

## **Felicia Huppert blog: preamble to Discussion paper for What Works Centre on Wellbeing**

### **Measurement really matters: academic perspective**

If something is worth measuring, it's worth measuring well. Easy enough to agree; harder to put into practice when we look at subjective wellbeing. Yet, even as governments around the world shift wellbeing up their policy priorities, we're still having really fundamental discussions about what meaningful measures of wellbeing actually look like.

Currently, many different measures are used to capture wellbeing, and some of them are conceptually inadequate or of low quality. The impact of mis-measurement on decision-making, policy, and people's lives could be serious. It could totally undermine the concept of wellbeing as a foundational approach to policy-making.

What do I mean by mis-measurement? Look, for example, at the ubiquitous ONS life satisfaction question: 'All things considered, how satisfied are you with your life nowadays?'

While there are acknowledged problems with life satisfaction questions like this - e.g. little sensitivity to change over time; different interpretations of 'satisfied'; and so on - life satisfaction measures are the most widely used survey measures of wellbeing.

But should they continue to be used and relied on, simply because they have always been used? We can, and we need to do better.

In my short discussion paper, *Measurement Really Matters*, I propose that if subjective wellbeing is a multi-dimensional construct, we need a multi-dimensional measure to make sense of it, and measure it.

For policy purposes, we need to identify the levers of change for different dimensions of wellbeing. We need to know 'what works' to improve positive relationships, what works to improve emotional resilience, what works for positive emotion, optimism or self-esteem. This requires good measures of the external factors and internal resources that have the greatest influence on subjective wellbeing, along with a good multidimensional measure of subjective wellbeing itself.

## **Measurement really matters**

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It is enormously encouraging that so many government organisations and international bodies are recognising human wellbeing as a policy outcome – even a policy priority. This crystallises the need for good wellbeing measures.

In this short paper, I will make the following points:

- If something is worth measuring, it is worth measuring well.
- We need to separate the core construct of subjective wellbeing from the external factors and internal resources that influence it.
- Subjective wellbeing is a multi-dimensional construct.
- If we are going to measure subjective wellbeing well, we need a multi-dimensional measure.
- For policy purposes, we need to identify the levers of change for different dimensions of wellbeing.
- This requires good measures of the external factors and internal resources that have the greatest influence on subjective wellbeing, along with a good multidimensional measure of subjective wellbeing itself.

### **1. Subjective wellbeing is worth measuring**

There are many instrumental benefits of a high level of subjective wellbeing, and these benefits are frequently cited as the reason for its importance. There is evidence that people with high levels of wellbeing learn more effectively, are more productive and more creative, have better relationships, and better health and life expectancy (e.g. Lyubomirsky, 2008; Ryan and Deci, 2001). However, the real reason why wellbeing matters is not its instrumental benefits. They are merely a by-product of a high level of wellbeing. The real reason wellbeing matters is that it is an end in itself – an ultimate good.

### **2. Subjective versus objective wellbeing**

It is essential to separate subjective wellbeing from the contextual factors that are associated with wellbeing. Subjective wellbeing is about how people experience their lives. There is abundant evidence that people can have a high level of subjective wellbeing in the face of external hardship, and conversely, many people experience a low level of wellbeing despite advantageous objective circumstances. So how we experience our lives is what matters; it cannot be inferred from the objective facts of our lives.

That said, our subjective experience of wellbeing is undoubtedly influenced by external factors such as our social environment, as well as the internal resources we have at our disposal. Both are amenable to change, and thereby represent the levers through which wellbeing can be improved, so it is important that they be understood. However, they are not themselves wellbeing.

### 3. Defining subjective wellbeing

Although there is not yet an agreed definition of subjective wellbeing, there is growing agreement on some of the core components. At the broadest level, subjective wellbeing involves the combination of feeling good and functioning well. That is, the experience of positive emotions and the sense that our life is going well most of the time. The qualifier 'most of the time' is significant, since subjective wellbeing also requires us to manage difficult or painful experiences that occur in our daily lives. Thus, sustainable wellbeing is linked to mental skills or inner resources such as resilience, self-regulation, or mindfulness (Huppert, 2017).

While some have argued that the frequent experience of positive emotions is sufficient for subjective wellbeing (Fredrickson, 2009; Layard, 2011), most wellbeing scholars propose that there is more to wellbeing than pleasant emotions, which like any emotions are by their nature transient. They would argue that equally important is the perception that we are leading a life that we value, where we experience a sense of meaning and fulfilment, and the perception that we are functioning well both personally and in our relationships with others (for a comprehensive review, see Huppert & Ruggeri, 2017).

