



Review Article

Current recommendations on the selection of measures for well-being

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ABSTRACT

Measures of well-being have proliferated over the past decades. Very little guidance has been available as to which measures to use in what contexts. This paper provides a series of recommendations, based on the present state of knowledge and the existing measures available, of what measures might be preferred in which contexts. The recommendations came out of an interdisciplinary workshop on the measurement of well-being. The recommendations are shaped around the number of items that can be included in a survey, and also based on the differing potential contexts and purposes of data collection such as, for example, government surveys, or multi-use cohort studies, or studies specifically about psychological well-being. The recommendations are not intended to be definitive, but to stimulate discussion and refinement, and to provide guidance to those relatively new to the study of well-being.

1. Introduction

Over the last several years, interest in the measurement and promotion of well-being has increased exponentially with calls for societal transformation and a new vision for health that places well-being at the center (Plough, 2015). As research on well-being both as an outcome (or a target for monitoring) and as a predictor of other health-related outcomes has expanded dramatically, conceptions and measures of well-being have likewise proliferated. Consequently, it can be challenging to compare ideas and findings across different measures and conceptions. For example, well-being can be characterized by objective

measures, also referred to as measures related to “standard of living,” and by subjective measures, based on cognitive and affective judgments a person makes about their life (Stiglitz et al., 2010). Objective aspects of well-being will of course also influence subjective well-being levels (Patel et al., 2018). Many countries routinely collect data on various factors that are considered indicators of objective well-being, including measures of educational attainment, safety, income, life expectancy, and so forth. Only a few countries have begun to collect data on subjective well-being measures, notably life satisfaction and happiness, on a regular basis. However, subjective well-being has been an important area of research in psychology for decades (Myers and

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Diener, 2018), and increasingly in other academic disciplines as well (Ngamaba, 2018). Subjective well-being is moreover not merely the absence of mental illness; indeed measures of subjective well-being predict strongly and independently subsequent mental illness above and beyond baseline measures of mental illness (Wood and Joseph, 2010). The focus of the present paper is to provide a set of recommendations concerning measuring subjective well-being.

At least three conceptual approaches to evaluating subjective well-being are commonly used, including hedonic, evaluative, and eudaimonic conceptions of well-being (Ryff, 1989; Kahneman et al., 2003; National Research Council, 2013; OECD, 2013). A hedonic perspective focuses on well-being understood as whether one feels happy or experiences pleasure and lacks pain; an evaluative perspective focuses on well-being defined by one's view of, or overall satisfaction with life or different domains of life. Closely related desire-fulfillment theories, while receiving considerable attention in philosophy (Fletcher, 2016) have only recently been empirically operationalized (Margolis et al., 2020). An eudaimonic perspective focuses on whether individuals feel they have attained self-realization, or if they are fully-functioning or fulfilling a sense of purpose. There is general agreement that well-being itself is a broad multi-dimensional construct that extends beyond simply feeling happy or being satisfied with life (Stiglitz et al., 2017; OECD, 2019).

A distinction might also be drawn between “psychological well-being,” which concerns assessment of an individual's various psychological states, versus “subjective well-being,” which includes an individual's subjective assessment of any aspect of their life (e.g., finances, physical health). While these two terms are often used interchangeably, neither of these categories encompasses the other. Psychological states can be assessed by direct observation (e.g., of textual communication) rather than subjective self-report; conversely, one can report subjectively on states that are not psychological, like one's physical health. In this paper, we will use “psychological well-being” or “subjective well-being” in their more general descriptive senses rather than to refer to any specific measures.

Despite measurement and conceptual challenges, the recent proliferation of studies on well-being has provided an exciting array of results and novel insights. However, there is, as yet, little guidance as to what to measure or which scale to use for any particular investigation. Answers to these kinds of questions inevitably depend on the context, the resources available, and the goals of measurement. Different measures may be better suited to studying the determinants of well-being, versus understanding the effects of aspects of well-being on other outcomes. Although a number of good overviews of different subjective well-being measures are available (National Research Council, 2013; OECD, 2013; Su et al., 2014; Tay et al., 2014; Hone et al., 2014), these generally provide a compendium of existing measures (or information on where to find the measures) rather than specific guidance regarding which measures to use in what contexts. In this paper, we put forward a series of recommendations for selecting measures of subjective well-being across different contexts, focusing on the use of subjective, rather than objective, measures.

