



# House and Happiness

## A Differential Diagnosis

NANCY L. SIN, KATHERINE M. JACOBS, AND  
SONJA LYUBOMIRSKY

People are drawn to activities and lifestyles that they believe will maximize their happiness. House, for example, enjoys solving medical puzzles, watching soap operas, attending monster truck rallies, and frequently pointing out the logical, physical, and moral deficiencies of others. These activities and preferences define a big part of House as a person, but he could choose to do very different things with his life. He could decide, for instance, to get married, spend less time at work, do community service, attend church, be nicer to Wilson, or practice meditation, but he doesn't. House probably expects that these choices would make him miserable.

The same general idea holds for Cuddy, Foreman, Chase, Thirteen, Taub, and, indeed, for all of us. We pursue what we believe will be the path to happiness, and we avoid or are indifferent to what we imagine will lead us to boredom or gloom. Some decisions, such

as whether to pop a few Vicodins, might bring momentary pleasure; other decisions—for example, where to work or whether to form an intimate relationship—can provide lasting satisfaction. What choices have the characters of *House* made in their pursuit of happiness? And how likely are these choices to be effective in boosting their well-being? Psychology can provide some intriguing answers to these questions.

The characters on *House* display varying symptoms of happiness (and unhappiness). Together, we will embark on a differential diagnosis of what contributes to their—and everyone’s—happiness. As with any proper differential diagnosis, we must first define happiness. Next we’ll rule out the factors that do *not* enhance happiness. Finally, we will explore what actually makes us happy. (A note before we begin: This chapter addresses only the *controllable* characteristics of people’s lives that promote or diminish well-being. Yet a large portion of happiness is determined by genetics—something that cannot be changed. Nevertheless, even a self-described “lonely, misanthropic drug addict” [“Wilson’s Heart”] such as House has a considerable degree of control over his happiness.) Let us begin the differential diagnosis.

## Happiness: What Are We Really Seeking?

Although the term *happiness* holds nuances in meaning for each person, researchers agree that a happy person frequently experiences positive moods (such as joy, affection, or pride), occasionally experiences negative moods (for example, guilt, sadness, or anxiety), and is generally satisfied with his or her life. This definition of happiness—also called *subjective well-being* or *hedonia*—is related to the pleasure principle. That is, the happiest people are those who often experience pleasure and seldom experience pain.

Another dimension of happiness is something psychologists and philosophers call *eudaimonia*. Based on Aristotle’s definition, *eudaimonia* involves living a life of virtue and realizing one’s fullest potential. As an illustration, imagine a person—say, Cameron—who is honest, sincere, and compassionate and adheres to her strong moral principles. Cameron even falls in love with and marries a

dying man because she doesn't want him to be alone. She epitomizes eudaimonia, yet she appears to have higher subjective well-being (i.e., hedonia) than the other doctors. Like Cameron, people who strive toward their goals, practice good deeds, and have meaningful lives also tend to feel good, and vice versa. Thus, research and theory suggest that feeling good (hedonia) and doing good (eudaimonia) are intertwined and are both crucial components of happiness.

## **Everybody Lies about What Makes Them Happy**

Everybody lies—from our parents and colleagues to the media and the larger culture. Claims are often made about happiness that are not necessarily true—at least, not true for all of us. Money, marriage, and parenthood are just a few of the ingredients in the recipe for happiness that our culture prescribes. These myths about happiness, which are perpetuated from one generation to the next, have an insidious influence. Most of us are convinced that attaining the goals valued by our society will provide us with enduring happiness. Yet evidence from research in the fields of psychology and economics suggests that we are often wrong.

### **Money**

In “Here Kitty,” Taub happens to run into his old friend Neil at the hospital. Neil claims to be the CEO of a large successful company (but we later find out that he is an impostor). After the two enjoy a few cigars and drinks together, Taub is tempted to quit his job at Princeton-Plainsboro to go into business with his long-lost friend. The appeal of this idea for Taub is simple: more money.

