



Summary of a review of Child and Youth Wellbeing data in Europe

The European Cohort Development Project (ECDP) is a Design Study, which will create the specification and business case for a European Research Infrastructure that will provide, over the next 25 years, comparative longitudinal survey data for children and young people. The survey is named EuroCohort. This briefing paper is a summary of recent research on child and youth wellbeing and draws on work undertaken during the ECDP project and its precursor, Measuring Child and Youth Wellbeing (MYWeB).

1. Defining wellbeing

Despite substantial academic and policy interest in wellbeing over the decades, there is no universally accepted definition of the concept. In academic literature, it is used as an over-arching concept to refer to the quality of life of people in society (Rees et al., 2010).

In defining the concept, a distinction is often made between the hedonic and eudaimonic approaches (Figure 1).

Scholars influenced by the hedonic approach view wellbeing in terms of subjective happiness and the experience of pleasure versus displeasure broadly construed to include all judgements about the good/bad elements of life. Although there are many ways to evaluate the pleasure/pain continuum in human experience, most research within the new hedonic psychology has used assessment of subjective wellbeing (SWB). SWB consists of three components:

- life satisfaction;
- high levels of positive affect; and
- low levels of negative affect,

Together these are often summarised as happiness.

The eudaimonic approach maintains that not all desires – not all outcomes that a person might value – would yield wellbeing when achieved. It focuses on meaning and self-realisation and defines wellbeing in terms of the degree to which a person is fully functioning. The emphasis is on psychological wellbeing (PWB) as distinct from SWB. Ryff and Keyes (1995) presented a multidimensional approach to the measurement of PWB that taps six distinct aspects of human actualisation: autonomy, personal growth, self-acceptance, life purpose, mastery, and positive relatedness.

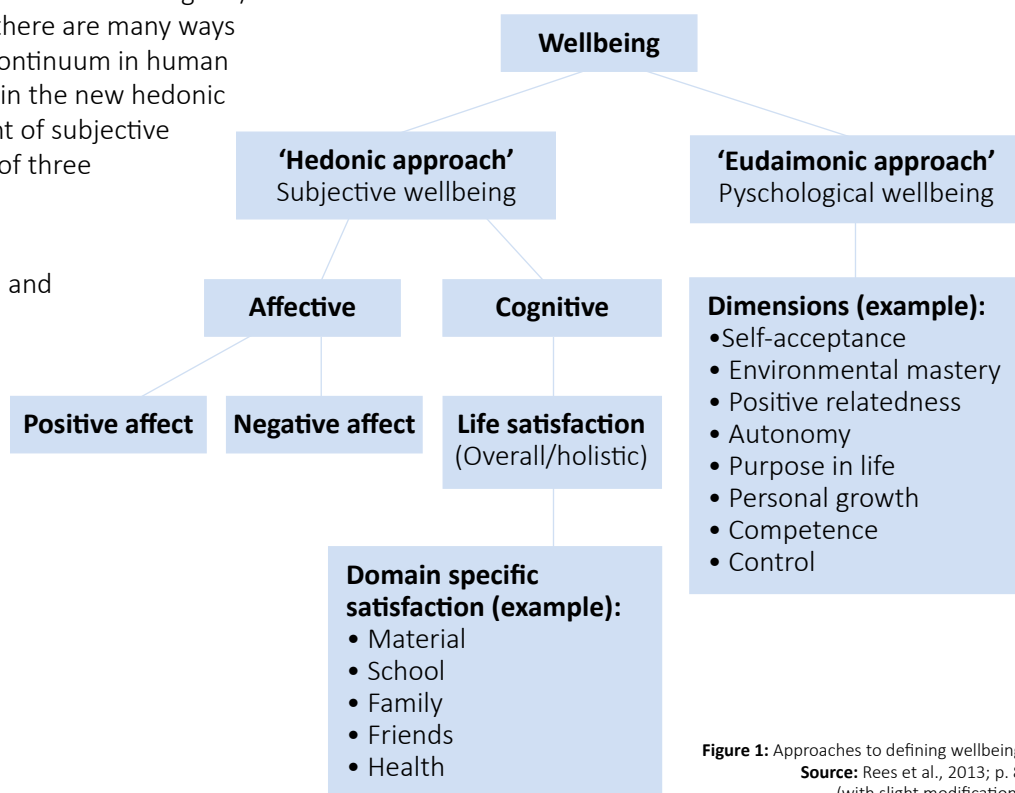


Figure 1: Approaches to defining wellbeing
Source: Rees et al., 2013; p. 8
(with slight modification)



Although there is much debate among the followers of these two approaches, evidence from a number of investigators (e.g., Biswas-Diener, Kashdan & King, 2009; Proctor, Tweed & Morris, 2015) has indicated that wellbeing is probably best conceived as a multidimensional phenomenon that includes aspects of both the hedonic (SWB) and eudaimonic (PWB) conceptions of wellbeing (Goswami et al., 2016).

2. Measuring wellbeing

In the literature, wellbeing is measured using both objective and subjective measures. Objective measures of social reality are those which are not filtered by perceptions and are independent from personal evaluations. On the other hand, subjective measures are supposed to explicitly express subjective states, such as perceptions, assessments and preferences.

