

HAPPY-PEOPLE-PILLS AND PROSOCIAL BEHAVIOUR

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ABSTRACT

There is evidence from the empirical sciences that ‘happiness’ – understood in the social scientists’ sense of ‘positive affect’– leads to prosocial behaviour: the happiest amongst us are more likely to help others. There is also scientific evidence of a genetic component to positive affect: genetic differences can account for some of the observed variances in positive affect. Let us think of ‘happy-people-pills’ as pharmacological agents, modeled on those with a genetic predisposition for high levels of positive affect, which will promote positive moods and emotions in ‘normally’ happy persons. It is argued that if we want to increase prosocial behaviour then we should (other things being equal) promote the use of happy-people-pills. Since we should increase prosocial behaviour, we should (other things being equal) promote the use of happy-people-pills. In a short paper like this, I cannot possibly show that everything else is equal. However, I hope to establish at least a prima facie case for policy that permits the creation and distribution of happy-people-pills.

Perhaps one of the more surprising results of the explosion of scientific interest in happiness is the discovery of a causally symmetrical relationship between happiness and helping others (prosocial behaviour). That is, the happiest amongst us are more likely to engage in prosocial behaviour, and those who engage in prosocial activities are more likely to be happy. This causal symmetry suggests tantalizing prospects for ethics and policy. On the one hand, if we could encourage people to be more prosocial then the causal symmetry finding suggests people will be happier. On the other hand, if we can use the results of the scientific investigation of happiness to make it easier for people to be happy, then prosocial behaviour should increase. In this paper we will examine the idea that it may be possible to boost happiness by utilizing another surprising result from contemporary happiness research: genetics. Genetics play a large role in the level of individual happiness. I will

argue that there is good reason to suppose that advances in genetic and pharmacological sciences could be used to create pills that would boost the average level of happiness for most of those in the ‘normal range’ of happiness. Thus, a plausible conjecture based on the aforementioned causal symmetry thesis is that increasing our level of happiness through pharmacological intervention will lead to a boost in the average level of prosocial behaviour. Admittedly, this is counterintuitive: when people think of promoting happiness with pharmacological agents they typically believe that prosocial behaviour will not increase, and indeed, will probably decrease. After all, received wisdom tells us that promoting ‘happy pills’ is tantamount to an excuse for people to withdraw into a ‘hedonic haze’ from others. The epitome of this view of course can be found in Aldous Huxley’s novel, *Brave New World*, where it seems the point and purpose of the lives of so many is to live in a soma stupor. Readers will recall, for instance, that Linda lives in a soma haze, oblivious to the tragic plight of her son, John the Savage, as he struggles to adjust to ‘civilized’ life. Received wisdom here conflicts with the conjecture, based on our best science, that happy pills should increase, not diminish, prosocial behaviour. We might think of this as the ‘pharmacological puzzle’: would pharmacological intervention aimed at boosting happiness increase or decrease prosocial behaviour? I will argue that there is good reason to suppose prosocial behaviour will increase, and further, that increasing prosocial behaviour is at least some reason to permit the creation and distribution of pharmacological agents designed to boost our happiness. Towards the end I will offer some explanation of the pharmacological puzzle.

1. The Need For Prosocial Behaviour

The first step in our argument, that our world could use more prosocial behaviour, is one that I take to be generally accepted. There can be no doubt that our world is, morally speaking, a fixer-upper. To cite but a few examples: today millions of children in the two-thirds world will go to bed hungry, today women on every populated continent will be raped, today more of the environment will be destroyed by human activity, and today – even in the most materially wealthy nations – many elderly persons unable to care for themselves will not eat, or will eat a cold

dinner alone. Of course, unfortunately, such examples could be multiplied seemingly without end. Yet, it seems our world could be much worse but for the concerns and industriousness of some: people volunteer their time to collect money for organizations like Oxfam for the express purpose of helping underprivileged children. Volunteers at universities walk women home from campus late at night. Community groups spend weekends cleaning up polluted rivers. The volunteer association, Meals on Wheels, provides hot meals to shut-ins, etc. True, as with just about any human activity, not all efforts to help others are successful. Despite such blunders, few will disagree that, overall, our world is better¹ for (most) of these efforts. Still, some have disputed this. Thomas Malthus, for example, thought that feeding the poor would do more harm than good in the long run. It is not my intention to argue the point here, rather, let me simply record my agreement with the widely held view that most prosocial efforts most of the time have a net positive benefit for recipients.

