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The Ethical Imperative of Qualitative Methods: Developing Measures of Subjective Dimensions of Wellbeing in Zambia and India

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Abstract

Wellbeing advocates state that it provides a more holistic, humanistic focus for public policy. Paradoxically, however, wellbeing debates tend to be dominated by highly quantitative, de-contextualized statistical methods accessible to only a minority of technical experts. This paper argues the need to reverse this trend. Drawing on original primary mixed method research in Zambia and India it shows the critical contribution of qualitative methods to the development of a quantitative model of subjective perspectives on wellbeing. Such contributions have a political, ethical and practical urgency if subjective measures of wellbeing are to be used in policy.

'Evolutionism, functionalism, diffusionism - whatever the method, all express otherness in the name of sameness, reduce the different to the already known, and thus fundamentally escape the task of making sense of other worlds.'

(Mudimbe, 1988: 72-3).

Introduction

The momentum behind the advocacy of wellbeing as a focus in public policy suggests the capacity of wellbeing to carry a broad range of agendas. These include the promise of broader based indicators of national progress; a positive emphasis on strengths and aspirations rather than a negative focus on problems or difficulties; fuller understanding of people's needs and the intended and unintended impacts on them of policies and projects; plus the promise of direct measures of 'how people think about and experience their lives' (OECD, 2013:3).

The need to go 'beyond GDP' (Gross Domestic Product) in objective indicators is broadly accepted, institutionalised in measures such as the Human Development Index and the Millennium Development Goals. By contrast, the use of subjective measures remains more controversial. While the excitement around subjective perspectives on wellbeing proclaims their novelty, in fact their advocacy represents two long established and radically opposed trajectories. On the one hand 'the science of wellbeing' (Huppert et al., 2005) promises a revival of pure utility, a perfect individualised measure of the good. On the other it pledges a more people-centred approach, that at once broadens the vision of 'what matters' and expands the range of voices included in the debate (Matheson, 2011). In both cases the immediate appeal is technical – that greater efficiency

requires a personalised measure of effect or the inclusion of multiple dimensions. But in both what is offered is also, critically, ethical and political – that people have the right to determine their own perspectives on their lives.

In such a politicised context where wellbeing may be used in advocacy of radically opposed agendas, it is vital to pay attention to the methods of assessment. Paradoxically, while objective measures of wellbeing may be quite diverse, subjective measures are dominated by highly quantitative, de-contextualized statistical methods which can be engaged with only by a minority of technical experts. This paper argues against this, maintaining that quantitative approaches to subjective wellbeing need to be complemented and challenged by qualitative methods of enquiry.

The potential contribution of qualitative methods to the study of wellbeing raises many issues, some dimensions of which we set out in the conclusion. The paper concentrates on just one aspect: the contribution of qualitative methods in developing a quantitative model of subjective perspectives on wellbeing, through primary mixed method research in Zambia (2010) and India (2011). While we would advocate the use of qualitative methods in all wellbeing research, we see them as particularly critical in cross-cultural contexts, where people's ways of being in the world may differ radically from those of university students in the global north, who constitute the main population for the development of psychological scales including those measuring subjective wellbeing. The conceptual basis of our model of 'inner wellbeing' (IWB) and its quantitative validation, are reported in another paper (White et al., 2013). Here, the focus is on the development of our measures of inner wellbeing and two areas in which qualitative methods made a critical contribution, improving data quality and problem-solving. The final section sets out some further areas in which qualitative enquiries have critical contributions to make. As momentum builds behind the use of wellbeing measures in policy contexts (e.g. OECD, 2013), such contributions have an ethical, political and practical urgency which reinforces their intellectual importance.

Wellbeing Definitions

The term 'wellbeing' is used in many different ways and other terms may be used interchangeably with it. To some degree this depends on discipline. Quality of life has been the main focus in health and social indicators research (see for example WHOQOL Group, 1993; Hagerty et al., 2001). In economics Amartya Sen has led work on quality of life through his capabilities approach. This developed as a critique of measuring standards of living by utility (pleasure or happiness) on the one hand and commodities (goods people have) on the other (Sen, 1983). Instead, the concept of capabilities focuses on 'the ability to do various things by using that good or those characteristics' (Sen, 1983: 160) or 'the alternative combinations of things a person is able to be or do – the various "functionings" he or she can achieve' (Sen, 1993: 30). Quality of life – used interchangeably with wellbeing - inheres in the extent to which people have the ability to achieve 'valued functionings', from the simplest and most general – being adequately nourished – to the more complex, such as 'achieving self-respect or being socially integrated' (Sen, 1993: 31). For Sen, then, the ability to be happy is counted amongst the 'important functionings', though it is not the only one (Sen, 1993: 37). He also asserts that freedom of choice is an important constituent of wellbeing, giving the example of the difference between going hungry due to poverty, and choosing voluntarily to fast.