Many of us believe that if we only had more money, we would be happier. Yet—excluding those who live below the poverty line and cannot meet their basic needs for food, shelter, safety, or medical care—greater wealth generally does not lead to substantially greater well-being. For example, a number of countries have experienced dramatic economic growth in recent decades, but their citizens' happiness levels remain unchanged. In rich nations, including the United States, wealthy people are only slightly happier than those who have

less money. Contrary to popular belief, rich folks do not spend more time in passive leisure activities, such as tanning by the pool or watching their flat-screen TVs. Instead, higher-income people are more likely than their lower-income counterparts to be engaged in stressful activities and to feel intense negative emotions, such as hostility and anxiety. Thus, we can be fairly certain that Neil is faking the relaxed vibe that supposedly comes with his wealth and power:

Taub: You like your job?

Neil: Same as you. Same as everyone. It has its ups and downs.

Taub: You're lying to make me feel better.

Neil: Yeah, it's the best. I'm in charge, you know? I'm a kid with toys.

Neil is merely emulating the stereotype that many of us have about very wealthy, powerful people. In reality, CEOs generally don't do "laid-back," and they may not do "happy," either.

What if you secure a substantial raise or win money because you, like House, try to "cure cancer by infecting a guy with malaria to win a \$50 bet" ("5 to 9")? Research shows that the boost in your net worth will make you happier temporarily, but it will not create a long-term change in your well-being. One explanation for why more money does not bring lasting happiness is that people become accustomed to their higher standard of living and desire even more money to maintain their happiness, much as House needs increasingly larger doses of Vicodin to achieve the same pain-relieving effect. In addition, when people become wealthier, they tend to compare themselves to other wealthy people, rather than to their peers at their previous income levels. Thus, it makes sense that Foreman is upset when he thinks that his subordinate doctors earn more than he does, even though his current income level is probably sufficient.

Despite all of this evidence, money and happiness are indeed related in several ways. First, people who are relatively happier to begin with tend to earn more money at later points in time. That is, being happy may lead to financial prosperity, perhaps because happier people tend to feel competent, set high goals, expect success,

and obtain more support. Second, you can buy happiness if you know where to spend your money. Spending on others will make you happier than if you spend the same amount on yourself. Taub could learn a thing or two about happiness from Cuddy, who donates to Amnesty International and is willing to pay for House to see a shrink. Taub is clearly motivated more by avarice than by generosity, and House knows it: "Knew it when I hired you. You'd eventually miss the money, being the big shot like your new CEO friend, if that night club stamp on your hand is any indication" ("Here Kitty"). In the end, Taub stays at Princeton-Plainsboro, but only because the opportunity to work at the higher-paying job vanishes when Neil is discovered and arrested. This ordeal does not alter Taub's opinion that money brings happiness, but Taub and all of us would probably be better off if we disabused ourselves of this false notion.

## Marriage

When Foreman encourages a teenage patient, Stevie Lipa, to pursue a career in medicine, Stevie replies, "I see you with Drs. Chase and Cameron, and you all got empty ring fingers. You're alone" ("Needle in a Haystack"). Like most of us, Stevie believes marriage is a central goal in life, and that without marriage, we would be lonely and unhappy. Numerous studies conducted in diverse cultures do, in fact, demonstrate that married people are happier than those who are single, divorced, separated, or widowed. Yet the story about happiness and marriage does not end there.

Like other major positive life changes, getting married brings a boost in happiness, but that boost turns out to be only temporary. A fifteen-year study of more than a thousand Germans found that about two years after getting married, most people are back to their pre-marriage levels of life satisfaction. Those who wedded and got divorced quickly, however, did not experience substantial changes to their life satisfaction levels. After Cameron leaves in the sixth season, Chase goes back to working and refuses to talk about his failed marriage. Although it may appear that Chase is suppressing or denying his feelings, it could be that he is actively trying to move on. Chase will probably return to his old self quickly; Cameron, on the other hand,

will need longer because she may still be recovering from the death of her first husband. Widowhood is associated with a long-lasting drop in life satisfaction, and some widows and widowers never fully recover.