2. How to Promote Prosocial Behaviour

We said that our world is often made better by prosocial efforts. So, it seems reasonable to suppose that our world would be better still if there was even more prosocial effort. That is, other things being equal, if more children were fed, if more people volunteered to help escort women home late at night, if more people worked to save the environment, if more people helped deliver hot meals to shut-ins, etc., our world would be morally better. So, how might we encourage more prosocial behaviour? One common means used in pursuit of this end is to remind people of their prosocial duties, e.g., some non-profit agencies show emaciated children from the two-thirds world on television commercials as a means to remind people that there is an urgent need for monetary contributions. The strategy we want to explore is one that does not directly engage an appeal to duty, but instead seeks to leverage self-

¹ For our purposes we can leave the notion of a 'better world' at a fairly intuitive level. At the level of theory there may be some disagreement as to why such outcomes such as feeding children should be described as better, e.g., because it is a world with greater utility, or perfection for example.

interest: granting people their desire to be happier should lead to increased prosocial behaviour.²

It is worth pausing here to think about what is meant by 'happiness', since the term is notoriously ambiguous.³ We shall follow psychologists who speak of happiness in terms of 'positive affect', meaning a preponderance of 'positive moods and emotions' (Lyubomirsky et al., 2005). In this sense, 'happy people' tend to be ones whose moods we would describe as 'upbeat' and who tend to experience a prevalence of positive emotions such as joy and contentment.

3. Prosocial Behaviour and Happiness

There is a large body of empirical literature that indicates a correlation between happiness and prosocial behaviour. For instance, a recent large meta-study by Lyubomirsky et al. concludes, '...happy people are inclined to be kind and charitable people' (2005: 828). The robustness of the conclusion is supported by the fact that the data were collected from diverse samples, e.g., high school students (Magen and Aharoni 1991), male twins (Krueger et al., 2001) and psychology undergraduates and volunteers (Feingold, 1983). The studies tended to operationalize prosocial behaviour in different ways, but were recognizably forms of what most of us would understand as 'helping others' (Feingold, 1983; Magen and Aharoni, 1991).

While these studies indicate a correlation between happiness and prosocial behaviour, it is a truism that correlation is not causation. Nevertheless, correlation is necessary for causation (in the absence of confounding variables), and so to this extent these studies provide *some* indication of a causal connection. Further evidence of a causal connection stems from longitudinal studies. A panel study by Thoits and Hewitt (2001) showed that an increase in happiness follows an increase in prosocial behaviour. Additional evidence of a causal connection

² Cf. Nozick (1981) on ethical 'push' and 'pull'.

³ See Sumner (1996) for clarification of some of the uses of 'happiness'. See Walker (2007) for why 'preponderance of positive affect' or 'happy disposition' (Sumner, 1996) is the most relevant notion for discussing pharmacological enhancement.

comes from a large-scale natural experiment reported by Meier and Stutzer (2008). The reunification of Germany caused the collapse of much of former East Germany's volunteer structure. Controlling for other variables, Meier and Stutzer found that reduced opportunities for volunteer work led to a decrease in happiness. More traditional experiments also support this conclusion, e.g., even small 'random acts of kindness' significantly boosted subjects' happiness (Boehm and Lyubomirsky, 2007; Switzer et al., 1995; Fordyce, 1983).

The evidence we have just examined suggests that the arrow of causality runs from prosocial behaviour to happiness. However, longitudinal and experimental evidence also suggests that happiness causes prosocial behaviour. Thus, the same panel study mentioned earlier found that those who are happier at an earlier time are more likely to exhibit prosocial behaviour in the future (Thoits and Hewitt, 2001). A number of laboratory experiments also confirm the idea that happiness causes prosocial behaviour. The results are sometimes summarized as the 'feel good, do good' phenomenon. For example, experimenters might arrange it such that an experimental subject 'just happens' to find a coin. This typically provides a boost to positive affect in subjects, and the subject is subsequently more likely to engage in prosocial behaviour.

