic approaches and exercise or emotional skills development and gratitude) be designed and deployed for maximum impact?
- How do factors including duration and frequency of sessions (intensity of intervention), group vs individual interventions, online or in-person delivery, delivery setting, and level of training received by those delivering interventions impact intervention effectiveness for different groups and contexts?
- How can established longitudinal cohort and panel studies be exploited to understand the impact of 'natural experiments' which observe changes in life satisfaction as a result of policy change for example social security policies, living wage and the introduction of no-fault divorce?
- What is the best indicator of subjective wellbeing inequality?
- What is the best indicator of progress, or value add, in wellbeing?

## 1.2.b Eudaimonic wellbeing

Eudaimonic wellbeing relates to a sense of purpose and self-actualisation. It is independent from hedonic or evaluative wellbeing. A less commonly researched topic, it is important we bring together concepts, measures and effective interventions to understand this important component of wellbeing.

Priorities for research:

- [What matters for our sense of purpose?](#) Which interventions improve the national Worthwhile measure, and personal sense of meaning.
- What matters for our sense of hope and optimism? What works, and how does improved hope and optimism affect life trajectories and inequalities.
- What matters for good functioning at different life stages, and for different people, especially around life skills in work and civic life?
- What matters for perceptions of fairness, dignity and safety? and how are they connected to national measures of personal wellbeing?
- What builds and sustains self worth, feeling useful, competence and confidence?

### 1.2.c Affect and experiential wellbeing measures

A future priority is research which brings together interventions that improve positive and negative affect, specifically Happiness and Anxiety. Additionally, there is untapped wealth of data on people's experiences of wellbeing 'in the moment'.

There is an untapped wealth of data on people's experiences of wellbeing 'in the moment', and value in bringing together interventions that improve positive and negative affect, specifically Happiness and Anxiety.

Priorities for research:

- What works to improve [happiness](#), how are happiness feelings sustained, and how is happiness linked to other outcomes?
- What works to improve anxiety, for different people in different circumstances, and how are improvements sustained?
- What does the Time Use data and methodologies for valuing time tell us about what drives wellbeing in the moment, for different people in different circumstances?
- What is the relationship between evaluative wellbeing (life satisfaction) and other affective measures such as Enjoyment, Contentment, Vitality, Stress, Boredom, Pain, Sadness, Frustration, Anger, Worry that are measured in national and international surveys?

### 1.2.d Autonomy, Agency, Choice and Control

Many important [drivers of national wellbeing](#) relate to social capital, agency and control, including having someone to rely on, feeling close to others, belonging, trust, social support, and community participation. The area of control, agency and autonomy, sometimes called power, is an area of interest as it is a driver of national and personal wellbeing and optimism.

Priorities for research:

- A conceptual and indicators review of agency, autonomy and control to identify common measures used in practice and across sectors.
- What Works Interventions Review to improve Individual Agency, Autonomy and Control.
- What Works Interventions Review to improve autonomy at work.

## 1.3 Wellbeing inequalities and across the life course

### 1.3a Family Wellbeing

We have established definitions and measures of wellbeing at three levels: National, Community and Individual. Understanding Family Wellbeing is a fundamental gap. Understanding family wellbeing will enable policy makers to develop programmes which support the family's role as a driver of child and adult wellbeing.

Priorities for research:

- What is family wellbeing? Review of concepts and indicators across sectors, and review of drivers of family wellbeing.
- What Works Review of interventions that support family wellbeing including what works for different families in different circumstances.
- What do we know about inequalities within and between families?
- What can we learn from [time use data](#) to build our understanding of family wellbeing?

### 1.3.b Children and Young People's Wellbeing

The wellbeing of children and young people can now be measured robustly and consistently. Understanding what is in the best interest of the child, increases or maintains children's wellbeing in both the short and the long term is a high priority. Ideally this would use robust measures of wellbeing measured in schools and colleges, and be linked to the national pupil database, made available for wider use by all who care about our nation's young people.

Priorities for research:

- What works for children's overall wellbeing, mental wellbeing and resilience short and long term?
- Further develop measures for children in early years, younger than KS2.
- How can trusted adult, peer support and regular physical activity be improved, and what is their contribution to longer term wellbeing resilience?
- How do problem solving and goal setting contribute to effective functioning and wellbeing?

- Do effective academic-attainment interventions such as metacognition and collaborative learning also support children's wellbeing? .
- What are the short and long term wellbeing impacts of broader curriculum and wider civil society interventions?
- How does children and young people's wellbeing interact with common measures of childhood such as academic attainment, violence reduction, physical and mental health?

### **1.3.c Disability and wellbeing**

Reporting disability is consistently associated with lower wellbeing, yet many people can live well with long term physical and mental health conditions. Practitioners report that the measures of subjective wellbeing do not work well for disabled people, especially those with cognitive impairment, learning disabilities or autism.

Priorities for research:

- Develop meaningful and practical measures of subjective wellbeing for people with cognitive impairment, learning disabilities or autism, and support for organisations to implement them.
- Assess the wellbeing of disabled people in the UK, using dedicated quantitative and qualitative methods, and segmenting groups to understand how different disabling contexts affect wellbeing.
- What Works Review of interventions to improve wellbeing for disabled people, looking at the contexts and mechanisms that make them effective.

