Wellbeing in Later Life

Wellbeing: A Complete Reference Guide

Volume I: Wellbeing in Children and Families
Edited by Susan H. Landry and Cary L. Cooper

Volume II: Wellbeing and the Environment
Edited by Rachel Cooper, Elizabeth Burton, and Cary L. Cooper

Volume III: Work and Wellbeing
Edited by Peter Y. Chen and Cary L. Cooper

Volume IV: Wellbeing in Later Life
Edited by Thomas B. L. Kirkwood and Cary L. Cooper

Volume V: The Economics of Wellbeing
Edited by David McDaid and Cary L. Cooper

Volume VI: Interventions and Policies to Enhance Wellbeing
Edited by Felicia A. Huppert and Cary L. Cooper
Wellbeing in Later Life


Edited by Thomas B. L. Kirkwood and Cary L. Cooper

WILEY Blackwell
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About the Editors

**Thomas B. L. Kirkwood**, CBE, is Dean for Ageing at Newcastle University and Director of the Newcastle Initiative for Changing Age, having previously been Director of the Institute for Ageing and Health from 2004 to 2011. Educated in biology and mathematics at Cambridge and Oxford, he worked at the National Institute for Medical Research, where he formed and led a new research division, until in 1993 he became Professor of Biological Gerontology at the University of Manchester. His research is focused on the basic science of aging and on understanding how genes as well as nongenetic factors, such as nutrition, influence longevity and health in old age. He is a Fellow of the Academy of Medical Sciences, Fellow of the Royal College of Physicians of Edinburgh, and Honorary Fellow of the Faculty and Institute of Actuaries. He was European President (Biology) of the International Association of Geriatrics and Gerontology, chaired the U.K. Foresight Task Force on “Healthcare and Older People” in 1995, led the project on “Mental Capital Through Life” within the recent Foresight program on Mental Capital and Well-Being, was Specialist Adviser to the House of Lords Science and Technology Select Committee inquiry into “Ageing: Scientific Aspects” and has served on the councils of the Biotechnology and Biological Sciences Research Council (BBSRC) and of the Academy of Medical Sciences. He is an editor of *Mechanisms of Ageing and Development* and serves on the editorial boards of eight other journals. He has published more than 300 scientific papers and won several international prizes for his research. His books include the award-winning *Time of Our Lives: The Science of Human Ageing, Chance, Development and Ageing* (with Caleb Finch), and *The End of Age* based on his BBC Reith Lectures in 2001. In 2009 he was awarded a CBE by the Queen for his services to medical science.

**Cary L. Cooper**, CBE, is Distinguished Professor of Organizational Psychology and Health at Lancaster University Management School, U.K. He is the author/editor of over 150 books, has written over 400
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scholarly articles for academic journals, and is a frequent contributor to national newspapers, TV, and radio. He is the Chair of the Academy of Social Sciences (comprised of 46 learned societies in the social sciences, with nearly 90,000 social scientists), President of RELATE, President of the Institute of Welfare, and immediate past President of the British Association of Counselling and Psychotherapy. He was the Founding President of the British Academy of Management, Founding Editor of the *Journal of Organizational Behavior*, and is currently Editor-in-Chief of the international scholarly journal *Stress & Health*. He has received honorary doctorates from a number of universities (e.g., University of Sheffield, Aston University, and Heriot-Watt University). He has been awarded honorary fellowships by the Royal College of Physicians, Royal College of Physicians of Ireland, British Psychological Society, European Academy of Occupational Health Psychology, and Institute of Occupational Safety and Health. In 2010 Professor Cooper was awarded the Lord Dearing Lifetime Achievement Award at the *The Times Higher Education* Awards for his distinguished contribution to higher education. He was lead scientist on the U.K. Government’s Foresight program on Mental Capital and Wellbeing, which had a major impact in the United Kingdom and Europe. Professor Cooper was Chair of the Global Agenda Council on Chronic Diseases in the World Economic Forum in 2009–2010. In 2012, *HR* magazine voted him the Fourth Most Influential HR Thinker. In 2001, he was awarded a CBE by the Queen for his contribution to occupational health.
Contributors

