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Understanding the SEED Domains:

A scoping review of social, economic,
environmental and democratic wellbeing



Acknowledgments

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Contents

Executive Summary

1.0 Introduction	6
1.1 Understanding the social, economic, environmental and democratic (SEED) domains of wellbeing	6
1.2 Defining wellbeing	7
2.0 Social wellbeing	10
2.1 Introduction	10
2.2 Methods, search results and screening	12
2.3 Findings	18
2.4 Conclusions on social wellbeing	25
2.5 References	26
3.0 Economic wellbeing	29
3.1 Introduction	29
3.2 Methods, search results and screening	32
3.3 Findings	40
3.4 Conclusions on economic wellbeing	53
3.5 References	56
4.0 Environmental wellbeing	61
4.1 Introduction	61
4.2 Methods, search results and screening	63
4.3 Findings	69
4.4 Conclusions on environmental wellbeing	82
4.5 References	85
5.0 Democratic wellbeing	89
5.1 Introduction	89
5.2 Methods, search results and screening	92
5.3 Findings	100
5.4 Conclusions on democratic wellbeing	116
5.5 References	118
6.0 Cross cutting issues in the SEED wellbeing domains	121
6.1 Introduction	121
6.2 Aggregation	122
6.3 Inequalities and distribution	124
6.4 Intertemporal considerations	127
6.5 Specific links between wellbeing domains	128
6.6 Conclusions	130
6.7 References	131

Executive summary

This chapter summarises core findings from each of the four domain scoping reviews and the cross-cutting paper and, where relevant, reflects on the implications for Carnegie UK's definitions of wellbeing.

Social wellbeing

- **Place:** Participation is strongly associated with social capital at a local level and linked to accessible and well organised opportunities and networks to connect with others. This is particularly important for older and more vulnerable and marginalised groups whose wellbeing is at risk due to isolation or segregation. Social relations are reflected in the trust that people experience in their neighbours and within the community and neighbourhood.
- **Diversity and inclusion:** The evidence suggests that social wellbeing is derived from physical health and quality of life. These two factors are significantly associated with resilience derived from education, employment and the acceptance of diversity as a local phenomenon. Ethnic difference is not a barrier to social wellbeing and in the long-term, increased diversity is likely to promote contact, tolerance and understanding. However, the positive effect of diversity on social cohesion for young people dissipates in older age groups.
- **Distribution:** Typically, geographical health inequalities are aggregated and hyper-local or household experiences need to be considered as social wellbeing and apparent cohesion may hide pockets of individuals or small groups that experience alienation or isolation. Social wellbeing is affected by community 'incivilities' and in low deprivation areas anxieties and 'irritations', such as gossip among neighbours, can surface in communities creating 'paranoia' and some of the worst outcomes for small and segregated groups who may be unable to overcome the alienation and segregation they experience.

Economic wellbeing

- **Wealth:** The cumulative dynamics of wealth ('wealth begets wealth') means inequalities tend to grow between those with and without wealth. This has implications for inequalities in wellbeing over time and between generations given that wealth, particularly in the form of housing, can confer access to better amenities, opportunities (such as education and employment) and social status. It is important, therefore, that wealth is understood alongside the traditional focus on income and consumption as an essential component of economic wellbeing.

- **Work:** The relationship between work and wellbeing including the components and benefits of 'good work' are well understood. Higher worker wellbeing can also increase productivity but this is not always a 'win-win' relationship. Measures to improve productivity can also have negative impacts on worker wellbeing and even, as a result, firm-level performance in the longer run. These relationships are important to understand given current policy focus on productivity as a potential mechanism for reducing regional economic inequalities.
- **Status:** Social status derived from (lack of) assets or income can generate both positive and adverse wellbeing outcomes. Economic wellbeing is, in short, not just about what you have but where it positions you relative to others, and how that makes you feel. The adverse effects of status inequalities derived from income, wealth and consumption patterns suggest the need for a conceptualisation of economic wellbeing which recognises symbolic differences in status between social groups.

Environmental wellbeing

- **Scale:** Environmental wellbeing is influenced by factors that work and interconnect at different scales. It is experienced primarily within places (though phenomena such as eco-anxiety highlight the impact of the global on the individual). But the factors that shape the local environment range from the hyper-local (specific spaces and habitats) to landscape factors (such as river systems) through to bioregional effects as well as global factors such as atmospheric carbon and methane and planetary capacity to absorb the effects of human activity.
- **Time:** Carnegie UK's existing framework recognises the importance of thinking in terms of future generations. This can be considered in terms of stewardship (the preservation of ecosystems, and the ecosystem services they provide, for future generations) but also in terms of intergenerational connections – the current generation of decision makers needs to know, learn and experience the benefits of the natural environment in order to pass on a shared understanding to future generations.
- **Place:** The wellbeing impacts of the local environment are experienced through the built environment (public spaces and places, effects such as urban heating and flood risk, exposure to traffic noise and pollution) as well as through the natural environment and these need to be considered together.
- **Distribution:** Environmental harms (as well as goods) are unevenly distributed and these harms impact most heavily on those who are already disadvantaged by factors such as poverty, race or disability. Our understanding of wellbeing needs to consider not only how these harms are distributed, but the causes of this unequal distribution (in terms of high consumption, wealth extraction, etc).

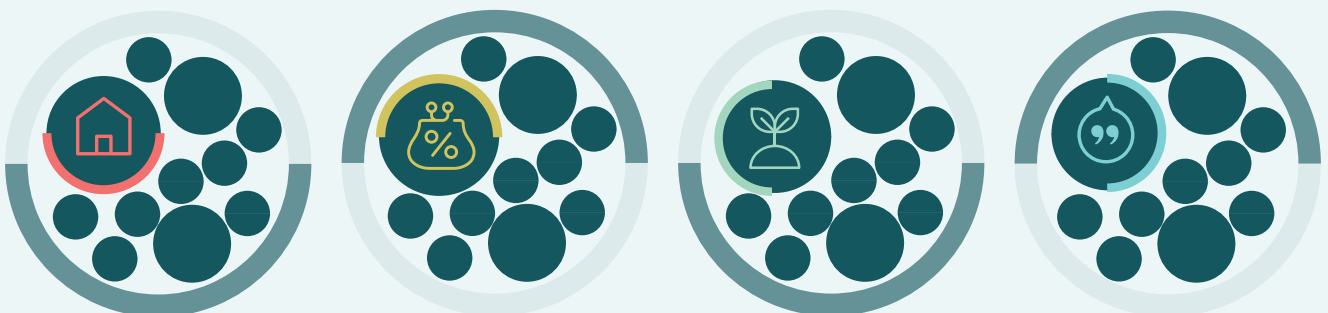
Democratic wellbeing

- **Empowerment:** Community participation in the process of defining wellbeing is an important part of participatory democracy. Processes and mechanisms should allow scope to 'change the rules' and enable more marginal groups to question or challenge the understandings of 'experts' (e.g. practitioners and policymakers). Community participation in place-based processes of deliberation to define wellbeing may, in itself, generate forms of community identity and wellbeing through the creation of stories and narratives about where people live.
- **Distribution:** There is growing interest in more participatory forms of democracy (e.g. citizens' juries and participatory budgeting) and evidence that participants experience positive wellbeing outcomes. However, studies suggest these mechanisms sometimes exclude or underrepresent groups such as ethnic minorities, lone parents, households on low incomes or experiencing poverty, individuals with low educational attainment, working-class young people, and people with disabilities. Understandings of democratic wellbeing need to be attentive to, and seek to correct, inequalities in participation.
- **Place:** Place matters for democratic wellbeing. A sense of political abandonment and loss of trust in formal political institutions and representatives (representative democracy) is particularly acute in areas that have experienced economic decline, especially when combined with perceptions of living in stigmatised or low status areas. Engagement in more 'bread and butter' forms of local participatory democracy can sometimes compensate for this loss of trust.

Cross-cutting themes and final reflections

- **Balance:** The notion that collective wellbeing is achieved through balance across the SEED domains perhaps need to be rethought. There are complex interactions and trade-offs between domains and it could be more useful to recognise the SEED domains as interconnected. Domains may be prioritised differently according to context in terms of, for instance, the nature of wellbeing challenges facing different types of area while the existential threat of climate change may, in the longer-term, demand prioritisation over other domains.
- **Distribution:** Inequalities in the ability to access wellbeing benefits by social group or area were common across all the SEED wellbeing domains. Wellbeing harms generated by the actions of higher income groups can also disproportionately impact lower income groups, highlighting how the uneven distribution of wellbeing across populations reflects the relations between different groups. This is most obviously true of environmental harms but the role of social status as a component of economic wellbeing also underscores the significance of relative standing across and within social groups as a determinant of wellbeing. Adequate reflection on potential for changes in the distribution of wellbeing is needed to inform policy making.

- **Time:** Dynamics in some domains have intergenerational effects on wellbeing over time, particularly in terms of the impacts of growing divides in wealth (economic wellbeing) and the need to preserve stocks of natural capital for future generations (environmental wellbeing). Reflecting such factors in consideration of wellbeing impacts is critical.
- **Impact** on policy appraisal: While these issues challenge some of the assumptions underpinning standard cost benefit analysis, methods can be adjusted to reflect distributional and intergenerational issues. Caution needs to be exercised around any move to discarding established economic practice around cost benefit analysis with a need instead to reform and adjust the approach.



1. Introduction

1.1 Understanding the social, economic, environmental and democratic (SEED) domains of wellbeing

This scoping review consists of five reviews that **identify and synthesise existing evidence on the four domains of wellbeing - social, economic, environmental and democratic (SEED)** – that make up Carnegie UK's conceptualisation of wellbeing, plus a fifth cross-cutting review exploring themes across the four domains.

Carnegie UK promote **collective wellbeing** which is defined as "*being about everyone having what they need to live well now, and in the future*". This includes "*having friends and loved ones, the ability to contribute meaningfully to society, and the ability to set our own direction and make choices about our own lives*". Collective wellbeing is made up of four domains:

- **Social wellbeing:** Everyone can achieve their potential and contribute to society because they have basic needs met. Our basic needs are having access to health and social care, education, housing, transport, digital and childcare.
- **Economic wellbeing:** Everyone has a decent minimum living standard and can absorb financial shocks. This means financial security now and being able to maintain adequate income throughout their lifetime.
- **Environmental wellbeing:** Everyone has access to green and blue spaces and collectively we live within the planet's natural resources. This means we protect the environment for future generations.
- **Democratic wellbeing:** Everyone has a voice in decisions made that affect them. This means having local and national leaders who support participation, foster trust and encourage diversity.

Balance and interactions across domains are seen as central to collective wellbeing which occurs when "*social, economic, environmental and democratic wellbeing outcomes are given equal weight*".

Carnegie UK also emphasise the importance of **equalities** to collective wellbeing, suggesting that society cannot flourish when there is inequality between people. This recognises how social, economic, environmental and political inequalities can generate and reproduce differences in **capabilities** to realise wellbeing outcomes across different areas and between diverse social groups. Capabilities can be understood as the "ability to live the life that a person wants to live" which requires a person to be able to have their **functional needs** met (e.g. health care, education, housing and so on) (Carnegie UK, n.d). Finally, it is important to acknowledge and protect **wellbeing in the future** as current **stocks** (e.g. natural resources) should not be sacrificed to enhance the wellbeing of populations in the present (Stiglitz et al., 2009).

Carnegie UK commissioned a team of researchers based at Sheffield Hallam University and Simetrica-Jacobs to review existing academic and 'grey' (non-academic) literature on each of the four dimensions of wellbeing in their SEED framework. The purpose is to explore theoretical and practical ('empirical') research to develop a better understanding of how each domain can be conceived and what its component parts are.

The research team have produced four scoping reviews on each domain plus one cross-cutting report that looks at the connections across the four domains. Each scoping review looks at the evidence on:

- how wellbeing can be conceptualised in each domain
- how wellbeing benefits are distributed across different groups and areas
- the drivers and barriers to wellbeing.

Cutting across all the scoping reviews is a **focus on inequalities** in terms of how wellbeing is understood, experienced and sometimes denied to more marginal groups in society.

Each scoping review takes a slightly different approach depending on the priorities and current knowledge of Carnegie UK as well as the comprehensiveness of existing literature. The economic wellbeing scoping review, for example, focuses on carefully selected themes (e.g. the relationship between productivity and wellbeing) where the evidence base is less familiar to Carnegie UK than other well-researched themes (e.g. the relationship between the nature of paid work and wellbeing in terms of what constitutes 'good work'). The democratic domain, by contrast, is less about 'gap filling' in knowledge than exploring how the Carnegie UK's nascent idea of democratic wellbeing might be defined and understood.

1.2 Defining wellbeing

There are a number of well-established ways of conceptualising wellbeing that are important in making sense of the approach and findings in each of the scoping reviews.

Subjective and objective wellbeing

Distinctions are often drawn between objective and subjective wellbeing:

- **Objective wellbeing** is about the **things people need** and refers "*to visible, quantifiable and externally defined life conditions*" (Soffia and Turner, 2021) with indicators of objective wellbeing reflecting what is believed to be important for wellbeing e.g. years of education, how much income, life expectancy, etc.
- **Subjective wellbeing (SWB)** concerns **how people feel** and reflects their self-reported views of how they experience and evaluate their lives. Distinctions are sometimes made between three forms of SWB:

8 Understanding the SEED Domains

- **Hedonic or affective wellbeing** comprises good or bad emotions and feelings such as happiness or anxiety. It is often used to capture how people feel in a given moment e.g. how happy were you yesterday?
- **Evaluative wellbeing** centres on how people assess their lives and is often measured as life satisfaction. This evaluation is based on longer-term self-assessments than hedonic wellbeing.
- **Eudaimonic wellbeing** is a sense of whether the things that people do in their lives are worthwhile and is related to philosophical notions of virtue (Layard and De Neve, 2023).

These three theories are at the heart of all wellbeing measures in use today. For example, the ONS use four measures (often referred to as the ONS4) of wellbeing that capture:

- **Hedonic wellbeing:** Two separate anxiety and happiness measures ask about emotions during a particular period.
- **Evaluative wellbeing:** A Life Satisfaction measure evaluates how satisfied people are with their life overall.
- **Eudaimonic wellbeing:** A Sense of Purpose measure asks whether people feel they have meaning and purpose in their life.

One of their main benefits of SWB measures is that they take account of what matters to people by allowing them to decide what is important when they respond to questions. However, subjective wellbeing measures are sometimes criticised for neglecting processes of **adaptive preferences and social comparison** whereby "*people compare themselves with others who are in the same precarious situation or even worse off and, as a result, lower their expectations and adapt their aspirations and preferences to their material and financial constraints*" (Crettaz and Suter, 2013: 139), although the evidence for this effect remains mixed (ibid.)

Community wellbeing

The notion of community wellbeing is often used to capture the notion of "**being well together**" (Atkinson et al., 2017). It represents an intermediate scale between individual and societal wellbeing, but is usually seen as something more than the sum ('aggregate') of individual wellbeing (i.e. population wellbeing) within communities. A review undertaken for the What Works Centre for Wellbeing (ibid.) draws on prior work to define community wellbeing as:



the combination of social, economic, environmental, cultural, and political conditions identified by individuals and their communities as essential for them to flourish and fulfil their potential

(Wiseman and Brasher, 2008: 358, taken from Atkinson et al., 2017)

The review suggests that the components of community wellbeing can be usefully conceived of in terms of **people, place and power**:

Figure 1: Components of community wellbeing

People	Place	Power
e.g forms of social support through friends, neighbours, membership of organisations, available formal support through services and facilities.	e.g emotional attachments such as sense of belonging, memories, cultural heritage, aesthetics; available opportunities such as employment and earning potential, education, transport, housing, leisure, shops, personal safety, crime rates, secure futures, sustainability.	e.g political voice and participation, inclusion, inequalities of access to local resources and opportunities, a sense of collective control and influence.

Source: Atkinson et al. (2017)

Social relations are often seen as a key domain of community wellbeing as expressed through an array of concepts such as:



social networks, social support, social inclusion and exclusion, social cohesion, social capital, social justice, sense of belonging, sense of solidarity, respect and tolerance for diversity, gender equality, trust, reciprocity, security and safety, collaborative activities, local participation, political participation

(Atkinson et al., 2020: 1907)

However, Atkinson et al (2020) caution against simplistic understandings that focus on improving and growing these forms of community wellbeing. They argue that community wellbeing needs to be understood in its broader social, spatial and temporal contexts and incorporate recognition of how structural processes and institutional forms of power shape and sometimes harm community wellbeing. Without this, narrower definitions of community wellbeing risk:

overlook[ing] the histories of post-industrial economic decline, environmental degradation or green belt housing developments, and population relocation schemes. These all attest to the processes through which community wellbeing is impacted by weakening sources of livelihood, bonding through employment networks, destruction of socially meaningful landscapes or beneficial greenspaces, or the scattering of established community groups to diverse locations.



(Atkinson et al, 2020: 1907)



2. Social Wellbeing

Sally Fowler-Davis and Megan Davies

2.1 Introduction

Carnegie UK have conceptualised 'Social Wellbeing' as '*we all have our basic needs for support and services met*'. Social wellbeing was associated with some aspects of wider community assets including housing quality, accessible local transport, crime, and safety. Accessibility of essential services may be an input or an outcome in relation to physical health, mental health and education and social wellbeing but for the purpose of focusing on community as opposed to personal wellbeing, the concept of social cohesion was selected as the core focus for this review through its three component parts: social relations, identification with the geographical 'place' and an orientation towards the common good for the community (Schiefer & Van der Noll 2017).

Whilst services including culture and leisure facilities may be critical to social wellbeing, the focus agreed for the scoping review was to identify '***what evidence of social cohesion and connectedness results in population or community wellbeing?***'. The rationalisation for this question was based on a concern for collective wellbeing, inequalities in wellbeing, and resources for future wellbeing (Stiglitz et al., 2009) and the opportunity to establish what is needed in policy and strategy to promote wellbeing. This follows the OECD framework for wellbeing that is built around three distinct components: current wellbeing, inequalities in wellbeing, and resources for future wellbeing. For many wellbeing proponents, a fundamental principle of wellbeing is that future wellbeing cannot be sacrificed to increase current wellbeing (OECD 2022).

There are some common areas of interest in relation to social wellbeing and other domains and this will be discussed elsewhere. However, it is perhaps important to recognise that social wellbeing can be viewed from multiple political ideologies (i.e., 'nationalist' perspectives would place emphasis on social tradition and shared history whereas 'social democratic' perspectives would focus more on equality and solidarity) as a means of achieving wellbeing. The dominant ideology is that of public health which according to the World Health Organisation is the 'art and science of preventing disease, prolonging life and promoting health through the *organised efforts of society*' (WHO [WHO Definition of Public Health - Public Health](#)). This scoping review has been systematically conducted to identify high quality and relevant studies, based on the agreed priorities that reflect contemporary concerns related to community and 'place'.

Wider understandings of social wellbeing as social cohesion

Social cohesion is defined by Dragolov et al. (2013: 5) as:

The extent of social togetherness in a territorially defined geopolitical entity. Social cohesion is a characteristic of the 'collective' residing in this entity, rather than of individual members. A cohesive society can be characterized by reliable social relations, a positive emotional connectedness of its members to the entity and a pronounced focus on the common good.

It is an internationally recognised construct, conceived to be a characteristic of a society that is comprised of nine dimensions grouped under three themes (Dragolov et al., 2013). These dimensions can be monitored and consist of three indicators per theme. Firstly, **social relations** reflect the presence of social networks; the trust that people experience in their neighbours and within the community; and the acceptance of diversity as a local phenomenon. Secondly, **social connectedness** involves the identification with the neighbourhood; the trust in institutions that provide municipal support; and the perception of fairness across the community. Thirdly, focus on **the common good** concerns the experience of solidarity and helpfulness; the respect for social rules; and the degree of civic participation that can be evidenced.

These three key domains recognise that social cohesion might contribute to the wellbeing of a society's members as a direct cause or as a buffer to mitigate adverse social conditions (e.g. poverty or unemployment). Wellbeing, quality of life (QoL) and shared values arise because of connection and cohesion and on this basis, QoL and wellbeing are outcomes of social cohesion rather than a prerequisite. Within the literature included in this report, QoL and wellbeing includes physical, social and mental health measures, but also is captured through concepts such as social capital, which focuses on social connectivity.

Social cohesion is linked more to familiarity and strength of relationships than length of time spent living in a particular area, often referred to as social connectedness. Social wellbeing arises through social connections and relations, that may be formal as in associations with churches or sport clubs or less formal but more geographically ascribed as in the case of neighbours or park facilities. Identification with the geographical 'place' and an orientation towards the common good for the community are critical to achieving cohesion (Schiefer and Van der Noll 2017). Whilst subjectively experienced, community level and social and mental wellbeing is higher for people in more cohesive societies. It therefore warrants measurement (Williams et al., 2020) and the domains of cohesion therefore become a proxy for the association with social wellbeing. Social wellbeing outcomes for a community can result in improved quality of life (QoL) and shared values that arise from connection and community resilience (Schiefer and Van der Noll 2017).

2.2 Methods, search results and screening

The design of the scoping review has been based on a five-phase approach that Arskey and O'Malley developed in 2005 (Westphaln, et al 2021). This includes, developing well-formulated research questions; identifying high quality studies to review; extracting selective and relevant data from documents; and synthesising data in the final review using appropriate techniques (e.g., thematic analysis). The narrative synthesis output was agreed as a means of explaining and presenting a critical but trustworthy story (Popay et al., 2006).

The scoping review has been co-produced with CUK to refine the search strategy and priorities for a full evidence search. This is to ensure that it builds on CUK's knowledge and existing evidence and enables a synthesis of core knowledge and exploration of the conceptualisation of social wellbeing. A preliminary rapid evidence search led to agreement of screening terms and the limits to searches.

