Bringing Wellbeing into Development Practice

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Abstract

While interest in wellbeing in international development is growing, there is little clarity on how to translate this into practice at programme and project level. This paper addresses this gap, reviewing a number of different approaches and proposing a new conceptual framework that builds on their strengths. The paper then sets out how the approach may be used in development research, monitoring and evaluation, reflecting on experience of piloting it in rural Zambia.

Key Words: wellbeing domains, modelling, assessment, development practice

Key readings:

Devine, J. Camfield, L. Gough, I. 2008. 'Autonomy or Dependence - or Both?: Perspectives From Bangladesh'. *Journal of Happiness Studies*. Volume 9:105-138.

PADHI. 2009. *A Tool A Guide and a Framework: Introduction to a psychosocial approach to development.* Colombo: Social Policy Analysis and Research Centre.

White, S.C. 2009. 'Analysing wellbeing. A framework for development practice.' *WeD Working Paper* 44. Available at: www.welldev.org.uk. Forthcoming in *Development in Practice*.

Introduction

The past few years have seen a steady build up of interest in wellbeing within international development. Wellbeing is set to be the subject of a forthcoming European Development Report. It is a central concept in OECD statistics office work on Measuring the Progress of Societies (www.oecd.org/progress). It is one of the topics identified by the Institute of Development Studies UK

as important for pro-poor policy after 2015 and the Millennium Development Goals (McGregor and Sumner 2009). Wellbeing in developing countries was the subject of a major ESRC grant at the University of Bath, 2002-2007 (www.welldev.org.uk) and of research at the World Institute of Development Economics (WIDER) (McGillivray ed. 2007). Oxfam Hong Kong has adopted responsible wellbeing as the overall goal of its international programmes. But despite all this, the concept of wellbeing remains elusive, and attempts to translate it into practice are comparatively rare. This paper aims to address this gap. It reviews a number of different approaches to wellbeing, and draws on these to suggest a framework that could be used to operationalise wellbeing at a policy, programme and project level. It does not aim to present a comprehensive review of the academic literature on wellbeing, but concentrates on approaches which seek to integrate it in a more practical way, especially in a developing country context. It aims to reflect the diversity in views of wellbeing, while pointing out areas of overlap or convergence.

Wellbeing is notoriously difficult to define because it means different things to different people. At its heart, however, is the sense of having what you need for life to be good. For some a single domain of 'psychological wellbeing' or 'subjective wellbeing' is thus sufficient, tracked either in the form of itemised measures of satisfaction, or a 'global happiness' question, such as 'Taking all things together, how would you say things are these days?' (Andrews and Withey 1976). The trouble with such questions is that it is difficult to know what they are really telling you. Is one person's 'fairly happy' the same as another's, perhaps in a completely different country context? How much are such responses affected by personality, or the mood of the moment, or the wish to impress the questioner, or to say 'the right thing', or even the number of options given as answers? The approaches reviewed here tend to take a more rounded approach, seeing wellbeing as composed of different interconnected domains, including people's sense of themselves, their social relationships, and their material standard of living

While wellbeing is in some ways a 'new' concept in international development, it also builds on many recent trends.[2] Most obviously, it draws on a much broader move to recognise poverty and development in multidimensional terms. More specifically, it builds on and advances livelihoods approaches which see people's economic activity as a complex mix of priorities, strategies, influences, activities and alliances which draw on a range of material and social resources. Like livelihoods approaches, it promotes an actor-oriented focus which emphasises people's strengths rather than needs. With Amartya Sen it sees living standards as related not simply to what you 'have', but also to what you

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[2] This 'newness' is partly illusory. Wellbeing was central to the concerns of the founding fathers of economics (Collard 2003).

can claim – 'entitlements'; and what you can do – 'capabilities'. From work on women's empowerment it takes sensitivity to issues of power, including in personal relationships, and to how deeply entrenched inequalities can be. Issues of power, agency and ownership are also raised in work on participation. This stresses the importance not just of *what* change is brought about, but also *how* it is done. This turns people from 'targets' or 'beneficiaries' to 'stakeholders', who participate actively in shaping the change that is to come. Rights-based approaches question further the conventional power relations between donors and recipients, emphasising that justice, not charity, is at the heart of development. From the health sector comes a broader concern with quality of life, as shown for example in the World Health Organisation's WHOQOL survey. Finally, from intervention in situations of violent conflict and disasters comes attention to the psychological and psychosocial.

The widespread reference to wellbeing in international development masks considerable difference in the way the term is used. In some cases, 'wellbeing' may simply be used as a new word for 'development', development re-labelled. Alternatively, a measure of 'subjective wellbeing' may replace conventional material indicators of development, development replaced. In other cases 'wellbeing' includes everything that development did, but with a psychological, subjective perception or satisfaction measure in addition: development plus. Finally, wellbeing is seen to incorporate some aspects of development approaches (such as the importance of combating poverty and inequality) but questions or re-orients others. In particular, it challenges the primary value given to economic growth by emphasising environmental sustainability and human fulfilment. It opens space to talk about the quality of people's experience, mind, body and spirit. It also gives much greater centrality to the importance of personal relationships: development re-oriented. This paper concentrates on the last of these, using wellbeing to re-orient development.

The paper opens with a general introduction to wellbeing in international development. Part Two reviews five approaches to wellbeing and draws on them to suggest a new conceptualisation. These approaches are: that of the new economics foundation (nef) UK; 'responsible wellbeing' as proposed by Robert Chambers (Institute of Development Studies, Sussex, UK); 'responsible wellbeing' as used by Oxfam Hong Kong; the 'psychosocial framework' of the Psychosocial Assessment of Development and Humanitarian Interventions (PADHI) programme of the Social Policy Analysis and Research Centre, University of Colombo, Sri Lanka; and the work of the Wellbeing in Developing Countries Research Group (WeD) at the University of Bath, UK. Part Three presents some fundamental questions about the use of wellbeing in development evaluation. The final section uses the conceptualisation of wellbeing

described earlier to structure a framework for application at programme or project level, drawing on grounding and piloting undertaken with Oxfam Hong Kong and Hodi, a Zambian NGO.

Some Different Conceptions of Wellbeing

The new economics foundation (nef)

Nef is in some ways the odd one out of the groups surveyed, being a UK based think-tank oriented primarily towards the UK domestic rather than international policy context. However, it is also the organisation that has put most effort into identifying policy relevant indicators for wellbeing and so is important to consider in the operational context.

> Nef defines wellbeing as follows:

> The concept of well-being comprises two main elements: feeling good and functioning well. Feelings of happiness, contentment, enjoyment, curiosity and engagement are characteristic of someone who has a positive experience of their life. Equally important for well-being is our functioning in the world. Experiencing positive relationships, having some control over one's life and having a sense of purpose are all important attributes of wellbeing (Aked et al 2008: 1-2).

In their own review of different understandings of wellbeing, nef explicitly reject identifying wellbeing with people simply getting what they want (what economists call 'preference satisfaction'). Instead, they propose seeing wellbeing as a dynamic process which combines elements from a number of other definitions. These are: external conditions (work, home, family, physical health); functioning well, being engaged and satisfying one's needs; psychological resources (optimism, self esteem, resilience); positive feelings day-to-day and overall (Marks and Thompson 2008:12).

