THE CONCEPT OF WELLBEING AND ITS APPLICATION IN A STUDY OF AGEING IN AOTEAROA NEW ZEALAND

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ABSTRACT

The concept of wellbeing is widely used in social and economic research, including ageing research, but not always with a clear definition or understanding of what constitutes wellbeing. A considerable body of literature has developed aimed at clarifying the concept of wellbeing and identifying its constituents. Underlying this literature are two contrasting perspectives: one in which wellbeing is associated with the satisfaction of desires or preferences (hedonic), and the other in which it is associated with the life activities in which people engage (eudaimonic). The latter perspective is consistent with the capabilities approach to wellbeing that is proposed by Amartya Sen and has been further developed and adapted by Martha Nussbaum and others.

In the EWAS study, wellbeing has been conceptualised broadly and linked very closely to a person's location and functioning in society, with considerable attention being paid to their transactional, social and recreational relationships with kin and non-kin. This paper locates the conceptualisation underlying the EWAS study within the wider literature on wellbeing, with particular reference to Sen’s capabilities approach and its variants. Following a detailed discussion of the concept of wellbeing, the paper outlines relevant New Zealand focused research that addresses the issue of wellbeing to varying extents, and indicate how this study fits into and supplements the existing body of research. The paper identifies the capabilities basis of the EWAS study and outlines its application in the research instruments being developed for the study. Finally, the paper discusses elements of best practice in ageing research that have been gleaned from several major research programmes into ageing that have been carried out in Europe, North America, and the Middle-East.

Keywords: Capabilities, Eudaimonic, Griffin, Hedonic, Nussbaum, Prudential values, Psychological wellbeing, Qizilbash, Ryff, Sen, Subjective wellbeing, Wellbeing.

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1. INTRODUCTION

This paper discusses the concept of wellbeing and its use in a study of ageing in Aotearoa New Zealand. The study concerned is named Enhancing Wellbeing in an Ageing Society (EWAS)\(^2\) and is using a multi-method approach to investigate the experiences, expectations and aspirations of people who are currently aged between 65 and 84 years, on the one hand, and the expectations and aspirations of people currently aged between 40 and 64 as they look forward to being in the older age group, on the other. As the name of the study suggests, the idea of wellbeing is central to it; but what is wellbeing, and how is this concept operationalised in the study? Like other concepts, such as the concept of social capital, the concept of wellbeing is widely used, but often without being clearly defined. In the past decade, in response to this lack of clarity, a considerable review literature has developed around the question of the meaning, application and measurement of wellbeing. For example, see: Gasper (2004); Harkness (2004); Keys, et al. (2002); Klasen (2004); McGillivray and Noorbaksh (2004); Manderson (2005b); Neumayer (2004); Paim (1995); Qizilbash (1998); Ryan and Deci (2001); Ryff (1989); Sen (1993 and 1999); Sointu (2005); Veenhoven (2004).

It is not the purpose of this paper to duplicate that work, but to draw upon it in order to inform and clarify the use of the wellbeing concept in the EWAS study. Following a detailed discussion of the concept of wellbeing, the paper will outline relevant New Zealand focused research that addresses the issue of wellbeing to varying extents, and indicate how this study fits into and supplements the existing body of research. Finally, the paper will discuss elements of best practice in ageing research that have been gleaned from several major research programmes into ageing that have been carried out in Europe, North America, and the Middle-East.

A central component of the EWAS study is a national survey of 2,000 people in the 40 to 64 age group and 2,000 in the 65 to 84 age group. The questionnaires that have been developed for this survey cover two broad areas: 1. domains of wellbeing; and 2. intergenerational transactions in the form of material, emotional and financial support. The primary survey will be followed by further, focused surveys and qualitative interviews and focus groups to investigate selected areas in greater detail than is possible in the main survey. Running parallel to the survey and qualitative components are seven case studies that are being carried out by stakeholder organisations in New Zealand with funding from the EWAS project.

In this study, wellbeing has been conceptualised broadly and linked very closely to a person's location and functioning in society, with considerable attention being paid to their transactional, social and recreational relationships with kin and non-kin. In New Zealand, increasing cultural diversity requires the application of an approach that is sensitive to the social bases of wellbeing and capable of identifying and capturing differences in these among, at the very least, the four largest broad cultural groupings: Maori, European/Pakeha, Pacific and Asian. In this regard, the project is informed by

\(^2\) EWAS is funded from the New Zealand Public Good Science Fund by the Foundation for Research Science and Technology, and conducted jointly by the Family Centre Social Policy Research Unit and the University of Waikato Population Studies Centre.
work dealing with conceptual issues associated with the wellbeing of Maori people (Kukutai, 2006 and Love and Praat, 2004)

The broad conceptualisation adopted for EWAS, shown in Figure 1, is consistent with the development of approaches to wellbeing that emphasise its basis in the things that people do and are able to do, and recognise that while wellbeing might be an outcome that is experienced by individual people, it is achieved, experienced and interpreted within particular socio-cultural contexts and by people with different needs and abilities.

The view that wellbeing is closely (inextricably) linked to social context is concisely put by Manderson (2005a:12): “Wellbeing is not the state of individual bodies but of bodies in society.” And: “Wellbeing includes more than physical and mental health: it incorporates a sense of satisfaction, contentment, personal fulfilment and existentia calm; much more so than health, it is a social construct. Accordingly, it can be redefined, refined and reinterpreted at any place and time.” (Manderson, 2005a:4). The view that wellbeing is inextricably linked to social context results, in part, from a critique of utilitarian and desires-based understandings of wellbeing, as will be discussed later.

Figure 1.

Underlying the whole field of wellbeing conceptualisation are two contrasting approaches to understanding the wellbeing of the individual person: hedonic and eudaimonic. The hedonic approach associates wellbeing with subjective happiness and the experience of pleasure (Ryan and Deci, 2001). The eudaimonic perspective, on the other hand, differentiates wellbeing from the satisfaction of desire, arguing that
wellbeing and subjective happiness should not be equated because the pleasure producing outcomes that underlie subjective happiness do not necessarily promote wellness and wellbeing (Ryan and Deci, 2001). The hedonic view underlies the utilitarian approach to wellbeing in economics and the subjective wellbeing approach in psychology. The eudaimonic approach, on the other hand, underlies the capabilities approaches to wellbeing in economics and the psychological wellbeing approaches in psychology.¹

A critical consideration for deciding between approaches is the question of what is measured and whether this is sufficient for the purposes of the study. For example, a study based upon a hedonic understanding of wellbeing can be content with fairly simple and parsimonious subjective scale measures of happiness, etc. The result of such a measure is an indication of the degree of subjective wellbeing present, but no information about the conditions associated with that wellbeing. A study based upon a eudaimonic understanding of wellbeing, on the other hand, must move from reliance upon subjective evaluations of feelings experienced to considering the life activities in which people engage in accordance with deeply held values (Ryan and Deci, 2001:146).

In Sen’s (1999) terms, the evaluation of eudaimonic wellbeing is dependent upon a broader “informational base” than is required or provided by the hedonic approach. It will be argued in this paper that a eudaimonic understanding of wellbeing is an important basis for studying wellbeing in an ageing society and is, indeed, fundamental to the capabilities approach that will be shown to inform this study. Having said this, it should be noted that this study will include scales designed to measure the hedonic, utilitarian dimension of subjective wellbeing. This approach is consistent with findings from a study by Clark (2005)⁴ which support the provision of more space in the capabilities approach for the role of utility. The data provided by these scales will be used in conjunction with data concerning a wide range of things that people do (Sen’s “functionings”) and the combinations of these functionings (Sen’s “capabilities”)⁵

In disciplinary terms, the literature on wellbeing flows in four streams: three deriving, respectively, from philosophy; economics; and psychology; and a fourth with contributors drawn from sociology, anthropology, philosophy, and political science – as well as economics and psychology. The fourth stream has drawn from the first three to develop frameworks that explore the relationships between individual wellbeing and social context to a greater extent than some hedonic and utilitarian-based approaches employed in psychology and economics allow.

This paper will locate the conceptualisation underlying the EWAS study within the wider literature on wellbeing, with particular reference to variants of the capabilities approach that is associated primarily with Sen and Nussbaum. The thrust of this paper is to explain the orientation of EWAS in relation to established wellbeing perspectives.

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¹ Within psychology, the terms “subjective wellbeing” and “psychological wellbeing” are used to distinguish the two distinct approaches. See Keyes, et al., 200s for a detailed discussion of these approaches within psychology.

