

Eudaimonia and flourishing

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Introduction	2
What is eudaimonia?	2
Psychological well-being	2
Self-realization and personal expressiveness	2
Psychological flourishing	3
Self-determination theory	3
Summary	3
Distinguishing eudaimonia and hedonia	3
Benefits of eudaimonia	4
Mental health	4
Physical health	5
Conclusion	5
References	5

Key points

- The concept of eudaimonia originates in Aristotelian philosophy, which emphasizes the importance of striving for virtue and character to promote human flourishing
- Psychologists define eudaimonia or eudaimonic well-being as the aspect of well-being that results from living in accordance with the true self and upholding virtue
- Eudaimonia is operationally defined and measures inconsistently in psychological literature, presenting challenges to the science of eudaimonia
- Eudaimonia is often considered in contrast to hedonia, although this distinction is hotly debated, and evidence indicates significant overlap between these two constructs

Glossary

Eudaimonia Well-being that results from living in accordance with the true self and upholding virtues

Hedonia Well-being that results from the pursuit of pleasure and avoidance of pain; commonly operationalized as subjective well-being

Personal Expressiveness The feeling that accompanies identifying, developing, and acting in consistency with one's personal potentials

Psychological Flourishing A state of optimal mental health—including high levels of both eudaimonia and hedonia—that extends beyond merely the absence of mental illness

Psychological Well-Being Multidimensional characterization of eudaimonia, including self-acceptance, positive relations with others, autonomy, environmental mastery, purpose in life, and personal growth

Self-Determination Theory A macro-theory of well-being that characterizes eudaimonia as (a) the pursuit of intrinsic goals for personal growth, relationships, community, and health, (b) autonomous motivation, (c) mindfulness, and (d) satisfaction of basic needs for autonomy, competence, and connectedness

Abstract

The concept of eudaimonia originates in Aristotelian philosophy, which posits that people must live up to their fullest potential to promote a sense of flourishing. In recent decades, psychological scientists have sought to operationalize and empirically investigate the causes and consequences of eudaimonia. To date, many psychological definitions and measures of eudaimonia exist. Most commonly, eudaimonia (i.e., living in accordance with one's potentials and upholding virtue) is

evaluated in contrast to hedonia (i.e., the pursuit of pleasure and avoidance of pain); however, the distinction between eudaimonia and hedonia is hotly debated. Nevertheless, evidence indicates that eudaimonia is associated with better mental and physical health, suggesting that eudaimonia is an important component of living a happy and healthy life.

Introduction

Scholars have been trying to understand “The Good Life” for centuries. In *Nicomachean Ethics*, Aristotle introduced the concept of eudaimonia to emphasize the importance of striving for virtue and character to promote human flourishing (Aristotle, 1925). He explains that people should live “The Good Life” by aspiring to be their best self (i.e., eudaimonia), rather than pursuing pleasure from external factors such as money and fame (i.e., hedonia). Thus, the concept of eudaimonia originates from the ideals of living up to one’s fullest potential and promoting a sense of flourishing. Stemming from these philosophical traditions, psychologists have operationalized eudaimonia as specific behaviors, experiences, or a type of well-being associated with the pursuit of virtue and living in accordance with one’s true self.

What is eudaimonia?

Drawing on Aristotelian accounts, eudaimonia or eudaimonic well-being is defined as the aspect of well-being that results from living in accordance with the true self and upholding virtues (Ryan and Deci, 2001; Waterman, 1993). Based on this conceptual definition, eudaimonia has been operationalized in a variety of ways, including as an orientation (i.e., values, motives, and goals), as specific behaviors (e.g., behavioral content and activity characteristics), and as unique experiences (e.g., subjective experiences), each of which can be measured as either a temporary state or as a stable trait (Huta and Waterman, 2014).

