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# **COMPLEXITY IN WELLBEING AND THE 'LEAVE NO-ONE BEHIND' AGENDA**

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Studies in Aotearoa New Zealand

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# Abstract

International development's preoccupation with growth-oriented strategies has abated in response to the inadequacies of Gross Domestic Product (GDP) as a measure of societal progress. The broader framing of a wellbeing agenda promises a departure from the policymaking status quo, yet its measures have not kept pace. Efforts to operationalise wellbeing have relied on familiar statistical tools and linear models that limit the information considered relevant for human flourishing. The resulting loss of complexity and diversity distorts policy messages and systematically perpetuates the structural conditions that generate wellbeing inequities. In New Zealand, the re-emergence of wellbeing as a political focal point, coupled with a commitment to the Sustainable Development Goals' (SDGs) call to 'leave no-one behind', places pressure on wellbeing frameworks to improve outcomes for people experiencing hardship. This research explores wellbeing from the perspective of those experiencing hardship in Cannons Creek, Porirua, and analyses how holistic approaches to wellbeing might enable more targeted policies that address wellbeing inequities. Critical theory guided this research and was complemented by the methodologies of participatory action research and the capability approach. Participatory mixed methods enabled an exploration of participants' perspectives via focus group discussions, diagramming activities, and free-list surveys. The results revealed a disconnect between New Zealand's macro level wellbeing framework and community level realities, primarily in what was measured and why it was considered relevant for wellbeing. Participants conceptualised wellbeing as a balance of domains in a non-hierarchical system, and an analysis of wellbeing inter-relationships indicated that some domains acted as catalysts of change or as bridges between seemingly unrelated wellbeing processes. The conclusion can be drawn that for the operationalisation of wellbeing to reach fuller potential, policymakers should make use of alternative framings that shift emphasis from static linear thresholds to a continuum of dynamic, inter-related processes embedded in time, place, and context. As New Zealand's transition to a wellbeing agenda marks new opportunities to pioneer discussions on how best to 'leave no-one behind', this research makes a strong case for measures of progress to reflect the intrinsic and inescapably complex nature of wellbeing as it is experienced in people's daily lives.

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# List of Abbreviations

BLI	Better Life Index
FGD	Focus Group Discussion
GDP	Gross Domestic Product
GSS	General Social Survey
IANZ	Indicators Aotearoa New Zealand
LSF	Living Standards Framework
MDS	Multidimensional Scaling
NGO	Non-governmental Organisation
OECD	Organisation of Economic Cooperation and Development
PAR	Participatory Action Research
SDG	Sustainable Development Goal
SWB	Subjective Wellbeing
UN	United Nations
WCA	Wesley Community Action
WeD	Wellbeing in Developing Countries

# Chapter 1: Introduction

International development has made a conceptual shift away from economic growth as the yardstick by which success is measured. For decades, notions of what constitutes good living standards were bound up with the production and consumption of goods and services, effectively equating wellbeing with a rising Gross Domestic Product (GDP) (Austin, 2016; Costanza et al., 2014). Naturally, however, people care about much more than material wealth; they care about other dimensions such as their health, feelings, culture, safety, rights, and relationships with others. An extensive body of research surrounding GDP's inability to capture important aspects of what "makes life worthwhile" (Ussher & Walker, 2015, p. 215), coupled with rising concerns around the negative consequences of economic growth, has prompted a new focus on a broader range of issues that affect people's quality of life. This has brought a wellbeing approach to the forefront of development policy and practice. Indeed, McGregor (2007, p.38) defined development as "the creation of conditions where all people in the world are able to achieve wellbeing".

The pursuit of wellbeing has opened space for a rather different set of conversations about the determinants of a good life and thus which activities should be pursued in development initiatives. It offers new scope with which to reflect on past development models that have left rising inequality and the destruction of the natural environment unchallenged. At its most promising, a wellbeing approach could inform an alternative set of development activities that facilitate the experience of human flourishing across multiple dimensions, based on what people value for a better future.

While the end-goals of development initiatives have changed, its measures have not kept pace. Efforts to operationalise wellbeing have resulted in the creation of a number of composite indices and dashboard-type frameworks that rely on familiar statistical resources which reduce complex concepts into single values and average them across entire populations. While this maintains a parsimony that is helpful for policymaking, it loses sight of the diversity and complexity of wellbeing (J. A. McGregor, 2018). These top-down approaches result in universal indicators that presume both what a good life is and how to attain it, taking little feedback from people themselves (Rojas, 2007).

Some have gone further to criticise the underlying neo-utilitarian foundations that inform wellbeing measurement, which treat it as a static and compartmentalised inventory driven by what can be objectively measured (Atkinson, 2013; T. S. J. Smith & Reid, 2017). Acting within the boundaries of what is quantifiable risks oversimplifying wellbeing and limiting the range of information considered relevant for human flourishing. The resulting loss of information easily overlooks the complex factors that determine wellbeing, distorting the reality of what is happening in local contexts and sending misleading policy messages. It follows that the metrics of wellbeing measurement and the policies that stem from them are incomplete in the ways they comprehend wellbeing in the daily lives of people.

As New Zealand takes stock of its accomplishments in the launch of its first 2019 Wellbeing Budget, it is worth examining how wellbeing measurement and the policies that stem from it are positioned to deliver wellbeing outcomes for New Zealanders who are experiencing some degree of hardship. Fittingly, New Zealand's commitment to the United Nations' (UN) Sustainable Development Goals (SDGs) and their bold call to leave no-one behind (United Nations, 2015) refocuses attention on how outcomes are being prioritised for the poorest and more marginalised groups, putting significantly more pressure on measurement frameworks to increase sensitivity to inequities.

This thesis takes a bottom-up approach to exploring wellbeing as defined by individuals facing hardship in Cannons Creek, Porirua. It is positioned amongst recent developments in broader social theory that critique the dominant project of wellbeing measurement. If a wellbeing approach is to serve as the innovative solution to development some claim it to be, then doing "more of the same" (Eppel, Karacaoglu, & Provoost, 2018, p.4) is a grievous missed opportunity to make the transition to a wellbeing agenda count. By drawing on complexity thinking to explore wellbeing as a dynamic system of interrelationships (Agar, 1999; Burns & Worsley, 2015), a central aim of this thesis is to construct a more complex and nuanced picture of wellbeing that offers conceptual alternatives to neo-utilitarian framings that pervade macro level wellbeing measurement frameworks. Following the premise that what we measure affects what we do (Stiglitz, Sen, & Fitoussi, 2009), a deeper analysis of the factors that make up wellbeing, along with a review of their dynamics as an integrated whole, is essential to ensure that top level measurements do not become conceptually disconnected from

people's social, economic, and cultural contexts (J. A. McGregor, 2018) and that this interdependent nature of wellbeing is acknowledged and factored into policy-making.

On a wider scale, the research findings will aim to contribute to ongoing discussions about how New Zealand measures progress in wellbeing at the macro level, particularly in the context of its commitment to 'leave no-one behind'. Collaborating with individuals who are experiencing hardship, and who may be excluded from the decisions that affect them, is critical when considering how the design and implementation of wellbeing interventions will benefit these communities.

## Rationale and Research Aims

International development has gradually shifted its gaze towards wellbeing as a more valid end-point than economic growth and material wealth (Gough et al. 2007; White, 2009). The increased prominence of wellbeing in policy agendas prioritises target-driven understandings that suggest wellbeing exists in some external capacity; a universal target waiting to be achieved. This approach "systematically and conveniently allows policy attention to shy away from the structural conditions that are generating wellbeing inequalities and that are producing harmful and unsustainable wellbeing failures for many" (J. A. McGregor, 2018, p. 218). Contemporary wellbeing discourses have privileged these perspectives to the point of obscuring alternative understandings, creating what Austin (2016, p. 123) called a "hegemony of happiness".

Many have argued that wellbeing is not one-size-fits-all and does not occur in a vacuum (Alkire, 2008; McGregor, 2007; Robeyns, 2017; Rojas, 2007). It is embedded in people's normative judgements of what makes a good life and therefore differs depending on who you ask and the context in which it is being discussed. Recently, many have called for a critical re-examination of wellbeing's ontological underpinnings as informed by broader social theory, where diverse meanings and interpretations can be explored within particular historical, cultural, and social contexts (Atkinson, 2013; Gough, McGregor, & Camfield, 2007; J. A. McGregor, 2018; T. S. J. Smith & Reid, 2017; White, 2016, 2017). These alternatives encourage a shift in focus from linear thresholds and static "poverty snapshots" towards an emphasis on continuums of dynamic, interacting, and ongoing processes subject to change over time (Sumner & Mallett, 2013, p. 686).

This perspective offers a firm grounding on which this thesis examines wellbeing as an integrated whole, paying special attention to the interrelationships and interdependencies between wellbeing domains. It also allows for the pursuit of deeper critical engagement with the underlying power structures that perpetuate hardship, thereby positioning this research as a transformative endeavour on the road to empowerment and justice.

This work is also set against a backdrop of a burgeoning field of research and discussion as New Zealand places wellbeing front and centre of its policy agenda. At the macro level, two pieces of work are central to this: the Treasury's Living Standards Framework (2018b), designed to inform the 2019 Wellbeing Budget; and Statistics New Zealand's (2018c) Indicators Aotearoa project, a main data source for wellbeing indicators. Closer to the community level, legislation has recently been passed that reinstates wellbeing into the Local Government Act, restoring power to local government "to promote the social, economic, environmental, and cultural wellbeing of communities" (New Zealand Government, 2019). As the wellbeing approach represents an "important departure from the policymaking status quo" (Weijers & Morrison, 2018, p. 4), this represents fresh opportunities for government, academics, civil society, and communities to discuss how public policy might do things differently to improve wellbeing outcomes in New Zealand.

To explore how a holistic approach to wellbeing might contribute to improved wellbeing outcomes for communities experiencing some degree of hardship, this research asks:

- How is wellbeing, or a good quality of life, defined and experienced by participants experiencing hardship in New Zealand?
- Which factors contribute to their wellbeing as they understand it, and in what ways?
- How do domains relate to one another, and how can a deeper understanding of the relationships between them further our understanding of wellbeing?
- How can more nuanced understandings of wellbeing by participants experiencing hardship contribute to measures of progress that 'leave no-one behind'?

# Theoretical Framework and Methods

I used critical theory to guide my process of inquiry in this research, which seeks to challenge dominant means of understanding the world in an effort to expose unequal power relationships (Neuman, 2011). This epistemology allowed me to critically unpack macro level wellbeing frameworks to uncover structural concerns that may be contributing to wellbeing inequalities. It was necessary to complement my philosophical foundation with methodologies that could be used successfully with a bottom-up approach and had a firm conceptual grounding on which to discuss wellbeing. I found this in two methodologies: participatory action research and the capability approach. Participatory action research was helpful in uncovering the voices of those who are often systematically excluded (Aldridge, 2015; Kindon, Pain, & Kesby, 2007). PAR does this by challenging mainstream social science traditions on where knowledge is said to reside (Camarota & Fine, 2008; Kindon et al., 2007); diminishing the 'expert' status of the researcher and valorising the perspectives of participants. The capability approach asserts that development and wellbeing should be understood in terms of people's freedom to live the kinds of lives they value (Sen, 1999). It was helpful in its appreciation for a broader evaluative base on which wellbeing could be conceptualised, allowing this research to explore the full variety of activities and circumstances people recognise to be important.

When applied in tandem, these methodologies offer a greater set of tools with which to explore community perceptions of wellbeing. D. A. Clark, Biggeri, and Frediani (2019) have argued that the capability approach offers ways to circumvent some problematic applications of PAR which reproduce, rather than diminish, processes of exploitation that perpetuate inequality (see Cooke & Kothari, 2001; Kapoor, 2005). As PAR serves to unpack nuanced dimensions of wellbeing in the context of people's lives, the capability approach provides a "comprehensive framework to guide and safeguard [PAR's] transformative roots" (D. A. Clark et al., 2019, p. 5). Both methodologies offer a useful counterpoint with which to examine wellbeing amongst myriad frameworks that paint wellbeing with a broad brush.

To conduct the research, I used a participatory nested mixed methods design. Qualitative data were gathered via focus group discussions, and quantitative data were

gathered via linkage diagramming activities and free-list surveys. Employing mixed methods allowed for a richly contextualised account of people's lived experiences, while simultaneously generating numerical values through which it was possible to create a heuristic device to visualise the relationships between wellbeing domains. This device facilitated an exploration into complex wellbeing relationships and made it easier to decipher spheres of influence.

Three focus group discussions were carried out with 24 participants over three weeks. The qualitative data were analysed using grounded theory. The quantitative data were analysed in two ways: the linkage diagrams were transformed into chord diagrams for a visual analysis of the relationships between domains, while the responses from the free-list surveys were plotted in a nonmetric multidimensional scaling (MDS) solution and analysed with cluster analysis techniques (Rabinowitz, 1975). The quantitative data were transformed into diagrams with help from the statistical program R 3.6.1 (R Core Team, 2019).

## Positionality

My interest in this research project emerged out of a deeper enthusiasm for development effectiveness through people-centred policies. In 2013, I had the opportunity to intern at an eco-foundation in Nepal for six months. The founders, a Nepali married couple who were personally connected with communities of people who were afflicted with leprosy, had set up the foundation to support them and others experiencing difficulties in their community. Visits to the leprosy communities were pleasant and people seemed happy; they had access to a clinic, grew vegetables in communal gardens, and lived in simple but comfortable state housing. I later found out that state-sponsored specialised care involved supplying medical support only within the confines of the leprosy communities themselves, and staple foods like rice and lentils were trucked in. While seemingly innocuous on the surface, these policies seemed to reinforce systemic segregation. Individuals afflicted with the disease were kept both geographically and socio-economically isolated from others in society. Considering these programmes were intended to support people, they offered no escape from the status quo and no alternatives for a different way of life. This led me to question whether all aid was 'good' aid, and to wonder about the extent to which

development policies could be ineffective and even damaging to the groups they were intended to benefit.

I was still seeking answers to these questions when I embarked upon this project. My interests, opinions, and values concerning development have been profoundly shaped by the experience and, for this reason, I am admittedly *not* a neutral party in this research. I do not accept existing systems and structures as *faits accomplis* and wonder whether spaces for participation could offer more inclusivity and be more fit-for-purpose, hence my guiding epistemology of critical theory.

This research is based in Cannons Creek, Porirua in association with Wesley Community Action (WCA), a charitable trust offering support services to members of the community. I am a newcomer to New Zealand; I grew up in Canada and spent four and a half years living in East and South Asia. Because of my newcomer status and the fact that I was not a part of the community where I situated the research, I was acutely aware that I lacked an insider connection with participants. My different life experiences, cultural learnings, education level, and status as a young female would have impacted how members of the community viewed my presence and my research intentions. Power imbalances were implicit in this divide, which were made particularly evident during one focus group when a participant said that she felt she lacked the language to speak to people 'like me'. In doing so, although intending to give a general example of how a lack of education served as a barrier to social mobility, she highlighted an unintentional but very real power imbalance that I needed to be sensitive to.

Reflexivity was an important tool for navigating my assumptions around my research questions and practices, including ways in which my own agenda impacted the research. Early on, I developed a relationship with WCA staff who helped me to approach the research in a way that would take a strengths-based perspective. Originally, my research aims were to gain a picture of wellbeing as defined by individuals experiencing some degree of poverty and/or marginalisation. WCA staff prompted me to reconsider the terms I used to represent the demographic I was interested in talking to. They noted that individuals in their community did not access WCA services because they thought themselves poor or marginalised. Rather, they came because they wanted to develop new skills and create opportunities for positive change.



Acting with strict adherence to the foundations of ethical participatory practice and following WCA's guidance, some points of connection emerged throughout the research process that helped position me closer, in some respects, to participants. I attempted to be 'power-aware' in the research space and relinquished authority as best I could to minimise imbalances. I shared some of my own challenging experiences which helped participants share their experiences more easily, particularly if they involved some form of hardship. I understood that these discussions were unlikely to reflect what people held to be ultimate truths about themselves or their wellbeing. Participants entered the research space with their own set of values and orientations that influenced what they were prepared to talk about in front of others and myself. I also acknowledged that my findings would likely be impacted by my own interpretations of development and my representations of participants.

## Thesis structure

This thesis is presented in seven chapters. Chapter Two reviews wellbeing's interdisciplinary roots and places these in the context of development. I discuss dominant frameworks of wellbeing measurement and the issues that arise from them in regards to overlooking key conceptions of wellbeing for communities. I then situate these discussions within New Zealand's current policy context, including Māori conceptualisations of wellbeing.

Chapter Three presents the theoretical perspective in which I ground the research, and the methodologies from which I drew to frame my analysis. I also explain my choice of mixed methods and the tools I used to conduct the research. This chapter also situates the research in the context of Cannons Creek and defines my partnership with WCA. I conclude by discussing some ethical considerations I had to navigate during the research process.

Chapter Four presents the results of the qualitative work with participants and is split into two parts. Part one lays out the domains of wellbeing as described by participants and ranks them according to their perceived importance and frequency in focus groups. Part two describes the thematic results of my discussions with participants, giving context to the domains within the realities of participants' day-to-day lives. I conclude

the chapter with a small discussion that compares community-level conceptions of wellbeing with New Zealand's macro level framework. This highlights the rich context that has been lost at the macro level and cements the point that the interpretations of *why* a domain is important and *how* it is experienced should be consistent with what is measured.

Chapter Five presents the quantitative results from the linkage diagram activity and the free-list surveys. In a series of chord diagrams, I explore the interrelationships between wellbeing domains, highlighting wellbeing pathways that are strongly and weakly linked. I then re-categorise participants' wellbeing domains under New Zealand's macro level wellbeing framework and analyse how the interrelationships changed once they were consolidated differently. Finally, I present the findings of the free-list surveys in the form of a nonmetric MDS solution and analyse the spatial relationship between domains.

Chapter Six discusses the findings of both the qualitative and quantitative results by situating them in development theories of basic needs, wellbeing hierarchies, complexity thinking, individual versus collective conceptions of wellbeing, and dichotomous thinking in wellbeing measurement. In particular, I focus on how holistic conceptions of wellbeing urge reconsideration of what is considered important to measure. I propose that the relative importance of a domain may not necessarily correlate with its influence within a larger system of interactions, and that policymakers may benefit from considering relative *influence* in addition to relative *importance*.

Chapter Seven concludes the research with a discussion that revisits my research questions and distils my key findings from the previous chapters. I outline the policy implications of my findings and the limitations of the research before closing with some final reflections.

## Chapter 2: Literature Review

This chapter provides a brief overview of multidisciplinary literature relating to conceptions of wellbeing within the context of international development. It is divided into five main sections. The first section sets the context for wellbeing as a measure of progress. The second section provides a brief overview of influential theories of wellbeing and outlines some practical approaches used in policy. The third section analyses the advantage of a wellbeing approach in international development. The fourth section discusses wellbeing measurement frameworks and their limitations. The fifth and final section reviews wellbeing in the New Zealand context.

### Measuring Progress: Beyond GDP

Notions of ‘progress’ have been a contested concept in history, taking many forms and gaining favour depending on the prevailing political climate of the time (Hall, Giovannini, Morrone, & Ranuzzi, 2010). International development has had an intimate but problematic history with ideas of ‘progress’. The purpose of development has always concerned itself with the advancement of nations, yet the approaches through which this is expected to happen have always been based on a general agreement about the sort of life it is considered good to lead (Gough et al. 2014). Unfortunately, these approaches have not always led to the best outcomes. For decades, the concept of national progress has been largely synonymous with national-level economic growth. Notions of what constituted good living standards became bound up with the production and consumption of goods and services, and GDP was the gauge by which these living standards were measured (Austin, 2016; Costanza et al., 2014).

Although GDP was never designed as a measure of societal wellbeing (Pink, Taylor, & Wetzler, 2014), it became inextricably linked with notions of human welfare through the utilitarian assumption that more consumption led to higher wellbeing, and was therefore considered an accurate proxy (Costanza et al., 2016). However, as the limits of a purely economic (and nationally-aggregated) perspective of wellbeing became more apparent, the idea of this as the dominant goal was challenged. In 1968, U.S. President Robert F. Kennedy famously addressed the limits of GDP, stating that “it measures everything, in short, except that which makes life worthwhile” (Ussher &

Walker, 2015, p. 215). Early warnings such as this revealed GDP's inability to capture aspects of what it means to live a good life and exposed it to further scepticism from policy makers.

Today, the limitations of using GDP as an indicator of national wellbeing are well known (Costanza et al., 2014; Fleurbaey, 2009; Fleurbaey & Blanchet, 2013; Stiglitz et al., 2009). While GDP is a relevant marker for economic activity, it ignores many multidimensional elements that are constitutive of wellbeing, such as human happiness, the quality of social connections, safety and security, emotional health, and longevity (Bell & Morse, 2011; Fleurbaey, 2009). It also fails to factor in negative impacts that result from economic growth, such as income inequality, the destruction of the natural environment from human production and consumption, or the distribution of wealth between groups and families (Fleurbaey, 2009; Gough, McGregor, & Camfield, 2014; United Nations Development Programme, 1996).<sup>1</sup> Furthermore, too much emphasis on GDP can send misleading messages about how well-off people are, effectively leading governments astray in their policy choices and funding decisions (J. A. McGregor, 2018; Stiglitz et al., 2009).

The pressing need for better measures of societal wellbeing gave rise to the Beyond GDP movement, a surge of research and development over the last three decades that has offered new perspectives on alternative measures of wellbeing and sustainability (Fleurbaey & Blanchet, 2013). The movement has shown it is entirely possible for the majority of people to experience a decrease in some aspect of wellbeing while the GDP average climbs. In 2009, the Commission on the Measurement of Economic Performance and Social Progress, established by former French President Nicolas Sarkozy and chaired by Joseph E. Stiglitz, Amartya Sen, and Jean-Paul Fitoussi, drafted an influential report that supported these reflections. The commission highlighted GDP's alarming inadequacy as a measure of quality of life and argued that it should be

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<sup>1</sup> The United Nations Development Programme (1996) identified five undesirable growth patterns that are detrimental to wellbeing:

- (i) jobless growth (buying and selling on the market without creating jobs);
- (ii) ruthless growth (benefiting the rich and creating inequality);
- (iii) voiceless growth (growth unaccompanied by an extension of civil rights or democracy);
- (iv) rootless growth (culturally destructive); and
- (v) futureless growth (unsustainable for future generations).

complemented by a multidimensional view of wellbeing that reflected both subjective and objective aspects of life. This was significant given the degree to which much of policy was focused on economic growth, and it became clear that growth alone could no longer be the only policy priority to gauge the progress of a nation. Thus, the notion of progress shifted from a one-dimensional economic proxy towards the development of a broader range of indicators that represented other valued aspects of people's lives.

## Theories and Conceptions of Wellbeing

With new ideas of wellbeing taking root in international policy discourse, the question remains as to what is meant by wellbeing and the value the concept brings to development policy and practice. Despite the burgeoning number of studies in this field, a concise definition remains elusive. The study of wellbeing has branches in various academic disciplines, all of which hold different interpretations and methodological approaches. Gasper (2009) provides an overview of six major streams of research into wellbeing: subjective wellbeing, health-related quality of life, utility, needs and capabilities, poverty studies, community studies, and societal quality of life constructs. He notes that an assessment of wellbeing is contingent upon the scope, values, and ontologies that each discipline brings, and therefore refutes a single approach to wellbeing or even a determinate measurable endpoint; each stream has different occasions of relevance as it pertains to policy (Gasper, 2009).

The following sections will provide a brief overview of influential theories of wellbeing and their related disciplines. First, one must differentiate between two conceptual approaches: objective and subjective wellbeing. Objective wellbeing constitutes the material living conditions or resources needed to enhance quality of life. Subjective wellbeing (SWB) relates to people's perceptions and evaluations of their living conditions. The philosophical frameworks of each stream and their dominant applications in policy will be discussed below.

## Objective Wellbeing

Objective concepts hold that some features in life are considered ideal and worth pursuing, regardless of whether an individual views them as important (Hurka, 2016). In

this view, indicators such as material resources (e.g. income, food, housing) and social attributes (e.g. education, health, political voice, social networks, and connections) make up essential components of a good life (Allin & Hand, 2014). Objective wellbeing is closely linked with classical economic theory, in particular the utilitarian ideologies of social reformer Jeremy Bentham (1748–1832). According to Bentham, utility (or happiness) meant the presence of pleasure and absence of pain. Utilitarianism assumes that people are rational, self-interested beings who, being free to satisfy their own preferences, seek to maximise their own happiness (O'Donnell, Deaton, Durand, Halpern, & Layard, 2014; Scott, 2012). Utility is maximised through one's preferred avenues of consumption, which in turn depends on income. Thus, utility is argued to be best measured through economic agents (O'Donnell et al., 2014). The idea of individual preference forms the basis of contemporary welfare economics and has done much to influence understandings of wellbeing over the past century (O'Donnell et al., 2014).

As new ideas in philosophy emerged during the 1970s and 80s, utilitarian views of human welfare came under strong criticism from those who were concerned with social justice (Scott, 2012). A significant contribution came from political philosopher John Rawls, whose influential work, *A Theory of Justice* (1971), opposed maximising aggregate happiness in society. He insisted that a concern for social justice (and the fair distribution of benefits) was ultimately more beneficial than a reliance on preference satisfaction. As preference satisfaction does not distinguish between the wide range of psychological, cultural, and social complexities that underlie people's decisions, this was considered a step towards a more holistic view of human happiness (Nussbaum, 2000; Sen, 1992).

### ***Objective Approaches: The Capability Approach***

The capability approach, developed by Nobel prize-winning welfare economist Amartya Sen, built on the criticisms of traditional utilitarian approaches to welfare economics (Bache & Scott, 2018). In contrast to a resource-focused approach concerned with the resources people have, Sen argued that wellbeing should be evaluated in regard to what people can actually do and become with their resources. He positioned this argument in his core concepts of 'functionings' and 'capabilities'. Functionings were "the various things a person may value doing or being" (Sen, 1999, p. 75). This may include, for example, taking part in political decisions, being healthy, being educated, and so on.

Capabilities referred to the freedom and opportunities to achieve these functionings (Sen, 1992, 1999). In this view, quality of life is closely linked with the freedom to fulfil one's potential, or to achieve 'human flourishing' (see the following section for more discussion on this term). Sen argued that the role of development policy should be to expand these freedoms (Sen, 1999).

It is worth noting that Sen's capability approach is highly contextual; he has deliberately refrained from providing a list of capabilities necessary for policy evaluation (Alkire, 2008). While some have tried to develop universal sets (see Nussbaum, 2000), Sen views capabilities and functionings as intrinsically related to the characteristics of people acting within the circumstances of their environment. Their ability to convert resources into wellbeing is dependent on these contextual features. He illustrates his point with the example of a bicycle. A standard bicycle carries the characteristic of 'transportation'. However, this is entirely dependent on the characteristics of those who try to use it. Someone who is not able-bodied enough to ride, or whose social or structural conditions prevent them from riding, will be unable to achieve the desired functioning of transportation. Likewise, Sen was concerned that the utilitarian focus on happiness was problematic due to what he called 'adaptive preferences', where satisfaction with life becomes distorted according to previous experiences. Consequently, he argued, a poor person may be accustomed to poor conditions and will lower their expectations to be satisfied with less.

While many have noted the difficulties in operationalising the capability approach due to its focus on 'potential' rather than measurable outcomes (Alkire, 2005; Nussbaum, 2000), it has been regarded as one of the better frameworks for thinking about human wellbeing due to its broader informational base (D. A. Clark, 2005; Robeyns, 2005).

### ***Objective Approaches: Basic Needs***

The basic needs approach was initiated in the mid-1970s as a reaction to the negative consequences of pro-growth policies in development which did little to address poverty or human suffering. It advocated that leading a full life was dependant on ensuring that there were "sufficiently, appropriately distributed basic need goods and services to sustain all human lives at a minimally decent level" (Stewart, 2006, p. 14). Operational programmes run by the World Bank and International Labour Organization

implemented the basic needs approach with particular focus on commodity inputs that were easy to measure such as health, education, clothing, shelter, sanitation, and hygiene (Alkire, 2005).

Overemphasis on commodities led critics to misinterpret this approach, citing the materialistic and paternalistic tendency to dictate the consumption patterns of the poor (Alkire, 2005). Frances Stewart, who helped to develop the work of the basic needs approach, insisted that non-material (e.g. participation, cultural flourishing, political rights), as well as material needs, always be included. However, in practical interpretations, the focus was narrowed to material goods and services (Stewart, 2006). The basic needs approach lost support in the 1980s due to shifting donor concerns,<sup>2</sup> and when the world recovered sufficiently from the debt crisis and focus returned to poverty reduction, the capability approach seemed much more attractive (Stewart, 2006). Stewart noted the overlap between the basic needs approach and Sen's capability approach, highlighting that "the objective of enhancing what people can be or do (a person's capabilities) is virtually identical with the full-life objective of the basic needs approach and the criteria used to assess successes and failures are the same in both approaches. However, the capability approach has a much more elegant philosophical foundation" (Stewart, 2006, p. 18).

## Subjective Wellbeing

The last four decades have seen mental state approaches to wellbeing put to greater use in policy via a large body of work in psychology and economics (Anand, 2016). Much of this stemmed from contributions from influential academics such as Edward Diener, Norbert Schwarz, and Nobel prize-winner Daniel Kahneman, who proposed a new science of wellbeing, focused on explaining positive states of mind and taking people's expressed subjective assessments of their own quality of life seriously. The study of self-reported or subjective wellbeing (SWB) questioned whether the objective methodology of rational economic choice and market preferences sufficiently reflected human behaviour and needs (see Kahneman, Wakker, & Sarin, 1997; Sen, 2002). While each

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<sup>2</sup> Donors became interested in stabilisation and adjustment-focused policies during this time (Scott, 2012).



choice made in a market may reflect some form of preference, critics maintained that revealed preference relied too strongly on people's ability to make accurate judgements about what makes them better off. Bykvist (2016) claimed that people can employ faulty reasoning in satisfying their preferences when it is actually detrimental to them in the long run. While SWB is often conflated with the study of 'happiness', this is not technically correct. For Diener, Oishi, and Lucas (2009, p. 1) "subjective well-being is a broad concept that includes experiencing high levels of pleasant emotions and moods, low levels of negative emotions and moods, and high life satisfaction". SWB is broadly divided into two main philosophical branches that cover different aspects of a person's subjective state: hedonism (pleasure) and eudaimonia (a sense of purpose or accomplishment). The following sections provide a brief overview of these two concepts.