Searches

The final search strategy was confirmed, and one search engine was selected, SCOPUS – an academic literature search engine for social sciences. We used key terms relating to social cohesion and also protected characteristics that are considered risk factors to social wellbeing. We chose not to specify wellbeing or QoL as a search term, instead having these as elements within our inclusion criteria. This meant that we didn't limit searches by the specific overarching terms wellbeing or QoL and could have discussions and select studies based on factors that contribute to wellbeing or QoL.

```
(TITLE-ABS-KEY(("Social Cohesion") OR ("Social Connectedness") OR ("Connectedness") OR ("Social Relations") OR ("Sense of Belonging") OR ("orientation towards the common good"))) AND (TITLE-ABS-KEY(("Age") OR ("Religion") OR ("Belief") OR ("Sexual Orientation") OR ("Disability") OR ("Sex") OR ("Gender") OR ("Gender Reassignment") OR ("LGBTQ+") OR ("Race") OR ("Ethnicity") OR ("Pregnancy") OR ("Maternity") OR ("Marriage") OR ("Civil Partnership"))) AND (LIMIT-TO(PUBYEAR, 2023) OR LIMIT-TO(PUBYEAR, 2022) OR LIMIT-TO(PUBYEAR, 2021) OR LIMIT-TO(PUBYEAR, 2020) OR LIMIT-TO(PUBYEAR, 2019) OR LIMIT-TO(PUBYEAR, 2018) OR LIMIT-TO(PUBYEAR, 2017) OR LIMIT-TO(PUBYEAR, 2016) OR LIMIT-TO(PUBYEAR, 2015) OR LIMIT-TO(PUBYEAR, 2014)) AND (LIMIT-TO(DOCTYPE, "ar")) AND (LIMIT-TO(AFFILCOUNTRY, "United Kingdom")) AND (LIMIT-TO(SRCTYPE, "j"))
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In addition, a grey literature search was undertaken via **IDOX**, the Knowledge Exchange database via the [Knowledge Exchange website](#). This search was similarly orientated and limited to the last 10 years, aiming to identify key reports published by similar organisations to CUK and to ensure that contemporary evidence from field studies and local strategy was also included.

Screening

Title and abstract screening were undertaken by the research team, based on the identification of inclusion, exclusion and selection criteria that aligned with the priorities identified with CUK and the viability of producing a report that fully explains the contemporary evidence for social wellbeing. The following criteria were applied.

Inclusion - selecting articles and reports that were:

- UK publications, peer reviewed from SCOPUS, and recognised organisational reports within the IDOX selection.
- That aspects of increased/decreased wellbeing were reflected in the outcomes of the paper, including but not limited to QoL or wellness or other terms related to wellbeing.
- That cohesion/social relations/place affiliations/connectedness at community level/ meaningful engagement were central to the publication and that references were particularly focussed on community, place and to marginalised groups/categories.

Exclusion – de-selecting articles and reports that were:

- Published internationally and/or referring to the rest of world or those that had a focus on digital interventions or other specific interventions for social wellbeing (although rare notable exceptions were made that were deemed to be highly relevant to specific communities or group wellbeing).
- Experimental studies that were controlled for psychological testing of individuals or laboratory based were also excluded as well as those with specific overt reference to the impacts of COVID-19.
- In addition, articles referring to specific studies of children or older adults were excluded (although a number of references were retained that demonstrate differential outcomes for age-related population groups).

Selecting and priorities related to gaps in knowledge about social wellbeing.

The final selection of papers and reports were higher quality (based on journal impact factor); higher relevance (e.g., deselecting most papers relating overtly to loneliness as a subjective experience of wellbeing in favour of papers that reflect social isolation as an objective characteristic of social relations); and, finally, favouring papers that reflected on intersectionality and other protected characteristics to provide a thematic focus on diversity and inclusion as a factor in community social wellbeing.

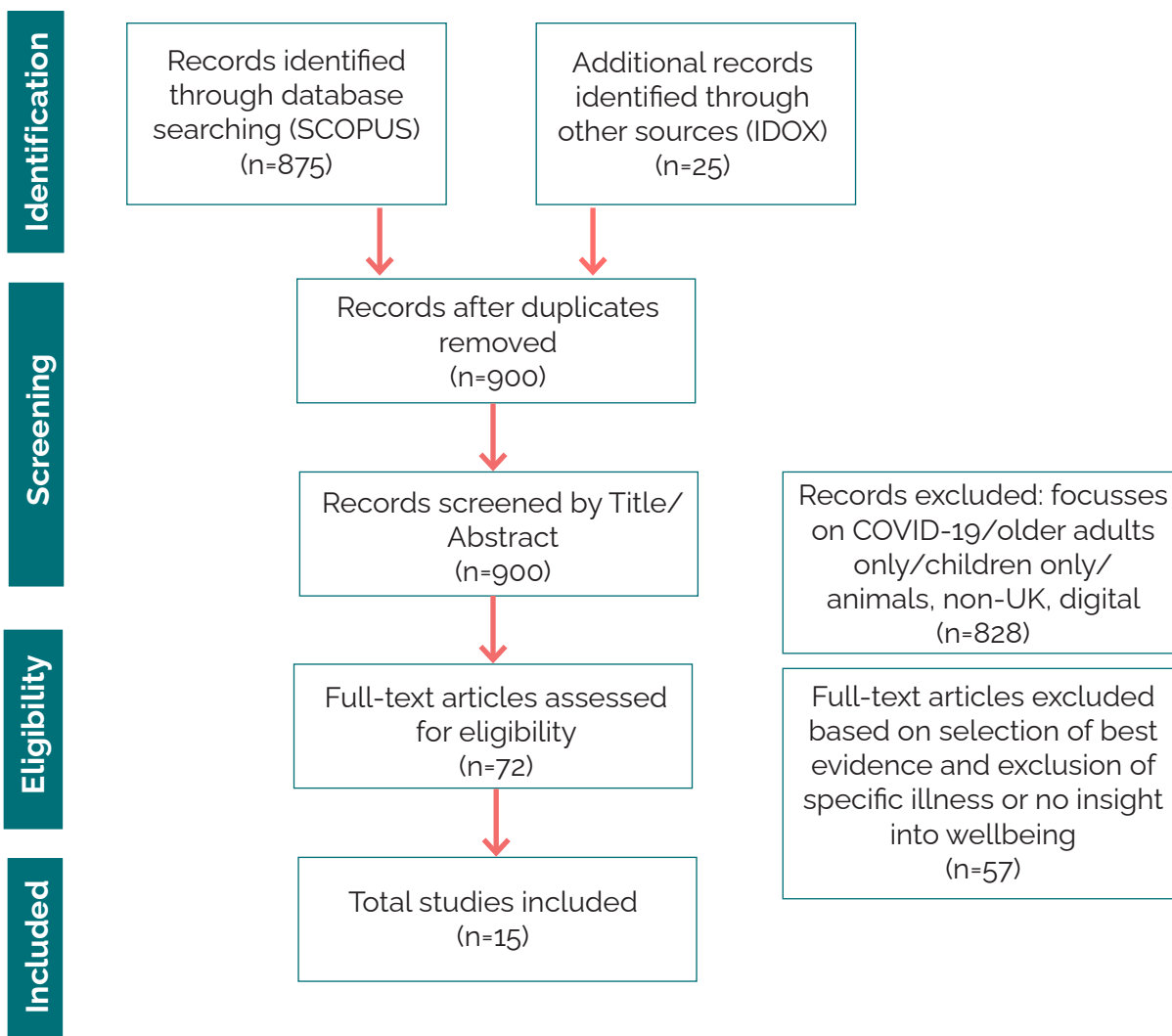
Screening and selection for social wellbeing was based on prior discussions with CUK and the interest in 'place-based' social wellbeing. Of interest for further, future comparative analysis may be following themes which were not included in this review:

14 Understanding the SEED Domains

- a) multiple international contributions – making clear the importance of national/ regional and local context to wellbeing across cultures and based on national characteristics.
- b) unexpected multi-disciplinary contributions related to the animal kingdom where social connectedness was the topic of investigation in studies of dolphins, bats and mongooses, with notions of 'kin-ship' and community as a central tenet.
- c) the historical focus on cohesion and wellbeing, with citizenship and cohesion as an ancient phenomena associated with displacement and conflict as well as social changes from rural to more urban living.
- d) the mass of contemporary policy literature focused on the negative consequences of 'loneliness' as a key feature of subjective psychological wellbeing.
- e) educational processes that demonstrate the importance of school and university policy and process in relation to driving cohesion as a social good.

These literatures demonstrated the diversity and subject variation associated with social wellbeing and all/any of these areas would be relevant to add into the outcomes here reported at a later date.

Figure 2: Process of study selection (PRISMA)



Selected articles

Author(s)	Year	Title	Document Type	Methodology	Definition of Wellbeing
Harris, Androulla et al.	2022	How are we doing? A coproduced approach to tracking young Black men's experiences of community wellbeing and mental health programmes.	Evaluation of Intervention	Qualitative	Social wellbeing relates to social relatedness and measuring service outcomes for black men in a single community setting.
Clarissa Giebel Shaima Hassan Gina Harvey Conal Devitt Lesley Harper Cheryl Simmill-Binning	2022	Enabling middle-aged and older adults accessing community services to reduce social isolation: Community Connectors.	Empirical	Qualitative analysis	Wellbeing related to participation and asset-based approaches to wellbeing.
MIND	2022	Together through tough times: the power of community to support mental wellbeing across the UK.	Empirical	Qualitative	Subjective community wellbeing as well as individual, via selection of factors that promote social relatedness.
McGowan V.J., Akhter N., Halliday E., Popay J., Kasim A., Bamba C.	2021	Collective control, social cohesion and health and well-being: baseline survey results from the communities in control study in England.	Empirical	Quantitative Analysis	Social wellbeing as a feature of mental health measured by a shortened version of the Warwick Edinburgh Mental Wellbeing Scale, but also by self-reported 'general health'.



16 Understanding the SEED Domains

Saville C.W.N.	2021	Not belonging where others do: A cross-sectional analysis of multi-level social capital interactions on health and mental well-being in Wales.	Empirical	Analysis	Wellbeing was broken down into 4 questions: 'Overall, how anxious did you feel yesterday?', 'Overall, how happy did you feel yesterday?', 'Overall, to what extent do you feel that the things you do in your life are worthwhile?', and 'Overall, how satisfied are you with your life nowadays?'.
Boyce, Christopher et al	2020	Understanding Wellbeing.	Conceptual	Qualitative analysis	Rigorous measurement of the quality of community life, to determine its correlation to wellbeing indicators such as life satisfaction and physical and mental health.
Russell Jones, Derek Heim, Simon Hunter, Anne Ellaway	2020	The relative influence of neighbourhood incivilities, cognitive social capital, club membership and individual characteristics on positive mental health.	Empirical	Quantitative analysis	Mental wellbeing is measured using the Warwick Edinburgh Mental Wellbeing Scale. Physical health was self-reported and assessed by adding the total number of illnesses/conditions recorded from a list of 19.
Williams A.J., Maguire K., Morrissey K., Taylor T., Wyatt K.	2020	Social cohesion, mental wellbeing and health-related quality of life among a cohort of social housing residents in Cornwall: A cross sectional study.	Empirical	Quantitative Analysis	Social wellbeing relates to physical functioning, role, bodily pain, general health, vitality, social functioning, and emotional and mental health / quality of life.

Kitty Lymperopoulou	2020	Immigration and Ethnic Diversity in England and Wales Examined Through an Area Classification Framework.	Empirical	Quantitative analysis	Main focus on ethnic diversity and social cohesion.
McElroy E., McIntyre J.C., Bentall R.P., Wilson T., Holt K., Kullu C., Nathan R., Kerr A., Panagaki K., McKeown M., Saini P., Gabbay M., Corcoran R.	2019	Mental Health, Deprivation, and the Neighborhood Social Environment: A Network Analysis.	Empirical	Mixed Methods	Social wellbeing is defined through mental health, specifically under the following four areas: anxiety, paranoia and auditory verbal hallucinations.
Social Marketing Gateway	2018	Building Community: An evaluation of asset based community development (ABCD) in Ayrshire.	Evaluation of Intervention	Mixed methods	Asset-based, or 'positive approaches', get better outcomes by bringing together people's assets and skills to develop solutions to community problems.
Mintchev, Nikolay; Moore, Henrietta L	2017	Community and prosperity beyond social capital: the case of Newham, East London.	Conceptual	Qualitative analysis	'Social capital' is measured by the level of trust that people have in relation to others (social connectivity), as well as the level of participation in various organisations and activities (civic engagement).
D. Fone, J. White, D. Farewell, M. Kelly, G. John, K. Lloyd, G. Williams and F. Dunstan	2014	Effect of neighbourhood deprivation and social cohesion on mental health inequality: a multilevel population-based longitudinal study.	Empirical	Longitudinal analysis	Common mental disorders such as anxiety and depression create a public health burden: Wellbeing is defined by assessment of factors influencing physical and mental health.

Patrick Sturgis, Ian Brunton-Smith, Jouni Kuha and Jonathan Jackson	2014	Ethnic diversity, segregation and the social cohesion of neighbourhoods in London	Empirical	Quantitative analysis	Main focus on ethnic diversity and social cohesion
Tracey Reynolds	2013	Them and us: 'Black neighbourhoods' as a social capital resource among Black youths living in inner-city London	Conceptual	Analysis	Bourdieu's notion of 'habitus' (ways of being) to identify specifically how disadvantaged communities are linked by a "collective habitus" in Black neighbourhoods" that allowed residents to establish bonds of trust and reciprocal relationships

2.3 Findings

Selected themes are used to synthesise the data from 15 papers. The narrative is intended to discuss social wellbeing based on the effects of social cohesion as a determinant of health in community. All papers identified through the searches are cited together with selected foundational public health contributions.

Defining Wellbeing

Social wellbeing is variously considered in relation to underpinning community resilience (Mind 2021, Southby et al 2022) and suggests that resilience in the form of social connectedness at a community level insulates more vulnerable groups from poor mental health and well-being (Marmot, 2020). Wellbeing is assessed through physical and mental health and in relation to mental disorders such as anxiety and depression that decrease personal wellbeing in specific populations and communities and so increase the public health burden (Fone et al., 2014, Saville 2021). Several papers undertake empirical testing of wellbeing via the Warwick Edinburgh Mental Wellbeing Scale (Jones et al., 2020, McGowan et al., 2021) which are based on eliciting individual feelings and thoughts. When aggregated, the self-reports from multiple individuals can be used to assess collective experience, relative to other factors, including a sense of belonging in community.



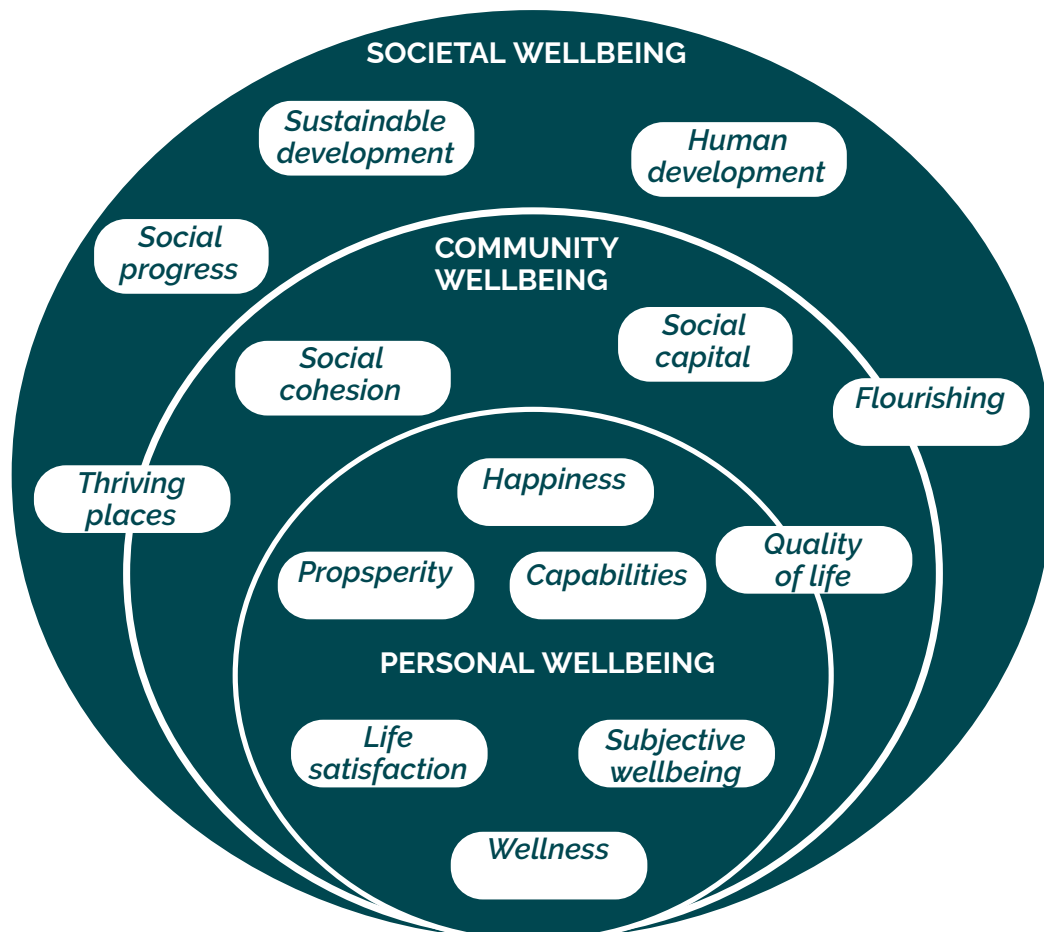
In terms of social and community wellbeing (the combination of social, economic, environmental, cultural, and political conditions identified by individuals and their communities), a place can be said to be thriving, when relationships within it are strong and capable of being mobilised to respond to local needs. Social capital goes further than aggregated wellbeing insofar as it suggests what is needed to live well locally, within communities (Boyce et al., 2020). The suggestion that social capital is an asset in a particular neighbourhood is reflected in the report for Centre for Mental Health (Harris et al., 2022) suggesting the tracking of social wellbeing and personal wellbeing is enhanced by specific monitoring and evaluation of local experience. Social capital (like quality of life) is widely recognised as an outcome of social networks (Dubos, 2017) based on the idea that social relationships are resources that can lead to the development and accumulation of solidarity or goodwill between people and groups of people and can ultimately have productive benefits.

Asset-based approaches to social connectedness and cohesion were evident in the literature, based on evaluation of local interventions that sought to improve social wellbeing. There was a racial dimension to the definition of social wellbeing that could be defined within inner city, 'Black neighbourhoods' where the social capital generated among black youths is both advantageous to social cohesion and wellbeing in the group and somewhat limiting in terms of restricting their activity to a segregated area (Reynolds, 2013). Similarly, wellbeing generated within different age groups, such as older adults, was based on specific initiatives to build social relations for the purpose of health and wellbeing improvements (Giebel, 2022). In Scotland, the Community Empowerment Act (2015) is identified as a policy that opened opportunities for 'asset-based' work; aiming to empower community bodies to strengthen the communities' voice in decision-making. This 'capabilities approach' to wellbeing is central to community development, suggesting that wellbeing is derived from participation and association (Ward 2019) and residents benefit from new social connections that have been made, particularly with respect to their health and wellbeing.

There are several foundational perspectives on wellbeing as cited in the selected literature. Bourdieu's notion of 'habitus' (ways of being) sought to identify how youths growing up in disadvantaged communities are linked by a "collective habitus" (Bourdieu & Wacquant, 1992). Spaces and places hold intrinsic value for people providing them with a sense of wellbeing and belonging. Social wellbeing is therefore underpinned by ideals of unity, related histories, and the interconnectedness of residents, despite variations in socioeconomic experiences, lived experiences and perceptions. Similarly, Robert Putnam, an American academic is cited several times in terms of his work on 'social capital' and the measurement of the level of trust that people have in relation to others (social connectivity), as well as the level of participation in various organisations and activities (civic engagement) (Putnam 1995). His influential work suggested that ethnic diversity is detrimental to community life. Finally, it is important to note that a systematic review in 2017 for What Works for Wellbeing (Bagnall et al, 2017), social relations are recognised as an important determinant of individual and community wellbeing and that the Office for National Statistics (ONS) has included social relations among the 10 key domains of national wellbeing on the basis of the assumption that "Good social relationships and connections with people around us are vitally important to individual wellbeing".

Community and societal wellbeing are more than the aggregate life satisfaction of citizens, but they cannot be said to exist in the absence of the personal life satisfaction of citizens. And of course, community wellbeing impacts personal wellbeing and societal wellbeing impacts community wellbeing (Boyce et al., 2020).

Figure 3: A model of wellbeing [taken from Boyce et al., 2020]



Social Relations

Community identities and collective narratives (shared stories) establish a shared sense of belonging that help people to feel secure and connected to their community (Mind, 2021) and building resilience to adversity tends to involve notions of friendship, tolerance, and openness (Mintchev, 2017). Several papers from our search and the wider literature offer ways of exploring in-depth, local experiences and characteristics of local communities, which impact on cohesion (Lymperopoulou 2019).

Social relations, defined as interpersonal relationships, have a significant effect on neighbourhood wellbeing and even in places with higher deprivation. Neighbourhoods tended to have more locally based family ties and friends, which led to increased support and interaction, therefore mitigating the negative effects of poverty (Fone et al., 2014). High deprivation therefore doesn't always lead to low social cohesion, although low social

cohesion always negatively impacted mental health (Fone et al., 2014). Social cohesion in neighbourhoods has a greater impact on mental health than the neighbourhood being deprived (Fone et al., 2014).

Friendships and exchange of favours with neighbours facilitate social networks and improve mental health. A sense of trust, a feeling of belonging to the local community and feeling valued appear to be the strongest predictors of both individual and subjective wellbeing. The 'exchange of favours' with neighbours facilitates social interaction and may increase levels of social cohesion (Fone et al., 2017) based on the social bonds that help neighbours achieve the social ties that enable a community to achieve a stable and predictable public environment (Sturgis et al., 2014). Furthermore, people who think they know people within their area and have social connections as well as trust in others will report 'good health' significantly more often than those who don't (McGowen et al., 2021).

Social connectivity appears to differentiate attitudes to wellbeing with "Neighbours look out for each other" strongly associated with social cohesion (and wellbeing) and conversely "People drunk/rowdy in public" and "Troublesome neighbours" reflecting social disorder and disharmony (McElroy et al., 2019). Similarly perceived social/environmental incivilities, such as antisocial behaviour, resulted in reduced wellbeing (Jones et al., 2020). This is where a higher proportion of older adults (over 65) and higher levels of social housing, worklessness and concentrations of asylum seekers, tend to result in fewer opportunities for socialisation, and contact between communities (Lymperopoulou, 2019).

Connections with place and person

Social connectedness involves the identification with the neighbourhood, the trust in institutions that provide municipal support and the perception of fairness across the community (Dragolov et al., 2013). Public space provides opportunities for people to build social connections with one another, foster pride in the area, relax and reflect. Through community organising and through participation i.e., formal volunteering opportunities, people are able to support their own and others' resilience, and improve the accessibility, use, look and feel of the public space they share with one another (Mind, 2021). A fulfilling community life can also impact physical and mental health, which are core determinants of wellbeing (Mintchev et al., 2017). Social wellbeing derived from formal structured and organised activity is social capital, where the acquired benefits associated with local engagement and participation, actually improve health and life expectancy (Putnam, 1995).

Urban spaces designated as 'meeting places' are important to build ties and promote reciprocal trust, solidarity, and civic participation e.g. club membership was associated with increased wellbeing for older people (Jones et al., 2020). These spaces hold intrinsic value for young people too, providing them with a sense of wellbeing and belonging (Reynolds, 2013). Residents suggested that social networks and friendship circles increased where there were purposeful attempts, such as bringing groups of people together for social activities, increasing social connectedness among groups (Social Marketing Gateway, 2018).

Orientation to the Common Good

This aspect of social wellbeing was the least investigated and there is less direct evidence that shared decision making and orientation to better outcomes for all at a local or community level may be a helpful balance to economic factors (Boyce, 2022). A common good could be said to be 'better health' and where individual social capital is greatest it is positively associated with better health (Saville, 2021). This social return on investment in community is specifically linked to a study about not belonging where others do and investigates the impact of social interactions across communities on health and mental wellbeing in Wales. It demonstrates both a positive relationship and mental health outcomes in more cohesive communities but also identifies the risk for marginalised people and sub-groups who are segregated from cohesive communities (Saville, 2021).

Where better health is an accepted 'good', there is a suggestion that social wellbeing outcome tracking can lead to improvements in participants' outcomes and experience of projects and services, and the suggestion here is that it promotes open communication and dialogue with practitioners (Harris 2022). The continuous assessment of individual wellbeing and QoL is both advantageous to a service and to individuals who reflect on their own perceptions of how support is delivered for them.

Risks to social wellbeing

It is perhaps important to make the association between poor physical health and social wellbeing (Fone et al., 2017). Wellbeing decreases with age and an increase in age-related problems with physical health. Such physical health concerns were the greatest risk to wellbeing (Jones et al., 2020). Lower physical health-related quality of life is associated with ageing, living in an urban area and being retired (Williams et al., 2020).

Different aspects of the neighbourhood social environment have been linked with mental ill health; however, the mechanisms underlying these associations remain poorly understood because of the number and complexity of the components involved (McElroy et al., 2019). This highlights the risks of looking at geographical health inequalities only in the aggregate and not at local experience (Saville et al., 2020), as social wellbeing can be impacted at a household level as well as at community level.

For example, areas with high belonging and apparent cohesion may hide pockets of individuals or small groups that experience alienation or isolation, for example migrant families or older white households within multi-cultural communities. Where an area is dominated by a particular social group, the health outcomes of the minority may be adversely affected: "where those who do not belong to that group would be keenly aware of the fact" (Saville et al., 2020).

Risks associated with social wellbeing in low deprivation areas include anxieties and 'irritations', such as gossip among neighbours, that exist and can surface in communities creating 'paranoia' (McElroy et al., 2020). This phenomenon can create some of the worst outcomes for small and segregated groups who may be unable to overcome the alienation and segregation they experience. Areas of the highest aggregate social

capital and least deprived rural areas can hide very poor social wellbeing outcomes for a minority group (Saville et al., 2020).

Social wellbeing is affected by deprivation through higher area-level inequalities such as poor access to housing and jobs with a living wage, as well as pronounced crime, drug culture, and illicit sex work, all of which keep the wider community divided (Mintchev et al., 2017). Drunken/rowdy behaviour is particularly influential within neighbourhoods having a negative effect on social cohesion and mental wellbeing (Williams et al., 2020). An inclusive community must address the deprivation and inequality at the heart of these issues because economic inactivity and unemployment are risk factors for higher mental health concerns and reduced social wellbeing at individual and community level (Fone et al., 2017). This can be problematic for several reasons including short term funding for services such as 'Community Connectors' (Giebel et al., 2022) who enable access to social assets and facilities.

Protective Factors

There are several important factors in relation to population health and communities insofar as they suggest that wellbeing is connected to health. The evidence suggests that social wellbeing is derived from physical health and quality of life. These two factors are significantly associated with greater duration of education, being in employment, education or training compared to not working, and living in larger households (Williams et al., 2022). Wellbeing is also associated with reduced reliance on prescription drugs and GP visits along with increases in activity and physical activity (Social Marketing Gateway 2018).

Some evidence suggests that the power of community to support wellbeing can centre around three important protective factors for community resilience that lead to increased social capital: a) talking about mental wellbeing, b) supporting community hubs, and c) developing strong, collaborative community and voluntary sectors (Mind, 2021). A deliberate and proactive attention to wellbeing as an objective for health services is now addressed in the work of social prescription and via community connectors (Giebel et al., 2022), in which the pragmatic focus on community engagement is specifically linked to a person's wellbeing.

There is evidence that higher mental health scores are recorded where people felt there was a willingness of people to help each other in an area and where there was a sense of control over the area (McGowen et al., 2022). For example, older people's perceived sense of safety in their neighbourhood is linked to higher reported wellbeing (Jones et al., 2020) while policies aimed at reducing disruptive behaviour could have a positive affect on community and social wellbeing (McElroy et al., 2020).

One example of a statistically significant increase in wellbeing score for local communities in Scotland was based on a new-found confidence, motivation, pride and sense of self-worth and a 'can do' attitude and preparedness to be pro-active and do things they would not have done before (Social Marketing Gateway, 2018). By engaging in more social activities, people feel more connected with their communities, and more positive about their lives and report improved levels of aspects of wellbeing (Giebel et al., 2022).

Improvements such as socialisation and support at a neighbourhood level have the potential to have a positive impact on social cohesion but also offer a potential mechanism to navigate adverse effects of neighbourhood deprivation (Fone et al., 2014). For example, in London, residents suggested that coping with a deprived and hostile environment is balanced with the positive aspects of life on an inner-city estate that include involvement in projects, self-help groups, tenants' groups as well as courses and toy libraries (Mintchev et al., 2017). Improvements in the economic circumstances of local populations, and investments in resources in local areas such as housing, will minimise perceptions of competition for resources and improve community relations (Lymperopoulou, 2019).

Intersectional Factors

At a local level, ethnic difference is not a barrier to social wellbeing and cohesion (Mintchev et al., 2017) and this contrasts with Putnam's earlier work suggesting that ethnic diversity reduces social capital (Putnam, 1995). In the long-term, increases in ethnic diversity are likely to promote contact, tolerance and understanding and improve social cohesion (Laurence and Heath, 2008 in Lymperopoulou, 2019). For example, neighbourhood ethnic diversity in London seems to be positively related to the perceived social cohesion of neighbourhood residents (Sturgis et al., 2014). Discourses about how cultural/ethnic/racial identity are promoted are important to address in relation to social wellbeing and multi-culturalism (Mintchev et al., 2017). Additionally, area classification indicates that areas with the lowest levels of social cohesion are those with below average levels of migration and population turnover (Lymperopoulou, 2019).

This finding is not explored in Atkinson et al.'s (2017) paper which seeks to create a conceptual framework for understanding community wellbeing (as opposed to social wellbeing). The work does not address multiculturalism as a social phenomenon and in a further study (Bagnall et al 2017) simply states that different conceptualisations of community wellbeing exist and share a common understanding of what makes a community a good place to live and thrive.

The age of individual residents is a factor in achieving social cohesion. For younger people, this is because the cultural and social conditions existing within urban spaces play an important part in shaping identities, attitudes and expectations (Sturgis et al., 2014). For young ethnically diverse groups, the 'local culture' plays a significant, positive role in shaping their aspirations and attitudes towards social wellbeing (Reynolds, 2013).

However, the positive effect of diversity on social cohesion for young people dissipates in older age groups (Sturgis et al., 2014). This may be due to a decline in physical health and less access to the neighbourhood comprising multiple ethnic groups, or the perception, or actual presence, of 'incivilities' (Jones et al., 2020). In many cases older people are more ethnically segregated within neighbourhoods and this is associated with lower levels of perceived social cohesion (Sturgis et al., 2014) and therefore wellbeing.

2.4 Conclusions on social wellbeing

Strengths and limitations of the evidence

- Social wellbeing is commonly defined as mental wellbeing and associated with more general mental health.
- Social cohesion and connectedness are concepts that are associated with improved social wellbeing.
- The study usefully highlights the relevant literature and approaches to building social wellbeing through local and community participation.
- The literature searches were geared to identify factors associated with more marginal groups whose wellbeing may be more at risk.
- Segregation of sub-groups and 'incivilities' can lead to reduced social connectedness wellbeing and this multicultural perspective is important for social wellbeing.
- The diversity of evidence makes a narrative review the most effective method of synthesis and meta-analysis of the quantitative studies has not been possible.

Summary

- The evidence suggests that social relations and wellbeing resulting from more cohesive communities requires sufficient facilitation through facilities and services, with a particular focus on those who may be minorities within otherwise cohesive communities.
- Social connectedness is achieved through meaningful participation in communities and would benefit from specific outcome measures to understand how this can be achieved and ensure the sustainability of community services and assets such as clubs and places to meet.
- Social cohesion can insulate people from poor mental wellbeing in more economically deprived areas, but negative experiences of crime, rowdy behaviours and 'paranoia' can reduce the positive effect of social connectedness.
- Older people experience lower social wellbeing due to physical disability and through marginalisation where the effect of social capital dissipates.



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3. Economic Wellbeing

Richard Crisp and Jamie Redman

3.1 Introduction

Carnegie UK define economic wellbeing as:



Everyone has a decent minimum living standard and can absorb financial shocks. This means financial security now and being able to maintain adequate income throughout their lifetime.

This definition explicitly focuses on material “living standards” and its emphasis on a “decent minimum” aligns with commonly used frameworks such as the Joseph Rowntree’s Minimum Income Standards (Davis et al., 2022) which define the living standards that society as whole agrees everyone should have. Consumption is clearly at the heart of the definition. It also incorporates a notion of economic wellbeing as being resilient to “financial shocks”, ensuring “financial security” in both the present and the future. It does not mention wealth explicitly but the ability to weather “financial shocks” could implicitly incorporate wealth given its potential value in ‘smoothing’ household incomes (see below). However, this perhaps omits other dimensions of wealth such as the way that it can confer wellbeing as a form of asset-based welfare, including across generations (e.g., through inheritance) or through its impacts on status and identity. Conversely, a lack of access to forms of wealth can maintain or exacerbate inequalities across groups or areas.

Paid work is an important source of income for many but is not mentioned explicitly. While the essential role of earnings in underpinning living standards could be inferred, the potential for non-income-related aspects of work to impact on wellbeing is not captured in the current definition. Carnegie UK clearly recognise the importance of this relationship given their prior work on job quality and wellbeing (Carnegie UK, nd). Another aspect of paid work is the way in which community-level processes (e.g., in improvements or declines in labour market conditions) can potentially impact community wellbeing through, for example, impacts on social relations, community resilience and sense of belonging or solidarity. Some of these aspects are explored further in the literature reviewed below.

Wider understandings of economic wellbeing

It is well understood that **economic circumstances shape wellbeing**, both in terms of **material living standards** and experiences of **paid and unpaid work**.

Material living standards

The report by the *Commission on the Measurement of Economic Performance and Social Progress* (CMEPSP, 2009) - also known as the Stiglitz-Sen-Fitoussi commission - identified **material living standards (income, consumption and wealth)** as one of the 10 dimensions of wellbeing. It notes the importance of measuring material living standards at the household level, including distributions across households to 'get beneath' average living standards. It also recognises the need to measure wealth alongside income and consumption to understand the sustainability of living standards at the expense of future wellbeing (a household may increase wellbeing through using up current wealth to finance consumption). This notion of the sustainability of stocks of wealth can also be applied nationally in thinking about how nations maintain or expend stocks of physical, natural, human and social capital over time.

Later work by the OECD (2013) to define **economic wellbeing** (which they use interchangeably with material living standards) distinguishes between three component parts:

- **Income** as the flow of economic resources to individuals and households which includes wages or salaries from employment and resources such as pensions, property and social transfers (i.e., welfare benefits).
- **Wealth** as a 'stock' of accumulated assets at a given point in time including the value (minus any debt or liabilities) of property, pensions and financial along with physical assets such as private vehicles and household goods. Wealth can be used to compensate for fluctuations in income and 'smooth' consumption over time. One implication is that households that are "asset rich and income poor" can be expected to have a better standard of living than might be indicated by income alone.
- **Consumption** of goods and services **that can satisfy a household's needs and wants**. Consumption rather than income is sometimes considered a better proxy for living standards than income as it fluctuates less and evidence suggests stronger relationships between consumption and subjective wellbeing than income.

The OECD (2013) – in line with Sen – note the importance of individual '**capabilities**' to transform resources into functioning. Disabled people may need more income, for example, to achieve the same amount of mobility as a non-disabled person (e.g., because of the need for wheelchairs or to pay for taxis).

Income clearly matters for wellbeing and there is good evidence that in any given context richer people are happier than poorer people (Layard and De Neve, 2023). Some research suggests that wealth is even more strongly and positively correlated with individual wellbeing than income (ONS, 2015). However, greater national income over time does not cause greater national happiness although this varies by country (Layard and De Neve, 2023). On the contrary, as Wilkinson and Pickett (2010) highlight, aggregate mental and physical wellbeing has shown consistent declines across many of the wealthiest and most technologically advanced nations. For these authors, this is the great paradox of our present time:



at the pinnacle of human material and technical achievement, we find ourselves anxiety ridden, prone to depression, worried about how others see us, unsure of our friendships, driven to consume and with little or no community life. Lacking the relaxed social contact and emotional satisfaction we all need, we seek comfort in over-eating, obsessive shopping and spending, or become prey to excessive alcohol, psychoactive medicines and illegal drugs ... economic growth, for so long the great engine of progress, has, in the rich countries, largely finished its work.

(Wilkinson and Pickett, 2010: 3-5)

Paid work