### **1.3.d Financial uncertainty**

Personal finance is linked with wellbeing, especially for those with low income and debt.

Priorities for research:

- What are the effects on wellbeing and resilience of different aspects of financial uncertainty (precarious income, debt, sudden shocks, future income projections)?

- What works to improve financial wellbeing and mitigate the effects of financial uncertainty on people across the life course and in different contexts?

## 1.4 Sector and intervention-specific research

### 1.4.a Physical and mental health

Our experience and perception of our mental and physical health is the biggest single factor that explains, on average, how we rate our wellbeing. Good health is associated with higher life satisfaction; low life satisfaction is a risk factor for future mental ill health. Importantly, it is possible to experience poor mental and physical health and rate wellbeing highly, or vice versa. Reducing symptoms of mental illness is not where our interest in mental health should stop if we want people in society to thrive and lead happy, meaningful lives.

Priorities for research:

- What would a core outcome set for public health research that includes subjective wellbeing include?
- What interventions are effective in improving mental capital and mental wellbeing through life? What is the differential impact of these across and between groups and populations?
- What does a Theory of Change for public mental health programmes include? What can realist evaluations of public mental health programmes tell us about their success? What are the barriers to effectiveness and how can we overcome these?
- What has been the impact and effectiveness of Better Mental Health Fund programs? What can we learn about context, mechanisms and outcomes from this work to inform future public mental health programmes?
- How can councils and their partners in place use their planning, development, and regeneration powers to better support mental health?
- What do we know and understand about the life satisfaction of people with long term conditions, and people living with life limiting illness? What do studies of life satisfaction conducted with clinical populations tell us about drivers of wellbeing for these groups?
- Continually update the 2021 rapid review on [What works to improve mental wellbeing?](#) – synthesising the evaluation literature that uses [WEMWBS](#) to map the evidence base in relation to mental wellbeing. What evaluation research has been carried out to assess the effectiveness



of programmes and pilots on mental wellbeing? What is the strength of evidence of the evaluation research? What are the key findings from the evaluation research?

- What works to improve sleep and manage risks associated with lack of sleep and unusual sleep patterns?
- What can help prevent and treat addiction?
- What is the relationship between life satisfaction and risk taking, suicide and its drivers?
- What are the medium-long term impacts of [COVID-19](#) on life satisfaction and wellbeing inequalities? What interventions are effective in supporting younger age groups whose mental health was significantly affected during the UK lockdown?
- What context, mechanisms and outcomes are found in interventions that improve life satisfaction using social prescribing, community or peer support, family wellbeing and/or provision of information, advice and guidance?
- What approaches that use the Five Ways to Wellbeing, or other mental capital framework for public use, are effective and how?
- What do we know about the safety, effectiveness, data protection and technical security of health and wellbeing apps and digital technologies that are being used by the public, and therefore not subject to regulation or clinical approval?

#### **1.4.b End of Life, Dying Well and Bereavement**

There is a shift to both quality of life as the priority at the end of life and providing care to reflect what matters most to patients and those that love them. There is now a legislative requirement for the NHS to provide palliative care at the end of life

Priorities for research:

- What Works Intervention Review of Palliative Care, including the role of culture and the impact on both the patient and those that love them
- What can help with the wellbeing and loneliness impacts of bereavement and grief for individuals, families, friends and colleagues?
- A conceptual review of wellbeing at the end of life to inform the use of existing measures and, if required, support the development of new instruments.

- Financial planning for later life and the psychological aspects of spending and saving e.g. reluctance to use savings and pension provision for different life expectancies.

### **1.4.c Information, Advice and Guidance interventions**

Giving information, advice and guidance of many kinds is an extremely common intervention type in multiple policy areas and contexts including workplace, public services and community. For example, in physical health, mental health, benefits, law and parenting.

Priorities for research:

- What Works for Information, Advice and Guidance interventions, including the contexts and mechanisms which make them effective?

### **1.4.d Climate, weather and the environment**

The weather impacts our subjective wellbeing including events like flooding and heat waves that all impact wellbeing and its drivers. It can also impact wellbeing in the workplace. It is possible to link weather and population data to better understand and value effects of climate change.

Evidence is needed on how policies can mitigate the effects of weather and climate on wellbeing, prioritising budgets for resilience projects and responses. Better understanding of the impacts can help value and prioritise civil contingency and community responses.

Priorities for research:

- What are the wellbeing effects of weather patterns and extreme weather, including the long term and cumulative impact of adverse weather events and emergencies on wellbeing across populations and geographies?
- How do interventions and policies designed to mitigate the effects of extreme weather, respond to disasters and improve resilience effect wellbeing?
- How does air pollution affect personal wellbeing, wellbeing inequalities and social capital outcomes?
- What is the effect of noise pollution on wellbeing and social cohesion outcomes?

### 1.4.e Digital wellbeing

Participation and use of online communities and services is emerging as an important driver of wellbeing for some people in some circumstances. Research is needed to keep up with the policy demands of this fast-changing area of life.