> In 2009, in producing 'national accounts of wellbeing', nef further distinguishes the personal from the social:

> Personal well-being describes people's experiences of their positive and negative emotions, satisfaction, vitality, resilience, self-esteem and sense of purpose and meaning. Social well-being is made up of two main components: supportive relationships, and trust and belonging both of which are critical elements of overall well-being. (Michaelson et al. 2009:4)

While nef see a combination of objective and subjective factors as important to wellbeing, they place the emphasis of their advocacy on the subjective side, which has so far been missing in national accounting (*ibid*:3). This sets them a little apart from approaches to wellbeing within international development, which tend to emphasise access to resources as a significant component in assessing wellbeing.

Robert Chambers and responsible wellbeing

Robert Chambers' (2004) notion of 'responsible wellbeing' is characteristic of development approaches in placing significant weight on material factors and power. Anxious to guard against a simply pleasure-seeking view of wellbeing, he states: 'When wellbeing is qualified by equity and sustainability it makes responsible wellbeing' (12)

Chambers' notion of responsible wellbeing is essentially a moral and philosophical position, which builds strongly on his earlier work. It is founded in a model of change which stresses the 'primacy of the personal' – that larger institutional change will occur through individuals changing their behaviour (7). Within this context, he sees the change of the wealthy and powerful as most important, since greater power brings greater responsibility. He believes that change will come through 'critical self-awareness' and that an 'obligations-based approach' for the rich should match a 'rights-based approach' for the poor.

In advocating responsible wellbeing, Chambers offers two major challenges to the default settings of international development. The first is to focus on the wealthy not just the poor. In particular, he argues that 'sustainable livelihoods' should be those which enable others' sustainability, not just their own; now and in the future. The second is to question the primacy development accords to wealth and/or economic growth. Chambers argues development should be understood in a more inclusive way, as involving living standards, access to basic services, security and freedom from fear, health, good relations with others, friendship, love, peace of mind, choice, creativity, fulfilment and fun (Chambers 2004: 10). He also confronts head on the assumption that more is always better. On the contrary, he argues that it is not simply a matter of poor people gaining more. In addition, the wealthy should also 'welcome having less.'

Oxfam Hong Kong and responsible wellbeing

Oxfam Hong Kong (OHK) use the same term as Robert Chambers, but give it very different content. Adopting responsible wellbeing as the goal of their development programmes, they define wellbeing as 'a sense of personal and collective fulfilment, balance and integration' (PLA 2008:16). Responsible wellbeing is seen to have four critical dimensions. These are: self-sustenance – sustainable livelihoods with dignity in labour, some material comfort and leisure; self-esteem – a sense of self-worth and respect from others, ability to appreciate and live out positive values; self-determination – the ability to make individual and collective choices and enjoy individual and collective freedoms; and responsibility

– social and personal solidarity and responsibility, peace and security, and a capacity for empathy and caring, linked to awareness of interconnectedness and the impact of their lives on others (*ibid*).

Like Chambers, the OHK framework considers that change needs to occur at the individual level (PLA 2008:19). Indeed, changes within individual wellbeing are seen as the highest level of change, followed by intermediate (the actualization and enjoyment of basic rights) and immediate (sustainable livelihoods and human security, assets, access, and reduced vulnerability) (Thomas 2008). The framework emphasises, however, that individual wellbeing must be 'contextualised' within collective wellbeing, at household or community level (PLA 2008:19). 'Contextualised' is not further defined, except to state that 'a balance and harmony between individuals within a society and their environment are considered vital. This concept of wellbeing requires that people must take responsibility for each other and the world they live in' (*ibid*).

Rights are seen as 'an instrumental means to achieving responsible wellbeing' (*ibid*) and clearly undergird the way the first three dimensions are characterised. The fourth dimension also includes some aspects familiar from rights based approaches – 'a life of peace and security.' But it introduces in addition a more distinctive element, as it defines a sense of responsibility towards others as an aspect of individual wellbeing.

This is an interesting proposition which acts as a counter-weight to the emphasis on the self in the other three dimensions OHK identifies. It is also a concern that is reflected in different ways in all of the approaches reviewed in this paper, although there are differences in who the relevant 'others' are considered to be. Responsibility towards distant others is perhaps the defining element in the notion of responsible wellbeing as Chambers sets it out. The PADHI group in Sri Lanka take a rather different approach. In their investigation of psychosocial wellbeing, they found people valued a number of other-centred qualities as contributing to their personal sense of competence and self-worth. These include the moral qualities of love and compassion; the moral abilities of being perceptive and able to influence others positively; being able to fulfil duties to family; and to exert influence over community and country (PADHI 2009:14). Being able to contribute to the community was also a form of participation that was socially valued, and people tended to see participation in this light, rather than as an exercise of individual rights (*ibid*: 15). This suggests that, in Sri Lanka at least, behaving responsibly towards others is built into local ideologies of what it is to live well, and that people accordingly experience themselves positively when they feel they are making a contribution to others' wellbeing.

Nef's research with young people in the UK, by contrast, found that 'pro-social behaviour' was more strongly correlated to personal development than to life satisfaction, the two elements they defined

as constituting personal wellbeing. Overall, however, they found it was mainly independent, concluding that 'the promotion of pro-social behaviour may not be the same thing as the promotion of wellbeing' (Marks and Thompson 2004:5).

On the other hand, nef's recommended 'five ways to wellbeing' begin with 'Connect … with the people around you,' and end with 'Give… Do something nice for a friend, or a stranger' (Aked et al 2008).[3] The institutional outlook of nef is strongly pro-social and pro-responsibility.

Like nef, the primary target of Chambers' notion of responsible wellbeing is people in the West. It is widely recognised that modern Western ideologies of the person tend to be highly individualistic, way out of line with the more collective orientation of most other cultural contexts. This means that understandings of self-esteem in the UK, for example, are likely to be more ego-centred than those reported in Sri Lanka. It also means that the practical circle of responsibility tends to be much more tightly drawn – to my (immediate) family and friends, rather than my community. Daily news reports, however, mean that there is some default awareness of distant others, brought closer by foreign holidays and changing patterns of consumption. This provides the basis for more critical awareness of issues such as fair trade, climate change, and organic or freedom from cruelty farming. It is to strengthen such awareness that Chambers emphasises 'responsibility,' and to defend against the danger of a totally self-centred view of wellbeing.[4]

Ironically, one of the sharpest criticisms of the increased use of wellbeing in public policy is that it may re-confirm this individualism. Sointu (2005) sees wellbeing as legitimising a climate of increased state interference and reduced state support, for increasingly atomised individuals who are seen as responsible for their own situations. Although it may be intended very differently, it is not hard to see how the current UK government's exhortations towards 'active citizenship' or nef's 'five ways to wellbeing' could be interpreted in precisely the way that Sointu describes.

PADHI and psychosocial wellbeing

For the Psychosocial Assessment of Development and Humanitarian Interventions (PADHI) a wellbeing approach to development is distinctive in two ways: it focuses attention as much on *how* development is

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[3] The others are: Be active; Take notice; Keep learning.

[4] In the wellbeing literature this discussion appears in comparisons between 'hedonic' (pleasure seeking, pain avoiding) and 'eudaimonic' (meaning, self-realisation and human functioning) definitions of wellbeing (Ryan and Deci 2001; Deci and Ryan 2008).

done as on *what* is done; and it considers the social, cultural, and psychological consequences of intervention not just the achievement of a specific objective (such as building a dam) (PADHI 2009:3).

Their own approach places social justice at the centre. This means 'it pays particular attention to the ways in which power and influence mediate the experience of wellbeing' (*ibid:* 9). It aims to promote equality and empowerment, not to validate what is, but to transform it. They recognise that this is likely to lead to conflict, and there is a need to support people when this happens: 'For instance, development interventions that seek to raise awareness regarding gender discrimination need to ensure that they also provide the support when people act on the awareness' (*ibid*).