4. Nurture, Policy, Happiness and Prosocial Behaviour

Scientific research on happiness and prosocial behaviour indicates that we are in the enviable position where moral obligations and enlightened self-interest are not antagonistically related. For example, we might suggest that if people want to be happier they should engage in prosocial activities, for example, volunteering a few hours a week might improve their positive affect. I think a similar conclusion can be reached when we think about how we might leverage scientific investigation into the efficacy of psychological interventions that attempt to increase positive affect, which sometimes are discussed under the rubric of 'positive psychology'. Positive psychology claims that it is possible for some individuals to boost positive affect with practice. One area in which positive psychologists make this claim is one that we already mentioned, namely, prosocial behaviour. That is, positive psychology points out that we can make use of the 'do good, feel good phenomena' to increase our

happiness. Other avenues of attitudinal and behavioural reform include trying to cultivate a sense of optimism, 'living in the present', savouring life's joys, committing to goals, and practicing religion and spirituality (Lyubomirsky, 2008). If we accept this, and the idea that happiness leads to prosocial behaviour, then promoting the results of positive psychology should lead to increased prosocial behaviour.

A number of policy options suggest themselves here. With respect to making citizens happier through prosocial behaviour, perhaps the strongest option would be for governments to require a certain number of 'volunteer' hours. (Obviously, one could question in what sense the hours are voluntary). Another possibility is for governments to encourage, but not obligate, such service, e.g., perhaps providing tax breaks for those who volunteer. Governments could mount public message campaigns, along the lines of publicly funded anti-smoking campaigns, suggesting to citizens that prosocial behaviour is a good means to increase happiness. Perhaps the weakest policy option is that governments should permit private individuals and organizations to promote the idea that prosocial behaviour leads to happiness. This does not require any active participation on the part of governments, merely non-interference with non-governmental efforts. For example, this policy could require that governments should not look to suppress or otherwise coerce a local food bank looking for volunteers that mounts a 'do good by working at the food bank, and you will feel good' campaign. Similar policies suggest themselves with respect to attempting to indirectly increase prosocial behaviour by incorporating the results of positive psychology into policy. For example, governments could mandate attendance in positive psychology class (perhaps as part of high school graduation requirements). A slightly less invasive approach would be for governments to merely subsidize positive psychology classes and books. The weakest policy option we should consider is that governments not interfere with attempts by individuals and community organizations to promote the use of the results of positive psychology.

I take it that there is widespread agreement that policy should allow at least this weakest alternative, that is, to permit private individuals and organizations to promote the connection between prosocial behaviour and positive affect. To emphasize the point, imagine some government made it illegal for private organizations to conduct the aforementioned 'do good, feel good' campaigns, and banned the printing

and discussion of positive psychology. Such a law would strike us as perplexing – to put it mildly. Our dismay here would not simply be because such policy restricts personal liberty, for obviously there are many laws that restrict personal liberty. The primary reason for dismay is that laws that restrict personal liberties are typically justified in terms of promoting or preserving some collective good. This justification seems lacking in the case under consideration because this policy would suppress activities that look to promote generally recognized good: happiness and prosocial behaviour. If some government were to ban such activities, there would have to be some very strong countervailing harm associated with these activities. It is hard to think of any plausible associated harm that would justify banning ‘do good, feel good’ and positive psychology campaigns. To not even permit the private dissemination of the results of positive psychology would be an extreme form of illiberalism that few of us would care to endorse.

I am not saying that positive psychology and ‘do good, feel good’ campaigns will be effective. Any enthusiasm for these possibilities must be tempered by the admission that merely pointing out how people might be made happier is not always sufficient to make people adjust their behaviour. Since we need not be committed to the effectiveness of positive psychology, our conclusion here might be put hypothetically: if we can increase happiness and prosocial behaviour with positive psychology, and increase happiness with ‘do good, feel good’ campaigns, then we ought to welcome these results. For a world where we are happier, and a world where we are more inclined to help others is, other things being equal, a better world. For the purposes of our argument, it is sufficient that we agree to the weakest position noted above, namely that at minimum the state should not interfere with efforts by individuals and organizations attempting to promote happiness and prosocial behaviour through the use of results from positive psychology.