### ***Hedonism***

The hedonic perspective asserts that the measure of a good life is directly related to the pleasantness of one's experience. It is clustered into two broad categories: affect-based approaches (focusing on happiness or pleasure), or judgement-based approaches (focusing on a cognitive evaluation of life satisfaction) (OECD, 2013). Utilitarians were the intellectual forerunners of hedonism, focusing on a balance of 'pleasure over pain' in people's emotional, mental, and physical experiences. Hedonists would argue that one is better-off living a pleasant life, even if low in accomplishment.

Ryan et al. (2013) note that hedonic wellbeing lends well to scientific measurement and has thus constituted most research in the growing 'science of wellbeing'. Perhaps a significant contribution hedonism has made to policy is its use as a moral theory to benefit those who are worse off (Haybron, 2016). Some argue that suffering has greater intrinsic disvalue than pleasure has value (Haybron, 2016). Put simply, they believe it makes a bigger difference to one's wellbeing to avoid suffering than it does to secure pleasure. Therefore, given the choice between ending the suffering of one person or bestowing a benefit of similar magnitude to a happy person, priority should be given to the suffering person. This suggests that policy should focus on improving the wellbeing of those who are experiencing greater relative hardship.

## ***Eudaimonia***

Subjective wellbeing is not only seen as a matter of pleasure. A sense of accomplishment from activities that do not, at the time, seem particularly pleasurable can be equally as important. Eudaimonic notions of wellbeing centre broadly on the nature of fulfilment, particularly the notion of realising one's full human potential (Anand, 2016). Work in this field has been influenced by Aristotelian ideas of human flourishing and was picked up in subsequent decades by Sen in his capability approach (T. S. J. Smith & Reid, 2017). Ryan, Huta, and Deci (2013, p. 119) hold that being too focused on maximising hedonic pleasure can lead to "dead-end routes to wellness such as selfishness, materialism, objectified sexuality, and ecological destructiveness". They suggest that eudaimonic and hedonic perspectives should be balanced to produce a "more stable and enduring" sense of wellbeing (Ryan et al., 2013, p. 119). One of the most widely cited measures along these lines derives from Carol Ryff's (1989) model of psychological wellbeing. She asserted that wellbeing is attained through a balance of challenging and rewarding life events, identifying six key elements essential to wellbeing: self-acceptance, personal growth, purpose in life, environmental mastery, autonomy, and positive relations (as cited in Anand, 2016).

## ***Operationalisations of Subjective Wellbeing***

Bringing concepts of SWB into practice for use in policy began after World War II when survey researchers began polling people about their happiness and life satisfaction. George Gallup, Gerald Gurin, and Hadley Cantril pioneered the use of large-scale surveys as an assessment technique, asking people such questions as, 'How happy are you?' with responses ranging from 'very happy' to 'not very happy' (Diener et al., 2009). Today, a number of happiness, affect, and life satisfaction measures are available using Likert scale surveys. Responses can be split into 'domains' such as work, leisure, relationships, and so on, which can then be used to evaluate the correlation of reported life satisfaction in different aspects of life (Scott, 2012).

A major concern regarding SWB measurements is whether self-reports are valid. People might report that they are happy, but they will be biased according to their pleasure or achievement seeking orientation or are likely to be influenced by their current mood (Diener et al., 2009). Although self-reports are vulnerable to these biases, they are still

valuable because they offer insight into how people construct judgements about what matters in their lives. From a policy perspective, taking SWB seriously is helpful for being responsive to people's concerns and promoting their interests. Indeed, self-reports about quality of life are gaining validity among policy makers, requiring them to engage with non-market-based contributors to overall wellbeing, and with preferences for which no objective measure currently exists (Anand, 2016; Dalziel & Saunders, 2014).

Having briefly outlined some of the philosophical foundations of wellbeing research, the next section will situate these concepts within the context of international development.

## Wellbeing in International Development

As discussed above, economic measures of progress were the gold standard in development until dissatisfaction with such development grew in the 1960s and 70s in light of decades of projects failing to address poverty concerns or human suffering (Fukuda-Parr, 2003). It became clear that the modernisation paradigm of unlimited growth did nothing to correct, and in many cases added to, environmental degradation, social imbalances, and economic disparity (Christens & Speer, 2006). During this time, the social indicators movement grew as the UN Declaration on Social Progress and Development attempted to achieve international consensus on the meaning of 'progress' (Scott, 2012). The emergence of postcolonial studies, coupled with a renewed interest in local knowledge, brought new critical perspectives to the forefront. Development's claims to modernity and progress were questioned as critics pointed towards a Westernisation project with little regard for diversity or complexity (Christens & Speer, 2006; Peet & Hartwick, 2009). Peet and Hartwick (2009, p. 219) noted that "what had previously been assumed to be progressive, beneficial, and humane, was now seen as powerful, controlling, and often, if not always, detrimental". The presumption that development was inherently beneficial fell under scrutiny as development structures presupposed *what* was beneficial, to *whom*, and in *which contexts* (Peet & Hartwick, 2009).

Calls for more inclusive models of development that improved the conditions of the poor led to new perspectives that emphasised more diverse and endogenous interpretations of development. This critical evaluation of the field took shape as 'alternative

development' (Peet & Hartwick, 2009), a paradigm which included approaches such as participatory development, gender and development, sustainable development, and human development. This paradigm laid the foundations for the broader notions of development now synonymous with a wellbeing approach. The following is an overview of three of these approaches as they relate to this thesis.

### ***Participatory Development***

Participatory development views the recipients of development as being at the forefront of, and actively involved in, decisions that affect their lives. Early promoters of this field were Freire (1970), and Fals-Borda and Rahman (1991), who were involved in what Hickey and Mohan (2004) called 'emancipatory participation'. They advocated for methods that incorporated the perspectives of local residents in the research and planning phases of development, principally through participatory action research (PAR) and emphasised the political nature of participation as a struggle against political, social, and economic exclusion. This work was refined into its modern form most notably by Robert Chambers (1983, 1997b). Chambers emphasised levelling power imbalances between development practitioners and recipients (or 'uppers' and 'lowers' as he describes), resulting in more equitable and effective development with the potential to deliver real benefits to poor and marginalised people.

By the early 1990s, participation had gained acceptance in mainstream development as the logical and ethical implications of a bottom-up approach persuaded multilateral development agencies to incorporate local knowledge into policy (Gough et al., 2007). The United Nations (2008, p. 111) took a rights-based approach, citing that the "right to development is seen not simply as a right to enjoy its fruits, but also as a right to participate in the process of realising them". Critics, however, have suggested that far from being a vehicle for empowerment, participation has been subverted into a technical method that serves the interests of elites and extends their domination of authority, resulting in a form of development that is little different than earlier externally imposed forms (Kapoor, 2005; Kothari, 2001). They concluded that tokenistic participatory approaches were a form of power itself, and therefore should be resisted.

The importance of participatory theory and practice to wellbeing is its attention to, and critical engagement with, power, politics, and context. Prioritising wellbeing at the local

level, as a participatory approach would do, legitimises discourse that would otherwise be overlooked in top-down frameworks, refocusing our attention on *whose* wellbeing is being promoted and in what ways.

The World Bank's Poverty Reduction Group famously used participatory approaches to determine the selection of quality-of-life domains in their Voices of the Poor project (Narayan, Chambers, Shah, & Petesch, 2000). Collecting over 60,000 voices from 60 countries, three volumes discussed wellbeing and ill-being from the perspective of 'poor' communities.<sup>3</sup> The key themes that emerged from the findings were the central importance of people's agency and capabilities, and the fact that wellbeing was viewed multidimensionally, not just in terms of income. Camfield (2006) highlights the significant contribution of participatory research to understanding multidimensional wellbeing within particular socio-cultural contexts, citing that it offers more discursive space to attribute greater 'meaning' to people's wellbeing preferences. Indeed, Scott (2012) notes that local conceptualisations of wellbeing, forged through an active process of debate and discussion, encourage more locally appropriate policies and increase capacity to address the complexities involved in assessing wellbeing at the community level. Research by Dorn et al. (2007) suggests that participation of this kind is linked with an increase in SWB because it is likely to produce political outcomes that are closer to people's preferences.

### ***The Human Development Approach***

People-centred shifts in development initiatives created space from which the human development approach arose to provide alternative tools to incorporate wellbeing into development. Spearheaded by development economist Mahbub ul Haq, whose earlier work guided the basic needs approach, the main point of difference was the human development approach's emphasis on people's freedom to live with dignity, and their right to pursue the kind of life they value. In this approach, development priorities shifted from the provision of human resources to expanding people's agency to make decisions about their life. Similarly, it advocated removing the obstacles that restrict

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<sup>3</sup> Voices of the poor: Can Anyone Hear Us? (Narayan-Parker, Patel, Schafft, Rademacher, & Koch-Schulte, 2000)

Voices of the poor: Crying Out for Change (Narayan et al., 2000)

Voices of the poor: From Many Lands (Narayan-Parker & Petesch, 2002)

people's freedoms such as illiteracy, ill health, lack of access to resources, or lack of civil and political freedoms (Fukuda-Parr, 2003).

Sen's work on capabilities and functionings provided the conceptual foundation for this approach. The Human Development Reports, published annually since 1990, represent an effort to adapt some core ideas of the capability approach to key issues such as participation, gender, globalisation, and human rights (Alkire, 2005). The reports also gave rise to one particularly prominent operational tool; the Human Development Index (HDI) (Alkire, 2005). The HDI is a composite index that uses life expectancy, educational attainment, and other social indicators to rank countries based on their performance in these domains. It had considerable impact on reforming development objectives to include human freedoms and achievements as explicit indicators of progress, in stark contrast to earlier paradigms that focused solely on economic performance. More recently, the United Nations Development Programme (UNDP) has complemented the HDI with an inequality-adjusted HDI, which takes into account inequality across three different dimensions (Pink, Taylor, & Wetzler, 2014).

Fukuda-Parr (2003) discusses the broader applications of the human development approach in development. She states that it offers a much more expansive lens through which to view the ends of development, refining what it means to live 'well' in the midst of power insensitive politics. A concern for social justice lends greater focus to a range of potential inequities that affect human rights and freedoms, particularly for those who are experiencing disadvantage. As a result, its multidimensional approach to quality of life offers alternative analyses of poverty issues that contrast with growth-orientated development perspectives.

### ***Agenda 2030: The Sustainable Development Goals***

Sustainable development came into prominence following the publication of the highly influential UN commissioned 'Brundtland' Report (World Commission on Environment and Development, 1987) and since the 1992 Earth summit, concern for sustainability and development has intensified. Sustainable development was conceptualised as development that contributes to the welfare and wellbeing of the current generation, without compromising the potential of future generations for a better quality of life (Allin & Hand, 2014). The slogan of sustainability was taken up by multilateral

organisations and received widespread political support. It reaffirmed the need for broader measures of progress to complement GDP and brought new focus on environmental protection. Today, sustainable development is captured in the United Nations' SDGs.

The United Nations introduced its dashboard of Sustainable Development Goals in 2015. The SDGs are a set of 17 goals and targets agreed to by all 193 UN member countries where a multidimensional conception of human wellbeing is clear in its vision:

In these Goals and targets, we are setting out a supremely ambitious and transformational vision. We envisage a world free of poverty, hunger, disease and want, where all life can thrive. We envisage a world free of fear and violence. A world with universal literacy. A world with equitable and universal access to quality education at all levels, to health care and social protection, where physical, mental and social well-being are assured. (United Nations, 2015, p. 5)

The SDGs, along with their predecessors the Millennium Development Goals (MDGs), have gained broad international agreement on what activities should be pursued in the name of progress. In contrast to the MDGs, the SDGs represent a marked shift towards improving conditions for the world's poorest and most marginalised communities with their call to leave no-one behind (United Nations, 2015).

Burns and Howard (2018) discussed the implications of the SDGs' multidimensional framework and argued for a more integrated understanding of how dimensions interrelate. They argued that while it is possible to effect positive change in one dimension of wellbeing, there may be no practical improvement in an individual's circumstances unless there are parallel changes in related dimensions. Calls for more integrated understanding of how wellbeing dimensions interconnect are reflected in the literature as there is further work needed to assess trade-offs and synergies over space, time, and context (see Burns & Howard, 2018; Burns & Worsley, 2015; D. A. Clark, 2005; Costanza et al., 2016).

Some have argued that there is a danger of a reductionist move with the SDG framework (Bell & Morse, 2011). 'Leaving no-one behind' focuses our attention on how outcomes are being prioritised for those experiencing hardship yet the means to achieving this are open to interpretation. Seemingly, the selection of targets and indicators for the SDGs

was influenced more by what could be easily measured, rather than what was of the most value to human development, producing, some have argued, “a reductive view of the values of human life” (Bell & Morse, 2011, p.234), which does nothing to account the for complexity of circumstances facing those experiencing hardship.

### ***Advantages of a Wellbeing Lens in Development***

The field of international development has benefited from a plurality of contributions to wellbeing scholarship from multiple disciplines, which have opened space to discuss the aims of development and how it should be measured. The relevance of thresholds traditionally used to divide the poor and non-poor, such as The World Bank’s global monetary poverty line,<sup>4</sup> come into question when considering that an individual’s quality of life depends on much more than their income. Thresholds like these offer a limited lens through which development may be operationalised.

Camfield (2006) describes the advantages of a wellbeing approach from an ethnographic perspective. She notes that it spurs much needed critical awareness on the positive dimensions of the human experience, enabling researchers to explore what “people have and are able to do, rather than focusing on their deficits, which should produce more credible and respectful representations of people’s lives to inform development policy and practice” (Camfield, 2006, p. 2). The desired outcome is development that creates the conditions for people to experience wellbeing, rather than undermining their existing strategies.

Some scholars have noted that a wellbeing approach adds value to the analysis of multidimensional vulnerability, attributing particular importance to subjective wellbeing (Anand, 2016; Sumner & Mallett, 2013). An individual may be materially secure but experience high levels of subjective insecurity. For example, a denial of the right to exercise agency or threats to personal safety can have direct impacts on an individual’s behaviour, which can, in turn, affect a person’s livelihood and perpetuate a negative spiral of vulnerability (Sumner & Mallett, 2013).

This lends weight to the idea that wellbeing is better conceptualised as a series of processes that are the result of complex relationships between material, relational, and

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<sup>4</sup> \$1.90USD per day as of October 2015 (The World Bank Group, 2019).



subjective domains (Gough et al., 2007; J. A. McGregor, 2007; White, 2010). This idea was put forth by the Wellbeing in Developing Countries (WeD) research group, convened by Bath University. They argued that a practical concept of wellbeing would include people's perceptions of their own experiences of life, along with their relationships with others and their material standard of living, which are interlinked and highly fluid (Gough et al., 2007; J. A. McGregor, 2007; White, 2009). As such, analysis shifts away from thresholds and poverty snapshots towards one that pays greater attention to continuums. The notion of a non-linear wellbeing dynamic allows for a renewed understanding of the underlying drivers and processes of wellbeing over time (Sumner & Mallett, 2013; White, 2010). In this sense, wellbeing can be thought of not only as an outcome, but as a state of being that arises from the dynamic interplay of outcomes and processes. This interplay must be understood as firmly located in society and shaped by social, economic, political, cultural, and psychological processes (J. A. McGregor, 2007).

## Dominant Framings of Wellbeing Measurement

Given wellbeing's newfound proliferation in development policy agendas, the question became centred around its operationalisation. A useful starting point was to reflect on how wellbeing measurement could incorporate a broader set of relevant dimensions. This generated the challenge of widening the informational basis from which to draw indicators. Different measurement frameworks have manifested at international, national, and subnational levels. The following section provides a brief overview of dominant measurement indices and the issues that arise with their use.

### ***Composite and Dashboard Indices***

There are two types of wellbeing measurement indices. The first is a composite index, which aggregates indicators from several dimensions into a single weighted average. A notable example is the UNDP's HDI, which ranks countries via a combination of income, life expectancy at birth, and educational achievement, as previously discussed. The HDI is available at the international and national level, and recently, the UNDP has also incorporated the Multidimensional Poverty Index (MPI) to create a deprivation profile at the individual level. Its most recent iteration, launched in

September 2018, is closely aligned with the SDGs in that it is useful for capturing the concept of ‘leaving no-one behind’ (Alkire & Jahan, 2018). This is due to its focus on overlapping deprivations, serving as an analytical tool to identify the most vulnerable people in society. It should be noted that the effectiveness of composite indices is debated (see Ferreira & Lugo, 2013 for an overview). Single value aggregate measures are “often criticised for the loss of information that goes with them, as well as for arbitrary assumptions in the weighting that has to be applied to the different dimensions and their sub-elements to arrive at a single index figure” (OECD, 2013).

Alternatively, a range of indicators can be presented in a ‘dashboard’, whereby each dimension is assessed separately. Dashboard approaches arguably give a clearer picture of complex poverty than single measures (Allin & Hand, 2014; Ravallion, 2011, 2016). By isolating each dimension, it is possible to prompt more targeted responses in various dimensions of wellbeing. However, this comes at the cost of increased complexity. Dashboard approaches have been adopted by the SDGs and the Organisation for Economic Cooperation and Development’s (OECD) Better Life Index (BLI). The BLI incorporates 11 domains of wellbeing. One issue with dashboard approaches is that they require agreement on the relative importance of each dimension (Chakravarty & Lugo, 2016), which can be difficult as people tend to rate wellbeing domains differently based on their own values.

### ***Challenges with Wellbeing Measurement***

As shown in the above section, operationalising the wellbeing agenda has proved difficult as myriad composite and dashboard frameworks attempt to measure progress across multiple domains. To produce a measure of national wellbeing, individual measures are aggregated into an overall figure for the population and combined again into other higher-level population aspects (Allin & Hand, 2014). This practice is attributed to prominent nineteenth century mathematician Adolphe Quetelet, whose work in social mathematics advanced his theory of the ‘average man’, which stressed the need to strip away individual particularities to reveal the underlying properties of the larger population (Allin & Hand, 2014). Global and national level measurement frameworks seek to do exactly this, averaging complex concepts across entire populations and condensing them into single values. McGregor (2018) notes that these frameworks are underpinned by perhaps the most universalising ontology of neo-

utilitarianism, where quantitative regression analysis is used to explore a range of wellbeing phenomena. These methods are attractive to policymakers because they digest complex concepts into readily comprehensible and comparable data sets. However, they are problematic for multidimensional measurement due to their insensitivity to inequality and their inability to tease out important sources and distributions of wellbeing across dimensions (Alkire et al., 2015; Allin & Hand, 2014; de Rosa, 2017; Ravallion, 2011). The resulting loss of information easily overlooks the overlapping inequalities that contribute to hardship. In turn, the reality of people's quality of life becomes distorted, sending misleading policy messages and perpetuating further exclusion. As put by Sen, "the passion for aggregation makes good sense in many contexts, but it can be futile or pointless in others.... When we hear of variety, we need not invariably reach for our aggregator" (1987, p. 33).

Another feature of contemporary approaches to wellbeing is that they share a common understanding of wellbeing as a quality inherent in the individual. Some have documented the emergence of wellbeing as predominantly individualised, obscuring alternative discourses that treat wellbeing as a collective concept (Sointu, 2005; White, 2016). The argument goes further to claim that this individualisation also constitutes wellbeing as a kind of commodity that can be acquired or at least achieved. The policy implications of this are significant, as it drives intervention in terms of what can be done to enhance individual-directed acquisition of the components of wellbeing. Gasper (2009) rejected the idea of wellbeing as a determinate entity which can be readily measured. He reasoned that contemporary notions of wellbeing have been reduced to a conveniently measurable notion that is useful to claim progress on any one aspect of it. McGregor (2018) echoes this sentiment, arguing that measurement frameworks are not measurements of wellbeing as much as they are reflections of dominant practices of academic inquiry and policy-making processes. He thus points out a critical disconnect between what is measured and what is reflective of wellbeing in a local context.

Indeed, it is difficult to break away from the "spectacles of measurement" on which modern functioning societies are built (Hand, 2016, p. 16). There is a particular preoccupation with quantitative characterisation of concepts to measure how well-off people are, set targets, and assess our achievements against them. Unfortunately, this

perspective has been privileged in policymaking to the point of obscuring alternative understandings, which reduces the possibility of considering alternative framings of wellbeing in policy debates (Austin, 2016; T. S. J. Smith & Reid, 2017).

## Alternative Framings of Wellbeing

By now it is clear that much has been missed in the dominant project of wellbeing measurement and the policies that stem from them. Measurement frameworks designed with one-size-fits-all data sets produce policy solutions that veil structural wellbeing inequalities and are not representative of the way wellbeing is experienced in the daily lives of people. After all, wellbeing is a normative judgement; it cannot be removed from people's values and opinions of what makes a good life. For wellbeing measurement to translate into relevant policy outcomes for local communities, it would be necessary for policymakers to pay greater attention to local interpretations of wellbeing underpinned by an analytical understanding of wellbeing processes (J. A. McGregor, 2018). Considering the range of wellbeing interpretations that differ across social and geographical contexts, this is a difficult task.

In response, a growing body of critical work in human geography and sociology has advanced notions of wellbeing that are grounded in complexity thinking in an effort to approach wellbeing as a system of interrelated processes (J. A. McGregor, 2018; T. S. J. Smith & Reid, 2017; Sointu, 2005; White, 2016). The value of a complexity approach is that it provides a non-reductionist scope for analysis that is more sensitive to ambiguities and explores interactions across domains (Burns & Worsley, 2015; J. A. McGregor, 2018). Complexity thinking recognises that systems have "characteristics that none of the agents do", so they "do things that you would not expect or predict given a knowledge of the separate agents that make them up" (Agar, 1999, p. 106).

This perspective is helpful in its applications to wellbeing as it assumes wellbeing cannot be reduced to the sum of its properties (or in this case, its domains). Rather, certain connections between domains may produce synergies that are greater than the sum of their parts. For example, Seth (2009, p.376) noted the need to discern the degree to which dimensions of wellbeing are synergistically associated, writing that "when all dimensions are strongly correlated, then higher achievement in one dimension strongly

enforces higher achievements in other dimensions”. Likewise, greater attention to wellbeing as an interrelated whole brings attention to trade-offs that occur within a larger system of dynamics. A positive outcome in one aspect of wellbeing may incur trade-offs in others (Burns & Worsley, 2015; Sumner & Mallett, 2013).

More broadly, increased sensitivity to the relational characteristics of wellbeing is argued to be helpful for guiding public policy recommendations (T.S.J. Smith & Reid, 2017; Suman, 2009). It enables identification of key processes within the system that can then be explored to identify potential points of intervention, as well as enhance understanding of the nature of the system as a whole. Strategic investments that leverage synergies between domains are argued to offer greater opportunities to improve conditions for those who are often left behind in development. It is also an opportunity to reconsider how policy advice fits within more holistic interpretations of wellbeing informed by broader social theory, where wellbeing is thought of as a product of constant, interrelated processes catalysed in and of place, space, and time (Gough et al., 2007; T. S. J. Smith & Reid, 2017; Sumner & Mallett, 2013).

As a wellbeing approach settles into New Zealand’s public policy, many see the transition as an opportunity to broach new conversations around how wellbeing could be framed and interpreted in precisely this way (Department of the Prime Minister and Cabinet, 2019; New Zealand Treasury & Te Puni Kokiri, 2019). After an extensive public engagement process with communities and non-governmental organisations (NGOs) on child and youth wellbeing, the New Zealand government’s (2019) national engagement summary report remarks:

We received a range of feedback through the face-to-face engagements and written submissions about how the framing of wellbeing could be improved. In particular, people highlighted the need to visually reflect how the different aspects of wellbeing are interwoven and influence each other. People suggested that having the domains interwoven, rather than siloed into blocks, would help to encourage government agencies and other services to think more laterally. We were told that agencies are currently too siloed and focused on their narrow role in promoting wellbeing. (p.41)

Recent work has explored the direct and indirect impacts of wellbeing investments in one domain on others (Karacaoglu, Krawczyk, & King, 2019), and the New Zealand

Treasury made its first attempt to measure current wellbeing across multiple domains and assess the extent to which these domains relate to each other (see McLeod, 2018). However, some domains could not be included due to difficulties in measurement or a lack of information in national survey data. This brings us to a deeper exploration of wellbeing in the context of New Zealand.

## The New Zealand Context

New Zealand has a long history of innovative wellbeing approaches to policy, beginning in the 1890s when it was one of the first countries to introduce an old-age pension scheme. Subsequent decades saw voting rights extended to women, labour legislation, and free secondary schooling (Dalley & Tennant, 2004). Later in 1938, the Social Security Act was passed, effectively creating the world's first comprehensive welfare state (Dalziel & Saunders, 2014). Belgrave (2004) traced a series of reforms in New Zealand's wellbeing policies based on increasingly complex understandings of the nature of need. He noted a changing emphasis in the 1890s from limited physical needs to psychological aspects of wellbeing; then to gender and ethnicity, and later to individual human rights in the 1960s and 70s, all of which shifted the nature and reach of the policies associated with them. From the 2000s, a newly introduced social investment approach, led by the (then) National government, sought to use evidence from national-level aggregate data sets to direct wellbeing investment priorities. This led to the introduction of the Ministry of Social Development's Social Report series, a comprehensive set of data sources on the social health and wellbeing of New Zealanders, which formalised a wellbeing approach thanks to the establishment of regular social monitoring.

Today, New Zealand's adoption of a 2019 Wellbeing Budget has reinvigorated wellbeing as a political focal point. For the first time, a Wellbeing Outlook (as opposed to an Economic and Fiscal Outlook) has influenced budget priorities. The Wellbeing Outlook describes generally high levels of wellbeing in relation to other OECD countries (New Zealand Treasury, 2018a), and found that New Zealanders perform well in health, the environment, and community connections. They also feel well governed and show increasing material standards of living. However, the Wellbeing Outlook also identified significant challenges in income inequality, child poverty, low water quality, and mental health and loneliness.

The Budget is part of a stream of initiatives that promote wellbeing in New Zealand's policy and practice. The Treasury leads the direction on wellbeing measurement with the launch of its Living Standards Framework (LSF). Drawing heavily on the OECD's Better Life Index, the LSF is a dashboard intended to measure intergenerational wellbeing. It includes both objective and subjective measures of wellbeing across 12 domains: civic engagement and governance, cultural identity, environment, health, housing, knowledge and skills, income and consumption, jobs, safety, social connections, subjective wellbeing, and time use (New Zealand Treasury, 2018b). These dimensions are supported by four capitals: natural, social, human, and financial and physical capital.

Other macro level initiatives include Statistics New Zealand's launch of their Indicators Aotearoa New Zealand (IANZ) project, a reservoir of measures to monitor progress on wellbeing (Statistics New Zealand, 2018c). The IANZ forms a main data source for the LSF and also supports international reporting requirements for the SDGs. New Zealand's commitment to the SDGs has involved a voluntary review, which was recently completed in July 2019 (Ministry of Foreign Affairs and Trade, 2019). It should be noted that the SDG framework was rejected as a possible model for wellbeing in New Zealand. In a report by King, Huseynli, and MacGibbon (2018, p. i), the SDGs are argued to be a set of political goals "rather than measures of wellbeing and as such do not make a good measurement framework". The report also notes that the binary nature of the goals ('achieved' versus 'not achieved') are disadvantageous for monitoring wellbeing over time. Despite this, some similarities are present between the SDGs and New Zealand's LSF; both frameworks are commended for providing good coverage of many aspects of wellbeing and they both take the Treasury's preferred dashboard approach to measuring multidimensional wellbeing (King et al., 2018).

While there is burgeoning activity in wellbeing measurement in New Zealand, efforts have been primarily top-down and informed by 'big data'. The LSF was heavily based on the OECD's BLI, receiving minor modifications to adapt it to the New Zealand context. Its design was not accompanied by public input. In addition, the IANZ sources much of its data for wellbeing measurement from the New Zealand General Social Survey (GSS), an aggregated data set providing information about social and economic outcomes for New Zealanders over 15 years of age (Statistics New Zealand, 2018b). It should be noted

that the IANZ project did undergo public consultation to uncover different interpretations of wellbeing as described by New Zealanders. Their selection of wellbeing indicators was not driven by the availability of the data, but rather by ‘what mattered’ to New Zealanders, and therefore their suite of indicators contains data gaps (Statistics New Zealand, 2019). As Statistics New Zealand works to fill these gaps in measurement, it is hoped that future iterations of the LSF could then use this new data to incorporate other relevant wellbeing domains, such as Te Ao Māori perspectives, children’s wellbeing, and cultural identity, in subsequent versions (New Zealand Treasury, 2018b; Weijers & Morrison, 2018). As it is currently, the LSF is unable to represent many aspects of wellbeing that matter to New Zealanders. While the Treasury has made efforts to assess the inter-relational characteristics of wellbeing (see McLeod, 2018), the only data sets used in the analysis were aggregated data from the GSS. A fair representation of multidimensional wellbeing would necessarily include disaggregated data sets from the outset, so further work is needed in this space.

In an effort to connect the wellbeing agenda at a community level, legislation was passed in May 2019 that reinstates wellbeing into the Local Government Act, restoring power to local government “to promote the social, economic, environmental, and cultural wellbeing of communities” (New Zealand Government, 2019). The Act has a key role to play in linking the macro level LSF with the wellbeing of local communities (Weijers & Morrison, 2018).

Greater attention must be paid to disaggregation and community level perspectives in policy work; however, the quest to address persistent wellbeing inequalities may not be solely within the Government’s capacity. Eppel, Karacaoglu, and Provoost (2018) consider the effect that wider stakeholders may have on the generation of information required to inform inclusive policies that come closer to operationalising the concept of leaving no-one behind. They call for a complexity-informed approach that addresses the “non-linear interconnectedness of people and institutions and their reflexive interactions with each other” (Eppel et al., 2018, p. 6). In a similar vein, a foundation of community knowledge and resources would underpin any comprehensive wellbeing framework. Eppel et al. (2018) also note that solutions to complex policy problems often bypass understandings of the complex social systems they must work in. In New



Zealand's cultural, historical, and social context this involves exploring Te Ao Māori perspectives of wellbeing in the design of wellbeing initiatives.

### ***Measuring Māori Wellbeing***

Māori wellbeing, or *te ora*, carries its own set of culturally-specific dimensions that require consideration. Durie (2006, p. 15) asserts that "the measurement of Māori wellbeing requires an approach that is able to reflect Māori worldviews, especially the close relationship between people and the environment". A number of Māori wellbeing models have been developed (for a review see Durie, 1998), although Durie's conceptual model of *Te Whare Tapa Whā* (The Four Walls of the House) features prominently in the literature. This model identifies four key dimensions: *te taha wairua* (spirituality), *te taha hinengaro* (mental and emotional health), *te taha tinana* (physical health) and *te taha whānau* (the extended family). These dimensions reflect the interdependent nature of wellbeing, symbolically reflecting the four walls of a house that work collectively to keep the structure standing (Durie, 2006). When in balance, health and wellbeing is achieved in a holistic sense. This emphasis on balance and interdependency between domains is strikingly absent from other wellbeing frameworks.