Paid work shapes economic wellbeing as a source of income (see above) but the importance of employment for wellbeing beyond income has long been recognised, particularly through research on unemployment and its psychosocial impacts. The work of Marie Jahoda (1933/72) in identifying the depression-era impacts of large-scale job loss for individuals, households and communities was later codified into a set of 'latent functions' of work. Whilst acknowledging that money is an important 'manifest function' (Jahoda, 1982:39) of work, she also contended that employment provided 'latent functions' which were essential in ensuring wellbeing. The loss of work therefore denied access to these latent functions and is subsequently experienced as:

a de-structuring of time; a decrease in social contact; the lack of participation in activity for collective purposes; the absence of an acceptable status and its consequences for personal identity; and, finally, the absence of regular activity



(Jahoda, 1982:39)

This has led to recognition that the unemployed are generally "*significantly and substantially less satisfied with their lives than the employed*" (Layard and de Neve, 2023: 176) and that the psychosocial effects of unemployment on wellbeing are greater than the effect of lost income (ibid).

Another implication is that unemployment can have 'spillover effects' beyond the unemployed worker such as reduced wellbeing for partners and children and – at a wider level when unemployment is high – lower wellbeing for everyone, including those in work (ibid.; Conger et al., 1999). This has been well recognised in research traditions examining 'family stress'. This research shows how the effects of financial pressure (e.g., redundancy, job insecurity, low income) can trigger forms of emotional distress which cascade through parental relationships and parenting behaviours, with adverse wellbeing outcomes for children (Kiernan and Carmen-Huerta, 2008).

There is good evidence that 'high quality' work is good for wellbeing (What Works Centre for Wellbeing, 2017). High quality work depends on how secure it is; social connections at work; the ability to use and develop skill; clear responsibilities; and opportunities to have a say in a supportive workplace (ibid). However, the notion that paid work is unequivocally good for wellbeing has come under challenge and scrutiny. Wadell

and Burton's (2006) review of work and wellbeing concluded that there is a strong evidence base to show that work is generally good for physical and mental health and wellbeing and that worklessness is associated with poorer physical and mental health and wellbeing. However, they cautioned that **beneficial health effects depend on the nature and quality of work**. The 2020 Marmot Review noted that the rise of new types of poor quality work puts health equity at risk and can be a cause of work-related stress, depression and anxiety (Marmot et al. 2020). One implication is that the relationship between employment status and wellbeing can no longer be considered a simple dichotomy between paid work being 'good' and unemployment being 'bad'.

One aspect of work and wellbeing that is gaining increasing attention is **the relationship between worker wellbeing and employee- and firm-level performance** (e.g., Bryson et al., 2014) given intense policy focus by the UK government on the potential role of productivity in supporting 'levelling up' and reducing regional inequalities (DLUHC, 2022). The relationship between wellbeing and performance has been explored extensively with most studies supporting the notion that subjective wellbeing (e.g., measured by job satisfaction) can enhance individual and organisational performance through a range of mechanisms, including: better health, greater self-regulation, more motivation, positive relationships, lower absenteeism, lower turnover and greater ability to attract talent at the firm level (Bryson et al., 2014; Layard, and De Neve; 2023). Further analysis on the relationship between productivity and wellbeing is presented in Section 4 below.

3.2 Methods, search results and screening

This scoping review was based on a four-phase methodological approach:

- developing robust search terms
- identifying high quality research articles to review
- extracting relevant data from documents
- synthesising relevant data into a final review using appropriate techniques (e.g., thematic analysis)

The scoping review has been co-produced with Carnegie UK, who have provided input at multiple phases so as to refine the search strategy and identify key priorities for a full scoping review. This was done to ensure efficiency and expediency, and to ensure that this research was explicitly tailored towards enhancing Carnegie UK's present knowledge on 'economic wellbeing'.



Searches

Preliminary rapid evidence search

A two-stage process was undertaken with Carnegie UK to identify key themes to include in the full evidence search. First, a **preliminary rapid evidence search** was undertaken to explore the breadth and nature of existing literature on economic wellbeing using the IDOX repository and selective searches using Google Scholar and academic databases including Scopus. Initial test searches around 'economic wellbeing' and 'financial wellbeing' returned results around a number of themes which broadly coalesced around 'paid and unpaid work' and 'material living standards':

Paid and unpaid work

- relationship between **employment status** (e.g., being in employment, unemployed or economically inactive) and wellbeing.
- **Job loss** and its impacts on wellbeing (including job loss during the pandemic).
- Experiences of **employment activation ('back to work') programmes** on the wellbeing of the unemployed.
- Experiences of work (including the components of 'good work') and worker wellbeing.
- Working in the **digital platform or 'gig' economy** and impacts on mental health, life satisfaction, loneliness and precarity.
- **Homeworking** and impacts on subjective wellbeing.
- Relationships between worker wellbeing (including financial wellbeing) and firm-level performance (productivity).
- Effectiveness of **occupational health** support in SMEs.
- The impacts of the COVID-19 impacts on **carers' mental wellbeing**.

Material living standards

- Relationships between **wealth, income and well-being**.
- The impact of **external economic shocks** (e.g., the 2008 financial crisis and austerity policies) on wellbeing.
- **The impacts of food poverty** and insecurity on wellbeing.
- **Debt** and impacts on wellbeing.
- The relationship between **poverty, poor housing and poor health**.

Second, a **scoping review workshop** was held with Carnegie UK to consider the results of preliminary searches and agree searches for the full evidence search. It was decided to exclude sub-themes which were well covered in existing literature. This included the relationship between employment status or job quality and wellbeing (Bangham, 2019); and the impacts of low income and particular forms of poverty (e.g., food poverty) on wellbeing (see, for example, <https://changingrealities.org/>). It was also agreed to exclude material relating to COVID-19 due to the time-specific and unique nature of experiences during the pandemic. There was very limited material on unpaid work apart from specific studies of the impacts of COVID-19 on carers, so it was agreed to exclude this theme.

Full evidence search

The final themes selected for the full evidence search comprised:

Paid work:

- Relationships between employee wellbeing **and worker, firm-level or regional productivity**; particularly with reference to the **gig economy, flexible working** (control over time, location of work and how work is combined with unpaid activities), **the division of labour at home** and any participatory inequalities that may be prevalent in these different types of working.

Material living standards:

- Relationships between **wellbeing and income and, especially, wealth**, with specific interest in the connection between wealth and future generations (e.g., housing as a form of inheritance and/or bequests).
- The impacts of **economic decline or shocks** on economic wellbeing.

It was agreed that core terms ('economic', 'financial' and 'wellbeing') would be used in conjunction with a narrower set of search terms to sharpen focus around Carnegie UK's core interests. Specifically, these terms were: 'gig economy', 'flexible working', 'working from home', 'work-life balance', 'divisions of labour', 'wealth', 'inheritance', 'housing', 'pensions', 'investments', 'shock', 'recession', 'austerity', 'financial crisis', and 'cost of living'. In addition to these terms, a set of terminologies centred on social justice issues were also included in additional searches, in order to probe for inequalities around issues relating to (1) wellbeing and wealth/income, and (2) wellbeing, flexible work and productivity. These included: 'poverty', 'race', 'gender', 'ethnicity', 'disability', 'disadvantaged', 'minority' and 'inequality'.

Beyond the preliminary phase, searches were divided in to four core phases. This entailed separate searches around 'wellbeing and flexible forms of work', 'wellbeing and productivity', 'wellbeing, wealth and income', and 'wellbeing and shocks'. Each search phase comprised two separate searches using Scopus in the first instance, followed by use of Google Scholar.

The searches returned 39,020 results, including duplicates. This included two additional searches in Google Scholar which included key search terms included in the main body of the text (as well in the title) and each yielded over 17,000 results. This was considered appropriate to expand our literature search and test whether our initial limiters were generating optimal results. A summary of results and key themes is in Table 1 below. Full results are in tables appended at the end of this report.

Table 1: Summary of results from Scopus and Google Scholar searches

Search term	Number of results			
	Scopus	Google Scholar	Potentially relevant (Scopus)	Potentially relevant (additional papers from Google Scholar)
'economic' and 'wellbeing' 'gig' and 'economy'	1	1	1	0
'wellbeing', 'gig' and 'economy'	5	5	2	0
'financial' and 'wellbeing', 'gig' and 'economy'	1	0	1	0
'wellbeing', 'gig' and 'economy' or 'flexible working'	53	1	0	1
'wellbeing', 'gig' and 'economy' or 'flexible working' or 'homeworking'	57	15	1	1
'wellbeing', 'gig' and 'economy' or 'flexible working' or 'working from home'	245	0	6	0
'wellbeing', 'gig' and 'economy' or 'flexible working' or 'working from home' or 'work-life balance'	280	67	1	1
'wellbeing' and 'gig' 'economy' or 'flexible working' or 'working from home' or 'work-life balance' or 'divisions of labour'	285	0	0	0
'wellbeing' and 'gig' 'economy' or 'flexible working' or 'working from home' or 'work-life balance' or 'divisions of labour' And 'race' or 'gender' or 'ethnicity' or 'disability' or 'minority' or 'disadvantaged' or 'poverty' or 'inequality'	46	17400	3	3

36 Understanding the SEED Domains

Financial wellbeing and race' or 'gender' or 'ethnicity' or 'disability' or 'minority' or 'disadvantaged' or 'poverty' or 'inequality'	155	26	3	1
Wellbeing and productivity	230	162	7	3
worker wellbeing or employee wellbeing and performance	64	93	2	0
Wellbeing and performance	606	514	2	4
Wellbeing and Wealth	158	64	10	2
Wellbeing and Wealth and Housing	10	215	2	3
Wellbeing and pensions	25	14	3	0
Wellbeing and Investments	256	11	1	0
Wellbeing, wealth and investments	25	0	1	0
Wellbeing and inheritance	40	1	0	0
Wellbeing, housing and poverty	56	3	5	0
Wellbeing and shock	72	1	1	0
Wellbeing and recession	43	19	4	3
Wellbeing and austerity	71	18	7	2
Wellbeing and financial crisis	47	26	1	0
Wellbeing and cost of living	158	3	0	0

In addition, two searches were run on the IDOX database, which covers 'grey' literature (such as policy and evaluation reports, government and think tank documents) as well as some academic journals. They covered articles and documents from the UK published in the last ten years. For the most part these are not peer-reviewed studies. These searches aimed to identify key reports to ensure evidence from field studies and local strategies were also included. A total of one additional article was selected.

Screening

A title and abstract screening of the initial results was then undertaken, examining for relevance in terms of location (UK focus) and broad thematic focus (on the relationship between economic conditions and wellbeing). A longlist of 105 journal articles, reports and book chapters were selected from this exercise and then the full text was examined by the research team. This entailed applying a more specific set of inclusion and exclusion criteria, which were as follows:

Inclusion

- empirical and/or conceptual focus on wellbeing, flexible work and productivity
- empirical and/or conceptual focus on wellbeing, wealth and income
- empirical and/or conceptual focus on inequalities around participation in flexible forms of working, or stake in ownership of wealth (e.g., housing)
- UK focus
- published within the last ten years

Exclusion

- specific focus on COVID-19 or older people (above State Pension Age) (subject area not of direct interest to Carnegie UK)
- too narrow or niche in focus (e.g., sector specific)
- narrow focus on policy evaluation
- irrelevant focus on methodological issues

Selection

Following final screening, 21 papers were selected for the data extraction phase of identifying key findings and conceptual developments. On this further, more detailed reading, another five were ruled out as being of limited relevance. Of the remaining 16, 15 were journal articles with one report. These coalesced around two main themes: (1) the relationship between wellbeing and work; (2) the relationship between wellbeing and living standards. Within these broad themes, several sub-themes were identified: (1.1) gig economy and flexible working; (1.2) worker wellbeing and labour productivity; (2.1) housing, wealth and wellbeing; (2.2) recession, labour market change and wellbeing.

The overwhelming majority (14) were empirical articles, with only two articles comprising any conceptual insights relevant to Carnegie UK's conceptualisation of 'economic wellbeing'. Of the two conceptual papers, one comprised conceptual material that

was considered of direct relevance to Carnegie UK's conceptualisation of economic wellbeing. One paper comprised conceptual material that was considered of peripheral importance. Deeper exploration of these (main and sub) themes and relevant concepts is presented in the following section.

Table 2 below shows the definitions of wellbeing drawn upon in this report. Most of the papers explicitly used a concept of wellbeing, of which most tended to rely on subjective measures of wellbeing.

Table 2 Definitions or concepts of wellbeing

Author(s)	Title	How is wellbeing defined (e.g. subjective, objective, quality of life etc)
Akhter et al. (2018)	Inequalities in mental health and well-being in a time of austerity: Follow-up findings from the Stockton-on-Tees cohort study.	Considers subjective wellbeing and mental health using the Warwick Edinburgh Mental Well Being Scale (WEMWBS).
Berger et al. (2019)	Uber happy? Work and well-being in the 'Gig Economy'.	Looks at subjective wellbeing in terms of life satisfaction and also considers anxiety.
Chung et al. (2020)	Flexible Working, Work–Life Balance, and Gender Equality: Introduction.	Wellbeing is not referred to explicitly but captured implicitly through discussion of a better work–life balance and family functioning.
Curl and Kearns (2015)	Financial difficulty and mental wellbeing in an age of austerity: The experience in deprived communities.	Explores subjective wellbeing in terms of prevalence of mental health issues.
Curtis et al. (2019)	Changing labour market conditions during the 'great recession' and mental health in Scotland 2007–2011: An example using the Scottish longitudinal study and data for local areas in Scotland.	Subjective wellbeing measured in terms of self-reported mental health.
Daly et al. (2015)	A social rank explanation of how money influences health.	Uses subjective and objective measures of health including allostatic load and obesity, the presence of long-standing illness, and ratings of health, physical functioning, role limitations, and pain.
Isham et al. (2021)	Worker wellbeing and productivity in advanced economies: Re-examining the link.	Wide ranging evidence review which explores both evaluative and hedonic wellbeing (reflecting the evidence reviewed) as well as broader impacts on mental and physical health.
James (2022)	Women in the gig economy: feminising digital labour.	No explicit definition of wellbeing; aspects of wellbeing can be inferred from discussion of adverse effects of white collar gig work on health and safety.

Munford et al. (2020)	Is owning your home good for your health? Evidence from exogenous variations in subsidies in England.	Uses subjective measures of self-reported physical and psychological health.
Patsios and Pomati (2018)	The distribution and dynamics of economic and social wellbeing in the UK: An analysis of the recession using multidimensional indicators of living standards.	Uses a combination of 11 subjective and objective measures of living standards (e.g. income, financial situation and mental health).
Ratcliffe (2015)	Wealth effects, local area attributes, and economic prospects: On the relationship between house prices and mental wellbeing.	Explores impacts of house price using a composite measure of subjective mental wellbeing from the General Health Questionnaire in the British Household Panel Survey.
Rolfe et al. (2020)	Housing as a social determinant of health and wellbeing: developing an empirically-informed realist theoretical framework.	The authors note that defining wellbeing is complex and suggest they use it to mean a combination of positive psychological state and a functional balance between individual resources and challenges. Analysis uses a combination of subjective health and wellbeing measures including the World Health Organization's 5-point wellbeing scale.
Stepanek et al. (2019)	Individual, workplace, and combined effects modelling of employee productivity loss.	Discusses worker wellbeing in broad terms but does not define it explicitly; seems to operationalise wellbeing as mental and physical health as well as characteristics of a job.
Vanhoutte et al. (2017)	Duration, timing and order: How housing histories relate to later life wellbeing.	Subjective wellbeing; describes wellbeing as multidimensional in nature and comprising three different, empirically identifiable, conceptions: affective, cognitive and eudemonic, respectively reflecting happiness, satisfaction and self-actualisation.
Wang et al. (2022)	National survey of mental health and life satisfaction of gig workers: the role of loneliness and financial precarity.	Considers mental health and life satisfaction and subjective perceptions of financial precarity (and loneliness).



3.3 Findings

This section provides a thematic synthesis of the relevant literature identified in this scoping review. It also provides an outline of the key definitions and concepts that relate to Carnegie UK's present conceptualisation of economic wellbeing and the broader SEED domain framework.

Summary of themes

In our searches around 'economic wellbeing', findings clustered according to two dominant themes, each comprising several sub-themes. One cluster of papers broadly converged around the relationship between wellbeing and work; and another around the relationship between wellbeing and living standards.

Wellbeing and work

- Several articles on the '**gig economy and flexible working**' consider the relative wellbeing (dis)benefits compared with other economic statuses and the **trade-offs between autonomy/flexibility and low wages**. In terms of issues around access, one study reports wellbeing benefits for male migrant Uber drivers due to greater autonomy and flexibility than other forms of work (Berger et al., 2019), but other studies note **negative gendered impacts for women working flexibly or in the gig economy** (James, 2022).
- Two articles on **worker wellbeing and labour productivity** explore the factors (including mental and physical health) that shape productivity. While supporting the notion that **higher worker wellbeing can increase productivity**, evidence suggests **that typically deployed measures to increase productivity in the workplace can have negative wellbeing impacts**.

Wellbeing and living standards

- Studies on **the relationship between recession, labour market change and wellbeing** largely confirm the negative relationship between economic downturns and wellbeing, especially for particular household types (e.g., families in receipt of housing benefit with dependent children) or those living in low income areas. These papers highlight the spatially uneven impacts of economic change on wellbeing.
- The link between **housing, wealth and wellbeing** is explored in several studies which consider, among other things, how trajectories of housing tenure over the life course can shape wellbeing; the wellbeing impacts of rising house prices; and the relative importance of housing as a determinant of subjective wellbeing through changing housing and labour market conditions. These studies outline the various ways through which housing serves as a mechanism for to positive and/or negative wellbeing outcomes. This includes the wellbeing effects of housing in its relationship with wealth, time, area and status.

These themes are discussed in depth below. Wider relevant literature is brought in on occasion to develop or contextualise some of the core 'screened' literature on 'economic wellbeing'.

Flexible work, productivity and wellbeing

The 'gig economy' – labour markets characterised by short-term contracts and independent freelance work – is at the forefront of current debates about the nature and organisation of work in the first decades of the twenty-first century (Woodcock and Graham, 2019). It is perhaps unsurprising, therefore, that the findings from our initial searches for current literature around the relationship between flexible forms of work and economic wellbeing were dominated by research on the 'gig economy'.

One study of (predominantly male) Uber drivers in London found that gig work can produce some significant positive wellbeing effects. Berger et al. (2019) specifically found Uber drivers reported higher levels of life satisfaction (evaluative wellbeing) compared to other employed and self-employed London workers. For some (Labour Force Survey) respondents, this may have been primarily due to improvements in their financial position. Around half of respondents suggested that their income had increased after becoming an Uber driver, possibly reflecting that many drivers had transitioned out of low-paying blue collar or service jobs. However, working at Uber did not necessarily lift respondents out of 'low-pay' (two-thirds of median hourly or weekly wages). The median self-reported gross weekly income (i.e., including income streams beyond piece rates paid by Uber) among drivers was £460, which was considerably lower than the £596 median gross weekly earnings among London workers during the period of study (2018). Increases in income were partly offset by new costs incurred as a result of independent contractor status. In addition to Uber's service fee, drivers also had to cover the costs of operating and maintaining their vehicles, such as petrol, repairs, fines, and cleaning. As Bloodworth (2018: 253-255) found in his journalistic ethnography of driving for Uber in London in 2016, these less visible costs could quite easily bring drivers below the low-pay threshold.

Berger et al. (2019) suggest that higher levels of life satisfaction may have less to do with the financial rewards and more to do with the conditions of gig work. The majority of respondents indicated that autonomy, scheduling flexibility, and improvements in work-life balance were the reasons they joined Uber. They also suggested that they would require significant earnings increases to forego greater 'decision latitude' (see Green, 2006) over the duration and intensity of their work, to which they had grown accustomed. Compared to workers on 'typical' employment contracts (see Bosch, 2004), Uber drivers have control over how they organise their workflow. This can provide clear benefits in terms of allowing workers to balance work with commitments and responsibilities in their private lives (Bloodworth, 2018). This was reflected in Berger et al.'s (2019) findings; over a third of drivers used enhanced decision latitude to adjust their working hours by at least 50% on a weekly basis. This perhaps indicates a trade-off between monetary and non-monetary aspects of wellbeing in the gig economy. Higher life satisfaction may also reflect relative improvements in job quality compared with previous low paid and less autonomous forms of employment.

Despite reporting higher levels of job satisfaction, Uber Drivers also reported higher levels of stress and anxiety (Berger et al., 2019). This draws parallels with Wang et al.'s (2022) cross-sectional survey of 17,722 respondents across a breadth of occupational statuses, including employed, unemployed and 429 gig workers across a wider range of industries. Wang et al. (2022) found gig workers reported mental health and life satisfaction worse than those employed full time and part time on typical employment contracts, but better than unemployed people. Better mental health and life satisfaction compared to unemployed respondents was related to lower levels of financial precarity, while worse mental health and life satisfaction than employees in typical employment contracts was found to be a result of higher levels of loneliness and financial precarity.

Financial precarity is partly due to the 'piece rate' nature of much work in the gig economy, which is typically used by employers to improve productivity by finely calibrating labour costs with customer demand. For workers, piece rate pay means that hourly, weekly and monthly earnings depend on how many 'gigs' the individual completes. It also means that income derived from such earnings tends to be indeterminate and largely dependent on the balance of labour supply and customer demand, which can have detrimental impacts on workers' wellbeing. For example, Cant (2020: 51) notes how piece-rate pay for Deliveroo workers (pay per delivery) forced them 'to either go faster or earn less'.

Piece rates led to several negative behavioural changes among workers, described by Cant (2020: 53) as '**self-intensification**'. Workers would wring every possible delivery they could during peak times to compensate for low demand periods where earnings fell; become more competitive among one another for orders; and also seek to expedite the delivery process to improve earning capacity, finding ways to speed up by eliminating their own idle or non-productive time (e.g., memorising faster travel routes, swiftest methods of parking and securing bikes/mopeds). The latter meant that workers would take more risks when driving or riding, taking chances on every shift and becoming desensitised to dangers of traffic, pedestrians and weather conditions. These uncertainties and dangers were amplified by independent contractor status, which meant that drivers/riders absorbed all risk, while owners were absolved of any legal responsibility to pay a minimum wage or cover the costs of injury, sickness or holiday leave. These are just some of the ways in which the financial precarity of gig work can intensify work activities, with a range of stress-inducing consequences for worker wellbeing.

From the perspective of employers (or, in the case detailed above, digital app owners), the intensification of work produced by piece-rates can increase productivity. This highlights a tension with current government agendas around raising productivity as a way of improving wages and reducing inequalities across regions (HM Government, 2022). Yet as touched on, the gains made by increasing labour productivity in this way do not always translate into enhanced wellbeing of workers.

This is an issue taken up by Isham et al. (2021) in their evidence review on the relationship between labour productivity and worker wellbeing. The authors note there is evidence to show that wellbeing is positively linked to higher levels of labour productivity. However they found that that employers' efforts to increase productivity can also impact negatively on wellbeing. The authors note how work intensification is only one of many methods

employers typically use to improve labour productivity to the detriment of workers. Employers also utilise methods of increasing the quantity and/or quality of workflows through improvements in the delivery of work tasks to workers. For example, ICTs (e.g., digital apps, computers, smartphones) are typically used to facilitate faster delivery of work tasks to workers by enabling them to work in multiple spaces beyond the workplace while allowing managers and customers to make demands on workers during 'idle' or leisure time.

ICTs also tend to make work much more visible – e.g., by creating 'electronic panopticons' that facilitate superior managerial superintendence – enabling managers to contain and compress idle time more effectively by detecting and correcting low work effort in sectors such as call centres (Woodcock, 2017). Isham et al (2021) note how the use of technologies to improve the flow and surveillance of work can disrupt boundaries between work and leisure in ways which encourage poor health behaviours such as burnout and isolation.

The implementation of flexible production systems (e.g., Total Quality Management, Just-In-Time methods) is another method of improving labour productivity. This allows employers to precisely calibrate labour supplies with variations in consumer demand, reducing non-productive labour time by re-adjusting staff levels and/or roles to the quantity and type of labour (skills, competences etc.) required. Yet, as Isham et al., (2021) suggest, this can heighten job demands and financial precarity for workers, with a range of adverse consequences for wellbeing.

Isham et al., (2021) draw some insightful conclusions on the relationship between productivity increases and workers wellbeing, two of which warrant closer consideration. First, the authors conclude that **while these different methods of raising labour productivity may yield benefits to employers in the short-term, they are likely to be counter-productive to productivity over the longer-term.** This is primarily because, as identified by Stepanek et al. (2019), mental and physical health, in addition to job characteristics and support from organisations are found to be the most important direct or indirect determinants of employees' productivity. Specifically, the critical role of mental and physical health as the foundational factors in mediating other determinants of productivity led them to conclude that equally or even more important than addressing health and wellbeing directly is addressing the source of such problems through supportive management, promoting a more inclusive work atmosphere, and improving job satisfaction in a healthy work environment (Stepanek et al., 2019).

These findings indicate a clear tension in the organisation of contemporary work, showing that the methods typically deployed to increase labour productivity tend to erode the health and wellbeing-related foundations upon which productivity is dependent. Certainly, this is a central challenge confronting policy-makers at present as they face unprecedented levels of economic inactivity; some of which has been produced by nature and organisation of contemporary forms of work and their attendant adverse effects on wellbeing. For example, one recent evaluation of an 'early intervention' for workers who take medical leave showed that experiences of work were often a further contributing factor to poor health in terms of: overwork, bullying or harassment, difficult or dangerous working conditions, job insecurity, lack of support from managers, and perceived employer discrimination on the basis of ill health (Batty et al., 2022).

Second, Isham et al., (2022) also point to the continued relevance of the wider concept of '**alienation**' and the importance of understanding it as a lived phenomenon for making sense of how productivity increases pursued in the ways abovementioned can adversely affect worker wellbeing. The theory of alienation suggests that adverse wellbeing effects of productivity increases are ultimately traceable to the power asymmetries that typically characterise the relations of production between workers and employers. Unlike employers who typically have a major stake in designing and directing the labour process, alienated workers have little or no choice over whether to work, over how hard or how long to work for, or over when or how they go about producing goods and services (Marx, 1977). It is this powerlessness to influence the labour process that leaves workers vulnerable to the dictates of employers, who are in turn bound by various market pressures (e.g., 'the coercive laws of competition') to continuously (re)organise the labour process in ways which can (indirectly or otherwise) have adverse consequences for worker wellbeing.

If we accept this core premise of 'alienation' theory - that workers' wellbeing is ultimately dependent on the acquisition of meaningful influence over the organisation of the labour process - then Isham et al.'s (2022) conclusions may have important implications for Carnegie UK's present purposes. This specifically suggests that achieving democratic wellbeing for all, including workplace democracy, could be a prerequisite to any pursuit of economic wellbeing.

The papers discussed in this section so far focus on the wellbeing of flexible workers in general. However, our scoping review also located a small cluster of reports and journal articles focused on how particular groups within the workforce are more likely to experience negative wellbeing impacts of flexible work. Evans et al., (2023) note how ethnic minority groups, and particularly non-native speakers, are more likely to experience the adverse wellbeing effects (mental and physical hitherto described). Discrimination played a key role in preventing those from ethnic minority groups finding good quality work. They also report a greater tendency for those from ethnic minority groups to work in insecure forms of employment (e.g. gig economy) or risk exploitation by working in the grey economy (e.g., working at car washes). Although, it is worth acknowledging the methodological limitations to their approach – the authors draw conclusions from the perceptions of support workers rather than the specific group(s) under investigation.

Meanwhile, James' (2022) study of women who work in the gig economy highlights the gendered dynamics of labouring on specific digital labour platforms (white-collar gig work from home). It suggests that women face wellbeing issues including working long hours while pregnant; working right up to and shortly after giving birth; and inappropriate comments or requests from almost exclusively male clients. It challenges the notion that gig working is 'gender inclusive' by better enabling women to balance work and care responsibilities.

Relatedly, a final suite of papers in a special issue summarised by Chung and Lippe (2020) looks at the impacts of flexible working on the gender division of labour and workers' work–life balance. It concludes that flexible working can be useful in enabling a better work–life balance and family functioning but often in gendered ways. Women were

more likely than men to carry out more domestic responsibilities whilst working flexibly, with correspondingly negative consequences for career outcomes over the longer-term. Together, these articles indicate that economic wellbeing may not be solely determined by pay or power as hitherto described. Rather, both access to and the distribution of economic wellbeing may also be shaped by longer-standing (gendered and racialised) structures of privilege and oppression.

Wealth, income and wellbeing

The preceding section focused on the relationship between work and wellbeing. However, our findings suggest that this is only one of two key dimensions to economic wellbeing. Economic wellbeing is not only determined by working conditions; it is also determined by relative and absolute standards of living. In this section, we analyse a larger volume of papers that all broadly focus on the relationship between living standards and wellbeing.

A note on wealth

Before reviewing the selected papers it is worth noting the ways in which wealth operates and accumulates, particularly in the form of housing, and its implications for inequalities and wellbeing. 'Wealth, in short, begets wealth' (Christophers, 2020: 367). The primary (though not exclusive) reason for this, is because those who have owned one or more properties for the last few decades have benefitted from a sustained period (approximately 40 years) where returns on capital assets (such as housing) have fractionally but consistently and cumulatively outpaced the annual rate of economic growth (Piketty, 2014). When this occurs, as it did until the latter part of the nineteenth century and has done in most recent decades (Piketty, 2014: 213; cf. Hills and Bastagli, 2013: 20-1), then the value of capital assets and the rates at which rents (e.g. from private rented housing) can be extracted from them grow faster than incomes derived from labour. These fractional annual increases over a sustained period of approximately 50 years have seen house prices more than quadruple in real terms (Blakeley, 2023).

The key effect is to widen inequalities between those who own no assets and rely solely on income from work or benefits, and those who own some (or many) assets. It does this by dramatically altering their capacities and capabilities to consume. As Bastagli and Hills (2013) found in their analysis of household panel survey data between 1995 and 2005 housing wealth at the median more than trebled in absolute terms, while these absolute increases were equivalent to three times annual median gross full-time earnings (Bastagli and Hills, 2013: 67). This has not only been of great benefit to owner-occupiers but also to the small and larger landlords who own and secure rental income on one or more properties (Christophers, 2020: 367).