In a review of the definitions of eudaimonia, Huta and Waterman (2014) identified 11 research programs that provide conceptual and operational definitions of eudaimonia. Across these research programs, every conceptualization of eudaimonia includes themes of growth, self-actualization, or becoming a fully-functioning person, along with experiencing meaning and purpose in life (Bauer et al., 2006; Delle Fave et al., 2011; Fowers et al., 2010; Huta and Ryan, 2010; Keyes, 2002; Peterson et al., 2005; Ryan and Deci, 2001; Ryff and Keyes, 1995; Steger et al., 2013; Vittersø and Søholt, 2011; Waterman, 1993). An additional 82% include authenticity, autonomy, or personal expressiveness (Bauer et al., 2006; Fowers et al., 2010; Huta and Ryan, 2010; Keyes et al., 2002; Peterson et al., 2005; Ryan and Deci, 2001; Ryff and Keyes, 1995; Steger et al., 2013; Waterman, 1993), as well as excellence, virtue, or using the best within oneself (Bauer et al., 2006; Fowers et al., 2010; Huta and Ryan, 2010; Keyes et al., 2002; Peterson et al., 2005; Ryff and Keyes, 1995; Steger et al., 2013; Vittersø and Søholt, 2011; Waterman, 1993). Themes of positive social relationships, competence and environmental mastery, engagement or flow, mindfulness, acceptance, engaging with challenge, physical health, and subjective well-being were also included in some definitions of eudaimonia; however, much less agreement exists regarding these components of eudaimonia, with 16%–54% of research programs including at least one of these concepts in their definitions of eudaimonia (Huta and Waterman, 2014). Given these inconsistencies in the conceptualization and measurement of eudaimonia, in the current article, we focus on the approaches to eudaimonia with the greatest agreement (see Huta and Waterman, 2014 for a comprehensive review).

Psychological well-being

Ryff (1989) characterizes eudaimonia with a multidimensional model of psychological well-being, which includes 6 dimensions: self-acceptance (i.e., having a positive attitude toward oneself), positive relations with others (i.e., experiencing warm, trusting relationships with others), autonomy (i.e., experiencing self-determination and independence), environmental mastery (i.e., having a sense of competence in managing one’s environment), purpose in life (i.e., having goals and a sense of direction), and personal growth (i.e., pursuing continued development). Psychological well-being is typically measured via self-report on the Psychological Well-Being Scale, reflecting individuals’ subjective experiences of each dimension (Ryff, 1989; Ryff and Keyes, 1995). Dimensions of psychological well-being can be examined individually or combined into an overall composite of psychological well-being.

Self-realization and personal expressiveness

Waterman (1993) proposes that eudaimonia is best understood by the concepts of self-realization (i.e., efforts to live in accordance with one’s true self) and personal expressiveness (i.e., the feeling that accompanies identifying, developing, and acting in consistency with one’s personal potentials). These conceptualizations of eudaimonia are typically measured via self-report. The Personally Expressive Activities Questionnaire (PEAQ; Waterman, 1993) measures eudaimonic states when engaged in self-defining activities. The Questionnaire for Eudaimonic Well-Being (QEWB; Waterman et al., 2010) measures trait eudaimonia, including dimensions of self-discovery, perceived development of one’s best potentials, sense of purpose/meaning, intense involvement in activities, investment of significant effort, and enjoyment of activities as personally expressive.

Psychological flourishing

Psychological flourishing is defined as a state of optimal mental health—including high levels of both eudaimonia and hedonia—that extends beyond merely the absence of mental illness (Keyes, 2007; Keyes et al., 2002). Within this conceptualization, eudaimonia is characterized by psychological well-being (including the 6 dimensions described by Ryff, 1989) and social well-being (i.e., social acceptance, social actualization, social contribution, social coherence, and social integration). This conceptualization of eudaimonia is measured via self-report on the Mental Health Continuum, which is available in both short and long formats (Keyes, 2002; Lamers et al., 2011). These measures include subscales reflecting both eudaimonic (i.e., psychological and social well-being) and hedonic (i.e., emotional well-being) well-being. Each of the three subscales can be used individually, combined to form composites of eudaimonia and hedonia, or combined to form an overall composite of flourishing.