Research evidence suggests not only that the happiness-boosting effects of marriage are short-lived but that it may actually be happiness that leads to marriage. In other words, the causal direction may be reversed. Longitudinal studies, which track people over a specific period of time, reveal that happier people are relatively more likely to get married and to stay married. And once happy people are married, they tend to feel more fulfilled and satisfied with their marriages than their less-happy married peers. After three unsuccessful marriages, Wilson would do well to enhance his own happiness before entering a fourth (hopefully, lifelong and satisfying) marriage.

## Parenthood

Cuddy, like many people, really wanted a baby. She labored through fertility treatments and one unsuccessful adoption attempt before finally adopting her baby, Rachel. But does Rachel make her happier? In “5 to 9,” we see Cuddy struggle with juggling the demands of being a single parent and a hospital administrator. Although most people believe that having children will make them happier, research suggests otherwise. Women with jobs outside the home rated caring for their children as only slightly more positive than doing more mundane tasks such as commuting to work and household chores. Furthermore, multiple studies have found that parenthood is associated with decreased happiness.

Why is parenthood linked to lower well-being? One possibility is that children interfere with basic needs, such as sleep or relationships with others. Another possible reason is that the short-term, day-to-day costs of raising children outweigh the long-term benefits. Cuddy experiences a great deal of stress from caring for her baby. For instance, in “Big Baby,” Cuddy finds it hard to leave her crying baby with the nanny and feels that she should soothe Rachel herself. Cuddy also struggles with creating the mother-child bond: “I know I’m supposed to feel amazement. I’m supposed to love her. I just—I don’t feel anything at all.” It can be difficult to feel fulfilled as

a parent when one has to cope with the everyday stresses of raising the child, as well as any larger issues, such as bonding. A third reason that parenthood may be associated with lower happiness is that the modern child-rearing environment is very different from that of our ancestors. For instance, there is less of a collective effort to raise children (for example, consider the saying “it takes a village”), which puts the burden solely on the parents’ shoulders. That said, when Cuddy reflects on Rachel’s childhood years from now, she will likely recall the happy moments and not remember the extent of her frustration and hardship.

## **The More Likely Culprits: What Actually Makes People Happy**

Thus far in our differential diagnosis, we have ruled out three alleged sources of lasting happiness: money, marriage, and parenthood. The next step is to examine the life circumstances and the behaviors that do contribute to and sustain well-being for long periods of time. Here, House’s maladaptive ways of interacting with the world are contrasted with the research evidence. Even for an individual who values logic, reason, and science, House easily could guess—without poring through journal articles—that he is obstructing his own path to happiness.

### **Friendship and Social Support**

House seems to have few friends, which could be a major cause of his unhappiness. Data from nearly three hundred scientific studies, on average, revealed that you can predict a person’s happiness based on his or her number of friends and the quality of those friendships. Fortunately, House has one friend he can rely on, Wilson, although the quality of their friendship is debatable. House and Wilson have radically different personalities. Wilson is an overly agreeable people-pleaser with a “need to be needed” (“Son of a Coma Guy”). In “The Social Contract,” House says to Wilson, “You have no core. You’re what whoever you’re with needs you to be.” House is correct, judging

from Wilson's inability to furnish his condominium because he does not know what he likes or how to define himself. In stark contrast, House appears to be quite comfortable with who he is, contradictions and all. He has been described by his team as an "ass," an "emotionally stunted bigot," and an "angry, misanthropic son-of-a-bitch" ("No Reason," "Fools for Love," and "Heavy").

