

# Gross National Happiness Policy Lens

**Marilyn Wise** 



- Intuitive appeal
  - How many humans perceive ourselves and our lives and those of others – links with the purpose of being
  - Move beyond single interests reflected in policy silos and ossified, in, for example, a sense of 'the health sector'
  - Recognition of complex, interdependent factors that influence happiness, wellbeing ....



- Health sector has evinced interest in positive health, in wellbeing, and in sustainability for some time
- But it has been hard to move beyond the curative, medical focus – even to include mental health
- Happiness and wellbeing offer new 'ways' in to thinking cross-sectorally, and across individuals' and communities interests – more engaging

#### More inclusive

- Although there has been an enormous effort among population health researchers, practitioners and policy makers for decades, now, to expand public and sectoral awareness of and interest in social, economic, environmental and even spiritual determinants of health, it has proven mighty difficult to 'move ahead'
- Happiness, well being, seem to be more inherently inclusive

#### and

And by inclusion, I also mean the inclusion of sectors other than health

It's easier (perhaps) for sectors to grasp the links between their decisions and happiness or wellbeing than between their decisions and 'health' – largely because health has been so narrowly defined

## Concept of policy lens

Is also positive

The idea of conscious policy-making is inherently appealing – adding awareness of consequences beyond those being sought through the policy (e.g. increased road safety; increased economic opportunities)



Shared interest in and empathy for the idea, the concept and the initiative so far

■ The inspiration and the instruments



- Scope
- Complexity
- Interdependence

And sense of a society/community living in sustainable environments



Rationale both for the whole initiative and for the selection of individual indicators

- What is the goal?
  - is it, for example, improving the perceived or selfreported wellbeing of all citizens?
  - or is it reducing gaps in perceived or self-reported wellbeing – between best and worst?



It would be helpful to have a current context for each country – what is the current situation as far as we know?

It would be helpful to have baselines against which to assess progress

### The process

- Who responds/ applies the lens?
- By Invitation? By mandate? By determination?
- What values?
- What evidence?

How will different responses be adjudicated and weighted? E.g. majority or equity? Professional or community?



What responses or recommendations will emerge?

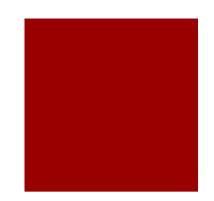
Who will be responsible for action – the application of the lens, the preparation of the responses, and the action to change policy?



Placement in the policy cycle

Particularly problematic because working across sectors – this is where a strength becomes a weakness because although multisectoral interest, the recommendations will go back to individual sectors for the most part





Important contributions to knowledge and to policy

Role and limitations of scientific knowledge

Values, science, politics