5. Genetics and Happiness

The next step in our argument is to examine evidence that supports the claim that there are limits to how much psychology can promote our happiness due to the influence of genes on happiness. It should be added that this not an assertion of a crude genetic determinism, that is, that

genes are the sole cause of positive affect. Rather, it might be best to think about the relation of genes and environment on persons' positive affect in terms of an analogy to persons' height. The rapid increase in height over the last few centuries is often attributed to more favourable environmental conditions, e.g., better nutrition and reduced incidence of serious childhood disease are thought to be contributors to increasing average height. To say this is not to deny that genetics plays a large role in the height of persons: provide two people with identical favourable environments and they are likely to grow to differing heights. The difference here we explain in terms of genetics. So, if we wanted to make people as tall as possible we must address the genetic component to height while keeping in mind environmental influences. Similarly, if we want to make people as happy as possible, we must address the genetic component of happiness while keeping in mind environmental influences.

Behaviour genetics reveals a large genetic component to happiness. Heritability estimates for happiness are as high as 80% (Lykken and Tellegen, 1996; Lykken 1999) while others are in the 50% range (Braungart et al., 1993; and Tellegen et al., 1988).⁴ To get some idea of what this means, consider research on identical twins adopted by different families at birth. Since the twins will have very few environmental influences in common (other than their mother's womb) if genetics has no effect on happiness then we should predict that the level of happiness experienced by the twins ought not be any closer than that of any other two people in society. A correlation of 0.5 to 0.8 is considered extremely high by the standards of the human sciences and it tells us that a very good predictor of an identical twin's level of happiness is the happiness level experienced by a twin raised by a different family. What this means is that in the typical case, a large measure of one's happiness over the course of a lifetime depends on how one fares in the 'genetic lottery'. The point is put quite dramatically by Lykken and Tellegen: "The reported well-being of one's identical twin, either now or 10 years earlier, is a far better predictor of one's self-rated happiness than is one's own educational achievement, income, or status." (1996). Undoubtedly environment affects our happiness – put one twin

⁴ As Lykken (1999) explains, the higher estimate of 80% heritable is based on an average level of happiness, rather than a single measurement of happiness.

on the throne and the other on the rack and we will observe differences in positive affect – but genetics also plays a large role in positive affect. This we cannot ignore or forget.

6. Research Program: Happy-People-Pills

The fact that there is a large genetic component for happiness suggests a research program that might permit pharmacological intervention in order to boost positive affect. Knowing that individual levels of happiness fall on a normal curve, psychologists might seek to identify the happiest people among the general population. This set of people, ‘the hyperthymic’, lie at the far end of the normal curve of happiness from those that are characterized as ‘depressed’. This group has not been extensively studied but their lives seem very enviable. Friedman (2002), for example, relates the case of a woman that came to him seeking advice in connection with the loss of her husband. Within the last year the woman had lost her husband to cancer and had lost her job. Despite the terrible circumstances, the woman had not sought out Friedman as a patient, but for advice about her son who was having a difficult time coping with the loss of his father. Friedman says that he was intrigued by the woman’s ability to cope with her circumstances: “Despite crushing loss and stress, she was not at all depressed - sad, yes, but still upbeat. I found myself stunned by her resilience. What accounted for her ability to weather such sorrow with buoyant optimism?” Friedman asked her directly, to which she responded: “All my life I’ve been happy for no good reason. It’s just my nature, I guess.” (Friedman, 2002).

Once members of the hyperthymic subpopulation have been identified by psychologists, geneticists could investigate their genomes in an effort to discover the genes associated with hyperthymia. Looking for the associated genes will likely not be a simply task. If hyperthymia turns out to be a ‘complex genetic characteristic’, influenced by a number of genes and environmental conditions, then progress in finding genetic correlates will not be straightforward. But the fact that some progress has been made with complex genetic disorders like schizophrenia (Barondes, 2003) provides some optimism that progress could be made in the case of hyperthymia.