2. Methods

These recommendations arose out of an interdisciplinary workshop on the measurement of well-being hosted at Harvard University in April 2018, drawing upon a multidisciplinary group of well-being experts from around the world. Discussions of well-being measures are often confined to experts within a single discipline. However, greater understanding of both the science of well-being and the measurement issues may be gained from considering research on well-being in studies across multiple disciplines. Thus, the workshop conveners, directors of the Lee Kum Sheung Center for Health and Happiness and of the Human Flourishing Program (both at Harvard University), identified workshop participants by seeking scholars who have actively contributed to the

study of well-being and who also, together, could broadly represent numerous disciplines including psychology, sociology, economics, political science, public health, medicine, statistics, philosophy, and theology. In addition to individual workshop presentations and discussions about the study of well-being from a range of disciplinary perspectives, several sessions were devoted to questions of measurement recommendations. Building on these discussions, an initial set of recommendations was drafted, and all workshop participants were invited to comment and contribute. Final recommendations, further refined in subsequent discussion and written exchange, are presented here.

A key component driving the discussion and ensuing recommendations was recognition that there will not be a one-size-fits-all recommendation for measuring well-being. Recommendations must be informed by careful consideration of each type of research or reporting endeavor and the likely constraints on the number of items that can be used to measure well-being in specific contexts (e.g., government surveys; multi-use cohort studies; studies specifically about well-being). Thus, different recommendations are made depending on the purpose for which a well-being measure is sought, with rationale provided for the choice of measures. These recommendations are not intended to be definitive, but rather constitute the consensus of our interdisciplinary panel of experts, given the present state of knowledge and the measures currently available. Our goals are to provide practical guidance for the present moment and to stimulate debate and discussion, which we expect will refine well-being measurement further as new research in this area emerges. Recommendations are organized according to their intended use and, within each section, giving consideration to the options available depending on the number of items a given project might be able to accommodate.

3. Results

3.1. Psychological well-being in government surveys

Government surveys are frequently designed for the purposes of monitoring and tracking. Our recommendations for assessing psychological well-being in government surveys with a very limited number of items follow that of the United Kingdom's Measuring National Well-Being Programme. In 2010, the UK government committed to assessing national levels of well-being (Allin and Hand, 2017). To accomplish this, the UK's Office for National Statistics established a Measuring National Well-Being Programme to identify key areas that mattered most to people and to make an initial proposal for domains and specific measures. This Programme drew upon existing frameworks in the well-being literature, including prior work by the OECD (Hall et al., 2010), and aimed to incorporate items for subjective well-being already used in the international well-being literature. They included items related to hedonic, evaluative, and eudaimonic well-being, but also tried to keep the number of questions limited to avoid excessive costs and enable widespread use. The questions were tested in the Annual Population Survey of households, and a final set of four questions has now been included on the annual UK National Survey since 2011 (Allin and Hand, 2017). Based on the thoughtful engagement of the UK's Measuring National Well-Being Programme, the choice of questions already widely used in well-being research, the range of questions administered, and the successful record of data collection on these questions, we recommend using this same four-question set for obtaining a brief assessment of psychological well-being via government surveys or other large-scale population-wide monitoring instrument. Although other countries and organizations have also included additional well-being questions, such as those included in the European Social Survey, these constitute a much longer list of questions and may be less suitable for very brief well-being assessments. The four questions from the UK National Survey are:

1. Overall, how satisfied are you with life as a whole these days?
2. Overall, to what extent do you feel the things you do in your life are worthwhile?
3. Overall, how happy did you feel yesterday?
4. Overall, how anxious did you feel yesterday?