⁴ That study is discussed later in this paper.

⁵ These central elements of Sen’s approach are discussed in some detail later in the paper.
The second section of the paper, following, will provide a detailed discussion of the concept of wellbeing. Section 3 will outline relevant New Zealand focused research that addresses the issue of wellbeing to varying extents, and indicate how the EWAS study fits into and supplements the existing body of research. Section 4 will discuss elements of best practice in ageing research that have been gleaned from several major research programmes into ageing that have been carried out in Europe, North America, and the Middle-East. Section 5 will discuss the research instruments that are being developed for EWAS, how they will contribute to investigating the selected elements of wellbeing and how these combine to facilitate or frustrate the achievement and maintenance of wellbeing in older people.

2. WELLBEING

Origins and definitions of concept

The concept of wellbeing is very broad and is applied to many situations for a variety of purposes (Paim, 1995). Applications of the concept range from specific domains of wellbeing, such as economic, material, social, and psychological, to all the domains impacting upon people. The diversity results from the different reasons there are for using the concept and different approaches to measuring it. The particular measure or measures that are used – or developed for use – in any particular context reflect the purpose of the measurement and the disciplinary and theoretical perspectives that inform the measurement.

Veenhoven (2004) suggests that, very broadly, the term ‘wellbeing’ “denotes that something is in a good state.” Beyond that, the term does not, in itself, specify what is in a good state, nor the criteria for being in a good state (Veenhoven, 2004). As with other ‘catchall’ terms, such as ‘progress’ and ‘welfare’ Veenhoven (2004) suggests that the term ‘wellbeing’ needs to be clarified by specifying what the term applies to and what constitutes it (a state of wellbeing). As far as the first question is concerned, the approaches to wellbeing that are discussed in this paper focus on the wellbeing of people, whether through the satisfaction of their preferences or the exercise of their capabilities. For the purposes of the EWAS study, wellbeing is being investigated at several levels: the individual and collective levels. The latter including the community, ethnic and cultural groupings, and other groups of shared interest and/or characteristics. The second question, concerning what it is that constitutes wellbeing, is more contentious, but the answers really fall into two categories that align with the hedonic and eudaimonic approaches. The hedonic approach focuses upon revealed subjective experience of pleasure or satisfaction, while the eudaimonic approach ranges more broadly to consider either resources, such as income and wealth, or the things that people are able to do with the social, economic and material resources available to them.

The development of the systematic measurement of wellbeing in the western world has been linked with the social indicators movement that developed in the 1950’s and

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6 Other work on wellbeing that is being carried out in New Zealand refers to “social wellbeing” (Ministry of Social Development, 2005) but ultimately retains the individual as its object by considering the social determinants of individual wellbeing (Smith, 2004).
60’s to monitor non-economic aspects of life, with a focus on objective measurement rather than subjective accounts (Hird, 2003: 6).

The use of objective indicators is based on the assumption that wellbeing is dependent upon a set of needs that are common to all people and that can be identified by experts (Prince and Prince, 2001). Objective measures are useful at a population level because they facilitate comparability by treating all individuals in the same way (Hird, 2003). Compared to subjective measures, objective measures provide a “voice” for those who might – due to disability, for example – be unable to adequately articulate their level of wellbeing (Hird, 2003). Objective measures also control for variations in people’s expectations and experiences that can result in wide variations in reported satisfaction levels in relation to common objective conditions (Felce and Perry, 1995).

Clearly, though, the administrative convenience associated with objective measures can serve to mask important differences among population sub-groups; differences associated with such factors as: experience; ethnicity; sociocultural background; belief systems; age; gender; employment; education; and so on. In order, therefore, to obtain a more complete picture of wellbeing and what it means to different people, the application of subjective measures is important, also.

**Economics approaches to wellbeing**

From a narrow economic perspective, objective definitions of wellbeing can be divided into two types: resource related and consumption related (Paim, 1995). Resource related definitions typically focus upon indicators such as income (Paim, 1995), earning capacity (Garfinkel and Haveman, 1977), income combined with net worth (Weisbrod and Hansen, 1977) and in terms of a debt-asset ratio (Marlowe and Goodwin, 1988). National level measures such as GNP are sometimes used as crude wellbeing indicators for a nation; but they are not equipped to identify inequality associated with differential distributions of income, and are of limited usefulness in studying individual wellbeing.

Consumption related definitions associate wellbeing with the consumption of goods, services and resources. Under this approach wellbeing is commonly evaluated in terms of a gap between either a person’s desired consumption and actual consumption, or their current consumption and past consumption (Paim, 1995). The closer a person’s actual consumption is to the level they desire, the higher their level of wellbeing is judged to be. Conversely, the more their actual consumption falls short of desired consumption, the lower their level of wellbeing is judged to be. Similarly, if their present consumption is higher than previously, their wellbeing is judged to have increased, and vice versa.

Resource and consumption related approaches are not further discussed in this paper, which focuses on approaches that take resources to be necessary but not sufficient means to achieving wellbeing, and focus more upon the relationship between a person’s achieving wellbeing and their ability to utilise resources for that purpose. In the case of hedonic approaches, it is assumed that a person will have utilised the resources at their disposal successfully if they express satisfaction with their desires and preferences having been met. In the case of eudaimonic approaches, the focus of
study is upon the things that people do in their lives that have the potential to establish and enhance their wellbeing.

Qizilbash (1998) discusses two accounts of wellbeing that are employed by economists: the desire account; and capability views. The desire account associates wellbeing with utility and the satisfaction of desires or preferences; capability views associate wellbeing with achievement or success that is dependent upon personal capability. Sen (1993 and 1999) has developed a version of the capability view that emphasises the importance of freedom in enabling capability to be effectively employed in the achievement of wellbeing. Qizilbash then advances an alternative that he argues is better able to accommodate diversity of forms of wellbeing and good life. For this alternative account he refers to the prudential value list proposed and developed by James Griffin (1986 and 1996). The prudential value list approach links wellbeing to “certain prudential values that make any distinctively human life go well” (Qizilbash, 1998). The prudential value list approach will be discussed later in conjunction with a discussion of the question of specifying capabilities. This discussion will cover Sen’s decision not to specify a list of capabilities and of Martha Nussbaum’s commitment to doing so. In the context of that discussion, the prudential value list becomes a potential source of content for a list – or lists – of capabilities.

Utilitarianism and Subjective Wellbeing

Utilitarianism, in its classical, Benthamite, form, is based upon the idea that a person’s ‘utility’ is a measure of the happiness or pleasure that they experience through the satisfaction of their preferences, and is the basis of their welfare and/or wellbeing (Sen, 1999:56; Nussbaum, 2005). In contemporary forms of utilitarianism, utility is seen “not as pleasure, satisfaction or happiness, but as the fulfilment of desire, or as some kind of representation of a person’s choice behaviour” (Sen, 1999:57). However, utilitarian-based economic approaches to wellbeing do not capture the complexity that underlies preferences, such as the socialisation that “shapes the content of what might be called a ‘preference’” (Nussbaum, 2005:34). As Nussbaum argues, utilitarian welfarism treats individuals as “bags of unscrutinised desires” and masks the way in which individuals rank their desires in ordering their lives, and adjust them in response to changing conditions and norms. A clear feature of the critique of utilitarianism, then, is its masking of the social complexity underlying the development and expression of preference. The significance of this feature has been reinforced by a growing interest in the issue of inter and intra national cultural plurality. As Nussbaum puts it: “utilitarian conceptions of wellbeing seem inadequate to provide the basis for an account of central political entitlements in a pluralistic society” (Nussbaum, 2005:36).

The subjective approach underlying utilitarianism is an important focus of psychological research into subjective wellbeing. Subjective wellbeing is associated with a balance between positive and negative mood or affect and an evaluation of life satisfaction (Keyes, et. al., 2002; Ryan and Deci, 2001). Subjective wellbeing can therefore be said to exist when a subject experiences life satisfaction, the presence of a positive mood and the absence of a negative mood (Ryan and Deci, 2001). With its emphasis on positive mood, subjective wellbeing has been linked to the hedonic view
of wellbeing, and research within the field of hedonic psychology often uses assessments of subjective wellbeing (Ryan and Deci, 2001).