The PADHI framework identifies three levels: what constitutes wellbeing – five interconnected domains; what mediates wellbeing – power, influence and identity; what enables wellbeing - systems and institutions as critically contributing to or undermining the achievement of wellbeing (*ibid*:12). Achieving wellbeing involves change at all these levels: personal, community and institutional. It thus has implications not only for the people, but also for the state.

PADHI takes the importance of agency, which is noted in other approaches, and gives it greater emphasis. Wellbeing needs to be actively achieved. It is a dynamic process of becoming, involving the development of human capabilities (*ibid*: 21). The use of an active verb in defining the domains of wellbeing incorporates this as an intrinsic part of the model, rather than something additional which has to be added in. For PADHI, people 'experience wellbeing when they are able to: *access* valued physical, material, and intellectual resources; *experience* competence and self-worth; *exercise* participation; *build* social connections; and *enhance* physical and psychological wellness' (*ibid:* 13).

PADHI, like WeD, draw attention to the fact that how wellbeing is understood differs by culture and social identity. For example, PADHI found that Sri Lankan women assessed self-worth in terms of their personal achievements such as in education or employment; their ability to fulfil their role, especially towards family; and their children's achievements (PADHI 2009: 15). For men, by contrast, self-worth was made up primarily of their level of education and achievement or economic independence through employment (*ibid*). Such variation in the understanding of wellbeing is recognised by all commentators, but it does pose problems for those wanting to use wellbeing for comparative evaluation. If wellbeing means different things to different people even in the same context, how can it be used as a single standard against which a range of programmes in very different contexts are assessed? This is discussed in more detail below, along with further discussion of the PADHI approach, since it is the one most fully developed for operational use.

Wellbeing in Development Countries Research Group (WeD)

WeD research began with a four country interdisciplinary study funded by the UK Economic and Social Research Council, 2002-7. This has been followed by UK Department of International Development funded research on Wellbeing and Religion in Bangladesh and India, 2005-10.

The WeD approach to wellbeing integrates material, relational and subjective dimensions. The *material* refers to the 'stuff' of wellbeing, such as food, bodies, shelter and the physical environment. In practical application this typically refers most immediately to economic assets and income, but it should not be restricted to this. The *relational* concerns social interaction, the rules and practices that govern 'who gets what and why.' It involves power and identity, the connections between people and also the making of difference between them. It is the arena of action, which brings the material and subjective to life. The *subjective* concerns cultural values, ideologies and beliefs and also people's own perceptions of their situation.

This framework can be pictured in the following diagram:

Figure 1: The triangle of wellbeing

subjective

material   relational
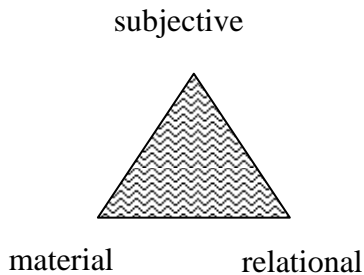
The triangular shape shows interdependence, that material, relational and subjective aspects of wellbeing are intrinsically linked. Wellbeing emerges in the interplay of objective (people's circumstances) and subjective (their perceptions). The subjective at the apex makes clear that even material welfare or standards of living are derived through values and culture.

While it is easy to think of the material, relational and subjective as different areas of life, or 'domains', the WeD approach stresses that these are in fact interlinked dimensions. Land, for example, is typically thought of in material terms. However, land only becomes *a livelihood resource* when transformed through the *human* activity of labour, the *social* contracts of ownership or use-rights, and *cultural* meanings and values (White and Ellison 2007). Another way to think of this is that for any element within people's wellbeing there are potentially three aspects to be considered: what people *have or do not have* (material); what people *do or cannot do* with it (relational); what people *think or feel* (subjective) (McGregor 2007:317).

Challenging the individualism of Western ideologies noted above, WeD states that 'people become who and what they are in and through their relatedness to others' (White 2009: 9). This places relationship also at the heart of wellbeing. Wellbeing is therefore seen as something that does not *belong* to individuals at all, but something that *happens* in relationship. This strongly reinforces an understanding of wellbeing as a process, with outward and inward flows: 'Wellbeing then becomes something that happens in relationship – between the collective and the individual; the local and the global; the people and the state. Relationship is thus at the centre of wellbeing analysis and politics' (*ibid*:15).

This in turn has implications for development action to promote wellbeing: 'Promoting the wellbeing of poor and excluded people means transforming the terms on which they engage with others and others engage with them.' (*ibid*.)

An emerging consensus

While these approaches differ in some details, there are important points of consensus that emerge from the discussion. These are as follows. First, wellbeing needs to be assessed across a number of different domains, rather than through a single indicator. It has both subjective (thinking/feeling) and objective (having/doing) dimensions. It involves issues of agency, capability, and power - critically involving how people relate to one another. A wellbeing approach thus has implications for *how* development interventions should be conducted, not only *what* should be done.

Second, wellbeing has a moral quality – it concerns what people value and hold to be good. Also, different kinds of people will define wellbeing in different ways (e.g. older people will prioritise different things to younger people; men to women; parents to non-parents; and so on by class, ethnicity, (dis)ability, as well as personal outlook and religious or political commitments etc).

Third, wellbeing is not a state but a process. Different approaches see this as involving interaction between: person and environment; individual and collective; psychology and social environment; subjective and objective. It also means that how wellbeing is defined and experienced changes over time. Wellbeing may be *measured* at the individual or collective level (e.g. household, community or nation). Understanding wellbeing as a process, however, means that what is measured is always an *outcome* of the interaction between the unit that is measured and a wider environment.

Fourth, whether individuals and households can achieve wellbeing depends not only on their own characteristics, but whether their environment provides the enabling conditions. Enhancing wellbeing, therefore, involves *both* working directly with people and communities *and* building a broader

environment in which they can flourish. Most immediately this involves the provision of infrastructure, services and amenities. But it also concerns for example, the organisation of the economy; the quality of the physical environment; the policy regime; human rights and structures for political participation; the rule of law; and the management of violence and social conflict.

Finally, wellbeing is oriented towards positive-sum, 'win-win' solutions. However, how wellbeing is defined, whose wellbeing counts, and how wellbeing is achieved are ultimately political questions. The clearest stand on this is taken by PADHI, which (not coincidentally) also draws more strongly on feminist approaches. They take, they say, 'a social justice approach to wellbeing.'

Domains of wellbeing

Although the terms they use are different, there is in fact considerable similarity in the four main domains or dimensions that are identified by the approaches to wellbeing more focused on the south – those of OHK, PADHI and WeD. Figure 2 shows this, and how in broad terms these correlate to the core perspectives of social science: economic, psychological, political and social.

Figure 2: Domains of wellbeing compared

Domains	OHK	PADHI	WeD
economic	self-sustenance	accessing resources	material
psychological	self-esteem	experiencing competence and self-worth	subjective
political	self-determination	exercising participation	relational
social	responsibility	building social connections	relational

The broader wellbeing literature suggests three further domains that are important to consider. The first is the body, comprising both mental and physiological, since 'health and wellbeing' are for many people a natural pair. PADHI does in fact include 'enhance physical and psychological wellness' as one of its domains, but this drops out of the 'wellbeing assessment tool.' Whose wellbeing is imagined may be a factor here. Where elderly or very young people are concerned, then health and the body are likely to appear as much more important factors. It will also gain more prominence where there is an obvious health threat, such as the widespread prevalence of HIV/AIDS.