Māori models of wellbeing are closely associated with the idea of health. Therefore, concepts of wellbeing and health are largely used interchangeably (Mark & Lyons, 2010). The Māori philosophy towards health is based on a holistic worldview that emphasises an intimate connection with the environment and the centrality of spiritual dimensions of wellbeing. Two additional significant aspects of wellbeing, namely *whānau/whakapapa* (family) and *whenua* (land) are also present in the literature (Durie, 2003; Mark & Lyons, 2010). It cannot be assumed that any one Māori wellbeing framework readily encompasses all Māori individuals. Māori live in diverse realities (Durie, 1998) and, therefore, no single definition of wellbeing can capture what it means to live a good life. Rather, these models intend to capture broad recommendations on Māori wellbeing dimensions.

Historically, Māori have fared poorly in wellbeing outcomes in relation to the rest of New Zealand's population (Cram, 2014; New Zealand Treasury & Te Puni Kokiri, 2019).<sup>5</sup>

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<sup>5</sup> It should be noted that there is cynicism among Māori communities about the relevancy of Western frameworks to evaluate Māori wellbeing outcomes. Faring poorly in an aspect of wellbeing according to

Declining Māori wellbeing outcomes have been a longstanding concern of governments, which have led to some Māori-specific national wellbeing measurement initiatives. In 2013, Statistics New Zealand implemented Te Kūpenga, the Māori Social Survey, in response to the need for Māori-specific information that supported policy development for improved Māori outcomes. The survey collects information on the social, cultural, and economic wellbeing of Māori. It also provides both national and regional profiles on matters of importance, such as the state of the Māori language and other aspects of Māori cultural wellbeing, as well as the subjective wellbeing gained from these experiences (Statistics New Zealand, 2018a). With the introduction of the LSF, calls for an indigenous lens to the Living Standards Framework have been proposed (New Zealand Treasury & Te Puni Kokiri, 2019) to bring more focus to Māori wellbeing outcomes at the macro level.

## Summary

This chapter has reviewed the history of wellbeing conceptions in various disciplines and examined their applications within development studies. The literature reveals that the operationalisation of the wellbeing agenda in development has been guided by neo-utilitarian perspectives that prioritise measurement-driven, commodified wellbeing for the purposes of progress measurement. While a broader set of measurements have become available to gauge wellbeing over time, preparing this data for measurement frameworks overlooks the complexity of wellbeing as it is experienced in people's lives. For people whose circumstances and voices continue to be ignored in policy, this oversight is significant as it leaves the root causes of wellbeing inequalities unchallenged. Recently, there has been a call for alternative framings of wellbeing that are guided by complexity and social theory, where diverse meanings and interpretations can be explored within particular contexts.

New Zealand's foray into multidimensional wellbeing measurement is an opportunity to generate new conversations about how to improve wellbeing outcomes for those experiencing some degree of hardship. Alternative framings of wellbeing in New Zealand

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a Western value-set may have little consequence within Māori society. See Cram (2014) for further commentary.

have been limited to indigenous frameworks (New Zealand Treasury & Te Puni Kokiri, 2019; Thomsen, Tavita, & Levi-Teu, 2018), and there has been even less attention to holistic, interrelated wellbeing. This thesis intends to address this gap by exploring community-level perspectives of wellbeing and examining wellbeing dynamics within a holistic system of interrelationships to understand how this might contribute to improved wellbeing outcomes for those experiencing hardship within New Zealand's current policy context.

## Chapter 3: Methodology

I open this chapter by recounting one of my fundamental beliefs about development: policies aimed to improve people's quality of life need to include their experiences, aspirations, and priorities. I found this central theme reflected in three bodies of theoretical thought, all of which influenced the trajectory of this study in their own ways. This chapter begins with an outline of critical theory as the broader philosophical frame of this research and subsequently draws on participatory action research and the capability approach as guiding methodologies. It later describes the methods used in data collection and analysis, and, finally, reflects on some ethical considerations that presented themselves in this research.

### Theoretical Perspectives

The guiding epistemology for this research is critical theory, which has its origins in the German Frankfurt School in the 1930s. It builds on the classical work of Karl Marx (1818–1883) and later includes the work of scholars such as Max Horkheimer, Theodor Adorno, Herbert Marcuse, and Jürgen Habermas (Thompson, 2017). Critical theory is a process of inquiry that seeks to expose unequal power relationships in an effort to reduce inequalities, traditionally focusing on class inequality, but now including many others (Johnson & Gray, 2010). Critical theory sits in contrast to other epistemologies in that its primary purpose is not simply to study the world, but to challenge dominant means of understanding it. It views reality as being composed of multiple layers, specifically that an individual's experience of an empirical reality at the 'surface' is constructed from deeper subjective experiences, cultural beliefs, and social relationships (Neuman, 2011). Therefore, the task of critical researchers is to move beyond surface illusions to uncover the structures and mechanisms that reproduce inequalities. Critical theory takes the normative position that uncovering these conditions is a catalyst for positive change, positioning it as an emancipatory force that leads to the transformation of social relations and empowerment of people so that they are able to build a better world for themselves (Neuman, 2011).

This theory provides an appropriate lens through which to examine wellbeing because it assumes wellbeing cannot exist independently of history, culture, and social

environments. It has allowed me to critically unpack macro level wellbeing frameworks to uncover structural concerns that may be inhibiting wellbeing outcomes for communities experiencing hardship. The philosophical frame of critical theory is complemented by the use of methodologies that challenge the assumptions of whose and which knowledge matters and align with its transformative agenda. In the following section the two methodologies chosen to shape this research, namely participatory action research and the capability approach, are discussed in more detail.

### ***Participatory Action Research***

Participatory research has become increasingly popular in development contexts over the past three decades, and its applications in unpacking local interpretations of wellbeing have been effective, as evidenced, most notably, by the previously mentioned World Bank funded Voices of the Poor study (Narayan et al., 2000). As a methodological orientation, PAR promotes inclusive, collaborative approaches to research that serve to uncover the voices of those who are often systematically excluded (Aldridge, 2015; Kindon et al., 2007). It does this by challenging social science traditions on the topic of where knowledge resides (Cammarota & Fine, 2008; Kindon et al., 2007). PAR acknowledges that those experiencing the greatest exclusion or oppression are the bearers of “wisdom and experience about the history, structure, consequences, and the fracture points in unjust social arrangements” (Cammarota & Fine, 2008, p. 215). This perspective presumes, from the outset, that participants are uniquely qualified to define for themselves which determinants of wellbeing are most valuable, and that they can offer comprehensive insights on the structures and systems that are detrimental to their ability to live a good life.

Participatory approaches are primarily differentiated from other methodologies in that they challenge issues of representation and power at various points of the research process, placing the stories and voices of participants at centre stage (Cornwall & Jewkes, 1995). Thus, at the heart of PAR lies a counter-hegemonic struggle to dismantle a reality that privileges the interests of elites where “those at the bottom of social hierarchies, the traditional objects of research, re-emerge as subjects and architects of critical inquiry” (Cammarota & Fine, 2008, p. 217). In this way, local knowledge and perceptions are not only foregrounded, they are legitimised as active contributors in the transformation of power imbalances.

A participatory methodology is helpful here in its appreciation of equal and collaborative relationships with participants, recognising them as critical partners in the production of knowledge and information. PAR values the processes of research as much as the outcome, so its 'success' rests on the extent to which participants' capacities and skills are developed through the research experience (Cornwall & Jewkes, 1995; Kindon et al., 2007). Applying this method enabled the creation of a space for the participants of this research to share and reflect upon their wellbeing in a process of collective discussion. Collective discussion is argued to be an empowering process in and of itself due to its facilitation of mutual learning (Camfield, Crivello, & Woodhead, 2009; Cornwall & Jewkes, 1995), although I cannot assume this was the case for participants in this study. High-level positive outcomes of PAR would ideally be an equalisation of power relationships in the form of policy change or perhaps pressure on external agents to cede power to more collaborative arrangements at the community level. This study aims to contribute to debates that may spur such shifts in power from those who traditionally define wellbeing priorities.

It is important to note that researchers employing PAR must be vigilant in adhering to the fundamental principles of participation if its emancipatory promise is to be fulfilled, which means paying special consideration to power. There are often cases where the theoretical ideal of participation does not function as the benevolent tool for power redistribution its rhetoric suggests (Cooke & Kothari, 2001; Kapoor, 2005). Critics of PAR centre on issues of power that exist beneath a veneer of participation. Some argue that, at its most extractive, PAR operates as a set of tools and techniques that fulfil a bureaucratic requirement for local consultation to legitimise top-down projects, or as an instrument to improve outsiders' understanding of local context while disavowing any accountability to those same communities (Cooke & Kothari, 2001, Kapoor, 2005). These processes are argued to exist only as a manipulative tool and do not constitute a lateral process of knowledge production. This manipulation of local knowledge enables 'experts' to control the production of knowledge to suit the aims of pre-formed agendas, even whilst believing themselves to be benign mediators of a neutral process (Cooke & Kothari, 2001; Henkel & Stirrat, 2001; Kapoor, 2005). Thus, participatory approaches have been described as negatively imposing, rather than overcoming, power relations

by effectively maintaining institutional hegemony under the guise of benevolent participatory practice.

Power imbalances between myself and the participants were always present; however, I attempted to lessen the imbalance wherever possible by being humble, respectful, and trying my best to share control of the research wherever possible. The *koha* (donation) I offered to participants at the end of the session was equal to the amount I would have earned in the same amount of time from my job, as I valued participants' time as equal to mine. I paid special attention to the location in which the research took place by ensuring it was local, accessible, and familiar to participants and took advice from staff at Wesley Community Action, a community organisation that partnered with me in this research, on how to work from a strengths-based approach when framing the research (as discussed later in this chapter).

### ***Capability Approach***

Sen's capability approach, introduced in Chapter Two, asserts that development and wellbeing should be understood in terms of what individuals are able to be and do. That is, wellbeing is about the freedom to live the life that individuals have reason to value (Sen, 1999). There is a growing consensus that the capability approach offers a more complete and comprehensive conceptual approach to wellbeing analysis (Alkire, 2005; D. A. Clark, 2005; Frediani, 2010). Its strength lies in its re-characterisation of poverty as capability deprivation (a person's inability to accomplish what they value) as opposed to resource deprivation. By moving from a commodity-led definition of development to a multidimensional one, it is possible to explore the full variety of activities and situations people recognise to be important.

This openness not only allows for a much broader evaluative base to examine wellbeing, it also serves as a tool through which the overlapping and cumulative effects of multidimensional wellbeing can be appreciated and discussed. This lens emphasises the complementarities between various aspects of wellbeing for the same person and acknowledges that leveraging these interconnections is important in the study of improving quality of life (Alkire, 2016). This lends to the idea that wellbeing is both contextual and constructed based on local dynamics and the social realities experienced by each person (Frediani, 2007).

Further to this, the capability approach shifts the measure of wellbeing towards the assessment of people's freedom and agency. Sen (1996, p. 59) writes that a focus on development without freedom is incomplete: "the 'good life' is partly a life of genuine choice, and not one in which the person is forced into a particular life – however rich it might be in other respects." A central tenet of the capability approach is the ability to make and realise choices, which is inextricably linked with power and agency. According to Sen (1999), the conversion of people's choices into reality is dependent upon, and influenced by, a range of factors. For example, he claims that an individual's ability to attend school is dependent upon their personal characteristics (physical condition, sex, intelligence); social characteristics (social norms, hierarchies, gender roles); and environmental characteristics (public policy, climate, institutions). These structural and personal factors vary from context to context and need to be considered in conjunction with power imbalances. Thus, the capability approach represents a position firmly anchored in the expansion of social justice and human rights, a stance that buoys this research in its pursuit of fairness in the representation of wellbeing for 'vulnerable' communities experiencing hardship.

As is by now evident, the capability approach has an expansive reach and a predisposition for plurality. However, this has prompted many critics to question the viability of its real-world applications. Robert Sugden (1993) writes:

Given the rich array of functionings that Sen takes to be relevant, given the extent of disagreement among reasonable people about the nature of a good life, and given the unresolved problem of how to value sets, it is natural to ask how far Sen's framework is operational. (p. 1953)

Some academics have advocated for universal sets of capabilities to facilitate the framework's operationalisation (Nussbaum, 2000), yet Sen has deliberately avoided prescribing a set of dimensions, indicating instead that in different contexts different capabilities are likely to be important (Sen, 1999). Wherever the capability approach might be seen as lacking or incomplete by some, this thesis acknowledges, and builds on, its strengths. Its concern for the diverse aspects of life that people value lends credibility to alternative meanings, realities, and discourses that inform locally relevant pathways to development. For this reason, it is useful for framing the constitutive elements of wellbeing as described and experienced by the participants of this research.



### ***Intersecting Methodologies: Strengths and Limitations***

At the intersection of participatory research and the capability approach, a number of complementarities emerge. To begin with, the use of participatory methods is essential to the successful application of the capability approach. Sen (1999) notes the fundamental importance of public debate and deliberate participation in the process of choosing the dimensions of wellbeing. This sentiment is echoed by Alkire (2005, p. 218):

If the capability approach is applied in a way that is consistent with its own tenets, then its operationalisation depends upon the thoughtful participation of many users and much public debate. For that reason, the capability approach is very conducive to participatory undertakings.

Alkire (2002b) lists four commonalities between the two approaches: 1) the purpose of participation is to obtain outcomes that people value while also directly supporting empowering choices; 2) they both consider the issue of 'who decides' as important as 'what is decided'; 3) they recognise that there may be no 'best' choice, but that discussion offers an effective means of separating 'better' from 'worse' choices; and 4) they both promote reasoned deliberation as a valid method for evaluating and making policy. Clark, Biggeri, and Frediani (2019) also make a comprehensive comparison of both literatures and present a list of similarities. They write that both participatory and capability approach methodologies share a common appraisal of poverty as multidimensional and non-specific to income. For example, Chambers (1997a, p. 45) argues that "deprivation as poor people perceive it has many dimensions, including not only lack of income and wealth, but also social inferiority, physical weakness, disability and sickness, vulnerability, physical and social isolation, powerlessness, and humiliation". This parallels Sen's (1999) argument for the expansion of the concept of development to capture the many dimensions of poverty. D. A. Clark et al. (2019) also point out that both literatures present a critical view of the process of knowledge production.

Paulo Freire's (1970, 1997) work on social change as emerging from people's participation in critical dialogue is referenced by both academic adherents of the capability approach and PAR practitioners. Freire (1997, p. xi) writes that "in this

process, people rupture their existing attitudes of silence, accommodation and passivity, and gain confidence and abilities to alter unjust conditions and structures”.

While it is clear that participatory research and the capability approach are harmonious, D. A. Clark et al. (2019) also identified their weaknesses. Criticisms stem from the individualised nature of both approaches (see Cleaver, 2001; Robeyns, 2005), which, some claim, pays insufficient attention to individuals as part of their social environment. Others insist that their emphasis on local knowledge and solutions cannot be translated to global issues, missing critical oversight of structural inequalities and long-term economic and social changes (Gore, 2000).

While respecting the limitations of PAR and the capability approach, it is still possible to acknowledge the strengths they lend to this research when they are applied in tandem. D. A. Clark et al. (2019) consider the impact the capability approach may have on overcoming the unintended technocratic dominance participatory approaches have assumed in some instances, which leave the root causes of inequalities unchallenged (see Cooke & Kothari, 2001; Kapoor, 2005). They note that PAR serves to unpack nuanced dimensions of wellbeing in the context of people’s lives, while the comprehensive evaluative framework of the capability approach provides a “flexible theory of wellbeing that can capture the multiple, complex and dynamic aspects of poverty” (D. A. Clark et al., 2019, p. 10). Because these two methodologies can be applied successfully at the local level, they offer a useful counterpoint with which to examine wellbeing amongst myriad frameworks that prioritise aggregate and universal wellbeing. Together, they carry the potential to offer deeper insights into what it means to operationalise the concept of ‘leaving no-one behind’ in the pursuit of wellbeing for all individuals. Their attention to wellbeing as a constructed and contextual process combined with their attention to human rights allows the research to ensure that the voices of those who are the intended beneficiaries of policies are of central importance.

## Research Design and Methods

In designing my research, I orientated myself with the following questions: ‘Which tools best provide participants the opportunity to explore their own interpretations of wellbeing?’ and ‘How is wellbeing best investigated as an integrated, relational

concept?’ The impetus for these questions lies in the pursuit of knowledge that prioritises marginalised voices and perspectives as part of an underlying motivation to improve policy outcomes for vulnerable groups. It was clear that exploring the answers to these questions required methods that were sensitive to power imbalances. It was therefore critical that I relinquished power as much as possible throughout the research process to allow the formation of a more equal partnership. Mertens, Bledsoe, Sullivan, and Wilson (2010, p. 198) note the dangers of privileging one form of knowledge over another, insisting that a collaborative relationship is a “critical determinant in achieving an understanding of valid knowledge within a transformative context”. Emphasising people’s ability to generate information on their own terms is a critical consideration in working with ‘vulnerable’ people (Kindon et al., 2007) as it helps to mitigate further discrimination, oppression, misrepresentation, and marginalisation that may arise as part of the research.

PAR spans theory and practice and has served as both a methodological base and a set of research tools in this study. As a method, PAR commits to facilitating local ownership and control of data generation and analysis (Chambers, 1994, 1997a). The researcher’s role is diminished from expert to facilitator in an effort to hand over the stick of power (Chambers, 1997a), allowing participants to lead and shape the research. However, in reality, due to my role as the convenor of the research, I created, and therefore inherently structured and owned the research space (see Cornwall, 2008). As a consequence, I found that in practice it was difficult, if not impossible, to completely transfer power to participants, despite taking measures to minimise power imbalances (these measures are discussed later in this chapter).

In general, PAR benefits from hands-on techniques, such as visual methods (e.g. Photovoice, diagramming), storytelling, or creative arts, which are accessible to all participants and do not require a high level of literacy (Kindon et al., 2007). While the use of qualitative methods has a relatively long tradition within participatory research, PAR hails from a diverse range of theoretical perspectives and methods. Recently, there has been an emerging interest in the use of mixed methods within PAR. Quantitative research methods are not contrary to participatory inquiry per se; however, special attention needs to be paid to the types of questions asked, how the methods are practised, and to what extent the findings and interpretation are in fact used to promote

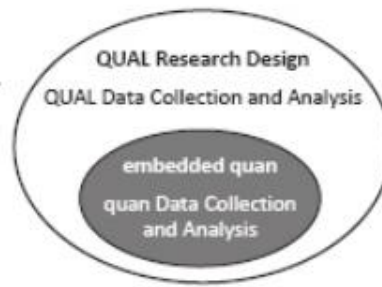
empowerment. With this in mind, I have selected a participatory nested mixed methods design for this study.

Mixed methods are broadly defined as approaches to inquiry using both quantitative and qualitative data in a single study (Creswell, 2009). They are credited with composing a more complete picture of a research problem due to the insights generated from the combined use of methods (Creswell, 2009; Creswell & Clark, 2018). Mixed methods research can be designed in a multitude of ways according to the requirements of the study and the kinds of information the researcher seeks to emphasise. Creswell (2009) offers four key methodological considerations when planning a mixed methods design: timing (whether the collection will occur concurrently or in phases); weighting (priority of one method over another); mixing (how and when data is mixed); and theorising (whether a theoretical framework guides the design).

Considering the conceptual grounding of this research, a hybrid design was chosen that intersected mixed methods with a transformative approach, known as a concurrent transformative strategy (Creswell & Clark, 2018). This is an advanced application of a mixed methods design (V. Clark & Ivankova, 2016; Creswell & Clark, 2018).<sup>6</sup> Because the design was concurrent, both qualitative and quantitative data were collected simultaneously. However, the primary method (qualitative) was allowed to guide the research while the secondary method (quantitative) played a supporting role. Given less priority, the secondary method is said to be 'nested' within the predominant method (V. Clark & Ivankova, 2016; Creswell, 2009). The design allows the overarching conceptual model, in this case critical theory, to inform both the quantitative and qualitative data collection and analysis (Creswell & Clark, 2018). This enabled me to use mixed methods in addressing the research questions while giving primacy to my theoretical assumptions.

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<sup>6</sup> Mixed methods designs that intersect with other approaches are deemed 'advanced' because researchers need to navigate additional assumptions and logics when employing these methods. This does not necessarily indicate a more sophisticated application of methods and procedures (V. Clark & Ivankova, 2016).



**Figure 3. 1. Nested Mixed Methods Design**

**Source: Clark & Ivankova, 2016, p. 7**

It is logical to ask what value a quantitative element adds to the research design, particularly when foregrounding local knowledge is paramount and considerations of power and social transformation are central concerns. Hesse-Biber, Rodriguez, and Frost (2015, p. 10) write that a qualitatively driven researcher may benefit from using mixed methods as they can “raise new questions that are connected in some substantive way to the research problem, and that researchers might seek out points of connection by consciously comparing and contrasting the research findings from both data sets”. For this study, a mixed methods approach offers two attractive features over qualitative methods alone.

Firstly, the process of generating quantitative data from participatory processes, a term Robert Chambers coins ‘participatory numbers’, offers arguably more diverse pathways to empowerment by adopting the best of both qualitative and quantitative worlds (Chambers, 2003). Participatory numbers emerged from the recognition of the multifaceted nature of poverty and the growing need for the quantification of multiple dimensions of wellbeing. They enable the allocation of a value to the qualitative dimensions of people’s lives which are more likely to reflect people’s realities than other statistical methods that generate values, such as surveys (Gaillard et al., 2016). I employed mixed methods to allow a richly contextualised account of people’s lived experiences while simultaneously generating numerical values through participatory activities, with which it was possible to create a heuristic device to visualise the associations between wellbeing domains. This device facilitated an exploration into the extent that domains intersect and made it easier to decipher spheres of influence. The result is a nuanced account of wellbeing alongside an inter-relational account of

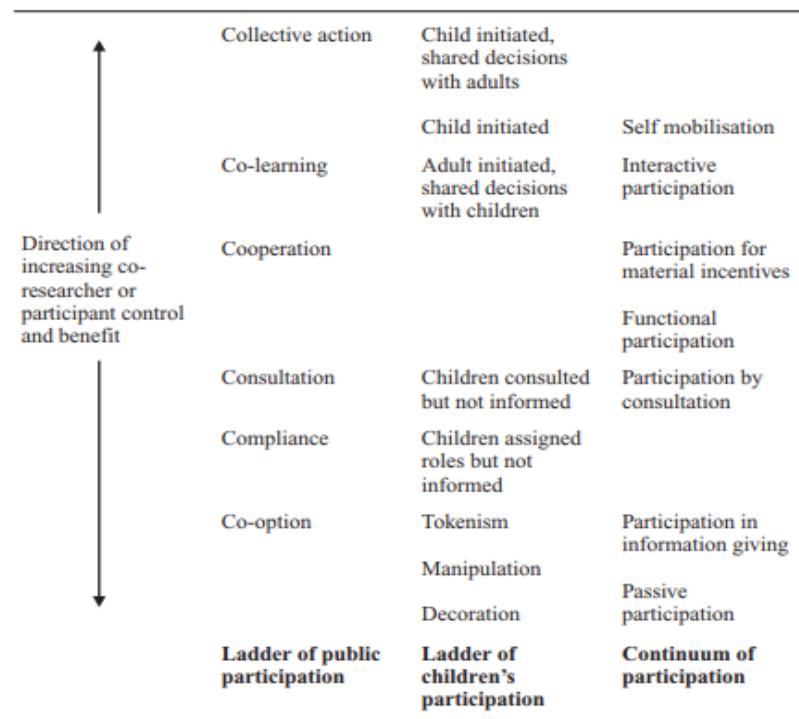
multidimensional wellbeing that is not represented in current hegemonic frameworks that underpin policy decisions.

Secondly, the addition of a quantitative element offers greater opportunities to influence policy circles, a field that typically values the use of statistics over qualitative results. PAR applied with mixed methods can produce more transferable research results by providing quantitative data that is useful to outsiders and their organisations for developing evidence-based, people-centred plans for improvements in service delivery. Thus, it acts as a practical tool for combining local learning and empowerment while making local knowledge tangible and 'credible' to outsiders (Gaillard et al., 2016). Quantitative methods also provide an important check on the researcher's interpretive bias, which can further enhance credibility. It is entirely possible to criticise this as another way to enrol local communities in utilitarian wellbeing logic. However, I argue that the processes of PAR work as counter measures to traditional policy discourse. Kindon et al. (2007, p. 37) note that participatory researchers are "accountable (arguably primarily) to their participants, partners, and to the communities with which they work". I concluded that using mixed methods offered the most comprehensive path to ensuring the research remained accountable to the collaborators and participants of the study.

### ***Typologies of Participation***

Mixed methods have been combined with participatory approaches successfully in other wellbeing studies (see Camfield et al., 2009), yet with a diverse range of practices labelled 'participatory', it is often difficult to determine whether a particular project or activity is fit for purpose. Various authors have put forward typologies of participation to differentiate degrees of participation. The 'transformative' or 'manipulative' potential of a project depends on where it sits on a continuum of participatory approaches (Cornwall, 2008). Arnstein's (1969) ladder of participation was the first of such typologies and explored the degree of power people have in making decisions. At the lowest end of the ladder, participation is considered a form of manipulation or tokenism where people are at the receiving end of projects with no real power. Each rung on the ladder ascends to higher and more 'genuine' forms of participation. Citizen control appears at the top of the ladder, where ultimately people take the initiative to participate and have the power to effect change. Other typologies have been developed by Hart (1992), in the case of participatory research with children; Pretty (1995), who

speaks more to the motivations of those employing participatory approaches (practitioners) rather than participants; and White (1996), who has created a tool to identify conflicting ideas about how or why participation is used at different levels for both practitioners and participants.



**Figure 3. 2. Participation Continuums**

**Source: Kindon et al. (2007), p. 16**

Typologies such as these provide the mechanism through which PAR is seen and judged as a success or failure. My use of PAR as a potential instrument of power over research participants was made particularly relevant due to my choice of mixed methods research. Quantitative methods are not always conducive to shared knowledge construction and collaborative relationships; thus, they are more easily subverted into instruments of power. It is important to highlight that although these typologies represent an unambiguous distinction between different levels of participation, in practice the delineations are almost never distinct (Cornwall, 2008). Kindon et al. (2007, p. 16) echo this sentiment, noting that “various forms of participation may be valid at different times during a research process and in different situations and contexts”. I conclude that success or failure is not to be found on one end of the spectrum or the other; neither in the rejection of participation as a manipulative tool for social control

(see Kapoor, 2005), nor in the development of the perfect set of participatory techniques (see Chambers, 1994; 1997). Instead, I argue that it is found in the grounded understanding of how power is created, disseminated, and governed by participants. By reflecting upon my own theoretical groundings and positionality, and consistently engaging in a cycle of reflection and action throughout the research process, I attempt to render my own biases transparent while working with people on their own terms to facilitate their own pathways to wellbeing inquiry.

## Collaborating with Wesley Community Action

The early stages of this project were spent forming a partnership with Wesley Community Action (WCA), a Wellington-based non-profit organisation that offers a range of programmes and services for individuals in need of support. Working from a strength-based perspective, their driving principle is to create conditions that enable people to identify their own strengths and capacities to bring about changes in their lives (Deloitte Touche Tohmatsu Limited, 2018). Collaborating with WCA was the first step in connecting with the community itself and I was invited to attend a meeting with their leadership team where I explained my research objectives and answered any questions they had. The staff took on earnest roles as gatekeepers to the community (Ochocka, Moorlag, & Janzen, 2010) and rightfully expressed wariness of extractive research processes that risked exploitation as opposed to benefiting the community. Many of my initial discussions with WCA staff involved building mutual trust and overcoming tensions related to negative past experiences with research. A mutual commitment to strength-based approaches was contingent to our collaborative partnership, which involved being explicit about my values as a researcher and my commitment to the principles of PAR.

Upon receiving their support, a designated staff member acted as a regular point of contact to aid in the formation of the research. We explored ways of working together and held ongoing discussions around recruitment, methods, and safe practice. In the spirit of partnership and reciprocity, I indicated my willingness to submit a parallel report summarising the research findings once the research was complete. This document was to be written specifically for WCA staff, the participants, and the wider Cannons Creek community, and would present the findings in an accessible, easy-to-read format.



WCA's involvement was crucial in helping me to understand the social, contextual, and historical factors in which I would situate the research. Their expertise helped to guide my research design to be more sensitive to the community. For example, they helped me to shape how the research was messaged, particularly in relation to the recruitment flyer, which was co-designed. Language was important (no research jargon) as was the elimination of words that invoked a sense of vulnerability or weakness (discussed in more detail in the Ethical Considerations section of this chapter). Their suggestions helped to shape the methodological decisions I would make later on, and also helped to inform my human ethics application. This research project was approved by the Victoria University Human Ethics Committee (reference #0000026692). In addition, WCA's well-established and respected role within the community served as an important factor in securing community involvement.

## Recruitment

It was decided that the most appropriate way to disseminate research information to the community was through WCA's existing staff networks, and the WCA branch in Cannons Creek, Porirua, assumed primary responsibility for recruiting participants. The staff were proactive in this role, inviting community members who were actively involved in (or had recently graduated from) WCA Cannons Creek services. Staff solicited participation from their clients using their existing contact information and the recruitment flyer. In most cases, participants liaised with WCA to register for the research, although two participants contacted me directly via phone and email. The research schedule was determined by WCA staff, who knew which days would be best for participants to join the research. Three focus group discussions (FGDs) were carried out with 24 participants over three weeks from mid-November to early December 2018. To reduce burden, a \$50.00 grocery voucher was provided for around two hours of participants' time.

Participants were asked to take part in the research on the basis that they were low income, experiencing hardships to the extent that they had difficulty meeting their material and non-material needs, and/or had inadequate socioeconomic resources to participate in their communities and wider society. To reflect the diverse nature of hardship as inclusively as possible, I sought a diverse range of perspectives. Recruitment

was limited to WCA's client base, which is not representative of all groups and communities experiencing hardship in New Zealand.