The economics of happiness, by contrast, identifies wellbeing with utility, and so emphasises happiness or subjective well-being (SWB). The predominant approach in psychology argues that SWB should be measured through a combination of life satisfaction and 'affect balance': the weighing of positive against negative feelings or emotions (Diener et al., 1999). This does not command universal support, however. Ryff (1989) claims psychological wellbeing should be understood across a range of domains which together comprise 'optimal psychological functioning'. Ryan and Deci (2001) criticise SWB as 'hedonic,' arguing for a more 'eudaemonic', or fulfilment focused, understanding of wellbeing as arising from a life of virtue and authenticity, rather than simply being focused on pleasure.

In this paper we are primarily concerned with subjective perspectives on wellbeing, while recognising that these are deeply embedded in material and relational dimensions (Gough and McGregor, 2007; White, 2010; Sumner, et al., 2009; McGregor and Sumner, 2010). A concern with the subjective is of course familiar: it is central to the interpretivism common to qualitative and participatory research, which aims to understand as nearly as possible how research subjects themselves see the world. What is novel is the attempt to capture this in quantitative terms. Single 'global happiness' questions are now commonplace in household surveys. Alternatively cross-cultural researchers uneasy with the standard approaches have sought to derive 'emic' measures by asking respondents to list what is important to them (for example, Clark 2003; Copestake, 2008). Subjective quality of life may then be measured by the gap between the goals or aspirations thus derived and their satisfaction with these (Woodcock et al., 2009; Copestake and Camfield, 2010).

Framing Wellbeing

While quantitative measures of SWB tend to assume a positivist epistemology, recent discussions of 'framing' suggest some recognition of the limitations of this. The idea of 'framing' is introduced by the economist Carol Graham (2011) as she points out that several studies have shown that happiness questions correlate less closely with income than do life satisfaction questions:

'Questions that provide more tangible economic or status frames seem to have a closer relationship with income than do more open ended questions that capture either affect and/or life chances' (Graham, 2011:226).

The context of this discussion is the issue that sparked the current interest in wellbeing: the 'paradox', noted by Richard Easterlin (1974) that while countries grew healthier and wealthier over time their levels of happiness did not rise accordingly. This has recently been hotly contested, with

arguments that happiness has in fact continued to rise (e.g. Hagerty and Veenhoven, 2003; with rebuttal by Easterlin, 2006) and that subjective well-being does in fact correlate positively both with GDP per capita and with wealth differences within countries (Stevenson and Wolfers, 2008). Carol Graham's (2011) paper reviews this debate, suggesting that differences in results may derive substantially from the *methods* different writers employ: the sources of data; the questions used; the countries surveyed; and the measure of income used; as well as 'real' differences such as rates of economic change and changing aspirations (221-2).

Ed Diener, one of the lead proponents of subjective well-being as life satisfaction combined with affect, interestingly corroborates this position. In a paper jointly authored with the Gallup organisation, whose 'World Poll' has become the most authoritative source of data in the money and happiness debates, Diener et al., (2010: 58-59) argue the need to disaggregate the composite of subjective well-being, since 'the relation of income and [subjective] well-being was strong for life evaluation but weak for feelings'. People's reports of their experiences of *feeling* happy or sad, the authors argue, are better explained by 'psychosocial prosperity' rather than 'economic prosperity'.¹ The problematic terminology aside, this confirms the importance of paying careful attention to the precise measures that are used and the particular questions that are asked. This in turn points to the importance of reflecting on the *concepts* embodied in different measures of wellbeing rather than settling for a rough equivalence between them (White et al., 2012:768). This, then, is the first dimension of framing: the way questions about subjective well-being are posed may evoke a particular kind of context for respondents and so predispose towards a particular set of findings. In this case, questions about life satisfaction suggest an economic frame, which accordingly results in strong correlations between economic status and subjective well-being scores.

Secondly, issues of framing arise in relation to the structure of wellbeing surveys, and specifically the order in which questions are asked. Drawing again on Gallup data, for example, Deaton (2012) considered how levels of subjective well-being in the United States fluctuated during the

economic crisis of 2008 to 2010. His striking conclusion was that changing the order in which questions were asked 'dwarfed' the effect of the crisis even at its worst (Deaton, 2012: 23).