Imagine for the moment that genes associated with happiness were discovered. How could this knowledge be applied to make ourselves happier? One possibility is to use this knowledge to develop pharmacological agents that could be used to turn those in the normal range of happiness into hyperthymic individuals.⁵ Developing pharmacological agents requires us to understand how genes contribute to hyperthymia. For example, if it is discovered that the hyperthymic have genes that result in increased levels of certain neurochemicals such as serotonin, then pharmacological agents might be developed to increase the production of serotonin in brains of the non-hyperthymic. There is, of course, no guarantee that even if we can discover the relevant genes we will be able to mimic their effects pharmacologically. But again, some optimism that this might be possible comes from current research into the genetics of mental disorders like Alzheimer's disease and schizophrenia. To treat these afflictions may require overcoming the same sorts of obstacles, namely, identifying the associated genes, understanding the causal role, and finally developing pharmacological agents to overcome the genetic influences. Since the same obstacles stand in the way of generating pharmacological agents to create hyperthymia, we ought to be similarly optimistic (or pessimistic) about the technical possibility of creating pharmacological agents for hyperthymia as we are for the prospects of treating these devastating diseases. Since many researchers are optimistic about the prospects for developing pharmacological agents to treat schizophrenia and Alzheimer's based on genetic knowledge (Barondes, 2003), we should hold out similar optimism for this approach to pharmaceutically mimicking the genetics of the hyperthymic.

A lot more should be said about the development of pharmacological agents based on the hyperthymic. However, we must press on. In what follows we shall assume that it is technically possible to make effective pharmacological agents that mimic the genetic influences of the hyperthymic without physical side effects. This will

⁵ Two other possibilities are to use preimplantation genetic diagnosis (PGD) of supernumerary embryos or genetic engineering. In some ways the pharmacological project is more complex: with PGD and genetic engineering, it is sufficient to merely note the correlation in order to apply these technologies. Pharmacology will probably involve learning more about the mechanism involved in positive affect.

allow us to focus on the moral question of whether we should permit their development and distribution.

7. The Pharmacological Puzzle

Part of the case for claiming that we should permit the development and distribution of such pharmaceuticals relies on distinguishing this project from that of creating 'happy pills'. To this end, we should remember that Aldous Huxley, in the *Brave New World*, compares the effects of soma – the infamous happy pill – to that of alcohol. Huxley stresses that soma does not have the negative health effects associated with the consumption of large quantities of alcohol and soma does not give its consumers a hangover. Certainly these are important differences, but for our purposes what is more important are the similarities: there is a strong correlation between the amount of alcohol or soma consumed and impairment in our cognitive functioning, and emotional responsiveness.

And herein lies the important differences: neither of these consequences of taking happy pills applies to attempting to use pharmacology to close the 'genetic gap' between the normally happy and the hyperthymic. The hyperthymic are not cognitively impaired like those who have consumed too much alcohol; nor are the hyperthymic emotionally unresponsive. To think that the happiest amongst us are emotionally blunted is to uncritically buy into a stereotype that has no basis in the empirical literature.

Members of the happiest group experienced positive, but not ecstatic, feelings most of the time, and they reported occasional negative moods. This suggests that very happy people do have a functioning emotion system that can react appropriately to life events. (Diener and Seligman, 2002: 84)

Hence, it is imperative to distinguish between 'happy-pills' and 'happy-person-pills'. The former causes inebriation, the latter uses pharmacology to make the normally happy more like the hyperthymic. It is perhaps evident that the pharmacological puzzle arises by conflating these two notions. After all, it seems then that we may agree that there is no reason to suppose that prosocial behaviour will increase if we should consume large quantities of soma like the denizens of the Brave New

World. But this just underscores one of the differences between happy pills and happy-person-pills: the former inebriates, the latter promotes positive moods. If advances in pharmacology can provide, in chemical form, the same leg-up in terms of positive affect that the present population of hyperthymics experience as a result of winning the genetic lottery, then there is every reason to suppose that happy-people-pills will increase prosocial behaviour. For, as noted, the 'feel good, do good' phenomenon is well documented, and happy-people-pills will boost moods to make us feel good, not cause inebriation.