However, rising housing wealth may not necessarily translate into improved living standards. In the short to medium-term homeowners may experience rising values but will not benefit from this increase in wealth unless they release equity from their home or move to a less expensive property. In the longer-term, though, this wealth may be released across generations through parental bequests or gift giving. Since 1977,

following five decades of declining significance, the ratio of bequests to national income has once again begun to rise (Atkinson, 2018). The total value of inheritance doubled between 1984 and 2005 (at 2005 prices), while the value of housing wealth within this total trebled (Karagiannaki and Hills 2013: 94). As might be expected, both the likelihood of receiving bequests and the amounts received increases the further up inheritors are located on the wealth and income distributions, with those at the bottom most likely to inherit very little or nothing at all (Karagianniaki, and Hills, 2013: 102-105).

More recent research by the Institute for Fiscal Studies (Johnson, 2023) shows that rising asset prices are accelerating the gap between those with and without wealth; this has reversed the rise in home ownership, leading to a profound reversal of between-cohort differences in living standards and wealth as younger cohorts become less able to afford to buy own homes.

While wealth is transmitted intergenerationally through family patronage, it can also be converted into forms of objective and subjective wellbeing even before inheritance. Those supported by parental wealth (in all forms, not just housing) in the early years of their life, particularly those at the middle of the distribution supported by housing wealth, are more likely to go on to reach degree-level educational attainment and subsequently earn more from labour income (McKnight and Karagiannaki, 2013).

Asset ownership in later life is also associated with improved physical and psychological wellbeing (McKnight and Karagiannaki, 2013). There are several reasons for this. Wealth can enable parents to relocate and reside in the catchment areas of better performing state schools where house prices tend to be higher (Gibbons and Machin, 2003) or pay for private education and other costs associated with passing through higher education. It can allow individuals and households to relocate to areas with more employment opportunities or provide more time and resources to search for better jobs (McKnight and Karagiannaki, 2013). Finally, the sense of security holding assets affords during hard times can offer some protection from stress and anxiety. These relationships mean that, as wealth inequalities grow, wealth has played a critical role in the widening of wellbeing outcomes in terms of physical and mental health between those located in the lower regions of the wealth distribution, and those in the middle and upper regions (Mcknight and Kariagniakki, 2013).



Key findings

Several papers considered the relationships between housing, wealth and wellbeing. As noted above, this theme was of interest to Carnegie in the context of rising inequalities of wealth and home ownership but a less well-established evidence base on the implications for wellbeing compared with the literature on how low incomes, poverty and area-based deprivation shapes wellbeing. **The general consensus is that homeownership or higher house prices, even if not a homeowner, is associated with better wellbeing outcomes.** However, between the articles, there is wide variation in discussions of the key casual pathways – or effects - through which housing (directly or indirectly) affects positive wellbeing outcomes.

Munford et al.'s (2020) study suggests that home ownership improves physical and psychological health. The authors specifically found that a ten per cent increase in home ownership rates is associated with a 2 percent reduction in the number of people reporting a longstanding health condition. Although, Munford et al.'s (2020) conclusions are arguably less clear. They suggest that home ownership in itself is not necessarily generative of health benefits but is a signifier of improved health as homeowners are more likely to be employed, have shorter commutes, and, by extension, have more resources available for leisure activities. Their findings may therefore reflect a broader wealth or income effect, as opposed to a narrower home-ownership effect, on positive health outcomes.

This chimes with another article located in this scoping review, which suggests that wealth in itself is not generative of 'mental wellbeing', but it is a passport to spaces where goods and services that are generative of mental wellbeing are more abundant. Ratcliffe (2015) specifically argues that the relationship between homeownership and 'mental wellbeing' is less a 'pure wealth effect' than an area effect. The author examines large variations in local house prices to investigate whether house prices correlate with mental wellbeing, finding positive correlation between house prices and the mental wellbeing of both homeowners and non-homeowners. As similar correlations are found for both groups (housing wealth holders and non-wealth holders), Ratcliffe (2015) argues that this finding is inconsistent with a pure wealth effect. The author instead suggests that this is indicative of better amenities, better satisfaction with the neighbourhood, and greater opportunities for social engagement, as local house prices provide a reflection of available amenities and economic opportunities in the area. However, Ratcliffe's findings could also be indicative of an income effect. Irrespective of homeownership, non-homeowners would likely still have to be in receipt of a household income sufficient to rent properties in more desirable areas.

In documenting how the duration, timing and order of housing circumstances over the life course can also shape wellbeing, Vanhoutte et al's (2017) study emphasises a temporal dimension to the relationship between housing and wellbeing. For example, a longer duration of renting is related to worse affective and eudemonic wellbeing in later life while the opposite is true of a longer period of homeownership. Moreover, 'downward' housing trajectories (e.g., moving from privately owned to rented housing in later life) are associated with significantly lower later life wellbeing. This latter finding may show how economic wellbeing can be intimately connected to expectations and standards developed in previous phases of the life course.

In their analyses of quantitative data from a mixed methods, longitudinal study of tenants from three housing organisations in the first year of tenancy, Rolfe et al., (2019) point to several different ways in which housing can directly or indirectly affect wellbeing outcomes. First, the authors outline a direct housing effect, pointing to clear evidence of the adverse physical and mental health consequences of low quality housing features. This includes toxins within the home, damp and mould, cold indoor temperatures, overcrowding and safety issues. Although, the authors note how perceptions of some aspects of housing quality are likely to be influenced by expectations and standards borne from previous housing experiences. Second, Rolfe et al. (2019) highlight positive tenancy experience, shaped at least in part by relationships with the housing provider, and how this is strongly correlated with positive wellbeing outcomes. Finally, the authors point to the importance of an area effect, suggesting that elements of neighbourhood quality and social support in the local area may have impacts on health and wellbeing, linking to some of the evidence presented above on the significance of area effects.

While these articles emphasise the importance of either wealth, area effects, time, housing conditions or a combination of these factors, a small cluster of articles found in this scoping review point to the **importance of status** as a central mechanism through which housing and other forms of wealth affects wellbeing outcomes. Daly et al.'s (2015) study emphasises the significance of social position rather than material conditions in explaining the impact of money on human health by showing how the ranked position of income/wealth (based on geographical location, educational attainment, and gender) but not absolute income/wealth predicted all health outcomes examined including: objective measures of allostatic load and obesity, the presence of long-standing illness, and ratings of health, physical functioning, role limitations, and pain. The authors specifically argue that, "for subordinate individuals, the stress of low rank may progressively impair the capacity of multiple physiological systems to dynamically adjust to environmental pressures resulting in a failure to maintain healthy functioning" (Daly et al., 2015: 227-8). However, the authors fail to provide any empirical nuance as to the reasons why low rank may induce stress.

This shortcoming may be partly addressed in McKee et al.'s (2020) qualitative research with young renters in the private rented sector. The authors found that renting itself was a source of stress "due to the symbolic message it transmitted to others about social success, position and standing" (McKee et al., 2020: 1479). This suggests renting can create shame and stigma experienced as a sense of personal failure to enjoy enough economic success to become a homeowner with all the benefits of status this confers. Or, as Foye et al., (2018: 1294) put it, relative housing circumstances matters as it is a key signifier of status:



Relative consumption matters because it signals the consumer's relative wealth. Relative wealth, in turn, matters because it indicates one's power over others ... and, in many cases, one's natural ability ...It is therefore a key determinant of social status. Being able to purchase one's own home requires a greater level of wealth than renting in the private sector, which in turn requires a greater level of wealth than renting social housing. Thus, becoming a homeowner signals an increase in relative wealth.

Of course, in their respective explorations of the relationship between housing, wealth and wellbeing, these articles do not align perfectly in terms of their empirical foci. Nevertheless, in their varying discussions of the ways in which housing can (directly or indirectly) affect wellbeing outcomes (e.g., through wealth, area, temporal and status effects), these papers provide some valuable insights that can be used to develop Carnegie UK's present conceptualisation of economic wellbeing. This will be discussed in greater detail in the final section.

Economic change, austerity and wellbeing

The literature discussed thus far has shown how greater consumption capabilities, typically through housing, has positive implications for wellbeing. Another, broadly complementary cluster of articles found in this review examine the wellbeing effects of periods where consumption capabilities are significantly curtailed. Specifically, this literature explores the effects of economic change, recession and austerity on the wellbeing of different social groups. These papers all share an interest in exploring how collective forms of place-based forms of economic wellbeing (i.e. labour market conditions) shape objective and subjective wellbeing at the household level.

Four articles largely confirm a negative relationship between recent economic downturn, the Conservative-Coalition government's austerity programme, and wellbeing. Curtis et al.'s (2019) article on changing labour market conditions during the 'great recession' and mental health in Scotland found that changes in local economic conditions may influence people's health. Resident living in areas where employment declined markedly were more likely to report mental illness than those living in areas that had experienced relatively high and stable levels of employment, even after controlling for employment status.

Curl and Kearns' (2015) longitudinal study of deprived areas examining changes in financial difficulties and mental health found that, during the recession, high and increasing rates of affordability issues were found in respect of the costs of fuel, council tax and clothes. This was particularly pronounced among households with disabled adults, under-occupiers and families with part-time workers. Moreover, increased affordability difficulties were consistently associated with a decline in mental health, at all time periods and for all items of expenditure.

Similarly, Patsios and Pomati's (2018) study of living standards over the course of the recession for families at different stages in life confirms that certain family life-course types, e.g. single adults of working age and single parents, had been affected most by the economic downturn in terms of wellbeing. One important methodological point is that the same family life-course type differences and trends across the recessionary period are found in both objective and subjective indicators of resources (e.g. income, financial situation and mental health). The authors suggest that satisfaction with income, satisfaction with financial situation, and satisfaction with life can be used as valid and reliable subjective indicators of living standards and how they change over time.

Akhter et al.'s (2018) study of local inequalities in mental health and wellbeing in the local authority of Stockton-on-Tees in the North East of England during austerity found that a significant gap in mental health between the two most and least deprived neighbourhoods remained constant over the 18-month study period. They conclude that the lack of change may be due to the relatively short follow-up period or the fact that the cohort sample were older than the general population and pensioners in the UK have largely been protected from austerity. This lack of change could also be an issue of measurement. In their analysis of recession on the wellbeing of the UK working age population using six waves of longitudinal data from the Understanding Society and the British Household Panel Survey, Bayliss et al. (2017) found that people's overall subjective evaluation of their wellbeing remained relatively stable, on average, throughout the economic crisis. However, respondents using the positive psychological health measure - a subjective assessment based on six questions which are constant between people and over time (and was therefore considered as being less prone to adaptation) - reported significant mental health declines (Bayliss et al., 2017). The authors argue that this provides support for the argument that subjective wellbeing measures, while useful in many respects, should not be exclusively relied upon to research changes in wellbeing in response to events such as a recession.

Cumulatively, these articles suggest that it is the wellbeing of the most income deprived groups that are disproportionately affected by recession and corresponding retrenchment programmes. This is not simply because, as Curtis et al. (2019) suggest, those who live in more deprived areas bear the brunt of job losses during recessionary phases. Rather, it is also because the poorest have less disposable income to absorb the inflationary pressures (rising cost of living) that can ensue during particular types of economic crises (e.g., stagflation). Irrespective of crisis type, their tendencies are both to push the poorest individuals and households further away from median levels of consumption and deeper into poverty (Edmiston, 2022).

The qualitative effects of deepening poverty on wellbeing are now well explored (see <https://changingrealities.org/> and <https://www.deep-poverty.co.uk/>). Many adapt to their worsening conditions by lowering personal expectations and consuming with more thrift. This generally entails lowering or altogether ceasing consumption of essential and non-essential goods (televisions, showers, cookers, heating, lighting etc.), and shopping for deals or cheapest versions of essential items (Edmiston et al., 2022). This also fuels demand for charitable food and warmth aid, while forcing low-income households to accrue larger debts - all with deleterious consequences for wellbeing.

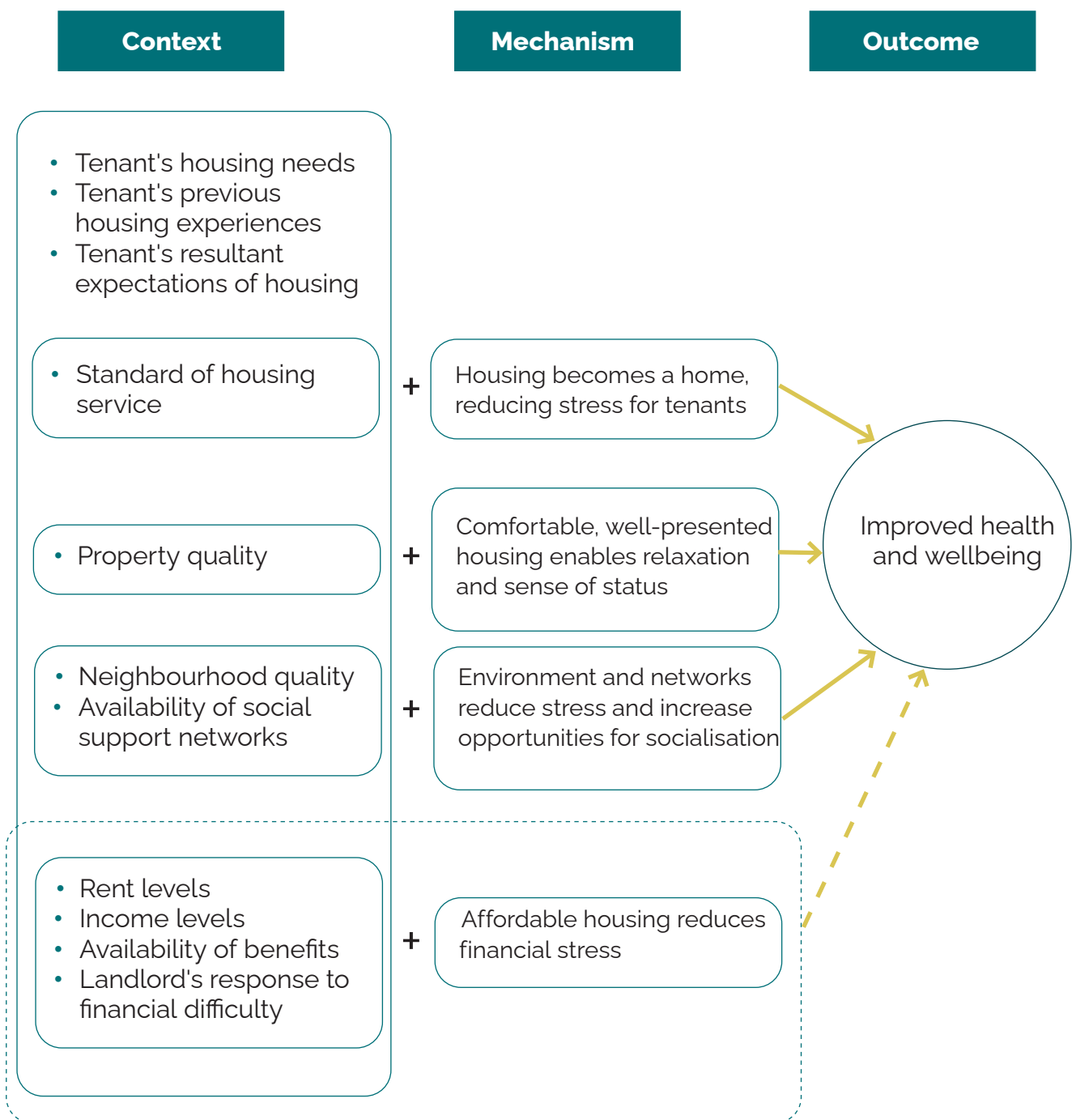
Definitions and conceptualisations

As will be explored in the next section, there are several ways in which the literature and themes identified in this scoping review can enhance Carnegie UK's present conceptualisation of 'economic wellbeing'. Nevertheless, one key limitation of the present review was the relatively limited amount of theoretical research seeking to directly explore and develop present understandings of the relationship(s) between wellbeing, work and living standards. Where research did operationalise a specific conceptualisation of wellbeing, this was most often taken uncritically from well-established definitions for

empirical research purposes (e.g., to examine the impacts of recession and retrenchment on 'subjective wellbeing').

There were a small number of exceptions. Rolfe et al (2019) advance a conceptual framework, visualised below, which examines the pathways between housing experience and health and wellbeing:

Figure 4: Causal Pathways Connecting housing and health and wellbeing



For present purposes, the benefits of Rolfe et al.'s (2019) framework is that it recognises that wellbeing is not simply shaped by income or wealth in its monetary or commodity forms, but that wellbeing can be shaped by temporal and symbolic factors. Specifically, the authors recognise how satisfaction with housing is likely to be affected by past housing experience. They are also likely to be affected by symbolic factors, such as the sense of status that housing can provide. The primary limitation for present purposes, of course, is that this framework retains a narrow focus on the relationship between housing and wellbeing.

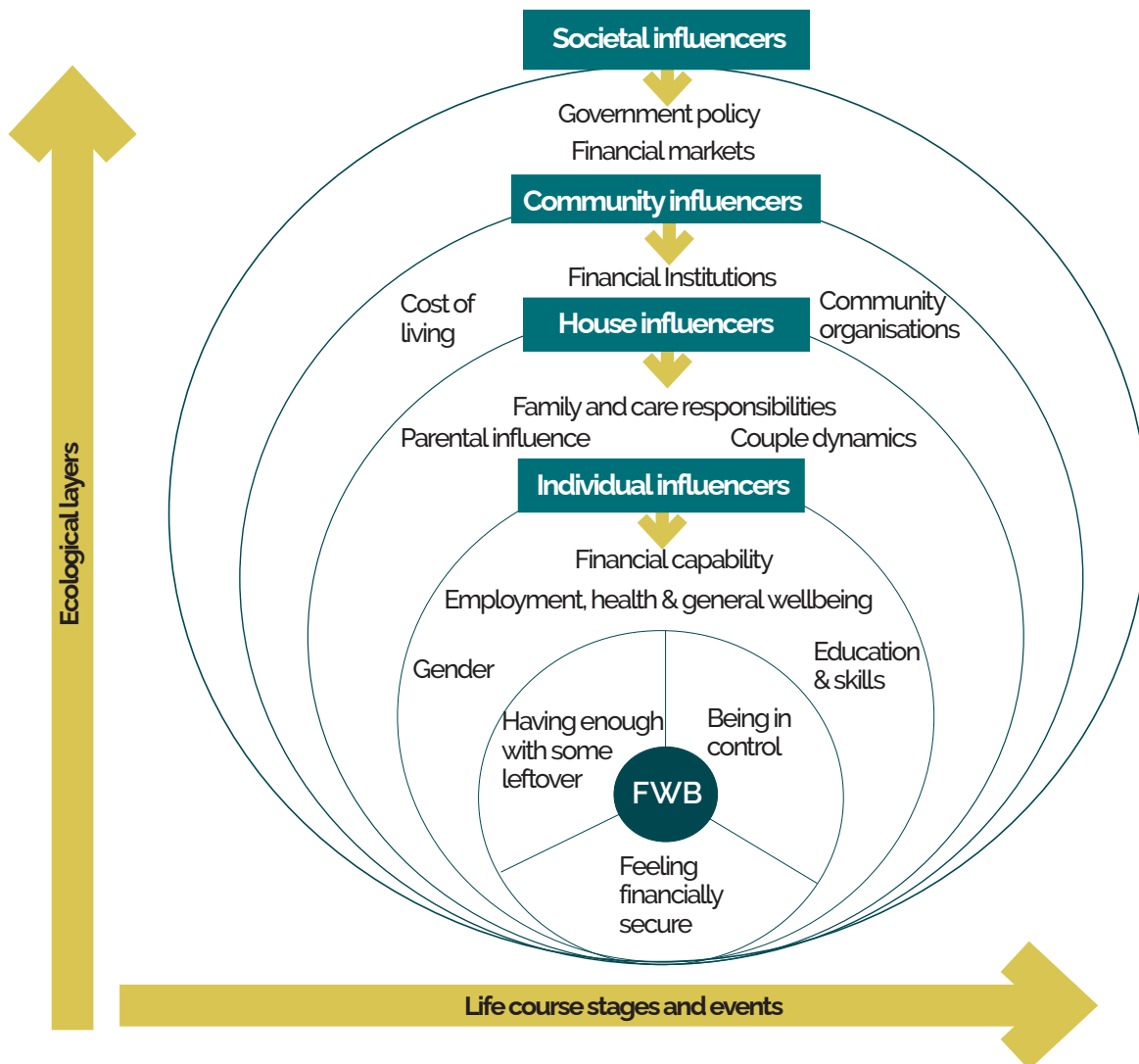
In addition to Rolfe et al.'s (2019) conceptual framework, Isham et al.'s (2021) brief discussion of the concept of 'alienation' may also warrant further consideration. At the crux of 'alienation' as a concept is the idea that wellbeing in work is ultimately dependent on whether workers have the power to determine the conditions of their work. The evidence located in this scoping review suggests that adverse wellbeing outcomes – particularly in the gig economy – are largely determined by a lack of control over the intensity and duration of work, as well as the rate of pay (in the case of piece work). The extent to which power(lessness) influences wellbeing in the workplace, an undoubted prerequisite to economic wellbeing in general, is currently absent from Carnegie UK's present definition of economic wellbeing. This warrants closer consideration in the following reflections section.

Within our earlier searches, we identified one other article that provided a relevant and insightful conceptualisation of 'financial wellbeing'. This article was not included in our final selection as it was derived from research in Australia and therefore not UK-focused. However, given its relevance and the lack of other relevant conceptual material found in our searches, we thought it useful to briefly outline here.

Salignac et al.'s (2019) work on conceptualising financial wellbeing (FWB) is valuable precisely because it comprises multiple dimensions. Their model includes both objective (e.g., income, debt and savings) and subjective wellbeing dimensions (e.g., satisfaction with income, financial situation or living standards). They define FWB as having three elements: meeting expenses with some leftover, being in control, and feeling financially secure. The inclusion of employment, health and general wellbeing, albeit only as an 'individual influencer' provides flexibility to accommodate the non-material dimensions of work, even if not explicitly stated as such.

The authors critique much of the research on FWB as neglecting structural factors including global financial markets, the national economy, government policy, labour markets, social inequalities, community services, social relationships and family dynamics. They seek to remedy this through developing a model of financial wellbeing that emphasises the importance of understanding wellbeing in the context of the life-course and the interaction between personal, structural and institutional factors at the ecological levels of the individual, household, community and society as outlined in figure 5.

Figure 5: Conceptual Model of Financial Wellbeing



3.4 Conclusion on economic wellbeing

Enhancing Carnegie UK's definition of economic wellbeing



Everyone has a decent minimum living standard and can absorb financial shocks. This means financial security now and being able to maintain adequate income throughout their lifetime.

This definition has an explicit focus on material 'living standards' which implicitly incorporates wealth (stocks of assets) and income (flows of money) as central determinants of economic wellbeing. In addition, the notion of absorbing 'financial shocks' recognises the need for financial resilience to maintain decent living standards throughout the life-course.

The findings from this scoping review suggest that there are three potential areas where Carnegie UK might consider expanding their present conceptualisation of 'economic wellbeing', either in the core definition or supplementary explanation through recognising:

- **the importance of working conditions:** Paid work is an important source of income for many, but it is not mentioned explicitly. While the essential role of earnings in underpinning living standards is self-evident, the potential for non-income-related aspects of work to impact on wellbeing is not captured in the current conceptualisation, despite Carnegie UK's interest and engagement in debates around 'good work'. Our findings on the gig economy indicate that pay is not the only determinant of wellbeing in the workplace. Rather, power to influence the conditions under which work activity takes place – i.e. over when to work, how long to work, how hard to work and how to go about completing work tasks – is also essential for wellbeing. Taking this into consideration, Carnegie UK's conceptualisation could be extended to acknowledge that workplace conditions and the organisation of workplaces are essential features of economic wellbeing.
- **the significance of status:** A number of papers highlight the role of social status, derived from (lack of) assets or income, in generating positive and adverse wellbeing outcomes. Daly et al (2015) suggest that low social status is a predictor of lower levels of physical health. Similarly, McKee et al. (2020) found that renting was a source of stress due to how renting (as opposed to owner-occupier) status might be (negatively) perceived by others. The adverse effects of status inequalities that derive specifically from income, wealth and consumption patterns suggest the need for a conceptualisation of economic wellbeing which incorporates symbolic status differentials between social groups. It also suggests a need more broadly to reduce forms of stigma associated with status inequalities. For example, universalistic approaches to welfare benefits or wider access to good quality, affordable social housing can help to reduce stigma associated with individual or household receipt of state support.
- **the role of place in mediating the relationship between income and wealth.** Ratcliffe (2015) found that more prosperous neighbourhoods, where better goods and services are more readily available, are positively associated with better mental wellbeing. Meanwhile, Curtis et al. (2019) found that mental ill health was more prevalent in areas that had endured the most job losses. Both these papers suggest that wellbeing is not exclusively determined by the benefits derived from access to wealth or income alone. Rather, wellbeing is also connected to how wealth and income shapes the relative ability of individual and households (i.e. through residential location choices) to access unevenly distributed amenities and opportunities (e.g. 'good' schools, more job opportunities, lower crime or higher status neighbourhoods etc). One implication is that wellbeing impacts of low income and wealth can be compensated by the opportunities place affords. This is recognised in debates around 'foundational liveability' (Calafati et al., 2023) which suggest that the quality of different types of collective provision, services and infrastructures (e.g. social housing, transport, social care, parks and libraries) in places can mediate household income and wealth effects on wellbeing.

Limitations of the existing evidence base

The literature on economic wellbeing is extensive in parts (e.g. on the relationship between job quality and wellbeing) but there was a lack of conceptual papers to ground this review with notable exceptions described in Section 4.4. One potentially promising development is the forthcoming book on '**foundational liveability**' (Calafati et al., 2023) which looks, in part, at how wellbeing shaped by income and wealth can be mediated by place-based forms of infrastructure including 'grounded' infrastructure (e.g. public services and amenities such as housing and education), 'mobility' infrastructure (e.g. transport) and 'social' infrastructure. One implication is that the wellbeing benefits of 'collective' (i.e. state funded or provided) forms of consumption can mediate and even mitigate the adverse wellbeing impacts of lower private consumption capabilities and living standards.

One further shortcoming is the tendency to assess economic wellbeing using measures of individual subjective wellbeing (e.g. mental health or life satisfaction). The studies reviewed largely lacked analysis of how components and determinants of wider collective wellbeing (e.g. social cohesion, sense of belonging, collective identity, social capital) developed across space and time can mediate economic wellbeing. Evidently, this may be a limitation of the range of studies returned by searches around wellbeing rather than a gap in the evidence base per se.

Cross-cutting themes across domains

There are clear links between economic wellbeing and other domains of wellbeing in the SEED framework including:

- There is a potential tension between seeing housing as a form of economic wellbeing (wealth) and as form of social wellbeing (dwelling, security, health, belonging etc).
- Specific actions to boost productivity (and hence economic wellbeing) may have adverse impacts on foundations of social wellbeing such as mental and physical health.
- Income and wealth shape access and exposure to environmental wellbeing benefits and harms e.g. levels of road-traffic pollution through (lack of) residential location choices.
- Democratic wellbeing in the workplace i.e. meaningful influence over the organisation of work and the workplace may be a component of economic wellbeing secured through paid employment.

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4. Environmental Wellbeing

Julian Dobson and Jamie Redman

4.1 Introduction

Carnegie UK's current conceptualisation of wellbeing cuts across four outcome domains, referring to a set of conditions whereby all people are able 'to realise their human rights in pursuance of the social, economic, environmental and democratic outcomes that they seek'. While much empirical research is more narrowly focused on individual wellbeing (e.g., through analysis of life satisfaction scores, or indicators of mental and physical health), Carnegie's conceptualisation is also attentive to the collective, spatial and temporal dimensions of wellbeing. This definition specifically acknowledges how extant and intersecting social, economic, environmental and political inequalities can produce and reproduce differences in capabilities to realise wellbeing outcomes across different spatial scales and between diverse social groups. It also acknowledges how future wellbeing cannot be sacrificed to enhance the wellbeing of populations in the present (OECD, 2022).

These latter dimensions (collective, spatial and temporal) are particularly salient for understanding 'environmental wellbeing', or human wellbeing in relation to the natural and built environment. This concept not only refers to how a healthy planet and ecosystems can contribute to the wellbeing of individuals per se, but it crucially recognises how inequities in the distribution of natural resources, as well as inequities in access to life-enhancing ecosystem services, can lead to adverse wellbeing outcomes becoming concentrated within particular spaces and social groups. This concept also recognises that both the perpetration and receipt of environmental harms (e.g., pollution, fossil fuel extraction, waste production and management) are unequally distributed between social groups, and that securing future environmental wellbeing is contingent on minimising these harms to ensure that all populations are living within the planet's bio-capacities.

Search rationale and priority themes

Although Carnegie UK's current concept of environmental wellbeing could be of great use for future scholars seeking to examine relationships between the natural and built environment and wellbeing, a central challenge for the present review was to develop suitable methods of operationalising this concept in accordance with Carnegie UK's specified scoping review objectives. An initial literature search for 'environmental wellbeing' or 'environmental well-being' revealed that this is not a concept used within a coherent set of scholarly disciplines, fields, or subject areas. Consequently, it was agreed with partners at Carnegie UK to deploy 'environmental justice' and 'wellbeing' as proxy terms for 'environmental wellbeing'; the former being defined on two key premises, which are as follows:



Environmental justice's two basic premises are first, that everyone should have the right and be able to live in a healthy environment, with access to enough environmental resources for a healthy life, and second, that it is predominantly the poorest and least powerful people who are missing these conditions. Taking these two premises together suggests that a priority is to ensure that the adverse conditions faced by the least powerful people are tackled first. As well as implying environmental rights, it implies environmental responsibilities. These responsibilities are on this current generation to ensure a healthy environment exists for future generations, and on countries, organisations and individuals in this generation to ensure that development does not create environmental problems or distribute environmental resources in ways which damage other people's health.

(Stephens et al., 2001: 3)

To identify and extract a diverse and relevant set of literatures which retain focus on examining relationships between environmental conditions and the various individual, collective, spatial and temporal dimensions of human wellbeing, the focus on 'environmental justice' was agreed as the most effective approach. The literature extracted was found to converge around three main themes (some articles were relevant to more than one theme), as follows:

- **Quality of life and liveability** – 13 journal articles explored key natural and/or built environmental conditions and their propensity to benefit or harm the wellbeing of human beings and the natural environment.
- **Inequalities in the distribution of environmental benefits and harms;** 12 explored how these benefits and harms to wellbeing are distributed across people and places.
- **Pro and anti-environmental behaviours;** several journal articles and book chapters in this selection explored the production of environmental benefits and harms across different social groups.

The table below shows the main definitions of wellbeing drawn upon in this report. It should be noted that many of the papers considered did not define wellbeing at all, and several simply used a broad concept of subjective wellbeing. However, a relatively small number of papers did attempt to define wellbeing or its underpinning principles and we have drawn on their approaches in this report.



Table 3: Definitions or concepts of wellbeing that have informed this report

Author	Definition
Badland and Pearce (2019)	The concept of 'urban liveability' is used to explore natural and built environment 'exposures that can amplify or dampen opportunities for good health, wellbeing and civic participation'. The authors demonstrate how this concept can be used to inform urban planning agendas which yield benefits both to human wellbeing and to the urban environment.
Benton et al. (2021)	The authors use the 'five ways to wellbeing' developed by the New Economics Foundation: wellbeing is evidenced by examples of five types of behaviour (connecting; being active; taking notice; learning; giving).
Breslow et al. (2016)	'a state of being with others and the environment, which arises when human needs are met, when individuals and communities can act meaningfully to pursue their goals, and when individuals and communities enjoy a satisfactory quality of life'.
Mitchell et al (2015)	The authors use the concept of 'disease burden' to identify populations disproportionately affected by environmentally produced harms.
Mullins et al. (2019)	Wellbeing is not explicitly defined but the authors use 'natural capital' as a way of evaluating total stocks of natural resources, environmental assets and ecosystem services critical to human wellbeing.
Pasanen et al. (2019)	Wellbeing is defined in terms of self-reported general and mental health.

4.2 Methods, search results and screening

This scoping review was based on a four-phase methodological approach. This entailed (1) developing robust search terms; (2) identifying high quality research articles to review; (3) extracting relevant data from documents; and (4) synthesising relevant data into a final review using appropriate techniques (e.g., thematic analysis). As indicated above, this scoping review has been co-produced with colleagues at Carnegie UK, who have provided input at multiple points during our research to refine the search strategy and identify key priorities for a full scoping review. This was done to ensure efficiency and expediency, and to explicitly tailor the research to enhance Carnegie UK's knowledge on 'environmental wellbeing'.

Searches

Searches began with a preliminary rapid evidence search, to agree suitable search terms and limiters. An initial literature search for 'environmental wellbeing' or 'environmental well-being' revealed that this is not a concept used within a coherent set of scholarly disciplines, fields, or subject areas. Another preliminary rapid evidence search for 'ecosystem services' and 'wellbeing/well-being' revealed an extensive literature around the natural environment and green and blue spaces, but less on the impacts and distribution of environmental harms. Consequently, to ensure focus on the issues of greatest interest to Carnegie UK, it was agreed that 'environmental justice' (Stephens

et al., 2001) should be the primary focus of our exploration. Initial rapid searches on environmental justice returned a wider range of results, especially around issues of social equity and the unequal impacts of environmental harms.

Using 'environmental justice' as our agreed proxy term for Carnegie UK's definition of environmental wellbeing, we sharpened the search focus and conducted a primary search by supplementing 'environmental justice' with a set of environmental topics relevant to local quality of life. Specifically, these topics were pollution; nature and green and blue spaces; waste; air quality; community and neighbourhood; energy; contaminated land; traffic, roads or noise; litter or recycling; transport, active travel, walking and cycling, and decision-making (see tables A and B). We then conducted a secondary set of searches by coupling these specialist topics with the term 'wellbeing' (tables C and D). This was done to complement our primary search, ensuring that literature which fell outside the scope of 'environmental justice', but which nonetheless concerned the relationship between environmental conditions and wellbeing, did not fall outside of our purview. In addition to deploying these key search terms, searches were limited to UK-based papers published in the last ten years.

Using these key terms and limiters, both primary and secondary searches comprised an initial search using the Scopus database (tables A and C) supplemented with a series of adjacent searches (using the same terms and limiters) via Google Scholar (tables B and D). The searches returned 2,976 results, including duplicates. A summary of results and key themes is in Table 1 below. Full results are in tables A-D appended at the end of this document.

Table 4: Summary of results from Scopus and Google Scholar searches

Search term	Number of results			
	Scopus	Google Scholar	Potentially relevant (Scopus)	Potentially relevant (additional papers from Google Scholar)
'Environmental justice' AND wellbeing (Limiters: UK, 2013-2023)	68	3	11	0
'Environmental justice' AND pollution OR industry	200	188	21	1
'Environmental justice' AND nature OR 'green space' OR 'green and blue space/s'	233	379	6	2
'Environmental justice' AND waste	69	90	2	1
'Environmental justice' AND air quality	45	54	1	0

'Environmental justice' AND community OR neighbourhood'	386	355	20	0
'Environmental justice' AND energy	166	109	6	2
'Environmental justice' AND 'contaminated land'	0	3	0	0
'Environmental justice' AND traffic OR roads OR noise'	0	26	0	1
'Environmental justice' AND litter OR recycling'	11	5	0	0
'Environmental justice' AND transport OR 'active travel' OR walking OR cycling;	0	24	0	0
'Environmental justice' AND decision making	142	36	3	0
Wellbeing AND access to walking (limits: UK only, 2013-2023)	25	180	8	2
Wellbeing AND access to cycling	2	11	0	1
Wellbeing AND access to active travel	1	0	0	0
Wellbeing AND access to recycling	2	0	2	0
Wellbeing AND waste recycling	6	0	0	0
Wellbeing AND litter	8	0	4	0
Wellbeing AND noise	118	37	8	2



In addition, two searches were run on the IDOX database, which covers 'grey' literature (such as policy and evaluation reports, government and think tank documents) as well as some academic journals. They covered articles and documents from the UK published in the last ten years. For the most part these are not peer-reviewed studies. These searches aimed to identify key reports to ensure evidence from field studies and local strategies were also included.