Questions are asked using a 0–10 response scale where 0 is “Not at all” and 10 is “Completely.” This limited set are easily incorporated into existing surveys and relatively quick to administer. Moreover, any monitoring body using these items could immediately compare their findings with UK statistics. The four questions draw from each of the broad conceptual approaches to psychological well-being: evaluative well-being (item #1 [life satisfaction]), eudaimonic well-being (item #2 [purpose/meaning in life]), and hedonic well-being and ill-being, respectively (items #3 [positive affect], #4 [negative affect]). Gallup, OECD, and other large-scale organizations engaged in monitoring subjective well-being also use the above items in assessing evaluative and eudaimonic well-being (i.e., life satisfaction and worthwhile activities, respectively; *OECD, 2013*). The items evaluating hedonic well-being and ill-being query positive and negative affect, respectively, and sample from the person's experience the prior day. While inquiring only about a single day may not be representative of life more broadly and is perhaps less suitable for etiologic research purposes, it does provide an assessment of positive and negative affect for the country or region as a whole when responses are averaged over numerous persons on different days (*Allin and Hand, 2017*). Thus, they may be useful for monitoring and tracking. While some have aggregated the four questions by taking a sum score across the items (*Benson et al., 2019*), items represent distinct conceptual domains and are generally reported separately.

When even four items are too many to include on a given survey, for an even briefer two-item survey, we recommend assessing evaluative and eudaimonic well-being using the life satisfaction (#1) and worthwhile activity (#2) questions. These two items have been used extensively, have broad conceptual coverage, and, across numerous individual items, show some of the highest and most consistent correlations with much broader well-being measures (*Cheung and Lucas, 2014; Helliwell et al., 2016; OECD, 2013*). When it is possible to include only a single item, we recommend assessing evaluative well-being (item #1). Although measuring life satisfaction alone is subject to numerous limitations (*Kahneman et al., 2003; Allin and Hand, 2017; VanderWeele, 2017; Ryff, 1989*), if only one question can be included, life satisfaction does provide a relatively broad assessment and has been found to perform similarly compared to multiple-item life satisfaction scales in prior work (*Cheung and Lucas, 2014*). Moreover, this item has been used in surveys around the world (*Helliwell et al., 2016*), which allows comparisons across countries. For more substantial assessments, perhaps also targeted not only for monitoring but also for research, see also the sections below.

3.2. Psychological well-being in multi-use cohort studies

Increasingly, multi-purpose cohort studies have been seeking well-being items to include in data collection instruments for use with explanatory research (rather than monitoring and tracking) that may examine well-being either as an outcome (i.e., dependent variable) or as a predictor (i.e., independent variable/exposure) of other outcomes. When considering well-being as an outcome, a broader conceptualization can be appropriate, but specific aspects of well-being can also be examined. When considering well-being as a predictor of other health-related outcomes, more specific conceptualizations are likely to be useful, with a particular focus on items that predict future changes in health and behavior. For many multi-use cohort studies, space constraints often make it possible to include only a handful of items. In these circumstances, we recommend the following six questions drawn from the evaluative, eudaimonic, hedonic, and other domains. The items could be used as predictors or as outcomes in etiologic research.

1. Overall, how satisfied are you with life as a whole these days?
2. Overall, to what extent do you feel the things you do in your life are worthwhile?
3. In general, how happy or unhappy do you usually feel?
4. I have a sense of direction and purpose in life
5. Overall, I expect more good things to happen to me than bad
6. If something can go wrong for me, it will (reverse coded)

The first two items are scored from 0 = “Not at all” to 10 = “Completely.” The third item is scored from 0 (“Extremely Unhappy”) to 10 (“Extremely Happy”) and the fourth item from 0 (“Strongly Disagree”) to 10 (“Strongly Agree”). The fifth and sixth items have traditionally been scored from 1 (“Strongly Disagree”) to 5 (“Strongly Agree”), but could also be scored from 0 to 10 for consistency with the others.

Including the first two questions has the advantages discussed above. For item #3, unlike the question used in the UK survey, which asks about happiness level on the previous day, the question here is phrased according to general levels of happiness (*Fordyce, 1988*). This may be more suitable for individual level etiologic research purposes because it captures a more stable, enduring experience in contexts where well-being is inquired only sporadically (*Hudson et al., 2017*). Among the various dimensions of psychological well-being, purpose and optimism are among those that are most consistently and strongly related to physical health outcomes, including all-cause mortality in prospective studies (*Trudel-Fitzgerald et al., 2019*); thus, we suggest two questions to capture each of these domains. The optimism items (#5 and #6) are drawn from the Life Orientation Test-Revised (LOT-R; *Scheier et al., 1994*) using the items most predictive of mortality. For purpose, the worthwhile activities item (#2) is supplemented by an item (#4) from the purpose subscale of the Psychological Well-being Scale (*Ryff, 1989*). For multi-use cohort studies that allow for more extensive well-being assessments, the sections below are also relevant.

