

# WELL-BEING AND PRACTICAL INTERESTS

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## 1. Introduction

The first step in the empirical study of well-being or happiness is defining what it is. As history of philosophy shows this is also the most contentious step. After more than two thousand years of theorizing on the topic, philosophers have a lot to show: a number of intricate versions of the original ancient proposals of eudaimonism and hedonism, plus several modern versions of desire satisfactionism. We also have arrived at many interesting and significant results, both negative and positive: few philosophers nowadays defend Bentham's original version of hedonism, or the bold Socratic thesis that virtue is sufficient for happiness, or the view that mere satisfaction of actual desires amounts to well-being. However, one thing we don't have to show is consensus on what well-being is: not on whether well-being is wholly subjective or not, not on what exact mental states are partially or wholly constitutive of well-being, not on the level of these states necessary for well-being. Instead a variety of different answers to these questions coexist in the literature.

Some of the philosophers at this workshop do not let this fact stop them – both Dan Haybron and Valerie Tiberius proposed and defended their preferred theories of well-being and/or happiness. I am not as confident that there is such a thing as a correct theory of well-being full stop. So today I would like to explore a different option – that our practical interests might be relevant to what well-being is; and since these interests vary from situation to situation, what well-being is will vary too. Thus well-being might depend not just on features of our lives and inner states, as the major current theories assume, but also on the purposes to which we put the notion of well-being in different spheres of our lives.<sup>1</sup> I shall argue that such a view makes sense of many of our commonsensical intuitions about well-being. It also explains and justifies the diversity of notions and measures of well-being found in empirical investigations in contemporary social and psychological sciences. Moreover, it paves way for a framework, currently missing, that would allow researchers to justify their choices of measures.

To flesh out this option I shall borrow theoretical tools from a recent debate in epistemology about the relation between knowledge and practical interests. A number of epistemologists suggest that for knowledge to play the sort of role it plays in practical reasoning, we must recognize that it is somehow tied to the purposes and interests of the practical reasoner in

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<sup>1</sup> At the outset I should clarify that this paper argues for interest-relativity of well-being, not happiness. Happiness in psychological, rather than evaluative, sense is not, I believe, subject to the sort of context-sensitivity that well-being is.

question. There are a number of ways to flesh out this idea. The most popular options currently discussed are contextualism and subject-sensitive-invariantism (or the Hawthorne/Stanley view). On the former, the same knowledge claim can be true or false depending on the context in which it is attributed. As the famous example goes, “I know the bank is open” may be true if uttered when nothing much rides on the correctness of this claim, but false if uttered in a situation in which much is at stake if the bank isn’t open. Contextualists argue that the semantic value of the proposition expressed by “I know the bank is open” varies from situation to situation (DeRose 1995, Neta 2002, Cohen 1999). According to the Hawthorne/Stanley view, on the other hand, the proposition remains the same, but its truth-makers change: whether or not I know that the bank is open actually depends on my practical situation (Hawthorne 2004, Stanley 2005). Contextualism is a semantic thesis about knowledge claims, while the Hawthorne/Stanley view is a metaphysical thesis about knowledge.

Might one of these views be true of well-being? That is, might it be the case that either the semantic value of propositions about well-being is sensitive to context in which it is uttered or attributed, as in contextualism; or well-being of the same person in the same condition actually comes and goes depending on the practical interests of this person or her benefactor, as in the Hawthorne/Stanley view? Or perhaps both? I shall consider these options in section 4 of this paper. However, I will argue that neither of them is sufficient to make sense of the sort of context-dependence that appears to apply to well-being. I will then sketch a view that, I believe, does apply to well-being and conclude by exploring the consequences of such a view. Although this view needs more articulation and defense, I hope to show why it is plausible. If it is, then perhaps we don’t need to settle on a theory of well-being true in all contexts. Different notions of well-being might be useful in different situations. We just need to figure out how these different notions map onto different contexts.