The first search considered the relationship between environmental wellbeing and:

- a) Factors that are foundational for human existence: nature, land, water and air (e.g. how important is water/air/access to nature for wellbeing?).
- b) Factors relating to human activity and their consequences/contexts: Energy and emissions, waste, access to green and blue space, quality of local environment.

A total of 30 results were returned. These covered:

- The health and wellbeing benefits of nature and green and blue spaces (including articles on 'natural capital' (17).
- Impacts of building design on workers' health and wellbeing (3).
- Access to safe water or bathing water (2).
- Impacts of roads and poor air quality (2).
- Impacts of energy efficiency and decarbonisation measures and challenges of fuel poverty (3).
- Carnegie UK's work on indicators of wellbeing.
- A statistical analysis of the impacts of place on wellbeing.
- Whether hard surfaces in the built environment are as good for wellbeing as natural spaces.

The second set of searches coupled the terms 'environmental justice' and 'wellbeing'.

This search returned 17 documents, covering the following topics:

- Greener and more equitable economies (3).
- Air pollution and impacts of road traffic (2).
- Resilience to the impacts of climate change (2).
- The challenges of a 'just transition' and energy policy (2).

- Unequal access to health and wellbeing benefits of nature and green and blue spaces.
- Benefits of local food growing initiatives.
- Impacts of shale gas fracking.
- Public participation in climate governance.
- Planning reform.
- Other themes not relevant to this review, including discussion of the judicial system (3).

Where peer-reviewed or official documents found through the IDOX searches significantly supplement the academic studies, they are included in the main text below and referenced at the end of this paper.

Screening

A title and abstract screening of the initial 2,796 results was then undertaken, examining for relevance in terms of location (UK focus) and broad thematic focus (on the relationship between environmental conditions and wellbeing). A shortlist of 102 papers were selected from this exercise and reviewed by a senior researcher. This entailed applying a more specific set of inclusion and exclusion criteria, as follows:

Inclusion

- empirical and/or conceptual focus on distribution of environmental resources between social groups.
- empirical and/or conceptual focus on production and distribution of environmental harms between social groups.
- empirical and/or conceptual focus on access to green or blue spaces and their wellbeing effects.
- UK focus.
- Published within the last ten year.

Exclusion

- Specific focus on fracking or Covid-19 (subject areas not of direct interest to Carnegie UK).
- Too narrow or niche in focus (e.g., environmental justice concerns related to gender inequalities in fisheries governance).
- Narrow focus on policy evaluation.
- Irrelevant focus on methodological issues

Selection

Following inspection, 31 papers were selected for the following data extraction phase of key findings and conceptual developments. On this further, more detailed reading, another six were ruled out as being of limited relevance. The remaining 25 selected journal articles and book chapters fell within three main (sub)themes: quality of life and liveability, unequal distributions of environmental benefits and risks, pro- and anti-environmental behaviours. Several papers had some relevance across two or all themes. Most papers were empirical in focus (15) with seven conceptual papers. In addition, we considered one systematic review (on noise pollution); one evaluation of an intervention (on canal-side improvements); and one introduction to an edited book, providing an overview of the field. Six additional papers discovered through the IDOX searches are also briefly considered, as summarised by the IDOX service. These papers are identified as IDOX search results in footnotes. Of the seven conceptual papers, three comprised conceptual material that was considered directly relevant to Carnegie UK's conceptualisation of environmental wellbeing. Another four papers comprised conceptual material that was considered of peripheral importance. Deeper exploration of these themes and relevant concepts is where attention now turns.



4.3 Findings

This section provides a thematic synthesis of the relevant literature identified in this scoping review. It also provides an outline of the key definitions and concepts that were found to possess clear synergies with Carnegie UK's present conceptualisation of environmental wellbeing and the broader SEED domain framework.

Synthesis

The literature identified in this scoping review was allocated to three distinctive themes, namely:

- **Quality of life and liveability:** literature exploring the key natural and/or built environmental conditions known to benefit or harm the wellbeing of human beings and the natural environment
- **Inequalities in the distribution of environmental benefits and harms:** literature exploring how these benefits and harms to wellbeing are distributed across people and places
- **Pro and anti-environmental behaviours:** literature exploring the production of environmental benefits and harms across different social groups.

Quality of life and liveability

Most journal articles and book chapters within this literature review focused, explicitly or implicitly, to some degree on the ways in which green/blue space and aspects of the built environment may serve as a pathway to the enhancement or inhibition of both human wellbeing and the wellbeing of the natural environment.

Several journal articles focused on both the availability and/or wellbeing effects of rural and green space. MacKerron and Mouratto (in Maddison et al., 2020¹) notably investigated the relationship between momentary happiness and an individual's present external environment within the UK. The authors collected millions of self-report happiness scores from multiple thousands of participants registered via a digital smartphone app. Controlling for daylight, weather, companionship, activity, type of location, time, and day, they analysed response locations to relate land cover types to happiness. Participants were found to report higher happiness scores in any green or natural habitat type than in urban environments (MacKerron and Mouratto, 2020).

An exploratory paper by the Office for National Statistics (Oguz, 2014) examines the contributions of place characteristics to the level of personal wellbeing across different areas of the UK. It analyses data from the Annual Population Survey to consider: whether some parts of Great Britain are associated with higher personal wellbeing than others;

1 Because the full text of this volume is protected by a paywall, this summary is based on a precis within the introduction to the book.

whether some types of areas are associated with higher personal wellbeing than others; the extent to which the place where we live is associated with our personal wellbeing; and the extent to which the differences in average personal wellbeing between areas are driven by the characteristics of people who live in these areas compared with the other characteristics of the areas themselves. Using the survey data, it looks at the effects of various area characteristics, including average household income; deprivation; green space; rural/urban areas; and population density. The paper finds that areas or types of areas are associated with individual personal wellbeing outcomes, although they have much lower associations than individual characteristics. Of the individual characteristics, self-reported health was the most important factor, followed by employment situation and then relationship status.²

Benton et al., (2021) and Coventry et al.'s (2019) respective findings provide deeper insight into the reasons why green spaces can facilitate both increases in momentary happiness as well as more sustained positive wellbeing outcomes. Benton et al.'s (2021) case study analysis of a newly improved canal path found that it brought about increases in walking, vigorous physical activity (e.g., running) and social interaction among local populations. Relatedly, Coventry et al.'s (2019) qualitative exploration of conservation volunteers found that walking and other forms of physical activity in local green spaces improved 'hedonic wellbeing' (present time pleasurable experiences and improvements in mood). Participants specifically experienced 'improvements in mood through the restorative experience of being in nature' (see also Colley et al., 2022). Conservation activity was also argued to reduce stress and improve mood. The authors specifically argue that the goal-directed, repetitive, ordered yet creative nature of conservation work enabled 'an immersive "flow state" situated somewhere between skill and challenge':



flow state is akin to a mindful state. By cultivating a focus on the present, rather than ruminating on the past or worrying about the future, mindfulness states can enable people to more effectively cope with physical or mental stressors that can negatively affect wellbeing.

(Coventry et al., 2019: 12)

While the 'hedonic wellbeing' benefits of green spaces were regarded as important, according to the authors, the primary benefits accrued to volunteers were more indicative of a realised state of 'eudaimonic wellbeing' – that is, a more sustained form of wellbeing 'associated with self-actualisation and living a full and purposeful life'. Volunteers perceived citizen science and conservation as meaningful activities that 'yielded co-benefits for individual health and wellbeing and also for green spaces'. Meaning derived from these activities was primarily attributed to a feeling of shared learning and discovery among volunteers. Activities facilitated via local green space functioned to enhance social interaction, reduce isolation and generate a sense of belonging among individuals with shared aspirations to learn more about their local environment (Coventry et al., 2019).

Saliently, therefore, Coventry et al. (2019) show how positive wellbeing outcomes associated with green space are not exclusively produced by environmental conditions themselves. Rather, they also arise from the ways in which these conditions can facilitate activities that improve social interconnectedness and reduce isolation. A study of urban food growing initiatives and allotments in Plymouth (Miller, 2015) highlights the importance of purposeful activities, demonstrating contributions to human capital in terms of food security, nutrition, mental health, general wellbeing, and social capital. The study concludes that there appears to be growing evidence that both allotments and newer forms of urban food activities contribute to meeting national and city-level policy objectives, with the potential to enhance food justice and reduce inequalities.³

These findings are echoed in Breslow et al.'s (2016: 251) conceptual article, which emphasises the social dimensions of the relationship between nature, ecosystem services and human wellbeing; defining it specifically as 'a state of being with others and the environment, which arises when human needs are met, when individuals and communities can act meaningfully to pursue their goals, and when individuals and communities enjoy a satisfactory quality of life'. Together, reflections drawn from these studies reveal one way in which Carnegie UK might consider more closely the intersections of wellbeing across different SEED domains.

While green space can elicit a range of positive and pro-social wellbeing effects, of all the natural environments, our scoping review suggests that close proximity to natural blue space could provide even greater benefits to individual wellbeing. MacKerron and Mouratto's (2020) study on the relationship between momentary happiness and present environment found that coastal environments elicited the highest self-reported happiness scores. Vandergert et al. (2021) acknowledge the mental and physical health benefits of open-water bathing and swimming. Pasanen et al. (2019) explored relationships between coastal proximity (how close someone lives to the sea), freshwater presence, participation in indoor and outdoor physical activities (watersports, walking, running and cycling), and self-reported health and wellbeing. While closer proximity to coastal environments was associated with positive wellbeing outcomes, the authors could not attribute these outcomes to enhanced interaction in blue spaces. Pasanen (2019) specifically found that relatively few individuals in England participate in watersports and thus they cannot alone account for the positive population health associations attributed to coastal environments. Rather, the authors tentatively conclude that the health benefits of coastal living 'seem, at least in part, due to participation in land-based outdoor activities' (Pasanen et al., 2019: 1).

Environmentally mediated wellbeing outcomes are not the exclusive domain of natural green and/or blue spaces. Evidence from multiple articles suggest that built environments can play a significant role in both enhancing or inhibiting individual wellbeing. Badland and Pearce (2019) develop the concept of 'urban liveability' to consider the environmental benefits available within urban environments. The study utilises an environmental justice lens to identify whether improving the liveability of urban environments is a suitable method of reducing health inequalities. In addition to the benefits of green space above mentioned, three relevant themes are drawn out. First,

3 Summary provided by IDOX

enhanced wellbeing can be facilitated through improving access to high quality goods and services. Here, Badland and Pearce are attentive to the availability of affordable and high-quality foods, referring to literature which has demonstrated how easier access to a wider variety of affordable healthy foods is associated with better diets. Second, they emphasise the benefits of accessible and affordable transport that is regular and reliably available. Transport is indispensable in supporting wellbeing through access to employment, goods and services, and time for socialising. Better public transport also influences the economic capacity of urban areas through improved management of traffic congestion pathways. Nevertheless, the authors recognise that not all transport modes are equal in terms of producing positive health, environment, and social benefits. Consequently, third, they also point to the benefits of creating good pedestrian infrastructure comprising robust walkable and cyclable urban spaces. This has been found to encourage increased use of active and public transport modes for commuting to a range of destinations. Behavioural change in relation to commuting in turn generates improved wellbeing effects for both residents and their immediate environment through reduced reliance on fossil fuels, reductions in greenhouse gas emissions, encouraging more social interaction and more opportunities for physical activity (Badland and Pearce, 2019).

Holy-Hasted and Burchel (2022) examine whether 'hard-surfaced' public spaces in Greater London, such as civic spaces and market squares, can improve wellbeing, and if this relationship is different from green space. The study draws on green and hard space data for London to calculate the amount of hard-surfaced space per neighbourhood, and merges this with data on residents' wellbeing. While initially finding no direct association between hard space and wellbeing, and a significant positive correlation for green space, the study finds that when the interaction effects of the perception of neighbourhood safety and housing tenure were considered, hard-surface public space was positively associated with wellbeing in safe neighbourhoods, but negatively in unsafe areas (and especially for social housing residents).⁴

Badland and Pearce's advocacy for the improvement of pedestrian and travel infrastructure is partly supported by Clark et al.'s (2019) findings on the relationship between commuting and wellbeing. The authors found significant and consistent reductions in job satisfaction for every extra ten minutes commuters spent travelling to and from work. Longer commute times were additionally associated with increased strain on mental and physical health and a reduction in leisure time satisfaction. Although the authors did not find an association between longer duration commutes and lower life satisfaction, their findings provide some empirical support for Badland and Pearce's (2019) suggestion that improving the reliability, efficiency and expediency of travel infrastructure in urban environments can play a significant role in improving individual wellbeing.

While Badland and Pearce's (2019) predominant focus is on ways in which the built environment could be improved to enhance wellbeing, there is some recognition of conditions that serve to inhibit the wellbeing of urban inhabitants. For example, in their discussion of the availability and affordability of quality foods, they suggest that some disadvantaged urban environments are associated with higher fast food outlet availability

and consumption. This is linked to research which attributes at least 2.6 million deaths per year globally to insufficient fruit and vegetable intake.

This argument chimes with the empirical findings of several other articles and book chapters covered in this scoping review, which focus on the adverse wellbeing impacts of the built environment. Fujiwara et al.'s (2020) examination of the wellbeing and health impacts of sewage found that living in close proximity to odour-emitting sewage treatment facilities is negatively correlated with life satisfaction, concluding that sewage odour has a negative impact on subjective wellbeing.

Fujiwara and Lawton (2020), and Clark and Paunovic (2018) examine the pathways and mechanisms for the effects of environmental noise on wellbeing. Fujiwara and Lawton (2020) find that general noise pollution from road traffic, railways and airports is associated with lower levels of subjective wellbeing, although Clark and Paunovic's systematic review (2018) found mixed results, with only 9 out of 20 studies confirming associations between noise pollution from air, road or rail traffic and poorer mental health or quality of life. Clark and Paunovic (2018) explain that the adverse effects of noise pollution on wellbeing can occur as acute noise exposure excites the endocrine and automatic nervous systems, which can in turn lead to an increase in stress hormones such as catecholamines and cortisol. Chronic exposure may trigger prolonged activation of these physiological responses, which can lead to depression and anxiety, as well as emotional and conduct disorders in children. Foley et al. (2017), in a study in Glasgow, found that living near urban motorways had a negative impact on local residents' wellbeing. These impacts appeared to be concentrated among people who already suffered from chronic health conditions, suggesting that the presence of a nearby motorway might exacerbate existing health inequalities.⁵ However, in another study, Riedel et al. (2014) argue that objective exposure to traffic noise is not a sufficient predictor of subjective 'annoyance' felt by residents, which may result in planners failing to notice issues of environmental injustice.⁶

Jephcote and Chen (2013) locate an association between geographically elevated levels of road-transport emissions and severely adverse respiratory responses among sensitive individuals (e.g., young children). Jephcote et al. (2020) find that leukaemia risks are 30 per cent higher among communities situated within 5km of petrochemical plants. Similarly, Morrison et al., (2014) identify a significant relationship between poor chemical soil quality in deprived urban areas and respiratory diseases, a noxious remnant of the UK's industrial past. Meanwhile, Lawrence et al., (2019) are attentive to the negative mental health impacts of climate change, setting out a multi-layered framework for the determinants of mental health and wellbeing that encompasses personal, community, socioeconomic, climate and political factors. While pollution and waste production were found to be the primary mediator of adverse wellbeing outcomes, one study identified a link between experiencing the direct impacts of natural disaster events and negative life satisfaction (Berlemann et al., 2020). Nevertheless, apart from the Berlemann study, all these studies clearly indicate that core aspects of contemporary built environments not only damage the wellbeing of the natural environment, but also harm the wellbeing of nearby people and communities.

5 Summary provided by IDOX

6 Summary provided by IDOX

The inequitable distribution of benefits and harms

These damages inflicted on people and places are not equally distributed (Barnes et al., 2019). The benefits to wellbeing provided by the natural environment hitherto discussed are also inequitably distributed (Mullin et al., 2019). Our findings indicate that the unequal distribution of environmental benefits and harms are shaped and maintained by longstanding patterns of economic and social inequality.

This is partly evident in a small cluster of articles (three) which examine the distribution of 'natural capital' – a concept used by Mullin et al. (2018: 10) to evaluate the total stocks of natural resources, environmental assets and ecosystem services that are 'critical to people's health and wellbeing'. Mullin et al. (2018) notably observe that while it is widely acknowledged that universal access to high quality environments which support the health and wellbeing of all people is lacking, most analysis of environmental inequalities has focused on pollution.

This observation is strongly echoed by the findings of our scoping review (see more below). By contrast, according to Mullin et al. (2018), relatively few analyses of environmental inequalities have paid attention to the distribution of natural capital. Combining data on natural capital indicators (woodland, coastal land, rivers, lakes, mountains, farmland) for each local authority district with Indices of Multiple Deprivation data for England, Mullin et al. (2018: 16) find that the spatial pattern of deprivation 'in some cases shows some consistency with the spatial pattern of natural capital'. However, the authors also recognise that some areas with a very high quantity, quality and diversity of natural capital also experience higher levels of deprivation. Mullin et al.'s (2018) findings appear largely due to an urban/rural divide in the spatial distribution of prosperous and deprived populations, with the latter more heavily concentrated in urban areas that, on the whole, comprise less woodland, coastal land, blue spaces and agricultural land (most of which is privately owned).

These findings draw some parallels with Colley et al.'s (2022) research in Scotland. Conducting a cross-sectional analysis of a population-representative survey, the authors identify a 'potential inequality in the distribution of the benefits of contact with nature between subgroups of the Scottish population' (Colley et al., 2022: 6). Inhabitants of the most deprived areas were among the sub-groups that were least likely to report visits to natural environments, when responding to the following question: 'How often, on average, have you taken visits to the outdoors for leisure and recreation in Scotland in the last 12 months?'⁷ (Colley et al., 2022: 3). By contrast, compared to urban inhabitants, 'residents living in remote rural areas, remote small towns and accessible rural areas were significantly more likely to visit the outdoors at least once a week for leisure' (Colley et al., 2022: 6). The authors also note that the greatest disparities in use of natural capital were observed among people with a disability (compared to those without a disability), Muslims (compared to those professing no religion) and Black and other non-white ethnic minority individuals (compared to white people). All these groups were far less likely to report making use of natural capital. The authors suggest that the reasons behind observed differences in use of the natural environment between population subgroups

7 The authors note that 'the question provides a definition of 'outdoors' as 'open spaces in the countryside as well as in towns and cities, such as woodland, parks, farmland, paths, beaches etc.' (Colley et al., 2022: 3).

are varied, complex and specific to each sub-group; but beyond this cursory remark, they do not proceed to provide any detailed examination of the factors that constrain or enable access to natural capital between different socio-demographic groups.

Some possible explanations as to why inhabitants of the most deprived areas are less likely to report usage of natural capital could be inferred from Mears et al.'s (2019) analysis of the distribution of green space in Sheffield. The authors measure and conceptualise the equity of green space distribution in three ways. First, they examine green space accessibility in terms of distance, or a proportion of the population within a given distance. Second, they examine green space provision, measured as green space quantity or coverage within a given area. Third, the authors examine population pressure, measured as the crowding potential of a green space. Contra to Mullins et al.'s (2019) research, Mears et al., (2019: 129) find a 'clear monotonically increasing likelihood of being within 300m of a publicly accessible greenspace with increasing levels of deprivation'. Nevertheless, once accounting for variation in accessibility, the relationship between deprivation and equity of greenspace distribution begins to change. The least deprived populations were found to be located nearer green spaces which experience less overall population pressure and are of higher quality in terms of size and 'natural feeling'. The authors emphasise the importance of this latter discrepancy 'given that quality, as well as quantity, has benefits to health' (Mears et al., 2019: 133). It could be tentatively inferred, therefore, that poorer populations are deterred by the quality of natural capital readily available to them and/or by transport issues that may arise when travelling to higher quality environments. Nevertheless, this review suggests there is a possible gap in understanding here that may merit further research.

While inequalities in the distribution of environmental benefits may require additional research attention, by contrast, there is a comprehensive literature on the inequalities that persist in the distribution of environmental harms. As noted above, this is particularly evident in analyses of air pollution – an issue covered by four articles in this review. This is perhaps warranted; air pollution has been recognised as the world's single largest environmental health risk, 'with 4.2 million deaths in 2016 resulting from exposure to ambient (outdoor) air pollution' (Barnes et al., 2019: 56).

Mitchell et al. (2015) examine changes in UK air quality in terms of nitrogen dioxide (NO₂) pollution between 2001 and 2011. While they note a major aggregate improvement in air quality resulting from a mix of technical, regulatory, and planning measures, not everyone has gained equally over this decade. Rather, they demonstrate a clear pattern – with the least deprived areas experiencing a greater share of improvements and the most deprived experiencing a greater share of declines in air quality. As a corollary of this, the authors posit that poorest households will absorb a larger proportion of the 'disease burden' wrought by air pollutants. However, they recognise that more work needs to be done to understand the relationship between exposure and the lower base of respiratory health among poorer groups.

This theme is taken up by Jephcote and Chen (2013), who examine the spatial dimensions to air quality and children's respiratory health. Using Leicester as a case study, the authors found that elevated levels of road transport emissions and children's respiratory cases spatially coexist with deprivation hot-spots. Similarly, Barnes et al. (2019) update Mitchell

and Dorling's original analysis of road traffic pollution inequalities to assess whether traffic impacts on air quality are an environmental justice issue after 15 years of air quality improvements, concluding that poorer households are still over-represented in areas with the highest concentration of NO₂. Fecht et al.'s (2019) comparative study of air pollution in England and the Netherlands found strongest positive associations between NO₂ presence and neighbourhoods classified as most deprived, ethnically diverse and situated in an urban setting (see also Tonne et al., 2018).

Common to all these studies is the finding that road-traffic emissions are the primary cause of disparities in air quality and a key determinant of lower-base respiratory health among populations at the bottom of the income distribution. This is because poorer people are typically situated in areas with greater overall road traffic density and hence shoulder a greater share of the 'disease burden' (Mitchell et al., 2015). However, Morrison et al., (2014) suggest that road traffic air pollution may not be the exclusive driver of the disease burden disproportionately shouldered by poor people. The authors find that populations in the more deprived areas of Glasgow are exposed to higher soil metal concentrations than in other areas of the city. Morrison et al. (2014) also demonstrate a statistically significant association between soil metal content and respiratory case incidences across the city. Although the authors acknowledge a spatial concurrence between poor air and soil chemical quality, this association remained statistically significant even after air pollution was considered. The authors attribute this to the remnants of Glasgow's legacy of chemical production industry that once occupied land which has since been re-developed and repurposed, most often to house low-income populations.

Davoudi and Brooks (2014) draw on a case study of traffic-related air pollution in Newcastle upon Tyne to explore themes around environmental justice and present a pluralistic framework for justice that combines an expanded interpretation of distributive justice with concerns for recognition, participation, capability and responsibility. The authors use the case study to demonstrate how this framework can be used to guide practical judgements about environmental justice claims. The article discusses elements of environmental justice including responsibility for pollution and contribution to its mitigation; participation in decision-making; misrecognition and stigmatisation; and capabilities and freedom to pursue valued goals. It suggests that defining justice in the context of environmental justice is not straightforward, and remains an open question.⁸

A final article within this theme remains distinct in that it considers the inequalities around harms wrought by the natural environment. Fielding (2018) specifically investigates flood risks in the UK. Except for Yorkshire and the Humber, the author finds that a disproportionate number of non-white populations face a greater risk of flooding, particularly in Wales, where 23 per cent of the non-white population are at risk compared to 11.4 per cent of the white population. While this is an interesting finding, the author fails to put forward any detailed explanations of this disparity.

Pro and anti-environmental behaviours

One plausible explanation for Fielding's findings, one that we may infer from another cluster of articles in both this and the economic scoping review, is that more prosperous households are complicit in producing and reproducing the environmental risks and harms that disproportionately burden populations at the bottom of the income distribution. For example, it might be that – owing to higher levels of wealth and income – more prosperous households are more able to choose where to live and therefore actively choose to reside in environmentally protected locations, with lower risk of harm from natural or built environment sources, where they can enjoy a superior mix of public and private goods. There is some evidence to suggest that households at the top of wealth and income distributions tend to relocate to 'pockets of affluence' and, in doing so, reinforce a segregation effect by driving up house prices and precluding poorer households from entry (Cauvain et al., 2022). Absent of political intervention, greater residential mobility at the top of the income distribution may therefore leave low-income households with little choice but to reside in areas where they are exposed to greater risk of harm from the natural and/or built environment.

The idea that wealthier populations are indirectly or otherwise complicit in the production of environmental harms typically endured by poorer people is the third and final prevailing theme of this scoping review. In their study of air pollution, Barnes et al. (2019) saliently note that the households least able to access a vehicle live in areas with the highest pollution concentrations, while those with the highest household vehicle access are situated in areas with the lowest. Furthermore, not only are the poorer households more likely to own fewer vehicles, but the vehicles that they do use tend to produce lower nitric oxide and nitrogen dioxide per kilometre than the average vehicle owned in less deprived areas (Barnes et al., 2019). This is also partly because poorer households tend to drive less frequently and shorter distances (Barnes et al., 2019). These findings contradict assumptions in previous research that poorer households typically drive poorer quality vehicles that produce more emissions (Mitchell and Dorling, 2003).

Relatedly, Chatterton et al. (2016) explores levels of gas, electricity and vehicle use among high users. The authors found that the highest consumption clusters (top quartile) use, proportionally, between 26% and 67% more energy than the average, and between 68% and 124% more than the lowest cluster. They also found that total energy consumption rises broadly in congruence with higher income levels; as more disposable income tends to permit higher overall consumption of goods and services, locking higher earners into higher energy lifestyles. Nevertheless, what both these studies show is households who are not poor, and particularly those on high incomes, bear greater responsibility for the 'disease burden' disproportionately shouldered by poor households.

While the above might be understood as anti-environmental behaviours that have real and significant consequences for wellbeing and the environment, this review also identified a study which examined the relationship between pro-environmental behaviours and subjective wellbeing. Laffan (2020) found that individuals who engage in pro-environmental behaviours have higher levels of life satisfaction and consider their activities to be more worthwhile, while at the same time reporting equivalent levels of happiness and anxiety to those who do not engage in them. Laffan's research therefore

suggests that pro-environmental behaviours may not only be able to enhance the wellbeing of the environment, but also of people too.

A summary of key definitions and concepts

As will be explored in the next section, there are several ways in which the literature and themes identified in this scoping review can enrich Carnegie UK's conceptualisation of 'environmental wellbeing'. Nevertheless, one key limitation of the present review was the relative dearth of theoretical research seeking to directly explore and develop understandings of the relationship between the natural and built environment and human wellbeing. Where research did operationalise a specific conceptualisation of wellbeing, this was most often taken uncritically from well-established definitions for empirical research purposes (e.g., to examine noise pollution and 'subjective wellbeing'). There were only three notable exceptions.

In their efforts to guide the development of indicators and a complementary social science research agenda that place human wellbeing at the centre of present and future ecosystem-based management, Breslow et al. (2016) develop a new conceptual framework of human wellbeing. The authors specifically define 'human wellbeing as a state of being with others and the environment, which arises when human needs are met, when individuals and communities can act meaningfully to pursue their goals, and when individuals and communities enjoy a satisfactory quality of life' (Breslow et al., 2016: 251). Realising this state through ecosystem based management requires attention to four major constituents of human wellbeing: connections, capabilities, conditions, and cross-cutting domains.

Figure 6: The four C's conceptual framework of human wellbeing

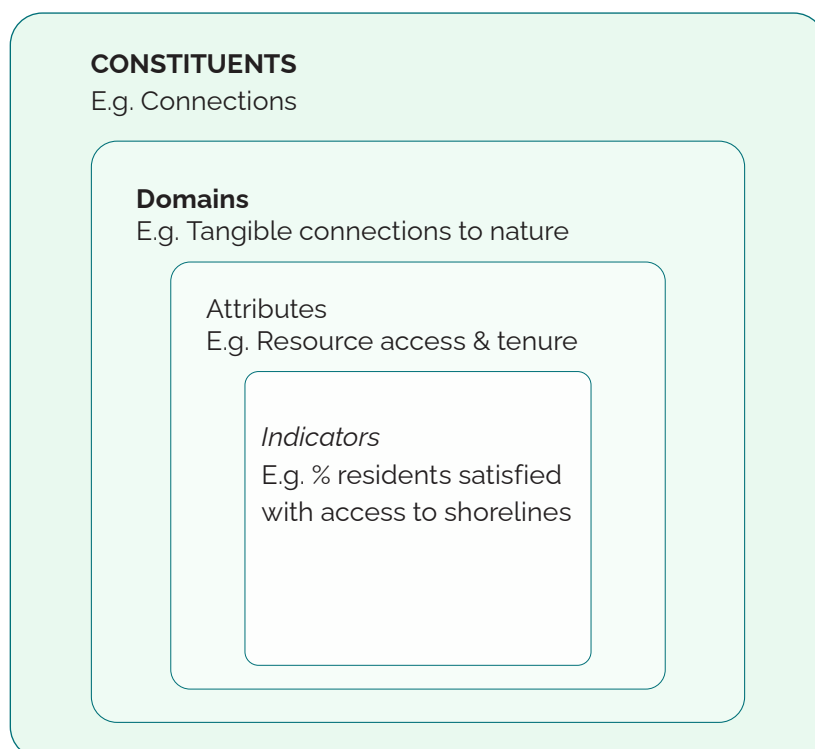


Conditions refers to the present state of the environment and its consequences for health and safety. Connections specifically refers to 'being with others and the environment' (Breslow et al., 2016: 252). It includes the tangible and intangible interrelationships we have with other people, with nature, as well as cultural values and identities. Capabilities refer to the factors directly enabling individuals and communities to 'act meaningfully to pursue their goals' (Breslow et al., 2016: 252). These include possessing a meaningful stake in knowledge systems, political participation, and governance related to ecosystem management. Finally, the core components of the cross-cutting constituent (equity and justice, security, resilience, and sustainability) refer to 'a state of caring for oneself, other people and living things, and sustaining our collective satisfactory quality of life now and into the future' (Breslow et al., 2016: 253). According to the authors, these crosscut because their status results from variabilities and interactions among all constituents.

Breslow et al.'s (2016) framework possesses notable similarities not only with Carnegie UK's conceptualisation of environmental wellbeing, but also with the broader logic of the SEED domain framework. It specifically recognises that the relationship between human wellbeing and the environment is inextricably conditioned by social (relationships between individuals and groups) and political factors (e.g., democratic participation in the allocation of natural resources).