3.3. Studies of psychological well-being

The greatest progress in the science of well-being will likely come from large studies designed specifically to measure and study well-being itself. For this purpose, we recommend scales and inventories that include assessment of multiple aspects of psychological well-being, including life satisfaction, positive affect, meaning, purpose, and personal growth, among others. Some have argued that composite measures of well-being that aggregate across these various dimensions can be useful in gaining a broad perspective on potential determinants of overall well-being, and might be valuable as a focus for policy (e.g., *Su et al., 2014*). Evidence suggests that the overall aggregates of various different multi-dimensional well-being scales are themselves often strongly correlated (*Goodman et al., 2018*) and thus contain very similar information, though, if dichotomized, differing dichotomization schemes can of course lead to different conclusions concerning e.g. prevalence of flourishing or high levels of well-being (*Hone et al., 2014*). From a scientific perspective, however, when seeking to understand the causes and consequences of distinct aspects of psychological well-being, the use of more specific measures is necessary. In fact, different dimensions of psychological well-being very likely have different causes and different effects (*Baumeister et al., 2013; Trudel-Fitzgerald et al., 2019*). It is thus the specific dimensions included within a scale or inventory that will likely be most relevant for the scientific study of well-being, since aggregate measures are often highly correlated. This perspective shapes the remainder of the recommendations in this paper. Various validated scales that measure specific dimensions of psychological well-being, such as those developed by *Diener et al. (1985)*, *Ryff (1989)*, *Lyubomirsky and Lepper (1999)*, *Keyes (2002)*, *Su et al. (2014)*, *Warwick Medical School (2018)*, and others, might be used for this purpose.

When seeking to study specific dimensions of psychological well-

being, we recommend, when possible, the use of at least two different scales designed to assess the same construct as a sensitivity analysis for the robustness of the conclusions being drawn. For example, for meaning and purpose, one might use both the purpose subscale from the Psychological Well-being Scale (Ryff, 1989) and Meaning in Life questionnaire (Steger et al., 2006) in the same study. Such practice may also help address aspects of measurement that have not yet, or only recently, been adequately conceptualized. For instance, while meaning and purpose in life are often combined in measures designed to capture a single construct, recent empirical and conceptual work has suggested three distinct facets (Martela and Steger, 2016). The use of more than one scale to assess the same construct may help facilitate such insights.

If a study seeks to examine numerous domains of psychological well-being, either as a predictor or as an outcome, then a broad multi-dimensional inventory will most likely be desirable, because such a measure can be considered either as a single composite or by specific sub-domains. Among the existing available measures that include multiple items for many different dimensions, we recommend the 54-item Comprehensive Inventory of Thriving (CIT; Su et al., 2014). This inventory was created based on a prior survey of other multi-dimensional approaches to and measures of psychological well-being (e.g., Diener et al., 1985, 2009; Ryff, 1989; Scheier et al., 1994; Seligman, 2011), and includes multiple items per dimension. The CIT includes three items each for 18 facets that are grouped within the following seven dimensions: relationships (support, community, trust, respect, loneliness, belonging), engagement, mastery (skills, learning, accomplishment, self-efficacy, self-worth), autonomy, meaning, optimism, and subjective well-being (life satisfaction, positive feelings, absence of negative feelings) ($\alpha = 0.71$ to 0.96 across varied populations; Su et al., 2014). Its psychometric properties and measurement invariance have also been examined in cross-cultural settings (Wiese et al., 2018). Once again, we recommend that, if possible, the study of each CIT construct be supplemented by the use of other scales (e.g., Diener et al., 1985; Ryff, 1989; Scheier et al., 1994; Lyubomirsky and Lepper, 1999; Keyes, 2002; Steger et al., 2006; Martela and Steger, 2016) purportedly assessing the same construct.