8. Objections?

The distinction between happy pills and happy-people-pills (HPP), I believe, goes some way to making more plausible the claim that we ought to allow the creation and distribution of HPP. In this section we will consider various objections to such a policy. We will use our previous discussion of positive psychology, which suggests that policy should at least permit the use of positive psychology to boost positive affect and prosocial behaviour, as one means to test objections to the proposal that policy should permit the creation and distribution of HPP. For any opposition to HPP will have to explain the relevant differences between HPP and positive psychology (PP) such that the objection applies to the former and not the latter. Thus, for example, it will not do to protest that HPP seeks to promote the goals of happiness and prosocial behaviour that we should prohibit by policy. For such a position would contradict our earlier argument that it is (at least) permissible to use PP in pursuit of these goals.

Indeed, given the widespread agreement that happiness and prosocial behaviour are valuable ends to pursue, the most plausible lines of opposition, it seems, will focus on HPP as a means to pursuing these goals. So, one line of objection says that while the goals of HPP may be laudable, the means it seeks to achieve these ends, using science to alter our 'common biological nature', are not morally laudable (Fukuyama, 2002). According to Fukuyama, our shared common biological nature is essential for our shared humanity and our sense of a common moral community. The objection then seems promising because it provides us with a moral reason to reject HPP, while also suggesting a difference

between HPP and PP: PP is not directed at altering our common biological nature but reforming our behaviours and attitudes.

To assess this line of objection, let us first think about what it means to alter our common biological nature. Obviously this objection would be mistaken if it were based on the idea that pharmacological agents would change our genomes.⁶ So the objection about changing our common biological nature must be a comment about changing our phenotype. But if this is the case then the objection seems to apply equally well to using PP: while we do not understand exactly how such changes work, if PP actually succeeds in raising the average level of happiness, then it will succeed in altering the biochemistry of our brains.⁷ For example, suppose that studies show that subjects who regularly use PP experience more positive moods and have increased serotonin levels in their brains. If so, this would mean that PP succeeds in changing our phenotype, for if PP works, it will change something about our brain physiology. So, explaining the difference between HPP and PP because the former but not the latter alters our phenotype is mistaken. This is not to deny there is some difference between taking pharmacological agents and the psychological interventions suggested by PP. The point here is that the moral difference cannot be explained in terms of altering our genotype or phenotype. Neither HPP nor PP alters our genotype, and both alter our phenotype.

However, the difference between taking a pill and the psychological interventions of PP does suggest a relevant dissimilarity: If we use HPP, happiness is too easy to achieve: it upsets the connection between effort and success (Sandel, 2007, President's Council on Bioethics, 2003). If we simply pop a pill to be happy it is not the true happiness that comes with our own efforts. That is, it is only through our own efforts that our happiness is truly our own.

There are several responses to this objection. For a start, the idea that we shouldn't take the 'easy way out' seems to apply most forcefully

⁶ The two other mentioned technologies for increasing positive affect, preimplantation genetic diagnosis and genetic engineering would change our genotype, at least in terms of gene frequency in humanity's genetic pool.

⁷ We need not assume here that the mind can be reduced or is identical with the brain. A weaker claim here will suffice: differences in the mind, such as differences in levels of positive affect, will have correlated differences at the biochemical level.

to our most important goals. For example, suppose you wait three hours in a government office to pay a bill and then your friend tells you that that was a great achievement on your part: it was a real testimony to your patience that you survived three hours in a crowded office with unpleasant bureaucrats, and you should be applauded for not taking the easy way out and paying the bill online. When you ask why she did not tell you that the bill could be paid online in a matter of seconds she says that she did not want to destroy the connection between effort and achievement. Before you kill her, you point out that there are many other more important goals you could have pursued in those same three hours, so you would have been willing to sacrifice the link between effort and the achievement of your goal in this case. Similarly, time spent pursuing happiness through PP could have been spent on other goals, such as engaging in prosocial behaviour. Let us not forget that we have defined 'happiness' narrowly in terms of positive affect, not in the Aristotelian sense of the teleos of human life. So, if we are happy in the narrow sense because of HPP this leaves much undone in the wider Aristotelian sense. Thus, at best, this objection shows that we might have to sacrifice the connection between effort and achievement for one goal (more positive moods), but not for achievement of other goals like prosocial activity.