Priorities for research:

- What Works Review of the digital interventions to improve online user wellbeing on social media, including health communication, mental wellbeing, body image messaging, food and exercise, and lifestyle campaigns.
- What are the impacts of social media and online communication messages around body image and ideals on the wellbeing of men, women and children.
- How do changes to social media algorithms, moderation and app design impact the wellbeing of users, including loneliness?
- What are the impacts of AI-generated content on social and institutional trust and social capital of users?
- How can AI, computing and other technology such as positive computing best support wellbeing?
- What are the impacts of digital regulation and/or extension of digital infrastructure on wellbeing and its drivers?
- How effective are digital tools and services designed to support wellbeing or drivers of wellbeing, such as remote monitoring of health conditions, and how can these these tools and devices be deployed to improve patient quality of life?
- Develop and use meaningful methodologies and approaches to measuring wellbeing in the moment for social media users, including ecological momentary assessment.

### 1.4.f Animals, pets and wellbeing

The UK population [prioritises family members](#) and their welfare as the most important for individual wellbeing, in which they include their pets. We see a large number of interventions aiming to improve wellbeing through involvement with a wide range of animals from dogs and chickens to horses. Additionally, pets and companion animals have an impact on family wellbeing,

people living alone, people experiencing homelessness, women and children at risk of domestic violence, and other contexts

Priorities for research:

- Observational and What Works interventions reviews of the role of pets and other animals in personal and family wellbeing.

## 1.5 Wellbeing frameworks and their use

The HMT Green Book Wellbeing Supplementary Guidance supports the use of all the domains of the UK Measures of National Wellbeing in policy making. Area Wellbeing frameworks are common across the regions and nations of the UK. The What Works Centre for Wellbeing applied the learning about how to use frameworks in practice in both [Local Areas](#) and geographies for example [rural wellbeing](#).

Priorities for research:

- How are wellbeing frameworks used in public policy, and what makes them effective?
- How are wellbeing frameworks used in budgeting, spending reviews and baseline spending, and how can they be effective?
- How is spending for outcomes and missions, including cross cutting, long term and cross society goals done effectively in practice?
- How can capitals, risk, resilience, prevention and sustainability of wellbeing i.e. future wellbeing, best be incorporated into policy making and civil contingencies?
- How are place-based wellbeing frameworks used in practice?
- How are wellbeing frameworks used in different local area contexts including what would a wellbeing framework for coastal communities include?

## 2. Wellbeing in working age

### Summary

- Understand how work and health interact and how to improve work and health outcomes together.
- Review active labour market and inclusive work policies to understand what is effective in supporting progression into work.
- Develop deeper understanding and a 'what works toolkit' of workplace interventions based on the [key drivers of wellbeing at work](#): Relationships, Health, Security, Environment and Purpose.
- Develop more causal evidence about the links between workplace wellbeing and productivity in different industry sectors.
- Understand what works to mitigate and reduce burnout.
- Evaluate approaches to effectively support line managers and employees with terminal illness.
- Understand why and how education and learning is effective for different people. Review of the contexts and mechanisms that enable wellbeing through adult learning and skills interventions.

At a population level, wellbeing is lowest during middle age and life satisfaction [peaks at ages 23 and 68](#). The life events that are most likely to occur during midlife - unemployment, debt, family breakdown, parenthood - have a significant impact on wellbeing. Despite this, adults of working age are consistently under-represented in intervention studies.

### 2.1 Employment and labour market

Employment is particularly important for wellbeing, including and beyond the impact of income, in part because we do not adapt to unemployment, and it is also a core determinant of health. Poor health - physical and mental - is often a reason for exit from the labour market and in itself is an important driver of overall wellbeing. Understanding how work and health interact and how to improve work and health outcomes together is a key priority for wellbeing economists.

### Priorities for research:

- What active labour market and inclusive work policies improve wellbeing for different people, how and by how much?
- How does occupational health, other Health and Work interventions affect both employment and wellbeing outcomes short and long term?

## 2.2 Wellbeing at work and Job Quality

Employment is a core driver of wellbeing and we spend a large amount of our lives in work. Employees with higher wellbeing perform better and good work helps keep people well. This means we need to build on the workplace safety gains of previous centuries and keep wellbeing at the heart of how we shape jobs, organisations and working practices across all sectors to support future employment, individual wellbeing and the economy.

### 2.2a Strategic approaches for employers

While action and innovation on wellbeing at work has increased at pace, the evidence base has not always kept up with demand, despite it being very possible to conduct research in this context.

### Priorities for research:

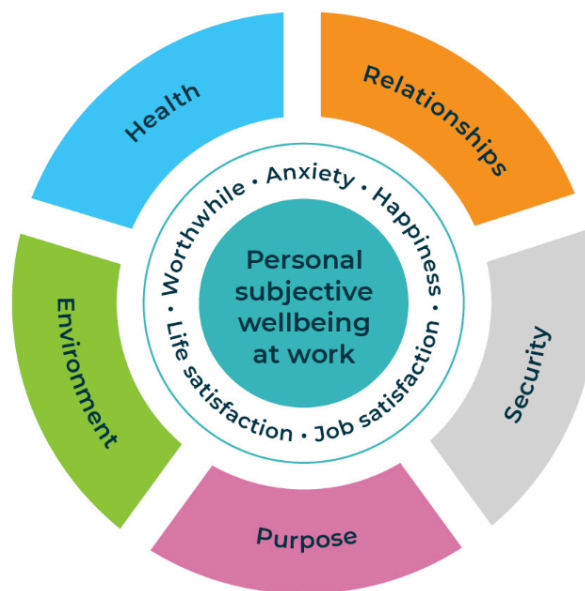
- A What Works Toolkit of workplace interventions to support employers, based on the [key drivers of wellbeing at work](#) - Relationships, Health, Security, Environment and Purpose - that can be updated as new evidence becomes available.
- An evaluation guide and measures bank for wellbeing at work, aimed at workplaces across sectors and of different sizes, with support to interpret and compare results.
- Driving the uptake of voluntary reporting of workplace wellbeing, in line with the [national framework](#) for voluntary reporting on disability, mental health and wellbeing in the workplace.
- A workplace wellbeing diagnostic tool to enable workplaces to understand what they can do to improve wellbeing.
- A best practice guide for workplace wellbeing strategies and board level wellbeing governance and assurance roles.
- Better evidence-informed job quality measures in national and local data are needed to understand what really matters in working life. Our analyses of workplace wellbeing data has been a key part of building knowledge in this area.