However, there is a departure. Breslow et al. (2016) proceed to outline a 'nested structure' which can be used as a rudimentary guide for policymakers or practitioners seeking to assess each of the four constituents (and components) of human wellbeing. Such an approach may be useful for beginning to think beyond definitions of 'environmental wellbeing' and considering how it might be assessed and measured:

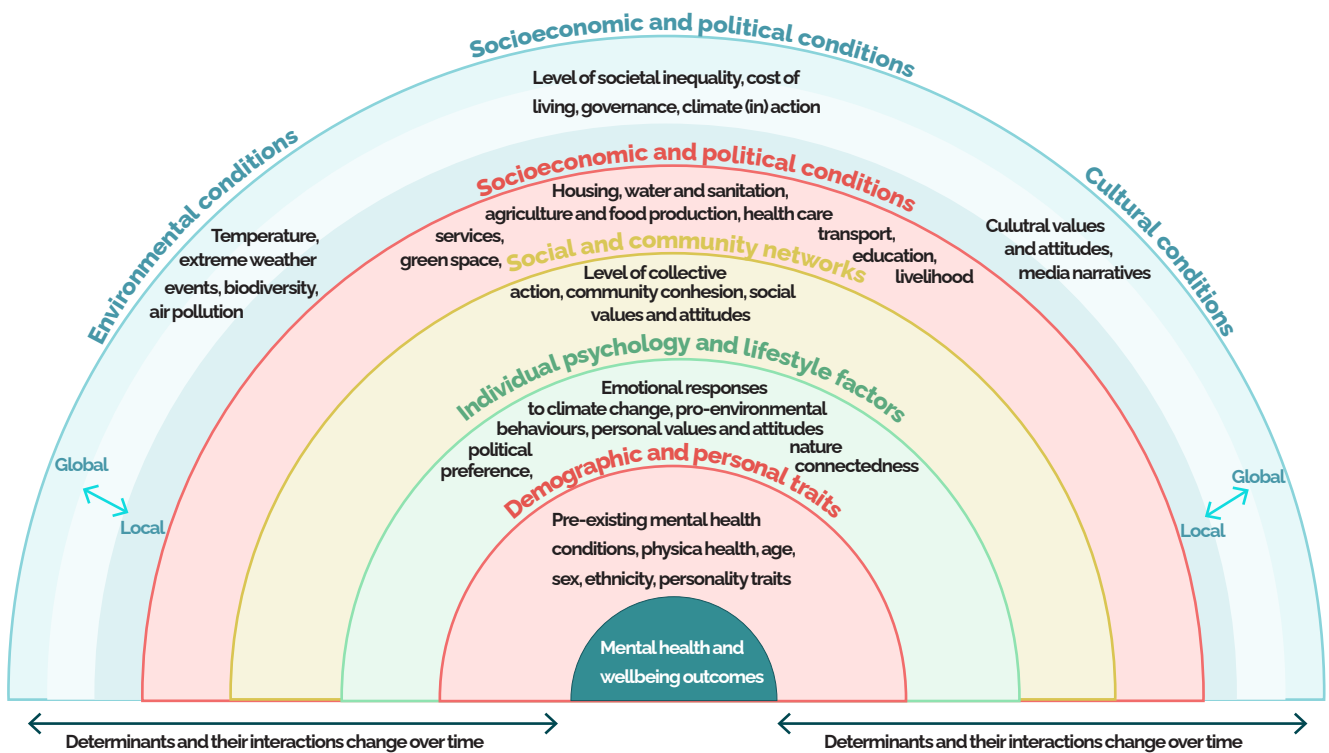
Figure 7: The nested structure of the 4C's framework of human wellbeing.



Similar to the four C's conceptual framework, White's (2020) 'Socio-Ecological Approach to Capability Enhancement' (SEACE) framework recognises how wellbeing is determined by social and political factors. The SEACE framework specifically integrates socio-ecological perspectives with the capabilities approach to understanding the determinants of 'of mental wellbeing that operate at different levels of scale (including the intrapersonal, interpersonal, institutional, community and policy levels)' (White, 2020: 52). As such, the SEACE framework also possesses some direct similarities with Carnegie UK's present conceptualisation of economic wellbeing and the broader SEED domains.

Lawrance et al., (2022) identify the different layers that determine individual mental health and wellbeing. These layers include personal, community, socioeconomic, climate and political factors:

Figure 8: Lawrence's five-layer framework for mental health and wellbeing



Again, in acknowledging wider political, environmental and social determinants of wellbeing, Lawrence et al.'s (2022) five-layer framework possesses some synergies with Carnegie UK's SEED domain. However, there is a notable departure. The authors suggest that the determining layers are not fixed or static but change over time. These changes occur across multiple spatial scales, such as changes across the life course, changes in the frequency and severity of extreme weather events, or changes in the distribution of environmental or political resources. We will reflect on the significance of this departure for Carnegie UK's present conceptualisation of environmental wellbeing in the following section.

In addition to these explicit theoretical explorations of the relationship between human wellbeing and the natural environment, we found a handful of related concepts that are of peripheral relevance to Carnegie UK's conceptualisation of environmental wellbeing and could merit closer consideration.

- Mullins et al., (2019) draw on the concept of 'natural capital' to evaluate total stocks of natural resources, environmental assets and ecosystem services critical to human wellbeing. They demonstrate how this concept can be used to evaluate socio-spatial disparities in the consumption and distribution of natural resources.
- Badland and Pearce (2019: 95) draw on the concept of 'urban liveability' to explore natural and built environment 'exposures that can amplify or dampen opportunities for good health, wellbeing and civic participation'. The authors demonstrate how this concept can be used to inform urban planning agendas which yield benefits both to human wellbeing and to the urban environment.
- Mitchell et al (2015) use the concept of 'disease burden' to identify populations disproportionately affected by environmentally produced harms. They specifically demonstrate how this concept can be used to make sense of inequitable socio-spatial distributions of air pollution.
- Chatterton (2013) develops the concept of 'post-carbon' to interrogate, critique and deepen notions of what sustainable, low-carbon cities mean in practice. The post-carbon brings problems of greenhouse gas (GHG) emissions, energy conservation and climate change into dialogue with potential solutions around economic justice, behaviour change, mutualism, land ownership, the role of capital and the state, and self-management. This could be useful for exploring the temporal dimension of Carnegie UK's present understanding of environmental wellbeing.



4.4 Conclusions

Enhancing Carnegie UK's conceptualisation of 'environmental wellbeing'

As highlighted in the previous chapter, much of the literature reviewed does not operationalise a specific conceptualisation of wellbeing. However, the present findings may still be of use to extend or enhance Carnegie UK's conceptualisation of 'environmental wellbeing'. From the literature reviewed and following discussion at a workshop with Carnegie UK staff, we identify four dimensions within which Carnegie UK's current conceptualisation of 'environmental wellbeing' may be developed.

- a) **Scale:** Environmental wellbeing is influenced by factors that work and interconnect at different scales. It is experienced primarily within places (although phenomena such as eco-anxiety highlight the impact of the global on the individual). But the factors that shape the local environment range from the hyper-local (specific spaces and habitats) to landscape factors (such as river systems) and bioregional effects as well as global factors such as atmospheric carbon and methane and planetary capacity to absorb the effects of human activity. It would therefore be valuable to consider emerging areas of study around climate impacts and planetary wellbeing that have not yet generated relevant peer-reviewed research from the UK revealed through our searches. These include the impacts of climate change and their uneven distribution, a topic more prominent in international literature at present; and the relationship between human wellbeing and the wellbeing of other species and ecosystems. This can be conceptualised as planetary wellbeing – 'a state where the integrity of Earth system and ecosystem processes remains unimpaired to a degree that species and populations can persist to the future and organisms have the opportunity to achieve wellbeing' (Korketmäki et al., 2021). We would draw attention especially to some of the recent literature highlighting the global connections between healthy ecosystems and social justice, which by virtue of its international scope was excluded from our UK-specific searches. Rockström et al.'s very recent work (2023) on 'Earth system boundaries' proposes a set of 'safe and just ... boundaries for climate, the biosphere, fresh water, nutrients and air pollution' and could usefully be incorporated in UK-specific approaches to environmental wellbeing.
- b) **Time:** Carnegie UK's existing framework recognises the importance of thinking in terms of future generations. This can be considered in terms of stewardship (the preservation of ecosystems, and the ecosystem services they provide, for future generations) but also in terms of intergenerational connections – the current generation of decision makers needs to know, learn and experience the benefits of the natural environment in order to pass on a shared understanding to future generations. Environmental wellbeing, like wellbeing in general, is not a static or unchanging state. It is determined by multiple and continuously shifting temporal scales. More work is needed to understand, for example, the relationship between changes in the distribution of environmental goods and harms and their impacts at different life stages for different population groups (see Lawrance et al., 2022).

- c) **Place:** the wellbeing impacts of the local environment are experienced through the built environment (public spaces and places, effects such as urban heating and flood risk, exposure to traffic noise and pollution) as well as through the natural environment and these need to be considered together. The concept of urban liveability developed by Badland and Pearce (2019) may be particularly helpful here in bringing together understandings of the local value generated by both the natural and the built environment.
- d) **Distribution:** environmental harms (as well as goods) are unevenly distributed and impact most heavily on those who are already disadvantaged by factors such as poverty, race or disability. Our understanding of wellbeing needs to consider not only how these harms are distributed, but the causes of this unequal distribution. A focus on victims and perpetrators of environmental harms helps us to understand that the collective dimensions to environmental wellbeing are not necessarily characterised by consensus, but by conflicting and competing interests between different social groups. Concepts of environmental wellbeing may need to be broad enough to consider not only who is lacking in wellbeing, but who must also compromise or forfeit their present standard of living (and perhaps elements that they currently perceive as necessary to their wellbeing) to improve environmental wellbeing on a communal scale. Environmental wellbeing should further explore environmental harm. Conceptualisation needs to be extended to explore the role of power and responsibility in the production of both environmental harms and wellbeing. This could consider which actors are involved in the production and destruction of wellbeing related to the environment, and what incentivises or modifies their practices.

Limitations of the existing evidence base

As demonstrated, there are several ways in which the present scoping review may enrich Carnegie UK's conceptualisation of 'environmental wellbeing'. Nevertheless, there are several key limitations regarding the existing evidence base.

First, considering Carnegie UK's scoping review objectives, the primary limitation of the existing literature concerns the lack of theoretical research exploring the relationship between natural and built environmental conditions and wellbeing. Of the 25 journal articles/book chapters included in this review, 17 did not include any definition of 'wellbeing'. The vast majority of articles were empirical in focus and maintained relevance only through their exploration of relationships between the mental and/or physical health and environmental conditions.

Second, relatedly, of the three conceptual journal articles that were identified as possessing a high degree of relevance to Carnegie UK's conceptualisation of 'environmental wellbeing' (Breslow et al., 2016; White 2020; Lawrance et al., 2022) two do not meaningfully contribute towards challenging and/or enriching Carnegie UK's present conceptualisation. Carnegie's present definition of environmental wellbeing, as situated within the broader SEED domain framework, appears already to possess sufficient conceptual clarity and breadth to understand wellbeing that is of a quality consistent with the literature identified in this scoping review.

These limitations could indicate a potential gap. The findings of this scoping review suggest that, with some revisions, Carnegie UK's present concept of environmental wellbeing as possessing collective, temporal and spatial dimensions – and/or as something that both shapes and is inextricably shaped by social, political and economic factors – could prove useful for influencing future research agendas seeking to explore the mutual wellbeing of the natural environment and its human inhabitants.

Cross-cutting themes across domains

The literature examined in this scoping review highlights that each siloed aspect of wellbeing cannot really be considered without examining their relationships across other domains. Barnes et al. (2019), for example, note the relationship between environmental harms experienced by poorer segments of the population and their more limited choices of residence. The literature on the distribution of environmental benefits and harms shows that we cannot truly understand wellbeing related to the natural and physical world without understanding how this world is divided and distributed socially, e.g., between different social groups in terms of wealth, income and status, and the inequities in power that this confers. In other words, we cannot look at environmental wellbeing without considering economic and democratic wellbeing. As Jephcote and Chen (2013) note, there is a 'double burden of social and environmental issues' that collectively impact on wellbeing.



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5. Democractic Wellbeing

Richard Crisp and Rebecca Hamer

5.1 Introduction

Carnegie UK define democractic wellbeing as:



Everyone has a voice in decisions made that affect them. This means having local and national leaders who support participation, foster trust and encourage diversity.

This definition of democratic wellbeing has a number of dimensions. It emphasises active **participation** by a democratically engaged public that is capable of influencing decisions and outcomes through its **voice**. It also stresses the importance of effective democratic processes and representatives in terms of building citizens' **trust** in institutions and leaders at both a local and national level. The notion that leaders should encourage diversity also captures a sense that democratic processes should be inclusive and reflect the needs and concerns of different groups and communities.

Carnegie UK (2022) note elsewhere that democratic wellbeing can both impact on personal wellbeing and generate positive outcomes in the other three domains in terms of promoting greater social, economic and environmental wellbeing.

Democratic wellbeing clearly relates to **Carnegie UK's notion of collective wellbeing** insofar as it invites explorations of how different groups or communities (of geography or interest) feel they are able to participate and exercise collective voice, control and power in decision making across different spatial scales. The capability to engage may also be distributed unequally across different groups and areas, raising questions about how democratic wellbeing is **mediated by inequalities**. Issues of trust in political representatives, institutions and structures also **align with concerns about economic wellbeing**. The rise of more populist and divisive forms of politics in both the UK and overseas has been associated with economic marginality in so-called 'left behind places' (McCann, 2020; Rodríguez-Pose et al., 2021).

Wider understandings of democratic wellbeing

Existing evidence on the relationship between democracy and wellbeing can be broadly distinguished between by its focus on two types of democracy:

- **Representative democracy** in terms of attitudes towards, experiences of, or participation in, formal electoral or party politics and systems (local or national). This can also include perceptions of the quality of governance and services delivered through representative systems of democracy.

- **Participatory democracy** outside of formal electoral systems such as engagement in local decision making or service design, sometimes involving forms of deliberative democracy. In their work on Gross Domestic Wellbeing (GDWe) Carnegie UK (2020) further elaborate on participation, noting the importance of opportunities for individuals to “meaningfully participate in society and decision-making processes” through methods of citizen engagement and deliberation such as citizens’ assemblies and participatory budgeting.

In practice, this is not a hard and fast distinction as voting, for instance, is sometimes framed as a form of participatory democracy. However, the distinction between engagement in formal political systems and other forms of participation is certainly reflected in most of the literature and provides a useful organising framework for this scoping review.

Representative democracy

There is a well-established body of research on wellbeing which seeks to measure the impact of national-level governance on the wellbeing of populations, often comparing different countries (e.g. Helliwell et al., 2018). This sometimes distinguishes between **government conduct and government quality**, which, drawing on World Bank definitions, Layard and De Neve (2023) conceptualise as:

- **Government conduct:** ability to enforce rule of law; effectiveness of service delivery; regulatory quality; and control of corruption.
- **Government quality:** political stability and absence of violence; and voice and accountability.

A more recent and growing body of research has looked at the how social and spatial inequalities shape attitudes towards, and participation in, formal representative democracy. Research on the ‘geographies of discontent’ (McCann, 2020) and the ‘revenge of the places that don’t matter’ (Rodríguez-Pose et al., 2021) explore the mediating role of economic decline and regional inequalities in the rise of populist political leaders, parties and movements in the Global North, including the recent ‘shock’ of Brexit in the UK.

Carnegie UK’s (2022) ‘*Spotlight on Democratic Wellbeing*’ report presents survey analysis commissioned to address the limitations of the ONS Measures of National Wellbeing Dashboard that currently only includes two measures of democratic wellbeing: ‘voter turnout’ and ‘trust in government’. The findings highlight a concerning lack of trust in representative democracy which, alongside low levels of involvement in participatory democracy (see below), lead them to conclude that **democratic wellbeing is “under severe threat”**:

- 2 in 5 people in England (41%) say that democracy is not working, with those in social grades C2DE even less likely to report that democracy is working very well or fairly well (39% compared to 49% of those in social grades ABC1).

- Loss of trust (32%) is seen as the biggest current threat to democracy followed by corruption (16%).
- Three quarters (76%) of the public in England don't trust MPs, while 73% don't trust the UK Government.

This loss of trust is significant given that - drawing on OECD work - trust is the foundation of a functioning democratic system and is crucial for maintaining political participation (Carnegie UK, 2022).

Participatory democracy

Recent years have seen a '*participatory turn*' (Bherer et al., 2016) characterised by efforts to engage citizens' views and input to influence decisions. The rationale is that greater citizen involvement leads to greater accountability and responsiveness of elected leaders, more empowered citizens through participatory processes, and more efficient governance and service delivery (ibid.). These 'democratic innovations' (Bua and Escobar, 2018) include direct and deliberative forms such as **participatory budgeting** and '**mini-publics**' or '**citizens' juries**' where randomly selected groups of citizens are convened to make decisions on issues impacting the wider public.

However, there is perhaps a gap between expectations and experience. Carnegie UK's own survey data shows that actual levels of participation in England in mechanisms for participatory democracy remain very low, despite interest in doing so, particularly for those in lower socio-economic groups:

Data on **involvement in local decision making** showed:

- The majority of people reported that they were not involved at all or only slightly involved (89%, of which 74% reported being not involved at all).
- Of those who reported that they were not involved at all, 43% reported that they were very or fairly interested in taking part in the future which suggests there may be a gap between actual and desired levels of participation.
- Those in grades C2DE were more likely to report that they were not interested in participating in local decision making.



5.2 Methods, search results and screening

Our approach

This scoping review was based on a four-phase methodological approach:

- developing robust search terms.
- identifying high quality research articles to review.
- extracting relevant data from documents.
- synthesising relevant data into a final review using appropriate techniques (e.g., thematic analysis).

The scoping review has been co-produced with Carnegie UK, who have provided input at multiple phases to refine the search strategy and identify key priorities for a full search. This was done to ensure efficiency and that the research was explicitly tailored towards enhancing Carnegie UK's present knowledge on 'democratic wellbeing'.

Searches

Preliminary rapid evidence search

A preliminary rapid evidence search using the Scopus search engine and Google Scholar was undertaken to scope out the scale, nature and quality of literature relevant to democratic wellbeing as the basis for agreeing key search terms with Carnegie UK. Searches undertaken through Scopus using the term '*democratic wellbeing*' (with appropriate filters) produced no results at all. This clearly indicated that it is **not a term used in academic research**. Searching '*democracy AND wellbeing*' as two separate terms did produce 6,039 results which, once filters were applied (e.g. articles from the UK, wellbeing as keyword), narrowed it down to just over 100 results. However, none of the first 50 documents returned explored were relevant (example study = '*Does democracy make me taller?*'). Again, this shows this is not coherent field of academic enquiry.

A further set of initial searches were therefore undertaken with a series of exploratory search terms that related to two core themes that were of interest to Carnegie UK:

- **community participation:** 'wellbeing' AND 'volunteer' OR 'community assets' OR 'community participation' OR 'local decision making' OR 'community engagement'
- **political voice and trust in institutions:** 'wellbeing' AND 'politic*' OR 'politic* trust' OR 'politic institutions' or 'politic* participation' or 'politic* engagement'.

Searches around community participation generated a number of relevant results including papers on **community assets, co-production, mutual aid and participatory budgeting** and it was agreed to explore these sub-themes further in the full evidence search. It also returned a number of papers on volunteering and participation in cultural events and activities but these themes were not taken forward into the full search as Carnegie UK were familiar with the literature on volunteering and wellbeing while cultural events and activities were considered less relevant for understanding democratic wellbeing.

Searches around political voice and trust in institutions produced some relevant papers on **the relationship between trust and wellbeing in deprived** areas in terms of how wider political and economic events or processes e.g. Brexit impact on, or are shaped by, wellbeing, as well as the **relationship between national political systems and 'good governance' on individual or national (aggregate) wellbeing**. There were no relevant studies on the impacts of individual participation in formal politics on wellbeing e.g. voting or political campaigning although non-UK studies on these themes were identified. It was agreed that both of these themes should be further explored in the full search with the caveat that the relationship between Brexit and wellbeing did not need to be covered in depth.

Full evidence search

The final search terms and results are outlined in the table below. Searches were undertaken using Scopus and Google Scholar as the two search engines. Search terms were selected to capture the relationship between wellbeing and aspects of **community participation** as well as **political trust and voice in institutions**. To ensure issues around exclusion and (in)equalities were included we also used terms related to inclusion and diversity including 'poverty', 'community marginalisation', 'inclusion' and 'exclusion'.

Table 6: Search terms

Theme and search engine	Search Terms	Number of results	Relevant results
Community participation <i>Scopus</i> (Limiters: UK, 2013-2023)	wellbeing + social action	434 (went through first 200)	0
	wellbeing + social action + volunteering	14	3
	wellbeing + social justice	205	0
	wellbeing + social justice + community	153	0
	wellbeing + social justice + community + participation	56	1
	wellbeing + community organising	15	1

	wellbeing + coproduction	19	0
	wellbeing + participatory budget	3	8
	wellbeing + participatory (search within inc budget)	7	9
	wellbeing + mutual aid	5	0
	wellbeing + volunteering	60	7
	wellbeing + community cohesion	58	3
	wellbeing + community assets	70	2
Community participation <i>Google Scholar</i> (Limiters: UK, 2013-2023, not related to COVID or older people)	allintitle: wellbeing, community justice -covid	5	0
	allintitle: wellbeing, social action -covid	12	2
	wellbeing, volunteering, community "community wellbeing" -covid, -older -people, -children	40	0
	wellbeing, community organising United OR kingdom, OR UK "community wellbeing" -covid, -older -people, -children	92	0
	wellbeing, coproduction United OR kingdom, OR UK "community wellbeing" -covid, -older -people, -children	4	0
	wellbeing, coproduction United OR kingdom, OR UK "community wellbeing" -covid, -older -people, -children	76	0
	wellbeing, community budgets , United kingdom, participatory	17,600 (ordered by relevance – a more successful strategy) Looked at first 100 and then refined search terms	0

	community wellbeing, volunteering, united kingdom	18,000 results (ordered by relevance. Looked at first 100 and then refined search terms)	0
	wellbeing + politic*	2	0
Political voice and trust in institutions <i>Scopus</i> (Limiters: 2013-2023, UK)	wellbeing + political	478	0
	wellbeing + political + trust	20	5
	wellbeing + government + trust	28	2
	wellbeing + government + participation	90	1
	wellbeing + civic participation	21	1
	wellbeing + good governance	52	1
	wellbeing + community participation + governance	21	0
	wellbeing + political + voice	14	0
	wellbeing + local government	168	2
	wellbeing + politics + accountability	7	0
Political voice and trust in institutions <i>Google scholar</i> (Limiters: 2013-2023, UK)	Allintitle: wellbeing + politic*	2	0
	Allintitle: Wellbeing + political	88	0
	Allintitle: Wellbeing + political +trust	5 results	0
	Allintitle: Wellbeing + government + participation	0	0
	Allintitle: wellbeing + civic + participation	1	0
	Allintitle: wellbeing + good governance	0	0

In addition, a grey literature search was undertaken using IDOX. This search was similarly orientated around the search terms listed in the table above and limited to the last 10 years. No papers were used.

Once a first round of selection, screening and analysis were undertaken (see Section 3.2), a final round of **supplementary searches** were undertaken using Google Scholar. By this stage it had become apparent that distinctions between **representative and participatory democracy** were relevant so search terms combining 'wellbeing; with 'representative', 'participatory', 'deliberative' and 'democracy' were used.

Screening and selection

A title and abstract screening of the initial results was then undertaken, taking into account geographical relevance (UK focus (at least partially)), broad thematic focus (on the relationship between wellbeing and community participation or trust in institutions) and a 'light touch' review of quality and relevance (scored as high, medium or low). A longlist of 47 papers were selected from this exercise and then further scrutinised using a more specific set of inclusion and exclusion criteria, which were as follows:

Inclusion

- Empirical focus on the nature and distribution of wellbeing benefits between social groups or areas.
- Conceptual focus on the relationship between wellbeing and community participation or voice/trust in institutions.
- Empirical and/or conceptual between trust in institutions and wellbeing.
- UK focus.
- Published within the last ten years.

Exclusion

- Specific focus on Covid-19 or older people (subject areas not of direct interest to Carnegie UK).
- Lack of relevant focus (e.g. measuring wellbeing or focus on wellbeing policy) or geography (i.e. studies outside the UK).
- Inappropriate formats (e.g. short think pieces).
- References to wellbeing tangential or irrelevant.

Out of the longlist of 47 papers, 21 were deemed suitable for inclusion. Additional supplementary searches identified a further 5 papers to include.

Thematically, most of the 26 relevant papers concerned aspects of community participation (17) with only 8 on political voice and trust in institutions. The majority of the papers were predominantly empirical (12), with 6 specifically exploring the impact of co-production and community development initiatives such as the Big Local Programme or participatory budgeting. Other common approaches include evidence reviews (systematic, meta- or scoping reviews) (7), conceptual/theoretical papers (4) with a small number of papers with a predominantly evaluative approach (2). Conceptual papers focused on differing wellbeing paradigms, often noting the contrast between citizens' and professionals' conceptualisations and the impact of the politicisation of wellbeing. Papers exploring political voice and trust tended to centre around Brexit, although the themes at the heart of these reflect wider and enduring issues of historical deprivation and marginalisation so have been included.

The table below shows the definitions of wellbeing drawn upon in this report. It should be noted that many of the papers considered did not define wellbeing at all, and several simply used a broad concept of subjective wellbeing. However, a relatively small number of papers did attempt to define wellbeing or its underpinning principles and we have drawn on their approaches in this report.

Table 7: Definitions or concepts of wellbeing that have informed this report

Author(s)	Title	Definition of wellbeing
Coburn and Gormally (2020)	Defining well-being in community development from the ground up: a case study of participant and practitioner perspectives	Self-defined by participant. Implicitly combines aspects of hedonic, evaluative and eudaimonic aspects of wellbeing alongside notions of collective wellbeing.
Bell et al. (2021)	Co-creating solutions to local mobility and transport challenges for the enhancement of health and wellbeing in an area of socioeconomic disadvantage	No explicit definition; operationalised in paper as access to services and mental health.
Brun-Martos and Lapsley (2016)	Democracy, governmentality and transparency: participatory budgeting in action	No explicit definition of wellbeing; discusses benefits for citizens in terms of political transparency.
Pennington and Corcoran (2018)	How does community involvement in decision making impact wellbeing	Individual and community wellbeing; related concepts including connectivity, belonging, mental health.
Bagnall et al. (2023)	Can we improve social relations and community wellbeing through better community infrastructure?	Community wellbeing and related concepts including social relations, social capital, social cohesion, social connectedness, mental health.

Talo et al. (2014)	Sense of Community and Community Participation: A Meta-Analytic Review	Main concept is sense of community which it sees as a driver of individual wellbeing and life satisfaction.
Lewis et al. (2019)	Reframing "participation" and "inclusion" in public health policy and practice to address health inequalities: Evidence from a major resident-led neighbourhood improvement initiative	Passing mention of wellbeing; main conceptual focus is on empowerment, collective control, participation and inclusion.
Escobar and Katz (2018)	Mainstreaming participatory budgeting: What works in building foundations for a more participatory democracy?	Health and wellbeing referenced in passing; refers to community empowerment.
Escobar (2020)	Transforming Lives, Communities and Systems? Co-production Through Participatory Budgeting	Doesn't reference wellbeing directly; discusses values associated with participatory budgeting e.g. solidarity, civic education, agency and deliberation.
Campbell et al. (2018)	The impact of participatory budgeting on health and wellbeing: a scoping review of evaluations	Health and wellbeing used as a generic signifier to capture range of social, economic outcomes e.g. political participation, poverty rates, access to sanitation.
Popay et al. (2021)	Power, control, communities and health inequalities I: theories, concepts and analytical frameworks	Community empowerment, collective control and health equity are key concepts.
Fabian et al. (2022)	Respecting the subject in wellbeing public policy: beyond the social planner perspective	Discusses subjective and objective wellbeing and how these notions have been operationalised within policy.
Markantoni et al. (2018)	Do community empowerment and enabling state policies work in practice? Insights from a community development intervention in rural Scotland	Broad focus is on how community-led projects enhance wellbeing but dominant conceptual emphasis is on resilience and empowerment.
Powdthavee et al. (2019)	Who got the Brexit blues? The effect of Brexit on subjective wellbeing in the UK	Explores impacts of Brexit in terms of two forms of individual subjective wellbeing (evaluative and affective wellbeing, namely life satisfaction and mental distress).
Helliwell et al. (2018)	Journal of Comparative Economics	Looks at relationship between quality of governance and wellbeing through lens of subjective wellbeing (primarily life satisfaction).

Atkinson (2021)	Being Well Together: Individual Subjective and Community Wellbeing	Critical exploration of individual subjective wellbeing; argues the need for conceptualisation of wellbeing to recognise notions of the self as relational, caring, interdependent, affective and inter-debted to create a relational, social and moral definition of wellbeing.
McKay et al. (2021)	Political Trust in the "Places That Don't Matter"	Does not explicitly focus on wellbeing; primary measures are perceptions of local economic deprivation, social marginalisation (perception that area is not cared for) and (low) political trust and marginalisation.
Townsend et al. (2020)	"I realised it weren't about spending the money. It's about doing something together": the role of money in a community empowerment initiative and the implications for health and wellbeing	Focus is on how collective control can empower communities and build social connectivity in a way that reduces health inequalities. Wellbeing used in passing as generic signifier of positive community outcomes.
Boswell et al. (2022)	Place-based Politics and Nested Deprivation in the U.K.: Beyond Cities-towns, 'Two Englands' and the 'Left Behind'	Wellbeing not used explicitly; negative forms of wellbeing explored through concepts of disconnection from or entrapment within the local economy, social isolation and atomisation, and powerlessness to affect politics.
Atkinson et al. (2020)	Being Well Together: Individual Subjective and Community Wellbeing	Explicit exploration of relationship between individual and community wellbeing.
Telford and Wistow (2019)	Brexit and the working class on Teesside: Moving beyond reductionism	Wellbeing not used explicitly; related notions include political abandonment, sense of loss and resignation.
Koch (2016)	Bread-and-butter politics: Democratic disenchantment and everyday politics on an English council estate	No notion of wellbeing used; paper refers to democratic disenchantment and democratic crisis.
Dacombe (2021)	Doing Democracy Differently: How Can Participatory Democracy Take Hold In Deprived Areas?	Explores relationship between deprivation, isolation and democratic participation and trust. Wellbeing not discussed.

5.3 Findings

This section provides a thematic synthesis of the relevant literature identified in this scoping review. It also provides an outline of the key definitions and concepts that were relative to Carnegie UK's present conceptualisation of democratic wellbeing and the broader SEED domain framework. An opening section briefly reviews the conceptualisations of wellbeing used in the literature. The remaining three sections explore three themes that emerged from selected literature:

- Conceptualising the **relationship between participation, power and wellbeing**.
- Experiences and outcomes of **participatory democracy**.
- How inequalities shape trust and voice in **representative democracy**.

The first two of these thematic sections focus on all forms of participation except engagement in formal representative democracy (i.e. parliamentary and electoral systems and activities) while the final thematic section focuses on precisely these forms of representative democracy.

Conceptualisation of wellbeing used in the literature

A number of papers addressed subjective wellbeing (Markantoni et al., 2018; Powdthavee et al., 2019; Fabian et al., 2022; Atkinson, 2021) while others addressed both subjective and community wellbeing (Atkinson et al., 2020; Telford and Wistow, 2019; Bagnall et al., 2023). Community wellbeing was conceptualised in the What Works Wellbeing's PPP framework, comprising 'People' (social support, membership, formal support), 'Place' (opportunities, safety, belonging) and 'Power' (Participation, inequalities, collective control) and these factors were explored by many of the aforementioned papers (Pennington and Corcoran, 2018).

Drivers of individual and community wellbeing discussed include socioeconomic factors such as level of education, employment opportunities and trajectories of economic change, income, sense of community belonging, and psychological health. These factors shaped individual and communities' capacity to participate in democratic processes.

The relationship between participation, power and wellbeing

A number of papers focus on conceptualising how wellbeing might be understood and theorised in relation to community participation and development (Coburn and Gormally, 2020; Escobar and Katz, 2018; Fabian et al., 2022; Popay et al., 2021; and Townsend et al., 2020).

Two of the papers reflect on the **importance of using participatory mechanisms to develop resident- or citizen-led definitions of wellbeing**, noting how these may differ from the perspectives of practitioners and policymakers. Coburn and Gormally (2020) contrast residents' and practitioners' understandings of wellbeing in areas of high urban and rural deprivation in Scotland, suggesting residents had more viable and holistic notions while practitioners focussed more narrowly on mental health or community safety. The research explicitly drew on Mertens' (2018) transformative research paradigm which seeks to challenge the privileging of experts and 'change the rules', so that those who are marginalised can take increased power and control.