3.4. Human flourishing

Human flourishing or complete human well-being is the broadest possible construct under the study of well-being. It has been conceptualized as “the achievement of all goods, purposes and ends of human existence” (Messer, 2013) or as “a state in which all aspects of a person's life are good” (VanderWeele, 2017). Such ends and goods include not only psychological well-being but also physical health, a domain that is absent from many of the scales discussed above, and character, and could also include both objective and subjective assessments. As before, we will focus here on the subjective aspects. Important to note is that, because it is so broad, the construct of flourishing should ideally capture, among other things, multiple facets of psychological well-being (e.g., hedonic, evaluative, and eudaimonic), as well as subjective assessments of physical health and potentially other relevant components of experience. As such, in many research contexts, “flourishing” makes sense principally as an outcome, rather than as a predictor. It would make little sense to examine the effects of flourishing on subsequent physical health if the flourishing construct itself includes physical health. However, assessing flourishing might be useful in certain contexts as a predictor (e.g., examining the effect of individual employee flourishing on various objective outcomes including productivity or turnover).

Developing valid measures is a complex process, especially when the construct is as broad as flourishing. There may be tension between capturing as many domains as possible versus the danger of including domains that are relatively less important or trivial. A focus on those dimensions of human well-being that are ends in themselves and nearly universally desired may help shape consensus on what to measure

(VanderWeele, 2017). A number of conceptualizations and measures of flourishing have been developed (Keyes, 2002; Diener et al., 2009; Seligman, 2011; Huppert and So, 2013; Hone, 2014; VanderWeele, 2017), though many of these do not include physical health. To enhance reliability and to make it possible to consider various dimensions separately, we believe at least two or three items per domain assessed would be desirable. Several existing approaches make use of one only item per domain (Diener et al., 2009; Huppert and So, 2013). For a longer multi-item comprehensive assessment of subjective flourishing, because of its breadth, as noted above, we recommend supplementing Su et al.'s (2014) Comprehensive Inventory of Thriving (CIT) described above, which covers multiple dimensions of psychological well-being, with a multi-item assessment of physical health such as the 12-Item Short-Form Health Survey (SF-12; Ware et al., 1996). The SF-12 is widely used, has demonstrated good psychometric properties (e.g., 2-week test-retest reliability, $r = 0.86$ in UK adults and 0.89 in US adults, Ware et al., 1996; $\alpha = 0.70$ to 0.89 across samples of older adults, Resnick and Nahm, 2001), and captures the dimension of physical health that is absent from the CIT. For a brief 10-item flourishing measure that may also permit separate consideration of domains, we recommend VanderWeele's (2017) Flourishing Index, which comprises two items for each of the following domains: happiness and life satisfaction, mental and physical health, meaning and purpose, character and virtue, and close social relationships. These items were chosen from among those most commonly used and previously validated in prior well-being scales. The scale has had some degree of empirical validation ($\alpha = 0.89$, Węziak-Białowska et al., 2019a) and its psychometric properties and measurement invariance have also been recently examined in cross-cultural settings (Węziak-Białowska et al., 2019a, 2019b).

4. Discussion

As noted above, our recommendations are provisional, drawing on the current state of knowledge and the existing validated measures available. Although recommending a set of validated items, as in many cases above, is not comparable to the process of validating a set of items when combined into a new measure, we hope these recommendations will help facilitate subsequent research on well-being and on its measurement. Below, we consider a number of other future developments that may further improve our ability to measure, study, and track well-being.

In the discussion above, for settings in which only a single well-being item will be used, we recommended the question, “Overall, how satisfied are you with life as a whole these days?” While investigators have generally referred to this item as a “cognitive” or “evaluative” measure of psychological well-being, it does place strong emphasis on satisfaction, rather than on whether all facets of life are in fact good. This could be problematic. A person can be satisfied and addicted to narcotics, or satisfied and completely socially isolated. It is not clear that it is reasonable in such cases to say that human well-being is high. Although unusual examples, they demonstrate the potential that assessing life satisfaction alone, out of context, may not represent an accurate portrait of well-being or flourishing in life as a whole. This critique may be less relevant to other forms of life evaluation that do not make explicit reference to “satisfaction,” including the Cantril Ladder (Helliwell et al., 2016). However, the latter requires considerably more space than the simple life satisfaction question, but may be preferable if there are not strict constraints on space. Other single item measures that might more holistically consider self-report evaluations of well-being across the whole of life, and that are less focused only on the satisfaction of desires might deserve further study, such as “All aspects of my life at present are good,” or “All is well with my life.” Whether they would perform better than the widely-studied life satisfaction item above requires further research and assessment. Until better studied, it may be desirable, when possible, to include at least

two single-item overall evaluative measures.