- Investigate and establish greater evidence around work, the impact of life transitions such as marriage, divorce, parenthood, having a serious/life-limiting illness, bereavement, retirement, and how we buffer shocks.

## 2.3 Drivers of workplace wellbeing

The five drivers of wellbeing at work are an evidence-based model which can help organisations understand which factors may be contributing to higher or lower staff wellbeing at work.

### Five key drivers of workplace wellbeing



### 2.3.a Workplace relationships: management, teamwork and social culture at work

Relationships at work are a strong driver of job satisfaction and sometimes of performance. This is especially true of the line manager relationship and effective management.

Priorities for research:

- What works for people management and leadership?
- How does manager wellbeing and employee wellbeing and performance interact?
- What is the impact of relationships with the customer, and efforts to reduce abuse of staff, on staff wellbeing and performance?
- If and how do staff networks impact wellbeing and performance?

- Evaluation and review of interventions and activities that support team cohesion and wellbeing for dispersed workers, or in teams with particular challenges. Including
  - Better understanding of actions and behaviours that increase prosocial behaviours in the workplace, and their impact on wellbeing.
  - Better understanding of interventions to build workplace trust and increase sense of fairness in the workplace.

### **2.3.b Workplace health: physical and mental health in workplace context**

Our physical and mental health are one of the strongest drivers of overall wellbeing and can impact our ability to stay in work and perform at our best. The workplace is also a setting for public health interventions and intervention effectiveness should be assessed on its impact at improving physical and mental health and against twin goals of enhanced performance and improving overall wellbeing.

Priorities for research:

- How do occupational health, Employee Assistance Programmes and other work and health interventions improve physical and mental health, work and wellbeing outcomes?
- What Works Review of interventions to support return to work, or transition into non-traditional employment options, including their effects on wellbeing and long-term impacts on employees; A particular focus on mental health interventions in these settings, and the differential impacts that they have on wellbeing.

### **2.3.c Workplace security: physical, psychological and financial risk and safety**

The physical and psychological (bullying and harassment) safety of our working environment are an important part of workplace wellbeing. Much of the wellbeing at work research originated in the workplace safety research and innovation over the last 150 years. This is still important especially as workplaces change with new technology. Our relationship with work includes finances and the field of financial wellbeing including products and services has expanded rapidly. What is less known is how safe, effective and cost-effective these interventions are.

Priorities for research:

- What Works Review of Financial Wellbeing interventions at work,



including sidecar savings, EAP support, workplace loans, financial capability?

- What works to tackle and prevent bullying and harassment at work?
- How can we effectively manage psycho-social risk in the workplace?

### **2.3.d Workplace environment: physical environment, systems and equipment**

The physical environment, equipment and systems and the organisational climate and culture we work in and with on a daily basis can impact our job satisfaction, performance and wellbeing. These can often be some of the longest lasting and widest impact changes that can be made to support staff wellbeing.

Priorities for research:

- How can digital and physical environment change improve wellbeing and performance outcomes ?
- What works for physical wellbeing including nutrition, hydration, PPE/Comfortable work clothes, toilet/shower facilities, lockers, regular breaks and rest areas?
- How can common office equipment such as desk, chairs and technology be designed and deployed to maximise wellbeing?
- What works to support wellbeing and performance for remote and non office based work including working from home?

### **2.3.e Purpose at work: motivation, engagement and autonomy**

At its best work really supports our wellbeing providing goals, engagement, achievement, autonomy, learning, motivation and competence.

Priorities for research:

- What Works Review of interventions to improve autonomy at work
- How does professional-skills volunteering improve wellbeing?
- How can job design and goal setting be used more effectively to improve wellbeing and performance?
- How can jobs and workplaces be designed to best support mental capital?

## 2.4 Workplace wellbeing and productivity

The coefficients of the associations between job aspects and productivity can be small. However, from an economic and decision-making point of view, it can be impactful to focus on such productivity outcomes.

Priorities for research:

- More causal evidence is needed about the links between workplace wellbeing and productivity in different industry sectors. More information is also needed on specific job characteristics and it is necessary to understand what characteristics may have an influence on both productivity and wellbeing.

## 2.5 Worker burnout

Although many people find their work meaningful and satisfying, some occupations and roles are at increased risk of burnout. Burnout is a response to workplace stress, and low happiness at work, and consequently interventions are needed at the organisational as well as the individual level.

