

HAPPY LIFE EXPECTANCY ASSOCIATED WITH VARIOUS MENTAL DISORDERS

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1 INTRODUCTION

Psychological research has a tendency to focus on the negative aspects of functioning, while ignoring the positive (Seligman & Csikszentmihalyi, 2000). The new 'positive psychology' movement aims to correct this bias, and focuses not only on what goes wrong in life, but also on what makes life worthwhile. However, if psychology is to enhance the well-being of the population, than it should focus on people that have most room for improvement.

2 METHOD

We studied who is unhappy in a representative sample (N = 7076) of the Dutch population, in the NEMESIS study (Bijl et al, 1998). The respondents were interviewed using the Composite International Diagnostic Interview (Wittchen et al, 1991) to assess mental disorders. Happiness was measured using a single question on how often respondents had felt happy during the past four weeks. The scale ranged from 1 = never felt happy, 2 = rarely felt happy, 3 = sometimes felt happy, 4 = often felt happy, 5 = usually felt happy, until 6 = always felt happy.

3 RESULTS

It turns out 57,7 % of the people who never or rarely felt happy during the past four weeks suffer from a mental disorder and an additional 26,9 % have a history of a mental disorder. We mention lifetime prevalence because psychopathology is associated with the residual functional disability when a disorder is cured or in remission (Bijl & Ravelli, 2000).

We have calculated for the first time the loss of happy life years that is caused by different mental disorders. In this measure life-expectancy in years is multiplied by average happiness on a scale of 0 – 1 (Veenhoven, 1996). The average happy life expectancy for people who do not have a history of mental disorder is 63,2 years in the Netherlands.

The one-month prevalence of different mental disorders and the associated levels of happiness was used in the calculations of the loss of happy life years for

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different mental disorders It was taken into account that unhappiness is associated with a loss of longevity (Lyubomirsky et al. 2005, Veenhoven, 2008). The median group that had felt happy sometimes or often was given an average life expectancy.

The most happy group (usually of always happy) got an additional 2,5 months of life and the most unhappy group (never or rarely happy) lost five life years. This is roughly what the available research tells us. We did not add an extra loss of life years for the people with addictions, although unhealthy drinking and drugs use can compromise life expectancy (See [Table 1](#)).

It is not possible to add up the total loss of happy life years for the different disorders, to get the total sum, because 4,6 % of our respondents have more than one mental disorder. It is especially the existence a comorbid mood disorder that enhances the loss of happy life years of the anxiety and substance abuse disorders.

4 CONCLUSION

The loss of happiness associated with mental disorders is enormous and shows that treating mental disorders probably offers the best changes to enhance the happiness of the population. The most positive psychology imaginable would be to find better ways to treat people with disorders.

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Table 1

The burden of mental disorders in loss of happy life years for the population of the Netherlands.

Diagnosis	Loss in happy life years for one person ³	% of the population affected	Total loss of happy life years for the Netherlands
Any mental disorder during the past month	14,2	15,7	36,6 10 ⁶
Any mood disorder during the past month	31,8	4,0	21,1 10 ⁶
Any anxiety disorder during the past month	14,6	9,8	23,6 10 ⁶
Any substance abuse disorder during the past month	10,1	4,8	7,9 10 ⁶

³ This is a fictive person that will suffer from a mental disorder during his or her whole life. In reality the disorders come and go and the burden is spread among more people.