We agreed to conduct the research at the Cannons Creek North WCA premises because participants were already familiar with the staff, location, and their surroundings. Things did not always go to plan in the recruitment process. For example, I designed the FGDs for small groups of approximately 6 people, yet WCA staff tended to overbook sessions (with good intentions) because their past experiences running groups with the community led them to expect a high rate of absenteeism. However, the research proved more popular than anticipated so I facilitated research sessions with more people than planned and, on a few occasions, staff had to step in at short notice to support me. I valued the time and commitment that WCA Cannons Creek staff made on my behalf and was mindful that I should remain flexible throughout the research process to best accommodate them and the research participants, rather than the other way around.

### ***Cannons Creek North Community Profile***

Cannons Creek North is a community of approximately 3,132<sup>7</sup> people located in the wider Cannons Creek suburb of Porirua City, New Zealand (Profile.ID, 2019). Cannons Creek North has the highest population density of any area in Porirua City and is more ethnically diverse than New Zealand as a whole, with more Māori (22% vs 16%) and Pasifika people (54% vs 7%), and fewer residents identifying as *Pākehā* (New Zealand European) or Asian ethnicities (Profile.ID, 2019). There are more residents with religious affiliations compared to the rest of New Zealand (83% vs 61%), with a higher Christian demographic (58% vs 44%) (Profile.ID, 2019). Cannons Creek North is also a relatively young community, with an average age of 26 years compared to the national average of 38 years.

Cannons Creek North is considered the most disadvantaged area in Porirua City, ranking highest on the New Zealand Social Deprivation Index (Profile.ID, 2019) as well as the New Zealand Index of Multiple Deprivation (The University of Auckland, 2019). Compared with the New Zealand average, Cannons Creek North has a higher proportion

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<sup>7</sup> As per the 2013 census count.

of low income households<sup>8</sup> (25% vs 19%) and unemployment rate (21% vs 7%) (Profile.ID, 2019). There is also a significantly higher proportion of people receiving government benefits (33% vs 16%), and people aged 15 years and older with no formal educational qualifications (29% vs 19%) (Profile.ID, 2019). See Figure 3.3 below for an aerial map of Cannons Creek.



**Figure 3. 3. Aerial Map of Cannons Creek North (Denoted by White Line)**  
Sourced from Profile.ID (2019)

### ***Participants***

The focus groups were carried out with 19 female and 5 male participants. There was limited opportunity to communicate with most participants prior to meeting them at the focus group sessions. I was therefore conscious of establishing relationships of trust and rapport from the outset. For this reason, I did not formally collect demographic information, as I felt it would have placed disproportionate emphasis on the technicality and formality of the research. I was mindful of creating a space where participants felt

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<sup>8</sup> Defined as earning less than \$30,000 per annum (Profile.ID, 2019).

comfortable and safe sharing their stories and perspectives and did not want to begin the focus group sessions by positioning participants as ‘objects’ of research.

However, demographic information was voluntarily divulged in many cases. The groups were comprised of a range of ages (from undergraduate students to retirees) with most participants being in their thirties or forties. Participants’ ethnic and cultural backgrounds also varied. At least one participant emigrated from the Pacific Islands; others were from Pasifika backgrounds but were born in New Zealand. In each focus group, there was at least one participant who identified as Māori (there may have been others, but I did not press for this information). Other participants identified as *Pākehā*. At the time of the research, all participants lived in Porirua, New Zealand.

When designing the research, I had intended to give participants a choice between a focus group or an interview depending on their preference. Upon discussing this with WCA, we agreed that WCA Cannons Creek staff would ask participants only to attend focus groups, since most participants were already used to working alongside one another through WCA programmes. In both cases where participants contacted me directly, I gave them the option to attend either a focus group session or an interview, and in both instances the participants chose to take part in a focus group session.

At the beginning of each focus group session, I provided participants with information and consent forms (see Appendices A and B), and verbally explained their rights as research participants. I made it clear that they would have the right to choose whether to reveal their identity or to remain anonymous. The intention was for participants to have the option for their voices and opinions to be attributed to them, since an insistence on anonymity can muffle the voices of participants while authorising that of the researcher (Aldridge, 2015). To protect participants’ identities in instances where they wished to remain anonymous, I have used gender-sensitive pseudonyms marked with an asterisk in place of their names (for example, ‘Jane\*’). All agreed to have the focus group sessions audio-recorded.

# Data Collection and Analysis

## ***Focus Group Discussions***

I was mindful of creating a space that encouraged free and open discussion among participants in the FGDs. Discussions took place in WCA Cannons Creek's meeting space, which was equipped with couches, plenty of natural light, fresh air, and had easy access to the kitchen to provide refreshments. I was also conscious of how the social dynamics between participants would play out, as this can greatly shape the outcome of an FGD (Neuman, 2011). WCA staff were thoughtful about inviting participants who had previous connections with one another through WCA programmes and services, which was helpful in creating a space where participants could share their opinions candidly. However, as Neuman (2011) observed, this is not always enough to ensure participants feel safe in expressing themselves openly. Participants may minimise or withhold their opinions depending on the context, as is it is their right to do so.

Each FGD began with participants reflecting individually on their interpretations of wellbeing (*'what does a 'good life' look like for you?'*) and writing their ideas on post-it notes. Their ideas were collected and displayed, at which point the group was invited to elaborate on their ideas of a 'good life' as it related to their written responses. Following a collective discussion, participants were invited to group the ideas into domains as they saw fit.<sup>9</sup> Semi-structured questioning was used to investigate how these domains influenced wellbeing.

## ***Linkage Diagramming***

The FGDs were complemented by a diagramming activity that served both a qualitative and quantitative purpose. After participants' ideas were grouped into domains and agreed upon by the group, participants were each given a sheet of 12 coloured sticky-dots. They were asked to rank the top contributors to their wellbeing by placing dots on the appropriate domains. The dots could be divided among domains as they saw fit; participants were not required to divide them equally. Ranking domains served to

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<sup>9</sup> There were no restrictions on the number of domains. They varied in quantity and type between each FGD. See Table 4.1 for the list of domains from each group session.

encourage participants to discuss and expand on the aspects of wellbeing that mattered most to them. Following this, I asked participants to reflect on their wellbeing as a whole, particularly how the domains might connect and influence one another in daily life. This discussion was more easily achieved through the use of linkage diagramming, where participants could represent connections by drawing lines with directional arrows. Their connections could be strong (red marker), medium (yellow marker), or weak (blue marker). The result illustrated wellbeing domains fitting into a larger pattern or system of linkages.



Figure 3. 4. Linkage Diagram from Focus Group 1





Figure 3. 5. Linkage Diagram from Focus Group 2



Figure 3. 6. Linkage Diagram from Focus Group 3

As a research technique, diagramming was helpful due to its combination of visual and verbal methods (Cornwall & Jewkes, 1995; Kindon et al., 2007). Visualisations can unmask more than verbal communication alone and help to simplify abstract or complex information (Neuman, 2011). In this case, the linkage diagram activity served as a facilitation tool to encourage deeper discussion on wellbeing as a holistic concept. It yielded a conversational reference point that was instantly accessible for shared group

analysis. Participatory diagramming can also serve as a medium to shift control to participants (Kindon et al., 2007). As participants engage directly with a diagram of their own making, the focus slips away from the facilitator and resettles on the central diagram, shifting a sense of control to participants as they work collaboratively to share their observations and analyses (Kindon et al., 2007). In addition, participatory diagramming has proven useful in producing robust, ethical research with vulnerable groups (see Kesby, 2000). The tactile and visual nature of this medium is more inclusive, making it easier for people to contribute knowledge on their own terms and claim more ownership over the research process.

From a quantitative standpoint, the diagram served to provide a structural representation of wellbeing. Because the domains were weighted by participants (as established in the ranking exercise) and the directional causal arrows were also weighted, it was possible to draw out the correlations between domains. Each domain could be coded according to its importance, and each arrow could be coded to represent the strength of an association between domains. The result was a heuristic device that showed a chord diagram representation of wellbeing domains and their relative connections (these representations are discussed in depth in Chapter Five).

It should be noted that participatory diagramming techniques do not guarantee ethical practice. Pain and Francis (2003) recount a number of problems diagramming can have in a participatory setting, including a superficiality and brevity that does not allow participants to think issues through sufficiently. As with any endeavour in participatory research, diagramming must also be a reflexive, adaptive process to ensure its use is not co-opted into another technocratic tool. Some participants reported their enjoyment in taking part in the discussions and diagramming sessions because they had learned more about their own wellbeing. They mentioned that it allowed them the opportunity to reflect on the values they placed on some aspects of their wellbeing and the way in which everything was connected. As Cornwall and Jewkes (1995, p. 1671) observed, “the process of constructing a visual representation is in itself an analytic act revealing issues and connections that local people themselves may not have previously thought about”.



### ***Free-list Survey***

Each focus group concluded with a final quantitative free-list survey exercise (see Appendix F). Participants completed an individual survey which asked them to record a list of ten domains that were most critical for their wellbeing. They could select domains that were generated earlier in the discussion or entirely new domains of their choosing. For each item in their list, they listed the top four domains that accompanied it (from the same list). The intention was to capture bundles of domains to compliment the group associations while providing a secondary, individualised data set.

## **Data Analysis Methods**

### ***Qualitative Analysis: Grounded Theory***

To develop an understanding of wellbeing in the context of participants' lived experiences, it was necessary to follow an inductive process that allowed conceptions of wellbeing to emerge and shape the analysis. For this reason, I took a grounded theory approach that sought to generate meaning from participants' discussions, rather than drawing themes from the literature. The value of grounded theory to this research is that it necessitates that the researcher set aside *a priori* notions of what they will find in order to remain open to diverse and multiple realities and the complexities of particular worldviews (Charmaz, 2014). Grounded theory is ideal when the literature has models available to explain a process, but which were developed and tested on samples and populations other than those of interest to the researcher (Creswell, 2013). In this case, grounded theory offers an opportunity to explore valuable conceptualisations of wellbeing at the community level without being constrained by the prescriptions of macro level wellbeing frameworks.

After transcribing the FGDs verbatim, I followed an axial coding process proposed by Charmaz (2014). This took an iterative approach in which data were grouped initially by theme (or codes) early in the process. As new discussions generated more data, I revisited the codes and refined them by constructing subcategories and adding context, conditions, and additional components that emerged in discussions with participants. This approach helped to define the range of wellbeing domains and provided leads for conceptualising them further by checking my ideas with other data (Charmaz, 2014).

The FGDs were then coded in NVivo, a qualitative data analysis software, which enabled me to add multiple codes to an idea. For example, if a participant commented, “To me, wellbeing is about taking care of my family and making sure they’re fed, healthy, and happy,” this would entail several layers of coding relating to family, subjective wellbeing, health, and basic needs.

### ***Quantitative Analysis: Linkage Diagram***

As previously noted, the intention behind the quantitative part of this study was to explore the inter-relationships between domains to visualise and draw insights from the complexity of wellbeing. To create a statistically accurate representation of the diagram for analysis, I required two separate values. The first value was derived from the sticky dots that participants placed on domains. Counting the dots gave me a value on which to base the importance of the domain. To form values for the directional arrows, I gave strong connections a value of 2, and medium connections a value of 1. These were added together to form the overall value of the connection’s strength. Participants interpreted weak connections as negative relationships, meaning that domains connected with weak (blue) arrows were intended as negatively impacting one another. For example, a blue arrow from *Health* to *Income* would represent health having negative impacts on financial outcomes. I decided to isolate the weak (blue) connections and treat them as their own distinct set of ill-being relationships. Each weak connection was given a value of 1 in this separate analysis.

From these values, it was possible to create a correlation matrix using Excel. This presented the problem of whether to represent the directional arrows as causal links or simply associations. Burn (2000) suggested that the strongest type of theoretical inference a researcher can draw on is a causal inference, which involves proposing that a dependent relationship is based on causation. This influenced the way I coded the values of the arrows, as some were two-headed, and others were not. Unfortunately, I did not raise the subject of the direction of causality with participants in the FGDs, which was a limitation of this diagramming technique. Following recommendations by Burns (2000), I assumed a causal relationship whereby a two-headed arrow signified a causal relationship in two directions, while a one-headed arrow signified a one-directional relationship.

The data from the group diagramming activities were coded in R 3.6.1 (R Core Team, 2019) using the *circlize* package (Gu, Gu, Eils, Schlesner, & Brors, 2014). Each data set produced a statistical representation in the form of a chord diagram, which could then be used for a visual analysis of the relationships between domains.

### ***Quantitative Analysis: Free-list Survey***

The intention of the free-list survey was to explore how participants bundled domains together at the individual level, so multidimensional scaling (MDS) was chosen as the most appropriate visualisation technique for this data. MDS represents data spatially by plotting variables as points in n-dimensional space (two, three, or four dimensions), resulting in a structural representation of the data (Bernard, 2018). MDS calculates the data by proximity, whereby domains with higher correlations are closer together in the graph. There are two types of MDS: metric and nonmetric (Bernard, 2018). Metric MDS is grounded in well-understood units of measurement such as height, centimetres, or kilometres, and reflects the distance between two variables in a physical reality. Nonmetric MDS is useful for understanding relations among any set of ordinal data (even abstract concepts) as long as the elements of a similarity matrix provide information about the relationship among the variables (Bernard, 2018). This allows nonmetric MDS to map abstract concepts like wellbeing domains and was therefore ideally suited to exploring this data set.

The free-list survey data was reconfigured into a similarity matrix and run through R 3.6.1 (R Core Team, 2019) using the MASS package (Venables & Ripley, 2002) with the `isoMDS()` function for nonmetric multidimensional scaling. The MASS package calculated the best spatial representation of the data based on the data in the similarity matrix. The solution was represented in a two-dimensional graph (see Chapter Five).

MDS graphs are an ideal choice when carrying out exploratory work because they can uncover hidden structures in the data. However, because MDS graphs can be interpreted very broadly, they have been criticised as somewhat arbitrary and subjective (Hammond, 2006), therefore it is appropriate to recount the methods of analysis when interpreting a solution. I employed a cluster analysis technique (Rabinowitz, 1975) which was based on how the data were arranged in a cluster pattern in the spatial map. The data points were first examined by region; focusing on an area occupied by groups of

data points, examining the distance between them, and identifying themes and patterns. Then, they were examined by the shape of the data plot – how domains arranged themselves in a straight line or circle.

It should be noted that MDS graphs produce a 'stress' coefficient, which represents the amount of distortion the data has placed on the graph (Bernard, 2018). The lower the stress, the better the degree of accuracy of the solution. There is debate on how much stress is acceptable in an MDS solution; however, a stress of 0.20 or less is generally considered acceptable (Bernard, 2018; Hammond, 2006). For this research, the stress value produced by the MDS was 0.27, which indicated that there was some distortion of the data points. Although increasing the number of dimensions of the graph would have had the effect of reducing this stress value, I opted to keep the graph in two-dimensions because a three or four dimensional representation of the data would be difficult to display on paper and thus more difficult to comprehend.

## Ethical Considerations

### ***The Framing Effect***

Early in the research process, I sought advice from WCA staff about messaging my project within the community. They took time to review my consent forms, information sheets, and recruitment flyer, and were quick to voice concerns about the terms I used to represent the demographic I was interested in talking to. They considered characterisations like 'poor', 'marginalised', 'hard to reach', and 'vulnerable' inappropriate, and indicated that individuals in their community did not access WCA services because they thought themselves poor. Rather, they came because they wanted to create opportunities for positive change in their lives.

This was an ethical hurdle I had to navigate early. I was accustomed to development discourse that centred strongly around the notion of poverty and where the use of these terms was prevalent. From a development standpoint, an individual or group may be poor or marginalised based on their needs. In practice, however, poverty and marginalisation are contestable concepts. People's self-perceptions may not align with an external classification describing them as such. As Camfield et al. (2009, p. 23) note, "there is often a pronounced 'framing effect' ... and starting from 'poverty' may miss the

opportunity to understand people's lives in their own terms. Despite my best intentions to equalise relationships and work collaboratively with people, wherever my research sought to involve the perspectives of the 'poor', I found a presumptive underlying perception that labelled participants in a disempowering narrative from the outset.

There seems to exist a perverse politics of misrepresentation in development (Kindon et al., 2007) that perpetuates deficit models in the very communities that serve to justify development's existence. The language of development perpetuates an unequal power dynamic through its representations of the 'poor' that is ultimately self-serving (Pieterse, 2000). Indeed, leaving no-one behind always implies a de facto demographic of the neediest, poorest, and most marginalised, and yet these groups are without the chance to refute these labels.

Aldridge (2015) reminds us that poverty is socially constructed and contextual. *How* these difficulties are defined or conceptualised and, by extension, how the people who experience them are represented, are important considerations given that people would not normally associate their problems with poverty. Furthermore, it is helpful to understand hardship as a relative rather than an actual condition, which may occur as a result of external or structural factors such as inequality and social exclusion. It is through the influence and effects, for example, of discrimination and misrepresentation, that people become powerless, excluded, and marginalised (Aldridge, 2015).

In light of these criticisms, I reflected on the use of deficit-based terms and the orientation in which they positioned the research participants and the Cannons Creek community as a whole. I attempted to mitigate this by changing my language from hard labels ('those in poverty') to describing the circumstances in which people found themselves ('those experiencing hardship to some degree'), which emphasised the temporal and fluid nature of difficult circumstances. I also attempted to design my research using inclusive and collaborative PAR methods that remained true to participants' voices. In this way, participants could set their own narratives, define their own circumstances, and frame for themselves how they would like to be represented in the research.

## Chapter 4: Wellbeing Through Participants' Eyes

This chapter draws on the results from the qualitative data to explore the contributing factors of wellbeing as revealed by participants. Section one identifies the domains of wellbeing, while section two pulls out key themes that arose in the FGDs, helping to give context to how the domains are embodied, expressed, and experienced in daily life. The intention is to convey a deeper understanding of why various dimensions matter in a particular set of circumstances.

### Results: Section One

Participants were asked to describe their wellbeing (*'What does a good life look like for you?'*), record their answers on post-it notes, and group the post-it notes into domains. The results from each focus group are listed below in Figure 4.1. There are 37 domains in total, ranked according to their relative weight, which was determined via the number of sticky dots that participants placed on the domains. Some domains had an equal number of weights, so their positions tied in the rankings. The top priorities varied, with *Health & Wellness*, *Belief*, and *Whānau* each ranking first in different groups. The second FGD had more participants than either of the others, which led to more post-it notes and therefore more domains.

**Table 4. 1. Wellbeing Domain Rankings**

Rank Focus Group 1	
1	Health & Wellness
2	Self
3	Empowerment
4	Financial
5	Spirituality
6	Structures (External)
7	Time
8	Safety
9	Abundance

Rank Focus Group 2			
1	Belief		
2	Healthy Body		
3	Loving Yourself		
4	Family	Financial	
5	Social Support	Learning & Informed	Culture & Identity
6	Structure/Routine	Forgiveness	
7	Time	Resilience	
8	Being Loved	Respect	
9	Home	Motivation	
10	Achievement		

Rank Focus Group 3			
1	Whānau		
2	Wellbeing (Health)		
3	Love	Finance	Education
4	Kai	Appreciation	Time
5	Happiness	Stability	
6	Home		

As there was some duplication of domains across the focus groups, I consolidated the lists. This was done very carefully to ensure the original intent behind the domain was captured and resulted in a list of 23 domains in total. Table 4.2 provides an overall summary of the domains and their definitions. Drawing inspiration from research methods by Bernard (2018) each has been attributed a frequency score and a salience score. Frequency refers to the number of times a domain was created in the study. A frequency rate of 100% denotes that the domain was created in all three FGDs, whereas a frequency rate of 33% indicates it was only created in one FGD.<sup>10</sup> Salience refers to the relative importance of the domain to the individuals in the study. This was calculated by adding up the number of weights (sticky-dots) participants attributed to the domain and dividing that number by the total number of weights available to participants (288).

As shown in Table 4.2, *Mental and Physical Health* has the highest salience score at 14.6%. The other two high frequency domains, *Financial* and *Time*, have lower scores at 9.4% and 5.9%, respectively. Among the mid-level frequency domains, *Self* has the highest salience at 10.8%. *Spirituality* was second at 8.0%, followed by *Family/Whānau* at 6.6%. Among the domains that have the lowest frequency, *Empowerment* scored the highest in salience at 5.2%, with *Achievement/Abundance* and *Motivation* tying for the position of least salient at 1%.

The frequency and salience scores help the interpretation of the overall rankings of the domains when consolidated but are less helpful when drilling down into each focus group. A domain with high frequency and salience scores, for example *Mental and Physical Health*, was given a relatively high weight in all three FGDs, but that does not necessarily indicate that all three FGDs weighted it as their top contributor to wellbeing (see top ranks in Table 4.1). Similarly, a low frequency and high salience score signifies that a domain was weighted highly in only one FGD, such as in the case of *Empowerment*.

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<sup>10</sup> Frequency does not necessarily determine how many times a domain was mentioned in the study. For example, *Empowerment* was mentioned in all three focus groups, but was created as its own domain only once, which is why it shows a frequency of 33%.



**Table 4. 2. Consolidated Wellbeing Domain Rankings**

Domain	Frequency (%)	Salience (%)	Definition
Mental & Physical Health	100	14.6	Having a healthy lifestyle complete with quality food choices and a low-stress, positive outlook.
Self	66	10.8	A sense of strength and personal fulfilment.
Financial	100	9.4	Having comfortable living conditions and enough resources to ensure financial stability and owning a home.
Spirituality	66	8.0	Having a spiritual connection and living by God's principles.
Family/Whānau	66	6.6	Having loving and welcoming relationships with family and giving/receiving support.
Time	100	5.9	Having time to pursue personal hobbies or interests.
Love & Happiness	66	4.9	Being loved and loving others and being happy.
Education & Learning	66	5.2	Staying informed and using your knowledge for personal growth.
Empowerment	33	5.2	Being strong, setting goals and receiving support from others.
Social Support	33	3.1	Caring for friends and the wider community and receiving support from them in kind.
Culture & Identity	33	3.1	Being connected with your culture, including knowing who you are and where you came from.

Structures (External)	33	2.8	Satisfaction with access and support received from external support structures, such as government agencies.
Home	66	2.1	Having comfortable living conditions.
Structure/Routine	33	2.1	Being able to stick to a routine and managing all aspects of life accordingly.
Forgiveness	33	2.1	Being able to let go of past hurts.
Safety	33	1.8	Feeling safe.
Kai	33	1.7	Having nutritious food for yourself and your family.
Appreciation	33	1.7	Appreciating what you have and being grateful towards others.
Resilience	33	1.7	Learning from past mistakes and trying again; continue contributing to your community.
Stability	33	1.4	Being able to deal with difficult circumstances as they arise.
Respect	33	1.4	Respect for yourself and respect for others.
Motivation	33	1.0	Setting goals and a having focus for the future and having determination to reach those goals.
Achievement/Abundance	33	1.0	Living with contentment and reaching a sense of balance.

It is important to note that even when some themes featured prominently in focus groups, a domain was not created for them by participants. For example, *Empowerment* was listed as a domain only in FGD 1, yet discussions surrounding themes of empowerment, such as control, agency, and choice, arose in all three FGDs. This suggests that the participants in FGD 1 chose to separate the theme of empowerment into its own wellbeing domain, whereas those in the other FGDs chose to weave empowerment and similar themes into their other selected domains.

## Results: Section Two

In this section, the domains are placed into more context by analysing the results of the focus group discussions. The structure of this section does not follow the list of domains one-by-one as they were tabled in Section One. This is because participants discussed wellbeing in a fluid and interrelated manner. It was not possible to isolate each domain in discussions as they would invariably be woven in amongst other domains. However, it was possible to make some thematic distinctions when analysing the results. In this section, I have chosen to place the above domains into context within eight themes: *Balance and Reciprocity; Finance and Basic Needs; Health and The Self; Agency, Freedom, and Choice; Family/Whānau and Community; Culture and Identity; Spirituality; and Time.*

### ***Balance and Reciprocity***

An overarching theme of all three focus groups was the notion of balance. Participants pointed out the interrelated nature of wellbeing early on and many likened the pursuit of wellbeing to the pursuit of balance in life. Participants stated that if balance could be achieved across all domains, this would create more opportunities to achieve goals and get more out of life, and wellbeing was therefore more likely to flourish. Participants also described navigating ‘tensions and drops’ in one or more aspects of wellbeing. Imbalances occurred when particular domains carried too much weight over other areas. In one of the FGDs, a participant, Kath\*, said, “*It’s a fine balance. If one is out of balance, then the rest of it snowballs. It doesn’t take much for it to completely fold*”. She emphasised the power a single domain had to overwhelm one’s dissatisfaction with life,

and felt that when a domain became unbalanced, maintaining wellbeing became difficult.

Participants also related balance to a sense of happiness or contentment. The relationship between them worked in two directions: balance gave way to happiness but also happiness gave way to balance. The positive outlook from being happy made it easier to take on life's challenges and manage other domains that might weigh too heavily and cause imbalances. Similarly, being abundant in other domains made it easier to be happy, as described in this exchange:

**Chelsey:** *So, what do you need to be happy? What is it about?*

**Chris\*:** *All that [gesturing to linkage diagram].*

**Eve\*:** *I think it's the mindset.*

**Crystal:** *A healthy mindset. Not depressed, or ...*

**Mel\*:** *You need stability to be happy.*

**Kath\*:** *Yeah.*

**Chelsey:** *So, if you flip that on its head ... does instability bring depression?*

**Kath\*:** *Yes. Yeah.*

**Crystal:** *Well, it depends on what else goes on in your life. A lot of it does weigh on you.*

**Kath\*:** *If you have too many negative factors in your life then, like, you're definitely going to be depressed, stressed.*

**Chelsey:** *So, this is about not having depression, not being stressed, being relaxed, having a healthy mindset, positive outlook.*

**Eve\*:** *And then having all of that, having a house, having love, your family, good financial stability, it all kind of makes you happy.*

Closely tied to the theme of balance was the concept of reciprocity. Balance was also about being grounded in the values of gratitude, appreciation, reciprocity, kindness, respect, and care for others. Achieving balance opened the possibility of making positive contributions to one's family or the wider community. It is unclear from the discussions whether achieving wellbeing for oneself also meant improving wellbeing outcomes for

others, or if achieving wellbeing for others was a pathway for one's own wellbeing, or both. However, it was clear that the concept of wellbeing was not an individualistic endeavour – it was closely related to the wellbeing of others:

**Kahai:** *Contentment to me is about balance. Everything balances accordingly when there's contentment.*

**Tee:** *It's about being happy with what you have.*

**Kahai:** *Yes, just everything works well. Your petrol's OK, your wife's OK, your kids are OK, your partner's OK, the shops are OK, the tellers are OK, the prime minister's cool. You know whatever. Your teachers are cool.*

**John:** *It's about serving others.*

### **Finances and Basic Needs**

Most participants spoke about basic needs in relation to stability. Stability was secured by earning an unconditional income, owning a home, and being financially free, which also contributed to feelings of contentment or happiness. Financial stability brought the freedom to focus on other domains that were instrumental to wellbeing, such as giving back to the community, as described by Alice, *"I think if you're financially stable you can also help other people. You're freer to go and do the voluntary stuff instead of worrying about what job you can do"*.