The second domain that needs to be added is that of close relationships. In WeD's exploratory work on quality of life people repeatedly emphasised this - whether in the importance of a 'good marriage,' or support in old age. In Bangladesh, '*shukh-shanti*' is the term that is most commonly used in everyday speech to express the sense of wellbeing. Strictly meaning 'happiness and peace,' this is particularly associated with harmonious close relationships in the home. In the West, the importance of close relationships to wellbeing is also a central tenet in counselling approaches. This is strongly confirmed by standard numerical indices of wellbeing, which link low quality of life with social exclusion and personal isolation and high quality of life with social connectedness. Indeed, when asked about their wellbeing people typically find it difficult to talk about themselves in isolation – their sense of how things are for them personally is intimately tied up with their sense of how those they identify as 'their own' are doing. For some this might mean just a single person. For others it could be a very large category, even a national group. This is particularly likely when there is shared denial of rights, for example the Palestinians.

Finally, the third domain that needs to be added is the spiritual or religious. In the West, 'wellbeing' is often thought about in terms of harmony between 'mind body and spirit.' Religious references are very common in the way people talk about wellbeing in the South.

All of the international development approaches recognise the importance of power to wellbeing. Robert Chambers emphasises the personal power of wealthy people in the North. OHK and PADHI include political aspects as one of their domains. WeD see power within all the dimensions: as an aspect of social identity; as animating even intimate relationships; and as constituting how wellbeing is understood, who is seen to be entitled to it, and how it is pursued. This has a perverse outcome: it makes it difficult to locate power anywhere. Indeed, while the idea of wellbeing as a triangle captures well the inter-dependence of the different dimensions, it is far from clear *whose* wellbeing it is. PADHI have probably the clearest approach, defining power as 'having influence over resources and people, making decisions and getting things done' (PADHI 2009:41). They make clear that personal wellbeing (indicated by high scores on their five domains) is socially contingent (mediated by power) and politically contingent (enabled or constrained by external conditions). This brings out how wellbeing needs to be understood as a process of iteration between these different factors. The weakness is that it identifies power as somehow exterior to the domains – the PADHI diagram shows power as a ring around the domains, rather than as interacting dynamically with them.

A new conceptualisation

Figure 3 presents a new diagram that tries to address these points and construct a common framework which incorporates the strengths across the approaches and a framework that can be more easily translated into practice. From WeD it takes the geometric image with its sense of a dynamic and constitutive tension between the different elements which make it up. However, the triangle has become a star, with seven points to illustrate the seven domains identified above. PADHI's terms are used to name the domains, both because they the most simple and self-explanatory and because they include an active 'doing' term ('accessing,' 'experiencing' etc). This helps get the sense of wellbeing as process and recognises that competence and agency are critical aspects of personal wellbeing within all the domains. This builds both on psychological insights about the significance of feeling competent and having some degree of control (eg Ryan and Deci 2001; Devine et al 2008) and also thinking on empowerment and participation in the development context (eg Rowlands 1997). While the diagram shows all the domains as of equal size, in fact, of course, the strength of different domains will vary according to whose wellbeing is assessed. The methodology set out later in the paper is able to produce numerical scores for each domain, from which different individuals' or communities' 'wellbeing star' can be plotted for visual comparison between them.

The dotted arrows indicate connection between the person experiencing wellbeing and the 'enabling conditions' of the external 'enabling environment' of physical environment, infrastructure, amenities, services and institutions (or more abstractly, political economy). These are lines of power. They suggest both the importance of the external context, and the fact that wellbeing is not equally available to all – women and men, children and elderly people, those from higher and lower castes or majority and minority ethnic groups will be placed very differently. Seeing power as built into wellbeing in this way captures PADHI's idea of power as mediating access to wellbeing. At the same time, the arrows show that wellbeing cannot simply be read off from these social identities: it is an outcome of the particular ways that individuals respond to and interact with their environment – which will be a mix of elements, conscious and unconscious, cognitive and emotional.

Following PADHI's lead the larger oval shows a set of external resources, or enabling (or constraining) conditions, which help secure or undermine people's ability to achieve wellbeing. These will tend to interact with and reinforce each other, so do not correspond on a one to one basis with the domains. For example a metalled road (infrastructure) will tend to increase provision of services and amenities. The final dimension that the diagram seeks to express is change over time. This is indicated by the spiral at the centre.

Figure 3: An integrated model of personal wellbeing
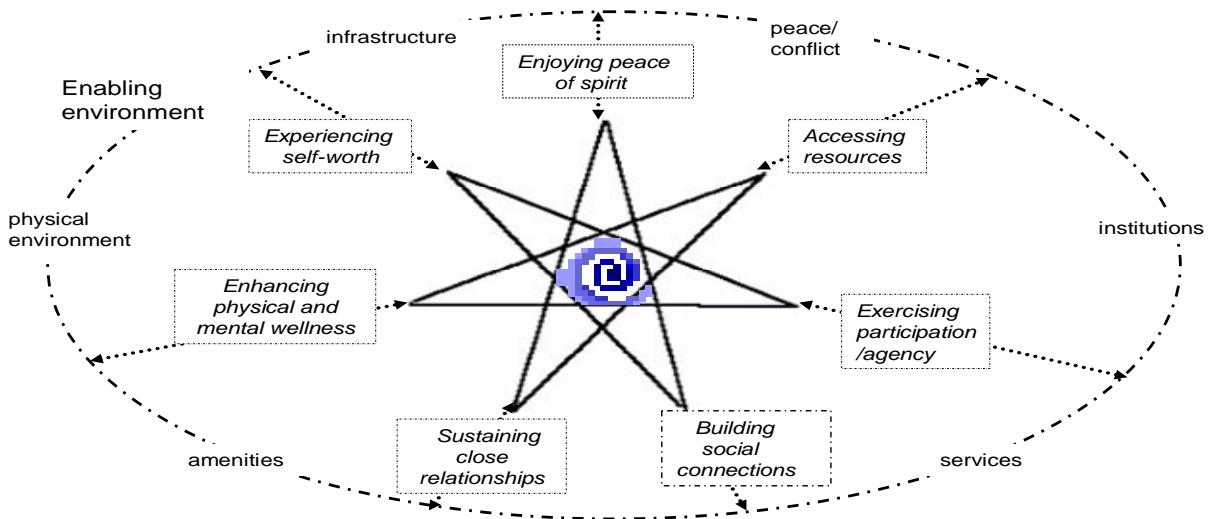
Putting Wellbeing to Work

Before being able to devise indicators of wellbeing, it needs to be clear what *work* it is expected that wellbeing will do. The attraction of taking an overarching concept like wellbeing to bring comparability to diverse contexts and programmes is clear. Putting this to work in practice, however, is rather more difficult. This section begins by presenting some of the hazards encountered in trying to use wellbeing in development evaluation. It then discusses further one dimension of these – whether wellbeing is simply too subjective and thus variable to constitute an achievable target. This leads into discussion of what having wellbeing as the goal of development might mean.