## **2. Evidence Against Well-Being Invariantism: Common Sense**

I shall refer to the view that well-being does not, either semantically or metaphysically, depend on local practical interests as well-being invariantism (WBI). Well-being of a subject, this view goes, depends on facts about this subject’s life and his inner states, not on whatever temporary situation he or his benefactor finds himself in. Although rarely stated explicitly, such a view is plausibly assumed by most existing theories of well-being. This is particularly clear when its proponents articulate universal conditions which need to obtain for a person to qualify as doing well. They are universal in the sense that they do not include specification of this person’s local and temporary interests and circumstances. Consider some *prima facie* evidence against WBI. Take the following scenario:

A heavily pregnant woman Kate is walking on a pavement covered with snow and ice. She slips and lands on her right knee. A good Samaritan rushes towards her from across the street. “How are you doing?”, he is asking her extending his hand, “Do you need a doctor?”. Kate is hesitating: “My knee is hurt, but I don’t think that anything else is wrong... So I am probably fine. Can I use your cell phone to call my partner to ask him to pick me up? I don’t think I should be walking any further”. The good Samaritan lends her his phone and leaves after Kate gets in touch with her partner.

It turns out Kate's knee is just heavily bruised, and that same evening she attends a dinner party hosted by a close friend of hers. When they have a quiet moment together away from other guests, the friend asks Kate: "How are you doing?" It turns out Kate was really looking forward to a heart to heart conversation with this friend. She confides that she is feeling very anxious and insecure about having a child. For starters, her partner's job is temporary adjuncting at a local college and he may very well be out of work by the time their child is born. If so they would have to move again, while the baby is still very young, and that's on a good scenario that he can get another adjuncting position for next year. All this is exacerbated by the fact that Kate herself gave up her academic career for the sake of following her partner. She is now beginning to feel that had she stuck with her PhD she may have been more successful than her partner at securing a tenure-track position. She is also nervous that having a baby would cement her status as a stay at home mother whose career is of secondary importance. Although her partner is doing the best he can supporting her psychologically and they still love each other, she is beginning to see warning signs of depression setting in, making her scared that she would not be a good mother.

The next day, Kate is visited by a social worker who implements a city program designed to improve well-being of low income and low support mothers-to-be. The social worker quizzes Kate on her income and sources of social support. It turns out that apart from Kate's partner's salary, Kate can also tap into a fairly generous fund her extended family set up for her and her future child. She has a big loving family many of whom live in the area and look forward to supporting Kate through motherhood. In addition to family support, she has a few local female friends and also attends a support group for first-time mothers-to-be, where she's already made new friends.

How well is Kate doing? I took the time to fill in the narrative of one chunk of Kate's life precisely to motivate the idea that there is no one answer to this question. In this narrative there are three answers. In real life, there are many more. I claim that in each case, it is Kate's well-being that's at stake, but in each case what well-being means and whether and how much of it Kate has is a separate issue with a different answer.

Note also that there are two dimensions along which the judgments of well-being vary in the three contexts invoked in the example above: the extent of well-being and its nature. In the first context, the good Samaritan has in mind not flourishing and not pleasant mental states, but rather physical and psychological comfort of a heavily pregnant woman. Furthermore, the threshold he is willing to entertain is quite low – so long as Kate is not terribly in pain and can get home alright, the good Samaritan is justified in thinking that she is doing well. In the second case, the caring friend's concern is an entirely different notion of well-being: when she asks Kate how she is doing much more is at stake – Kate's flourishing both psychological and objective, whether her life is going in a way that she'd wholeheartedly endorse and whether or not she is depressed. Both the level of functioning and its nature are higher in this context. Finally, the social worker is employing a yet another notion of well-being. It is probably most akin to the notion at work in the capabilities approach – there are certain goods new mothers need access to and, as far as the city council is concerned, they need to have access to a particular level of this good to be considered as doing well.