Why do these two polar opposite men have such a strong and enduring friendship? And how on earth could House possibly make Wilson happy? Perhaps the reason that their friendship works so well is that they have no social contract. They are not afraid to reveal to each other their true selves—whatever that may be for Wilson. In "The Social Contract," Wilson explains to House the value of their friendship:

My whole life is one big compromise. I tiptoe around everyone like they're made of china. I spend all my time analyzing, "What will the effect be if I say this?" Then, there's you. You're a reality junkie. You'd smack me over the head with it. Let's not change that.

Friendship may promote happiness because friends offer both emotional and material assistance and protection from stress. According to the buffering hypothesis, social support is especially beneficial to a person's well-being when he or she is experiencing adverse life events. Wilson helps House through many stressful times, including the death of House's father and recurring problems due to House's Vicodin addiction. Although this friendship is often one-sided, House does reciprocate during Wilson's times of need. For instance, House allows Wilson to stay at his apartment when Wilson separates from his third wife. If only House would temper his rudeness and show more warmth toward others, he might form additional friendships and thus gain greater happiness.

## Work

What motivates the diagnostic team to suffer through long hours at the hospital, perform illegal and unethical assignments



(e.g., breaking into patients' homes), and tolerate House's insults and manipulation? Indeed, the extrinsic (or external) incentives are few—in Foreman's case, training under House is detrimental to his job prospects. These doctors are likely driven by rewards that arise from the nature of the work itself or intrinsic (internal) factors—the exhilarating rush of a fast-paced environment, intriguing diagnostic mysteries, and, perhaps most important, the satisfaction and pride that come from saving lives. In other words, the doctors are not motivated simply by an altruistic desire to help people; instead, as House puts it in “The Greater Good,” “You’re here because *it makes you feel good* to help people.”

### Meaning and Purpose

As the best diagnostic department in the country, House and his team have an unprecedented capacity to diagnose the rarest of medical conditions and to bring patients back from the brink of death. They are highly skilled and perhaps even uniquely gifted. Thirteen feels that exceptionally talented individuals have an obligation to society: “I don’t care if Jonas Salk’s life is a miserable shell. I just want him to cure polio” (“The Greater Good”). According to Thirteen, being a doctor is a selfless and noble profession that matters in the “big picture” but is mutually exclusive of hedonic happiness or pleasure (“The Greater Good”). She is echoing the common myth that having a purpose in life (a key component of eudaimonic well-being) limits a person from enjoying life. Yet research suggests that people who experience high eudaimonic well-being tend to be relatively happier and more satisfied with their lives.

The myth of eudaimonic well-being and hedonic well-being being mutually exclusive is further perpetuated by other characters on *House*. Specifically, in “The Greater Good,” the patient Dr. Dana Miller asserts that her meaningful career did not make her happy. A former world-renowned cancer researcher, Dr. Miller describes her years of toil in the laboratory as what she was always *supposed* to do but never what she *wanted* to do. She gave up her medical and research career, despite her colleagues’ fury and protests, and now

dedicates her life to activities that provide pleasure. The following is a conversation between Taub and Dr. Miller:

Taub: No offense, but you're not working. What does it matter if you spend a little time in bed?

Dr. Miller: Not working doesn't mean I don't have places to go. I've got my book group, piano lessons, cooking classes. They make me happy.

Taub: A warm apple fritter makes me happy. Doesn't fulfill me as a person.

Dr. Miller: And working here does?

Taub: If it didn't, I would have found a way to go back to tucking tummies.

Dr. Miller: Good for you if your job fulfills you and makes you happy. That's rare.

Taub: I didn't say I was happy. I loved being a plastic surgeon. The money, the lifestyle. And in a lot of ways, this job stinks. I'm making five bucks, I'm always annoyed, but—

Dr. Miller: You can look yourself in the mirror and think, "I did something worthwhile today."

Taub: Exactly.

Dr. Miller: That's important. And I do miss that, but it just wasn't enough anymore.