It is worth pointing out that the term subjective wellbeing is often used synonymously with terms like psychological wellbeing, positive mental health, quality of life, and flourishing, and insights into definition and measurement can be gained by consulting this wider literature. Two main insights are clear from this broader understanding. First, subjective wellbeing is more than the absence of symptoms of psychological distress or ill-being. Yet scales designed to measure ill-being are often used as a proxy for subjective wellbeing (see examples in Dolan, Peasgood & White, 2008). Even if a person does not endorse a single symptom of distress or ill-being on such a scale, we cannot assume that they experience subjective **wellbeing**. The most we can say is that they may have neither ill-being nor wellbeing.

The second insight is that subjective wellbeing is multi-dimensional, and cannot be defined in terms of a single construct such as happiness or life satisfaction. Consensus on what these dimensions are, is however lacking. To date, most lists of wellbeing dimensions are based either on the author's theoretical background or their personal preferences. Perhaps a more systematic approach to identifying the relevant dimensions might have a greater chance of gaining widespread acceptance. One such attempt has been made by Huppert & So (2013), based on the idea that subjective wellbeing, equated with positive mental health, lies at the opposite end of a continuum to mental ill-health as represented by the common mental disorders (depression and anxiety). That is, wellbeing is defined not as the absence of ill-being, but as its opposite. Examining the internationally recognised criteria and symptom lists for the diagnosis of these common mental disorders (using the DSM and ICD classifications), and systematically defining the opposite of each symptom, these authors identified 10 dimensions that correspond to the positive end of the mental health spectrum. These are: sense of competence, emotional stability,

engagement, sense of meaning, optimism, positive emotion, positive relationships, resilience, self-esteem, and vitality. There is considerable overlap between these dimensions and the dimensions provided in other lists, but the way the 10 Huppert and So dimensions were derived arguably puts them on a more solid footing. Ongoing psychometric and longitudinal research is establishing the extent to which these 10 dimensions are independent of one another, and how they relate to basic socio-demographic variables.

#### **4. Measuring subjective wellbeing**

The preceding section makes it clear that if we want a good measure of subjective wellbeing, we need: (1) questions that focus on positive experiences, and (2) questions that cover key dimensions of wellbeing. Low scores on scales designed to measure symptoms provide no information about positive wellbeing. Only the extent of endorsement of positive experiences indicates the level of **wellbeing**. To take an example, the Measuring National Wellbeing project of the ONS measures wellbeing with 4 questions; three are about positive characteristics - happiness, life satisfaction and sense of meaning, but one is about anxiety. While anxiety may be of interest in its own right, it should not be used in the calculation of wellbeing. This point has been fully recognised in the development of the Warwick-Edinburgh Mental Wellbeing Scale (WEMWBS; Tennant et al., 2007).

Turning to the need for a multi-dimensional measure, it is widely accepted that positive emotion is among the dimensions that a good measure of subjective wellbeing needs to include. Positive emotion is often measured by a single question about happiness, but other positive emotions such as feeling contented, feeling interested, and feeling warmth towards others are at least as salient for wellbeing. So, an adequate measure of positive emotions needs to measure more than just happiness.

In addition to positive emotion, we need good measures of the extent to which people perceive themselves to be functioning well. There is a variety of popular measures that propose specific lists of dimensions of functioning, but as suggested above, these lists have largely been derived in a non-systematic way (see Huppert, 2014). The measurement of wellbeing would benefit from a more rigorous approach, such as that developed by Huppert & So (2013) for the definition of wellbeing. At this relatively early stage in the science of wellbeing, it is recommended that the 10 dimensions they have identified be regarded as a provisional list of the key components of wellbeing, and that all of these dimensions be measured wherever possible when administering a mental health/wellbeing survey.

#### **5. What is the minimum number of items that can provide a good measure of subjective wellbeing?**

There are three supplementary questions we need to address when answering this question. Can subjective wellbeing be adequately measured by a single item? Can subjective wellbeing be adequately measured by a single score? Can subjective wellbeing be adequately measured by questions about life satisfaction?

*Can subjective wellbeing be adequately measured by a single item?*

There is a long tradition of measuring subjective wellbeing with a single item, usually a question about life satisfaction, but sometimes about happiness. This appears to go back many decades to when Cantril (1965) developed his 'ladder of life' which continues to be used by Gallup and other surveys as their primary measure of subjective wellbeing. Putting aside the vexed issue of how different individuals, groups or nations decide on what they regard as their 'best possible life' and their 'worst possible life', the Cantril ladder has also been criticised on other grounds (Bjørnskov, 2008; Hicks, 2012). The single item most commonly used in surveys to measure wellbeing is a life satisfaction item such as 'Overall, how satisfied are you with your life nowadays?' (ONS, Measuring National Wellbeing).

It would of course be very convenient if we could measure subjective wellbeing with a single item. But how illuminating would that be? A single item measuring happiness would be very limited, since happiness is just one dimension of wellbeing. A single item about life satisfaction is also limited, since it is not a measure of experience, but is a global evaluation that is very difficult to interpret (see below). Yet there is an understandable desire to measure subjective wellbeing efficiently, so how can we do that?