- More RCTs and quasi-experimental research could be carried out to test causal claims and understand moderators and mechanisms of workplace burnout among occupations at high risk of burnout including the homeless sector frontline workforce, healthcare workers and teachers.
- More research is needed to investigate the effects of a broader range of interventions, such as primary interventions aimed at reducing known risk factors of burnout; secondary interventions targeting a group of high-risk employees; tertiary interventions aimed at frontline employees already suffering from burnout.
- Researchers could adopt a clearer theoretical and empirical definition of burnout and explore how these benefits may translate into improved organisational performance in the medium-term.
- Researchers could explore the links between burnout, subjective wellbeing and Quality of Life, including the strength and direction of the relationships.
- Policy makers could commission research to investigate the drivers of burnout and mechanisms for addressing work-related stress, including through systematic reviews, national and local workforce surveys and finally, administrative data to better understand the personal and job characteristics associated with burnout.

## 2.6 Working with terminal illness

Modern advances in palliative care have made it possible for people who are approaching the end of their life to keep on working, and employers are expanding their thinking about [inclusive culture and practice](#) to support this. Supporting people to work if they choose, and while they are able is key.

- What are the personal motivations to work in the context of a limited life expectancy?
- How does work shape personal identity, purpose and meaning in life, personal enjoyment, social connections, and autonomy, and financial wellbeing for those living with terminal illness?
- What factors are significant to improve wellbeing at the end of life, and how do these vary depending on the employment sector and type of work being undertaken?
- How are people's experiences of working with a terminal illness shaped by their particular diagnosis?
- What is the economic impact of supporting people with terminal illness to continue work when they choose?
- How can we most effectively support an employee with a terminal illness, and what are the training and support needs of employers?
- What do we know about inequalities in access to legal support, experience of financial strain, and the impact of terminal illness on mental wellbeing for people of working age?
- What interventions are effective in supporting line managers and employees with terminal illness, what are the contexts and mechanisms, and are there differential impacts?

## 2.7 Higher education and lifelong learning

Education and learning affect wellbeing and the drivers of wellbeing throughout our lives. The evidence base on the links between education and wellbeing is strong. We now need to build an understanding of how and why some types of learning are effective for different people.

Priorities for research:

## Wellbeing Areas of Research Interest

- Review of the contexts and mechanisms that enable wellbeing through adult learning and skills interventions. Including an analysis of the learning processes involved in enabling wellbeing outcomes, place-based factors and personal circumstances.
- Analysis of the motivations of adult learners, and how these relate to wellbeing outcomes for different groups.
- Variations in education attainment and delivery, and how these relate to life satisfaction of students and graduates.
- Analysis of whether the effects of life satisfaction depend on when (or at what level) students leave full-time education, and whether they are moderated by subjective factors, such as self-esteem or a student's locus of control
- How effective interventions such as developing social and emotional skills, engaging with psychological therapies, and developing capability for physical activity are implemented at scale and relate to wider wellbeing outcomes.

An additional ARI, specific to [workplace wellbeing](#), is available on the What Works Wellbeing website.

### 3. Place and community wellbeing

#### Summary

- Identify, understand and develop approaches to address wellbeing disparities, focusing on those groups and areas where inequalities have the greatest effect.
- Produce, disseminate and deploy local area data on individual and community wellbeing in a more timely, granular and harmonised way. Review how the [Different People Same Place model](#) performs at different spatial scales.
- Identify the protective and risk factors for creating and sustaining thriving communities, and understand the impact of sequencing, interrelations, causes and order effects.
- Review the effectiveness of place-based and regional approaches to improving wellbeing outcomes. Understand the impact of place-based culture and sport events. Explore the role local leaders play in establishing the conditions for maximising wellbeing.
- Understand the effects of interventions to improve or extend access to the built, natural and historic environment on personal, family and community wellbeing.
- Understand the contexts and mechanisms that enable sport, arts and leisure interventions to support wellbeing across the life course and for people who are less likely to take part.
- Improve concepts, methods and understanding of effective interventions to support social capital, including belonging, social cohesion, trust, connectedness, participation and civic leadership, and community agency.

The places we live, work and socialise – and the people we encounter and connect with there – have an impact on our wellbeing both directly and indirectly. Research should ensure that community wellbeing is measured consistently, comparably and appropriately, not just as the sum of individual wellbeing, and that wellbeing inequalities within and between communities are reduced.

### 3.1 Wellbeing inequalities and place

Our work on the [drivers of wellbeing inequalities](#) adds to the case for investment in green space activities and engagement in local heritage, suggesting these activities may be particularly important in reducing wellbeing inequality. Further work is needed to understand how wellbeing is distributed in a place to inform strategic local approaches:

Priorities for research:

- Evaluate approaches to understanding wellbeing inequalities in a place, such as the [OECD Framework](#) and explore averages, inequalities between groups, inequalities between top and bottom of the distribution, and deprivation. How can local authorities and organisations understand and address these forms of inequality?

### 3.2 Community and personal wellbeing interactions and data

Focusing on community wellbeing can help us understand the differences between places; understanding individual wellbeing can bring focus to the different experiences of people within the same place. Taken together, we can better understand the drivers of inequality and disadvantage.

Priorities for research:

- How can we effectively and efficiently make available local area indicators of individual and community wellbeing that are statistically representative at lower geographical and community-levels and easily accessible?
- How do we improve work to collect and analyse data across small communities, or within the communities that people themselves define as meaningful?
- How does the [Different People Same Place model](#) perform:
  - at lower administrative levels, such as Lower Super Output Areas?
  - across places as people themselves define them, for example individual towns or villages rather than administrative districts?
  - across non-geographic communities, for example communities of interest?
- What are the protective and risk factors involved in thriving communities?