Like Thirteen, Taub and Dr. Miller incorrectly believe that one cannot achieve both fulfillment and hedonic happiness. Yet their lack of happiness could be due to factors unrelated to work, such as Taub's materialism and marriage troubles or Dr. Miller's health problems. Although Dr. Miller is currently engaging in the very activities that are likely to promote happiness (such as strengthening friendships and developing new skills), her desire for fulfillment may ultimately lead her back to a career devoted to helping others. To achieve long-term well-being, Dr. Miller cannot neglect her desire for purpose and meaning.

If the doctors at Princeton-Plainsboro are successful in their quests to be happier, then their coworkers and patients will reap the

rewards. Employees who enjoy frequent positive moods tend to get more favorable evaluations from others, including higher evaluations for the quality of their work and for their productivity, dependability, and creativity. In addition, research indicates that happy people are more satisfied with their jobs than are their less happy peers. Satisfied workers are, in turn, more likely to perform good deeds that extend beyond the requirements of the job. For example, satisfied employees help their coworkers, protect the organization, and aspire to further develop their abilities within the organization. They are less likely to disregard workplace policies, as House regularly does, or to take a colleague's ideas as their own, as Foreman does to Cameron without remorse.

Yet House still has it all wrong. He does not want his team to be happy because he is convinced that "miserable people save more lives. If your life has meaning, your job doesn't have to have meaning" ("Adverse Events"). Yes, House saves lives, and yes, House is miserable, but he has no proof that his misery makes him a better doctor. To test this, he would need to compare his job performance when he is miserable to his job performance when he is happy. (The problem is, he is never happy!) House's unmatched ability to save patients is due, in large part, to his creativity. Rest assured, happiness would not restrict House's creativity or diagnostic prowess. Decades of research demonstrate that people induced to feel positive are more flexible, innovative, and efficient in their problem solving than are those induced to feel neutral or sad. One study found that physicians in a positive mood were relatively more likely to consider the correct diagnosis of a disease earlier and to show flexibility in their diagnostic thinking. These physicians were also less inclined to jump to premature conclusions without sufficient evidence—one of House's major flaws. In sum, House should reconsider his belief that "nothing we do has any lasting meaning" ("Living the Dream") and permit himself to feel good once in a while. Only then could he be really, *really* good at his job.

## Flow

Contrary to Thirteen's and Dr. Miller's views, it is entirely possible to experience the "feel-good," hedonic shade of happiness at work. The

secret is to work in *flow*, a state of complete absorption in the present moment. House likely experiences flow when he is sitting for hours in his office, staring at the whiteboard, bouncing a ball, and focusing intensely on solving a diagnostic puzzle. He loses track of time and is unaware of himself, the pain in his leg, hunger, or any other physiological discomfort. Like a musician composing a masterpiece or an artist creating a painting, his experience is challenging enough to require the peak of his abilities but not overwhelmingly difficult. After House is finished solving the puzzle, he would probably report that the whole process felt good. He felt alert, in control, and capable, like a natural high.

Anyone—young or old, from chess players to dancers to surgeons—can experience a state of flow. The task at hand should stretch the person's abilities by establishing an optimal balance between skill and challenge. Otherwise, if the task is too easy, the individual can become bored, and if the task exceeds his or her skills, then the person is likely to feel frustrated or anxious. House's team is often assigned to engage in risky tasks that require unwavering concentration, such as surgery. These challenging activities are probably more enjoyable than clinic duty or team meetings, precisely because they induce flow.

Other doctors, as well as patients, think less of House because he is more concerned with solving diagnostic puzzles than with his patients' welfare. Wilson sees the real motivation behind House's decisions to run risky medical procedures in "Informed Consent": "This has nothing to do with saving a life. You just can't bear the thought of a patient dying before you've been able to figure out why." Yet the doctors and the patients at Princeton-Plainsboro recognize that this is a win-win situation: House gets to solve puzzle after puzzle, and patients get to live. Everyone is happy . . . except maybe Cuddy, who has to deal with the paperwork and the legal ramifications.