Kahai highlighted the need for stability in her own life while wanting to bring stability to others in her community, saying,

*I would be able to do all the things I want to do, and that's so much. Make a kindergarten, make a kohanga,<sup>11</sup> make a church, make a primary, make the best intermediate. You know? Anything. People can get their cars fixed for nothing, you know? That's what I want to bring. Stability. These are our worries, we worry about every day.*

Participants were clear that having enough for a good life was not excessive or extravagant. They rejected the assumption that living 'well' by today's social standards

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<sup>11</sup> Kohanga Reo is an early childhood education and care (ECE) centre where all instruction is delivered in Te Reo Māori.

entails excess consumption and accumulation of material goods. Additionally, some participants felt it was important to make lifestyle choices that allowed them to concentrate on other aspects of wellbeing that they deemed more desirable. Christine said,

*I have chosen to live a different life – you look at things differently. And so, I look at having my own home is not so important, but having family, having a lovely husband, having that freedom of choice. Like, spending time with your children and having that money to do other things that you wouldn't put into your home so to speak.*

Some participants reflected on stability as having a structure, routine, or predictability in daily life. They emphasised needing to know what to expect in order to cope with sudden shocks or misfortune, suggesting that precarity is a very real part of people's lived experiences. Sudden changes that are outside the control of participants can unbalance wellbeing and be difficult to recover from:

**Kath\*:** *Yeah. I've been in private rental, but I was made homeless because my landlord committed suicide. And then I had to, I was pretty much put out on the street. With my son. And we had to be put into emergency housing, so this was a first for me.*

**Chelsey:** *When did that happen?*

**Kath\*:** *That happened a few months ago, so September. And before that, I had a stable house, I had my own house and ... it's just crazy.*

Having to deal with the stress and depression precarity can bring adds another dimension to the equation. Feelings of contentment or happiness did not feature at all in discussions with participants when referring to financial wellbeing. Indeed, participants indicated overwhelming feelings of stress, anxiety, and depression in these discussions. Worries about the future, especially the future of children, coexisted with concerns for the immediate present. Everyday expenditures for basic goods involved constant sacrifice and cognitive drain, leaving participants with minimal financial or mental resources to draw on when emergencies did arise:

**Kath\*:** *Well, you make sacrifices to cover day-to-day costs. And that can get really depressing if you don't have enough to cover everything.*

*Chris\*: Budgeting. That comes down to budgeting, doesn't it? That's where some people don't know how to do it. Like, they have a budget ...*

*Eve\*: Yeah, but it's hard when you're on such a low income.*

*Chris\*: Yeah, that's dead right.*

Social service organisations are there to provide support to people in exactly these circumstances. However, participants' attitudes towards external support structures were unfavourable at best. To begin with, they highlighted a lack of information and difficulty finding where to access support when they needed it. The search for information was a time-consuming process. Kath\* revealed her struggle to find help when she lost her home, saying,

*Yeah, I had to go looking. You actually have to go looking and you have to do your research. I had to do a lot of research online before I found what kind of help I could get. Yeah, it's all hidden.*

Participants widely expressed that a reliance on external support services was exhausting, stressful, degrading, and often a last resort. They frequently experienced a lack of respectful treatment when interacting with officials from support agencies, citing humiliating encounters which had a stigmatising effect. Others employed strategies to avoid 'entangling themselves' in the social service system for this reason, albeit doing so required a significant amount of strength and resilience. Reeva referred to navigating the complex system as a 'fight' and employed work-around strategies that helped her to improve her chances to receive the support she needed, saying,

*I've had numerous encounters with government organisations that ended in me writing letters to the local MP or whoever is overseeing that, and I've always got what I needed. But the build-up around that is mountains of stress.*

## **Health and The Self**

There was considerable overlap in the discussions surrounding physical and mental health, and these domains were often raised jointly. When I asked participants about how to achieve good mental health, responses varied from taking time to exercise and eating well, to managing stress and relaxing. A healthy body was an act of self-care and

was instrumental to a healthy mind. Physical health paved the way to a sense of accomplishment and confidence, as well as warding off sickness:

**Lily\*:** *You feel good, you feel like you can take on ... you can do more. You're confident.*

**Deanne:** *You don't get sick as often.*

**Chelsey:** *Anyone else?*

**Emmanuel:** *Healthy body is you adapting, you sort out yourself with what's going on. Like the health commission stuff. You're encouraged to get the right kai, find places to exercise. So really, it's on your own or family support or community.*

**Kahai:** *All of that and your body as well.*

**Tee:** *Yeah, and you get a natural as high too, when you ... it's like a positive, accomplished high.*

**Chelsey:** *Totally. It's like a feeling of self accomplishment.*

**Tee:** *And drinking water is good too because you feel like it's like an energy drink and it makes you ... your head's right you don't get migraines and that.*

Physical and mental health were the most frequent and most salient contributors to wellbeing yet access to health services did not feature at all in discussion groups. Emmanuel discussed the health problems facing his wider community, namely diabetes and weight issues. For him, much of the onus fell on individuals making the right decisions about their health and maintaining those decisions with the support of family and the wider community. Emmanuel emphasised this point with his choice of sticky dot placement, explaining,

*OK? But this one, I put here because of everyone's health. It's important that you do something about it. At the end of the day it is you. If you want to do exercise, well, run the block, aqua-aerobics, there's the gym. But if you're uncomfortable with that, that's the journey. To learn how to be comfortable with things and, but yeah. Solid support. That's the main thing. Family or friends. Yeah, anything that helps that's really, really awesome. That's solid. Like, the word 'solid' it's strong. The foundation, everything that you stand on. It's true, it has to be strong. But for my mind, why I put this one was the fact that, yeah, health is an issue for our*



*people. Diabetes and all these things that happen. So, are we encouraging our folk, are we encouraging our whānau, are we encouraging ourselves? Because we can be the naughty ones sometimes. But, you know, have a laugh here and there, that's all fine, but at the end of the day, we get older and older. Yeah, that becomes the unknown. But we do know the information, but the things is, let's press on together, let's carry on.*

Many participants described the 'self' as a key element in wellbeing. This was expressed as having self-respect, self-love, inner strength, being proud of who you are, and nurturing other aspects of mental wellness. While closely related to mental health, the notion of the self was distinctive in that it was described more in relation to personal fulfilment and the pursuit of a true and authentic self. Some noted that this sense of self was a fundamental precursor to pursuing other aspects of a good life. One participant described the process as 'filling the bucket' so that there was enough to spill over into other dimensions. Self-care strategies for inner strength were an intuitive process that varied from person to person, so there was no consensus on how this was achieved. It was clear, however, that participants could draw on their strong sense of self to develop a positive mind set, which was instrumental in providing motivation to pursue other aspects of wellbeing. By contrast, lacking a sense of self may lead to anxiety and self-doubt, which could manifest as an inability to overcome barriers to wellbeing. The idea of working on wellbeing from the inside out, or 'feeling well to live well', was noted by Reeva, who said,

*Yeah, for me, the self is paramount, and all the other things are what happens when you're taking care of that space. When you're in a good space, that's when you're going to want to do health and wellness, and that's when the other things just happen. You know, the empowerment comes from feeding yourself, you know the good food, creating good values and then you've got your spirituality. I just think that it all starts with you, and all of those other things create the good life.*

Connecting the self to one's values, as noted by Reeva, was a common sentiment among others as well. Sen (1999) reminds us that wellbeing is about the ability to pursue a life that one has reason to value. It follows that if values are considered the underlying determinant of, and guiding principle for, the beliefs and behaviours that promote wellbeing, a deeper connection to one's value system could bring greater clarity to the

kind of life it is good to lead. Research by Gan, Heller, and Chen (2018) found that the experience of being true to your authentic self gave people a sense of power. These findings are consistent with Chivon's experience, who noted in her FGD that being grounded in her values gave her more power and control to achieve other aspects of wellbeing, such as her health and financial stability:

*I feel like if you don't know yourself or know your values you can't reach out to the outsider cores. So, I feel like if you know yourself then you can move towards how to handle your health and then what would help to lead you to empower yourself to then move to the financial circle.*

It is important to note that the 'feeling well to live well' observation does not work in reverse – that is, feeling well leads to greater capability to achieve financial stability, yet financial stability may not necessarily lead to feeling good about oneself. This was summarised by another participant Christine, who focused primarily on ensuring there were enough material resources for herself and her family while always putting herself last. This was not enough to ease her mind or bring a sense of wellbeing:

*You know back in the days we didn't get a lot of money on the benefit, so I found that when the benefit came, because it was only paid fortnightly, as long as the rent was paid, the power was paid, the children were looked after, I was fine. I wasn't, but that's what I made myself think. I didn't focus on me.*

She also described the negative impacts that a lack of income had on her mental health, suggesting that while an increase in material goods was not uniquely sufficient to improve one's lived experience, a decrease in material goods had a significant negative impact on one's subjective quality of life. She went on to explain,

*But if something crashes, which it did this year – trying to get the car registered and warranted and with everything else – I just couldn't control how I felt because I'd be depressed and things. Depression sets in very fast with me if things are not OK.*

In this case, income had the power to trigger negative drops in wellbeing more than it had the power to increase wellbeing, suggesting a better financial situation may not necessarily accompany better wellbeing. The following exchange further illustrates this point:

***Eve\*:** It's also the same with happiness and finances. That would be the same thing because it's the same as 'money doesn't buy happiness' but, you know, when you do have money it does help. But then, when you don't have it you're like 'shit' when you can't go buy any food or you can't get the necessary stuff to do what you need to do.*

***Kath\*:** Ah, yeah, that's true.*

***Chris\*:** This time of year is hard. There's plenty of hardship around, isn't there? Christmas time, Jesus.*

***[murmurs of agreement from the group]***

***Kath\*:** Yeah, it's a reminder that you're struggling.*

### ***Autonomy, Agency, and Freedom of Choice***

Across all the FGDs, participants' conceptualisations of wellbeing included autonomy, agency, and freedom of choice. Autonomy was viewed as the ability to draw on one's own inherent power to devise one's own authentic path towards wellbeing – some participants called this 'empowerment'. Exercising freedom of choice related to several ideas: setting and achieving goals; receiving support from family or community; choosing how to spend one's time; and having the freedom to construct a life in whatever form or direction one chooses. Having control over one's life without conforming to societal pressures was considered a human right by Kahai:

*They've got a system and a structure that's set up, but it's to how they believe and how they want people to accordingly abide by, and that's wrong. People should be able to live the way they want, but when you have education and knowledge and being informed, that gives you more stand to make the right choices where these other things can be managed well.*

Autonomy was primarily associated with learning and education in the FGDs. The concept of education featured in all three groups but was given its own domain only once. According to many participants, education influenced employment opportunities and brought a wider range of social and economic opportunities which were essential in breaking free of cyclical deprivation, as illustrated by Christine:

*I've learnt this.... Everyone is being brought up by the family cycle. It takes one person, in this case a sibling, to break that family cycle to go to the next generation. Otherwise, it just goes down generation through generation. Because that's all they need to know. It takes you to think, OK, we've gotten out there and we're going to learn to do things differently that breaks that family cycle. I was one of them.*

Many participants indicated that they valued formal education as the key to a better future for their children. Christine went on to explain,

*I went to the schools and explained to the principal that I didn't have a good upbringing, I didn't have good schooling, and I wanted better for my children. We looked at options. My children have become good readers, they're good in a lot of aspects, because I didn't want them to grow up like I was. That I couldn't read properly or couldn't spell as good as my children do today.*

However, cost was seen as a significant barrier to obtaining a quality education for children. Rebecca discussed the high costs of schooling and other associated fees:

*If we can't get the uniform, how's my son going to go to school? You know, he needs his education. I want my children to be educated. And I mean, we priced up his uniform for next year, and I'm looking at like \$1000, and WINZ is still saying because he's under shared care, that I can't get any assistance for that. But I'm like "It's a uniform for college!" It's not like I can just pull a thousand dollars out of my back pocket. It's just ridiculous.*

Education was also the key to socio-spatial mobility and the spaces that participants felt comfortable occupying. Some public places felt off-limits to participants when they felt they might be scrutinised on their language or education. Gough et al. (2014) noted that the capacity to make informed choices about one's wellbeing and how it should be achieved is impaired if there are no opportunities to participate in social networks. In this case, Alice practised self-exclusion due to the shame of not feeling educated enough:

*I left school, I was one of those. But I left school and so I want all my nieces and nephews to have a good education and I'll always encourage education because I feel that if you're educated, you can go more places. You know work ... You can fit*

*in places as well, like, even some places like cafes. Going to cafes ... I didn't like going to cafes because everyone seemed like they were more educated than me.*

Participants also discussed forms of learning and knowledge generation that extended beyond formal institutions. Community education courses, knowledge sharing within family and wider community members, and television were all sources of information that participants drew on to inform themselves. They stressed that staying informed was considered a choice, just as ignorance was a choice to stay 'weak' and uninformed. Emmanuel spoke of drawing on that knowledge to actively drive positive change within himself and to inspire others as well. He noted that increased knowledge drove the potential to transform others in his community:

*And the other thing with all this is very essential because of the fact that we become the teachers. You know within our families, within ourselves, within the culture, within the church, we become the teachers. If we know all this, and we know the problems because we experience it, then we change the ones who are closest to us.*

### ***Culture and Identity***

Identity and belonging were strongly linked with family and whānau (extended family relationships). Family and whānau were instrumental in creating an accepting and forgiving environment, which was important for endorsing a strong sense of self. A warm and welcoming attitude from family and whānau was identified as important to wellbeing because participants felt they could be themselves and draw confidence from that. However, some participants reported that older family and whānau members sometimes enforced overly strict rules or could be less accepting than the participants liked, which left them feeling excluded or unwelcome. A sense of forgiveness and love were important parts of family connections. Tee disliked when her whānau rejected those with gang affiliations on her ancestral marae:

*Oh, old ladies. I just don't agree with some of the rules they have up in maraes and that. Or like, if someone was to come into our church with a patch, with a mongrel mob, a gang patch, you know, it's like all-good. But then at a marae they'll be like, "Oh, look at this one with his patch on". And then they'll have a meeting about kicking that person off. So, yeah, they need a bit of letting go.*

For some, family and whānau were strongly tied to cultural identity as they played an important role in helping to foster a sense of cultural pride. Cultural traditions were passed down and protected through family networks and participants saw their family as a gateway to the customs, practices, languages, values, and world views that defined their heritage. Durie (2003) noted that for Māori individuals, positive cultural links and relationships enhance internal understanding, which contrasts with commonly held theories in psychology that a strong sense of self stems from searching within. A lack of cultural pride could be mentally and emotionally draining, as elaborated by Kahai, who discussed the links between whānau, cultural identity, and mental health:

*You know, I'm talking from a gang perspective as well. I'm talking ... a bro that's gay and all those kinds of things, you know. That's a cultural identity as well, and they struggle, and they go through hardship and they get depression, stress, everything because of that may affect them, but if we can share out to the nation that it doesn't matter what your ethnicity is, or who you are, or what walk of life you came from, we love you. That's my whakaaro [opinion] about that topic. And people can go off the rope, they hang themselves because of that cultural identity, but we need to tell the people that you have to love who you are.*

This is echoed by Durie (2003, p. 143) who cites that cultural identity is a “hallmark of good mental health”. He notes that whānau are in the best position to help realise human potential, and, conversely, that dysfunctional whānau contribute to poor wellbeing when they impede access to language or customs. Naturally, not all people who have mental health problems have an insecure cultural identity (Durie, 2003).

### ***Family/Whānau and Community***

The role of family and whānau featured very prominently in all three FGDs. Wellbeing was a balancing act, and many participants mentioned that a lack of strong connections to family would cause many other domains of wellbeing to collapse. Two aspects of family and whānau were evident. Firstly, they were seen as a source of support. Secondly, they were seen as a connection to culture and a sense of identity (this will be explored in the following section). Participants highlighted several emotional connections that accompanied a supportive family, particularly love, respect, and loyalty. Reciprocity was equally important, that is, providing support in kind to other

family members and extended family networks to maintain strong relationships. Obligations to family and whānau were seen more as a responsibility than a choice.

However, participants expressed trade-offs that accompanied the support gained through family networks. Some participants made more use of informal support networks than external support structures, although this was not always the preferred option. Looking after family and whānau required additional resources that participants were not always in a position to provide or may have led to some form of personal liability. Crystal described these risks, saying, “*Yeah, you get into trouble when you’re sharing your home. Who wants to see family or friends on the street? And then you take that risk of getting kicked out of your own home for helping them*”.

Kath’s\* experience with homelessness was exacerbated when she secured her rental property via extended family connections instead of through standard rental procedures. Her connections with the landlord’s family meant she was not required to sign any paperwork, but this left her unable to legally claim a grace period to vacate her home when her circumstances changed:

*I was renting out a house and then the landlord committed suicide, so the family took over the house and they just put me out on the street. No, like, notice, nothing. Just out.... You need an actual bond paper and they didn’t ... so these people, they co-signed with someone else, it was like him and his brother, and I knew them. And as soon as that happened the brothers took over and it was, you know ... yeah. It was devastating.*

Generally, participants expressed sympathy for those without strong family and whānau connections. The commonplace practice of using family support systems warrants questions into the quality of support available to those without family resources on which they can rely. Some participants who did not have strong family connections compensated by relying more heavily on formal external support structures.

### ***Spirituality***

Spirituality was discussed in two of the FGDs. Some saw a strong spiritual connection as the most important aspect of their wellbeing as it had the most overarching influence (positive or negative) over other domains. For these participants, good spiritual health reflected a mental state of harmony, happiness, and peace of mind. For others, spiritual

life and religious observance were woven in with other aspects of wellbeing. Spiritual connection gave people the lift and support they needed to be resilient. Tee and Kahai discussed how a lack of spiritual wellbeing would be devastating and would radiate to all other aspects of their wellbeing. Kahai also emphasised spirituality as a central focus, noting that when she had little spiritual wellbeing to draw on, her family acted as her source of wellbeing:

**Tee:** *If my belief crashed, all of my things would crash. I wouldn't be able to do all of that [gesturing to linkage diagram] by myself.*

**Kahai:** *But I've been through when my belief did crash, my family picked me up. But I still went back to belief.*

Kahai went on to explain that spirituality was the foundation of her sense of personal resilience, acting as a source of what she called 'solid support':

*And then with solid support and all of that, we get that from the belief if you're walking it properly. You'll get that solid support. A lot of people are just normal humans that go with their personal opinions and their personal beliefs. Is it the bible teaching their own beliefs though? Because we're still screaming out for solid support.... You'll learn that through belief. You learn all of that through belief. You learn all of that whole paper [gesturing to linkage diagram] through belief.*

## **Time**

Participants recognised time as explicitly important to wellbeing. The concept was divided into two aspects: leisure time and temporal experiences of wellbeing. Firstly, participants defined leisure time as pursuing interests they cared about. Participants valued having time to themselves for personal or spiritual activities, taking care of physical and mental health, and spending time with their children and family. Leisure time was defined as being separate from work and other commitments, such as housework or childcare. In some cases, participants felt too rushed to pursue all the interests they wanted for themselves and their family, as Crystal remarked, *"I do feel stink like when my daughter wants to play sports, I hate letting her down. But just the whole travel, we can't travel too far to get her there, you know?"*.



In terms of influencing wellbeing, regardless of how satisfied participants felt with the quality of their leisure time, a primary concern was also the control they had over the choice of the activities they did pursue. Eriksson, Rice, and Goodin (2007) highlight the intrinsic value that autonomy over one's time has on life satisfaction. They noted that a sense of control in this respect signals to an individual that the "trade-offs that are part of everyday life reflect priorities of one's own choosing" (Eriksson et al., 2007, p. 525), highlighting that the way we live our lives is reflective of our own decisions. Reeva mentioned that she valued choosing how to spend her time, which differed depending on the day, saying, *"I'm going to pick Time first because I'm not fussed about spending time with my children and extended family, but point blank how I want to spend my time"*.

Secondly, participants highlighted that time had a dynamic effect on how wellbeing was experienced. Wellbeing was not seen in static terms, but rather as a fluid concept subject to change over time. The temporal effects of wellbeing were illustrated by Reeva, who chose to link all domains in the diagramming activity with 'strong', 'medium', and 'weak' connections all at once:

*The rest of them, because I think they're all connected, but for me, I've drawn them all with all of the colours because it really depends on how it is at that moment in time. Some days I can be really strong. Other days, nah.*

Time affects the structural, political, and social landscape that contributes to how wellbeing is experienced in any context. Following Reeva's example, the choice of domains that make up wellbeing, the level of importance attributed to those domains, and the nature of the interrelationships between them is subject to change, influencing how wellbeing is experienced throughout a person's life. A temporal view of wellbeing, one that is variable and constantly changing, has direct consequences on wellbeing outcomes at the local level. As the determinants and composition of wellbeing changes, the question of whether it is possible to measure against a pre-established and static 'baseline' comes into question (Beauchamp, Woodhouse, Clements, & Milner-Gulland, 2018). Much of wellbeing measurement depends on an empirically conceived baseline for understanding the impacts of policy interventions; however, under this conceptualisation, the heterogeneity of wellbeing experiences across time makes such comparisons uncertain.

## Micro to Macro: Making the Comparison to High Level Frameworks

To understand how alternative narratives of wellbeing are situated among more dominant narratives, it is important to compare community-derived conceptions of wellbeing to New Zealand's macro level wellbeing agenda. The wellbeing domains described by participants have many points of connection with the Living Standards Framework (LSF). Although the overlap is imperfect, it is possible to re-categorise many of the community-derived wellbeing domains to match the LSF domains. Table 4.3 synthesises the community-level domains alongside their LSF counterparts. Regrouping the community-derived domains under the LSF categories was done with careful consideration of the participants' original intent. The right-hand side of the table presents summary definitions of the LSF domains. It was not possible to represent all community-derived domains under the LSF: Three domains, *Spirituality*, *Balance and Reciprocity*, and *Agency* (identified with grey shading), emerged at the community level but could not be regrouped because the intent behind them was not adequately captured in any of the LSF definitions. Note that there were two LSF domains, *Environment* and *Jobs*, that did not feature at the community level.

**Table 4. 3. Wellbeing Domains Under the Living Standards Framework**

Community Domain	LSF Domain	LSF Definition
Love	Subjective Wellbeing	Overall life satisfaction and sense of meaning and self
Happiness		
Self		
Being Loved		
Loving Yourself		
Motivation		
Health & Wellness	Health	Our physical and mental health
Healthy Body		
Wellbeing		
Kai		
Family	Social Connections	Having positive social contacts and a support network
Forgiveness		
Social Support		
Whānau		
Financial	Income and Consumption	

Stability		People's disposable income from all sources, how much people spend and the material possessions they have
Belief	[Spirituality]	N/A
Spirituality		
Time	Leisure	The quality and quantity of people's leisure and recreation time (i.e. people's free time where they are not working or doing chores)*
Structure/Routine		
Abundance	[Balance and Reciprocity]	N/A
Achievement		
Respect		
Resilience		
Appreciation		
Learning and Informed	Knowledge and Skills	People's knowledge and skills
Education		
Empowerment	[Agency]	N/A
Culture and Identity	Cultural Identity	Having a strong sense of identity, belonging, and ability to be oneself, and the existence of cultural taonga

Structures (External)	Civic Engagement and Governance	People's engagement in the governance of their country, how 'good' New Zealand's governance is perceived to be, and the procedural fairness of our society
Home	Housing	The quality, suitability, and affordability of the homes we live in
Safety	Safety and Security	People's safety and security (both real and perceived) and their freedom from risk of harm, and lack of fear
N/A	Environment	The natural and physical environment and how it impacts on people today*
N/A	Jobs	The quality of people's jobs (including monetary compensation) and work environment, people's ease and inclusiveness of finding suitable employment, and their job stability and freedom from under-employment**

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\*Due to a lack of robust and comparable data, there are currently no official measurements for Leisure, Environment, and Jobs. These three domains were excluded from the Treasury's current analysis of wellbeing. The definitions indicate how these may be measured in future iterations of the LSF, based on the descriptions outlined by the Treasury (New Zealand Treasury, 2019).

Following the re-categorisation of participants' wellbeing domains into the LSF, table 4.4 shows the contributors of community-level wellbeing ranked from highest to lowest according to their salience score. The top five contributors were *Subjective Wellbeing*, *Health*, *Social Connections*, *Income and Consumption*, and *Spirituality*.

We can see from tables 4.3 and 4.4 that certain domains considered important and, in some cases, central to participants' wellbeing were notably absent from the LSF. This suggests that the wider wellbeing agenda does not adequately represent the participants' views of the significant contributors to wellbeing.

**Table 4. 4. Consolidated Rankings of Domains Under the Living Standards Framework**

Rank	Domain	Frequency (%)	Salience (%)
1	Subjective Wellbeing	100	17.1
2	Health	100	16.7
3	Social Connections	100	12.1
4	Income and Consumption	100	11.0
5	Spirituality	66	8.2
	Leisure	100	8.2
6	Balance and Reciprocity	100	6.0
7	Knowledge and Skills	66	5.3
	Agency	33	5.3
8	Cultural Identity	33	3.2
9	Civic Engagement and Governance	33	2.8
10	Housing	33	2.1
11	Safety and Security	33	1.8
12	Environment	0	0
13	Jobs	0	0

It is striking that participants did not create domains for the *Environment* or *Jobs* given that both of these domains feature in New Zealand's LSF and in international wellbeing frameworks such as the OECD's BLI and the SDGs (King et al., 2018). In these frameworks, jobs are distinguished separately from income to capture the quality and availability of employment and the role it plays in building skills and competencies. The

environment often holds special focus in New Zealand, as illustrated by the New Zealand Productivity Commission, which found that environmental quality was one of the highest influencers of overall subjective wellbeing relative to other OECD countries (Jia & Smith, 2016). However, the fact that the natural environment or job quality were not given their own domains does not mean to say that these factors weren't valued by participants. Participants spoke about outdoor pursuits with their children or family such as going to the beach or to the park. The subject of jobs was referenced mainly in relation to income streams, which was already captured by the *Financial* domain. This may suggest that the two domains feature less prominently in people's daily lived experiences, or that there is greater concern and urgency over other domains, or both. For example, the income earned from a job may have more direct benefits to wellbeing than the quality of it. It may also be that concerns for the natural environment are more important as a matter of sustainable (intergenerational) development, considering participants referenced this domain as something they cherished for their children.

This section has compared community-derived wellbeing views with national-level measurements and revealed commonalities to the point that many wellbeing domains created by participants could be grouped under the LSF. However, there were some notable discrepancies in the number and categories of domains. The following is a brief discussion of the implications this may have on wellbeing policy in New Zealand.

### ***Context Matters***

While New Zealand has joined ranks with many countries around the world that are taking up the challenge of measuring progress on multidimensional wellbeing, it is precisely this concern for international comparability that raises issues about the LSF's capability to reflect the wellbeing of New Zealanders who are experiencing hardship. A Treasury discussion paper by King et al. (2018) revealed that several wellbeing frameworks were considered as models for New Zealand's national measurement scheme, but that ultimately the OECD's Better Life Index (BLI) was the preferred choice. The BLI aims to measure wellbeing in OECD countries across 11 domains of wellbeing. The Treasury's recommendations focused heavily on the BLI's international comparability and its credibility within the international landscape. Surprisingly, the BLI was adopted in spite of a number of other frameworks that were considered superior in aspects that were important for New Zealanders' wellbeing (King et al., 2018). The

paper acknowledged that the suitability of the OECD's framework to the New Zealand context was lacking and, for this reason, the LSF was subject to a minor customisation with the addition of *Cultural Identity* as a twelfth domain.

The BLI is the result of extensive interdisciplinary research and was crafted with the intention of creating a set of universal wellbeing domains that were useful to draw comparisons across countries. Although international comparisons are effective for gaining a sense of place in the wider wellbeing landscape, it is important that New Zealand's measures of progress are not lost in a quest to benchmark itself against the international community. While the LSF is enriched by a *Cultural Identity* domain, this alone does not serve to contextualise the BLI to New Zealand's socio-political circumstances. Since wellbeing is a social construction, it needs to be defined by the communities in which wellbeing is to be assessed (Gough, 2004). However, the adoption of the LSF domains and their measurements were never established as a result of deliberative debate, but of a modified OECD framework.

When comparing the community-derived domains with the LSF, there was a strong degree of convergence; yet there were also some critical discrepancies. The participatory methods applied in this study revealed rich information about how participants conceptualised and experienced wellbeing, illuminating wellbeing domains that were overlooked at the macro level. Three domains stood out as categorically distinct from any of the LSF domains: *Spirituality*, *Balance and Reciprocity*, and *Agency*. Moreover, participants' perspectives gave rich contextualisation and nuance to the domains as they were experienced in daily life. Each domain had diverse interpretations of the factors that comprised them, including marked conceptual differences in how and why they were relevant. This revealed a multidimensionality within domains that does not exist in their macro level counterparts, where domains often play singular roles in the generation of wellbeing outcomes.

I illustrate this with the *Social Connections* domain. Participants emphasised social connections as intrinsically valuable in three ways. Firstly, they were sources of emotional support. Strong relationships with friends, family and whānau, and the wider community provided sources of love and friendship, which were important for maintaining resilience and a sense of balance. Secondly, social connections played a vital role in developing social capital. Opportunities to give and receive support from others



were key reasons why strong social networks were valued by participants. Lastly, connections with family and whānau (grouped under *Social Connections* in the LSF) were an important source of cultural identity and belonging. Unfortunately, much of this nuance becomes lost at the macro level. The LSF measures social connections according to three elements: the extent to which people feel lonely; the frequency of contact with friends and family; and perceived discrimination from others (New Zealand Treasury, 2019). The LSF's emphasis on the frequency of social contact fails to capture aspects of the quality or nature of social connections that were relevant for participants. This was particularly true of the reciprocal nature of social networks that were essential for building social capital. This exclusion was explained by Smith (2018, p. 26), who recommended that the *Social Connections* domain in the LSF focus on the "intrinsically pleasurable aspect of social contact rather than the role of social connections in developing social capital". Interestingly, the BLI contains criteria that assess the quality of supportive relationships by measuring the percentage of adults who report that they have friends or relatives they can count on in times of trouble (OECD, 2019). A similar measure was not adopted into the LSF framework.

Similar discrepancies were found in other domains, such as in *Knowledge and Skills*. Participants valued knowledge and skills as a way of increasing the opportunities available to themselves and their children. This included a sense of autonomy and control over their lives and the extent to which they felt they could participate in wider social networks. In contrast, the LSF evaluates knowledge and skills only by the objective attainment of formal qualifications (McLeod, 2018; New Zealand Treasury, 2019). As mentioned previously, participants gained knowledge and skills through many informal avenues, not only through formal education. The LSF's interpretation of this domain does not consider how knowledge and skills expand opportunities for freedom of autonomy, nor does it address other forms of learning that may be valuable at the community level. The rich context that participants provided for the *Knowledge and Skills* domain meant that it could be explored in many other ways that are valuable to wellbeing.

### ***Objective and Subjective Wellbeing***

The above examples prompt a comparison between objective and subjective wellbeing at the micro level and macro level. As explained in Chapter Two, subjective wellbeing is

commonly understood as comprising three types: emotions (affect), a sense of purpose (eudaimonia) and a cognitive assessment of one's life (life satisfaction) (OECD, 2013). When asking participants directly about their wellbeing, it was not possible to disconnect any domain from participants' subjective experience of it. As Rojas (2007) observed, subjective wellbeing is connected to everything that makes a person what they are – it is inherent in a person's experience of wellbeing. The LSF treats subjective wellbeing differently from other domains because it is considered a proxy for overall wellbeing. For this reason, it has a somewhat 'removed' status in the recognition that all other domains contribute to it (McLeod, 2018). J. A. McGregor (2018) noted that this risks the interpretation that a subjective assessment is not required for other domains. Both objective and subjective assessments are valuable for all domains because looking at both components highlights situations where the two may be in conflict (A. J. McGregor, Camfield, & Coulthard, 2015). For example, one may earn a large income, yet if it was earned through demeaning work, it came at the expense of good subjective wellbeing.

As noted earlier, while *Knowledge and Skills* was assessed in the LSF strictly on objective terms, its value extends far beyond this in people's daily lives. Following Sen's (1999) logic that what matters is not what resources people have but what they can do with them, a good life is not just a matter of obtaining a Bachelor's degree, but also of whether that degree has provided opportunities for greater freedom to participate in the wider community or the skills to lead a more autonomous life. Incorporating community-level narratives to understand the context in which wellbeing domains play out is arguably as important as the domains themselves. The inherent subjectivity of wellbeing reveals nuanced interpretations of not just *what* is important to wellbeing, but *why* it is important, as well as providing insights on *how* measurements can be more tailored to capture what matters most to people.

The aim of this discussion was to emphasise the notion that our measures have a significant impact on how wellbeing is framed. If community-level interpretations of why domains are important and how they are experienced are not consistent with our measures, then our measures must change. Failure to recognise this may lead to wellbeing policies that have little relevance to New Zealanders facing hardship, risking a

perpetuation of the inequities that were the cause of the shift to wellbeing conversations to begin with.

## Chapter 5: Exploring Interrelated Wellbeing

This chapter presents the findings of the quantitative data from the diagramming and free-list survey exercises. A key purpose of the quantitative element of this thesis is to reframe wellbeing into a multidimensional and holistic process by highlighting the nature of the relationships between wellbeing domains. This chapter will explore these relationships via a series of chord diagrams and a nonmetric MDS solution.