However, subjective evaluation has a disadvantage that is associated with the observed tendency for people’s reports of their overall life satisfaction to cluster around 70 on a 100 point scale. Declines in satisfaction following a crisis recover in time to the “normal” level. (Clark and Gough, 2005:47) (see also Ranzijn and Luszcz, 1999). This is a positive bias that Cummins (2005) argues is necessary for normal functioning. This positive bias suggests that a hedonic approach should be supplemented by a broader based eudaimonic consideration of social and behavioural factors in order for desires and preferences to be understood in relation to their social context. In this regard, Westerhof, et al. (2001) found that subjective measures based on global evaluations of life concerning life satisfaction, achievements and progress, for example, tend to produce positive evaluations. On the other hand, measures focusing on specific areas or domains, such as health and illness, intrapersonal and interpersonal relationships, employment, socioeconomic conditions, etc. are more likely to produce negative evaluations.

Proponents of the subjective wellbeing approach make the valid point that the eudaimonic approach leaves the definition of wellbeing to experts because it is they who decide upon the factors that are supposed to be good for people, whereas the subjective approach allows researchers to learn this from the people (Diener, et al., 1998, cited in Ryan and Deci, 2001). While slightly disingenuous, due to the subjective approach itself having being formulated by “experts”, this view does have merit, and the need for “stakeholder” contributions to developing and prioritising wellbeing indicators is advanced by some contributors to the field (see, for example, Clark and Gough, 2005) and has, in fact, been a central feature of the EWAS project for which an extensive process of stakeholder consultation was undertaken to inform the development of survey questionnaires.

Psychological Wellbeing and the Capabilities approach

The psychological wellbeing and capabilities approaches both represent responses to the subjective focus of the subjective wellbeing approach in psychology and the utilitarian approach in economics. Both share eudaimonic roots which lead them to develop broader informational bases than are employed or required, by exclusively hedonic approaches.

Psychological wellbeing

Psychological wellbeing is linked to engagement with the “existential challenges of life” (Keyes, et al., 2002). Ryff has examined the question of psychological wellbeing using a eudaimonic, rather than hedonic, perspective (Ryff, 1998). Using a lifespan theory of human flourishing (Ryan and Deci, 2001), Ryff developed a multidimensional approach to measuring psychological wellbeing on six dimensions: self-acceptance, positive relations with others, autonomy, environmental mastery, purpose in life, and personal growth (Ryff, 1989). These dimensions overlap the ten
The essence of Sen’s critique of both desires-based and income/consumption-based approaches to wellbeing is that neither engages the essence of wellbeing (Martins, 2006). For example, in the case of income/consumption-based approaches, which consider access to goods, commodities and the distribution of resources, the focus is upon the means to wellbeing rather than the wellbeing or “actual living that people manage to achieve” with the means available to them (Sen, 1999:73). Similarly, in the case of desires-based approaches, utility, as reflected in the satisfaction of desires and preferences, represents a malleable “mental metric of pleasure” (Sen, 1999:63) that masks the ability of people to adjust their satisfaction to worsening (or improving) conditions (Sen, 1999:62; and Martins, 2006). In addition, Sen is critical of the utilitarian emphasis upon the sum ranking or aggregation of preferences and associated masking of “inequalities in the distribution of happiness” (Sen, 1999:62). Finally, Sen is critical of the way the utilitarian approach detaches happiness from rights and freedoms in a way that would, for example, allow for “happy slaves or delirious vassals” (Sen, 1999:62) to fulfil the requirements of hedonic wellbeing.

Sen’s response to bridging the gap between the incomes and commodities that provide the basis of wellbeing, on the one hand, and the achievement of wellbeing, on the other, is to identify the factors that lead to “variations between our real incomes and the advantages – the well-being and freedom – we get out of them” (Sen, 1999:70). He identifies “at least five” sources of variation in the quality of life that is able to be derived from a given income (leaving open the possibility of others): 1. Personal heterogeneities, differences in personal attributes, such as disability, that affect the use a person is able to make of their income; 2. Environmental diversities, variations in physical environmental conditions that result in different needs in areas such as clothing and heating, and exposure to disease; 3. Variations in social climate, differences in social conditions that affect ability to convert income into quality of life, such as provision of public education, prevalence of crime and violence, public health, and so on; 4. Differences in relational perspectives, related to social climate, and addressing the fact that a given income might be adequate to meet socially

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7 These are listed and discussed later in this paper.
determined requirements in one place where, for example, a television is not considered essential, but not in another where a television is considered essential for normal social functioning; and 5. *Distributions within the family*, the distribution of wellbeing among the members of a family is related to the pattern of intra-family income distribution, the criteria for which might vary from place to place and family to family according to distributional rules that might be based upon gender, age or perceived needs, for example. (see Sen, 1999:70-71). These complexities serve to highlight the informational deficits (Sen, 1999:56) associated with the utilitarian and consumption based approaches, which fail, in Sen’s view, because they do not take into account sources of variation such as those just outlined (Sen, 1999:70-71).

Before abandoning an income/consumption based approach, Sen examines Rawls’s concept of “primary goods” which provides a broader informational base for a consumption-based approach to wellbeing. Primary goods refer to any means by which people can promote their ends and wellbeing; they include “rights, liberties and opportunities, income and wealth, and the social bases of self-respect” (Rawls, 1971:60-65, cited in Sen, 1999:72). However, Sen argues that in the end, the broadened informational base is not “adequate to deal with all the relevant variations in the relationship between income and resources, on the one hand, and well-being and freedom, on the other” (Sen, 1999:72). In his own earlier work addressing the issue of famine in Bangladesh, when food was available but not adequately distributed (Sen, 1999), Sen used the term “entitlements” as a means of distinguishing between the quantum of resources, goods and commodities that exist to be used and consumed, on the one hand, and those that any particular person or group or class of person is entitled to use and consume, on the other hand. The idea of entitlements served to move the focus of analysis from commodities themselves to the wellbeing of people, but still retained a strong focus on commodities (Pressman and Somerfield, 2002:430) and consumption issues. To bring analysis of human wellbeing into closer focus, Sen moved from the idea of entitlements to that of capabilities.

In articulating the capabilities approach, Sen moves the focus away from the means by which good living is achieved, to “concentrate on the actual living that people manage to achieve” (Sen, 1999:73). From this perspective, access to commodities or primary goods does not itself constitute wellbeing, but a means by which a person achieves – or has the potential to achieve, wellbeing. Ability to convert primary goods into ability to achieve chosen ends will vary according to relevant personal characteristics or capabilities (Sen, 1999:74-75). For example, a person with a physical disability that limits their mobility would need to convert more of a given commodity or primary good in order to achieve a mobility related goal than would a person without that disability.

Sen formulates his capabilities framework as an “evaluative space” in which the objects of value are “functionings” and “capabilities” that represent the range of human acts that can combine to facilitate the achievement of wellbeing (Sen, 1993:32-33). Functionings are “the various things [a person] manages to do or be in leading a life”; these range from the most elementary functions, such as providing for basic

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8 As Sen (1993:32) explains, an evaluative space for a different approach to wellbeing would contain different objects of value. For example the evaluative space for a utilitarian analysis of wellbeing would consist of “individual utilities (defined in the usual terms of pleasures, happiness or desire fulfillment).”
physical needs, and complex functions, such as those associated with achieving social integration and self-respect, for example (Sen, 1993:31). A person’s capability is a reflection of their capacity to combine the functions available to them in ways that enable them to achieve goals and objectives (Sen, 1993:31-35). Any particular combination of functionings is termed a capability set (Sen, 1993:38-39).

The question is now raised as to whether wellbeing is dependent upon achieved functionings, or capabilities, or both? The common description of the approach as a “capabilities” approach to wellbeing suggests that wellbeing should be evaluated on the basis of a person’s capabilities as manifested in their capacity to combine and utilise functionings in distinct capability sets. On the face of it, there is no reason to suppose that a person’s wellbeing could not be defined on the basis of achieved functionings, without reference to the concept of capabilities. To do so, however, would be to effectively bracket the important dimensions of personal agency, capacity and human capital, and Sen’s emphasis upon the importance of freedom. For example, in distinguishing between “wellbeing achievement” and “wellbeing freedom”, where the former is associated with achieved functionings and the latter with capabilities, Sen argues that if the act of choosing between alternatives is considered to be a part of human life, both “wellbeing achievement” and “wellbeing freedom” must be evaluated in terms of capability sets (Sen, 1993:39).