- Sequencing and order effects: Are there sequences of specific activities that contribute to the theme outcomes or the factors that contribute to thriving communities?
- Interrelations and causes: What is the nature of the relationship between the different variables related to thriving communities? What are the causal relationships between variables?
- If and how do people's outcomes change when they move to places that have more wellbeing-conductive local conditions?

### 3.3 Place-based action and approaches

There is now a significant amount of data on wellbeing and its drivers at local area level. This can be used to build Joint Strategic Needs Assessments and inform other area strategies and plans. The next step is continuing to build the quality, breadth and timeliness of that data and supporting skills for its use. For example, with local area measures of job quality, social capital and ward level wellbeing data.

Priorities for research:

- What are the most meaningful and practical methodologies for monitoring and evaluating place-based interventions? What is the impact of place-based interventions on individual and community wellbeing outcomes and geographical inequalities?
- How effective are place-based and regional approaches to improving wellbeing outcomes?
- How can local leaders maximise wellbeing outcomes in their areas?
- How can areas develop and test local area job quality metrics, and analyse the effectiveness of local strategies to improve job satisfaction and quality?
- What impact do place-based culture, sport and other events have on individual and community wellbeing outcomes in the short and long term? What contexts and mechanisms deliver improvements in wellbeing? What are the risk factors for negative outcomes?
- Do approaches that exploit the [six hallmarks of coherent wellbeing policy](#) deliver more effective and/or inclusive approaches to maximising individual and community wellbeing?

### 3.4 Built, natural and historic environments

Our living environment, neighbourhood and housing affects personal, family and community wellbeing. Often called 'quality of life' or 'liveability' this can impact both our experienced wellbeing day to day, how we interact with our neighbours, and the broader drivers of wellbeing including work, health and relationships. These are often very big and long lasting investments so maximising the wellbeing from them is key.

Priorities for research:

- What is the relationship between housing quality and disrepair and individual and community wellbeing, including damp, sound and heat proofing, energy efficiency, water quality and environmental health interventions, access to insurance, improvements and repairs services?
- A What Works Review of housing and homelessness interventions on individual, family, and community wellbeing, including precarity, the impacts of temporary accommodation, changes in rental market conditions and regulations. The effect of these on inequalities across generations, population groups and geographies.
- How can professionals plan, design and manage land use and the local environment to maximise individual and community wellbeing?
- How does access and improvements to green and blue space impact on individual and community wellbeing outcomes short and long term?
- How does our shared heritage - both physical and intangible - interact with individual and community wellbeing and its drivers?
- How do commuting and changes to local transport interact with individual and community wellbeing and its drivers both day to day and long term?
- How do commuting and residential turnover interact with community wellbeing outcomes and why?
- What are the wellbeing effects of basic infrastructure including water, energy, digital, communications and its value for resilience interventions and therefore civil contingencies planning?
- How can community wellbeing, including peer support and volunteering, support disaster resilience and recovery?



### 3.5 Sport, arts and leisure

The evidence base for sports - especially physical activity -, arts, culture, creativity and leisure for wellbeing is growing including how it both enriches lives and gives us resilience in difficult times. That these areas are assumed to be 'good' for us they have - with the exception of music - often not been evaluated, and therefore valued, as robustly as they could be.

Priorities for research:

- How can policy / organisations effectively reach, engage and retain different population groups in sports, arts and leisure activities?
- How can lifelong participation in sports, arts and leisure activities be built, including through learning in childhood, interventions to address changing barriers to participation across the life course?
- Understanding how to build and sustain creative habits throughout the life course to improve wellbeing.
- Develop meaningful evaluation approaches to understand the effect of sport, culture and leisure activities using experiential and evaluative wellbeing measures.
- Use the [What Works Centre for Wellbeing Creative Pathways to Wellbeing](#) model as a framework to design evaluations and studies, to increase understanding of how and why creative activities improve wellbeing for different people.
- Analyse interventions aimed at specific population groups such as men, minority ethnic groups, and in settings such as workplaces which are under-represented in the creative wellbeing literature. Ensure that the search terms and study design capture interventions not commonly described as 'creative' by these groups or in these settings.
- What Works Review of interventions that feature a skilled professional or expert as a facilitator of wellbeing activities in the arts, sport and leisure. ensuring full reporting of the characteristics, experience, training and skills they bring to interventions.

### 3.6 Belonging, social cohesion and social support

Peer support and altruistic actions - helping and giving - are important [drivers of subjective wellbeing](#). Feeling close to others - bonding social capital - is a strong driver of mental wellbeing, and getting on with people who are different to yourself - bridging social capital - looks to reduce anxiety.