### Chord Diagrams

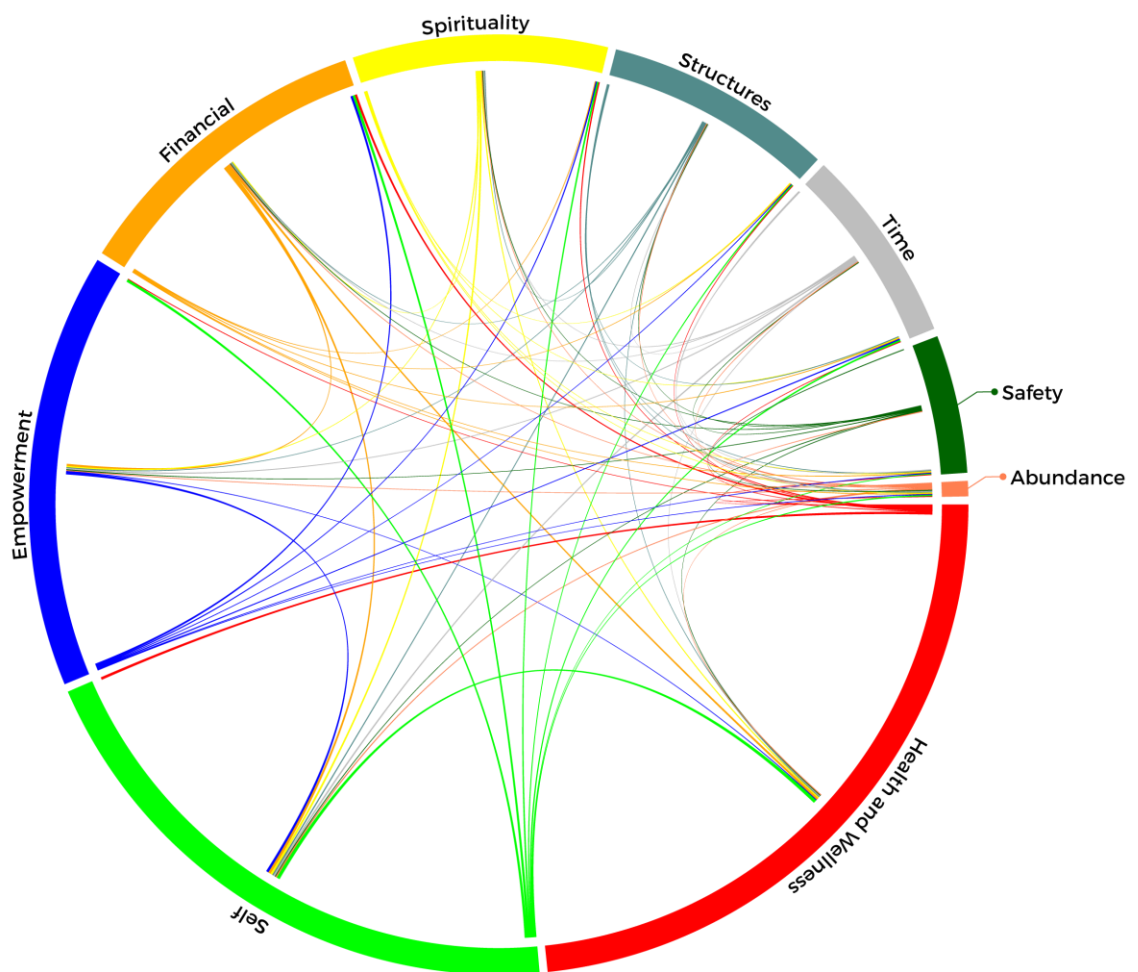
The previous chapter explored participants' conceptualisations of wellbeing as being composed of material, physical, social, psychological, and spiritual domains. The relative weight of each domain and their relationships to each other were determined by participants through the linkage diagramming activities, therefore I was able to generate a separate set of results from each focus group in addition to a set of consolidated data from across all three groups. This section presents these results in a series of chord diagrams that enable an examination of the relationship between wellbeing domains. Due to the large number of diagrams produced, I have chosen to draw my analysis from only the diagrams that represent consolidated data across all three focus groups.<sup>12</sup> However, to introduce the diagrams and provide context on how they were interpreted, Figure 5.1 provides an example a chord diagram from the results of the FGD 1.

Each wellbeing domain is represented by a coloured arc on the outer part of the circular edge. The length of the arc is proportional to the weight participants placed on the domain, which forms its salience. The colours of the arcs were chosen arbitrarily to make them visually distinct from one another. In the centre of the circle, the connections between domains were represented by chords that run from one arc to another. The thickness of the chords is proportional to the strength participants attributed to them: thicker chords represent a stronger connection. Finally, the exact place the chords converge at the base of the arc, and the negative spaces between them, are not relevant

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<sup>12</sup> Results from each focus group are presented in their own chord diagrams. See appendices G, H, and I.

to the graph's interpretation. This was simply due to R's design feature and could not be changed.



**Figure 5. 1. Chord Diagram Displaying Results from Focus Group 1**

Naturally, the chord diagrams are not concrete representations of wellbeing. Instead, they are to be used as a tool to conceptualise how wellbeing domains are related. Miles and Huberman (1994) discuss how causal diagrams help us to think about whether one phenomenon has causal effects on another. However, it is important to note that these diagrams do not capture previous experiences or life events, which would have impacted how participants linked domains. As Miles and Huberman (1994) observed, the chord diagrams are not intended to be interpreted as a chain of billiard balls, where domain A invariably impacts domain B. Instead, they reflect the observation that interactions operate in a larger network system and represent the current response to a larger series of events in people's lives.

## ***Chord Diagrams of Consolidated Results***

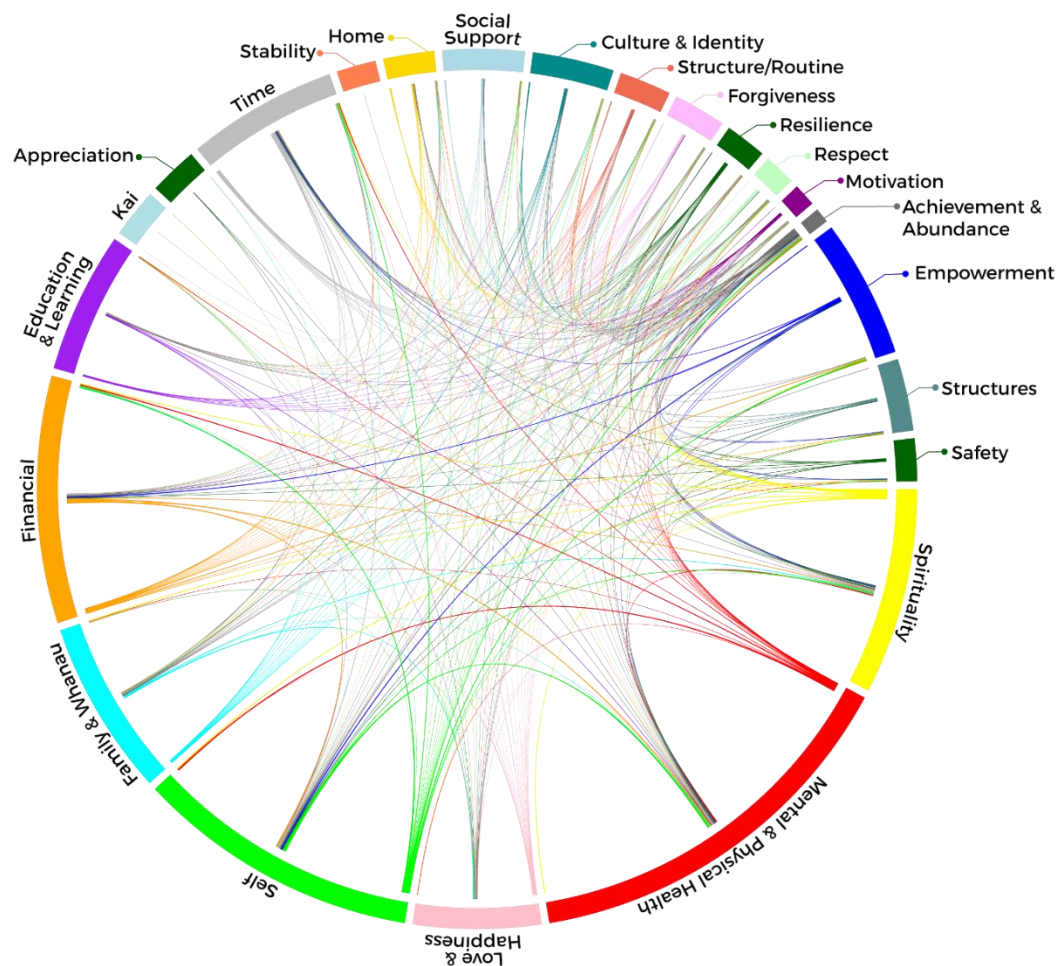
Figure 5.2 illustrates a chord diagram generated from the consolidated list of domains from all three FGDs.<sup>13</sup> The circle is split into 23 domains with the arc length scaled to the weight (or salience) of each domain. The consolidated linkages from the focus group activities form 558 connections in total. There are two types of connections: chords stemming from the domain, identified as source connections; and chords coming to the domain from elsewhere, identified as recipient connections. These are possible to identify from the diagram by their colour: source connections share the same colour as their parent arc. The figure is accompanied by Table 5.2 to clearly show the salience of each domain and the combined strengths of the source and recipient connections.

As shown, the domains with the highest salience are *Mental & Physical Health* (14.6%), *Self* (10.8%), *Financial* (9.4%), and *Spirituality* (8.0%). On average, domains with the highest salience attract the strongest connections from other domains. *Mental & Physical Health*, for example, has the strongest recipient connections (54). These top four most salient domains also have the strongest source connections, with *Self* topping the list (56). As these domains are the most strongly connected, it is possible to infer that they carry a high relative influence over other aspects of wellbeing.

By contrast, domains with low salience generally have fewer connections to other domains. For example, *Kai*, *Appreciation*, and *Stability* have very low source and recipient connections. This indicates that they were less important to participants at the time and carry relatively little influence over other aspects of wellbeing. *Kai*'s only source connection is to *Time*, and its recipient connections are from *Time* and *Financial*. *Stability* has one connection to *Mental & Physical Health* and no recipient connections from other domains.

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<sup>13</sup> As they were listed in table 4.2.



**Figure 5. 2. Consolidated Wellbeing Domains**

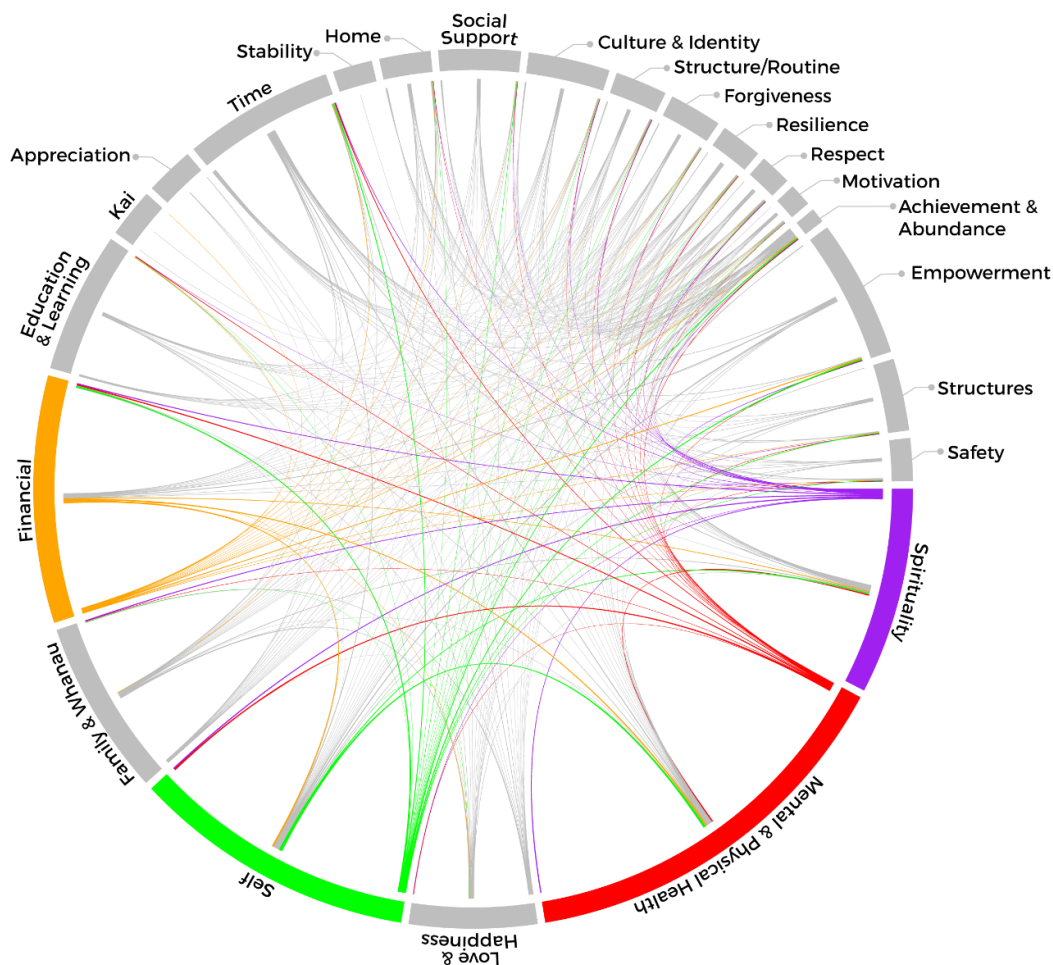
**Table 5.2. 1.Consolidated Wellbeing Domains**

Domain	Salience (%)	Source Connections	Recipient Connections
Mental & Physical Health	14.6	49	54
Self	10.8	56	53
Financial	9.4	50	47
Spirituality	8.0	50	51
Family/Whānau	6.6	30	31
Time	5.9	43	41
Love & Happiness	4.9	26	26
Education & Learning	5.2	18	19
Empowerment	5.2	25	25
Social Support	3.1	17	17
Culture & Identity	3.1	18	18
Structures (External)	2.8	17	17
Home	2.1	18	20
Structure/Routine	2.1	17	18
Forgiveness	2.1	16	16
Safety	1.8	16	16
Kai	1.7	1	2
Appreciation	1.7	3	2
Resilience	1.7	20	17
Stability	1.4	1	0
Respect	1.4	18	18
Motivation	1.0	16	16
Achievement/Abundance	1.0	33	34

In the focus group discussions, participants strongly associated income with stability. It was therefore striking that the *Stability* domain was not linked with *Financial* in the diagramming activities. This may indicate that the linkage diagramming activities do not precisely reflect the nature of the focus group discussions in all respects. Rather, they are a representation of how participants chose to link domains following the discussions.

It should be noted that domains with low salience do not necessarily have fewer connections. For example, despite *Achievement & Abundance* scoring among the lowest salience (1.0%), it carries far more source and recipient connections than, for example, *Kai*, which has a higher salience (1.7%). From this, it is possible to reason that the salience of a domain does not necessarily equate to its influence within the wider system.

To offer more clarity and to bring attention to the pathways that some chords take, Figure 5.3 highlights the top four most salient domains.



**Figure 5. 3. Consolidated Wellbeing Domains (Top Four Most Salient)**



In this diagram, the strongest connection is from *Self* to *Mental & Physical Health*, represented by the thick green chord connecting the two domains. Participants weighted this connection at a combined strength of 10 in the diagramming activities. The strength of this connection aligns with focus group findings that a sense of personal fulfilment is closely related to participants' health. Conversely, *Mental & Physical Health* has a strong connection to *Self* (8), but also carries strong connections to the *Financial* (6) and *Time* (4) domains, indicating that participants' health also impacts their financial wellbeing and their personal time.<sup>14</sup>

*Spirituality* has strong connections to *Family & Whānau* (5), *Mental & Physical Health* (5), *Self* (6), and *Financial* (5). The connection between *Spirituality* and *Financial* is interesting as it did not feature in discussions with participants at all. The diagram shows a slightly stronger connection from *Spirituality* to *Financial* (5) than the reverse (4). It is possible that this relationship has similar characteristics to the relationship between *Self* and *Income*, where spirituality acts more as a source of personal strength to achieve financial wellness. This idea is supported by the fact that the *Self* and *Financial* domains both connect strongly to *Empowerment* (6 and 5, respectively), with *Spirituality* also connecting to *Empowerment* with a slightly weaker, but still significant, strength of 3.

Overall, Figure 5.3 reveals that the four most salient domains have the strongest interconnections, meaning that they are more likely to impact one another. All four also have fewer, albeit significant, connections to the *Time* and *Achievement & Abundance* domains. These two domains were identified in the discussions as having overarching effects on wellbeing: *Time* was a factor for all domains, and also a temporal feature of wellbeing; *Achievement & Abundance* was related to a sense of balance across all domains. It is not surprising, therefore, that these two domains attract a high number of connections from most other domains, including the four most salient.

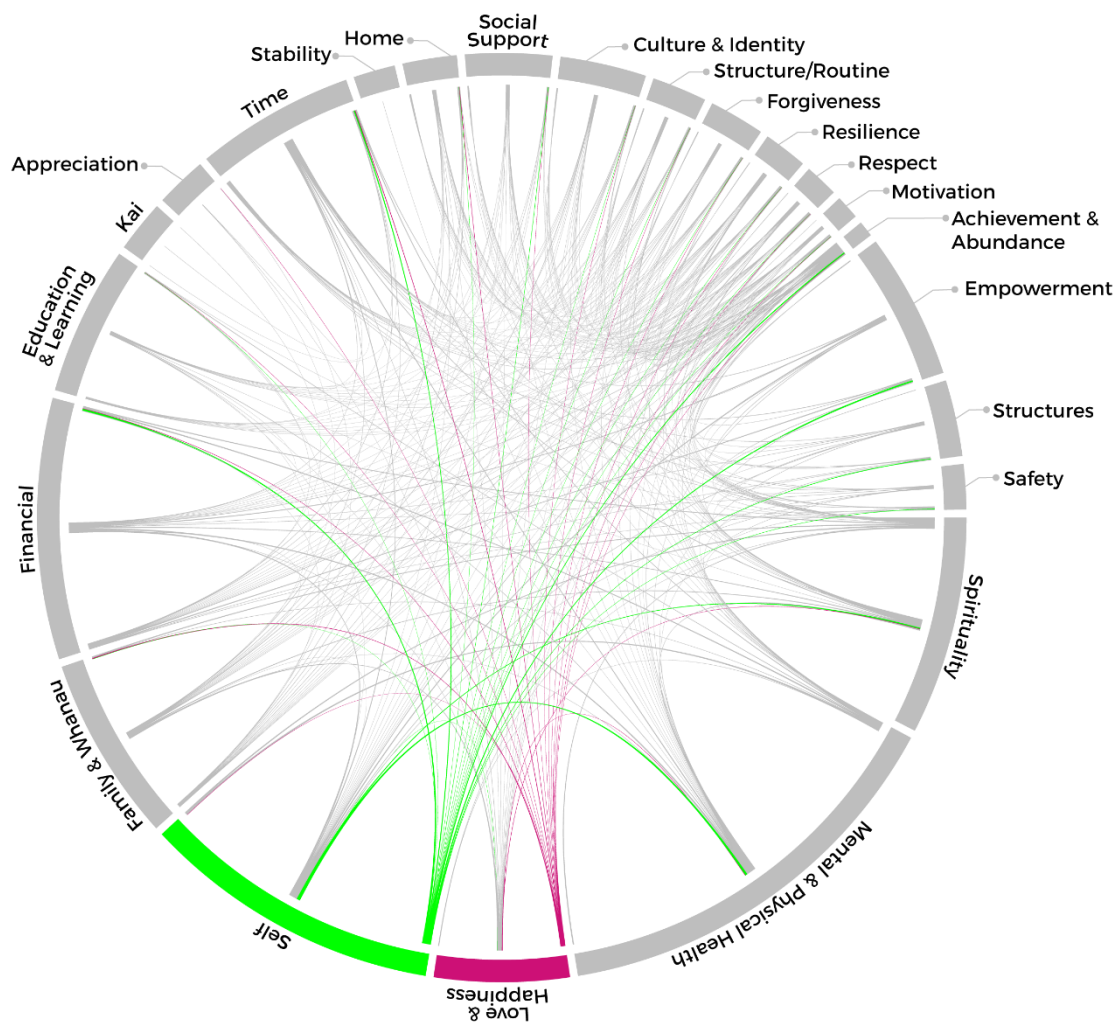
Figure 5.3 also reveals equally strong connections between *Self* and *Financial* (8 in both directions). This resonates with the concept of 'feeling well to live well' that arose in

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<sup>14</sup> Although it is unclear from this association exactly *how* participants' health impacts their time, this may be interpreted as one's health impacting the quality and/or quantity of their leisure time, or how they choose to spend their time, or both.

focus group discussions. The equal relationship between the domains suggests that the reverse is also true (i.e. ‘living well to feel well’), yet many participants made it clear that financial wellbeing was not as important a factor for living a good life. Interestingly, the connection from *Financial* to *Love & Happiness* is much weaker (2), which might imply that a good financial situation offers a higher sense of personal fulfilment than emotional happiness.

This warrants closer attention to how the subjective aspects of wellbeing interact within the larger system of wellbeing relationships. Participants distinguished between two aspects of subjective wellbeing: *Self* (eudaimonia) and *Love & Happiness* (affect). Figure 5.4 highlights them in further detail to understand their roles in influencing wellbeing.



**Figure 5. 4. Consolidated Wellbeing Domains (Subjective Wellbeing)**

*Self* connects strongly to *Mental & Physical Health* (10), *Financial* (8), *Time* (5), *Achievement & Abundance* (5), and *Empowerment* (6). There is a fair degree of overlap, as *Love & Happiness* connect to many of the same domains, although the strength of

the connections is much weaker. There are only two cases in which *Love & Happiness* connect to other domains more strongly than *Self*. These are to *Family & Whānau* (4 vs 1) and *Home* (2 vs 1). This indicates that *Family & Whānau* and *Home* are more strongly associated with emotional wellbeing (as represented by *Love & Happiness*) than with personal fulfilment.

What is most notable about the *Self* and *Love & Happiness* domains is the difference in their salience and the strengths of their source and recipient connections. *Self* scores higher than *Love & Happiness* in almost every respect, having double the salience (10.8% versus 4.9%) and over double the strength of both types of connections (see Table 5.2 for a review). From this, it is possible to infer that eudaimonic wellbeing plays a much stronger role in generating overall wellbeing and influencing other aspects of wellbeing in participants' daily lives.

### ***Chord Diagrams Representing Ill-being***

Figure 5.5 illustrates the results of the 'weak' relationships drawn by participants in the linkage diagramming activities. Weak connections were interpreted by participants as negative relationships. Therefore, this diagram more closely represents the interrelated dynamics of ill-being, as opposed to wellbeing, in the context of the focus groups. Overall, participants drew fewer weak connections in the FGDs, so the chords connecting the domains represent weaker values. A different colour palette was chosen in this diagram to distinguish it from the diagrams above. The number of domains is reduced from 23 (as in the diagrams above) to 14 since not all domains were connected by weak relationships by participants. The salience of the domains remains unchanged, although they are accompanied by a different number of source and recipient connections, as this set of relationships was isolated from the other connections in the linkage diagramming activity. The accompanying number of source and recipient connections are displayed in Table 5.5.

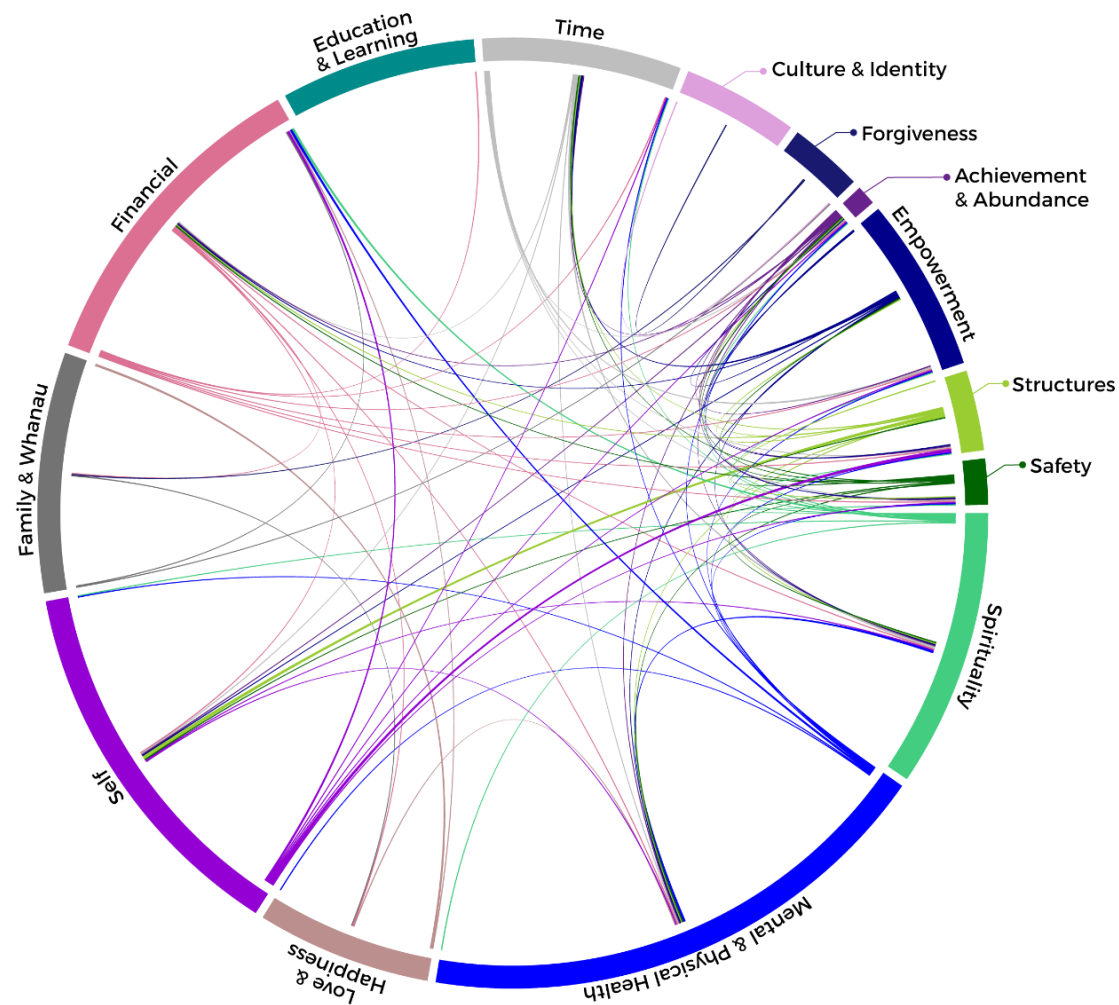


Figure 5. 5. Ill-being Relationships

Table 5.5. 1. Ill-being Relationships

Domain	Saliency (%)	Source Connections	Recipient Connections
Mental & Physical Health	14.6	11	9
Self	10.8	11	10
Financial	9.4	11	13
Spirituality	8.0	9	10
Family/Whānau	6.6	3	4
Time	5.9	10	9
Love & Happiness	4.9	4	3
Education & Learning	5.2	0	1
Empowerment	5.2	9	9
Culture & Identity	3.1	1	1
Structures (External)	2.8	10	10
Forgiveness	2.1	2	2
Safety	1.8	8	8
Achievement/Abundance	1.0	8	8

In keeping with the previous diagrams, Figure 5.5 shows a high number of source and recipient connections among the top four most salient domains (*Mental & Physical Health*, *Self*, *Financial*, and *Spirituality*). However, a distinct feature of this diagram is a more equal distribution of source and recipient connections among domains, irrespective of their salience. For example, *Time* (with a salience of 5.9%), *Empowerment* (5.2%), and *Structures (External)* (2.8%) are all comparable in the strength of their connections relative to the four most salient domains. This may indicate that negative impacts resonate more strongly through a network of wellbeing relationships, regardless of the perceived importance of that aspect of wellbeing.

Of all the domains, *Financial* has the highest number of recipient connections (13), suggesting that poor outcomes in other domains of wellbeing would negatively impact financial wellbeing. The domains that connect most strongly to *Financial* are *Spirituality* (2), *Mental & Physical Health* (2), and *Self* (2). Overall, *Education & Learning* has the lowest source (0) and recipient (1) connections, indicating that the act of gaining knowledge had very few negative impacts on participants' perspectives (with one exception being its connection to *Financial*). This aligns with the focus group discussions in which participants highlighted the high cost of education as a barrier to wellbeing.

The strongest connection in the diagram is between *Self* and *Structures (External)* (3 in both directions), which is consistent with participants' negative experiences using external support agencies. Another strong connection is from *Time* and *Mental and Physical Health* to *Spirituality* (2), indicating that an unhealthy mind or body could negatively impact one's spirituality. It is unclear whether *Time* connects to *Spirituality* as a temporal feature or as leisure time. If temporal, this could be interpreted as the negative effects of fluctuating belief over time, or it could signify that a lack of leisure time impacts negatively on belief. *Time* is also connected to *Empowerment* (2 in both directions), reflecting participants' emphasis on the important aspect of agency in choosing how to spend one's time. The fact that these are negatively related indicates that ill-being could arise when there is a lack of either.

*Culture & Identity* is also weakly associated within the larger system of domains, connecting only to *Forgiveness* (1 in both directions). It may be interpreted that,

generally, a sense of culture and identity plays a minimal role in influencing ill-being outcomes. Participants described culture and identity as being an integral part of a welcoming and accepting environment maintained by family and whānau members. According to the diagram, not having such an environment impacted negatively on a sense of forgiveness. The diagram also shows a strong negative connection from *Love & Happiness* to *Family & Whānau* (2), which aligns with the negative emotional experiences participants reported having when family members were not forgiving or accepting.

It is important to note that although *Culture & Identity* is only connected into the larger system of ill-being dynamics by *Forgiveness*, this connection forms one part of a larger complex structure that implicates *Family & Whānau* and *Love & Happiness*. In this case, the *Forgiveness* domain acts as a bridge to connect *Culture & Identity* to the wider interactions between *Family & Whānau* and *Love & Happiness*. Thus, it is possible to infer that while some domains are not immediately connected with others, they could be connected into a larger system of wellbeing dynamics through domains that act as ‘bridges’.

## Under the Living Standards Framework

In this section, I present the results of the linkage diagram activities after re-categorising the domains under the LSF.<sup>15</sup> Figure 5.6 displays these results in a chord diagram in which the domains have conformed to the definitions of the LSF, with the exception of the three domains (*Spirituality, Balance and Reciprocity, and Agency*) that did not fit the LSF criteria. The figure is accompanied by Table 5.6, which shows the salience of the domains and the combined strength of the source and recipient connections. It should be noted that in this diagram, the connections appear clearer due to further consolidation of the strength of the connections. The *Environment* and *Jobs* domains are not represented because participants did not create these domains in the FGDs.

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<sup>15</sup> As they were listed in table 4.4.