## **Spirituality**

If you are invited as an overnight guest in Wilson's home, do not be alarmed when you hear voices. House thinks he is having auditory hallucinations, but what he actually hears is Wilson speaking to his dead girlfriend. Wilson has no proof that Amber's spirit listens to

him—or that her spirit even exists—yet his nightly ritual comforts him and makes him happy.

Like the vast majority of Americans, Wilson is *spiritual*, meaning that he believes in something divine and greater than himself. Spirituality takes many forms, including faith in a higher being or God, fate, karma, and forces that guide life and death. Religion—that is, spirituality practiced in an institutional context—offers a framework for individuals to understand their role in the world and to imbue their lives with meaning. Furthermore, religion offers people a sense of identity and connects them to a community of supportive and like-minded individuals.

To say that House is not spiritual would be a drastic understatement. House is notoriously disrespectful and intolerant of others' spiritual and religious beliefs because "faith isn't based on logic and experience" ("Damned If You Do"). He does not care how much hope, contentment, and meaning spirituality provides, nor does he care that spirituality can inspire believers to become better people. House is concerned only with the fact that individuals who endorse spiritual beliefs—and who disregard the lack of scientific proof for those beliefs—must somehow be weak, stupid, or incapable of thinking for themselves. In "House vs. God," he greets Boyd, an adolescent faith healer, with the following statement: "Faith. That's another word for ignorance, isn't it? I never understood how people could be so proud of believing in something with no proof at all. Like that's an achievement." Although the divine cannot be proved or disproved, House is determined to seek evidence that *this* life is the only life. House arranges for Wilson to come to his office, "safely" kills himself just before Wilson arrives, and—fortunately for him—is revived. House's experiment confirms that there is no bright light or life beyond death, and it actually saddens him that his recently deceased patient had nothing to look forward to.

House is not the only atheist doctor in the hospital, but he likely sets himself apart from the others (such as Cameron) as the only doctor who is unwilling to accept the benefits of spirituality. The benefits are plentiful, based on a growing body of research evidence. Religious people are happier than those who are nonreligious, particularly if

they report having a strong relationship with the divine and engage in religious behaviors, such as attending services. People who regularly participate in religious services have many friends and acquaintances, and these social bonds can be immensely valuable because they provide emotional and tangible support. Finally, religious folks tend to live longer than their nonreligious counterparts, have superior mental and physical health, cope better with hardships, and have more satisfying marriages.

## **Should Everyone Strive for Happiness?**

People commonly argue that happy folks are content with the status quo and therefore do not care to make improvements in their own lives or in society. As House puts it in “Forever,” “Yeah, if we’re all just satisfied with what we have, what a beautiful world it would be. We’d all slowly starve to death in our own filth, but at least we’d be happy.” House’s statement is a tad extreme and quite incorrect. The truth is (according to research), happy people possess the very qualities that are necessary to make substantial changes in society: social skills, energy, perseverance, optimism, creativity, altruism, and productivity, to name a few. Happy individuals are more likely than those who are unhappy to set high goals and work persistently to achieve those goals. Anyhow, being satisfied with one’s life is distinct from being satisfied with one’s society, the government, or the world at large.

Another popular misconception is that happy people never feel negative emotions. This is far from the truth—in reality, happy individuals experience a wide range of both positive and negative emotions. They just spend more of their time on the positive end of the emotional continuum. When faced with a significant negative event, such as a threat or a loss, happy people react appropriately—they become cautious and vigilant, withdraw, avoid harm, and experience negative moods. Yet happier individuals are more resilient than those who are less happy; they cope better (for instance, by relying on their social networks for support) and hence recover more rapidly from adversity.

## Is There Hope for House?

House deserves some credit. After all, not many of us would have the guts to commit ourselves to a psychiatric hospital or save a friend from delivering a career-destroying speech (by drugging the friend, but that's beside the point). House has made tremendous progress in the years that we have known him, but is he a likely candidate for happiness? Based on his copious maladaptive behaviors and views (e.g., "Half the people I save don't deserve a second chance," "Living the Dream"), the answer is "probably not." At least, not yet.