*Can subjective wellbeing be adequately measured by a single score?*

There are a number of short scales which recognise the multi-dimensionality of wellbeing, and produce a single summary score. Among these are the Warwick-Edinburgh Mental Wellbeing Scale (Stewart-Brown et al., 2011), the Flourishing Scale (Diener et al., 2010), and the Mental Health Continuum Short-Form (Keyes et al., 2011). Of these, the WEMWBS has by far the best established psychometric properties, population norms and sensitivity to change (Hendramoorthy et al., 2012)).

If we take an analogy with economic measures, a single summary score or metric such as GDP can certainly be informative for descriptive and comparative purposes. However, if the intention is to use it for policy purposes, we need to be able to unpack the score into its components, in order to understand which component or components need to be targeted to make the desired change. In the case of GDP, we need to break it down into at least its major constituents - consumption, investment, government spending, and net exports.

In the same way, if we want a measure of subjective wellbeing that is useful for policy, we need not only a summary score, but also the ability to unpack that score into its components. One such approach is described by Ruggeri et al., (2017) who have developed a Comprehensive Psychological Wellbeing (CPWB) index, which can be broken down into its 10 constituent parts, based on the dimensions established by Huppert & So (2013). In this way, it is possible to identify which dimensions should be targeted in a particular group or context if we wish to improve wellbeing. The value of this approach can be seen in data from the European Social Survey, comparing subjective wellbeing in Finland and Norway, two countries which have very similar social, demographic, and economic conditions. Despite identical life satisfaction scores (8.1) they arrived at similar single CPWB scores with very different profiles on individual dimensions (Ruggeri et al., 2017). By understanding such differences and responding with appropriate interventions, there is potential for positive impact on entire populations. Ongoing psychometric research is establishing a short set of items that will constitute a high-quality scale to measure both composite wellbeing and its sub-components.

## *Can subjective wellbeing be adequately measured by questions about life satisfaction?*

Questions about life satisfaction provide a global evaluation of how a person perceives their life. This global evaluation integrates current attitudes, future expectations, and past experiences. Making such an evaluation not only requires complex processing on the part of the respondent, but is extremely difficult to interpret. There have been numerous critiques of life satisfaction measures (see Huppert, 2014), including their poor psychometric properties, relative insensitivity to change, wide variation in how people weigh up different aspects of their life, and in their interpretation of the term 'satisfied' as reported in an ONS study (Ralph, Palmer, & Olney, 2012). Despite this, life satisfaction measures continue to be used simply because they have always been used. It is arguably legitimate to continue to include a question about life satisfaction in a wellbeing survey in order to make comparisons with past surveys. But for the reasons given above, it is clear that if we want a valid and reliable measure of subjective wellbeing, and if we want to measure what really matters to people, we need to go beyond measures of life satisfaction. Indeed, if we were beginning afresh to consider how to measure subjective wellbeing, it is most unlikely that we would come up with a question about life satisfaction. <sup>1</sup>

### **6. Benefits of measuring subjective wellbeing as a multi-dimensional construct**

Taking a multi-dimensional approach to the measurement of subjective wellbeing produces nuanced insights as well as the possibility of illuminating policy priorities for intervention. Overall scores can be useful for making macro-level comparisons, but specific dimensions may vary substantially between groups, which is very relevant for developing effective interventions. Dimensions on which a group obtains low scores represent areas for concern, and can be seen as potential targets for evidence-based policy interventions. Similarly, dimensions on which a group obtains high scores can be seen as learning opportunities to understand what may be driving such results, and using this knowledge to sustain those policy levers as well as translating this knowledge for individuals or groups not performing as well in that dimension.

### **7. Good measures to identify policy levers**

In addition to a good multi-dimensional measure of subjective wellbeing, we need good measures of both the external factors and the internal resources that are associated with subjective wellbeing, and could be drivers of wellbeing. Measures of many external factors are already well established. For example, ONS measures nine domains in addition to subjective wellbeing, which they describe as: personal wellbeing, our relationships, health, what we do, where we live, personal finance, the economy, education and skills, governance, and the natural environment. If we want

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<sup>1</sup> Even Diener who is renowned for his widely used Satisfaction With Life Scale (SWLS; Diener et al., 1985) has subsequently developed a more nuanced measure of subjective wellbeing or flourishing (Diener et al., 2010).

a deeper understanding of the drivers of wellbeing and the most effective levers of change, an important task for the future is to examine how these different external factors are related to different dimensions of wellbeing.

Further, it would be valuable to have measures of the internal resources associated with wellbeing and its key dimensions, since policies to influence these resources may have great benefit for improving population wellbeing. Internal resources include such capabilities as self-regulation, reflection, empathy, and resilience. Building such internal resources in the early years of life may confer the greatest wellbeing benefits. It is even possible that the effects of such interventions would be greater than interventions targeting external factors. Policies that consider improvements in both the external conditions and the internal resources are likely to be the most effective for increasing the wellbeing across the population.

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