Self-determination theory

According to self-determination theory, eudaimonia is characterized by four components: (a) the pursuit of intrinsic goals for personal growth, relationships, community, and health, (b) autonomous motivation, (c) mindfulness, and (d) satisfaction of basic needs for autonomy, competence, and connectedness (Ryan et al., 2008). Several self-report scales to measure each component of eudaimonia have been developed, including a measure of intrinsic aspirations (Grouzet et al., 2005), autonomous motivation (Deci and Ryan, 1985), mindful attention and awareness (Brown and Ryan, 2003), and psychological need satisfaction (Sheldon and Hilpert, 2012).

Summary

In sum, eudaimonia is commonly conceptualized as well-being that results from living virtuously and authentically in connection with one's true self. The most highly-cited measures of eudaimonia incorporate multiple dimensions, including themes of growth and self-actualization, meaning and purpose in life, authenticity, and virtue or excellence. Several self-report scales have been developed to measure these and other components of eudaimonia.

Distinguishing eudaimonia and hedonia

Eudaimonic well-being is typically understood in contrast to hedonic well-being, which focuses on the pursuit of pleasure or enjoyment and avoidance of pain and is commonly operationalized as subjective well-being or happiness. Eudaimonic theorists argue that the experience of eudaimonia cannot be equated with subjective happiness because "true well-being" (i.e., eudaimonia) results from living in accordance with one's deeply held values and the expression of virtue (Ryan and Deci, 2001). Accordingly, eudaimonic theorists posit that not all happiness is created equal, and that eudaimonia is distinct from subjective happiness. For example, from the hedonic perspective, high levels of well-being are characterized by the subjective evaluation of life satisfaction, experiencing frequent positive emotions, and infrequent negative emotions (i.e., subjective well-being; Diener et al., 1999; Lyubomirsky et al., 2005); however, eudaimonic theorists argue that understanding the causes of such happiness is important (Ryan and Deci, 2001). For example, someone who is subjectively happy due to the pursuit of fame, money, or the exploitation of others might experience subjective well-being, yet they might not be considered to be experiencing high levels of eudaimonic well-being. Alternatively, the pursuit of virtue may not always be enjoyable, suggesting that people may experience high levels of eudaimonia in the absence of subjective happiness.

In support of the distinction between eudaimonia and hedonia, some studies indicate that they are each uniquely associated with different well-being outcomes. For example, one study examined whether hedonia and eudaimonia were associated with distinct positive emotions. In this study, life satisfaction (i.e., hedonia) was uniquely associated with pleasure, whereas personal growth (i.e., eudaimonia) was uniquely associated with interest (Vittersø and Søholt, 2011). In another series of studies, eudaimonic motives were associated with experiencing more meaning in life and elevating experiences (e.g., awe, inspiration), whereas hedonic motives were associated with experiencing greater sense of being carefree, more positive affect, and less negative affect (Huta and Ryan, 2010). Finally, in an experimental study, hedonia led to greater well-being benefits immediately following a 10-day intervention, whereas eudaimonia led to greater well-being benefits at a 3-month follow-up (Huta and Ryan, 2010).

The suggestion that eudaimonia represents a unique type of well-being that is distinguishable from hedonia has also received considerable criticism (e.g., Disabato et al., 2016; Kashdan et al., 2008). One limitation that is often highlighted involves inconsistencies in measurement of eudaimonia. Although hedonic well-being is consistently operationalized as subjective well-being, much less consistency exists in the measurement of eudaimonia (Huta and Waterman, 2014; Kashdan et al., 2008). As a result, eudaimonia is often used as a catch-all term to reflect any aspect of well-being other than happiness or subjective well-being. From a scientific perspective, the inconsistency in measurement and operationalization may prevent a clear and coherent science of eudaimonia.

In addition, evidence suggests that hedonia and eudaimonia are perhaps more similar than they are different (e.g., Dwyer et al., 2017). For example, eudaimonic activities, such as being kind to others, using one's signature strengths, or expressing gratitude lead to improvements in hedonic well-being (Curry et al., 2018; Dickens, 2017; Huta and Ryan, 2010; Proctor et al., 2011; Steger et al., 2013). Additionally, increasing hedonic well-being (i.e., positive affect) also contributes to enhanced eudaimonic well-being, as

indicated by greater meaning in life (Coffey et al., *in press*; King et al., 2006), greater prosocial behavior (Aknin et al., 2018), and greater investment in social issues (Kushlev et al., 2020). Finally, evidence indicates significant overlap in measures of hedonia (i.e., subjective well-being) and measures of eudaimonia (e.g., psychological well-being), with one study suggesting that eudaimonia and hedonia share up to 92% of their variance (Disabato et al., 2016).