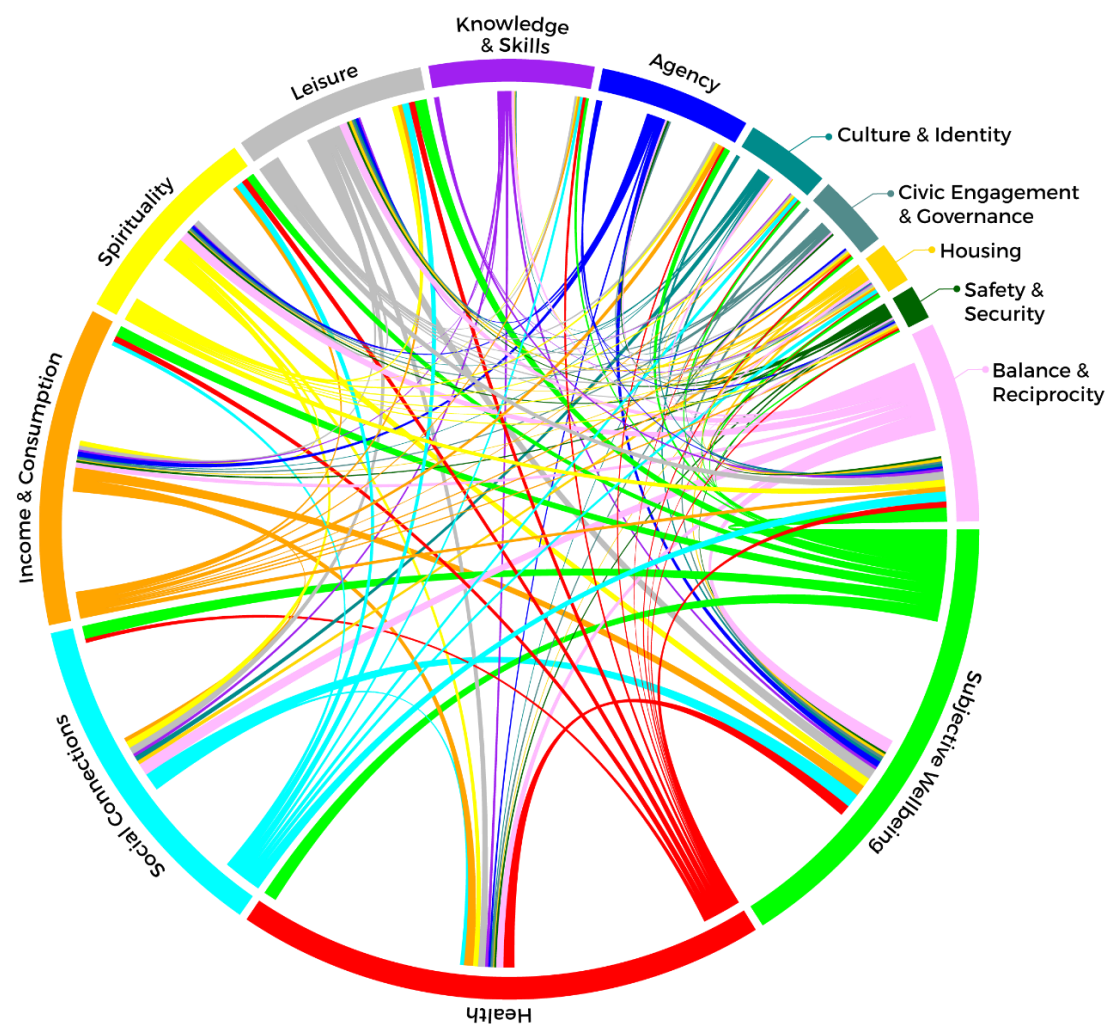


Figure 5. 6. Under the Living Standards Framework

Table 5.6. 1. Under the Living Standards Framework

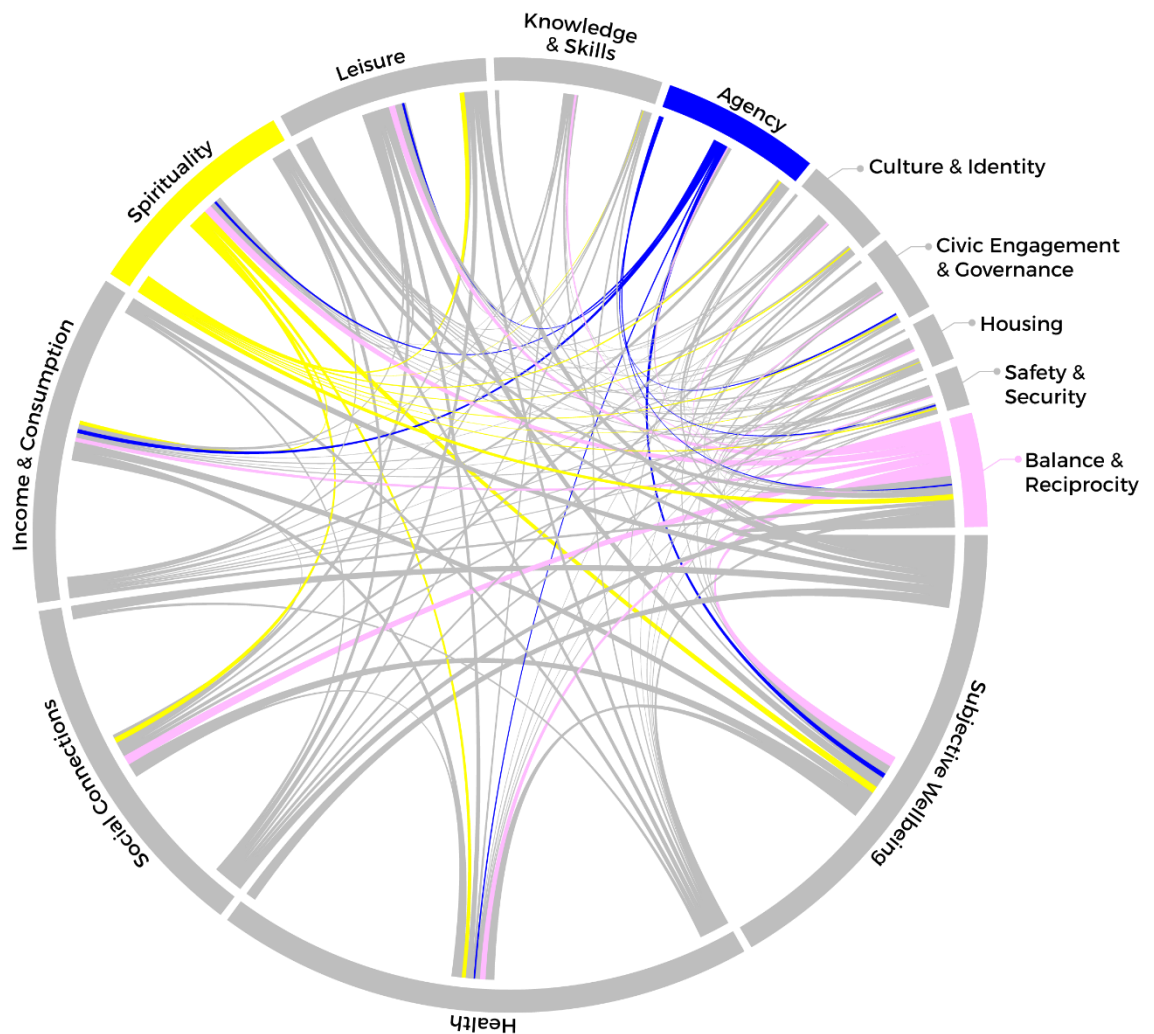
Domain	Salience (%)	Source Connections	Recipient Connections
Subjective Wellbeing	17.1	92	89
Health	16.7	50	43
Social Connections	12.1	57	46
Income and Consumption	11.0	51	37
Spirituality	8.2	50	43
Leisure	8.2	57	45
Balance and Reciprocity	6.0	70	51
Knowledge and Skills	5.3	19	16
Agency	5.3	25	19
Cultural Identity	3.2	18	15
Civic Engagement	2.8	17	14
Housing	2.1	18	16
Safety and Security	1.8	16	14
Environment	0	0	0
Jobs	0	0	0

This diagram shows that *Subjective Wellbeing* became the most salient domain under the LSF conceptualisation (17.1%). It also carries the strongest source (92) and recipient connections (89). In contrast to the diagrams in the previous section, which generally matched the most salient domains alongside connections with high strength-values, here *Balance and Reciprocity*, a domain with much lower salience (6.0%), had the second greatest number of connections. Thus, while the salience of the domains has changed under this perspective, this diagram is also distinctive in the way the source and recipient connections are demarcated. The first seven domains in Table 5.6 have connections that are double the others in strength, creating a line of demarcation between *Balance and Reciprocity* and *Knowledge and Skills*. In this case, the manner in which the domains were re-consolidated changed how their relative importance was viewed, as well as the nature of their influence over other domains.

Figure 5.6 also shows that *Subjective Wellbeing* forms strong connections between domains. For example, the strongest connections in this new system of relationships are from *Social Connections* to *Subjective Wellbeing* (14), and from *Subjective Wellbeing* to *Balance and Reciprocity* (also 14). Other strong connections are from *Subjective Wellbeing* to *Social Connections* (13), and from *Subjective Wellbeing* to *Health* (13). Under the LSF conceptualisation, it is clear that *Subjective Wellbeing* plays a large role in generating and influencing wellbeing. Unfortunately, the distinct roles of eudaimonia and affect become lost. It is not possible to differentiate the types of experience, whether emotional or self-actualising, that these rather strong connections have on other domains. As previously established in Figure 5.4, affect and eudaimonia may play different roles in the larger system of wellbeing dynamics, so there is a missed opportunity to explore this using only the LSF.

To bring attention to the three domains that could not be re-consolidated under the LSF, Figure 5.7 highlights *Balance and Reciprocity*, *Spirituality*, and *Agency*.





**Figure 5. 7. Balance and Reciprocity, Spirituality, and Agency**

*Balance and Reciprocity* was described as having an overarching quality, which is reflected in the diagram in the strength and breadth of its connections across every domain. However, it is connected more strongly to some domains than others; notably, *Subjective Wellbeing* (13), *Social Connections* (12), *Spirituality* (10), *Leisure* (8), and *Health* (7). This aligns with participants' views in discussions that while all domains are important in the pursuit of balance, some have larger roles to play than others. What is interesting is that *Balance and Reciprocity* has the second strongest source and recipient connections after *Subjective Wellbeing*. Participants' emphasis on *Balance and Reciprocity* and its absence in the LSF reveal a disconnect in how wellbeing is experienced at the community level and how it is currently measured at the macro level. Research in positive psychology has revealed that the element of balance across domains relates to increased mood stability over time and better self-esteem (Petrie, 2013). Wellbeing in a variety of different areas of a person's life forms a broad

foundation of support in the event of a failure or imbalance in one domain (Petrie, 2013). Thus, a sense of balance has been argued to compensate for dissatisfaction in some aspects of life and act as a buffer against depression. It is possible to draw a similar conclusion from Figure 5.7, as the connections between *Balance and Reciprocity* and *Subjective Wellbeing* are the highest in this chord diagram. This suggests that wellbeing is not only dependent on people's priorities and the relative importance they attribute to domains, but also on the distribution of those same domains among one another.

Figure 5.7 also shows that *Spirituality* is well connected across all the domains. Its strongest links are to *Subjective Wellbeing* (9), *Social Connections* (7), and *Balance and Reciprocity* (7). Its weakest is to *Knowledge and Skills* (1). Of the three domains, *Agency* has the weakest connections within the larger system. Despite themes of agency and freedom being common throughout the FGDs, it has limited connections to other domains, with its strongest ones being to *Subjective Wellbeing* (6) and *Income and Consumption* (5). The lack of connection between *Agency* and *Knowledge and Skills* is striking considering that participants considered education a gateway to increased freedom of choice and autonomy. This may be due to only one focus group making the notion of agency its own domain (*Empowerment*). Because of its absence in the diagramming activity in two of the focus groups, *Empowerment* had lesser chance of being connected to other domains.

## Free-list Survey Results

After the linkage diagramming activity was complete, each participant was asked to complete a free-list survey in which they listed the ten most important domains critical to their wellbeing. The survey then asked them to link four domains (from the same list) to each item. Of the 24 participants who took part in the research, only 13 completed the free-list survey in a way that could be used for quantitative analysis. Nine participants completed the surveys in a manner that duplicated the work we had already completed in the focus group activities, so this data was not used in the analysis.<sup>16</sup> Two participants chose not to complete the survey. From the 13 responses gathered,

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<sup>16</sup> These participants defined four ideas of a good life associated with each survey item (as we had done in the post-it note activity), as opposed to associating the survey item with a different domain.

participants listed 26 domains. After consolidation and the removal of duplicates, there were a total of 23 unique domains. These domains were comparable to the domains listed in the focus group activities and were therefore consolidated under the same headings. The results of the free-list surveys are examined below in Figure 5.8. They have been interpreted as a nonmetric MDS graph (or solution).

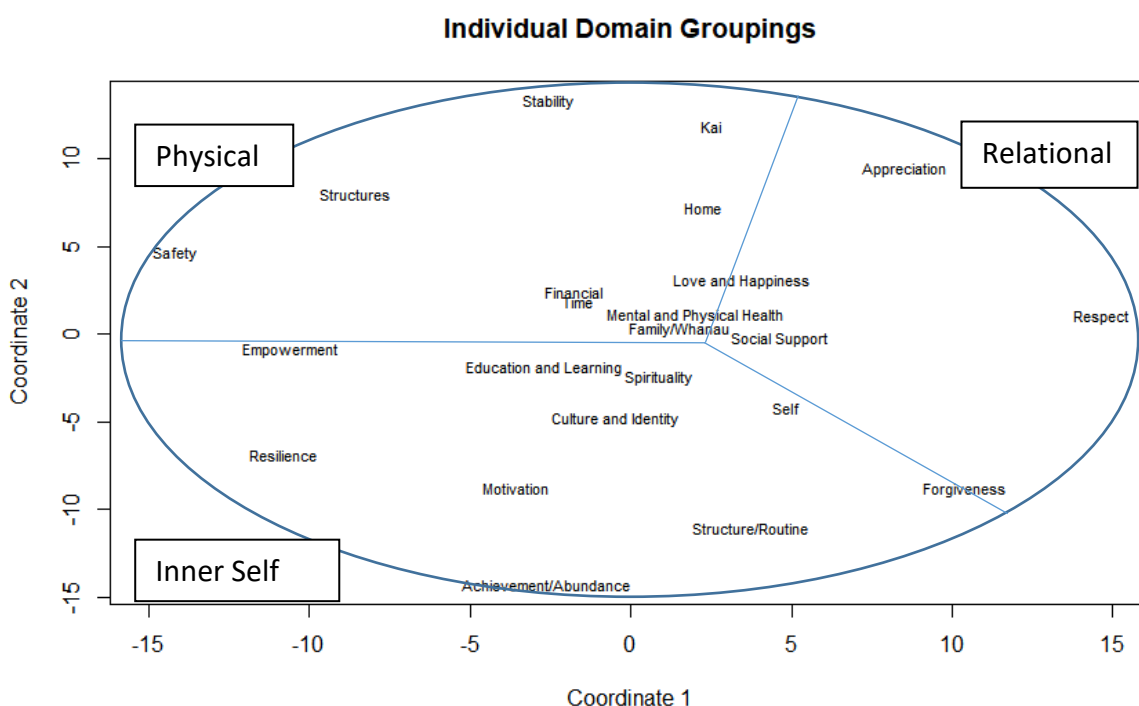


**Figure 5. 8. Nonmetric MDS Graph**

An initial visual analysis of the graph's structure shows dense clusters of domains just right of centre. The proximity of *Mental and Physical Health*, *Family/Whānau*, and *Social Support* forms a central cluster, deemed Cluster A. The close proximity of these domains indicates that they were associated more frequently or more closely in the survey results. This cluster is reminiscent of participants' discussions in which they placed significant emphasis on the impacts that supportive social connections had on their wider physical and mental health outcomes. Participants noted that choices to maintain a healthy mind and body were made with the support of family, whānau, and the wider community. Those struggling with health issues were often cared for by other family and whānau members.

The solution also displays *Financial* and *Time* in close proximity to one another, which is surprising since these two concepts did not arise together in the FGDs. *Financial* and *Time* are independently associated with the domains in Cluster A. Their proximity to one another may be simply a reflection of their strong associations with the domains in Cluster A.

It is possible to determine a circular structure in the MDS solution. One possible interpretation is to partition the circle into three conceptual groups: physical wellbeing, inner self, and relational wellbeing.



### Figure 5. 9. Circular Interpretation of MDS Solution

Using participants' descriptions as a guide, I classified the *Physical Wellbeing* group as encompassing material requirements for a good life, as well as physical functions of wellbeing such as health. *Time* is included in this group, although in this case it is unclear whether *Time* represents leisure or temporal aspects of wellbeing. Domains in this group possess 'external' qualities in the sense that they could serve as instruments to leverage wellbeing, as opposed to domains with more "intrinsic value" (Alkire, 2002b, p. 130).

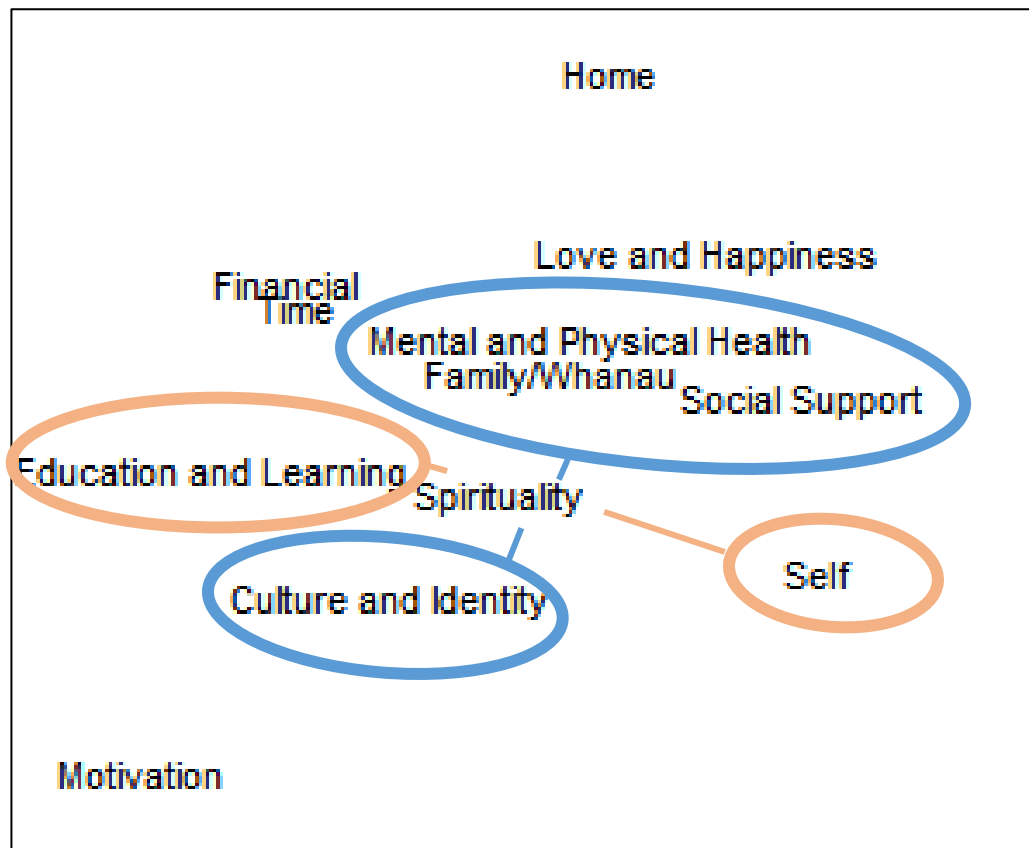
By contrast, the *Inner Self* group was characterised by domains with intrinsically valuable properties. They are consistent with Alkire's (2002b) observations that some domains offered a sense of self-direction and empowerment. Domains in the *Inner Self* group were associated with one's values, as well as a sense of control and belief regarding one's power to affect situations. They were associated with a determination to persevere and overcome obstacles.

The last conceptual group, *Relational Wellbeing*, was characterised by social interactions and relationships with others. A special feature of this group is that many of its domains were associated with emotional behaviours, such as showing love, support, concern, forgiveness, and respect towards others and receiving it in-kind.

This interpretation of the MDS solution reveals that some domains rest on or near partitions that divide the conceptual groups. For example, the domains of *Mental and Physical Health* and *Family & Whānau* lie on either side of the partition between the *Physical Wellbeing* and *Relational Wellbeing* groups. It is possible to conclude that these domains could act as 'bridges' or links to multiple conceptual groups. For example, *Home* could be interpreted as a bridge between the *Physical Wellbeing* and *Relational Wellbeing* groups because it is both a material commodity and a place where key social relationships are built and maintained. However, domains do not necessarily need to carry the qualities of both groups to act as a bridge. *Empowerment* did not encompass a physical quality, yet it could be viewed as a bridge due to its value in instantiating a sense of control or determination to achieve physical or material wellbeing, as evidenced by the 'feeling well to live well' argument described in Chapter Four. *Family & Whānau* is the domain with the closest proximity to the intersection of all three conceptual groups, meaning, according to this interpretation, that it could act as a bridge between all three.

The presence of bridges could indicate that these domains play pivotal roles in the influence of wellbeing across different conceptual groups. This is significant because domains are often assessed according to their affinity to one wider physical, social, environmental, or cultural category. For example, the LSF assesses *Family & Whānau* as an indicator of social connectedness (New Zealand Treasury, 2019). When viewed spatially alongside other domains, *Family & Whānau* could potentially bridge other conceptual groupings of wellbeing. This is consistent with the way participants described the multiple roles family and whānau played in generating wellbeing. Members of family and whānau were seen as sources of emotional and social support but were also valued as a means of social capital whereby physical and material wellbeing could be procured. In addition, they were considered instrumental in fostering a sense of identity and belonging from which internal understanding and a sense of self were strengthened. To assess the *Family & Whānau* domain only by its value in relational wellbeing would overlook the crucial role it plays in influencing wellbeing in other conceptual groups.

Bridges can also be identified between domains within the circular structure. Figure 5.10 offers a closer inspection of the centre of the MDS solution. Here, *Spirituality* appears to act as a bridge in two ways. Firstly, it bridges Cluster A (circled in blue) with *Culture and Identity*. Secondly, it forms a bridge between *Self* and *Education and Learning*. It is interesting to note that the domains which form the periphery of *Spirituality* fall within all three wider conceptual groups. This is consistent with participants' discussions of spirituality, many of whom felt it played a foundational role to the point where it upheld other aspects of wellbeing. This would explain its central location bridging the domains in Figure 5.10.



**Figure 5. 10. Zoomed-In MDS solution**

Bridges occur elsewhere in the solution. For example, *Love & Happiness* forms a bridge between *Home* and Cluster A, and *Culture and Identity* forms a bridge between *Motivation* and *Spirituality*.

Bridges are helpful in understanding how certain domains may transfer influence among one set of connections to another within a larger system of wellbeing. This MDS solution is a helpful tool for conceptualising this process. It also reveals how domains can be 'bundled' together, which may prove useful for policy-making purposes. It allows policy makers to pinpoint spheres of influence in which domains are highly correlated (as in Cluster A), which could translate to more lateral action across government agencies and more targeted responses when designing wellbeing interventions. It is important to remember that this MDS solution is the result of a survey conducted at one point in time in one particular context – the results would change in another study with different participants in a different location. It is also worth noting that the results of the MDS solution may be distorted due to its high stress coefficient (as mentioned on p.68 of this thesis), which casts some speculation on the results discussed above.

## Chapter 6: Discussion

This chapter considers the results of the research and discusses what they might offer to a holistic representation of wellbeing that is grounded in the lived reality of participants. It begins by situating participants' prioritisations of wellbeing within the wider literature on basic needs and hierarchical representations of wellbeing. It then discusses the nature of wellbeing processes as constructed within a greater system of interdependent interactions. This is done by contrasting ideological constructions of wellbeing that stem from neo-utilitarian logic versus conceptions derived from broader social theory. Finally, the chapter closes by bringing attention to synergies and trade-offs present in a holistic approach to wellbeing, challenging dichotomous thinking in wellbeing policy and practice.

### Basic Needs and Hierarchies

For as long as wellbeing has been considered multidimensional, policymakers have compiled lists of domains and gauged their importance to guide the interventions they undertake. Doing so offers a range of worthwhile activities to pursue and the mechanism by which to prioritise them. The practicality of this process notwithstanding, it requires an underlying framework on which to base assumptions of why some domains are considered important over others. Theoretical investigations from myriad disciplines have developed philosophical frameworks to establish the essential foundations on which wellbeing rests. The basic needs school attempted to fill this gap (see Doyal & Gough, 1991; Maslow, 1943; Streeten, 1984), based on the assumption that some domains were so essential to human wellbeing that they could be identified without any direct consultation with individuals or groups (Alkire, 2002b). As previously discussed in Chapter Two, the idea gained momentum when the International Labour Organisation adopted a basic needs approach in 1976 (Gough et al., 2014). Development initiatives subsequently took the practical route of investing in physical and material aspects of wellbeing, which later became synonymous with the essential preconditions of a good life (Alkire, 2002a) and implied a firm hierarchy of needs. The standard for basic needs has since been expanded to include human rights and dignities (Alkire, 2002a). For example, 'basic human values', put forth by Grisez, Boyle, and Finnis (1987), included



the right to self-expression, and later Nussbaum's (2000) 'basic human capabilities' included people's right to participate, to exercise self-determination and agency, and to be free from discrimination.

This preamble helps set the stage for a discussion of the results of this research. Considerations of which factors are fundamentally important to wellbeing, and therefore which to prioritise, have been fluid throughout the history of development. Furthermore, the question of who decides wellbeing priorities has been raised. Paul Streeten (1984, p. 973) argued that it would be "difficult to envisage any society in which some basic needs such as nutrition, education, health, shelter, and water and sanitation would not be contained in the definition of basic needs", but he also notes that these may not coincide with a list of fundamental needs expressed by the people.

The question of how to reconcile community priorities with policy becomes difficult once it is established that everyone places different values on different aspects of their wellbeing. Indeed, the results of this research show that each focus group ranked wellbeing priorities differently. *Health and Wellness*, *Belief* and *Family & Whānau* all topped the list in different groups. Additionally, the rankings changed depending on how they were consolidated. After consolidation, *Mental and Physical Health* ranked first, and when re-categorised under the LSF, *Subjective Wellbeing* rose to the top spot. It was clear that each group had different ideas about what was centrally important to their own wellbeing, and that different methods of consolidation yielded different results.

Additionally, the results did not follow a linear hierarchy. Depending on the context, any one dimension could be considered more important than another at different times. For example, participants made it clear that aspects of their subjective wellbeing ('feeling well') and objective wellbeing ('living well') were strongly linked but that their relationship was always shifting. Having a stable income, being healthy, and being educated all had positive impacts on a good life, while a positive mental outlook gave participants the motivation to pursue objective aspects of wellbeing. Gasper (2009, p. 10) observed that conventional economics and other utilitarian conceptions present a sequential "ladder of living" from simply obtaining resources at the bottom of the ladder, through to consumption, and then on to happiness. In this tradition, happiness is seen as an output of consumption. This linear causality from objective to subjective wellbeing has been challenged in the results of this study. Participants described

happiness both as a result of objective wellbeing and as an intrinsic cause of it. This is supported elsewhere in the literature though Rojas' (2007) observation that satisfaction in objective domains may explain general life satisfaction, but also that satisfaction gained from acting in accordance with one's own values (i.e. cultivating a sense of self) could, in turn, explain one's satisfaction with objective domains.

The results suggest that the highest ranked domains were not necessarily fundamental to wellbeing in the sense that they formed the base of a static hierarchical structure. What was most important to consider was the context in which these domains were considered important, and how they might be susceptible to change. This implies that the fundamentals of wellbeing lie not with a particular set of domains, but with a person's right to choose and having power to navigate their own wellbeing as the situation requires. Alkire's (2002a) position, following on from Finniss' (1980) reasoning, is that any list of wellbeing domains should be non-hierarchical, as no such hierarchy could persist in the context of an ever-changing world. Alkire (2002b) offers the example of someone who might choose to deliberately refrain from meeting certain fundamental needs to enjoy a different kind of wellbeing. A hunger striker or a religious ascetic may regularly refrain from eating because they personally value the religious discipline or the exercise of justice-seeking agency. In the FGDs, Christine shared a similar experience in her choice to forego owning her own home to free up other aspects of wellbeing that gave her more happiness and fulfilment:

*I've owned our own home and that's a good thing to have. But when you change your lifestyle, and I have, from living 'in' the world but not 'of' the world, you look at things differently.... And so, I look at having my own home as not so important, but having family, having a lovely husband, having that freedom of choice. Like, spending time with your children and having that money to do other things that you wouldn't put into your home so to speak. I find family is very important.*

The right to choose the fundamental aspects of one's own wellbeing, and the recognition that these will change depending on one's situation over time, requires that any wellbeing model used to measure progress must continually adapt and re-evaluate wellbeing at different times and in different contexts. As priorities shift and change, static models are unhelpful representations of how wellbeing is experienced. Sen's capability approach reminds us that an assessment of wellbeing should consider

people's freedom to pursue the lives they value. The capability approach justifies community-derived conceptions of wellbeing for policymaking with an appreciation for, not avoidance of, ambiguity and complexity. This places more emphasis (and therefore power) on people's right to choose what a good life looks like for them. This is in stark contrast to development's history of prescriptive interventions based on dominant conceptions of wellbeing, as seen in its post-war modernisation paradigm and again with the basic needs approach. Fairness in the representation and prioritisation of wellbeing requires that policy agendas are shaped and informed by those they are intended to benefit.

Finally, wellbeing hierarchies are further thrown into question when comparing the salience scores from the participant ranking activities to the strengths of the connections in the diagramming activity. It became clear when analysing the results that the relative importance of a domain did not necessarily correlate with its influence in the wellbeing space. In some cases, domains with relatively low salience were connected just as strongly as those with high salience. For example, the least salient domain in Figure 5.2, *Achievement & Abundance*, had source and recipient connections comparable to those of the most salient domains. This indicates that *Achievement & Abundance*, while not immediately listed as 'important' by participants, was just as intricately connected as the domains which were directly identified as most important. It is commonly accepted that a domain's relative importance indicates its influence and priority. However, the results of this research show that relative importance may not be the only deciding factor in how wellbeing should be prioritised. Policymakers looking to improve wellbeing outcomes may benefit from focusing on domains that offer the largest potentials to act as catalysts of change, rather than simply those which are deemed more or less important. Identifying which aspects of wellbeing matter most to people would be a useful starting point, but further inquiry into which domains hold reasonable influence over others would help to open possibilities for wellbeing policies with more impact.