Sen’s approach is one that attempts to bridge the agency structure divide that tends to characterise social theory and analysis; although this does not seem to have been the motivation for developing the capabilities approach. At the same time, he has maintained the flexibility of his framework by refusing to specify or endorse a list of capabilities as objectively correct (Clark and Gough, 2005:51). Martins (2006) has defended Sen’s refusal to be more prescriptive on the basis that his work is an example of philosophical under-labouring9 conducted to clarify socio-economic categories and concepts. Describing Sen’s capabilities as causal powers, Martins links Sen’s approach to critical realism10 due to its emphasis upon the factors underlying the phenomenon of wellbeing, rather than focusing upon the phenomenon itself without reference to underlying mechanisms, as a utilitarian approach might, for example. The flexibility that Sen has left room for in terms of specifying capabilities is a valuable feature of his work because it allows the approach to be adapted and applied in diverse social and cultural contexts.

Clearly, the application of a capabilities approach to evaluating wellbeing in any particular society must be accompanied by the specification or identification of relevant functionings and capabilities. The question of whether it is possible to have a universal set of these, or whether different sets must be developed for different places, is the focus of ongoing debate (Clark and Gough, 2005, Clark, 2005). Qizilbash (2002:464) identifies four intellectual positions that are associated with defining the constituents of wellbeing or quality of life: capability views (Sen and Nussbaum); prudential value theories (Griffin and Qizilbash); basic goods (Finnis); and basic needs (many advocates). Qizilbash (2002) identifies considerable overlap and agreement among these positions, and suggests that at least some of their differences

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9 A term coined by John Locke to describe the work of those who labour in the shadow of the great philosophers to clear rubbish lying in the way of knowledge (Martins, 2006).
10 Critical realism is an approach that shares with the work of Bourdieu, Bhaskar, Berger, Elias, and Giddens, an emphasis upon systematically bridging the agency-structure divide.
might be to do with them focusing upon different evaluative spaces, such as wellbeing in the case of the capability and prudential value approaches, and needs in the case of the basic goods and basic needs approaches, for example. All share common ground in three respects: 1. their central concern with human beings and the quality of their lives (Qizilbash, 2002); 2. they are universalist in the sense that, while taking very seriously cultural and individual differences, they take the view that these differences are not deep enough to preclude the existence of shared human interests and concerns that are common to all people; and 3. the shared assumption that good lives are based upon a number of components that cannot be reduced to a single component, a feature that Qizilbash (2002:46) refers to as component pluralism. It is this characteristic that underlies the need for a broad informational base that was discussed earlier in relation to Sen’s capabilities framework.

Nussbaum (2005) has developed a list of ten central human capabilities that she argues to be fundamental, universal, entitlements required to secure social justice: Life; Bodily health; Bodily integrity; Senses, imagination, and thought; Emotions; Practical reason; Affiliation; Other species; Play; and Control over one’s environment. The content of Nussbaum’s list is shaped by her concern to apply an Aristotelian view of the good to the consideration of feminism and development (Qizilbash, 2002:469). In order to effectively pursue this concern, Nussbaum needs to be able to criticise moral norms that appear counter to wellbeing – such as female circumcision, for example. In order to do this from within her framework, she needs to ensure that her list of elements that facilitate wellbeing includes items that are denied by particular moral norms. So, for example, the specification of “bodily integrity” provides a moral basis for criticising the practise of female circumcision (Qizilbash, 2002:470-471). The degree of specification in Nussbaum’s list coupled with the fact that it is designed to facilitate criticism of moral norms – and, by implication, the cultural values underlying them – opens Nussbaum to criticism from cultural relativist perspectives. Nonetheless, Nussbaum has attempted to allow for cultural variation by making her list of capabilities open-ended, and at the level of capabilities, rather than functionings, so that “societies can define them more concretely in different ways, and change their definition” (Nussbaum, 2005:42, and see also Qizilbash, 2002:471). Nussbaum claims to have developed her list during “years of cross-cultural discussion” (Nussbaum, 2000:76, quoted in Clark and Gough, 2005:53), but this claim is disputed by Clark and Gough (2005:53) on the grounds that her cross-cultural discussions were confined to the United States of America, supplemented by a case study conducted in India. Furthermore, Clark (2005:1364) argues that “On closer inspection… Nussbaum’s conception of the good turns out to be largely based on the writings of Aristotle and the Ancient Greeks instead of concrete studies of human values.” Clark has a particular interest in Nussbaum’s work and the question of grounded definitions and understandings of the bases of wellbeing. He has built on Nussbaum’s work by conducting surveys in Southern Africa that were designed to investigate poor people’s perceptions of development and how they view a good form of life (Clark, 2005:1347). That work is discussed later in this paper.

11 See Appendix 1. for the full details.
12 See earlier reference to Aristotelian basis of the eudaimonic view.
13 See earlier discussion of the distinctions between these concepts.
The prudential values approach developed by Griffin is based upon the broad sense in which philosophers apply the concept of prudence to “everything that makes a life good simply for the person living it” (Griffin, 1996:19) and “in which it has to do not just with a due concern for one’s future but with everything that bears on one’s self-interest” (Griffin, 1986:4). In the prudential values approach, Griffin focuses on the things that make a human life, in general, go well, rather than the life of any particular individual (Qizilbash, 2002). With this focus upon the general, rather than the particular, Griffin (1996:29) proposes a list of five prudential values: 1. accomplishment; 2. the components of human existence; 3. understanding; 4. enjoyment; and 5. deep personal relations. These values are sufficiently abstract to be able to embrace individual variation; they represent what Qizilbash terms “value types” and “refer to values that make for a good life” (Qizilbash, 2002:472). A particular value type, such as accomplishment, or enjoyment, for example, is realised through what Qizilbash refers to as a “value token”. In the realisation of enjoyment, for example, a value token for one person might be the company of others, while for another person it might be solitude. What leads to enjoyment for one person might lead to misery for another; but given the appropriate value token, each person is able to achieve enjoyment. The degree of abstraction characterising the value types suggested by Griffin is sufficient for them to form a general framework able to embrace the social, cultural and individual plurality represented in the considerable diversity of means (value tokens) available for realising any particular value type. Compared to Nussbaum’s list, Griffin’s list is short and he acknowledges that it is no doubt incomplete and likely to need revision (Griffin, 1996:28). As Qizilbash (2002:472-473) observes, Griffin’s list is tailored to the ethical and moral dimensions of wellbeing that he is most focused upon, and it needs expansion in order to be applied to the development context.

To this end, Qizilbash (1998 and 2002) recommends the addition of the following values to Griffin’s five: “1. minimum levels of health, nutrition, shelter, sanitation, rest and security; 2. certain basic mental and physical capacities and literacy; 3. self-respect and aspiration … and replacing [Griffin’s] ‘deep personal relations’ with ‘significant personal relations and some participation in social life’.” Qizilbash’s additions are instrumental values that represent “necessary conditions for the pursuit of the good life” (Qizilbash, 1998:65). Minimum levels of health, nutrition, shelter, sanitation, rest and security are basic needs and clear material prerequisites for wellbeing, while basic mental and physical capacities and literacy are clear prerequisites for the successful functioning that is necessary for wellbeing. Self respect and aspiration are values that are associated with what it means to be human, are crucial components of agency, and, Qizilbash (1998:66) argues, prerequisites for accomplishment. In terms of a capabilities approach to wellbeing, aspiration is necessary for the utilisation or assembly of functionings in distinct capability sets. Finally, the value “participation in social life” is important because of its centrality to the human condition and the view, stated earlier, that “Wellbeing is not the state of individual bodies but of bodies in society” (Manderson, 2005a:12).

Finnis (1977) developed a list of seven “basic goods”: 1. life; 2. knowledge; 3. play (later replaced by “some excellence in work and play”); 4. aesthetic experience; 5.
sociability; 6. practical reasonableness; and 7. religion (Finnis, 1977, quoted in Qizilbash, 2002:473). These are at a similar level of abstraction to Griffin’s five prudential values (Qizilbash, 2002:473) and thus, potentially, able to cope with individual and cultural differences. However, Qizilbash (2002:473-474) uses the example of Finnis’s specification of religion to argue that care must be taken to ensure that a particular value or good is specified at a level of generality that is sufficiently high for it to qualify as a shared value that is likely to be agreed upon universally. To continue with the example of “religion”, Qizilbash (2002:474) recommends replacing it with “something like ‘finding meaning or purpose in life’” in order to accommodate the religious and irreligious, alike.