One reaction the reader might have is just to deny that Kate's well-being is what's in question in each context. Instead comfort and physical ability is in question in the first context and satisfaction of basic needs of new mothers is in the third. Only in the second context are we properly talking about Kate's well-being. There is, the objection goes, no reason to think that there is more than one notion of well-being and more than one answer to the question of what state of the world makes it the case that this notion applies to a person.

My first reply is to point out that such fine-graining offends our linguistic practices. "How are you doing?" is a question asked in a variety of contexts and a variety of answers, holding fixed the state of the subject's life, are understood as appropriate replies to this question. When we are asked whether we are doing well, we don't inevitably start analyzing whether our lives as wholes instantiate values we endorse (if that is one's favorite theory of well-being), though sometimes this is precisely what we do. And people are usually very proficient at figuring out what they are being asked about.

Philosophers, of course, have drawn distinctions between many different notions all related to well-being: prudential good, welfare, life well-being (Kagan 1992), quality of life, to mention just a few. Drawing distinctions is a good skill for philosophers to have, but we shouldn't take this hobby too far. Many everyday concepts are much more coarse-grained than a philosopher might be willing to allow. Terms like well-being refer to such coarse-grained concepts and often function as umbrella terms for many different more specific notions. Practical and conversational context helps us to pick out the appropriate notion. That well-being is such an umbrella term is precisely what's being claimed.

Another possible reply is that the only reason the good Samaritan and the social worker invoke weaker notions of well-being is because in the situation Kate finds herself in, for practical reasons, the proper notion of well-being (whatever it is) is simply unavailable to her. In the same way, we might refer to a deeply retarded person as doing well despite the fact she obviously doesn't meet the conditions necessary for doing well on some theory of well-being we hold. We do so with a certain regret, we lower our standards of well-being for this unfortunate person. Whenever practical circumstances are such, we need to settle for the second best notion.<sup>2</sup>

In part this objection concedes my point – practical circumstances are relevant to picking the appropriate notion of well-being. But I disagree with the spirit of the objection – the idea that there is a ranking of notions of well-being from lower to higher grade, and that we only settle for the lower grade well-being when we can't have the real thing. This assumption is clearly not what's at work in case of Kate and the good Samaritan: it's not that he sees that Kate can't be truly flourishing and because of that settles for the second best (not being in pain and being able to get home). Kate's flourishing, or lack of it, are completely irrelevant in this situation. The same holds for the social worker.

Why is the "high grade" well-being irrelevant to the good Samaritan and the social worker? Part of the explanation undoubtedly has to do with their moral obligations towards Kate – these obligations arguably do not include promoting Kate's flourishing or life plans, but only helping Kate to get home safely and providing her with some basic conditions for motherhood. This does

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<sup>2</sup> This objection is due to Neera Badwar.

not mean they do not have an obligation to promote Kate's well-being – they do, but only what her well-being amounts to in their particular situations. Their moral obligations towards her thus partly make up the overall practical situation which determines which notion of well-being is appropriate.

That we commonly make decisions about which threshold of well-being is appropriate in which circumstances is reflected in the now well-known experimental results reported by Fritz Strack and his colleagues (Strack et al 1990). In these experiments, presence of a handicapped person in the room in which subject were taking a life satisfaction questionnaire, had the effect of increasing these self-reports. This is plausibly seen as evidence that people adjust their standards of well-being depending on context. This standard is lower when we compare ourselves to disabled persons. Dan Haybron sees it as a reason to be skeptical of life satisfaction because it appears that there is no single correct standard against we should judge our lives (Haybron forthcoming). On the view explored here, such shifts in standards are not arbitrary and are to be expected and justified – why shouldn't there be several different standards of life satisfaction each appropriate in different contexts?