The use of objective measures such as GDP, household income, household wealth and the income distribution, the proportion of children in education, educational attainment, life expectancy and crime rates are well established in research with children and young people's wellbeing. Although objective measures provide useful information on wellbeing at the macro-level, there are many criticisms and caveats to be taken into account when confronting such measures (McGillivray, 2007). For example, Hicks (2011) terms the approach to using objective wellbeing measures as 'paternalistic'. It assumes that certain things are good or bad for wellbeing and these are included in the indicator set. There is the

danger that what is measured becomes what matters rather than what matters being measured. Some researchers (e.g., Pollard & Lee, 2003) argue that the growth of the 'developmental perspective' in analysing childhood wellbeing has influenced the research on child wellbeing using objective indicator-based measures. A developmental perspective, they suggest, tends to adopt measures associated with deficits, such as poverty, ignorance, and physical illness. While such indicators are important to begin to redress issues of inequalities and social exclusion which negatively impact on children's health and wellbeing, they tend to ignore the potential, attributes and strengths of children.

Subjective measures draw on human perception the individual themselves decide what is crucial in assessing their lives. In spite of some methodological issues such as the measurement problem, bias problem, and divergence problem (see Veenhoven, 2002), they provide important additional information over and above objective measures on the quality of people's lives. There is growing consensus in support for considering subjective wellbeing as a necessary complement to objective indicators (e.g., Stiglitz, Sen & Fitoussi, 2009) and they together can create a rounded picture of the condition of the wellbeing (Children's Worlds, 2019).

3. Research on children's and young people's wellbeing

There has been a growing interest, nationally and internationally, in the concept and measurement of child wellbeing which is reflected in the large number of studies carried out over the last two decades. Rees et al. (2010) discussed these studies under the following three different strands:

(a) Social indicators movement

This stream has focused on measurement and trends in child wellbeing primarily using available indicators such as child poverty rates, child injuries, educational attainment, and so on. Some of the major works under this stream include the Child and Youth Wellbeing Index in the USA, The National Set of Child Wellbeing Indicators in the Republic of Ireland, the Local Index of Child Wellbeing in England, Kids Count, a national and state-by-state effort to track the wellbeing of children in the US run by The Annie E. Casey Foundation, OECD publications on comparison of child wellbeing across its 30 member countries and UNICEF publications. For a full review, see Goswami et al. (2016). While such indicators



are important to begin to redress issues of inequalities and social exclusion which negatively impact on children's health and wellbeing, this strand is being accused of ignoring the potential, attributes and strengths of children and treating them as 'passive agents – not capable of evaluating their own lives.'

(b) Self-report surveys

The second stream emphasises measuring child wellbeing through self-report surveys. A number of instruments have been developed over the last decade to measure young people's own assessment of their lives. One of the most widely used is Huebner's Multi-Dimensional Student Life Satisfaction Scale (Huebner, 1994) which measures wellbeing in five domains – family, friends, school, living environment, and self.

The international Health Behaviour in School-aged Children (HBSC) survey covers a number of key areas of young people's health and wellbeing. In addition, some large social surveys have begun to incorporate self-report instruments for young people in their mainstream survey project. For example, the youth questionnaire in Understanding Society (2018) has asked young people aged 10 to 15 about their happiness, feeling troubled and self-esteem. Two other household panel surveys – the European Social Survey (ESS) and the European Quality of Life Survey (EQLS) – and some cross-sectional surveys (e.g., Progress in International Reading Literacy Study (PIRLS), Progress for International Student Assessment (PISA), the European School Project on Alcohol and other Drugs (ESPAD)) included some questions on wellbeing and its various domains for young people in various age groups. For a full review of these surveys, see Richardson (2012) and Gabos and Kopasz (2013).

Whilst the second strand of development described above focused on self-reported wellbeing, the concepts and domains of wellbeing used in this work were developed primarily from concepts which originated from the study of adult wellbeing. Fattore et al. (2007) argued that these concepts are not directly transferable to the measurement of the wellbeing of children and young people. These limitations influence the development of the third string of research on child wellbeing.

(c) Child centric wellbeing studies

The third key strand in the development of the study of children's wellbeing has focused on developing concepts and frameworks which incorporate children's perspectives. This strand is still at a relatively early stage,



but there are a small number of examples of attempts to develop wellbeing frameworks from children's perspectives. Consultation exercise with children and young people in the Republic of Ireland and Australia have identified important differences in children and young people's ideas about wellbeing.

In this regard, the first large-scale attempt took place in 2005 by The Children's Society when it included open-ended questions asking young people about their views on wellbeing and the factors which hindered it in its national survey of 11,000 young people aged 14 to 16. The thematic and content-based analyses of these responses identified ten key areas (The Children's Society, 2006). These were, roughly in order of their frequency of occurrence in the responses (1) family, (2) friends, (3) leisure, (4) school, education and learning, (5) behaviour, (6) the local environment, (7) community, (8) money, (9) attitudes, and (10) health. Following this child-centric approach, Rees et al. (2010) developed an index of children's subjective wellbeing in England. The ten-domain index includes young people's satisfaction on family or carer, friends, health, appearance, time use, future, home, money and possessions, school, and amount of choice.

This third string of research has been taken further by an international group of researchers linked to the International Society for Child Indicators. They have developed Children's Worlds (2019), an international survey of children's subjective wellbeing. The study aims to collect solid and representative data on children's lives and daily activities, their time use and in particular their own perceptions and evaluations of their wellbeing in cross-national context. They gathered data from 33,000 children from 14 countries in wave 1 (took place in

2011-2012) and from 60,000 children from 18 countries in wave 2 (took place in 2013-2014). The third wave, currently in field, is aiming to gather data from over 90,000 children from 40 countries in Europe, Asia, Africa, and North and South America. For more information about the survey and key findings of the project, visit <http://www.isciweb.org/>

Having the unique position of ‘research with and by children’, this third strand reflects a major paradigm shift in child wellbeing research. Thus, the importance of including children as active agents whose perspectives are heard in matters concerning them especially in child wellbeing policies is gaining momentum within child and youth wellbeing research.



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