Priorities for research:

- Conceptual, indicators and What Works interventions reviews of social support and its effect on personal, family and community wellbeing.
- What are the contexts, mechanisms and outcomes of effective interventions to improve bonding capital? What effect does length, intensity and frequency of programme delivery have?
- How does belonging operate in different contexts, for example teamwork in the workplace, and in education?
- How valid and reliable are existing social capital measures, including the [harmonised set](#) across populations and groups?
- What are the core constructs of community cohesion, and how can a clearer understanding of the concept of community cohesion inform the development of existing measures including in the Community Life Survey?
- What is the effect of intergenerational approaches on community cohesion and community wellbeing across different sectors and localities?
- Why has the National Citizens Service summer programme's impact appears to have been greater than the more disparate spring and autumn programmes. For example, is this driven by intensity or duration? How to maximise a positive outcome from a negative event, and how can you introduce challenges to increase bonding?
- What works to build social trust, trust in institutions and experts and how does this in turn enhance individual wellbeing?
- How does a sense of belonging personal, family and community wellbeing? How does belonging interact with other national outcomes at these different levels, and how is belonging distributed across populations and places?
- What measures would better capture altruism and other informal cooperative norms and helping activities? What's the effect of socially reinforced behaviour (kindness, altruism, co-operation) on wellbeing and other outcomes? What is the distribution of altruistic behaviours and mindsets across populations and places?

### 3.7 Place, space and social connection

The evidence base for the role of places and spaces on social connectedness has grown rapidly over the last five years. The evidence base has become more robust and sophisticated indicated by more mixed findings.

Priorities for research:

- What Works Review of interventions aimed to improve social connection and delivered during the Covid-19 pandemic, including the effect of different contexts and mechanisms in design and delivery.
- What Works Review of virtual or hybrid interventions designed to boost social relations and community, including the effect of different contexts and mechanisms in design and delivery, and what works for different populations.
- The role of transport, digital technologies and other infrastructure to support wellbeing and enable social connection across populations, and understand the role of infrastructure in addressing inequalities in communities.
- The reach of wellbeing interventions within communities, including with individuals and groups that do not participate in them, and the effectiveness of different contexts and mechanisms.
- How can accessible public realm design be scaled for community wellbeing benefits?

### 3.8 Civic Leadership, Participation and Decision Making

Civic leadership, citizenship and civic participation, in all sectors, is an important part of social capital and is linked to optimism.

Priorities for research:

- Understanding of how to improve the wellbeing impact of VCSE sector and philanthropic funding in local areas, including use of 360 Giving, Case Study Synthesis methodology, and other approaches.
- How to best facilitate cross sector leadership including in local areas?
- What does 'workplace' wellbeing look like for elected representatives including the safety of those standing for elected office?
- How can community citizenship skills transfer to the workplace?

- What supports businesses and business leaders to play civic leadership roles in the places they are based and operate?
- How do subjective wellbeing, civic leadership and citizenship in all sectors interact?
- What works for citizen participation in decision making, including Citizens Assemblies, participatory budgeting, community engagement in development?
- How do skills-building, leadership and employment practices affect community wellbeing outcomes for community businesses including those without a physical hub?

### 3.9 Community Agency

Community agency and control has been identified as a building block of health. Community-led change has been the focus of the Local Trust and the new Community Wealth Fund. The foundational evidence is in place and the next Priorities for research.

Priorities for research:

- Conceptual research to develop and refine existing definitions of community agency and community control. Where possible, research should include the perspectives of local communities and practitioners.
- Develop models to map contexts, mechanisms and outcomes that link community agency and community control to improvements in wellbeing. For example, using the Theory of Change approach. These can be used as critical frameworks to assess the evolution and dynamics of community agency, power and control.
- Explore the opportunities to develop community agency and community control maturity models, which considers both an assessment of the community starting point and the impact of external input or funding.
- Capture the long-term impacts of community agency and control.
- Use high quality methodologies that allow for the identification of all effects, including negative.

## 4. Loneliness and connection

### Summary

- Understand the experience and determinants of loneliness across the life course and for people in different contexts, including the roles of transitions and changing social trends, family and intergenerational connection, and peer relationships and friendships.
- Understand the distribution and drivers of loneliness for under-research groups such as children and young people, people in middle age, ethnic minority groups, disabled people, and LGBTQ+ people. Review interventions that reduce loneliness for those groups, for example at school, work, or in family settings.
- Understand the contexts and mechanisms which make psychological and therapeutic interventions effective in tackling loneliness.
- Develop proportionate and meaningful measures for evaluating loneliness across sectors and interventions, including working with practitioners and linking datasets.

Good relationships, at home, at work, and in our communities are a crucial driver of personal wellbeing. Research should support policies that enable positive social connections, while reducing the number of people who are chronically lonely.

### 4.1 Life course and generational changes in loneliness and connection

A life course approach to understanding loneliness and connection is needed to produce evidence that enables policies which make a lasting difference and interventions that come at the right time in someone's life. Understanding the changing experiences of loneliness across generations can help policy makers design for the challenges of the future.

Priorities for research:

- The role of transitional life moments, changing household and family composition, changing generational patterns of participation in community and religious activities, and digital participation.

- The role of friendships and peer relationships in supporting positive connection and reducing loneliness in and beyond childhood, and between generations.
- The role of social connections across generations and a What Works Review of interventions that use intergenerational approaches to support improved wellbeing, reduced loneliness, increased connection and social cohesion.
- Use of a range of approaches to consolidate evidence on the contexts, mechanisms and drivers of loneliness and isolation across life stages and generations.

## 4.2 Inequalities in loneliness and connection across society

The evidence base is richer for some groups of people in society than others, for example older adults. There are gaps in our understanding of ‘how’ and ‘why’ interventions are effective for people who are currently not well represented in the evidence base.