### **3. Evidence Against Well-Being Invariantism: Research on Well-Being**

The second strand of evidence against well-being invariantism comes from the realities of contemporary empirical research on well-being in psychological, medical and social sciences. A telling feature of much of this research is the sheer number and variety of concepts and measures of well-being that have been proposed. Thus the philosophical intuition that the concept of well-being is not univocal is mirrored by the methodological reality of research on well-being. Even if we restrict attention to the psychological sciences only we can see five different concepts:

1. Hedonic balance, i.e. the ratio of positive to negative affect (Kahneman 1999, 2000, 2004 2004, Frederickson and Losada 2005, and many other researchers on social cognition).
2. Life Satisfaction, i.e. whether the subject approves of how her life is going. (Diener et al 1985, Lever 2000, and researchers in social and personality psychology and sociology).
3. Positive functioning, i.e. sense of autonomy, purpose, connectedness to people etc. (Ryff 1989, Keyes 2002, Kendler et al 2000 and most psychiatrists and clinical psychologists).
4. Exercise of signature strengths, i.e. developing and using one's talents (Seligman 2002).
5. Flow, i.e. being able to lose oneself in an activity that involves skills and growth (Csikszentmihalyi 1997).

Each of these notions comes with its own measurement procedures. Although they are often calibrated against each other (such as when life satisfaction is found to correlate substantially with positive affect), there is no evidence that these different notions are interchangeable. Researchers in this field sometimes suggest that it does not matter which notion of well-being we pick to represent and measure well-being, because as a matter of empirical fact they all “converge” (Cloninger 2006). But claims like this go well beyond what statistical evidence actually warrants. Statistical shows that in many instances different phenomena such as positive affect, life satisfaction and positive functioning can predict each other to a substantive degree, usually hovering around  $r=0.5$  (see Ryff and Keyes 1995 for example). But these phenomena are still empirically distinguishable, it is possible (and not just logically) to have one without the

other. In some groups the correlations are weaker than in others; Asians appear to take less notice of their affect when judging their life satisfaction (Suh et al 1998). On average these correlations are certainly informative enough in order to cross-validate measures, but they are not nearly strong enough to assert in a cavalier fashion that the choice of measures does not matter. It matters a lot, and researchers need to justify their choices systematically.

Ken Kendler, an eminent psychiatrist at Virginia Commonwealth University, studies genetic influences on mental health and well-being. When I asked him why he does not use subjective measures of well-being in his twin studies he explained that these measures might mask the use of mood-altering medications, thus misrepresenting the subject's true state (personal conversation, February 2007). In the context Kendler is working in, a more objective notion of positive functioning is a better representation of well-being than the subjective measures (Kendler et al 2000). But I doubt that he would insist that this measure is always superior. Surely when measuring well-being during a painful medical procedure a subjective measure is more appropriate. Similarly Corey Keyes proposes a multi-dimensional model of mental health which includes four distinct elements: affect, life satisfaction, positive functioning and social well-being (Keyes 2002). There would be no need to such a cumbersome measure of mental health if there existed very strong correlations between all these elements. Finally, Daniel Kahneman emphasizes the dissociation between utility as it is experienced and utility as it is evaluated retrospectively. The latter require retrieval and integration of momentary experiences both of which can introduce biases. In his earlier writings Kahneman and his co-authors often insisted that only momentary reports are valid measures of happiness. Lately, however, Kahneman has been treating experienced utility as one of its constituents (Kahneman and Rijs 2005). I would argue that a better way to treat experienced utility is as the right representation of well-being in those situations in which painfulness or pleurability of an experience is its most salient moral characteristic, as is the case in of, say, a colonoscopy or a massage.

Of course, the multiplicity of measures of well-being is well recognized in the literature. In a recent article Kim-Prieto and colleagues propose a framework for integrating the various definitions of subjective well-being (notably, global life satisfaction reports and momentary reports of experience), one of the implications of which is that "no single measure is automatically more valid than another" (Kim-Prieto et al. 2005, 289). This is because "different measures provide information about different *stages* of SWB" (my emphasis). Simplifying, SWB is a complex construction that begins with emotional reactions to objective events that are then recalled in a number of ways to produce a global judgment of SWB. Although related, this idea is different from the one I am developing in this paper – it is not just that subjective well-being has many different constituents (synchronically or across time); rather there is no such thing as well-being proper, only well-being given a certain context of inquiry and/or intervention.