A paper suggestively subtitled, 'How the questions shape the answers,' shows that these issues are not specific to wellbeing research, but characteristic of any survey which seeks to produce quantitative information on the basis of self-report (Schwarz, 1999). Drawing on a wide range of research in psychology, Schwarz (1999:103) argues:

'As researchers, we tend to view our questionnaires as "measurement devices" that elicit information from respondents. What we frequently overlook is that our questionnaires are also a source of information that respondents draw on in order to determine their task and to arrive at a useful and informative answer... Unfortunately, as researchers we are often not fully aware of the information that our questionnaires..... provide, and hence miss the extent to which the questions we ask determine the answers we receive.'

Bringing qualitative methods into the mix adds a whole new dimension to the issue of framing. Mixed method analyses of poverty commonly point to complementarities, where quantitative methods can identify key transitions or obstacles, while qualitative can explore in more depth the processes that underlie these (Lawson et al., 2006; Adato et al., 2006). But using different methods can bring tensions or contradictions also. Davis and Baulch (2011) found that quantitative, expenditure based surveys produced a more positive picture of poverty dynamics in Bangladesh. Qualitative life histories showed different patterns in life trajectories and picked up many aspects of "ill-being" which were missed by the economic measures (Davis and Baulch, 2011:132).

Kanbur and Shaffer (2007) suggest that differences between quantitative and qualitative approaches to poverty may have been underplayed, and critique the way they have been

‘viewed in technical terms, amenable to technical solutions.’ Instead, they argue, critical differences are often philosophical rather than technical, relating to epistemology and normative theory. In particular, they emphasise the distinctions between ‘empiricism’, in which truth is seen to be determined through the straightforward observation of independently derived data, and ‘critical hermeneutics’ which directs attention to discourse and the interpretation and analysis of subjective meanings. While empiricism is commonly associated with quantitative approaches and critical hermeneutics with qualitative, the sensitivity of quantitative assessments of subjective well-being to the effects of framing makes a thorough-going empiricism very hard to maintain.

Camfield et al. (2009:8) take the argument further, as they claim:

‘Qualitative approaches... foreground the presence of both the respondent and the researcher, which highlights the fallibility of all data collection by emphasising their role in its “co-creation.” ‘

In the third place then, the frame becomes not simply the particular questions or the order in which they are asked, but also the type of research encounter. Camfield et al. (2009:17) bravely report that comparisons of numerical scores that their respondents assigned to areas of life revealed discrepancies with the verbal accounts they gave in interviews in more than half the cases examined.² Nor were these discrepancies trivial. The authors describe how one elderly man in Ethiopia gave an overall numerical score that was ‘low but positive’ but in interview stated ‘I am living a dead life, and I want to die’ (*ibid.*). This leads them to caution against taking text out of context, and to suggest that people may be ready to reveal sensitive issues in an interview, that they would not if approached through a more structured, quantitative measure.

The issue of framing – of concepts, of question order, of responses, of type of research encounter, of underlying philosophy – is thus critical to the study of wellbeing. It takes us beyond questions of technique at least to epistemology, and perhaps even to ontology, and the

nature of the construct of wellbeing itself. As such it is critically entwined with ethics, both in the representation of research findings, and the quality of the research encounter. The following sections introduce our own research and experience of using qualitative methods to develop a quantitative model of inner wellbeing.

Researching Inner Wellbeing

This paper draws on field research in marginalised rural communities in Zambia (Chiawa) August-November 2010 and India (Sarguja district, Chhattisgarh state) November 2010 and February-May 2011.³ The main research instrument was a survey interview which combined 'objective' (self-report) indicators of economic activities and assets, status in the community, access to services etc. with subjective questions about what people felt they were able to be and do. The survey was conducted with married couples (husbands and wives were interviewed separately) and 'single' women heading their own households, who were mostly widowed or divorced. Our focus on married couples reflects the widespread agreement that relationships are central to wellbeing. We included single women heading households on their own as they are commonly found to experience particular vulnerabilities. In Chiawa we surveyed a total of 168 married men, 172 married women and 72 single women. In Sarguja these figures were 157, 156 and 26 respectively. The differences in sample size of single women heading households reflects the different social realities in the two locations. The samples were comparable in terms of age, with a mean of 38 years in Chiawa and 40 years in Sarguja. In both places single women were on average slightly older than married couples, in Chiawa the mean age for this group was 43 years and in Sarguja 54 years.

