

MAAC BASICS

SOME THEORY BEHIND THE METHOD

THE BASIC IDEA BEHIND MAAC IS TO MAKE IT AS EASY AS POSSIBLE FOR PEOPLE TO FEEL GOOD WHILE DOING GOOD.

Here we provide some more details about what we mean by doing good and feeling good, a sample of research studies that support our claim, the *paradox of helping*, possible therapeutic applications, the *oxygen mask assumption*, the perils of burn-out, and why we need maacs.

WHAT DO YOU MEAN BY 'DOING GOOD'?

By 'doing good' we are referring to any action that makes a positive difference for someone else, or for the world more broadly. This includes both actions that benefit someone directly, like delivering a home-cooked meal or teaching someone English, and actions that help others in an indirect way, like planting a community garden or organising a charity run.

WHAT DO YOU MEAN BY 'FEEL GOOD'?

By 'feeling good', we simply mean the increase in the experience of positive emotions, which are subjective feelings associated with particular patterns of physiological activity. Positive emotions are often associated with increases in the brain of specific neurotransmitters that many people are familiar with—including dopamine and serotonin—and decreases in stress hormones, such as cortisol.

IS 'FEELING GOOD' MORE ABOUT PLEASURE OR MEANING?

There are two distinct conceptions of what 'feeling good,' or 'happiness,' means and interestingly, 'doing good for others' works with both.

The *hedonic* approach to happiness emphasises feeling good in the here and now, whereas the *eudaimonic* approach emphasises optimal living through growth, engagement and meaning. Positive emotions are central to both, but in the hedonic approach, positive emotions essentially *define* happiness, while in the eudaimonic approach, positive emotions are a *result* of engaging in growth, engagement and so on.

Research suggests that helping others feels good both in the moment (hedonic happiness) and also gives our lives a sense of engagement and meaning (eudaimonic wellbeing). [1]

HOW DO WE KNOW IT FEELS GOOD?

On a very basic level, we know helping others feels good from personal experience. Think about how good it feels to know you've helped someone. You may have experienced what is known as the 'helper's high'—the boost of positive emotions that comes from helping someone else. And if you think about what gives your life meaning, chances are it involves what you are able to give to or do for others.

Now, if a sceptical voice is nagging you, saying, "*But personal experience isn't proof*" or "*People are just saying it feels good to look good*" or "*It feels good for me because I was raised with good values but most people are selfish*", rest assured, there is now a wealth of research that shows that doing good really does feel good, or, in the jargon of psychological science, that prosocial behaviour increases subjective wellbeing and psychological flourishing. We describe some of this research below.

WHAT ARE SOME EXAMPLES OF RESEARCH THAT SHOWS THAT HELPING FEELS GOOD?

There are scores of studies showing that helping others increases wellbeing. Many people are familiar with large-scale studies showing, for instance, that volunteering is associated with health and happiness. People who volunteer are in better health, live longer, and rate themselves as happier than people who don't. These kinds of studies are informative to some extent, but they only tell us that there is a relationship between helping and happiness. They don't tell us that helping makes us feel good. To show this, we need experimental studies, especially those using randomised control trials, where people are randomly assigned to one condition and compared with another. Below is a sample of some experimental research showing the benefits of doing good.

ACTS OF KINDNESS

One of the now-classic Positive Psychology interventions is engaging in 'Acts of Kindness'. Numerous studies have found that doing small acts of kindness for others is a reliable way to boost one's mood. [2] This can include anything from helping someone with their groceries, buying someone a coffee or extending an unexpected compliment.

A recent study, for instance, randomly assigned 472 people to one of four conditions, where they engaged in different activities once a week for a month. Some were asked to do something kind for themselves, some were asked to do something kind for someone else, some were asked to do something kind for the world and a control group was asked to list their daily activities. At the end of the study, the results demonstrated that people in the two prosocial groups (other-kindness and world-kindness) showed increases in wellbeing (increases in positive emotions, decreases in negative emotions) compared to the control group and the group told to focus on themselves (self-kindness). [3]