Again, it is important to distinguish this idea from the far less controversial claim – that well-being can be measured in many different ways, or that many measures are legitimate. If all this claim amounts to is that different measures are in fact tapping into the same phenomenon (or can be assumed to for all intents and purposes), such that positive affect, life satisfaction, positive functioning etc are all (near) statistical proxies each other, it is clear that statistical evidence does not bear out this claim.

#### 4. Making Sense of Variantism

So how might we make sense of the idea that well-being is contextual in the way I have been suggesting? As mentioned above I will be helping myself to theoretical tools developed by epistemologists to analyze the relevance of practical context to knowledge.

##### *a. Contextualism about well-being*

The first option is contextualism. Perhaps the most discussed brand of contextualism about knowledge is the view that propositions, and hence the truth value of propositions, that attribute knowledge vary with context of the attributor. The attributor's context is defined not just by what evidence she has about the truth and justification of a belief in question, but by her practical circumstances, for example, how much rides on the proposition being false. When not much rides on it, the standards are lower than otherwise and hence it takes less for a knowledge attribution to come out true. This is how the same proposition attributed to the same subject with the same amount of evidence (say, "Anna knows she has hands") can come out to be true in the mouth of an attributor in one context (say, the everyday context) and false in another (say, a philosophy seminar). It happens because in fact different propositions are being asserted in these two cases.<sup>3</sup>

Contextualism about well-being would treat the adjective "well" (and the noun "well-being") as a term the semantic value of which depends on the practical situation in which it is attributed. Thus "Kate is doing well" expresses different propositions in the mouths of the good Samaritan, Kate's friend and the social worker. What accounts for this difference? Partly, it is the difference in the *standard* of well-being at work in the three cases, that is in the extent to which Kate needs to be actually doing well. Just as the standards of knowledge vary between a philosophy seminar and some everyday context, the standard of well-being also vary across everyday contexts. Simply walking along the street comfortably without falling down is all that it takes for "Kate is doing well" to come out as true in the mouth of the good Samaritan, but it takes a lot more for this claim to come out true in the mouth of Kate's friend and the social worker.

That "well-being" admits of the sort of gradability a contextualist appeals to is a very plausible linguistic claim. We talk of, say, a victim of a car accident who is recovering well as "doing well for someone in his situation", or of a person left homeless and destitute by hurricane Katrina as "doing terribly for an American citizen". Jason Stanley points to a lack of gradability of expressions about knowledge as evidence against epistemic contextualism. He proposes a two-stage test of gradability: an expression should allow for a) modifiers such as "very" or "really" as in "He is very or really tall", and b) comparative constructions as in "taller than". He argues that expressions involving "know" lack both of these features and therefore the term "know" is not gradable (Stanley 2004). Expressions involving "well-being", on the other hand clearly pass Stanley's test. So in this respect at least, a contextualist case about well-being is easier to defend than contextualism about knowledge.

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<sup>3</sup> See Rysiew 2007 in Stanford Encyclopedia of Philosophy for an overview of epistemic contextualism.

But it is not just the standard of well-being that differs among the good Samaritan, Kate's friend and the social worker. They also all could use a genuinely different theory of what well-being is. Thus the good Samaritan might be a hedonist about well-being, Kate's friend an eudaemonist and the social worker a Rawlsian resourcist. Although such variation is not strictly necessary in the example I gave, a variantist account of well-being should allow for it. There is no analogous variation in case of knowledge, at least on the standard version of epistemic contextualism. So this is one difference to keep in mind.