In trying to put wellbeing into practice, a number of hazards arise. The first is variability. The 'phenomenon' of wellbeing itself is open to variable interpretations. If indicators are to be devised to measure it, the conceptualisation of wellbeing needs to be fairly robust and its component elements simple to understand. This is the reason that so much space was devoted to this above. The second is comprehensiveness. If wellbeing is too generally defined it can comprise everything – or nothing. This leads to three practical dangers. First, the multi-faceted character of wellbeing could mean that all programmes are expected to do everything, and in particular that a lot of 'social' activities may be added on to 'technical' projects, even where this places considerable strain on the partners' capacity and expertise. Alternatively, wellbeing language and indicators may be added randomly into programmes where they don't really belong. At minimum this could lead to a 're-translation' (existing targets being

re-classified as dimensions of wellbeing); at worst it would add confusion and an extra burden into monitoring and evaluation systems. Finally, recognising the importance of certain areas of life to people (such as sustaining close relationships or enjoying peace of spirit) does not mean that these are necessarily areas appropriate for direct development intervention. Instead, it might be appropriate to recognise that development activities might 'spill-over' with impact into such areas, and to be ready to take this seriously, from project design and appraisal stage onwards.

A further issue is attribution. The complexity of development contexts means that there is always an attribution difficulty ('is this positive change really an outcome of this programme?'). This is even more strongly the case when you are looking at such personal and subjective variables. For example, it is not difficult to agree that self-esteem should be affected positively by a successful development project, and this might be interestingly explored at the micro level. The effect of the programme on self-esteem, however, will be heavily mediated by individual personality and biography, and all that has happened to that individual in the intervening period. This makes the pathway to self-esteem from any particular development intervention highly unpredictable. While Rosenberg's (1965) scale for self esteem is widely used in psychological research, therefore, it is very difficult to see this offering a robust standard for the evaluation of development projects, even apart from the inevitable questions about cultural specificity.

Related to this is the issue of additionality. Does looking at wellbeing really add anything to what we are already doing? Does looking at wellbeing mean we can take something away from what we are already doing? If it is to be useful, wellbeing needs to offer more than just a new description for old values. In particular, it needs to be independently testable. This means that a project might succeed in its primary objective (increased crop yields) *and yet fail to enhance wellbeing*. It would also mean, for example, that whether rights lead to wellbeing would become an empirical question, rather than an assertion. Finally there is the issue of integrity. Wellbeing is defined above as the sense of having what you need for life to be good. Beyond the tracking of different domains, is there, or should there be, a way of measuring this directly?

A moving target?

Amidst all the variety of what goes by the name of wellbeing, incorporation of subjective perceptions is perhaps the one point on which everyone agrees. This is strengthened further by sensitivity to cultural difference, and development concerns with 'voice' and participation, suggesting that wellbeing must be differently defined according to context. The question thus arises as to whether wellbeing is simply too

variable and subjective to offer a useful comparative measure. Put simply, if everyone has his or her own understanding of what wellbeing is, how can it be used as an overarching goal, or a single standard against which a range of programmes in very different contexts are assessed?

The obvious answer is that indicators need to be defined by the population concerned and then used with that same population over time. There remain two difficulties with this. First, subjective wellbeing measures respond immediately to positive or negative experiences, but tend to return to the original level (or 'set-point') over time (Marks and Thompson n.d*:* 20). Also, it is well known that people's expectations rise as their circumstances improve, and that people scale down their expectations to adjust to disappointment – what economists call 'adaptive preferences'. This suggests that there is kind of levelling that will take place even in the same context, with assessments of wellbeing tending to return to a relatively constant mean.

Such considerations seem to point strongly towards the adoption of a mixed measure which combines 'objective' and 'subjective' dimensions. The hard question that arises is whether the subjective is then doing any work at all – if it tends to return to a set-point, might it be just as good to stick with simply objective measures?

There is, however, another way of looking at this, which makes the 'adaptive preferences' argument work for, rather than against, a wellbeing approach. In his discussion of slum dwellers' mobilisation in India, Arjun Appadurai (2004:70) suggests that increasing poor people's 'capacity to aspire' is a vital aspect of empowerment. He understands the capacity to aspire not simply in terms of having hopes or ambition, but rather having a kind of map in one's mind of where one might want to get to and what the roads are that lead there. Richer people, he argues, have denser maps, with more options and clearer, surer routes setting out desirable ways of travel, with known guides along the way. Appadurai thus conceives the capacity to aspire as a 'navigational capacity', which enables people not only to name what they want, but to have a rich repertoire from which to choose, and perhaps more importantly to envisage different practical and effective strategies for achieving their desires. Something akin to this appears in PADHI's framework, as they ask people to identify people, organisations and agencies that support the achievement of wellbeing.

This suggests some exciting possibilities for the use of wellbeing in the development project evaluation. First, encouraging people to reflect on what wellbeing means to them and to be critical about the processes that undermine their wellbeing may be of value in itself as a developmental process. A wellbeing approach might thus serve as a means to achieve rights, rather than the other way around. Second, in terms of indicators, far from a change in understandings of wellbeing being a *problem* to

development programming, it might in itself offer an *indicator* of change: that people have enhanced capacities to aspire. This would suggest that part of the evaluation would involve a new examination of how people now understand wellbeing, on the grounds that a successful programme will have increased people's expectations. Following Appadurai's lead, this would involve not only a list of what is desired or required, but also exploration of strategies to attain them. At the same time, of course, it would be important to check the relation between aspirations and levels of satisfaction – it is not empowering to have your hopes raised with no means to achieve them.

Improving accountability: Wellbeing as goal

An alternative approach is to keep wellbeing as the overall goal of a funding or programme portfolio. In log-frame analysis, the goal is the ultimate objective towards which a programme and its purpose are directed. The goal as such is always beyond. It is at the programme level that indicators are applied. Keeping wellbeing as goal would thus guard against the serious dangers associated with the comprehensiveness of wellbeing noted above, of requiring development programmes to do everything on the one hand, or incorporate wellbeing language in a cosmetic way, without any substantive difference to what is actually done, on the other.

This approach has a number of advantages. First, it makes clear that this is the funding agency's goal, not the goal of the 'target' population, nor necessarily of the partner agencies. While the funding agency might wish to define wellbeing in conversation with these other actors, therefore, it relieves some of the stress of trying to achieve a universal definition which is also valid locally in all places. Second, if it is the overall goal of the funding portfolio, then each particular project needs only to show at purpose level how it contributes to wellbeing. Each project does not then in itself need to have wellbeing as its purpose, nor do the indicators it uses necessarily need to be indicators of wellbeing, *per se*. Instead, as long as the *purpose* (or objectives) of projects contribute to wellbeing, the projects need only to be evaluated in their own terms. This shifts much of the burden of measurement away from project level, re-locating it to the level of the funding agency's overall portfolio, the collective profile of the programmes and projects it supports. In broad terms, this might mean affecting *what* is done, and/or *with whom* it is done, and/or *how* it is done. Box 1 below briefly outlines the questions that would thus need to be asked. Power and location within the organisation and aid process will make a great deal of difference to how people answer all of these questions. This recognition needs to be built into any process for exploring them.

A further aspect of a wellbeing approach noted above is the way it encourages thinking of development in terms of processes and paying attention to the connections between different areas of life. As PADHI suggest, one critical aspect of wellbeing is a concern with the way development is done – that it is respectful to people, enabling positive relationships which enhance their sense of self-worth, as well as their material circumstances. This is reflected in Box 1 for the overall programme level. But it also suggests the need to think about potential knock-on effects of the programme in other areas of life, particularly in terms of relationships. As PADHI again suggest, this would mean for example thinking through the possible dangers of domestic violence that could lie in targeting a credit programme on women who have few opportunities to use it themselves and so will have to badger their husbands for money when the repayment day comes due. It will also mean tracking what changes do occur, and being ready to make reversals if these turn out to be negative.

Box 1: Applying wellbeing as the goal of development programmes

- **The *what*:** Does our programme profile promote wellbeing?