To reconcile this debate, some scholars suggest that eudaimonia and hedonia represent two approaches to happiness research rather than two separate types of happiness (Biswas-Diener et al., 2009). Thus, an integrative approach that considers the interconnections among eudaimonia and hedonia could offer a nuanced perspective of the causes and correlates of well-being (e.g., Pancheva et al., 2021). Goodman and colleagues propose a hierarchical framework of well-being, with general well-being (i.e., perceived enjoyment and fulfillment with one's life) at the top of the hierarchy, which contains 4 levels: (a) lenses (perspectives or conceptualizations of well-being), (b) contents (homogenous topic areas that make up each lens), (c) characteristics (clearly defined components of well-being with practical value), and (d) contexts (characteristics that arise in particularly situations; Goodman et al., 2020). According to this model, hedonia and eudaimonia would be characterized at the first level of the hierarchy as unique lenses for the study of well-being. Meaning in life could be considered a content area within eudaimonia, which includes purpose, significance, and coherence as characteristics of meaning. Finally, contexts might include domain-related meaning in life, such as the workplace or family life. Thus, this approach would allow specific studies to identify the lens of well-being while also recognizing that eudaimonia and hedonia represent two parts of the larger well-being whole.

Benefits of eudaimonia

Consistent with this hierarchical approach to well-being, a growing body of research suggests that the contents and characteristics of eudaimonia are associated with better mental and physical health. Below, we offer a brief overview of the research on these topics. In describing this research, we sought to clarify the specific contents and characteristics of eudaimonia included in each study and to identify gaps in the literature that may offer ideas for future research.

Mental health

Evidence suggests that eudaimonia is associated with better mental health. For example, cross-sectional studies reveal psychological flourishing is associated with much lower rates of major depressive disorder, generalized anxiety disorder, panic disorder, and alcohol dependence (Keyes, 2005). In addition, a systematic review of studies including measures of eudaimonia (primarily operationalized as psychological flourishing) with clinical populations revealed consistently low levels of eudaimonia among individuals diagnosed with a mental disorder (Brandel et al., 2017). A separate systematic review also confirmed a robust negative correlation between eudaimonia (most commonly operationalized as psychological well-being) and depression (Ruini and Cesetti, 2019).

Longitudinal studies also suggest that eudaimonia may protect people from the future development of mental health disorders. For example, in a longitudinal study of breast cancer patients, women with low and decreasing levels of meaning in life reported increasing depressive symptoms in a 14-month period following treatment (Hsiao et al., 2013). In another longitudinal study, psychological flourishing was associated with 28% and 53% reduced risk of mood and anxiety disorders, respectively (Schotanus-Dijkstra et al., 2017). Another longitudinal study revealed that middle-aged adults with low levels of psychological well-being were approximately twice as likely to be depressed 10 years later, after accounting for personality, negative functioning, prior depression, demographic characteristics, and physical health (Wood and Joseph, 2010). Finally, another study investigated whether changes in psychological flourishing over a 10-year period were associated with recovery from mental health disorders (major depression, generalized anxiety, and panic disorder). In this study, participants who maintained or increased to high levels of flourishing were 27 and 7 times more likely, respectively, to recover from a mental health disorder (Iasiello et al., 2019).

Thus, considerable cross-sectional and longitudinal evidence indicates that eudaimonia is associated with better mental health, with most studies operationalizing eudaimonia as either psychological well-being (Ryff and Keyes, 1995) or psychological flourishing (Keyes, 2007; Keyes et al., 2002). Notably, measures of psychological flourishing include subscales for both eudaimonia and hedonia, and the studies described here do not typically separate hedonic and eudaimonic subscales in reporting their results. In addition, the conceptualization of eudaimonia from the psychological flourishing subscale includes psychological well-being. These characteristics of the measurement of psychological flourishing limit the ability to distinguish the benefits of eudaimonia from the benefits of hedonia, and any benefits of eudaimonia from the psychological flourishing conceptualization includes considerable overlap with psychological well-being.