In epistemology contextualism has been used to articulate a resolution of skeptical doubts (Cohen 1999, DeRose 1995 and many others). A skeptic claims that since a) she doesn't know that she is not a brain in a vat and b) if that is true, then she doesn't know that she has hands, so by modus ponens, she does not know she has hands. A contextualist replies that the first premise is made in a skeptical context in which the standards for knowledge are higher than in normal contexts. So it expresses a different proposition than if one were to claim in a non-skeptical context that one does know that they are not a brain in a vat. Thus, our intuitive anti-skepticism is preserved for some contexts, while at the same time the force of the skeptical argument is acknowledged.

The well-being analogue of such skeptical argument can be also be formulated. Take an Aristotelian who is asserting to Kate while she is waiting for her ride home on the icy pavement: "You are clearly not fully exercising your virtues right now. And if so, you are not doing well". Now, Kate might agree with the Aristotelian, but she might also reply: "Actually, I am quite OK, you are wrong". The Aristotelian replies: "But this evening in conversation with your friend you will endorse my view as the correct diagnosis for why you are not doing well! Shouldn't you then admit that you are not doing well now too?". A contextualist Kate at this point can retort: "Yes, but then I will mean something different when I say "I am not doing well"". Skepticism about well-being here would amount to Kate's admission to her friend that she is not doing well, which along with the premise "if you are not fully exercising your virtues, then you are not doing well", would force her to say in all other contexts she encounters that she is not doing well ever or not most of the time. The contextualist option allows her to adjust the notion of well-being according to context. We are thus spared the necessity to say that we aren't ever, or very rarely, doing well because for the most part we don't live up to the Aristotelian ideal, while at the same time acknowledging the force of the Aristotelian viewpoint.

What is the mechanism by which semantic values shift? That is what makes for changes in context? Epistemic contextualists largely agree that it is the interests, practical purposes and expectations, broadly understood, of the attributors that make the context what it is (Rysiew 2007). But of course, there is more than one way to understand this. John Hawthorne distinguishes between *salience* and *practical environment* (Hawthorne 2004). Roughly, if context is understood in terms of salience of certain possibilities of error to the subject or the attributor, then the appropriateness of a knowledge claim will ride on his or her psychological state. If the possibility of a certain error is not salient to me, then you will be entitled to attribute to me knowledge of the proposition on the justifiability of which this error might bear. On the other hand, if the context is understood in terms of objective practical environment, then the possibility of error (possibility that not-p) bears on knowledge of p whether or not the subject or the

attributor happens to know of this possibility or be in a psychological state in which this possibility is salient.

Naturally, the same distinction will apply in case of well-being. A contextualist about well-being takes the semantic value of an attribution of well-being to depend on context, which in turn can be understood either as the psychological context of the attributor or else the objective features of the situation in which the subject or the attributor find themselves. By objective features of the situation I mean those features which make it the case that a certain notion or a standard of well-being applies whether or not the subject or the attributor are aware of these features and/or find them significant. By psychological context I mean just what the subject or the attributor take to be significant features of the situation, which could include what theory of well-being he or she happens to endorse, what threshold of well-being he or she happens to find appropriate, etc.

If we flesh out the context in the latter way, then we would have to live with the following consequence: whether or not it is true that Kate is doing well or badly in each of the three contexts in our example has everything to do with who happens to make this judgment and what their view of well-being happens to be. Thus if Kate's friend turns out to have spent decades in Gulag camps and as a result adopted a very dark view of human life according to which well-being consists in minimal survival, she might very well take Kate's impending depression and lack of sense of fulfillment to be indicative of how spoiled Kate is. She might judge Kate to be doing perfectly well despite Kate's malaise. Clearly, this is an unwelcome consequence, so we should reject the psychological interpretation of context. Whether or not a certain notion and threshold of well-being apply in a given situation is a matter of objective fact.

In this sense, the version of contextualism I am exploring here does not imply relativism about well-being – the view that whether or not someone is doing well is wholly a matter of the attributor's own standards.

So is contextualism about well-being the right view to make sense of the variantist evidence from common sense and empirical research? I believe it goes part of the way towards accounting for this evidence, but not far enough.