The foregoing discussion was concerned with value types, which are defined at a high level of abstraction in order to enjoy wide applicability. The argument underlying that approach is that if the categories are sufficiently broad, they can form a flexible framework able to be applied in diverse settings by the insertion of appropriate value tokens for measurement purposes. At this point, the need to engage with people is no longer avoidable because the identification of appropriate value tokens, at least, is best informed by the views, perceptions and values of the particular people whose wellbeing is being investigated. There is also an argument that the a priori value types should be tested empirically in the same way because on their own they are open to criticism for being paternalistics, and overlooking historical and cultural differences (Clark, 2005 and Deneulin, 2002), despite the care that might be taken to render them “universal”.

In order to provide this empirical grounding, Clark (2005, and 2002b (cited in Clark and Gough, 2005)) has developed and applied a survey based approach to investigating perceptions of wellbeing among the poor in Southern Africa. This has been designed to at once build on and evaluate the capability categories nominated by Nussbaum and Sen (Clark and Gough, 2005). A questionnaire comprised of open and closed questions was administered to a total of 157 people almost equally split between a rural village and an urban township in South Africa. The questionnaire was “designed to address the problems of adaptive preferences.” The open questions were designed to allow people to express their own conception of wellbeing and name the things that contributed to a good life. In the closed questions, people were asked to evaluate the items on a list of predefined capabilities (Clark, 2005 and Clark and Gough, 2005). The normative ranking of the top thirty aspects of a good life that were identified by the survey participants are as follows:

<table>
<thead>
<tr>
<th>Rank</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Jobs</td>
</tr>
<tr>
<td>2</td>
<td>Housing</td>
</tr>
<tr>
<td>3</td>
<td>Education</td>
</tr>
<tr>
<td>4</td>
<td>Adequate/regular income</td>
</tr>
<tr>
<td>5</td>
<td>A good family</td>
</tr>
<tr>
<td>6</td>
<td>Living a religious/Christian life</td>
</tr>
<tr>
<td>7</td>
<td>Good health</td>
</tr>
<tr>
<td>8</td>
<td>Enough food</td>
</tr>
<tr>
<td>9</td>
<td>Happiness/joy</td>
</tr>
<tr>
<td>10</td>
<td>Love (each other)</td>
</tr>
<tr>
<td>11</td>
<td>Good friends</td>
</tr>
<tr>
<td>12</td>
<td>Education for children</td>
</tr>
<tr>
<td>13</td>
<td>Motor car</td>
</tr>
<tr>
<td>14</td>
<td>Owning a business</td>
</tr>
<tr>
<td>15</td>
<td>Understanding (between people)</td>
</tr>
<tr>
<td>16</td>
<td>Support of family</td>
</tr>
<tr>
<td>17</td>
<td>Relaxation</td>
</tr>
<tr>
<td>18</td>
<td>Good area to live/live elsewhere</td>
</tr>
<tr>
<td>19</td>
<td>Nice/good clothes</td>
</tr>
<tr>
<td>20</td>
<td>security/safety</td>
</tr>
</tbody>
</table>

16 The matching of preferences to what is actually available.
Overall, Clark found that the vision of wellbeing that was shared by the participants in the survey was

“… not fundamentally at odds with most of the capabilities advocated by scholars like Nussbaum and Sen…. Hardly any of the capabilities advanced by Nussbaum and Sen were not ratified by at least 94 percent of the survey participants. Notable exceptions include the capability to live a long life, opportunities for sexual satisfaction, and literary and scientific pursuits, which were rejected by a significant proportion of people” (Clark and Gough, 2005:62).

These findings support the view that the capabilities approach provides a framework that is sufficiently flexible for application to studying wellbeing in a range of cultural settings, provided that the functionings and capabilities, the value tokens and value types to be used in measurement instruments are pre-tested to confirm their appropriateness in a particular setting.

The importance of identifying and monitoring lay views about wellbeing is further illustrated by Sointu (2005) and Westerhof, et al. (2001). Sointu, for example, has identified changes in the discourse of wellbeing over the last two decades in Britain that she associates with changes in subjectivity from subjects as citizens to subjects as consumers. As a result, discourses of wellbeing, as reflected in two national UK newspapers, have, she argues, paid increasing attention to lifestyle related areas of wellbeing that are chosen and actively sought by individual agents. During the 18 years of newspaper coverage included in her study, the proportion of discussion devoted to national and economic aspects of wellbeing fell markedly as discussion increasingly focused on areas of wellbeing specifically associated with women, health, and children, for example (Sointu, 2005). In addition to changing over time, lay conceptions of wellbeing have been found to vary with age.

Westerhof, et al. (2001), built on work by Dittmann-Kohli (1995), Ryff (1989), Baltes and Carstensen (1996), Chiasson et al., (1996) and Thomas and Chambers (1989), Westerhof, et al. (2001) to investigate age-related differences in lay conceptions of wellbeing. In their review of the literature and their own empirical study Westerhof, et al. (2001) found, as noted earlier, that global judgements of life satisfaction were more likely to be positive than judgements based on specific areas of life, such one’s health, or job, for example. They found that age related differences were associated with the tendency for older people to make general judgements and global evaluations to a greater extent than younger people, who more often referred to specific evaluations. Overall, they found that older people were “equally or even more satisfied with their life than younger persons” (Westerhof, et al., 2001). They attributed these similar outcomes across the ages to the tendency of people to move from specific judgements to general judgements as they grew older. The result of this
was that the increasing causes of dissatisfaction that might be associated with ageing were compensated for by people’s increasing use of general criteria that are more likely to produce positive judgements.

In the EWAS study, the development of survey instruments and other aspects of the research have been informed by active consultation with stakeholders in the field of ageing and from the important cultural groupings. The dimensions of wellbeing covered by the EWAS study are listed in Appendix 1. For a full discussion of the consultation process and its results, see Waldegrave (2006).

3. WELLBEING-RELATED RESEARCH IN NEW ZEALAND

This section discusses wellbeing related research that has been and is being carried out in New Zealand. The discussion includes both work that is concerned with the general population and work that focuses on older people. This work can be categorised as: 1. work concerned with measuring wellbeing in an integrated manner over multiple dimensions; 2. work that covers more than one dimension, but does not have “wellbeing” as an explicit focus; and 3. work that focuses on a particular dimension or aspect of wellbeing (with or without “wellbeing” being an explicit focus).

Work in the first category is uncommon, with only one having produced results to date: the Ministry of Social Development Social Wellbeing Research. Two are in progress: the Pathways to Positive Outcomes for Family and Whanau Project, carried out at the University of Auckland; and the EWAS project. The social wellbeing research that has been conducted by the Ministry of Social Development is reported in the annual Social Report (Ministry of Social Development, 2005) in terms of ten distinct outcome domains: Health; Knowledge and Skills; Paid Work; Economic Standard of Living; Civil and Political Rights; Cultural Identity; Leisure and Recreation; Physical Environment; Safety; and Social Connectedness (Smith, 2004, Ministry of Social Development, 2005). All ten domains were identified through public consultation, nine through the work of the Royal Commission on Social Policy, and the tenth (leisure and recreation) through a separate public consultation process (Smith, 2004). The Ministry of Social Development’s approach to social wellbeing recognises the likelihood that wellbeing criteria for Maori and Pacific people might differ in some respects from those for the general population (and from each other), but focuses upon “meta-cultural outcomes such as the ability to practice and pass on cultural traditions between generations” (Smith, 2004).

The Pathways to Positive Outcomes for Family and Whanau Project is currently underway and aims to develop indicators of wellbeing from existing data sources, such as censuses and ongoing surveys such as the Household Economic Survey, and apply these to monitoring the wellbeing of families and households over time. This work is still in progress and its findings have not been published to date.17 The EWAS project is in the early stages of implementation, and is the first New Zealand-based integrated study of wellbeing in relation to ageing.

17 For more information refer to the project website: http://www.stat.auckland.ac.nz/whanau/index.html
In the second category are projects such as the Ministry of Social Development’s Living Standards Research (Ministry of Social Development, 2002), The New Zealand Index of Deprivation project (NZDep) carried out by The University of Otago Medical School (Salmond and Crampton, 2002), the Survey of Family Incomes and Expenditure and the Household Economic Survey (Sofie) carried out by Statistics New Zealand, and the New Zealand Poverty Measurement Project carried out by the Family Centre Social Policy Research Unit and Victoria University of Wellington (for example, see Waldegrave, et al. 2003a and 2003b; Stephens and Waldegrave, 2001). The widest ranging of these is the Living Standards Research, in which survey questionnaires were administered to three different samples of people living in private dwellings: Older people aged 65 and over; older Maori, who were superannuitants aged 65 to 69; and working age people (aged 18 to 64 years). In 2000, the survey covered the following areas (not all were covered for each sample; coverage is indicated in parentheses):

- Ownership restrictions (all)
- Social participation restrictions (all)
- Economising (all)
- Serious financial problems (all)
- Accommodation problems (all)
- Income and assets (all)
- Disabilities and health (all except working age)
- Recent financial stresses (all except working age)
- Family contact, family support (all except working age)
- Major events during the ages 50-59 (all except working age)
- Cultural identification (Only older Maori)

In terms of coverage of domains of wellbeing, the Living Standards research is clearly focused upon material elements, but does canvas other areas by including social participation (if only negatively) and (more positively) cultural identification (but only for older Maori).