Furthermore, few experimental studies have evaluated whether improving eudaimonia leads to increases in mental health outcomes, although several experiments indicate that therapeutic practices, such as Acceptance and Commitment Therapy, lead to improvements in eudaimonic well-being alongside improvements in mental health outcomes (Brandel et al., 2017; Ruini and Cesetti, 2019). Additional longitudinal experiments have also evaluated the efficacy of interventions to improve eudaimonic well-being (Weiss et al., 2016). This is a promising direction of research, as it would provide tools to evaluate the causal effects of eudaimonia on mental health and other outcomes.

Physical health

Several studies suggest that eudaimonia is associated with better physical health. The strongest support for an association between eudaimonia and better physical health comes from studies investigating meaning and purpose in life, a key component of most conceptualizations of eudaimonia. Longitudinal studies reveal that meaning and purpose in life are associated with better self-reported physical health, fewer diagnoses of chronic health conditions, fewer functional limitations, and reduced mortality risk (Alimujiang et al., 2019; Kim et al., 2022; Krause, 2009; Willroth et al., 2021). In a meta-analysis of this literature, meaning was moderately correlated with better physical health in both cross-sectional ($r = 0.24$) and longitudinal studies ($r = 0.31$; Czekierda et al., 2017).

Studies operationalizing eudaimonia as psychological well-being also suggest benefits for physical health. For example, psychological well-being has been cross-sectionally and longitudinally associated with better lipid profiles (Berkowitz et al., 2021; Radler et al., 2018), reduced risk of metabolic syndrome (Boylan and Ryff, 2015), and improved genetic expression associated with immune functioning (Cole et al., 2015; Fredrickson et al., 2015), along with engaging in more beneficial health behaviors, such as exercising regularly, avoiding drug and alcohol abuse, and getting enough sleep (Phelan et al., 2010; Steptoe et al., 2008). Thus, it appears that psychological well-being may be associated with benefits to physical health over time via improvements in biological functioning and engagement in protective physical health behaviors; however, fewer studies have directly linked psychological well-being to comprehensive indicators of physical health, such as mortality.

Finally, a few experimental studies have attempted to isolate whether eudaimonia causes improvements in physical health by randomly assigning participants to engage in eudaimonic activities, such as engaging in prosocial behavior or expressing gratitude. Such studies reveal that engaging in prosocial behavior, for example, leads to beneficial gene expression profiles in immune cells (Nelson-Coffey et al., 2017) and lower blood pressure among adults at risk for cardiovascular health problems (Whillans et al., 2016). In addition, expressing gratitude leads to healthy eating behaviors among adolescents and young adults (Fritz et al., 2019). These studies suggest that increasing eudaimonic behaviors may lead to physical health benefits; however, these studies do not include established measures of eudaimonia described above, and the health outcomes included in these studies are somewhat limited. Future research implementing experimental designs to investigate whether increasing eudaimonia leads to improved health would be informative. Such studies would also provide opportunities to further evaluate similarities and differences between eudaimonic and hedonic well-being. For example, experimental investigations reveal that expressing gratitude and practicing prosocial behavior each lead to improvements in positive emotions (Layous et al., 2017; Nelson et al., 2016), and positive emotion has also been linked to physical health benefits (Pressman and Cohen, 2005). Thus, studies including both eudaimonic and hedonic well-being as mediators of the effects of eudaimonic activities (e.g., prosocial behavior) and health outcomes would be especially important to illuminate the specific roles of eudaimonia and hedonia for physical health.

Conclusion

Although the concept of eudaimonia has been debated for centuries in philosophical circles, the psychological science of eudaimonia is relatively young. To move forward with a science of eudaimonia, more work is needed to establish a consistent psychological definition and operationalization of eudaimonia. Nevertheless, existing research suggests that eudaimonia is an important component of living a happy and healthy life.

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