To see why let us remind ourselves that contextualism is a semantic thesis, i.e. a thesis about truth values of sentences. It is not, at least not directly, a metaphysical theory about the referents of contextual terms. Thus epistemic contextualism is not a theory about knowledge, but only a theory about how knowledge claims work. For example, when we use indexical terms such as "I", we recognize that their semantic value varies depending on the context in which they are uttered. But we don't thereby take selfhood to vary depending on context. So as many epistemic contextualists have been careful to point out, it is not whether one knows which varies according to context, but only whether one counts as knowing (DeRose 2000, Rysiew 2007 and many others). This is why it is perfectly consistent with epistemic contextualism to claim that whether or not one knows *does not* depend on context. Whether or not knowledge depends on context and whether or not knowledge claims have contextual semantics are two orthogonal issues. So it is open to epistemic contextualists to claim that knowledge itself (or rather, the family of properties picked out by the term "know") is not sensitive to our interests, circumstances and expectations.<sup>4</sup>

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<sup>4</sup> I thank John Greco and Irem Kurtal Steen for making this clear to me.

Indeed most epistemic contextualists take this option for they do not want their view to imply that that knowledge may come and go in a single conversation or with a change in perspective (DeRose 2000).

Naturally, the very same would hold for contextualism about well-being. The question is whether we want this to hold; that is, whether the sort of variantist data about well-being I have been invoking indicates merely semantic context dependence or perhaps something more. It will help to articulate an alternative view that commits to metaphysical rather than semantic context dependence of knowledge.

*b. The Hawthorne/Stanley view*

Such a view has been recently defended by John Hawthorne and Jason Stanley. As Hawthorne puts it:

...the verb ‘know’ picks out the same ordered triples on subject, time, and position in the mouths of any ascriber. However, whether a particular subject-time-proposition triple is included in the extension of ‘know’ depends not merely upon the kinds of factors traditionally adverted to in accounts of knowledge – whether the subject believes the proposition, whether the proposition is true, whether the subject has good evidence, whether the subject is using a reliable method, and so on – but also upon the kinds of factors that in the contextualist’s hands make for ascriber-dependence. These factors will thus include (some or all of) the attention, interest, and stakes of that subject at that time. (Hawthorne 2004, 158).

Hawthorne calls this view subject sensitive invariantism, whereas Stanley calls it interest relative invariantism (Stanley 2005). The view is invariantist because the semantic value of what is being asserted does not change from one context to another as it should according to contextualism. However, it is subject sensitive or interest relative because the truthmakers of the invariant semantic relation vary with context.

Applied to well-being, the Hawthorne/Stanley view would imply that the good Samaritan and the social worker are all making the same claim when they say that Kate is doing well; and were they to judge her as not doing well, they’d be making the same claim as her friend at the dinner party. However, the state of Kate’s life which makes the sentence “Kate is doing well” come out true shifts with circumstances: in case of the good Samaritan it is different than in case of the social worker, etc.

Which view fits our purposes better? I think neither is sufficient by itself. Contextualism has an intuitive advantage over the Hawthorne/Stanley view because it is hard to see what is this same proposition that the good Samaritan, Kate’s friend and the social worker make when they say that Kate is, say, doing well. Intuitively, they all assert something different, and gradability of the terms related to ‘well-being’ attests to that. However, contextualism falls short because it backs away from any metaphysical claims about well-being. Well-being seems responsive to our practical environment in just the way that Hawthorne/Stanley view suggests.

Observe that the objections put forward against the Hawthorne/Stanley view about knowledge do not apply to such a view about well-being. Gillian Russell and John Doris construct a number of examples in which mere indifference on the part of the subject, or the mere fact that the subject has the money to solve any problems that could result if the proposition in question were false, by the rules of Stanley's account make it the case that this subject knows the proposition (Russell and Doris forthcoming). The counterintuitive consequence is that on Stanley's view indifference and even money (since this is what interest relativity amounts to in some cases) are knowledge making; and lack of them are knowledge defeating. Russell and Doris conclude that this view violates a number of plausible principles about knowledge: that knowledge should not be unduly dependent on luck, that it is generally associated with reliable processes, that it is a norm of assertion, that it is relatively stable, etc. Perhaps not all these principles genuinely govern knowledge, but on the Hawthorne/Stanley view they all have to be abandoned! It now seems that this view is unduly revisionist.