  This question directs attention to the type of projects and programmes the agency supports.

  - Are there some projects or programmes that promote and/or attend to accessing resources? Some exercising participation? Some building social connections? Some sustaining close relationships? Some enhancing wellness? Some experiencing self-worth? Some enjoying peace of spirit?
    - Is the programme strong on one of these and weak on another? Is there scope for some re-balancing, through taking on new projects and/or dropping or re-directing existing ones?
  - Are there some projects or programmes that target more than one of these aspects?
    - Is appropriate monitoring in place to track the inter-relations between them?
  - Is there any project or programme that takes wellbeing as a whole as its purpose?
    - If so, are extra learning resources being allocated to it?
  - Are there clear activities and indicators that demonstrate how these objectives will be achieved?

- **The *who*:** Are staff and partners well equipped to promote wellbeing?

  This question directs attention to the capacity of the funding agency and its partners.

  - Do staff understand wellbeing and the different dimensions of it?
    - Are staff strong on one of the areas and weak in others? Is there scope for some re-balancing, through making new appointments and/or giving additional training to existing staff?
  - Are we working with the right partners? Are some strong in their understanding and capacity to promote and/or attend to accessing resources? Some exercising participation? Some building social connections? Some sustaining close relationships? Some enhancing wellness? Some experiencing self-worth? Some peace of spirit?
    - Is the programme strong on one of these and weak on others? Is there scope for some re-balancing, through taking on new partners and/or dropping or giving training to existing ones?
    - Is the agency facilitating sharing and learning between them, particularly across these areas of strength?
  - Are there clear activities and indicators that demonstrate how these objectives will be achieved?

- **The *how*:** Does the way we work with our staff, partners and communities help promote wellbeing?

  This question directs attention to the way relationships are conducted.

  - Does staff thinking and practice in interaction amongst themselves and with partners reflect the principles of wellbeing?
    - How do institutional structures, culture, or processes affect this?
    - How are staff supported in reflecting on and improving their practice?
  - Does partners' thinking and practice in interaction within their organisations and with local communities reflect the principles of wellbeing?
    - How do institutional structures, culture, or processes affect this?
    - How do institutional structures, culture, or processes within partner organisations affect this?
    - How are partners supported in reflecting on and improving their practice?
  - Are there clear activities and indicators to monitor these?

Assessing the domains of wellbeing

While there are good reasons to be cautious about using wellbeing at the project or programme level, it also presents an exciting challenge. This section puts forward an approach for applying wellbeing in programme monitoring and evaluation, based on Figure 3, the integrated model of personal wellbeing. An initial piloting of this approach has been undertaken with Oxfam Hong Kong and Hodi, a Zambian organisation partnered by them, through a workshop in July 2009.[5]

The wellbeing assessment tool is designed for use at the project design stage and periodically through the project cycle for monitoring purposes. It is essentially in two parts. The first, before a project is designed, can be used to assess people's priorities, needs, existing resources and constraints and what support they would like. This could be done with groups PRA style, using the table in Appendix C as a basic template.[6] This could open up a fuller discussion of particular issues of importance to people in the community, including their 'capacity to aspire' and as a means to design a project in a participatory way. It should be noted, however, that this is quite a demanding exercise to undertake, and will need considerable forethought and skill in facilitation if it is to be successful.

The second part is to be used with individuals. This comprises a set of profiles and statements (see Appendices D and E) which can be used to form a baseline against which scores at mid-term or end of project can be checked. The statements are designed to capture different aspects of each domain. Respondents are asked to grade these on a five point scale (1 = strongly agree, 2 = agree, 3 = neither agree not disagree, 4 = disagree, 5 = disagree strongly). This generates quantitative data which can be analysed statistically. For each respondent a brief profile is also collected, including basic demographic information and a simple asset index (see appendix D). Before, after, and sometimes during the posing of the statements, more open ended discussion takes place, seeking to gain a more qualitative 'feel' for where people are. This is recorded in descriptive notes and logged alongside the quantitative data for each respondent. Finally, a number of more detailed qualitative case studies are carried out to develop a more richly textured understanding of what wellbeing means for particular individuals within each context.

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[5] The workshop was hosted by Hodi, and piloting was undertaken in the district of Chiawa, Zambia. The workshop involved representatives from Oxfam Hong Kong, CDS Bath, Hodi, and Sahamati, a Nepali partner of OHK, who are to host a similar grounding and piloting workshop in September 2009. Footnote 1 gives the names of those involved.

[6] This borrows heavily from the PADHI approach, see Appendix A.

Both quantitative and qualitative data would show any differences within the community, especially as regards gender, age, health/disability status and ethnicity. The statements in Appendix E have been deliberately designed to capture gender difference in particular. The sampling of respondents needs to be structured and interviews set up in such a way as to enable these lines of difference to be taken into account. Depending on the way the data is analysed, this can potentially be used for self-assessment by the community itself. However, as some of the questions (e.g. regarding domestic violence) are sensitive, this will need to be borne in mind n deciding who will use the assessment tool and how.

An awareness of process will emerge in part through following wellbeing through the project cycle. More particularly, attention needs to be paid to the 'drivers of wellbeing' (Roger Ricafort, pers. comm.) which might include causal connections within or across domains, and connections between an individual's position, actions and external factors. Finally, sensitivity to process reminds us that a wellbeing project should generate wellbeing in how it is done, which means being as inclusive as possible, without being burdensome.

As the constitution of wellbeing will differ by context, the first stage in the approach is grounding and piloting the model for local use. The second is the collection of data. The third is the analysis of data. The fourth is reflection on the data and analysis, within the implementing agency and potentially with the community itself. As is clear from this description, at this point the approach has been developed only for use with individuals. The plan for the future is to develop an alternative form that would assess the wellbeing of groups.

Applying the approach in practice

The first stage is to explain why use a wellbeing approach to monitoring and evaluation. The rationale is as follows. First, wellbeing gives a people-centred rather than project-centred methodology. It seeks to explore what changes have happened for people, rather than whether the project has met its objectives. Associated with this, it offers a '360 degree' holistic understanding of people's lives, rather than selecting out some (usually economic) aspects. It also has a central concern with people's subjective perceptions – that is, with their own views on what has happened and what is important about it. It gives primary attention to process, and it provides a mix of qualitative and quantitative methods and data.

The first exercise is to introduce this rationale and to allow people to express and discuss any questions, doubts or anxieties they may have. The next exercise is to introduce the model in general terms, again allowing plenty of time for discussion and debate. The focus here is Figure 3 and its four

key aspects: the external environment of enabling/constraining conditions; the seven domains; power mediating wellbeing; and processes of change and interaction.

The next stage is to begin grounding the model for the particular context in which it is to be applied. This involves two main activities. The first is establishing enabling conditions**.** This is an easy place to start, familiar to many community profiling activities. It involves the noting of services, amenities and infrastructure. In many cases this information will already be available. If not, it can be gained through established PRA methods – such as the transect walk – as well as discussion with key informants etc. This also offers the opportunity for some light touch social mapping, to identify the key divisions within the community, which will need to be taken into account in organising groups or selecting respondents. The second is mapping the domains. This involves working out what might be the 'indicators' or local idioms which capture the most important aspects of the different domains within the particular context. This is not a very easy process, and probably not best done with the community directly, although it will ultimately need to be tested with the community in the piloting process. Ideally the identification of factors would be done from first principles in each case, with an open question such as 'What resources do people here need to live well and be happy? To make it easier in practice, people could start with the statements developed through the Zambia workshop, and then see how these need to be customised to fit their particular context (see Appendix D).