In the third category are relatively numerous projects that reflect the generally fragmented character of social research in New Zealand (Davey, 2006:13). In a survey of research on ageing carried out between 1995 and 2005, Davey (2006:7-12) identifies previous and current work focusing on the following areas of the wellbeing of older people: Income and living standards; Health; Housing; Transport; Work – paid and unpaid; Education; and Social aspects and intergenerational issues. She notes that research in this area is fragmented, consisting of separate projects carried out by researchers dispersed over many institutions.

From its inception, the EWAS project was developed as a multi-disciplinary study designed to counter the fragmentation noted above, and address more directly the question of wellbeing in the broadest sense possible. It has brought together researchers from two institutions (The Family Centre Social Policy Research Unit and the University of Waikato Population Studies Centre) and developed an integrated

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18 Allied to NZDep is an individual measure of deprivation (NZiDep) developed by the authors of NZDep and the Family Centre Social Policy Research Unit (Salmond, Crampton, King and Waldegrave, 2006).
approach to the understanding and study of wellbeing that is based soundly in the wellbeing literature. It has also drawn inspiration from examples of research best practice in the field of ageing as reflected in a number of major ageing research programmes located in Europe, North America, and the Middle-East. The characteristics of three of these programmes, and their influence upon EWAS will be discussed next.

4. BEST PRACTICE IN AGEING RESEARCH: LESSONS FROM INTERNATIONAL RESEARCH PROGRAMMES

The fragmentation in New Zealand ageing research that was identified by Davey (2006), above, can also be seen in European and North American research, to some extent, in that there are many small scale projects carried out focus tightly on particular domains of wellbeing. Many have a strong medical or health focus. At the same time, a number of significant and influential long term programmes of research have become established during the last ten to fifteen years in the Northern Hemisphere. While none of these programmes have been explicitly identified with the capabilities approach to wellbeing in the way that the EWAS project has, their broad approaches have not been incompatible with it. They have all, to varying degrees, purposefully incorporated multiple dimensions of wellbeing and emphasised the wider socioeconomic matrix within which people develop and age. They have recognised that the nature of a person’s embeddedness within the social matrix, represented by the type, quality and character of their personal and social relationships, are important determinants of their wellbeing in the broadest sense. These studies have sought to identify and understand the influences of these relationships upon the wellbeing of the ageing person and have become important sources of inspiration for the EWAS project.

This section discusses the broad features of three such research programmes that have informed the development of EWAS in terms of conceptualisation and the development of research instruments. These programmes have been selected as examples of best practice in wellbeing focused ageing research because of their generally broad coverage of the domains of wellbeing for older people, the quality of their teams, and the financial and institutional support they have attracted and maintained. The programmes concerned are: 1. Ageing Well Research Project (AWRP); 2. Old age and autonomy: the role of service systems and intergenerational solidarity (OASIS); and 3. The Living arrangements and social networks of older adults (LSN).

The Ageing Well Research Project

The Ageing Well Research Project (AWRP) programme is a project of the Global Ageing Research Network (GARNet), an international network of ageing related research teams. GARNet was formed to provide leadership in expanding global participation and cooperation in research, education, and information dissemination to support older people who are ageing well in the 21st century. GARNet has the goal of providing scientific evidence to support the review and development of policies that promote systems, communities and personal behaviours that will facilitate ageing
well. This goal is being pursued through the AWRP, a multi-nation research programme on adult wellbeing. The first phase of this programme involves measurement-based studies to model the determinants and indicators of ageing well, and develop a global ageing well index. The second phase will apply the ageing well index in a range of studies focusing on specific issues. The central orientations of the AWRP and ESAW are: 1. a focus on the subject; 2. ageing well; and 3. measurement of domains that impact upon the ageing process and wellbeing.

Phase one work has been completed in Europe by the European Study on Ageing Well (ESAW). ESAW is a European sub-group of the larger global study and funded by the European Union. The aim of ESAW was to develop a European model of adult wellbeing, using the five key components of the global study and a parallel methodology. The five components included in the ESAW study were: 1. physical health and functional status; 2. self resources (in the global study this is named cognitive efficacy); 3. material security; 4. social support resources; and 5. life activity. The ESAW survey questionnaire contains the following topic sections:

A. Background
B. Social support resources
C. Physical health and functional status
D. Mental wellbeing
E. Life activity
F. Material security
G. Perception of ageing well

The project was carried out in 2002-2003 in six European countries: Austria; Italy; Luxembourg; the Netherlands; Sweden; and the United Kingdom. Individual interviews were administered by means of a structured questionnaire to national samples of 1,800-2,500 non institutionalised participants (e.g. not hospitalised nor in long term care facilities), aged 50-90, in each of the participating countries. (Ferring and Wenger, et al., c. 2003).

Old age and autonomy: the role of service systems and intergenerational solidarity (OASIS)

The OASIS study was developed in response to the ageing related demographic changes that were evident in the last decades of the 20th century and are projected to continue well into the 21st century. These changes coupled with changes in other areas such as family structures, falling fertility rates, increasing divorce rates, growing work force participation of women, and changing norms and values. In view of the challenges posed by these changes to societies, families and individuals, it was felt that analysing the issues involved from a comparative EU perspective would lead to considerable social policy gains. Consequently, OASIS was established as a cross-national study “to provide a knowledge base of how to support autonomy in old age o enhance well-being of elders and their family caregivers and improve the basis for policy and planning” (Lowenstein and Ogg, 2003). The knowledge base is built upon a deepened “understanding of the interplay between family culture, intergenerational relations, and service systems and their impact on elder's autonomy and quality of life” (Lowenstein and Ogg, 2003). The central orientations of the OASIS study are: 1.

19 Further information about GARNet is available on the programme website:
http://www.indiana.edu/~caa/GARNet/main.html
a focus on structural factors; 2. intergenerational relationships and transaction; and 3. how autonomy in old age can be promoted to enhance wellbeing. OASIS is built upon a partnership between institutions and researchers from Germany, Israel, Norway, Spain, and the United Kingdom, with fieldwork having been conducted in each of those countries. The project is coordinated by The Centre for Research and Study of Aging at the University of Haifa, Israel.

Theoretically and empirically, OASIS is based on the ecology of human development approach and incorporates three levels of analysis: “the macro level (welfare regimes and family cultures), meso level (family intergenerational relations) and micro level (quality of life of elders and family caregivers.)” (Lowenstein and Ogg, 2003: xi). The study uses this multi-level framework to investigate the influences of cultural, social and economic factors, and structural-environmental conditions, on the quality of life of older people and their family caregivers.

The study methodology incorporates a quantitative survey and a qualitative component. In the quantitative survey, approximately 6,000 people were interviewed in the five participating countries. The survey provided an integrated data set relating to “influences on the quality of life in old age within a cross-national perspective” (Lowenstein and Ogg, 2003). The survey questionnaire covered the following topic areas (Lowenstein, et al., 2002):

1. Socio-demographic data
2. House and environment
3. Occupational activity and socio-economic status
4. Health and functional ability
5. Help and services
6. Children
7. Parents
8. Other family members
9. Social relationships
10. Norms and values
11. Preferences
12. Coping
13. Quality of life
14. Income
15. Miscellaneous

The qualitative component focused on examining the challenges faced by families in “maintaining independence and a sense of autonomy in old age” (Lowenstein and Ogg, 2003). In order to study real intergenerational relations and transactions, fifty parent and adult child dyads were interviewed, with ten in each participating country. The parents were all aged 75 or older and had health problems. “The qualitative interviews show how older people and their families in the five OASIS [countries] manage and negotiate the changes associated with the onset of illness or disability in old age” (Lowenstein and Ogg, 2003).