A second complementary response reminds us not to forget that there is a limit to what PP can do for us in terms of boosting our positive affect, just as there is a limit to what good nutrition and health can do for increasing the height of our offspring. The fact that PP might help us increase our positive affect in no way challenges the fact that genetics plays a role in our happiness, any more than the fact that nutrition plays a role in how tall our offspring will grow undermines the idea that genes play a role in how tall individuals grow. Once we remind ourselves of this, it can be seen that the existence of persons with a genetic predisposition for hyperthymia are an embarrassment for this line of objection. For surely we must ask: Do they not enjoy true happiness because of the genetic lottery? Perhaps we should develop a pill to bring down the happiness of those on the positive side of the normal curve of happiness so that they can experience true happiness. Surely this is an absurd consequence. The happiness of the hyperthymic seems as 'true' (or 'false') as anyone else's. It is true that those with a genetic predisposition to hyperthymia come by their advantage naturally, and to use HPP would be an artificial means to achieve the same end, but the

question then would resolve to whether the natural/artificial distinction would mark a morally relevant distinction. The distinction is morally relevant, for example, if we thought that people deserved their genes. But this amounts to denying the idea that there is anything like a ‘genetic lottery’, for it denies that a stochastic process distributes genes, rather, it might be thought to suggest that there is some moral guidance to the process of gene distribution. In general, this view seems hard to maintain because it looks as if it is committed to saying that infants who die from the genetic disease Tay Sachs deserve their genes. But even if the suggestion that we deserve our genes is held on the basis of some deep religious or metaphysical commitment, such a view seems too parochial to guide public policy. This would be like denying blood transfusions to the general population based on the beliefs of Jehovah’s Witnesses. None of this is to say that Jehovah’s Witnesses should not have the right to refuse blood transfusions, nor that those who believe that genes are deserved should not be able to practice their lives in accordance with this belief (e.g., by not availing themselves of HPP), but it does suggest that this is not the sort of commitment that ought to guide public policy.

A different reason to object to HPP is that it may be too effective. The objection then is that at best PP may have a minor effect on us whereas HPP might have a radical effect. Fukuyama (2002) seems to think that there is a limited amount that socialization or nurture interventions can change about us. He is not committed to a crude genetic determinism; rather, perhaps the better metaphor is that our common biology provides a common point of anchorage. Different societies are boats that swing around this common anchorage. Fukuyama’s fear then is that advanced pharmacology will, for the first time, allow us to weigh this anchor. In this sense there is a real difference between PP and HPP.

In general, I think we ought to be quite cautious when we are asked to sacrifice tangible benefits like happiness and increased prosocial behaviour for the sake of something as abstract as Fukuyama’s notion of ‘humanity’. But suppose we agree with Fukuyama on this point. Does it make sense to say that not using powerful technologies such as pharmacology is necessary for the integrity of humanity as a moral community? I think not as the following example illustrates. Suppose we discover an alarming increase in the number of rapes across the globe. Social scientists come to a disturbing conclusion: it is projected that by

2050 virtually every male will be a rapist. It turns out that it is the hole in the ozone layer that is causing a rapid rise in a specific organic molecule. The increasing concentration of the molecule is correlated with the observed rapid rise in rapes. Scientists think that they can create a stopgap measure: a pharmacological agent that will counteract the effects of the rise in this molecule, but eventually the molecule will rise in such concentrations that the only hope will be to genetically modify males to be immune to its effects. Here one of our greatest moral concerns – reducing the incidence of rape – dictates using pharmacological and genetic technologies. If we left our common biological inheritance unchanged, as Fukuyama suggests, then we would have to sacrifice at least part of our moral ideal: reducing the incidence of rape.