Yasumichi Arai, Keio University School of Medicine, Japan
Kate M. Bennett, University of Liverpool, U.K.
John Bond, Newcastle University, U.K.
Katie Brittain, Newcastle University, U.K.
Michael Catt, Newcastle University, U.K.
Cary L. Cooper, Lancaster University, U.K.
Lynne Corner, Newcastle University, U.K.
Lorna Dyall, University of Auckland, New Zealand
Yasuyuki Gondo, Osaka University, Japan
Peter Gore, ADL Smartcare Ltd. and Newcastle University, U.K.
Grainne S. Gorman, Newcastle University, U.K.
Carol Jagger, Newcastle University, U.K.
Nobuyoshi Hirose, Keio University School of Medicine, Japan
Julian C. Hughes, Newcastle University, U.K.
Mere Kēpa, University of Auckland, New Zealand
Ngaire Kerse, University of Auckland, New Zealand
Thomas B. L. Kirkwood, Newcastle University, U.K.
John C. Mathers, Newcastle University, U.K.
Bert Mulder, The Hague, The Netherlands
C. Alexandra Munro, Newcastle University, U.K.
Roland Rau, University of Rostock, Germany and Max Planck Institute for
Demographic Research, Germany
Louise Robinson, Newcastle University, U.K.
Jim Soulsby, University of Leicester, U.K.
Laura K. Soulsby, University of Liverpool, U.K.
Ruth Teh, University of Auckland, New Zealand
Contributors

Michael I. Trenell, Newcastle University, U.K.

A. J. Willem van der Does, Leiden University, The Netherlands

Frans J. G. van der Ouderaa, Leyden Academy on Vitality and Ageing, The Netherlands

James W. Vaupel, Max Planck Institute for Demographic Research, Germany, University of Southern Denmark, Denmark, and Duke University, U.S.A.

Rudi G. J. Westendorp, Leyden Academy on Vitality and Ageing and Leiden University Medical Center, The Netherlands

Josh Wood, Newcastle University, U.K.

Helen Yallop, King’s College London, U.K.
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Introduction to *Wellbeing: A Complete Reference Guide*

Cary L. Cooper
Lancaster University, U.K.

This series of six volumes explores one of the most important social issues of our times, that of how to enhance the mental wellbeing of people, whether in the developed, developing, or underdeveloped world, and across the life course from birth to old age. We know that 1 in 4–6 people in most countries in the world suffer from a common mental disorder of anxiety, depression, or stress. We also know that mental ill health costs countries billions of dollars per annum. In the United Kingdom, for example, mental health-care costs have amounted to over £77 billion per annum, the bill for sickness absence and presenteeism (people turning up to work ill or not delivering due to job stress) in the workplace is another £26 billion, and the costs of dementia will rise from £20 billion to an estimated £50 billion in 25 years’ time (Cooper, Field, Goswami, Jenkins, & Sahakian, 2009). In Germany, the leading cause of early retirement from work in 1989 was musculoskeletal disease but by 2004 it was stress and mental ill health, now representing 40% of all early retirements (German Federal Health Monitoring, 2007). In many European countries (e.g., Finland, Holland, Norway, and Switzerland) the cost of lost productive value due to lack of mental wellbeing is a significant proportion of gross domestic product (McDaid, Knapp, Medeiros, & MHEEN Group, 2008). Indeed, the costs of depression alone in the European Union were shown to be €41 billion, with €77 billion in terms of lost productivity to all the economies (Sobocki, Jonsson, Angst, & Rehnberg, 2006).