Priorities for research:

- Effective contexts and mechanisms for reducing loneliness in the UK, especially for: people in middle age, ethnic minority groups, disabled people, and LGBTQ+ people.
- Distribution and drivers of loneliness in middle age, evaluation of interventions - at work, in families, or in communities - that reduce loneliness and improves connections in midlife.
- Distribution and different experiences of loneliness in children and young people, especially in school, neighbourhood and family contexts.
- Effectiveness of interventions that may help reduce loneliness in secondary schools, for example via PSHE or PATHS curriculum, and a What Works Review of interventions to tackle and prevent bullying in schools and for young people.

## 4.3 Psychological interventions to tackle chronic loneliness in the UK

Our [review of interventions](#) to tackle loneliness found that structured psychological and therapeutic interventions are highly effective in alleviating

short-term loneliness, yet we did not identify services currently being provided in the UK.

Priorities for research:

- Understanding the contexts and mechanisms which make psychological and therapeutic interventions effective in tackling loneliness, to inform future intervention design and trials.
- Understand what aspects of effective psychological approaches for loneliness can effectively and safely be used by volunteers and community groups.
- Incorporating loneliness measures into psychological interventions alongside mental health and other outcomes, to capture impact in areas where loneliness is not a direct focus.

#### 4.4 Proportional and meaningful measurement of loneliness and connection

Our [review of evaluations](#) of loneliness interventions found that practitioners were concerned about the use, interpretation and value of existing quantitative measures. Evaluation evidence of tackling loneliness interventions is of mixed and sometimes poor quality, so a new focus on methods is essential to improve the evidence base.

Priorities for research:

- Evaluations which use robust quantitative methods to evaluate loneliness impact, including waiting lists and Propensity Score Matching as practical alternatives to experimental approaches.
- Theory-based evaluation to explore the contexts, mechanisms and causal pathways that lead to loneliness improvements, especially for complex interventions such as social prescribing.
- Research which links data from evaluation of tackling loneliness interventions to national healthcare and other datasets.
- Co-developing a set of evaluation methods which are useful and acceptable for individual delivery organisations, and provide training and support for practitioners and evaluators.
- Review of the ONS recommended loneliness measures to reassess their suitability for evaluating tackling loneliness interventions.

## 5. Methods and measures of wellbeing

### Summary

- Translate between measures of subjective wellbeing and understand how they interact with each other, especially ONS4, WEMWBS, and measures of affect, purpose and good functioning, as well as other commonly used measures of wellbeing drivers.
- Continue to develop work on the Wellbeing Adjusted Life Years - the WELLBY, expand the range of wellbeing effect sizes for appraisal, and continue to develop life course models of wellbeing.
- Use meaningful review methods including realist and Context-Mechanisms-Outcomes approaches to understand the theories of change of interventions and programmes.
- Develop and support the use of the [What Works Centre for Wellbeing Quality in Qualitative Evidence Framework](#)
- Use the [What Works Centre for Wellbeing Case Study Synthesis Methodology](#) to bring together and analyse practitioner evidence.

### 5.1 Translation between common measures of wellbeing

In order to understand the value of different subjective wellbeing measures, and to be able to compare between interventions that use different ones, we need research that looks at the following:

- Translation between scales, including thresholds of different measures of subjective wellbeing, especially ONS4 and WEMWBS.
- Understanding of how different measures interact with each other and effect sizes differ between them, especially the ONS4, WEMWBS, and measures of affect, purpose and good functioning.
- Translation between commonly used measures of wellbeing drivers and life satisfaction.

### 5.2 Wellbeing Adjusted Life Years - the WELLBY

There has been big progress on the development of Wellbeing Adjusted Life Years - the WELLBY - in the last ten years. Where we have robust agreed



coefficient effect sizes, wellbeing impacts can now be monetised and used in policy appraisal consistently with policy making guidance in a number of countries. The next steps for development of the methodology include:

- Expand the range of wellbeing effect sizes for inclusion in government appraisal guidance, which will require more causal studies to be done and regular collation of the findings.
- Develop life course models of wellbeing to understand the drivers and determinants of wellbeing and wellbeing inequalities at different points in life, for different populations.

### 5.3 Qualitative, theory-based and realist approaches

Robust experimental approaches are essential to determine causality. We not only need to know 'what works', we also need to know for whom, in what contexts, and why. Qualitative, mixed method, and realist evidence syntheses are useful for understanding the building blocks of theories of change for further testing.

- Reviews of wellbeing interventions with realist approaches, or those which aim to identify Context-Mechanism-Outcomes chains. Regular development of theories of change in wellbeing evidence reviews to identify how and why interventions make a difference and to provide transferable findings.
- Interrogation of the proposed [What Works Centre for Wellbeing Quality in Qualitative Evidence Framework](#), including workshops and focus groups to help challenge, expand and populate the different stages with appropriate methods and tools. Support use of the framework by a range of organisations through guides and training.
- Exploring the creation of a mixed-methods standards of evidence framework, as detailed above, which could recognise the value of both qualitative and quantitative methods to answer different questions at different times in the evaluation process.
- Use the [What Works Centre for Wellbeing Case Study Synthesis methodology](#) to synthesise evidence from practice in a proportional and meaningful way, and provide support for practitioners to develop high quality case studies.