**Living arrangements and social networks of older adults (LSN)**

The LSN study is a cross-sectional study under the umbrella of The Longitudinal Aging Study Amsterdam (LASA). Both are hosted by the Vrije Universiteit in Amsterdam on a multi-departmental basis.

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20 General information about this project is available on the LSN website: [http://ssg.scw.vu.nl/lsn/index.html](http://ssg.scw.vu.nl/lsn/index.html)
This LSN study has three objectives: 1. “to provide insight into the determinants of living arrangements of older adults, their kin and non-kin networks”; 2. “to provide insight into the outcomes of living arrangements of older adults, and their kin and non-kin networks in terms of the availability of the social support essential for daily functioning, for coping with problems associated with life events, and for maintaining well-being”; and 3. “to use these insights to separate the assumptions essential to the constructing of models predicting future trends in living arrangements and networks from the assumptions which are not.”

The study has three research questions: 1. what are the determinants of living arrangements of older adults, their kin and non-kin networks? 2. what are the outcomes of having a specific living arrangement, kin and non-kin network in terms of the support received, and consequently in terms of daily functioning, coping with life events and maintaining well-being? 3. how can insights into the determinants and outcomes of living arrangements of older adults, their kin and non-kin networks be applied in the construction of more realistic models of future trends in living arrangements and networks?

The LSN is informed by a perspective that emphasises the characteristics of the social context in which older people are embedded rather than their individual characteristics, such as health status or cognitive performance. The emphasis is therefore upon the significance of personal relationships for supporting daily functioning, coping with life events and maintaining wellbeing. This emphasis is pursued by focusing on the living arrangements and social networks of older people. The focus on social embeddedness is important, too, because patterns of social and personal relationships are impacted upon by broader societal changes, and it is important to understand how these changes might impact upon the lives of older people through changes in their personal relationships. The ageing process itself is also associated with changes in personal relationships, and this can only be investigated using an approach that explicitly investigates and measure such relationships.

5. DEVELOPMENT OF EWAS RESEARCH INSTRUMENTS

This discussion will focus on the questionnaires that are being prepared for the two surveys that are to be carried out. Development of the qualitative instruments will follow the analysis of survey data, and their development will be documented at that stage.

The questionnaires for the EWAS project have been developed with reference to the capability areas suggested in the wellbeing literature, the OASIS, ESAW and LSN studies and questionnaires, and other literature discussed in Hillcoat-Nalletamby, et al. (Forthcoming). The elements of people’s lives that are covered in the study, through the survey and through qualitative research and case studies were illustrated in Figure 1, and are summarised below in terms of practices, attributes, and cross-cutting factors. These developed out of an earlier conceptualisation which is outlined in Appendix 3:
**Practices:**

Employment / Work / Labour Market  
Mobility / Access / Functional Ability  
Participation / Isolation  
Sexuality/sexual orientation  
Social Capital / Networks  
Community Services/contributions  
Technology  
Healthier / Wealthier / Baby Boomers -- Quality of Life  
Living Arrangements – Trends  
Social Contributions by Elderly – Caring, Civic, Arts, etc.  
Leisure  
House and Environment / Space / Safety  
Norms and Values  
Subjective Wellbeing

**Attributes:**

Culture/ Ethnicity / Migration/ Discrimination  
Safety/abuse  
Gender  
Living Standards  
Socioeconomic position  
Education  
Age / generation

**Cross-cutting factors:**

Identity, Experiences, Aspirations, Preferences, agency and Intergenerational Transactions as they apply to Attributes and Practices

There is significant, but not complete, overlap between the EWAS, OASIS, ESAW and LSN questionnaires. The comparative coverage of these questionnaires is summarised in the following table using the EWAS content as a reference point.

The last six topic areas in Figure 2 are not covered by the OASIS, ESAW or LSN questionnaires, except for the coverage of safety by LSN, and have been included in the EWAS questionnaires because they relate to areas of life, functioning and capability that have a bearing the degree of wellbeing people are able to achieve. These areas have all been identified in the research literature and stakeholder consultations, and are discussed, in turn, now.
<table>
<thead>
<tr>
<th>EWAS Topic</th>
<th>OASIS coverage</th>
<th>ESAW coverage</th>
<th>LSN coverage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Household composition</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Socio-demographic background</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Employment</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Household income and assets</td>
<td>Yes</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>Dwelling conditions</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Health and wellbeing</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Facilities and services</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Current partner</td>
<td>Yes</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>Children</td>
<td>Yes</td>
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<tr>
<td>Sexuality</td>
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<td>No</td>
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<tr>
<td>Bequests</td>
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<td>Safety</td>
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<tr>
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### Contributions as older people/elders

As people move from paid employment into retirement, the nature of their potential contribution to the wider community and society changes. In some cultures, such as Maori and Pacific cultures, older people often occupy relatively well defined positions of status from which they contribute to the reproduction and transmission of values, norms, cultural knowledge and other knowledge. In other cultures, such as New Zealand Pakeha culture, the post employment contributions older people make are less well defined in role terms. Whether clearly defined or not, these contributions are important functions and capabilities that have a greater significance as sources of agency for older, retired, people than they might for younger people. It is important, therefore, that these contributions are identified so that the extent to which older people are, in fact, enabled to contribute may be measured, and this aspect of older people’s lives is better recognised. Older people’s contributions are identified in the EWAS survey through responses to questions on the participation, roles and functions of older people in family networks, and community networks, organisations and groups.

### Sexuality

In the international ageing research literature, sexuality has become an active area of work and concern (for example, see Beeler, et al., 1999; Brown, et al. 2001; Gabbay
and Wahler, 2002; Grossman, et al. 2001; Jacobs, et al., 1999; Kirkman, 2005; Mock, 2001; Rosenfeld, 1999; Schneider et al., 2000). The study of sexuality and intimacy is an area of research that applies to older people of all sexual orientations and recognises the different experiences and needs that are associated with different orientations. The EWAS study will obtain information on participants’ experience of intimacy. In New Zealand, increasing social heterogeneity and the removal of legislative barriers to the expression of same-sex preferences and relationships has increased the visibility of older gay people. Historically, older gay people have been subjected to discrimination and have different experiences and needs from other New Zealanders. In fact, they are likely to suffer discrimination, still, despite that being no longer legal. The information obtained will be valuable in its own right in illuminating the experiences of heterosexual and gay and lesbian participants, and scrutinising stereotypes.

Safety

Safety is an important factor influencing the ability of older people to live well. Being, or even just feeling, unsafe is a significant barrier to the functioning of older people and exercise of their capabilities. The issue of safety relates to many areas of life and place. It can affect a person’s ability to function in the home, the immediate neighbourhood and the wider environment. It relates to issues of mobility and the ability and willingness of an older person to get out and about in the face of such obstacles as uneven footpaths, unsafe street crossings, aggressive dogs, threatening people, and the like. (for example, see Cameron, et al., 1994; Clarke, 1990; Jeffords, 1983; Phillipson, et al., 1999). In the EWAS survey of people aged 65 to 84, the extent to which people feel safe in a variety of contexts is directly asked about.

Elder abuse

Elder abuse is a phenomenon that is well known, but difficult to investigate. It can take many forms, and the charity organisation Action on Elder Abuse has identified five categories: physical; psychological; financial; sexual; and neglect (Neno and Neno, 2005). Despite considerable anecdotal information about elder abuse, little hard data exists about its incidence. In the United Kingdom, for example, the only existing representative study of elder abuse is one carried out in 1992 by Ogg and Bennett (1992) (Neno and Neno, 2005). The first such study carried out in Australia was part of the Australian Longitudinal Study of Women's Health conducted during 1995 to 2000 (Lee, et al. 2001; Schofield and Mishra, 2004). The elder abuse scale (Neale, et al., 1991; Schofield and Mishra, 2003) used in the Australian study has been adapted for the EWAS questionnaire. This is an issue that New Zealand Age Concern, a key stakeholder in the EWAS research, has placed a high priority on, and is conducting a case study on as part of the wider EWAS project. Covering this important area in the EWAS survey provides a unique opportunity to obtain incidence data about elder abuse in New Zealand.
**Information technology**

The ubiquity of information technology in modern society is such that there is a considerable imperative for older people to become users (Jamieson and Rogers, 2000:343). However, the probability of someone using information technology such as the internet has been found to decline with the age of the user (Madden and Savage 2000), as well as the levels of skill and the range of activities that the Internet is used for (Teo 2001), for example. Given its ubiquity, an ability to engage with and use information technology is a valuable capability for older people, and the EWAS survey will obtain information about the extent to which older people are using information technology, the barriers they might face in doing so, and the steps they would be prepared to take to overcome those barriers if they so wished.