While existing measures capture a number of important dimensions, other aspects of well-being are absent from most scales, as pointed out by philosophers and others (e.g., Fletcher, 2016). First, few well-being scales make any attempt to capture the value of existing knowledge or processes necessary for acquiring it. Second, most scales focus almost exclusively on individual well-being. Although some measures include items assessing the quality of an individual's social relationships, broader community well-being is often overlooked. Examining community well-being (e.g., within a family, city, or nation) may also be important for a broader understanding of the determinants and consequences of individual well-being (Allin and Hand, 2017; Phillips and Wong, 2017). It may thus be useful to supplement measures of individual well-being, and their aggregates, with measures of community well-being (Phillips and Wong, 2017; VanderWeele, 2019; Allin and Hand, 2017).

Third, although some measures of *spiritual* well-being are available (Paloutzian and Ellison, 1982; Peterman et al., 2002), the most widely used *general* well-being scales do not capture spiritual well-being. This is potentially problematic. For much of the world's population, some notion of spirituality or religion is highly important (Pew Religious Landscape Study, 2018; Diener et al., 2011), and many consider it the most important aspect of well-being. Including spiritual well-being items within general well-being scales is challenging because, to a greater extent than with other aspects of well-being, the way in which this construct is understood likely varies across religious and spiritual traditions. Thus, tradition-specific measures of spiritual well-being may be an important and necessary step forward (VanderWeele et al., 2020). Such measures could potentially supplement more generic and universal well-being measures.

Fourth, although many psychological well-being scales include some notion of autonomy, they are often framed negatively and principally assess whether individuals feel they can make decisions free from influence of others. While useful in many contexts, in some cultures, this formulation may be considered relatively less essential to well-being. The existing measures, moreover, often do not capture positive notions of having freedom to pursue what is important in life. Existing negatively-framed autonomy scales might thus be supplemented with an item like "I am free to pursue what is most important" or like Gallup's question, "Are you satisfied or dissatisfied with your freedom to choose what you do with your life?" Such items may also help to capture aspects of well-being that are important to some individuals but not to others. For example, artists who cannot pursue artistic expression, creation, and aesthetic experience, may feel their well-being is severely compromised. However, for others, the absence of art for a time, even if they enjoy it, may not similarly substantially compromise well-being. An item such as "I am free to pursue what is most important" may help address these nuances. Such ideas arguably bear some correspondence to Sen's capabilities approach to well-being (Sen, 1999), although its empirical operationalizations have tended to focus on more objective measures (Alkire, 2002; Alkire and Santos, 2010).

Fifth, more work could be done examining important cross-cultural variations in what aspects of well-being are considered most important in different contexts, and whether current measures of well-being, mostly developed in western and high-income countries, may be missing other elements important in other cultures. Future well-being measure development and refinement might consider these potential omissions.

5. Conclusions

The recommendations in this paper are not intended to be definitive but rather to i) provide guidance for those needing to make practical decisions about well-being measurement today, and ii) prompt further discussion and debate that will eventually lead to further refinement.

That well-being is measured—and how it is measured—is critical. What investigators, practitioners, and policy makers measure shapes what they discuss, what priorities they set, and what they aim for. Studies to advance our understanding of the distribution, determinants, and consequences of well-being are essential in efforts to try to improve well-being. However, such studies cannot take place without proper measurement, which in turn is shaped by the purposes and constraints (e.g., regarding number of items) of any particular study or context. If the well-being of individuals and nations does not get measured, then the focus will likely shift to other indicators, such as only income or physical health. We hope that the recommendations offered here might facilitate more frequent, effective, and impactful measurement of well-being.

Author contributions

This set of recommendations came about as a result of an interdisciplinary workshop on the measurement of well-being of which the authors were a part. The critical intellectual content of the paper was shaped by all authors and would not have been possible without their participation. The paper represents the collective thought of the author list. The paper was drafted by Tyler J. VanderWeele, Claudia Trudel-Fitzgerald, and Laura D. Kubzansky. All authors provided critical review, feedback, additions, further references, and guidance.

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Declaration of competing interest

Tyler J. VanderWeele and Eileen McNeely report having previously received consulting fees from Aetna Inc.

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