The next stage is to test the model through piloting in the community. This involves individual interviews, which should take between 45 minutes and 1.5 hours. The most critical qualities of a good interview are responsiveness and flexibility, so the guidelines given here should be recognised as only guidelines, rather than rules to be rigidly followed. The interview would generally begin with an introduction, a brief description of the purpose of the interview and what it will involve, and a request for consent. This is followed by some open questions which seek to map out the terrain of the different domains and gauge some initial reference points for the particular respondent. Ideally this would touch on also what respondents see as key supporting and constraining factors, as suggested in the PADHI approach (see appendices A and C). This is followed by going through the statements. This should be done in a conversational way, giving explanation and asking for clarification as necessary, rather than as a battery of rapid-fire questions! Any further qualitative information should be noted down. Finally, through observation, conversation or through questioning at the end, the respondent profile should be completed.

The statement list should then be adjusted in line with what is learned through the piloting process. This is not as simple as it would appear. It is important to bear in mind the following issues.

There is a tendency to add more statements and not to take any away. This should be resisted. As a general rule, if a new statement is added, one should be taken away, to prevent the list getting too long. Within each domain, half of the statements carry a negative and half a positive charge. This is standard practice within such sets of questions, to counteract any respondent tendency to follow (or resist) the lead the question gives. If a statement is added or removed, the balance of positives and negatives needs to be checked. However, in practice some statements are very difficult to pose in the negative form, and some will bring knee-jerk assent in the positive. As with the approach to the interviews in general, the point is not to remain slavishly faithful to the letter of the statement, but to convey its spirit as accurately as possible in a form that is locally understood. For analysis, statements posed negatively will need to be reverse coded, since a '1' will in this case reflect a negative rather than positive assessment of wellbeing.

Some more detailed case studies are also an important part of piloting the model. These should be undertaken with individuals who have already completed the statements, as a way of checking on the accuracy of the image of wellbeing that has been conveyed, and so the usefulness of this approach.

The form of analysis will depend on the purpose of the survey – whether for community discussion, for monitoring by a development agency, or for wider research. The statements will produce a wellbeing score for each respondent per domain, which will allow their wellbeing to be plotted as a star diagram. This will enable different wellbeing profiles to be compared visually with one another, to see for example if similar patterns emerge by age or gender. Statistical tests can be used to explore correlations and directions of influence between different domains. Data can be logged in Microsoft Excel, Microsoft Access, or SPSS.

Conclusion

This paper addresses the current gap between interest in wellbeing in international development and the means to incorporate this in practice. It reviews some key approaches to the understanding of wellbeing in developing countries, and suggests a new model which seeks to bring together their strengths. It is an exploratory paper, and an exploratory model, which is still in the process of being developed. However, initial results are positive, and the potential for developing new ways of looking at development, and new initiatives for enabling people to make improvements in their lives, seems to be present. Feedback and further discussion are now invited.

References

Aked, Jody; Marks, Nic; Cordon, Corinna; and Thompson, Sam. 2008. *Five ways to well-being: the evidence. A report presented to the Foresight project on communicating the evidence base for improving people's well-being.* London: nef. June.

Andrews, F.M. and Withey, S.B. 1976. *Social Indicators of Well-being: Americans' Perceptions of Life Quality*. New York: Plenum Press.

Appadurai, Arjun. 2004. 'The capacity to aspire: culture and the terms of recognition.' Pp 59-84 in V. Rao and M. Walton, ed. *Culture and Public Action*. Stanford: Stanford University Press.

Camfield, L., Choudhury. K., Devine, J. 2008. 'Wellbeing, Happiness, and Why Relationships Matter. *Journal of Happiness Studies*. 9 (1): 105-138.

Chambers, Robert. 2004. 'Ideas for development: reflecting forwards.' *IDS Working Paper* 238. November.

Collard, D. 2003. 'Research on Wellbeing: Some Advice from Jeremy Bentham.' *WeD Working Paper* 02.

Deci, Edward L. and Ryan, Richard M. 2008. 'Hedonia, eudaimonia, and well-being: an introduction.' *Journal of Happiness Studies*. 9 (1): 1-11.

Devine, J. Camfield, L. Gough, I. 2008. 'Autonomy or Dependence - or Both?: Perspectives From Bangladesh'. *Journal of Happiness Studies*. Volume 9:105-138.

Langer, EJ and Rodin J. 1976. 'The effects of choice and enhanced personal responsibility for the aged: a field experiment in an institutional setting.' *Journal of Personality and Social Psychology* 34: 191-98

McGillivray, Mark, ed. 2007. *Human Well-being: Concept and Measurement*. London: Palgrave Macmillan.

McGregor, J.A. 2007. 'Researching wellbeing: from concepts to methodology.' Pp316-350 in I.Gough and J.A. McGregor (eds) *Wellbeing in Developing Countries. From Theory to Research.* Cambridge: Cambridge University Press.

McGregor, J, A and Sumner, A, 2009 'After 2015: '3D Human Wellbeing', *IDS In Focus Policy Briefing* 9.2, Brighton: Institute of Development Studies

Michaelson, Juliet; Abdallah, Saamah; Steuer, Nicola; Thompson, Sam; and Marks, Nic with further contributions from Jody Aked, Corrina Cordon and Ruth Potts. 2009. *National Accounts of Well-being: bringing real wealth onto the balance sheet.* London: nef.

Marks, Nic; Shah, Hetan; and Westall, Andrea. 2004.*The Power and Potential of Well-being Indicators. Measuring young people's well-being in Nottingham.* London: nef.

Marks, Nic and Thompson, Sam. 2008. *Measuring well-being in policy: issues and applications*. London: New Economics Foundation.

PADHI. 2009. *A Tool A Guide and a Framework: Introduction to a psychosocial approach to development.* Colombo: Social Policy Analysis and Research Centre.

PLA 2008. Planning Learning and Accountability Framework. Oxfam Hong Kong.

Psycho-social Working Group. See http://www.forcedmigration.org/psychosocial).

Rosenberg, M. 1965. Society and the adolescent self-image. Princeton, NJ: Princeton University Press

Ryan, Richard and Deci, Edward. 2001. 'On happiness and human potentials: a review of research on hedonic and eudaimonic well-being.' *Annual Review of Psychology* 52:141-166.

Rowlands, Jo.1997. *Questioning Empowerment. Working with Women in Honduras.* Oxford: Oxfam.

Sointu, E.. 2005. 'The rise of an ideal: tracing changing discourses of wellbeing.' *The Sociological Review*. 53 (2): 255-274.

Thomas, K. 2008. 'Rights and Responsible Wellbeing Dimensions of Development: Capturing Change and Impact.' Paper presented at 'R*ethinking Impact: Understanding the Complexity of Poverty and Change'* at Headquarters of the International Center for Tropical Agriculture (CIAT) in Cali, Colombia, March 26-28, 2008.

White, S.C. 2009. 'Analysing wellbeing. A framework for development practice.' *WeD Working Paper* 44. Available at: www.welldev.org.uk. Forthcoming in *Development in Practice*.

White, Sarah C. and Ellison, Mark. 2007 'Wellbeing, livelihoods and resources in social practice.' Pp 157-175 in I R Gough and J.A.McGregor (ed). *Wellbeing in Developing Countries: New Approaches and Research Strategies.* Cambridge: Cambridge University Press.