The issue of wellbeing has been around for sometime but has been brought to the fore more recently because of the global recession and economic downturn, which have made the situation worse (Antoniou & Cooper, 2013). But it was as early as 1968 that politicians began to talk about the inadequacy of gross national product as a measure of a society’s
success. In a powerful speech by Bobby Kennedy at the University of Kansas, when he was on the campaign trail for the Democratic Party nomination for U.S. President, he reflected:

But even if we act to erase material poverty, there is another greater task, it is to confront the poverty of satisfaction—purpose and dignity—that afflicts us all. Too much and for too long, we seemed to have surrendered personal excellence and community values in the mere accumulation of material things. Our gross national product, now, is over $800 billion a year, but that gross national product—if we judge the United States of America by that—that gross national product counts air pollution and cigarette advertising, and ambulances to clear our highways of carnage. It counts special locks for our doors and the jails for the people who break them. It counts the destruction of the redwood and the loss of our natural wonder in the chaotic sprawl. It counts napalm and counts nuclear warheads and armoured cars for the police to fight the riots in our cities. . . . Yet the GNP does not allow for the health of our children, the quality of their education or the joy of their play. It does not include the beauty of our poetry or the strength of our marriages, the intelligence of our public debate or the integrity of our public officials. It measures neither our wit nor our courage, neither our wisdom nor our learning, neither our compassion nor our devotion to our country, it measures everything in short, except that which makes life worthwhile.


Since that time there have been numerous studies to show that the wealth of a country is not related to its happiness (Cooper & Robertson, 2013); indeed, as you earn far beyond your means you may become less happy or content. More recently, we have had politicians like former President Sarkozy of France, Prime Minister Cameron of the United Kingdom, and the King of Bhutan extoll the virtue of gross national wellbeing; that is, that the goal of a nation’s politicians should be to enhance wellbeing among its citizens, with gross national product being only one indicator of a country’s success. Indeed, Prime Minister Cameron has instituted an annual assessment of this through the U.K. Office of National Statistics which measures wellbeing among a large sample of the U.K. population, publishing the results, highlighting concerns, and ultimately considering policies to deal with them. The World Economic Forum of leading global companies, nongovernmental organizations, international bodies, and global charities now has one of its Global Agenda Councils on “mental health and wellbeing.” Happiness and wellbeing indices abound (e.g., The Happy Planet), and many countries are being compared and assessed on a range of
quality-of-life metrics. Indeed, in April 2012, 79 countries in the General Assembly of the United Nations signed the Bhutan Agreement, supporting the view that an overarching goal of a country should be to enhance the wellbeing and happiness of its people.

The biggest study of its kind undertaken by any government was the 2-year U.K. Government’s Foresight project on mental capital and wellbeing, the aim of which was “to produce a challenging and long-term vision for optimising mental capital and wellbeing in the United Kingdom in the 21st century—both for the benefit of society and for the individual” (Cooper et al., 2009). Mental capital was defined as the metaphorical “bank account of the mind,” which gets enhanced or depleted throughout the life course (see figure). Mental wellbeing was defined as “a dynamic state that refers to individuals’ ability to develop their potential, work productively and creatively, build strong and positive relationships with others and contribute to their community” (Beddington et al., 2008).

Over 85 international science reviews were commissioned to assess the factors that influence an individual’s mental capital and wellbeing throughout life, from early childhood to school years to working life to old age. There were numerous findings in this report, which were costed and developed as potential government policy and/or interventions. An example of some of the findings were: (a) if society does not catch learning difficulties in children early enough, there will be increased personal and economic costs downstream, leading to depleted mental wellbeing in terms of increased antisocial behavior as well as significant health costs; (b) if society does not identify the common mental disorders (CMDs) of anxiety, depression, and stress early enough, and provide appropriate treatment and support, society won’t be able to tackle the 1 in 4–6 people suffering from depression and other CMDs; (c) with the workplace being more insecure, people working longer hours, and being more overloaded, occupational stress in many countries is now the leading cause of sickness absence and presenteeism, which has implications for the viability of businesses and their productivity; and, finally, (d) with the doubling of over-65-year-olds and the tripling of over-80-year-olds over the next 30 years, society needs to deal with the consequences of dementia now with preventative strategies, better early diagnosis, and more successful and evidence-based treatment regimes. The Foresight project developed many recommendations to enhance mental capital and wellbeing not only in the United Kingdom but also for other countries (Cooper et al., 2009), and its legacy has provided a roadmap for how other countries should think about this in the future, in terms of both policies and interventions for wellbeing.
Figure. Synthetic View of the Mental Capital Trajectory.