The project aimed to develop a psychosocial model of wellbeing that would reflect what is important to people within a particular material, social, political and cultural context. This is very different to the dominant SWB approaches, which aim to produce a summative measure of

happiness or satisfaction – or in economic terms, utility – which is abstracted from the particularities of the lives from which it is derived. IWB (inner wellbeing), by contrast, seeks to engage with at least some of the substance of how people are thinking and feeling about different aspects of their lives, so as to understand how their perceptions of different kinds of strength or vulnerability might have a material effect on what they can achieve. While inner wellbeing was not developed explicitly in relation to the capabilities approach introduced above, it has clear affinities with it, constructing people in the active voice, and exploring the scope of what they feel themselves able to do and be.

The major challenge in developing the model was to construct items that were at once sufficiently grounded to be intelligible to people and to reflect something significant in their lives, and sufficiently abstract or general to be amenable to statistical analysis. We therefore used a mixed method approach, with a qualitative process to develop and help interpret the quantitative survey. Qualitative methods included observation and informal discussion with local people, open-ended questions and requests for clarification when conducting the survey. We also used group meetings and open-ended interviews to produce qualitative data in their own right, but do not report on these here.

The model we eventually produced identifies seven domains set in a wider environment which enables or constrains wellbeing. Each domain contains five questions, and respondents are offered a range of graduated answers which correspond to a five point Likert scale. The domains are: economic confidence; agency and participation; social connections; close relationships; physical and mental health; competence and self-worth; values and meaning. We see wellbeing as experienced through processes of interaction between the different domains, between the person and those important to him or her, and between the person and the broader environment.

Quality Data Input

In quantitative research primary attention is often paid to output, with validity, reliability and so on being proved through statistical tests of how the data fit together. In qualitative research by contrast much more attention is paid to the process of gathering data, and thus the quality of data that is inputted. Validity and reliability here are more about whether the data gathered faithfully represent the circumstances and viewpoints of the respondents.

In each country we began our visit to the research area with a general discussion of local issues with staff of our collaborating NGOs and other local people. We then entered an intensive process of grounding and piloting the survey in the villages themselves, involving a total of ten weeks in the field sites in Zambia and India, as well as long discussion and multiple revisions amongst the team back at the office.

In piloting a primary concern was response fatigue, with length of survey having a major impact in reducing data quality. We therefore determined only to include what we thought we would *use*. We also worked hard to make questions as easy as possible to understand and answer. For the subjective questions this helped us to test for validity (that the items were measuring what we intended them to) as we asked people what the items made them think about, asking for further clarification so that we could understand as fully as possible the answers that were given. New questions arose as people interpreted statements differently from the way we had intended, or phrased things in a particular way. This is of course the core commitment of qualitative research: to pay attention to the way that people locally were thinking and talking about their lives. At base it is about the quality of *listening* in any research encounter. The process was greatly helped by being able to discuss puzzling issues with staff of our collaborating NGOs.

We also aimed to make the process of doing the survey as conversational as possible, making space for stories and explanations of answers which would give us a deeper sense of what was really going on for people. This enabled us to begin to get a sense of local constructions of wellbeing, which have very different starting points from those of the standard approaches. Such stories played a somewhat paradoxical part in our research journey. On the one hand they reinforced our sense of the need to develop our own contextually based model. On the other they made us realise the limits to *any* quantitative measure – that there are many dimensions of life that simply cannot be reduced to points on a scale.

In terms of the quantitative model, the major impact of this qualitative style of listening was the way it led us to revise our initial model of inner wellbeing. This took place after our first period of fieldwork, in Zambia, 2010. In the Zambia survey we asked only about objective economic status. In the inner wellbeing section the nearest we came to economics was a domain reflecting the resources people were able to access in the local environment. Re-piloting the survey before our fieldwork in India, however, we were struck by the centrality that people gave to economic matters, in a way that seemed internal to inner wellbeing. When we asked about harmony in the household, for instance, someone answered that with his own and his father's illness there were money worries, so how could there be happiness in the home?' A woman commented 'No longer worried about money, we now have good food and good clothes and can go about our work without worrying.' She also talked of an earlier time when they had been really struggling and even her own parents had refused to give her help. All this made us reflect further on the South Asian term that we had thought best captured wellbeing, 'sukh shanti' (happiness and peace) and realise that even with this there was a connotation of economic sufficiency. We thus needed to add an economic domain to our model of inner wellbeing.