Appendix A. PADHI Wellbeing Assessment Tool

1. Geographical location
2. Demographic information
3. Introduction and consent
4. Domains:

    a. General; b. Access to material and physical resources; c. Competence (roles, activities, influence); d. Self-worth (personal characteristics); e. Building social connections;

    f. Participation (activities in family and community)
5. Power and influence
6. social mapping

Within each domain:

1. Elaboration
2. Satisfaction
3. Factors influencing
4. How wellbeing achieved
5. Satisfaction with ability to get things done
6. Services, institutions and infrastructure required
7. Satisfaction with services, institutions and infrastructure required
8. People, organisation and agencies supporting

Appendix B. Guidelines for identifying appropriate interventions (PADHI 2009:71-2)

1. **Identifying the issues and priorities of the community**
2. **Identifying potential beneficiaries** – why these not others? What about equally vulnerable groups? What are consequences of including/excluding these groups to a) community; b) organisation?
3. **Describing specific issues and priorities** – enabling and disabling factors? Existing institutions, services, organisations to address them? Most important people? Gaps?
4. **Identifying strategies** – what are they already doing? How satisfied with level of power and influence? Strategies to gain influence? What can be done? How new strategies mesh with existing ones?
5. **Revisiting Objectives** – What outcomes are aimed at? How does intervention fit with psychosocial framework: domains; power and identity; systems and institutions? Objectives in line with principles of intervention?
6. **Identifying Principles** – Which strategies do you value, why? Any promote principles of wellbeing – how? Any undermine principles of wellbeing – how?

Appendix C. Assessing the Domains of Wellbeing.

Please note: these questions cannot be pursued directly as set out here – they are far too demanding!

However, this table gives an idea of the range of issues that people might wish to cover.

A. Domain of Wellbeing	B. What matters	C. Satisfaction	D. Enabling/ constraining factors	E. Potential support
1. Accessing resources	What resources would you say you need to live well and be happy?	How would you say you are doing with respect to these?	What enables/ constrains your access to these resources?	What do you think would help you gain better access to resources?
2. Exercising participation /agency	What kinds of activities do you participate in within the family and community?	How satisfied would you say you are with this?	What enables/ constrains your ability to participate effectively?	What do you think would help you participate more effectively in activities in the family and community?
3. Building social connections	What relationships and connections beyond the household are important to your living well and being happy?	How satisfied are you with these relationships or connections?	What enables/ constrains your ability to develop relationships and connections?	What do you think would help you build better relationships and connections beyond the household?
4. Sustaining close relationships	How do relationships within the family contribute to your living well and being happy?	How would you say you are doing with respect to these?	What enables/ constrains this?	What do you think would help to improve your close relationships?
5. Experiencing self-worth	What are some of the things in the way you are or what you do that make you feel good about yourself?	How satisfied are you with these characteristics?	What enables/ constrains your ability to be this way?	What do you think would help you feel better about yourself?
6. Enhancing physical and mental wellness	What aspects of physical or mental health affect your ability to live well and be happy?	How satisfied are you with your mental or physical health?	What enables/ constrains your ability to improve your physical/ mental health?	What do you think would enable you to enjoy greater physical or mental wellness?
7. Enjoying peace of spirit	What do you need in religious or spiritual terms in order to live well and be happy?	How satisfied are you with your religious or spiritual life?	What enables/ constrains your ability to improve your religious or spiritual life?	What do you think would enable you to enjoy greater religious or spiritual wellbeing?

Appendix D. Basic Respondent Profile (Chiawa, Zambia) (to be adapted by context)

Number:

1. Name	
2. Sex	
3. Village	
4. NGO member (group)	
5. Age	
6. Occupation	
7. Marital status	
8. Household members	
9. Number of own children	
10. Children out of school	
11. Own children looked after by others	
12. Others' children looked after by self	

For completion through observation, discussion or at end of session:

	Asset	Type/ number
1	House type	1. Poor 2. OK 3. Concrete
2	Water source	1. River 2. Borehole
3	Toilet	1. No 2. Yes
4	Fuel source for cooking	1. Wood 2. Charcoal
5	Tools for farming (axe, hoe, rake)	How many?
6	Salaried job	How many?
7	Business	1. Fishing 2. Vegetables 3. Artisan/handicraft
8	Cattle	How many?
9	Goats	How many?
10	Chickens	How many?
11	Radio	1. No 2. Yes
12	Mobile phone	1. No 2. Yes
13	Bicycle	1. No 2. Yes
14	Motorbike	1. No 2. Yes

Appendix E. Wellbeing Statements (Chiawa, Zambia 2009)

Strongly agree = YES!; Agree = yes; Neither agree nor disagree = Y/N; Disagree = no; Strongly disagree = No!					
1. Accessing Resources	Y!	y	/	n	N!
1. 'There are times in each year when I have to struggle to make ends meet.'					
2. 'I generally find it easy to get credit.'					
3. 'I have resources set by to fall back on in hard times.'					
4. 'I am happy with the quality of education available to my children.'					
5. 'Some of my children have had to leave school because of lack of funds.'					
6. 'I find it hard to keep informed about what is going on in the wider world.'					
7. 'I am able to get good quality medical treatment.'					
8. 'I feel confident in the police and justice system.'					
9. 'For health care I generally go to the traditional healers.'					
10. 'My standard of living is higher now than five years ago.'					
11. 'I have to spend a long time collecting water for household use.'					
12. 'I have difficulty getting government relief at the right time.'					
2. Participation/Agency					
1. 'I can make a difference to my community when I work with others'					
2. 'What I say matters in decisions in my household.'					
3. 'I don't see any role for myself in community affairs.'					
4. 'I don't think it matters whether I vote or not.'					
5. 'My community has a say in national politics'					
6. 'Nothing I do will make any difference in my household'					
3. Building social connections					
1. 'I have people I can go to for help and advice'					
2. 'It is hard for me to cope with all that the community ask of me.'					
3. 'People do not come to me for help and advice'					
4. 'When there's something important I always get to know.'					
5. 'I don't know any important people.'					
6. 'I belong to a group that helps and supports each other.'					

4. Sustaining Close relationships	Y!	y	/	n	N!
1. 'I have to take too much of the responsibility for running our household.'					
2. 'There is little harmony in our home.'					
3. 'My children are a source of support to me.'					
4. 'I often feel a conflict between what would be good for me personally and what would be good for my wider family.'					
5. 'My husband [or wife] cares for me '					
6. 'I am confident that I will have the care that I need when I am old.'					
5. Enhancing wellness					
1. 'I get enough good quality food.'					
2. 'My state of health makes me worry about the future.'					
3. 'I often worry for my family's safety.'					
4. 'There is no enjoyment in my life.'					
5. 'I rarely feel troubled or stressed.'					
6. 'I live with the threat of violence from my family members'					
7. 'I feel good about the work I do each day.'					
8. 'I rarely think about death or dying.'					
9. 'This village is a good place to live.'					
6. Experiencing Self worth					
1. 'I am able to do things which help other people.'					
2. 'I feel that people of my community are not respected by others outside this community.'					
3. 'I do not have much to feel proud of.'					
4. 'I feel confident that I can face whatever the future brings.'					
5. 'I can find solutions to problems that I encounter.'					
6. 'I feel that there are a number of good things about me.'					
7. Enjoying Peace of Spirit					
1. 'I worry that our community doesn't live according to God's laws.'					
2. 'I live in fear of harm from witchcraft'					
3. 'All in all I feel that life has been good to me.'					
4. 'Even my faith gives me no comfort in times of trouble.'					
5. 'I feel peace in my heart at the end of the night.'					