YOUR BRAIN ON HELPING

Other studies have examined what happens in the brain when people help others. For instance, one study found that the 'pleasure centers' of the brain light up when people make charitable donations. [4] Another study found this occurred even when this came at a cost to themselves and when it was involuntary. People received \$100 and played a simple game with a computer inside a brain scanner. On different trials, they would win money, or lose money, some of which would be transferred to a food bank. Imaging results showed that the reward centres were activated when money was given to a good cause, even if this was involuntary. [5]

HELPING FEELS GOOD CONT'D

GENEROSITY BOOSTS

Other research has found that people get a bigger boost from giving money away, sometimes to random strangers, than from being given money themselves! [6]

In one study for instance, people were randomly approached on a university campus, asked a few initial questions, then given an envelope in which they found some cash—either \$20 or \$5—and a note. For some participants, the note instructed them to spend the money on themselves by the end of the day, in whatever way they wanted. For others, the note instructed them to spend the money on someone else.

Participants who spent the money on others were happier at the end of the day than those who had spent it on themselves, regardless of how much they had been given to spend. [7]

HELPING DECREASES PAIN

A focus on others has even been found to reduce the perception of pain. One study, for instance, examined the reported levels of pain when giving blood. Researchers found that when people gave blood to help earthquake victims, they reported less pain than when blood was drawn for their own medical tests. [8]

HELPING REDUCES STRESS

Other studies have examined how helping others can reduce stress. For instance, one study looked at people's physiological stress responses (like heart rate, blood pressure, markers in saliva) when undergoing a standard laboratory-based stress task. People were randomly assigned to one of two conditions. People in the 'helping' condition wrote a supportive note to a friend before engaging in the stressful task, while people in the control condition wrote about their route to work. Results showed that people in the helping condition exhibited fewer and less intense stress responses compared to the control group. [9]

These results are consistent with an fMRI study which examined the neural activity associated with giving and receiving support. Giving other people support resulted in reduced stress-related neural activity, whereas receiving support did not. [10] This has important implications for self-care and therapeutic interventions, as described below.

CAN HELPING OTHERS BE USED IN THERAPEUTIC WAYS?

Yes. First, it should be noted that several studies have shown that other-focused behaviour (e.g., helping, acts of kindness) is not only effective, but often more effective for people who are struggling in one form or another.

For instance, adolescents felt better on days when they helped others more and this was strongest for those who reported the most depressive symptoms. [11] Likewise, performing acts of kindness for others has been shown to be particularly effective for people struggling with social anxiety [12], as well as for people with high levels of hostility and antagonism. [13]

Beyond this, however, there are many studies looking at how prosocial behaviour can be an effective way to increase wellbeing for people struggling with grief and loss, chronic illness, addiction and alcoholism and other issues, some of which are described below.

GRIEF & LOSS

When people experience grief and loss, our reaction is generally to provide support, not to suggest that the bereaved go and find others to support! One study, however, with people experiencing significant grief following the death of their spouse, found that the best predictor of a decline in depressive symptoms was not the amount of support received, but the degree to which the bereaved was able to provide support to others. [14]

This is in line with another study that asked people struggling with traumatic grief what kinds of support they found most helpful (professional, familial, community). Perhaps surprisingly, the social support that was found to be the most helpful of all came from their pets! [15]

From our perspective at Maac, this is revealing, insofar as one of the key differences between support from pets and people is that pets provide support by giving people something to care for. Indeed, recent work has promoted prosocial behaviour as a mechanism to mitigate against depression in times of separation and loss. [16]

HELPING IN THERAPEUTIC WAYS CONT'D

CHRONIC ILLNESS

Along similar lines, another study looked at how giving and receiving support impacts mortality rates of patients with chronic kidney disease. After controlling for other factors, it was the amount of support provided to others that had the biggest effect on mortality rates. Specifically, patients who gave more social support to others, whether through emotional support, giving advice or material aid, were less likely to die over the next 12 months. The level of support received had no effect on mortality risk. [17]

ADDICTION & ALCOHOLISM

Helping others has been shown to be particularly effective in people struggling with addiction and alcoholism as well.

For instance, one large-scale study looked specifically at the effects of helping others while participating in alcohol recovery programs (AA-related helping). The study examined the outcomes of more than 200 people recovering in nine treatment programmes over a ten year period and found that helping others was a key factor in staying sober. [18] Maria Pagano, one of the principal researchers, stated succinctly, “We’re doing a disservice to patients if we don’t encourage their involvement in service when we know that service is linked to good things.”