In and through all of these apparently technical or efficiency issues, the more fundamental concern was to engage with people in an ethical way, and to ensure the best possible quality of

interaction for them. This is an issue in all research of course, but it is perhaps particularly acute when you are researching wellbeing. In the first place some wellbeing questions are intrusive, you are necessarily asking people about intimate parts of their lives, and this brings a responsibility to give the appropriate time and attention. Secondly, our understanding of wellbeing sees it as something that happens in relationship, and this includes the interactions that form part of the research process. The ethical character or otherwise of our study, and the extent to which we are justified in intruding in such ways in people's lives, has been a recurrent matter of reflection for us.

Implementing this commitment involved not only attending to our research respondents, but also to the relationships that were built up within the team. In both places we recruited local people to work with – three in Zambia and four in India – who acted as peer researchers, mediating, interpreting and interacting between the local respondents and the external team members through the grounding and piloting process and on throughout the fieldwork. Regular team meetings were held twice a week, to provide opportunities to share how things were going, check that surveys were complete and discuss any issues that had come up. The research officer spent time with all the local researchers in turn – more intensively at first but still on an occasional basis right through to the end of the fieldwork. These opportunities for ongoing support and collective reflection were vital for ensuring data quality and strengthening local researchers' skill development, as well as for sustaining spirits and identifying and addressing any problems as they arose.

Qualitative Problem-Solving

Being a mixed method project our data has to meet both quantitative and qualitative standards of validity and reliability. To test our seven domain model we needed to perform factor analysis, which assesses whether responses to the different items in each domain correlate in such a

way as to suggest they reflect a common underlying concept. We then needed to investigate statistically whether correlations between the domains showed they were related to, but not identical with, each other, and so supported the concept of inner wellbeing as a whole. After our first period of fieldwork (in Zambia) however, we found that none of this was possible. Statistical analysis of the inner wellbeing data showed that our data was so far from the statistical norms that we were unable even to run the analyses which would test the model.

The statistical norm is for responses to any item to be distributed in a normal curve, with a peak in the middle descending to lows at the extremes. Instead, we found that on some items responses clustered strongly at one extreme, indicating that the majority of respondents were answering in the same way – ‘skewness’, in statistical terms. On other items the distribution was bi-polar, showing that people had used the extreme options rather than those in the centre. This makes it difficult to identify any trend in the responses. This is known as ‘kurtosis’.

While quantitative analysis enabled us to identify the problem, it was qualitative reflection that helped us solve it. Thinking back to the process of doing the fieldwork we realised that there were a number of reasons why we had received this pattern of responses. First, in some cases most people tended to answer in a similar way because of shared experiences. The statement, ‘I do not get government assistance at the right time’ offers an example of this. The overall mean of scores on this item was very low (1.59), reflecting people’s real experience of very limited state provision of welfare assistance.⁴

Second, the same pattern of bunching of responses was evident for items when there was a clear ‘right’ answer, that is, one that is socially approved. This was an issue in particular for the domain of close relationships, where people tended to want to present a good face to the world, even when the reality they experienced was less positive.

A third factor affecting the distribution of responses was the form in which questioning took place. Low levels of literacy amongst our respondents meant that surveys had to be conducted through a face to face interview. We began by reading out the statement, and then asking whether respondents agreed or disagreed with it. We then asked a follow up question, as to whether they dis/agreed weakly or strongly. This is in line with the practice recommended by other researchers working with respondents with limited literacy. However, we believe that the effect of this mode of questioning, at least in the cultural context of Chiawa, was to encourage respondents to be bold and go for the emphasised response ('strongly!'), thus resulting in a bipolar distribution of responses.

The social effect of the interviewing context is indicated by another finding. This is that negatively phrased statements tended to receive negative scores, while positive statements received positive scores. This problem of 'acquiescence bias' is well known in research methods and we took it into account by trying to include an equal number of positively and negatively weighted statements within each domain.⁵ Nonetheless, the degree of this bias was striking – the scores of 36 of the 42 items used in Zambia 2010 followed the weighting of the statement given.

Reflecting on the Zambia experience, in India we moved from statements to questions. In addition to the difficulties noted above, our respondents found statements confusing. It was not obvious to them that the 'I' in the statement read out by the researcher was intended to apply to themselves. Questions were far easier for people to understand and respond to. Also, questions are more open, and do not carry nearly so strong a positive or negative weighting. The issue of leading was therefore no longer a problem.