I don't know whether this objection spells doom for the Hawthorne/Stanley view about knowledge, but I am prepared to argue that it doesn't spell doom for the corresponding view about well-being. It is indeed counterintuitive that Kate's well-being should come and go depending the whether or not the people around her are indifferent towards her well-being. But that would not happen if we had an objective rather than a psychological understanding of context – indifference is just not the sort of feature that well-being depends upon. But it is much less counterintuitive to assert that well-being comes and goes with luck, money and change in standards of assessment. It does violate some of the constraints that Aristotle imposed on eudaimonia – that it should not depend more on other people than on the person himself, and also that it should not be something that can easily be taken away from a person (NE 1096b25-27). But it is not clear that these constraints are as non-negotiable in case of well-being as those constraints on knowledge that Russell and Doris invoke. So the Hawthorne/Stanley view about well-being is not subject to at least some of the objections that their view about knowledge is subject to.

It seems, therefore, that to make sense of the variantist evidence about well-being we need something like a combination of contextualism and the Hawthorne/Stanley view, minus the invariantist elements from both views. Well-being is contextual both semantically and metaphysically. Let us label this view *well-being variantism*.

## **5. Conclusion**

This paper only just begins to articulate well-being variantism. It does not provide the mapping from notions of well-being to contexts and does not address the crucial question of what exactly grounds such a mapping. It is intuitive that Kate's well-being when she is on the operating table has more to do with lack of pain and normal physical functioning, whereas her well-being in her family life has to do with her emotional state and her fulfillment. These are precisely the sort of intuitions I have appealed to (and the sort of intuitions that variantists about knowledge appeal to), but more needs to be said about what the mapping is and what makes it so.

This paper is also silent on whether this mapping from contexts to notions of well-being is one-to-one or one-to-many or many-to-many. I remain open to the possibility that some notions apply in many contexts, that sometimes there is no clear winner, and also that some notions don't apply to any contexts at all. (Well-being as a satisfaction of fully informed desires seems to me to be in this boat).

But there is no reason to think that answers to all these questions cannot be given. Variantist methodology has been applied to many areas of philosophy, but it seems particularly at home with well-being. Well-being appears to be what some philosophers, following W.B. Gallie have called *essentially contested concept*. In an often cited 1956 article Gallie claimed: "There are concepts which are essentially contested, concepts the proper use of which inevitably involves endless disputes about their proper use on the part of their users"(Gallie 1956, 169). Such concepts typically have an abstract core notion that all users agree on, but the right realization of this notion is a subject of debate; and not just any debate, but a debate that is grounded in the features of the concept itself, rather than in the features of its users. Since Gallie coined this term *fairness, justice, democracy, right, freedom, power* have been claimed to be such concepts. Gallie himself espoused skepticism about the possibility of resolution of the contest: "It is quite impossible to find a general principle for deciding which of two contestant uses of an essentially contested concept really 'uses it best'"(Gallie 1956, 189).

We witness the essential contestability of well-being every time we ask our students whether the person in the experience machine, or the vicious and successful Ghegis Khan, or the happy but deceived wife, or the satisfied but emotionless person, are doing well. The opinion split is persistent and incorrigible, enough to tempt one with Gallie's skepticism. But that would be rash. There will, of course, be cases in which disagreement over the appropriate conception of well-being will remain unresolved. But we will still make huge progress if we are able to find some contexts of our lives, albeit narrow and very specific, in which it is relatively clear what well-being amounts to. In fact we already have such knowledge – this is why Kate does not start pouring her heart out in response to the good Samaritan's question. We just need to make sure philosophy catches up with this wisdom.

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