Rather than striving for happiness, House is better off working on his depressive tendencies. House is unlikely to be clinically depressed—he still gets out of bed in the morning, goes to work, and finds pleasure in solving diagnostic cases—but he does show some symptoms of low-level depression. In particular, he is often in a sad or irritable mood, has little interest in interacting with other people, and holds negative and distorted beliefs about the world. Although House does not have a self-esteem problem (as Wilson says in "Need to Know," "You don't like yourself, but you do admire yourself"), he does not entirely feel that life is worthwhile.

The process of becoming less depressed is both different and similar to the process of becoming happier. House may try therapy and medication for depression—both of which have proved helpful to him in the past. The cognitive and behavioral exercises that he can practice to lift his depression—for example, thinking optimistically, engaging in social activities, and exploring hobbies that he used to enjoy—are also likely to help enhance his happiness. It has been quite a while since we have seen House playing air guitar on his cane. We hope to see it again soon.

## Final Diagnosis: Happiness Has Many Sources

For a hospital full of sick and dying patients, Princeton-Plainsboro produces a surprising amount of happiness. A doctor walks down the hallway, feeling fulfilled because she has made a patient's life better; meanwhile, in an adjacent wing, surgeons are deeply engrossed in

their craft and feel as if everything else in the world is temporarily suspended. In the cafeteria, colleagues are savoring their meals and enjoying one another's company. In the hospital administrator's office, a crippled genius is amused and proud of the latest prank he has pulled. As you can see, happiness has many sources—sometimes joy and ecstasy from a spiritual insight, at times awe and amazement at resolving a complex riddle, oftentimes contentment and satisfaction that arise from human connection, and for House and his team, a sense of purpose and meaning in their life's work.

Many of us look for happiness in the wrong places. We may take a job mainly because it pays more, passing up an opportunity to work in an otherwise more fulfilling but lower-paying occupation. People get married and cannot imagine the marital bliss ever fading, and most of us believe that having children is essential to our lasting happiness. A compelling amount of research, however, says that we are wrong. Scientific evidence suggests that if we want to be lastingly happier, we would be better off focusing our efforts on building and maintaining friendships; seeking purpose, meaning, and flow in our work; and, for those who are so inclined, nurturing our spirituality. Remarkably, those who succeed in enhancing their long-term happiness will be more likely to achieve financial prosperity, as well as to get married and stay happily married, at a later time.

## **Stay Tuned for the Next Diagnosis**

Sometimes, the diagnostic process ultimately fails. Patients may die before doctors correctly diagnose and treat them, or doctors miss something and make the wrong diagnosis. House and his team certainly fail in the case of Kutner. He seems to be the happiest doctor in the department before his sudden suicide. Kutner is friendly and sociable, has avid interests outside of work, has loving and supportive adoptive parents, and holds a Guinness World Record for crawling twenty miles. He appears to have a zest for life and even says that because he had a horrible childhood (due to witnessing the murder of his biological parents and being in foster care), he had nowhere to go hedonically but up. The other doctors fail to notice any signs



of distress that Kutner is exhibiting. Or, maybe Kutner is so good at covering up his unhappiness that not even House—the most gifted diagnostician in the United States—or Lucas, a private investigator, can guess that something is amiss.

Nevertheless, House demonstrates that the diagnostic process is frequently successful. We have uncovered in this chapter that House, his team, and his colleagues are not quite as miserable as they initially appear. In fact, they can be fairly happy at times. Ruling out money, marriage, and parenthood as their primary sources of long-lasting happiness, we discover that it is likely their work that makes them happy—the friendships formed, the intrinsic rewards inherent in their jobs, the flow experiences, and the spiritual issues raised by their work. Indeed, the various sources of happiness experienced by the team may be the driving force behind their diagnostic triumphs.

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# **HOUSE AND PSYCHOLOGY**

## **Humanity Is Overrated**

EDITED BY TED CASCIO AND  
LEONARD L. MARTIN



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