**Bequests**

The bequests that people intend or expect to make are an important component of the overall set of intergenerational transactions in which they engage, but one that will be transacted following death. As such, a bequest is the final intergenerational transaction of a material nature, and one that is not covered by questions about current transactions that are asked in other sections of the EWAS questionnaire.

**CONCLUSIONS**

This paper has drawn together what are often two distinct areas of concern: the definition and application of the concept of wellbeing in general; and the study of wellbeing in the context of societal ageing. In applying the idea of wellbeing in the EWAS study, we were concerned to understand its origins, the ways in which it is used in different areas of research, and the different ways in which it is defined. This paper has, consequently, drawn upon the considerable body of literature that has developed around the issue of wellbeing and examined the different approaches in the light of the requirements of this research. This examination lead to the view that the capabilities approach to wellbeing associated with primarily with Sen is the approach most compatible with the complexity of the social reality within which people live their lives. As the EWAS project has, from its origins, been designed to incorporate the many dimension of social reality that impact upon people’s lives, the capabilities approach was the one most helpful for our own conceptualisation of wellbeing in an ageing society.

Interestingly, in our review of international studies of similar broad reach to that planned for EWAS, we found no evidence of an explicit engagement with the work of Sen and the capabilities approach. This is, perhaps, because those studies have been developed by researchers with long term engagement in the study of ageing and whose programmes have developed in an incremental manner from earlier work, and without them feeling it necessary to closely examine the concept. Whatever the case, the considered application of a capabilities approach to a study of wellbeing in an ageing society that is being implemented in the EWAS project, represents a significant innovation in the field of ageing research.
In keeping with identified need for any application of the capabilities approach to be sensitive to existing cultural characteristics, norms, values, experiences and expectations, the development of EWAS as a whole, and the areas to be covered in the survey, have been informed by genuine engagement and consultation with key stakeholders in New Zealand and internationally.
REFERENCES


APPENDIX 1.

Nussbaum’s Ten Central Capabilities

1. **Life**: Being able to live to the end of a human life of normal length; not dying prematurely.

2. **Bodily health**: Being able to have good health, including reproductive health; to be adequately nourished; to have adequate shelter.

3. **Bodily integrity**: Being able to move freely from place to place; to be secure against violent assault, including sexual assault and domestic violence; having opportunities for sexual satisfaction and for choice in matters of reproduction.

4. **Senses, imagination, and thought**: Being able to use the senses, to imagine, think, and reason; being able to use imagination and thought; being able to use one’s mind in ways protected by guarantees of freedom of expression with respect to both political and artistic speech, and freedom of religious exercise; being able to have pleasurable experiences and to avoid non-beneficial pain.

5. **Emotions**: Being able to love, to grieve, to experience longing, gratitude, and justified anger, not having one’s emotional development blighted by fear and anxiety.

6. **Practical reason**: Being able to form a conception of the good and to engage in critical reflection about the planning of one’s life (this includes liberty of conscience and of religious observance).

7. **Affiliation**: A. Being able to live with and toward others, to recognize and show concern for other human beings, to engage in various forms of social interaction; to be able to imagine the situation of another (this includes freedom of assembly and political speech). B. Having the social bases of self-respect and non-humiliation; being able to be treated as a dignified being whose worth is equal to that of others (this includes non-discrimination).

8. **Other species**: Being able to live with concern for and in relation to animals, plants, and the world of nature.

9. **Play**: Being able to laugh, to play, and to enjoy recreational activities.

10. **Control over one’s environment**: A. Political: Being able to participate effectively in political choices that govern one’s life; having the right of political participation, protections of free speech and association. B. Material: Being able to hold property (both land and movable goods), and having property rights on an equal basis with others; having the right to seek employment on an equal basis with others; having the freedom from unwarranted search and seizure. In work, being able to work as a human being, exercising practical reason and entering into meaningful relationships of mutual recognition with other workers.
APPENDIX 2.

Griffin’s Prudential Values

The following are taken from Griffin’s book *Value Judgement: Improving our Ethical Beliefs* (Griffin, 1996). Numbers 2 to 5 are quoted verbatim from pages 29 and 30, while number 1 is paraphrased from a discussion that occurs over pages 19 to 29.

1. **Accomplishment.** Griffin distinguishes the idea of accomplishment from that of achievement in the course of arguing against what he terms a taste model of value evaluation and in favour of what he terms a perception model of value evaluation. Briefly, the taste model works from the premise that something is valuable if it is desired, while the perception model works from the opposite premise that something is desired because it has been judged to be valuable. An accomplishment is therefore a type of achievement that is consequential in terms of giving life weight, purpose and point. (There are clear parallels between this conception and the eudaimonic view discussed in the body of this paper).

2. **“The components of human existence.”** Choosing one’s own course through life, making something of it according to one’s own lights, is at the heart of what it is to lead a human existence. And we value what makes life human over and above what makes it happy. What makes life ‘human’ in the special normative sense that the word has here centres on ‘agency’. One component of agency is deciding for oneself. Even if I constantly made a mess of my life, even if you could do better if you took charge, I would not let you do it. Autonomy has a value of its own. Another component is having the basic capabilities that enable one to act: limbs and senses that work, the minimum material goods to keep body and soul together, freedom from great pain and anxiety. Another component is liberty: the freedom to read and to listen to others, the absence of obstacles to action in those areas of our life that are the essential manifestations of our humanity – our speech, worship, and associations.

3. **“Understanding.”** … Simply knowing about oneself and one’s place in the world – certain important anthropocentric knowledge – is part of a good life. We value, not as an instrument but for itself, the authenticity of our experience, life free from illusion and delusion.

4. **“Enjoyment.”** We value pleasure, the perception of beauty, the enjoyment of the day-to-day textures of life.

5. **“Deep personal relations.”** When personal relations become deep, reciprocal relations of friendship and love, then they have a value apart from the pleasure and profit they bring.”
CONCEPTUALISING THE DIMENSIONS OF WELLBEING IN AN AGEING SOCIETY

In order to begin addressing the scope of EWAS, it may be helpful to consider the interaction of demographic factors and domains of focus, both personal and collective.

Demographic Factors

The demographic factors will impinge on the domains. The most obvious and key among them will be:
- Age
- Gender
- Culture
- Socio-economic status

Current research is also indicating other important demographic factors like:
- Migrant status
- Sexual orientation
- Marital or non-marital status e.g., widowed, separated, single, co-habiting, etc
- Family and generational position

Personal Domains

The personal domains may be divided into the following areas:
- Subjective psychological state, e.g., positive, depressed, happiness, loneliness, etc
- Attitudes, Experiences and Aspirations, e.g., positive, negative, encouraging, discouraging, satisfied, hopeful, etc
- Health status, e.g., fit, well, disabled, independent, hospitalized, etc
- Education, e.g., tertiary, manual, skill level, relevance to labour market, etc
- Financial and asset resources, e.g., income, assets, etc
- Power and Agency, e.g., choice, independence, values and their relation to social norms, flexibility, elder abuse, etc

Collective Domains

The collective domains may also be divided into the following areas:
- Family relationships and networks, e.g., partners, inter-generational transfers, affective environment, etc.
- Neighbourhood and community networks, e.g., extent, support levels, range
- Housing, e.g. homeownership, comfort, multi-generational, etc.
- State and local government resources, e.g., pensions, services, etc.
• Labour market interaction, e.g., employment, satisfaction, flexibility, capacity, agency, etc.
• Transport, e.g., mobility, housebound, transport with significant others, etc.
• Policy Environment e.g., MSD, Positive Ageing, etc.
• Power and Agency, e.g., choice, independence, values and their relation to social norms, flexibility, etc.

Some Further Emphases

Because research in this field is undergoing a fundamental shift from a deficit healthcare approach to a focus on wellbeing and independence, some underlying themes will be important to the research direction. These are a few to which more could be added.

• In the light of the exploding myths around assumptions about older people’s capabilities and attitudes, we should be vigilant about genuinely exploring the voice, meanings and articulations of participants and guarding against assumptions.
• Investigate resilience and positive wellbeing aspects of ageing as well as and alongside the threats to them.
• Simulation work could be very effective in highlighting different outcome scenarios with different policy options, e.g., the reduction in homeownership, investment in training and up-skilling for older workers, etc.