Drawing on the perspectives of residents engaged in three Scottish health promoting community projects in deprived areas, the authors identify **five conditions of wellbeing for community development practice** that are implicitly rooted in notions of collective wellbeing: creating a sense of community; strong volunteering ethos; networking and partnership working; positive language; and enhanced relationships. They also developed a 'reflective grid' for measuring wellbeing among residents involved in projects, incorporating seven dimensions:

- **Feeling good** (e.g. positivity, lack of stress).
- **Social and emotional** aspects (e.g. good weather, contentment, happiness, smiling, love).
- **Relationships with others** (e.g. friends, family, community, inclusion, support).
- **Being physically well** (e.g. good health, service provision to support fitness and health).
- **Being safe and secure** (financially, feeling warm, feeling comfortable).
- **Achieving self esteem** (e.g. being valued, self-worth, dignity, being respected).
- **Achieving potential** (needs being met, a thriving environment, quality of life, continual improvement journey).

This broad definition implicitly combines aspects of hedonic, evaluative and eudaimonic aspects of wellbeing alongside notions of collective wellbeing. Residents responded positively to this reflective grid, finding it a useful and accurate reflection of their conceptualisation of wellbeing, indicating that community and individual wellbeing can be understood as holistic and interrelated, encompassing environmental, relational, emotional and physical needs and the overall assets and opportunities of the whole community and the individuals within.

As such, Coburn and Gormally (2020) help **develop understandings of how notions of wellbeing can, and should, be arrived at more democratically and applied in community development practice**. The authors do not explicitly delineate between aspects of individual and community wellbeing, instead conceiving of individual subjective dimensions as benefits resulting from successful community wellbeing initiatives.

Similarly, Atkinson's (2020: 1916) theoretical exploration of community wellbeing observes that engaging communities in processes of deliberation around how to define and measure wellbeing generates "*community identity and wellbeing*". Recognising what is important to people, including tensions and conflicts of interest, creates "*discursive spaces*" in which stories and narratives about place and history emerge that that "*both create local community and are accountable to the community's visions of wellbeing*" (ibid.).

Taking a broader and more theoretical perspective, Fabian et al. (2022) seek to **conceptualise and challenge dominant modes of policymaking** in relation to 'wellbeing public policy' (WPP), arguing the need to move away from a 'social planner perspective' (SPP) based on detached analysis by technical experts towards a 'citizen's perspective' that gives a greater role to participatory and deliberative modes of policymaking to define, analyse, and measure wellbeing and ultimately make policy decisions. This approach complements Coburn and Gormally (2021) in recognising the importance of eliciting and acknowledging citizens' conceptualisations of wellbeing while challenging reliance on expert and technocratic modes of policymaking.

Similarly to Coburn and Gormally, Popay et al. (2021) highlight the importance of recognising the importance of community members' feelings of, and opportunities for, achieving and exercising agency and empowerment. Drawing on past evaluation work, they challenge the 'inward gaze' of traditional community empowerment approaches in health promotion, which focus on community psycho-social capacities and neighbourhood conditions. This includes, for example, addressing health-related behaviours such as diet and alcohol consumption or exhorting communities to use available assets to improve their responses to social problems.

Instead, they promote an alternative Emancipatory Power Framework (EPF) that is more attentive to structural pathways from empowerment to health equity and **seeks to identify the forms of power necessary to exercise collective control over decisions and actions in the pursuit of greater social justice**. The EPF does not explicitly refer to wellbeing but defines pathways to promote health equity via community empowerment, distinguishing between three types of power:

- **Power with:** the power emerging when a community acts with other agencies.
- **Power within:** collective capabilities internal to a community, including recognition of shared interests.
- **Power to:** the collective capabilities associated with implementation of community action, including establishing structures and opportunities for collective decisions/ action and the consequences of these.

Alongside this, they propose a complementary **Limiting Power Framework** which describes four types of power that can inhibit collective control in disadvantaged communities and can thus be seen as undermining routes to community wellbeing:

- **Compulsory power:** direct and visible, entailing physical, economic and psychological force and can be exercised legitimately and illegitimately e.g. the use of punitive welfare restrictions in the UK.
- **Institutional power:** less visible and exercised through legislation, rules and norms at organisational levels although it can be illegitimate too. Institutional power can exclude marginalised communities and individuals, restricting information and equity in decision making.
- **Structural power:** operates through the law, labour markets and education; feeds into hierarchical stratification of society, e.g. class, racial, gender/sexuality and correlated access to assets and opportunities.
- **Productive power:** conversely to structural power, operates through social discourses and practices through channels such as the media, education and other institutions which delegitimise and validate forms of knowledge accordingly.

The EPF and LPF are designed to be used simultaneously to **employ a strengths and assets based approach while recognising systemic, sociocultural and structural constraints**. The frameworks can be seen as tools to understand and identify processes and structures that shape wellbeing at multiple levels (individual, household, community and societal).

The ways in which the EPF/LPF framework operate can perhaps be further understood with reference to Whitehead et al.'s (2016) **model of community control** (presented in Pennington and Corcoran (2018)). This illustrates two potential pathways for how, respectively, high and low levels of collective control, shape community health outcomes in disadvantaged environments (see figure 9). In the upper pathway, effective collective control enables communities to diminish neighbourhood threats, leading to better community health outcomes. This explicitly references the EPF framework in terms of the potential for communities to work with agencies ('power with') to enhance outcomes. In the lower pathway, the failure of institutions to invest in services, among other factors, undermines collective action and leads to poorer individual and collective wellbeing (powerlessness). This could be interpreted through the LPF as the way in which institutional power through its allocation of resources shapes wellbeing at different levels.

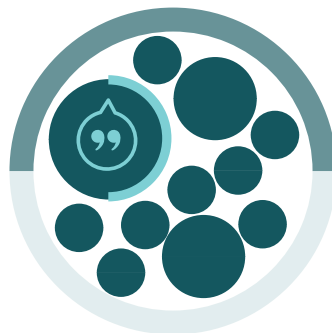
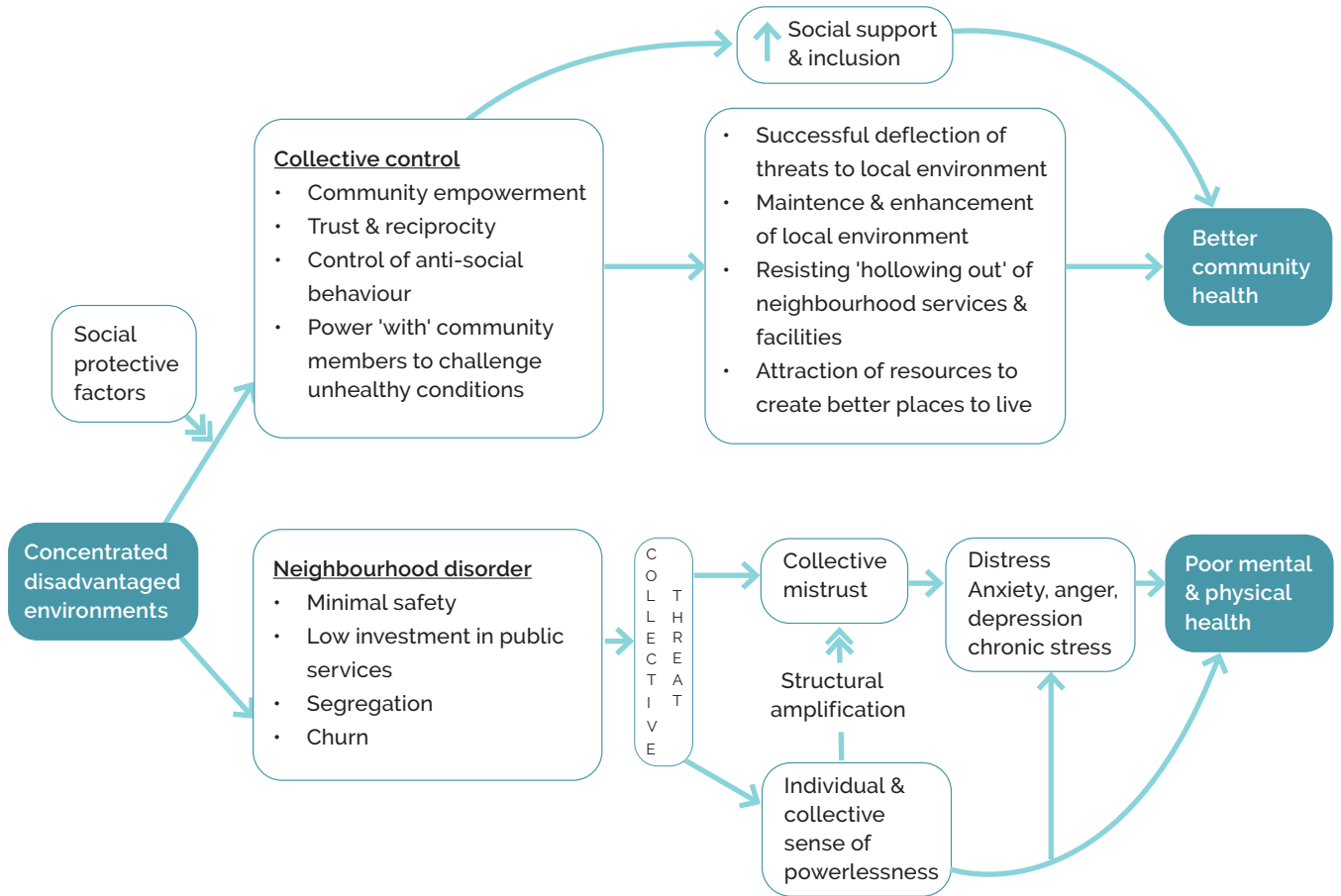


Figure 9: Theoretical pathways from community control to socioeconomic inequalities in health and wellbeing in disadvantaged neighbourhoods.



Source: Whitehead et al., 2016.

Experiences and outcomes of participatory democracy

Wellbeing benefits of participatory democracy

Participatory democracy seeks to ensure that citizens are provided with opportunities to directly participate or be involved in decisions that affect their lives.⁹ The direct involvement of citizens is seen as a way of improving both the legitimacy and effectiveness of governance (Dacombe and Parvin, 2021). Pennington and Corcoran's (2018) systematic review describes how community involvement in decision making can encompass a range of mechanisms. These include: involving communities in urban renewal, community development projects, participatory budgeting, citizen's' juries, protecting community facilities, involving communities in integrating public services and participating in crime prevention programmes.

9 <https://www.institutmontaigne.org/en/expressions/participatory-democracy-importance-having-say-when-times-are-hard>

Several studies indirectly describe how these forms of participation can generate outcomes related to wellbeing (e.g. Talo et al., 2014; Lewis et al., 2019; Atkinson et al., 2020; Bagnall et al., 2023). These are explored in subsections below that focus, respectively, on positive outcomes, negative outcomes, and inequalities in access to wellbeing benefits through mechanisms of participatory democracy.

Wellbeing benefits

A number of studies report wellbeing-related benefits from engagement in different forms of participatory democracy. Pennington and Corcoran's (2018) systematic review focuses on 'meaningful' involvement defined by four principles:

- 1) That power is agreed as jointly held.
- 2) There 'is active and full involvement in all decisions that impact upon the intervention or project'.
- 3) Barriers to access (gender, income, education, age, illness, ethnicity, disability, caring responsibilities) are recognised and responded to.
- 4) When appropriate and desired by the community there is full and active involvement in the implementation of the intervention in the community.

Reviewing a wide range of studies across different types of participation, they observe a number of positive outcomes for both participants and their wider communities in terms of **improvements in a range of established determinants of health and wellbeing** that include: the physical conditions in which people live, individual physical and mental health; community health; individual wellbeing and community-wide levels of wellbeing.

Notably, the report suggests that the evidence on the benefits of meaningful participation are consistent with the upper positive and beneficial pathway of Whitehead et al.'s (2016) model of collective action (see figure 9). The empirical evidence therefore backs the model's assumption that community involvement can drive positive wellbeing both through the process of collective control and also as an outcome derived from neighbourhood-level change or resilience including: deflecting threats to the local (living) environment; resisting 'hollowing out' of neighbourhood services and facilities; maintaining and enhancing local conditions; and attracting resources to create better places to live. One implication is that improvements to wellbeing are not simply secured through the process of participation but through the community-level outcomes it secures, hence the benefits experienced by community members beyond direct participants.

While not explicitly discussed in Pennington and Corcoran's (2018) review, one reading of the evidence presented is that the nature of wellbeing benefits varies by type of activity. The **most significant benefits** in terms of the volume and range **are secured through urban renewal programmes**. It includes both impacts on individual wellbeing (e.g. confidence, happiness, enthusiasm) and community wellbeing (e.g. increasing social

activity, connectivity, and cohesion) as well as positive neighbourhood-level outcomes (e.g. improvements to housing and the wider physical environment). This range of benefits is perhaps not surprising. Some of the urban renewal programmes evaluated were extremely well-resourced both in terms of interventions and evaluations and therefore more likely to generate and identify a wide range of wellbeing benefits, including through changes that may have had limited or no resident involvement.

By contrast, for example, the evidence shows more muted benefits in the case of **participatory budgeting (PB)**. This form of participation engages residents in deciding how the budgets of public authorities are prioritised and spent in their communities. The aim is to include a range of range of voices in decision-making; develop civic and official capacity to deal with complex issues; and enhance the public sphere through civic education and deliberation (Escobar, 2017 cited in Campbell et al., 2018). Pennington and Corcoran's (2018) review reports benefits related to the *process* of participation and the social connections made between participants and with public authorities. Specifically, this includes increased trust, respect, and reciprocity both within communities and between communities and public agencies, as well as higher levels of personal and collective empowerment. However, this is no evidence on whether, ultimately, PB improved the efficiency or quality of services in line with the assumed advantages of participatory democracy and in ways which could be beneficial for wider community wellbeing.

Benefits reported from other studies on PB also largely related to processes. Brun-Martos and Lapsley's (2016) study looked at a range of PB projects in Edinburgh which engaged residents in the process of allocating funds for community projects or consulted residents on council budgets. Based on interviewees with council officers and other stakeholders – but perhaps surprisingly not residents – the study concluded that PB has value in making participants feel included in target communities, democratising budgetary activities and achieving greater transparency. However, there was little evidence that it changed service delivery or generated outcomes from activities funded in ways that enhanced wellbeing beyond the act of participation.

One exception is Campbell et al.'s (2018) scoping review of PB which does observe enhanced forms of objective wellbeing as outcomes of PB-funded activities. The review considered the impacts of PB on health and wellbeing across a range of initiatives in the UK and overseas to understand PB's potential to address health, social, economic and political inequalities. The authors posit that PB has the potential to enhance health and wellbeing through a number of mechanisms including: increased democratic participation; greater community cohesion; improved allocation of funding to public services prioritised by the community; and increased access to medical services via increased spending on healthcare.

Studies reviewed primarily identify **political benefits** including participation by disadvantaged groups and civic education around political processes. By contrast, it notes **highly limited evidence on social outcomes**, aside from a small number of studies in Brazil that report benefits around reduced infant mortality, poverty rates and better access to sanitation, water and sewage. However, these improvements in objective wellbeing seem less applicable to a UK or wider Global North context where child mortality rates are low and access to clean water and sanitation is near universal.

The authors conclude that the current evidence base on the health and wellbeing benefits of PB is thin. In terms of conceptualising the processes through which PB shapes collection action and wellbeing outcomes, Townsend's et al. (2020) study of the Big Local programme in England applies the Emancipatory Power Framework (see above) to understand if, and how, the transfer of control over how money is spent in disadvantaged communities can generate forms of collective control over decisions and actions that could, in turn, reduce health inequalities. It found that PB can support all three forms of empowerment through: providing a mechanism for communities to engage with external agencies (*power with*); building collective identity, connections, capabilities, skills and knowledge as well as community confidence to shape change (*power within*) and becoming more assertive about taking control over how money should be spent (*power to act*). Residents had to engage in significant 'relational work' to manage tensions and conflicts of interest over how money should be used, for example by negotiating with, and managing expectations of, cash-strapped service providers who were "*blatantly chasing the money*" (Townsend et al., 2020: 5). These types of social connectivity and collective control forged through the project can be seen as forms of community wellbeing in themselves. The authors draw on wider literature to posit that they may directly affect individual and population health by increasing social cohesion and reducing loneliness, although these outcomes are not evidenced in the study itself.

Townsend et al.'s (2020) study also illustrates the potentially mutually reinforcing relationship between democratic and social wellbeing, where forms of social connectivity are both generated through, and strengthened by, engagement in participatory democracy. This relationship is explored further in Talo et al.'s (2014) review of the international literature on how a 'sense of community' (SoC) (i.e. feeling part of community, having influence, fulfilment of need within communities, and shared emotional connection) is linked to participation in a range of participatory and representative democracy activities including civic forms of engagement, protest activities, public deliberation, political campaigning or voting. It finds a strong relationship, although is unable to reflect on the direction of causality. However, it does show how what might be considered place-based, community-level forms of social wellbeing such as feelings of membership, interpersonal sharing and emotional connection within territorial communities are intimately related to political participation.

Similarly Markantoni et al.'s (2018) study of community projects in six rural Scottish villages intended to improve community wellbeing and resilience shows how participation is intimately connected to the presence of forms of social wellbeing. It found that the presence of 'social resilience' factors (including social ties and networks) were predictors of completing community projects. This suggests that building capacity may be a precursor to engaging and enabling communities to become more resilient.

In terms of wellbeing benefits of other types of interventions, one study reviewed explored the potential for **co-design of policy solutions** to enhance health and wellbeing. Bell et al. (2022) describe how a Citizens' Mobility Committee provided a forum for co-creation of solutions to transport and mobility challenges in a deprived community. Co-designed interventions included face-to-face transport app training, a transport to supermarkets shuttle service, and an information campaign about concessionary bus passes. The study concluded that the project empowered participants and built local social capital both through strengthening bonds within the local community and

developing links with the local authority, transport providers and academic project partners. This once again indicates how the process of participation can enhance individual and community wellbeing. However, the study falls short of reviewing potential outcomes and wellbeing benefits other than speculating that improving transport and mobility for those facing disadvantage could contribute, through “plausible causal pathways” (Bell et al., 2022: 10) to health equity, and environmental sustainability.

In summary, the evidence base reviewed identifies a range of benefits around individual wellbeing (e.g. confidence and happiness) and community wellbeing benefits (e.g. social capital and cohesion) secured through different forms of participatory democracy, particularly where community involvement is ‘meaningful’ (Pennington and Corcoran, 2018). This can be linked and developed through Popay’s EPF and LPF frameworks to highlight the importance of recognising and responding to power dynamics and potential barriers to empowerment to secure effective forms of collective action capable of enhancing individual or community wellbeing.

Moreover, the weight of empirical evidence revised suggests that wellbeing benefits are largely accrued through the process of participation although activities that enhance neighbourhood outcomes in terms of, for example, improving physical conditions or services and amenities and social relations did, in a smaller number of cases, also seem associated with enhanced wellbeing. The evidence base therefore supports the notion that while direct participation in participatory democracy as a form of collective action can be considered a pathway to better wellbeing for those involved, it is less clear that benefits accrue to the wider community. Our reading of the evidence also suggests that the volume and range of wellbeing benefits varies by type of participatory democracy.

There was some limited evidence that participatory democracy in the form of PB can enhance objective wellbeing. However, there was no evidence to directly support the proposition that forms of participatory democracy that relate to the funding, design or delivery of services can enhance the quality of service provision in ways which could, in turn, support wellbeing benefits.

Wellbeing harms

Evidence that participatory democracy can be harmful to wellbeing is more limited. Pennington and Corcoran’s (2018) systematic review of community involvement in decision making identifies a range of potentially negative impacts arising from problems in the involvement process including: participants not being properly informed about how their involvement impacted on the final design and implementation of the project; disagreements and conflict within and between participants, or between participants and the wider community; and a sense of frustration, disappointment, loss of trust, consultation fatigue, psychological strain, and distress. It cautions, however, that not enough is known about what ‘meaningful’ involvement looks like and how any such involvement positively or negatively impacts on wellbeing outcomes.

One notable exception concerns the use of **citizens' juries** which assemble members of a community to deliberate and decide on aspects of policy or service delivery, often making recommendations to policymakers. Two systematic reviews of citizens' juries found that, while participants can experience an increased sense of pride of belonging, they can also engender frustration and disappointment if findings or recommendations are not acted on or responded to by public agencies (Pennington and Corcoran, 2018; Street et al., 2014). This highlights the risk that participatory democracy initiatives suffer from what Escobar and Katz (2018: p.6) term 'legitimacy challenges' where activities become seen as a tokenistic and "*symbolic rather than a substantial opportunity for community empowerment*", diminishing its potential to enhance wellbeing.

Escobar (2020) also notes some of the **challenges in realising participatory and deliberative ideals** around community empowerment and social justice through PB including: a weak evidence base; cultural challenges in engaging residents and stakeholders; capacity challenges (money and expertise); competition with other political interests; the limited number of 'democratic innovators' willing to promote PB; a lack of legitimacy (e.g. if used to justify spending cuts or failure to mobilise resources); and the sustainability of PB initiatives.

Inequalities in involvement in participatory democracy

The question of who participates (or not) and how this is shaped by inequalities is explored by Lewis et al. (2019). They assert the need for greater conceptual clarity about how inclusion is understood and promoted in projects designed to facilitate communities' collective control over decisions and actions impacting their lives as a mechanism to reduce health inequalities. Drawing on their evaluation of the National Lottery Fund's Big Local programme that provided £1m to 150 disadvantaged communities to spend 'with no strings attached' on locally-determined priorities, they argue that participation and inclusion are necessary but not sufficient conditions for empowerment and collective control. The authors argue, therefore, for **greater focus on who participates (breadth) and the extent to which participation is experienced as empowering and ultimately enables the exercise of collective control over decisions and actions (depth)**. This requires greater attention to 'reach' into different groups and areas of communities to ensure more vulnerable or marginal groups can participate where possible (i.e. breadth). It also requires providing the infrastructure (e.g. venues, meetings etc) that create spaces for increasing the 'depth' of participation in terms of the "*extent to which it is experienced as empowering and ultimately enables the exercise of collective control over decisions and actions*" (Lewis et., 2019: 201).

These insights are not entirely new given longstanding efforts to conceptualise degrees of participation and define what genuine empowerment looks like (e.g. Arnstein, 1969), as well as concerns to expand community participation in collective activities beyond the 'usual suspects'. The authors explicitly acknowledge these debates but their contribution is to bring the notions of breadth and depth together to provide greater conceptual clarity to an array of terms (community engagement, community development, community involvement, community resilience) to show how inclusion can operate through this.

The significance of issues around 'breadth' and inclusion emerge in some of the evidence reviewed. A number of studies **highlight the potential for forms of participatory democracy to exclude particular individuals or groups experiencing cultural, social and economic marginalisation from spaces of decision-making**. Groups sometimes excluded from, or underrepresented in, forms of participatory democracy such as co-production of services, citizen's juries and PB include ethnic minorities, lone parents, households on low incomes or experiencing poverty, individuals with low educational attainment, working-class young people, and people with disabilities (Bell et al., 2021; Campbell et al., 2018; Lewis et al. 2019; Street et al., 2014). Conversely, this means potentially less marginalised groups can be overrepresented relative to the wider community with, for example, women, older people and more affluent groups dominating citizen's juries in some of the studies looked at in a systematic review (Street et al., 2014).

Barriers to participation can include poor physical access for those with mobility issues (e.g. older people or disabled people); Inaccessible venues for those without private transport (disproportionately younger and older groups and those on low incomes); the costs of participation (e.g. travel); issues around language, literacy and numeracy; caring responsibilities and availability to participate; and more immediate priorities for low income households such as feeding family members (Lewis et al., 2019; Pennington and Corcoran, 2018).

Interventions targeting specific areas can also see barriers to participation emerge through the physical characteristics of neighbourhoods, interactions of social and spatial disadvantage, and place-based forms of stigma. Lewis et al.'s (2019) evaluation of the Big Local programme (see above) observed practical challenges such as the geography of target areas where major roads cut off some neighbourhoods from core programmes hubs and activities. Social and spatial inequalities also meant some residents identified with subareas rather than the target area as a whole. This sometimes manifest as forms of 'territorial stigma' where affluent residents or those living in less disadvantaged roads were unwilling to engage with a programme defined by its focus on disadvantaged communities. This highlights how the potential for collective action to promote community wellbeing can be undermined by a lack of shared identifies and circumstances in particular places.

Where activities are tokenistic or fail to recognise and act upon barriers, power asymmetries and inequalities, negative impacts can arise including: conflict between participants, and with the wider community; loss of trust in authorities; and emotions such as frustration, disappointment, fatigue and distress. This is not just about non-participation as active participants can also feel marginalised where protected characteristics and needs are not fully accommodated. Pennington and Corcoran (2021) cite one study, for example, where disabled participants were more likely to experience consultation fatigue, distress and frustration due to the physical and psychological strain of accessing and participating in decision-making processes. However, they also note **the otherwise complete lack of evidence on how the impacts of involvement in community decision-making are distributed across different socioeconomic, ethnic, or other potentially disadvantaged groups despite the large number of studies focussing on those groups**. This highlights a clear gap in how the potential wellbeing benefits of participatory democracy are shared across different groups and the potential to produce or reinforce inequalities.

Dacombe and Parvin's (2021) review of democratic theory also sounds a note of caution about participatory democracy in observing that some minimal (elitist) democratic proponents resist the idea that democracy should aim at full participation. One reason is that, while structural inequalities may prevent some people from participating, many more choose not to be involved, finding individual fulfilment, membership and identity in other preferred sources. Though not explicitly drawing on notions of wellbeing, this argument could be seen to challenge any notion that active participation is a fundamental contributor to wellbeing by providing a sense of citizenship and individual identity ('self-realisation'). That said, there was no evidence in all the papers reviewed to support this notion that non-participation was voluntary and shaped by alternative preferences.

Dacombe and Parvin's (2021) paper also notes that it is not yet well understood if, and how, inequalities in participation impact on the quality of democracy and the "subsequent benefits" (Dacombe and Parvin, 2021: 155) for low-income groups compared to the rest of the society. At the very least, one way of reframing this is that the implications of any 'democratic deficit' driven by structural inequalities for the distribution of wellbeing benefits – generated either through the process of participation or the outcomes it produces – is not well understood.

How inequalities shape trust and voice in representative democracy

This section focuses on representative democracy understood as the formal democratic structures and processes associated with electoral politics including the actions and services delivered through democratically accountable forms of governance (national and local governments). This includes perceptions of governance, including trust and the extent to which citizens feel representative democracy is responsive to their needs and concerns.

The relationship between democracy and wellbeing is often explored through international comparative studies that look at the correlation between subjective wellbeing – usually aggregated to national level - and participation in, and attitudes towards, the structures and institutions of representative democracy. For example, (Helliwell et al., 2018) assess the extent to which governance quality contributes to life satisfaction. The authors use six measures of good governance, comprising those concerned with the quality of delivery of government services (government effectiveness, regulatory quality, rule of law, control of corruption) and the state of democracy (voice and accountability, political stability and the absence of violence). The authors explore annual subjective life evaluations from 157 countries and conclude there is strong empirical correlation between good governance and national happiness.

Anderson et al. (2022) use a similar method but test a different hypothesis. They explore how health and wellbeing impacts on political participation and attitudes (voting, attendance at demonstrations, working in politics, and trust and satisfaction with government and political efficacy). This reverses the usual focus on wellbeing as an outcome of participation. The study uses European Social Survey which collects data across 29 countries including the UK. Using data on reported subjective health as a measure of wellbeing, the study finds reports of ill health are associated with lower

physical and psychological political engagement, particularly when it comes to attitudinal measures of political engagement, including political trust, satisfaction, and a sense of being able to participate in politics. Moreover, it highlights inequalities across groups as ill health has a significantly more debilitating effect on attitudes and behaviours among women and individuals with lower levels of education and income. This highlights the way that **existing inequalities in health and wellbeing appear to shape participation in representative democracy.**

The value of exploring democratic wellbeing through the lens of individual or, through aggregation, population-level health or wellbeing has, however, come under critical scrutiny. Atkinson's (2021) UK-based theoretical paper on the 'toxic effects of subjective wellbeing' argues that dominant ways of conceptualising and practising subjective wellbeing neglects wider spatial and temporal considerations such as inequality, inter-generationality and sustainability, and the rise of wellbeing as a 'technology of soft capitalism'. It claims that the ONS's **national subjective wellbeing indicators have performed poorly in detecting negative impacts on the collective subjective wellbeing of the nation** that other sources have captured in terms of marked national political turmoil; exposure of major divisions in the country; and on-going narratives of crises across social and environmental domains (as evident for example in political distress and social fractures generated through the 2016 referendum on membership of the European Union). The clear implication for this review is that democratic wellbeing cannot be understood solely through the lens of aggregate SWB.

A number of **place-based studies have explored aspects of democratic wellbeing using a broader range of methods that are more attentive to the way in engagement in representative democracy can be shaped by spatial and temporal factors** including historical experiences of economic decline and marginalisation; socio-economic inequalities and relationships between residents; and the status and stigma attached to particular places. There is a common finding that low levels of economic wellbeing, particularly at a community level in the form of deprivation and decline, is associated with political marginalisation and loss of trust, albeit sometimes tempered by forms of social wellbeing such as social connectivity and resilience.

Dacombe (2021) notes that the relationship between deprivation and low incomes with low engagement, interest or trust in the processes of and structures of democracy is well established. However, the reasons *why* participation is lower in deprived areas is less well understood. Dacombe's (2021) qualitative study of the Blackbird Ley's estate in Oxford, which has low levels of turnout in local elections compared to more affluent wards, highlights a number of potential mechanisms. It suggests a combination of relative physical isolation, the stigmatisation of the estate from outside, and a perception that formal political life was remote and unresponsive to residents' needs "*led to norms of disengagement from the formal structures of democracy*" (Dacombe, 2021: 187).

At the same time, he observed active and positive social connections among residents that, drawing on the work of Koch (2016) on the same estate, supported civic engagement (e.g. organising events, informal provision of services (e.g. befriending schemes) and efforts to improve community facilities) which Koch (2016) describes as "*bread and butter politics*". Reframing this through the lens of the SEED domains, it

seemed that social wellbeing (social relations) could be sustained despite low economic wellbeing (area deprivation) but in ways that tended to channel residents into more active engagement in participatory rather than representative democracy. This was due a lack of trust in the latter due to social norms and outlooks shaped by the estate's physical, cultural and symbolic (reputational) context and features. Interesting, it qualifies wider research suggesting a lack of political trust leads to apathy (e.g. Lee and Schachter, 2019). It indicates, instead, that it may sometimes galvanise some residents but outside of the processes and structures of representative democracy.

McKay et al.'s (2021) place-focussed survey explores the relationship between political trust and perceptions of economic deprivation and social marginalisation. It finds that **deprived and rural areas of Britain have lower 'communitropic trust' which means they are less likely to believe that politicians care about their area.** The accompanying sense of grievance for each type of area is different. Those outside of cities lack trust because they feel socially marginal, whereas people in deprived areas lack trust owing to a combination of perceived economic deprivation and perceived social marginality.

This highlights the need for nuanced and spatially-sensitive accounts of (a lack of) democratic wellbeing; experiences of living in particular places are correlated with political trust but in ways that vary by type of area. It also indicates the need to consider how democratic wellbeing is 'relational' in the sense of being shaped by the perceived status of area. Perceptions of social marginality - where survey respondents felt their area was seen as less important than other areas - were a key correlate of low political trust. Finally, the study found that place-based factors (i.e. deprivation and rurality) had strong and consistent effects on the perceived economic, social and political standing of one's area, while demographic factors did not. Gender and ethnicity had no predictive power while age was only partly significant in their models. They cautiously suggest that this challenges perceptions that it is primarily a particularly demographic - older white men - who are "*hotbeds of political and social discontent*" in recent years. This raises the intriguing possibility that places rather people-based factors may have a bigger role in shaping democratic wellbeing.