WHAT ABOUT SELF-CARE? ISN'T SELF-CARE IMPORTANT TOO?

Self-care is important, of course. But self-care does not have to be at odds with taking care of others. At Maac, we take issue with what we call the *Oxygen Mask Assumption*, which prioritises taking care of oneself first to then better take care of others (echoed in phrases like *You have to love yourself to be able to love others*, or advice like *Having a bad day? Treat yourself to a massage*).

At Maac, we find that helping others can be a powerful and an often overlooked way of taking care of ourselves. Furthermore, we find that sometimes the people who are struggling the most may benefit the most from caring for others, as described in more detail below, and in this article.

IT DOESN'T ALWAYS FEEL GOOD TO HELP OTHERS. SOMETIMES IT CAN BE THE OPPOSITE AND EVEN LEAD TO BURNOUT. HOW CAN THAT BE EXPLAINED?

This is what we call the *Paradox of Helping*: sometimes helping others feels wonderful, while other times it can be a burden.

There are three factors that are key to making helping (or any activity, for that matter) feel good: a sense of autonomy, a sense of competence and a sense of relatedness or belonging. These three factors have been identified as basic psychological needs in one of the most powerful frameworks in psychology, Self-Determination Theory [19] and are extremely important when applied to prosocial behaviour. [20]

In terms of autonomy, for instance, it is important to feel as if helping others is our choice, not an obligation. In terms of competence, it is important to feel that our actions have an effect on others and that we are able to make a difference. In terms of relatedness, it is important that we feel a sense of connection to something larger than ourselves.

Many current forms of helping others overlook one or more of these needs. Community service may not feel like a choice, giving money may lack in terms of relatedness and volunteering may not satisfy a need for competence.

This can help explain burnout as well. A nurse with too many patients may be feeling all three needs missing as they feel less competent in attending to each and every patient, decreased autonomy in what they can do given their time and work load and decreased relatedness in not being able to connect as much as they would like.

These three needs are baked into the Maac method, where people choose the project they want to do (autonomy), using their specific skills (competence) for a cause they care about (relatedness).

WHY DO WE NEED TO MAKE HELPING OTHERS EASIER?

A maxim of behavioural science is “If you want more of a given behaviour, make it easy.” Making it easy means removing as many frictions as possible (scrolling through social media is a great example of a frictionless, easy activity). One could argue that it’s already pretty easy to help others (giving money isn’t hard, signing up to be a volunteer is easy enough), but we can make it even easier. And given the win-win of helping done right—people feel better, the world is helped—we need to do everything we can to make it as easy as possible.

Easier means it is more accessible, means that more people do it and means that people are happier and the world becomes a better place. Our goal, after all, is massively accessible actions for change (MAAC).

WHY DO WE NEED MAACS?

Maac makes helping others easy in the following three ways.

- First, the concept itself. By definition, maacs are small and fun to do. Both of these elements make it easy. Smaller = easier. More fun = intrinsically rewarding, so with less friction to get started and less friction to continue.
- Second, we give it a name. This can help it spread. The phenomena of hobbies, fitness and adolescence all existed before they had names, but multiplied exponentially through the simple act of recognising what is being done with a name. And for all the people who are already doing maac-like projects without necessarily calling them maacs, applying this name has the added benefit of making it somehow feel more substantial. People in our workshops sometimes discover they’re already doing maacs and say “Oh that’s a maac? Cool!” What was previously ‘only’ a pastime suddenly becomes a thing, a project.
- Third, the method itself. We’ve created a series of 20 exercises that turn the whole process of finding a project into a series of small and fun steps. This is not about telling people “You know, doing good is super-important for individual and societal wellbeing. What’s your contribution project?” Instead, this is about taking a few minutes to do Mindmap My Likes, Daily Snapshots, Positive Cascade and Maac x 3, having a good time doing these, and by the end of these exercises, feeling empowered and raring to get started.

It should be noted that of these three ways, the concept and coining a name are the most important. We’ve added the method to make it easier, but the first two can live outside of Maac as an organisation. If we don’t make a cent, but lots of people are doing maacs (whatever they are called), we will die happy.

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