Although hypothetical, the example shows something that is of utmost importance: it is an open question whether not changing our biology with technology might come at too great a moral cost. The present argument suggests that two great moral costs of not allowing the development of HPP will be to deny for some the happiness they might otherwise enjoy, and for some the benefits of prosocial behaviour. Again, the benefits here are quite tangible, e.g., feeding the hungry, a safe escort home from campus, a hot meal and a bit of company, etc. In light of this, I would suggest that if there is any threat to our sense as a moral community and our moral ideal, it comes from not taking advantage of such an opportunity to make our lives and our world better. That is, if there is any moral failure here, it is to turn our backs on such an opportunity, just as it would be a moral failure to turn our backs on the opportunity to combat the horrifying rising incidence of rape in our hypothetical example. In both cases, our deep moral concerns indicate a need to use pharmacology in the service of honouring our moral commitments.

Sometimes it is objected that using pharmacological agents in this manner is a social experiment which could potentially have unforeseen and negative consequences. At least this much of the objection seems sound: we do not know for certain the outcome of any social experiment, this one included. We don't know what it would be like to live in a world where those who live on the low side of the normal distribution of happiness are happier. We don't know what it is like to live in a world where there is a more concerted effort to make the world better. However, uncertainty is the traditional complaint against any change. It

is always amusing and sad to read about nineteenth century conservatives who fought to keep women politically subservient on the basis that such a radical change had unknown social consequences. The emphasis here was always on dire consequences rather than good consequences. (The most histrionic of the nineteenth century conservatives suggested that giving women the vote might lead to the collapse of civil society). The point then is not that we know that the HPP experiment will turn out positive in the same way as granting suffrage to women worked out, rather, it is to point out that we have a long tradition of social experimentation – democracy, banning alcohol, legalizing abortion, etc., etc. – and so HPP is no different in this way. As with any experiment, of course, prudence suggests that we should proceed with a due amount of caution. Moreover, conservatives also must endorse the idea of experimentation, for we would be deceiving ourselves if we thought that there is not a great amount of uncertainty attached with the idea of banning HPP. That is, banning the development and use of HPP is itself an experiment. The reason is that there are many other technological developments on the horizon. So, to ban HPP is itself an experiment in a changing world. After all, banning HPP could equally well be our undoing, e.g., not increasing our prosocial behaviour could precipitate a global war between the haves and the have-nots of the world. Some unhappy biology grad student, not able to access HPP, may create and unleash a deadly virus. I am not saying any of this is probable. I am merely making the point that the uncertainty argument cuts both ways. Conservatives cannot induce fear simply by abstract possibilities. To make this line of argument, conservatives must supply some concrete reason for thinking that we will be better off banning HPP in this changed future. I submit that they have yet to do this. It is perhaps worth adding that I think no one knows for certain which future will result, but I for one will take my chances on a future with the promise of more happiness and prosocial behaviour.

9. Too Good to be True?

It seems that we are in a position to draw a conclusion that would make even Dr. Pangloss blush. Suppose we formulate policy today that says that we would permit the distribution of safe and effective HPP. It seems

we could count on the interests of the big pharmaceutical companies and other researchers to move forward with the basic research. After all, the market for such pills would appear to be much greater than any now served by the big pharmaceutical companies: the hyperthymic and the depressed constitute two tail ends of a normal curve, the vast majority of us lie somewhere in between and so constitute a huge potential customer base for HPP. Once HPP is developed we can count on people wanting to take HPP because they desire to be happier. Certainly not everyone would do so. Some may reject it because it is ‘unnatural’, others because they think we deserve our genes, etc. But if the pills could recreate what the genetically hyperthymic have without any side effects, I think it is a pretty safe prediction that there would be a huge market. Since there exists a causal connection between positive affect and prosocial behaviour, we should predict an increase in prosocial behaviour as a result. Channelling corporate profit motive through individual prudential self-interest should be the morally desirable outcome of increased prosocial behaviour.

In a short paper such as this, not all questions can possibly be answered. I hope to have shown, however, that it is at least worthy of further consideration, for it provides us with perhaps a unique opportunity to align self-interest with important moral goals.

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