Boswell et al. (2022) similarly explore the connection between deprivation, political trust, participation and wellbeing in eight areas of 'nested deprivation' in ways which draws attention to the implications for democratic wellbeing of the spatial distribution of deprivation. Nested deprivation was defined in the sense that case study areas were either small neighbourhoods nested within otherwise affluent towns or hinterlands or relatively larger areas suffering deprivation nested within a more affluent region (the South of England). Using qualitative methods they found, similarly to McKay et al. (2021), strong feelings of economic marginalisation (e.g. lack of jobs or moribund high streets); social marginalisation driven by inequalities ('us and them') that undermined neighbourhood cohesion (e.g. through concerns about immigration); and political marginalisation where residents exhibited a powerlessness to affect politics, with anger higher in the most deprived and densely populated areas which sometimes manifest as not voting in elections.

This strength of feeling was disenfranchising for some yet mobilising for others. The authors noted differences across type of areas, with political mobilisation most likely to endure and be experienced as galvanizing in areas of wider deprivation as the following quote attests:



So, there's a real strong community sense of, we are in this together, but not in that pat way that the Tories did it a few years ago, you know what I mean? Do you remember when they tried to sell us the Big Society, you know what I mean? We're going to take away all the funding of all the projects that we should be doing and leave it up to you guys because you guys are the Big Society, you know what I mean?

By contrast, political mobilisation in smaller pockets of nested deprivation in more immediately affluent areas (e.g. to prevent a school closure or raise cost of living issues with elected MPs) tended to be either unsuccessful or met with a lack of response from elected officials or their representatives, leading to “*a more uniform sense of fatalism about even the potential for political efficacy*” (Boswell et al., 2022: 185).

The study concludes that **residents from deprived communities that already have low levels of social and political capital may find it harder to mobilise effectively around political concerns if deprivation is dispersed and atomised in affluent constituencies where many fellow citizens experience completely different lives**. This once again illustrates the ways in which spatial inequalities can shape the nature of, and access to, democratic wellbeing, particularly at the community level. In this case, the research suggests that the lack of a ‘critical mass’ of similarly concerned residents can stymie collection mobilisation action, with negative effects on individual wellbeing expressed as resignation and fatalism about politics.

Telford and Wistow's (2018: 563) qualitative study of working-class Leave voters in Teesside finds that decisions to leave the European Union were rooted in a “*pervasive sense of systemic political abandonment*”. This centred on the perception that politicians had failed to respond to the problems of an area that had experienced long-term economic decline, working instead to preserve their own interests and those of “big business”. This echoes wider research (Mackenzie, 2018) showing that political alienation, as expressed through the vote to leave the European Union, is an expression of anger and frustration at the histories and experiences of deprivation and a sense of exclusion in working-class communities due to combinations of a ‘neoliberal’ economic system and the more recent harms of ‘austerity’.

Cutting across Telford and Wistow's interviews was a feeling that collective forms of economic and social wellbeing underpinned by feelings of pride, respectability and a sense of purpose, and forged through the shared experiences of working in the steel industry, had been shattered by deindustrialisation. The perceived inefficacy and lack of interest in politicians - especially the Labour party seen as abandoning its traditional role in speaking for working-class interests - in addressing these harms had a subsequent and negative impact on both individual and community-based forms of democratic wellbeing. This manifested as estrangement, resignation and a loss of hope for the economic prospects of children and grandchildren. This study highlights how democratic wellbeing

is intimately related to social and economic wellbeing; how collective wellbeing is shaped by class-based interests, identities and experiences; and the importance of incorporating a sense of a time and space in understandings of wellbeing, both in terms the role of past changes and future expectations in particular places in explaining current wellbeing.

Finally, although this review has not focussed on Brexit, one interesting finding is that, for some, the referendum appeared to have positive effects on wellbeing as a form of direct democracy. Powdthavee et al.'s (2019) study looks at the interaction between subjective wellbeing and voting through the lens of the 2016 referendum on EU membership. It finds both a tendency for those reporting lower life satisfaction in 2015 to express a preference for leaving the EU and, following the referendum, that those who preferred leaving the EU became significantly more satisfied with their lives while those who preferred to remain in the EU became worse off in terms of their usual mental state. It concludes that levels of subjective wellbeing may be both a cause and a result of the 2016 Brexit vote.

One reason why Leave voters may have experienced improvements in subjective wellbeing after Brexit, in least in its more immediate aftermath, was that the referendum was experienced as a rare opportunity to vote for genuine change. Telford and Wistow's (2018) research in a working-class community suggests this was particularly significant for a group who had otherwise lost faith in general elections and the ability of mainstream parties to make a difference to their lives. This suggests that a loss of trust and faith in democracy - all forms of democratic wellbeing - can be restored if formal politics is seen as capable of effecting desired change.



5.4 Conclusion

Enhancing Carnegie UK's conceptualisation of democratic wellbeing

Carnegie UK currently define democratic wellbeing as:



Everyone has a voice in decisions made that affect them. This means having local and national leaders who support participation, foster trust and encourage diversity.

The literature analysed for this scoping review supports the central propositions in this definition. Participation, trust and voice in decisions are key components of democratic wellbeing, as well as attentiveness to inequalities which may exclude some groups or areas from participating in, and benefiting from, different forms of participatory and representative democracy.

The review also suggests ways in which the definition might be further developed or enhanced, either in the core definition itself or supplementary explanation:

- **Citizens and communities should be actively involved in the process of defining wellbeing**, especially as their perspectives may differ from 'expert' practitioners and policymakers. Engagement in this process can be considered a form of democracy in itself. This kind of reflective practice can be built into community projects and activities. One implication is that wellbeing may be context specific, with communities in different times or places likely to arrive at different definitions.
- The potential for individuals and communities to engage in, and secure wellbeing benefits from, **participation in different forms of democracy is intimately linked to enabling and constraining forms of power**. Explicitly recognising these and incorporating a notion of power or empowerment in a definition of democratic wellbeing will draw attention to the structural and institutional factors which shape participation beyond the current focus on 'leaders'.
- **Dynamics of both time and place are important for shaping opportunities to realise democratic wellbeing**. For example, living in places that have experienced economic decline is strongly correlated with low political trust. Low political trust is, in turn, associated with a lack of hope for future generations. This link between past change and future expectations in particular places suggest the need for a definition that is sensitive to both time and place.
- **Collective identities based around shared interests and experiences, including class-based outlooks, shape democratic wellbeing** and, all too often, frustration, anger or resignation when representative forms of democracy are seen to neglect or ignore collective needs. A definition of democratic wellbeing might need to recognise, therefore, that voice and participation matters at both an individual and a collective level, though clearly the latter may include different and even sometimes competing perspectives.

Limitations of the existing evidence base

As acknowledged in the review above, conceptualisations of wellbeing tend to focus on individual subjective wellbeing – often measured as physical and psychological health or life satisfaction – without acknowledging the impact of structural and socioeconomic issues in shaping democratic wellbeing. In-depth qualitative place-based research can act as a corrective for this by highlighting the complex interplay between individual and community-level wellbeing and how this is shaped by a series of social, cultural and economic factors operating at different scales (individual, household, community, societal) across time and place.

Another shortcoming in current literature identified in some of the papers reviewed is that it is not yet well understood if, and how, inequalities in participation impact on the quality of democracy and the “subsequent benefits” or outcomes for low-income groups compared to the rest of the society. At the very least, one way of reframing this is that the implications of any ‘democratic deficit’ driven by structural inequalities in the distribution of wellbeing benefits – generated either through the process of participation or the outcomes it produces – is not well understood.

A further related shortcoming is that not enough is known about the potential for participatory forms of democracy to shape and influence ‘macro’ national-level policies and processes as most of the literature focuses on “less empowered spaces” (Baillie et al., 2022). The capacity of participatory or deliberative processes to influence policy and practice beyond the immediate context (e.g. local areas within which most projects are located) is not well understood. This warrants further empirical and conceptual exploration of the reach and boundaries of influence, the systems and processes through which change is enacted (or not), and how this shapes or limits democratic wellbeing.

Cross-cutting themes

There are clear links between democratic wellbeing and other forms of wellbeing in the SEED framework including:

- The mutually reinforcing relationship between some forms of collective social wellbeing (e.g. social cohesion and social capital) and democratic wellbeing in terms of fostering meaningful engagement in forms of participatory democracy.
- Low political trust and marginalisation tend to be strongly associated with areas of low economic wellbeing, highlighting the importance of place-based trajectories and experiences of economic change in shaping democratic wellbeing.
- Participatory budgeting has the potential to enhance democratic and economic wellbeing, although the evidence reviewed was not conclusive.

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6. Cross cutting issues in the SEED Wellbeing domains

Edward Dallas and Agnes Szydłowska

6.1 Introduction

This review forms part of work commissioned by Carnegie UK from a team of researchers based at Sheffield Hallam University and Simetrica-Jacobs to review existing academic and 'grey' (non-academic) literature on each of the four dimensions of wellbeing in their wellbeing framework.

Carnegie UK commissioned four separate reviews that identify and synthesise existing evidence on the four domains of wellbeing - social, economic, environmental and democratic (SEED) – that form Carnegie UK's conceptualisation of wellbeing. This fifth paper seeks to address issues that cut across the domains.

Carnegie UK promote collective wellbeing which is defined as "being about everyone having what they need to live well now, and in the future". This includes "having friends and loved ones, the ability to contribute meaningfully to society, and the ability to set our own direction and make choices about our own lives"¹⁰. Collective wellbeing is made up of four domains:

- **Social wellbeing:** Everyone can achieve their potential and contribute to society because they have basic needs met. Our basic needs are having access to health and social care, education, housing, transport, digital and childcare.
- **Environmental wellbeing:** Everyone has access to green and blue spaces and collectively we live within the planet's natural resources. This means we protect the environment for future generations.
- **Economic wellbeing:** Everyone has a decent minimum living standard and can absorb financial shocks. This means financial security now and being able to maintain adequate income throughout their lifetime.
- **Democratic wellbeing:** Everyone has a voice in decisions made that affect them. This means having local and national leaders who support participation, foster trust and encourage diversity.

Balance and interactions across domains are seen as central to collective wellbeing which occurs when "social, economic, environmental and democratic wellbeing outcomes are given equal weight".

¹⁰ Heydecker, R. et al (2022)

This paper provides an overview of cross-cutting issues and common themes emerging from the four accompanying scoping reviews on social, economic, environmental and democratic wellbeing. It is not intended to be a separate scoping review but instead seeks to extract issues that have relevance across the domains. Three key topics are considered

- **Aggregation/Trade-offs** between and within different domains of wellbeing, including aggregation of wellbeing across individuals.
- **Inequalities/Distribution** of wellbeing benefits and disbenefits between social and demographic groups.
- **Past, current and future** feedback effects and trade-offs in wellbeing over time.

We then consider specific linkages between domains that are important to consider and reflect in any future work.

As well as using the findings of the reviews for each domain, the paper also reviews these issues in the context of how the UK Government and the devolved administrations consider wellbeing within the policy making process.

A range of guidance documents need to be considered when assessing how UK central government and the devolved administrations currently measure and operationalise wellbeing in public policy context. These include:

- HM Treasury Green Book (2022) and more detailed resources, relevant for the appraisal of specific types of intervention and/or focused on specific evaluation techniques, such as:
 - DfT Transport Analysis Guidance (TAG)
 - DEFRA Enabling Natural Capital Approach (ENCA)
 - Wellbeing Guidance for Appraisal: Supplementary Green Book Guidance (2021)
 - ONS Measuring National Wellbeing framework
 - Procurement Policy Note (PPN06/20)'s Social Value Model, which sets out an approach for the inclusion of wellbeing considerations in the public procurement procedures.

The Green Book provides the overall framework for UK central government appraisal of projects, policies and interventions and hence is considered as the primary source.

6.2 Aggregation

In considering concepts of wellbeing, there is a need to consider how individual level metrics of wellbeing operate at and aggregate to a community or UK level. The question of aggregation goes hand-in-hand with the issue of trade offs between specific aspects of wellbeing.

In the Green Book, overall welfare and wellbeing are referred to as social value – a key concept which captures all costs and benefits to the society, including effects on the economy, environment, culture, health, justice, etc. Social value is, therefore, closely aligned with the welfare economics' notion of a social welfare function which the decision maker aims to maximise.

The Green Book recommends that each intervention's contribution to the overall social value be assessed using social cost-benefit analysis (CBA). This requires the positive and negative impacts of the intervention to be considered alongside the intervention's cost, with each item measured and valued in monetary terms wherever possible and practical. Monetisation in this case provides a means to aggregate and consider trade-offs using a common metric.

Implicitly, this approach assumes a **utilitarian social welfare function**, whereby the preferences of each society member are represented through a money-metric utility and aggregated simply by summing up across all individuals. As a result, all wellbeing gains and losses – across different domains as well as between the 'winners' and 'losers' – are netted out against each other.

Within the Green Book and the associated Supplementary Guidance on Wellbeing in Appraisal, there is strong emphasis on **subjective measures of wellbeing** as a means to assess and value changes in people's quality of life. These measures also sit within the ONS's National Wellbeing Framework. Subjective wellbeing valuation is one of the Green Book recommended methods for measuring the social value of outcomes which are not traded in standard economic markets, and whose value cannot be inferred using revealed preference (whereby the value of a non-market outcome may be reflected in the price of a related market good)¹¹.

When considering subjective wellbeing, the approach to aggregation also aligns with the key principles of social welfare maximisation. Moreover, it effectively internalises the trade-offs that individuals are willing to make between different domains of wellbeing. Total social value is seen as the sum of the affected individuals' subjective wellbeing, which in turn is derived from the individual's experience across various domains.

It has also been noted that the evolution of both objective and subjective measures of resources (e.g. income or objectively measured mental health on one hand, vs satisfaction with income/financial situation or satisfaction with life on the other hand) tends to follow

¹¹ The approach is based on one of the ONS four personal wellbeing measures – life satisfaction (Overall, how satisfied are you with your life nowadays?). Survey responses to this question provided alongside information on the relevant outcomes (for example, employment) in large national surveys such as Understanding Society or the Annual Population Survey are used to infer the impact of the outcome on subjective wellbeing using statistical analysis. The impact coefficient is then converted into monetary units – the Supplementary Guidance provides details of the recommended conversion approach based on the concept of a WELLBY, or wellbeing-adjusted life-year

similar trends over an individual's life-course. This suggests that either could be used as valid indicators of the evolution of living standards over time.

On the other hand, relative and/or subjective measures of satisfaction with income have been suggested to provide a better reflection of inequalities within the society, such as different health levels, than objective indicators - likely due to the relative measures' sensitivity to the extent of resources required to meet an individual's needs under different circumstances.

Within the **economic domain**, aggregation is traditionally considered as being achieved by considering the sum of whichever measure (income, wealth, consumption etc) is considered most appropriate. However, amongst the literature reviewed, it is also noticeable that work and the nature of someone's employment forms a crucial element of wellbeing within this domain. Assessing aggregate performance in this regard requires a more multi-faceted approach to the issue.

Examination of the **social domain** highlights that subjective measures of wellbeing may not adequately capture social wellbeing. It is important to acknowledge that individual level metrics are a building block in understanding performance within the social domain. Issues such as connectivity¹² and cohesion that are significant in the social domain do feed into individual level wellbeing. However, there are aspects where social wellbeing is more than the sum of its parts and hence an exclusive focus on individual level metrics may not provide a full picture.

The issue of aggregation is particularly difficult to consider with regard to the **democratic and environmental domains**. Concepts of engagement and process are important aspects of the democratic domain. However, no common standard exists to consider aggregate participation across a range of different processes. The environmental domain raises the question of planetary wellbeing and the relationship between human wellbeing and the wellbeing of other species.

Overall, the reviews of the four domains highlights that critical aspects of wellbeing may be difficult to capture through approaches to aggregation or valuation that focus solely on individual level metrics. However, individuals still retain preferences over aspects of changes in this community-level wellbeing and hence, if correctly set out and defined, their willingness to pay for improvements in it could be elicited through stated preference approaches.

6.3 Inequalities and distribution

The question of aggregation is closely linked to consideration of inequalities in the distribution of wellbeing.

¹² Simetrica research for DCMS, for example, has shown that enhanced digital connectivity has a positive impact on individual's wellbeing. (DCMS, 2018)

The Green Book recommends that the distribution of social value across society members is considered in appraisal. It considers this in the context of differential effects on protected groups specified under the Equality Act 2010, as well as place-based effects affecting specific parts of the UK.

However, while it is possible in principle for the relative importance of different wellbeing domains to differ between society members within social CBA, the Green Book is relatively limited in specific approaches to considering ways to quantify distributional impacts.

One possible way of accounting for such differences, set out explicitly in the Green Book, are the so-called **welfare weights**. These account for the observation that £1 has a different welfare impact (marginal utility of money) for those on low incomes than those on high incomes. The Green Book sets out an approach to calculating such weights and indicates that such an approach should raise the value of transfers to the poorest quintile by a factor of around 2.5 compared to the median taxpayer.

The Green Book does also recommend accounting in the appraisal for wider non-monetisable impacts of policies and interventions, such as fairness and process experience for potential beneficiaries. However, given the Green Book's stated focus is on quantification and monetisation of benefits wherever possible, such non-monetised impacts are often viewed as secondary. The review of the Green Book that was conducted in 2020 concluded that 'while the core methodology was not by itself found to skew outcomes ... current appraisal practice risks undermining the Government's ambition to "level up" poorer regions and to achieve other strategic objectives [including net zero]¹³. It called for a greater focus on the Strategic Case¹⁴, with a stronger emphasis on consideration of wider impacts that may be harder to capture in individual level metrics.

In UK central government transport appraisal, the DfT **Distributional Impact Assessment** guidelines¹⁵ indicate that differential impacts of an initiative on different groups are a core concern from an equalities point of view. Eight types of intervention impacts need to be considered as part of distributional analysis: user benefits, noise, air quality, accidents, severance, security, accessibility and personal affordability, across a range of vulnerable groups such as: low-income households, children and young people, older adults, population with disabilities, BME (Black and Minority Ethnic) population, households without access to a car, carers.

The Distributional Impact Assessment guidance states that a screening process should be undertaken to ascertain whether the distributional impact of each of the eight impacts listed above should be assessed. Where a full assessment is deemed proportionate, a quantitative measure – wherever available – of the proportion of overall costs and benefits accruing to the relevant affected groups is compared against the shares of these

13 Green Book review 2020: Findings and response. (2020).

14 The Strategic Case is one of the five business cases that HM Treasury recommends projects undertake, with the others being the Economic Case, the Commercial Case, the Financial Case and the Management Case. There has traditionally been a strong emphasis on the Economic Case which assesses whether the economic returns of project exceed the expected costs. The Strategic Case is intended to capture a more holistic assessment of the impact of the project, placing it within the context of wider strategic objectives

15 TAG unit A4-2 in Transport Analysis Guidance (TAG).

affected groups in the local/affected population. Based on this comparison, each of the considered impacts is classed between “large adverse” and “large beneficial”.

To move beyond this to a more flexible approach to distributional issues, there is the option to relax the underlying assumption of a utilitarian social welfare function that underpins government policy. A more generalised **Atkinson social welfare function** allows for the incorporation of weights that reflects societal preferences around who benefits.

The four domain reviews all note the need to consider distribution as part of any assessment of wellbeing. In the review of the **economic domain**, the report of the Stiglitz-Sen-Fitoussi commission (2009) refers to the need to ‘get beneath’ the average. The impact of persistence of wealth on other measures of wellbeing and their distribution is also examined. The division of labour at home across different groups is another issue that plays into distributional considerations.

In the **environmental domain**, there is a particular focus on groups that have been found to gain/lose across multiple subdomains, e.g. in lacking access to greenspace, suffering the impacts of pollution and being exposed to climate-related risks. There is also a strong notion that environmental wellbeing is often characterised by conflict with a need to consider who must take a negative hit to their wellbeing in order to facilitate a positive impact elsewhere.

In the **social domain** the need to focus on exclusion, segregation and social cohesion in deprived neighbourhoods is noted. Patterns are clear in the extent of cohesion when considered by social/demographic factors.

In the **democratic domain**, patterns of community participation can be identified across social/demographic group and levels of political trust and marginalisation can also be seen as being linked to wider issues of deprivation.

Ultimately the key empirical question is whether the distribution of wellbeing (however defined) in society affects individuals’ level of wellbeing. The literature on this question is pretty clear. Schwarze and Härpfer (2007), for example, found a significant negative effect of income inequality on life satisfaction using data from the German Socio-Economic Panel Study (1985-1999). Similarly, Dickinson and Morrison (2021) found that the levels of life satisfaction reported by individuals was lower in communities with more inequality in subjective wellbeing. This paper is a notable example of a study where inequality is measured in terms of the distribution of subjective wellbeing rather than income.

The implication that the distribution of wellbeing is important suggests that there is a need to account for changes in such a distribution when assessing policies or programmes. One implication is that outcomes should be weighted or valued differently depending on the characteristics of beneficiaries. We are aware of unpublished work¹⁶ that has developed such a set of weights based upon relative levels of deprivation. The weights derive from empirical work to assess the general public’s preferences for more equitable outcomes in the distribution of the benefits of transport infrastructure. Given

16 The work was conducted by Simetrica-Jacobs for National Highways and subsequently refined further for Transport for the North. They have not, as yet, been adopted within government guidance but provide evidence that approaches can be devised that better reflect distributional issues within a cost benefit analysis framework

the findings that the public does have positive preferences in favour of more equitable outcomes, the weights effectively uprate benefits accruing to more deprived areas while downrating benefits to more affluent areas.

Overall, adopting such a weighted approach could allow for the standard cost benefit analysis framework to be augmented in a way that takes a more flexible approach to the aggregation of wellbeing across individuals and addresses some of the concerns around distributional issues.

6.4 Intertemporal Considerations

The standard economic approach to considering intertemporal issues is to calculate **net present values**. This is the case within the Green Book, whereby benefits and costs which occur further in the future are discounted to reflect the **concept of time preference**, that is the idea that individuals prefer experiencing benefits sooner rather than later. The Green Book further recommends applying discount rates that decrease over time, to reflect uncertainty about the future values of time preference. This helps avoid any long-term effects and risks being given insufficient consideration simply because they are expected to occur in a more distant future.

The Green Book does also recommend a careful consideration of the potential role of **adaptation effects**. This refers to whether individuals/communities learn to cope with an adverse outcome and/or how long any positive wellbeing effects from an outcome are expected to persist. There is still relatively little empirical evidence on the extent of adaptation in wellbeing to specific outcomes with a handful of papers making use of longitudinal data in Germany and the UK (Lucas et al., 2004, Clark et al., 2008 and Clark & Georgellis, 2012). The latter of these papers concludes that “[a]daptation to marriage, divorce, birth of a child and widowhood appears to be rapid and complete, whereas this is not the case for unemployment”.

Further guidance on the consideration of long-term trade-offs between current and future wellbeing can also be found in the Defra ENCA toolbox, which outlines the available evidence on both the stock and flow of social value associated with selected natural resources.

The **environmental domain** raises the most significant challenges in considering intertemporal impacts. Considerations such as how to value ecological benefits over time or young people’s agency in influencing climate change discourses make us focus on understanding the relationships/transmission mechanisms between wellbeing across different points in time.

The Green Book Supplementary Guidance on Accounting for the Effects of Climate Change (DEFRA, 2020) notes the challenges raised by some of these issues. The uncertainty, presence of non-linearities (tipping points) and interconnectedness around decisions need to be considered. It highlights the need for supplementary approaches to the standard cost benefit analysis to support decision making around long-term issues such as climate resilience. Qualitative approaches and approaches based upon a range of scenarios may be needed to inform decision making.

In the **social domain** social connectedness has a role in building social capital and promoting long-term wellbeing. Different patterns of cohesion over the life course may have different impacts on individual wellbeing. It is not just forward looking. There is also likely to be a role for cultural heritage or understanding community history to foster development of social cohesion in the present.

The role of housing wealth in driving inequalities over time and between generations is critically important in the **economic domain** and civic engagement/participation in decision-making has an impact on future outcomes in the **democratic domain**.

Ultimately the empirical question is whether the current distribution of wellbeing affects future wellbeing or, conversely, whether current wellbeing affects the future distribution of wellbeing.

6.5 Specific links between wellbeing domains

This section highlights those findings from the four individual-domain scoping reviews which provide evidence of interdependencies, feedback loops or causal links between different wellbeing domains. In reality, there are too many such linkages to explicitly list them all but the below sets out those which were raised in the preparation of the reviews and subsequent discussions and workshops.

It is useful to conceive of 'tradeable' and 'non-tradeable' wellbeing dimensions (e.g. access to green space may be acceptable as compensation for lower income but not high air pollution). This suggests that the extent to which domains of wellbeing can be traded off against each other is context dependent. Trade-offs are often hidden. A lack of adequate wellbeing measures and/or a failure to capture wellbeing for certain groups make it difficult to analyse the full range of impacts or judge the extent to which trade-offs are implicitly occurring.

Trade-offs also exist within domains. With the economic domain, for example, these are highlighted in the review when reflecting on the world of work, in particular with regard to flexibility versus wages as well as flexibility versus stress.

Examples of trade offs that occur between domains include:

Social and Environmental:

- Role of environmental resources (e.g. access to nature, sustainable infrastructure) and environmental risks (e.g. flooding, climate change, pollution – air, water, noise) in shaping community cohesion and belonging.
- Role of community-based action for environmental sustainability (and better alignment between environmental and human wellbeing).

Social and Economic:

- There is a potential tension between seeing housing as a form of economic wellbeing (wealth) and as a form of social wellbeing (dwelling, security, health, belonging etc).
- A strong connection can be seen between poverty, poor housing and poor health.
- Specific actions to boost productivity (and hence economic wellbeing) may have adverse impacts on foundations of social wellbeing such as mental and physical health.

Social and Democratic:

- A sense of belonging and connectedness that feeds social wellbeing can be developed through fostering meaningful participation in political processes.
- There is a critical role for trust and social connectedness in enhancing political engagement.

Economic and Environmental:

- The conflicts between the environmental and economic wellbeing are perhaps the clearest - environmental risks from industrialisation are clearly being felt.
- However, there are impacts at the more micro level with deprivation/marginalisation potentially affecting attitudes towards environmental sustainability.

Economic and Democratic:

- Democratic participation in workplaces plays into economic wellbeing through an individual's satisfaction with their employment.
- Low political trust and marginalisation tend to be heavily associated with areas of low economic wellbeing.
- Participatory budgeting has the potential to enhance democratic and economic wellbeing, although the evidence reviewed was not conclusive.



6.6 Conclusions

The scoping reviews of the individual wellbeing domains highlight the need for careful consideration of issues of aggregation, distribution and intertemporal aspects. These all challenge the conventional economic approach based upon cost benefit analysis. However, as set out above, there is scope for greater flexibility to be introduced into such an approach to better reflect some of these challenges.

We note that trade-offs and feedback loops across the four domains are such that the notion within Carnegie UK's definition of collective wellbeing that the domains should have equal weight is difficult to maintain. Gains in one may not offset losses in others, so there may be a need for judgement as to which type of wellbeing to prioritise. And positive interventions in one domain may produce positive feedback elsewhere. While it is important that all the domains are considered, equality across the domains is a normative choice.

There are existing frameworks and tools that are alert to the interrelationships between domains. Doughnut Economics (Raworth, 2017) explicitly recognises that social needs (in practice a mix of social, political and economic outcomes) should not be achieved at the expense of overshooting planetary environmental boundaries. A more explicit conceptualisation of these links within Carnegie UK's wellbeing framework would be useful.

Overall, however, when considering measurement and assessment of wellbeing, we would be cautious about seeking to move away from a CBA-based approach entirely, preferring to identify ways to enhance it where possible. Some of this will be technical (e.g. distributional weighting or more nuanced intertemporal considerations) but some will be more narrative-based with an acceptance that certain elements of wellbeing cannot be adequately captured but remain important. This approach retains rigour while also developing the ability for society to take a nuanced approach that reflects the broader considerations of wellbeing.



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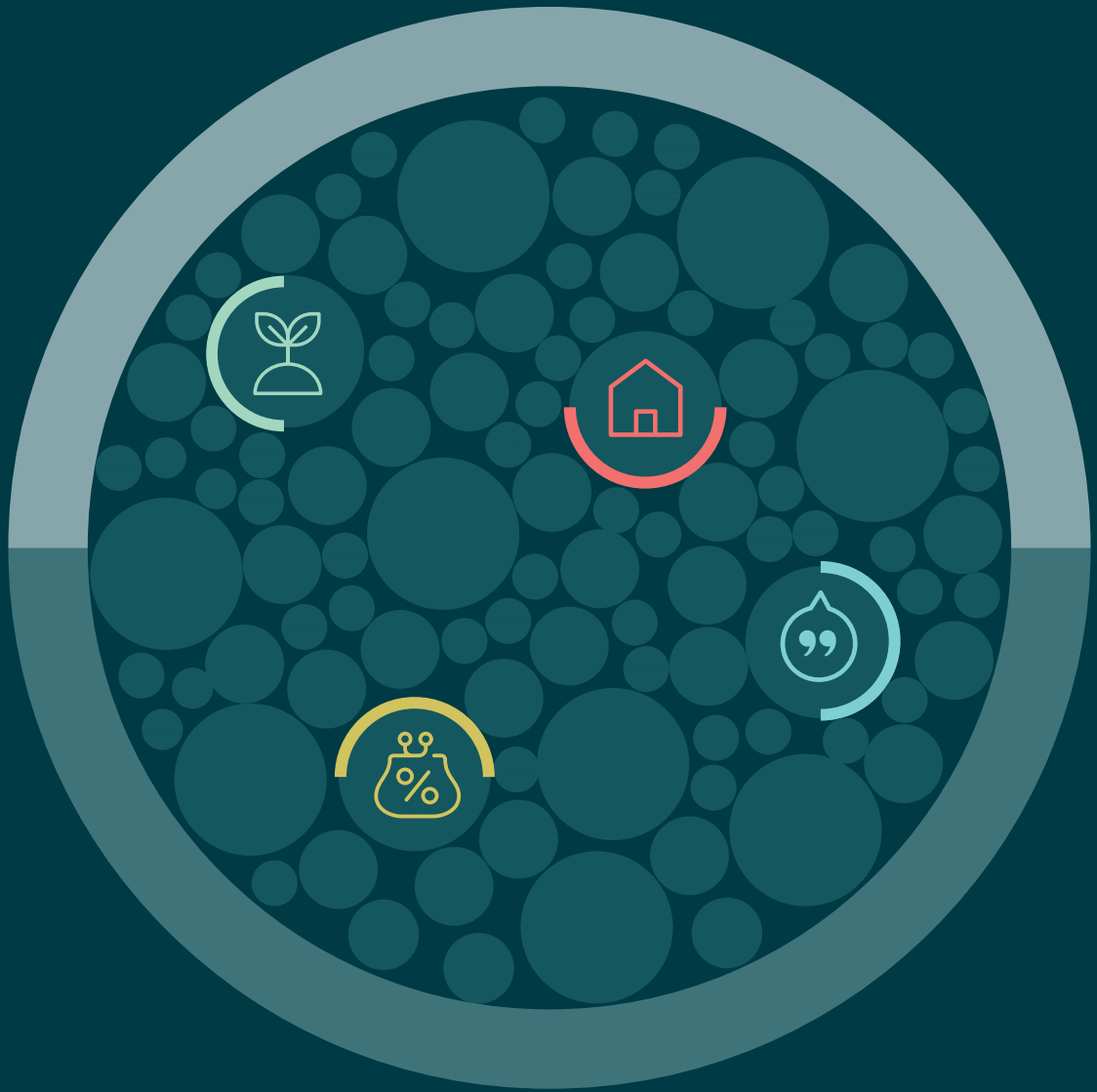
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