We then paid attention to the wording of questions. The major change here was to ensure the wording would elicit a full range of responses. For example, in Zambia we used the statement: 'I can work with others to bring change to my community.' In the India survey, this became: 'How

confident do you feel that (along with others) you will be able to bring change to your community?’ We then devised a set of carefully graded answers which also helped to spread the responses across the range. In our second round of research we also introduced a visual image for the five point scale, negative to positive, which some respondents found helpful in determining their answer.

Happily, all these changes were effective. Whereas in Zambia 2010 we could not validate any of our hypothesised domains nor the underlying concept of inner wellbeing, in India we were able to use our survey to validate our seven domain model and the concept of inner wellbeing as a whole (see White et al., 2013).

Conclusion

This paper argues that as there is increasing interest in using wellbeing measures in policy contexts, it is vital that more attention is paid to the specific models, concepts and methods through which wellbeing is assessed. The main part of the paper shows how qualitative processes of enquiry made a vital contribution to the successful development of a quantitative model for assessing subjective perspectives on wellbeing in rural communities in India and Zambia. We believe that having qualitative enquiry alongside quantitative is particularly important in contexts which are culturally dissimilar to those in which instruments have been developed. The forms of *local* understandings of wellbeing need to be explored not assumed, and qualitative methods are vital to achieve this. This takes us beyond recognising cultural difference as affecting average reported scores of a standard subjective well-being measure (e.g. Diener and Suh, 2000). Instead, we would argue that *meanings* and *processes* of wellbeing may be

qualitatively different in different contexts, and that these differences may in turn provide the basis to challenge or re-define the theories and measures themselves (see Miller, 2002).

This raises issues of academic integrity and reiterates the point that how wellbeing is interpreted is deeply political. This is true even of supposedly objective measures, where the same statistics can be massaged and re-presented to support radically different policy messages. But it is perhaps even more strongly the case where the data are subjective, purporting to reflect people's thoughts and feelings. They are political in the nature of personhood they imagine, from rational economic individualist to relational selves. But they are also political in that subjective data requires a *subject*. If all context, all trace of interaction, all of the essentially qualitative particularities that make up subjectivity are removed to produce 'pure' numerical data, the only subjects who remain are the analysts themselves. It is they who will re-invent the context required to make sense of the data, re-crafting the life-worlds of those researched to fit their own image.

For ourselves, the quotation from Mudimbe's *The Invention of Africa* which opens this paper raises perhaps the fundamental ethical issue. Our work has attempted to be sensitive to the local context, and we believe that we have gone further than most in this field in seeking to reflect what is important to people locally and their ways of seeing things in the process of our research. Nonetheless, we have to recognise that however humanised by qualitative sensibility, this methodological approach carries a very strong 'disciplining' effect, requiring respondents to express themselves in ways that do not come naturally. This is particularly evident in the close relationship domain, where people are unused to being asked such direct personal questions. Perhaps even more fundamental is the need to abstract and generalise. Western academics and respondents are used to dealing with questions at a relatively abstract and general level. Such questions are required by research that involves statistical testing such as factor analysis, which seeks to derive a common underlying concept from people's responses to a range of statements. Our respondents in Zambia and India, however, were much more used to talking

about their lives in specific and tangible terms, in multi-layered stories not uni-dimensional numbers.

As stated in the opening section, some at least of the advocacy of focusing on wellbeing in public policy comes not just from a desire for more technically complete information, but also for a more democratic process. This would allow people whose experience is different, who frame the world in another way, whose orientation is local and particular rather than aspiring to be universal, to speak in their own terms. This is the promise of an in-depth, qualitative encounter, that it foregrounds others as subjects, and listens as they speak some of the richness of their subjectivity.

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Endnotes

¹ Interestingly, this tends to support the claims of Self-Determination Theory, which sees wellbeing as the outcome of satisfying three basic psychological needs (autonomy, competence and relatedness) (Ryan and Deci, 2001).

² The text does not state how many cases this applies to.

³ This was the first phase of the research programme. There was another round of fieldwork in each country in 2012 (Zambia) and 2013 (India) but the results of this are not reported here. For more information see www.wellbeingpathways.org.

⁴ More detail explaining the difference between various different kinds of subjective questions, and our model of the 'layers' of wellbeing which seeks to capture this, is given in White et al., (2012:12).

⁵ Negatively worded items were recoded before analysis so that a high final score represented high wellbeing.

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