## Navigating Holistic Wellbeing

The following section explores what the findings reveal about wellbeing as a system of interdependent interactions. Two ideological constructions will be contrasted: firstly,

between wellbeing as a measurable life outcome and conceptions which are more discursive; and secondly, between individualistic and collective conceptions. This discussion will frame what could be interpreted about the emergent properties of wellbeing as a holistic system.

### ***Beyond Siloes***

Interpreting wellbeing as a holistic system for policy purposes requires a break from current dominant understandings of wellbeing. As previously mentioned, dominant ontological perspectives view the wellbeing agenda as an opportunity to provide domain-specific remedial strategies to correct a collection of individual deficiencies. The result is an oversimplification that is transactional and siloed. Indeed, holistic perspectives are often lost in policymaking as government agencies fall into silo mentalities by focusing on narrow sectoral or departmental objectives (OECD, 2012). In response, some scholars have advanced the argument that wellbeing should be thought of as a construction inherently connected to the context in which it is generated (Gough et al., 2007; J. A. McGregor, 2007; White, 2010, 2016). This changes the perspective of wellbeing from a pre-existing measurable phenomenon to a process that is actively constructed with others. In this view, people imbue pathways of wellbeing with the historical, social, cultural, and political contexts in which they live.

A qualitatively driven mixed methods approach to mapping these pathways granted much needed community-level context while providing a possible basis to think about how domains could be understood as playing parts in a larger system. The results from the chord diagrams demonstrated how siloed approaches are missing a vital part of the picture by revealing connections between domains that would not typically feature together in development interventions. In Figure 5.6, for example, *Spirituality* formed a significant connection to *Income and Consumption*, revealing that participants perceived their spiritual wellbeing as directly impacting on their material wealth and vice versa. Spirituality infrequently features in development initiatives that aim to improve economic outcomes, if at all. Instead, growth-related activities are favoured, such as improving access to employment or increasing qualifications or skills. While activities such as these are unarguably necessary for improving material wealth, the results of this research begin to blur the boundaries of compartmentalised approaches to development, challenging what kinds of factors affect wellbeing and in which ways. The

results point towards a broader range of (perhaps unexplored) possibilities for policymakers to consider when designing wellbeing interventions. Naturally, understanding the relevance of domains within a wider system of wellbeing, and what implications this may have for promoting wellbeing, is dependent on an understanding of how wellbeing dynamics are constructed at the community level. Spiritual wellbeing was critical to many participants in this research; however, other communities will create their own set of dynamics based on their own values.

Additionally, a holistic approach to wellbeing urges reconsideration of how domains with weak connections, or no connections at all, interact within the structure of a larger system of relationships. For example, Figure 5.6 showed that *Agency* and *Social Connections* have no association. Yet both domains have strong connections to *Subjective Wellbeing*. Therefore, it is possible for *Agency* and *Social Connections* to impact one another through their strong mutual association with *Subjective Wellbeing*. This demonstrates that aspects of wellbeing that seemingly have no correlation may still impact one another through a wider system of interactions. This is reinforced by the results of the MDS solution, in which some domains function as ‘bridges’ that link certain conceptual groupings together.

In summary, understanding wellbeing as a larger system of relationships and dynamics urges reconsideration of siloed and compartmentalised approaches that view components of wellbeing in isolation. Compiling knowledge of each domain does nothing to inform policymakers about the nature or function of their relationships in the system as a whole. This encourages more lateral approaches to improving wellbeing outcomes across public agencies. Policymakers in New Zealand are being encouraged to incorporate complexity into their policy design, as doing “more of the same” will not generate the change required (Eppel et al., 2018, p. 4). Indeed, a holistic approach may reveal connections and dynamics that policymakers do not expect, thus expanding the scope of how interventions are designed.

### ***Collective Values***

One of the sharpest criticisms of the increased use of wellbeing in public policy is its reconfirmation of the utilitarian notion of ‘homo economicus’ (J. A. McGregor, 2018; T. S. J. Smith & Reid, 2017), referring to the idea that people maximise their wellbeing

through rational, self-interested processes. While this ideology focuses on individual accumulation, many participants instead emphasised collective reciprocity. In their view, the wellbeing of people close to them was central for their own wellbeing. This was seen through their descriptions of a variety of activities; from financial stability leading to opportunities to give back time and resources into the community, to basing actions and decisions on what was best for others. Despite concerns that contemporary wellbeing approaches have adopted individualistic framings (J. A. McGregor, 2007; Sointu, 2005), notions of collective wellbeing are remarkably absent in macro level measurement frameworks.

That wellbeing can and should be understood as a characteristic of collectives, as well as individuals, is an emerging concept in wellbeing studies from the social science discipline (Atkinson, 2013; White, 2016, 2017). Social collectives provide links to aspects of wellbeing that are central in generating the values that individuals hold to be important, which in turn affect the choices people make regarding the resources at their disposal (J. A. McGregor, 2007). Drèze and Sen (2002, p. 6) also highlight how wellbeing is contingent upon social collectives, reminding us “not to view individuals and their opportunities in isolated terms. The options that a person has depend greatly on relations with others and on what the state and other institutions do”.

In New Zealand, understandings of collective wellbeing are particularly relevant for Māori, where whānau relationships form the foundational building blocks of Māori society (New Zealand Treasury & Te Puni Kokiri, 2019). Durie (2003) draws our attention to the role of the whānau in caring for others, where wellbeing is distinguished at the community level. He observed:

The capacity to care, *manaakitia*, is a critical role for the whānau. Unless whānau can care for the young and the old, for those who are sick or disabled, and for those who are temporarily out of pocket, then a fundamental purpose of the whānau has been lost. (Durie, 2003, p. 23)

Given that whānau-centred approaches are paramount for driving the wellbeing of Māori, there has been call for further focus on collective wellbeing at the macro level in New Zealand (New Zealand Treasury & Te Puni Kokiri, 2019).

The notion of giving back and caring for others extended beyond Māori individuals in this research as well, as it was a predominant theme across all three FGDs. A collective view of wellbeing found particular traction in discussions on spirituality. Faith underpinned participants' decisions to serve others in their family and the wider community. Prior work on spirituality and development has shown that spirituality's emphasis on the common good and its role in promoting strong social networks help to solidify the connection between wellbeing, the individual, and the collective (Chile & Simpson, 2004; Lunn, 2009).

Collective wellbeing also centred around family and whānau, who were instrumental in fostering a sense of cultural pride and identity. The quantitative results also revealed strong connections among *Social Connections*, *Balance and Reciprocity*, *Spirituality*, and *Family & Whānau*, as evidenced in Figure 5.6. This suggests that both spiritual belief and positive relationships with family and whānau members played significant roles in collective wellbeing and generating values of the kind of life it is good to lead.

If wellbeing is largely dependent on what people value, and values are given meaning through profoundly collective processes, this raises questions on how wellbeing policies could be redesigned to address collective wellbeing. The distinction between individualistic wellbeing and collective wellbeing is crucial as it means more consideration must be given to how individuals navigate wellbeing within their social structures and the extent to which social contexts constrain or create opportunities (Atkinson, 2013). McGregor (2007) reminds us not to underestimate the power that is associated with collective constructs of wellbeing. The fact that wellbeing is the product of social agreement doesn't make it any less 'real' in the minds of people. Failure to meet needs that are constructed through collective values can just as inevitably result in physical human harm (J. A. McGregor, 2007).

The results of this research suggest that spiritual wellbeing and family and whānau relationships were key in linking the wellbeing of participants to their wider collective community. This was further evidenced in the MDS solution in Figure 5.9, in which the three domains closest to the epicentre of the circle were *Social Support*, *Spirituality*, and *Family & Whānau*. This warrants further investigation into how the promotion of *Spirituality* and *Family & Whānau* domains may translate into wider wellbeing impacts. Currently, New Zealand's macro level wellbeing strategy has systematically underplayed

what is required for people to live well as part of a collective, perhaps due to the fact that the LSF “does not look beyond the characteristics of the individual to any great extent” (McLeod, 2018, p. 46). Recently, a community-oriented approach to wellbeing was proposed as part of an indigeneity lens (see New Zealand Treasury & Te Puni Kokiri, 2019); however, more work is needed to incorporate the notion of collective wellbeing into the policy space.

## Beyond Dichotomies of Wellbeing

In this research, participants alluded to the concept of holistic wellbeing through an emphasis on balance. That the overall achievement of wellbeing was found in a sense of balance across domains supports a more critical view of the way wellbeing has been operationalised in development policy to date; specifically, the way that notions of progress have given rise to a line of dichotomous thinking concerning measures of success. Pieterse (2000) argued that progress has been reduced to a collection of simplistic binaries, whether it be developed versus underdeveloped, modernisation versus tradition, scientific thought versus indigenous knowledge, or in the case of human development, wellbeing versus poverty. The overwhelming representation of wellbeing as a series of positive or negative outcomes has pushed policymakers to seek wellbeing improvements in the form of statistical gains; as the dial shifts incrementally from poverty to wellbeing, it marks new baselines from which to gauge the next round of investments.

However, as Sumner and Mallett (2013) point out, wellbeing invariably has costs – portraying wellbeing as ‘good’ and vulnerability as ‘bad’ is far too simplistic and overlooks much of the complexity in the debate on trade-offs. Trade-offs occur when one wellbeing factor is diminished as a consequence of a boost in another. While statistical decreases in any one domain are traditionally considered a negative (and unwanted) outcome, the interdependency of domains indicates that trade-offs are inevitable. They form part of an intrinsic process that tailors wellbeing to people’s preferences by acknowledging the sacrifices they are prepared to make to achieve balance. In addition to trade-offs, some processes of wellbeing may also produce synergies, where higher achievements in one aspect strongly enforce higher achievements in other dimensions (Seth, 2009). This suggests that more attention



should be paid to how wellbeing is balanced, as opposed to the attention that is currently paid to maximising wellbeing in each domain. Indeed, statistical gains do not say much about the preferred routes people take to improving wellbeing according to their own values.

In the FGDs, participants often highlighted trade-offs and synergies in relation to finances. Reeva's experience of losing her job led her to make different decisions about her wellbeing that ultimately resulted in a more balanced lifestyle, and thus a better sense of wellbeing:

*Financially, when I was working, I was earning decent money where I could go and get whatever it is that I wanted. But to achieve that, that wasn't happening. So, there wasn't a health and wellness, it was just all about my career and where I was going so that I could get you know, X,Y, Z. So, what would happen is I'd be so focused on my career that everything else, including my family, myself, and my health, those all suffered. Because I wasn't being balanced around it. But since I started not working, it's actually been a real blessing because I've been real tight with money. It's not the life that I'm used to, and it's also made me look at other options of doing things. Being more resourceful in how I operate. And stuff to do with my kids as well and it's also changed my mindset on how my life should be.... My focus turned to my kids, which turned to myself, which turned to me filling up my bucket so that I have stuff to give. And now it's easier for me to work on these things day by day and spread out my focus as opposed to how I used to just focus on chasing the dollar.*

Kahai noted synergies when her finances and her subjective wellbeing were both flourishing, which then had wider impacts on her health, her relationships with her family, and her sense of overall accomplishment:

*To do those kinds of things as well as be content within your home, your family, it gives us more opportunity to strive to succeed and accomplish what we need to. Having the right amount of money for all those categories for each individual's life. It takes away a lot of stress and depression within the body. That affects your health, that affects your mindset, that affects your everything.... We can follow our*

*dreams and our goals and stuff like that because everything is balanced accordingly.*

Trade-offs and synergies were present in the pursuit of balance for Christine and Kahai; finances could be traded to achieve better social outcomes or used in synergy with other domains to lift overall wellbeing. Both cases are comparable only in the sense that they concern balance and finances – each situation was uniquely evaluated by participants on multiple scales (objective and subjective) and at different levels (individual and collective) (see Pouw & McGregor, 2014), which rendered the achievement of balance much more complex. As such, wellbeing is subject to multiple considerations and scales at any time. This is fundamentally different from the ‘maximisation’ procedure underlying much of development policy, which is only subject to one rule: efficiency (Pouw & McGregor, 2014).

The results obtained from the nonmetric MDS solution represent ‘bundles’ of domains and reflect a possible representation of where trade-offs and synergies may be present for the participants in this research. The proximity between domains, for example, in Cluster A (*Mental & Physical Health, Family & Whānau, and Social Support*), suggests that higher achievement in one domain would impact the others. Whether the change to the other domains is a synergy or a trade-off is dependent upon the individual and their wider social, economic, cultural, and political context. Conversely, more remote domains may not experience much change at all. This has important policy implications for addressing wellbeing inequalities, as identifying where trade-offs and synergies occur allows for more strategic investment to improve wellbeing outcomes. Armed with knowledge of the likelihood that investments in one aspect of wellbeing will spill over into others and working with communities to identify which aspects of wellbeing are most strongly connected for them, policymakers can make more relevant, strategic, and effective funding choices to lift wellbeing outcomes for communities who are being left behind.

## Chapter 7: Conclusion

At the beginning of this thesis, the observation was made that growth-focused strategies previously dominating development policies have abated in favour of a broader agenda of development based on human values of a good life. While notions of wellbeing have gathered momentum in development policy, its operationalisation has rested on the same familiar utilitarian pillars that have upheld development practice to date. As a result, measurement frameworks intended to capture the multidimensionality of wellbeing have been mostly top-down, universal, and quantitative in nature. While this conception benefits international comparability and is convenient for policy pronouncements, the result overly simplifies wellbeing and systematically excludes diverse interpretations as they relate to people's lived experiences. The growing disconnect between the information that is being collected for government decision-making and what is reflective of wellbeing in people's social, economic, and cultural contexts is restricting our understanding of how wellbeing policies can be effective in addressing the needs of communities. This leads to a severely distorted picture of both what a good life looks like and how well-off people are, sending misleading policy messages and perpetuating wellbeing inequalities. As Eckersley (2016) points out, our theory, data, models, and tools need to honour the richness of the human experience instead of subverting it; and to acknowledge complexity instead of denying it.

New Zealand's renewed focus on wellbeing in policy contexts and its commitment to 'leaving no-one behind' begs an inquiry into what a good life means for people experiencing hardship in New Zealand. In addition, reframing wellbeing measurement in a way that is sensitive to complex wellbeing processes and situating it in context allows for alternative understandings of wellbeing to come to the forefront. Despite a growing call for more attention to the inter-relationships between wellbeing domains, there has been limited work in this area in the New Zealand context, and even less so from a bottom-up perspective. Through participatory mixed methods research, I sought to explore how wellbeing is defined and experienced by communities experiencing some degree of hardship, how a holistic approach might be used to gain insights into crafting more inclusive and targeted policies for these communities, and what this may mean for framing New Zealand's measures of progress that 'leave no-one behind'. The

methodological lenses of the capability approach and participatory research allowed me to unpack the full range of values the community in this research perceived to be important to their wellbeing.

I have shown the disconnect between New Zealand's national wellbeing measurement framework and community-level realities in two main ways. Firstly, there was a disconnect in *what* was being measured. Participants created many more domains of wellbeing at the community level than were present in the Living Standards Framework. While many could be re-categorised under the LSF, some did not fit under any of the LSF's criteria. *Spirituality*, *Balance and Reciprocity*, and *Agency* were all valued aspects of wellbeing that were not being captured at the national level. In addition, some domains in the LSF did not feature in focus group discussions, namely *Environment* and *Jobs*. In the case of *Environment*, I suggested that this domain may have been more important for intergenerational wellbeing as opposed to current wellbeing. In the case of *Jobs*, this domain was important mainly in the sense that it brought income, which was captured elsewhere in the *Financial* domain.

Secondly, there was a disconnect in *why* domains were relevant. Discussions with participants revealed that wellbeing domains were multidimensional in and of themselves, with each domain consisting of a plurality of objective, subjective, individual, and collective aspects. I have evidenced a discrepancy between a domain's interpretation at the community level versus its LSF counterpart, most evidently with the example of *Social Connections*. The LSF focused on measuring social connections in terms of the frequency of interaction with friends and family, which did nothing to gauge its relevance as social capital or the quality of contact with friends and family. A similar example of this was captured in *Education*. Measuring the number of individuals with formal educational qualifications does nothing to exhibit the value of that qualification to a person's wellbeing. For one participant, the value of an education had more to do with negotiating her place in society than the qualification itself. This suggests that understanding the context in which wellbeing domains play out is arguably as important as the domains themselves.

I have also shown that the prioritisation of wellbeing is a difficult task because domains are non-hierarchical and subject to change over time. The assumption that objective needs form the primary sustaining factors for wellbeing was called into question when

it was shown that good subjective wellbeing formed a pathway to objective wellbeing. Thus, the fundamentals of wellbeing, I argue, lay more with a person's ability to navigate their own wellbeing as their situation dictates. I have also shown that the highest ranked domains were not necessarily the only aspects of wellbeing that carried influence. As evidenced through the example of *Empowerment* – which did not carry a high salience but had similarly strong connections to domains with the highest salience – the relative importance of a domain is not basis enough to prioritise it over another. Some domains may act as catalysts of change due to their relative influence within a larger system of wellbeing dynamics, not due to their relative importance ranked against other domains. This led to a reconsideration of the siloed way in which wellbeing is operationalised in macro level frameworks. I have shown that aspects of wellbeing that would typically remain separate in wellbeing interventions, such as spirituality and finances, were in fact significantly connected. I have also shown that domains with limited association may have strong mutual connections with 'bridging' domains. This is conceptually important as it forces reflection on the reach and persuasion of wellbeing policies beyond their intended sectoral focus.

The collective emphasis participants placed on wellbeing differed from the individualistic models present in macro level wellbeing frameworks. This research revealed an emphasis on reciprocity towards others that is contrary to utilitarian notions of self-interested individual accumulation. That wellbeing was negotiated through collective processes and relationships with others indicates that more focus should be placed on how social processes create or constrain pathways that allow people to live the lives they value.

Finally, I have shown that community-level conceptions of wellbeing were more about the achievement of balance than the maximisation of wellbeing. Participants actively made trade-offs and formed synergies between domains as a way of achieving a balance that was unique to their values. This was a departure from dichotomous understandings of wellbeing that view it as the maximisation of happiness through progressively more gains. The pathways to wellbeing are complex and formed on different scales and levels, thus the tools used to measure wellbeing should increase sensitivity to the preferred pathways people take to live according to their own values and preferences.

## Implications for Policy

It is clear that holistic perspectives of wellbeing present a departure from macro level wellbeing measurement frameworks, yet the question remains as to what, if anything, an exploration of the interrelationships between domains adds to the wellbeing policy agenda. The results of this study offer perspectives on how wellbeing measurement, and the policies that stem from them, might be complemented by complexity thinking drawn from broader social theory. From a complexity perspective, wellbeing is the result of the actions and interactions of people, in place and time, who construct pathways that affect, and are affected by, wider processes and structures. This study offers some insight into this network of interactions and how they play out within the context of those experiencing some hardship in Cannons Creek, Porirua. Policymakers seeking to improve outcomes in this community would benefit from identifying which domains, or systems of interaction, should be focused on to offer the greatest opportunities for catalysts of change; not only for individuals, but for the wider collective.

The chord diagram results point largely to *Empowerment* and *Balance & Reciprocity* as influential aspects of wellbeing. Each had relatively low salience but strong connections with other domains, which hints to their potential wider applications in prioritising wellbeing initiatives. In addition, the MDS solution features domains in high proximity, such as in Cluster A, which emphasises a highly correlated system of interactions. Identifying where strong correlations exist could serve to target synergistic interventions, as could identifying domains that serve to bridge aspects of wellbeing, whether it be across domains (*Spirituality* at the centre of a periphery of domains), conceptual groups (*Empowerment* bridging *Inner Self* and *Physical* groups in the MDS solution), or different scales (*Family & Whānau*, *Spirituality* and *Social Connections* bridging to wider collective wellbeing).

More practically, complexity thinking enables the wellbeing approach to function beyond siloes, helping to bring together disparate policy agendas and offering better opportunities for lateral action across agencies. Additionally, demonstrating how different domains relate to and impact one another urges policymakers to reflect on all possible relevant outcomes, including unintended consequences and the impacts policy interventions may have on a wider range of wellbeing aspects.

I further suggest more room for qualitative, people-centred understandings of wellbeing to be incorporated into macro level wellbeing measurement frameworks, including the varied meanings and interpretations that people attribute to domains. Without input from the community, holistic approaches to wellbeing do nothing to challenge hegemonic ways of working and risk being just as prescriptive and technocratic as top-down approaches, meaning that working alongside communities to develop nuanced wellbeing understandings is key.

A participatory approach, coupled with the conceptual backing of the capability approach, offers an alternative set of tools for unpacking wellbeing in local contexts. Currently, the aggregate statistical data that sustains wellbeing measurement in New Zealand is fuelling a disconnect between community-level conceptions and macro level measurements. A combination of qualitative approaches together with quantitative tools would enable the operationalisation of wellbeing to reach fuller potential and allow for nuance, local particularities, consistencies, and discrepancies to be better understood and captured in measurement. This has the beneficial effect of impeding assumptions from policymakers about what people value (and for what reasons) and the types of support they need in order to flourish. Accepting that the fundamental purpose of public policy is to protect and promote the wellbeing of New Zealanders ensures wellbeing policies are fit-for-purpose and creates more downward accountability that grounds wellbeing measurement in a manner that directly benefits local communities.

## Limitations

This research was not without limitations. In terms of methodological issues, I found that the linkage diagram activity could have been improved in some respects. Participants worked on a large sheet of parchment paper to create their domains and to draw connections; however, the spatial relationship between domains could have affected the way participants chose to link them. Domains on opposite sides of the paper might not have been connected simply because it would have required drawing off the parchment paper or transecting through domains.

As mentioned briefly in Chapter Four, the direction of causality in the linkage diagrams was a limitation. Some participants drew bi-directional arrows and others drew one-

directional arrows. Because causality was not discussed in the focus groups prior to the activity, it was unclear how causality was implied in the diagram. During analysis, I ultimately decided to take the diagrams at face value, using the direction of the arrows to determine the causal relationship. Prefacing the activity with a discussion on causality might have mitigated this issue.

Establishing the interrelationships between domains was a central feature of this research, yet the linkage diagram activity and the free-list survey were both limited in the sense that connections could only be mapped between two domains at any given time. A methodology that could establish connections between three or more domains at once would likely have been a truer representation of complexity in wellbeing. For example, it would have been helpful to follow a connection from *Knowledge and Skills* to *Financial* and then onto *Empowerment*. Instead, participants would have had to connect *Knowledge and Skills* to *Financial*, and then income to *Empowerment*, but the original intent behind connecting all three would have been lost in the activity. This would have impacted how the connections were intended and therefore portrayed in the research.

Finally, it should be noted that this research intended to capture diverse interpretations of people experiencing some degree of hardship in Cannons Creek, Porirua. The diversity of perspectives was limited to WCA's client base, which naturally does not fully represent the diversity of people or experiences in the Cannons Creek community. If I had partnered with another organisation, I might have yielded different results. The results of this research were not intended to be generalisable. I recognise that wellbeing is driven by dynamic, diverse, and contextual factors which are subject to change over time. Therefore, I do not pretend to capture the multifaceted dynamics of wellbeing in one thesis. The results capture a contribution made in a specific time with a specific collection of people, within a larger and ongoing process.

## Directions for Future Research

Further development of this research approach could be undertaken in several ways. The LSF contains data gaps that will take time and investment to fill, and further work is needed to ensure a diverse range of wellbeing conceptions are sufficiently accommodated into the framework. I recommend this is complemented with more



focused attention on complexity and systems thinking in wellbeing measurement and its resulting policies. Currently, there is widespread recognition that domains are interrelated, but little research into how or to what extent.

In addition, I recommend expanding the scope of this research to include other geographic areas and other organisations like WCA which work alongside the community. Doing so would capture more diverse perspectives of those experiencing hardship in a way that is sensitive to power imbalances, as organisations such as these often act as advocates for their communities. The research could further examine wellbeing by taking into account distinct characteristics such as age, gender, and ethnicity.

I would also suggest longitudinal studies of a systems approach to wellbeing. There is a need to understand the temporal dynamics of fluctuation and the determinants of change over time. This would help to differentiate between wellbeing inequities that are in flux and trends that persist over the long term.

## Final Reflections

There is perhaps no final answer to definitively understand what a good life looks like, but if development is to enhance people's wellbeing on their own terms, there is much to reflect on in what these people say. New Zealand's transition to a wellbeing agenda marks a new opportunity to pioneer a number of conversations about how wellbeing measurement and policies may improve wellbeing outcomes. This research has explored people's conceptions of wellbeing on their own terms and discussed how a holistic approach might contribute to improved wellbeing outcomes for communities experiencing some degree of hardship. It was shown that the project of wellbeing measurement has become disconnected from the interpretations people hold about their own wellbeing, while having little capacity to assess wellbeing as dynamic and constructed in context or time.

If "what we measure shapes what we collectively strive to pursue" (Stiglitz et al., 2009, p. 9), there is a strong case for our measures of progress to reflect the intrinsic and inescapably complex nature of wellbeing as it is experienced in people's daily lives. Perhaps it would be more prudent to consider the extent to which wellbeing

measurement is concerned with people, rather than the extent to which people fit into what is being measured.

There is no doubt that wellbeing assumes a richer, more complex, and perhaps more ambiguous framing when considered as a system of wider interactions. This forms uncertain ground on which to build policy. What one might gain in deeper understandings of context and bottom-up interpretations of wellbeing may be lost in scalability and transferability to wider populations. For a wellbeing agenda that prioritises generalist, universal data for international comparison, this is a distinct disadvantage. However, as Smith and Reid (2017, p. 823) note, “for scholars interested in increasing sensitivity to difference and divergence . . . it is a distinct advantage, allowing openness to dialogue and debate, while avoiding paternalistic ethnocentrism”. There is hope that New Zealand’s renewed focus on a wellbeing agenda could offer a turning point to address persistent inequalities and hardship, but if it is to succeed in lifting people’s quality of life where GDP has failed, doing ‘more of the same’ is not enough. In the interest of contributing to discussions that open possibilities for alternative framings of wellbeing, increased sensitivity to community-derived conceptualisations and further attention to dynamic processes of wellbeing that are constructed in place, time, and context could hold productive possibilities for dialogue. Such dialogue has an important role to play in advancing inclusive and progressive understandings of wellbeing that help New Zealand’s measurement frameworks and resulting policies ensure no-one gets left behind.

# References

- Agar, M. (1999). Complexity Theory: An Exploration and Overview Based on John Holland's Work. *Field Methods*, 11(2), 99-120.  
doi:10.1177/1525822X9901100201
- Aldridge, J. (2015). *Participatory research: Working with vulnerable groups in research and practice*. Bristol: Bristol University Press. doi:10.2307/j.ctt1t8933q
- Alkire, S. (2002a). Dimensions of Human Development. *World Development*, 30(2), 181-205. doi:10.1016/S0305-750X(01)00109-7
- Alkire, S. (2002b). *Valuing freedoms : Sen's capability approach and poverty reduction*. New York: Oxford University Press. doi:10.1093/0199245797.003.0001
- Alkire, S. (2005). Why the Capability Approach? *Journal of Human Development*, 6(1), 115-135. doi:10.1080/146498805200034275
- Alkire, S. (2008). *Choosing Dimensions: The Capability Approach and Multidimensional Poverty* (MPRA Paper No. 8862). Retrieved from <http://mpra.ub.uni-muenchen.de/8862/>
- Alkire, S. (2016). The capability approach and well-being measurement for public policy. In M. Fleurbaey & M. D. Adler (Eds.), *The Oxford Handbook of Well-Being and Public Policy* (pp. 615 - 644). New York: Oxford University Press.
- Alkire, S., Foster, J., Seth, S., Santos, M. E., Roche, J. M., & Ballon, P. (2015). *Multidimensional poverty measurement and analysis* [Oxford Scholarship Online version]. doi:10.1093/acprof:oso/9780199689491.001.0001
- Alkire, S., & Jahan, S. (2018). *The New Global MPI 2018: Aligning with the Sustainable Development Goals* [HDRO Occasional Paper]. Retrieved from United Nations Development Programme (UNDP) website:  
[http://hdr.undp.org/sites/default/files/2018\\_mpi\\_jahan\\_alkire.pdf](http://hdr.undp.org/sites/default/files/2018_mpi_jahan_alkire.pdf)
- Allin, P., & Hand, D. J. (2014). *The wellbeing of nations : meaning, motive and measurement*. Chichester: Wiley. doi:10.1002/9781118917046
- Anand, P. (2016). *Happiness, well-being and human development: the case for subjective measures* [Background Paper]. Retrieved from United Nations Development Programme (UNDP) website:  
[http://hdr.undp.org/sites/default/files/anand\\_template\\_rev.pdf](http://hdr.undp.org/sites/default/files/anand_template_rev.pdf)
- Atkinson, S. (2013). Beyond Components of Wellbeing: The Effects of Relational and Situated Assemblage. *An International Review of Philosophy*, 32(2), 137-144. doi:10.1007/s11245-013-9164-0
- Austin, A. (2016). On Well-being and Public Policy: Are We Capable of Questioning the Hegemony of Happiness? *Social Indicators Research*, 127(1), 123 - 138. doi:10.1007/s11205-015-0955-0
- Bache, I., & Scott, K. (Eds.). (2018). *The politics of wellbeing : theory, policy and practice*. Cham: Palgrave Macmillan.
- Beauchamp, E., Woodhouse, E., Clements, T., & Milner-Gulland, E. (2018). "Living a good life": conceptualizations of well-being in a conservation context in Cambodia. *Ecology and Society*, 23(2). doi:10.5751/ES-10049-230228

- Belgrave, M. (2004). Needs and the state: Evolving social policy in New Zealand history. In B. Dalley & M. Tennant (Eds.), *Past Judgement: Social policy in New Zealand history* (pp. 23 - 38). Dunedin: University of Otago Press.
- Bell, S., & Morse, S. (2011). Sustainable Development Indicators, The Tyranny of Methodology Revisited. *Consilience*, 6(1), 222-239. Retrieved from <http://www.istor.org/stable/26167824>
- Bernard, H. R. (2018). *Research methods in anthropology : qualitative and quantitative approaches* (6 ed.). Lanham: Rowman & Littlefield.  
doi:<https://ebookcentral.proquest.com/lib/vuw/detail.action?docID=5113478>
- Burn, R. W. (2000). *Quantifying and Combining Causal Diagrams*. Reading: Statistical Services Centre, University of Reading
- Burns, D., & Howard, J. (2018). Leaving no-one behind: Building sustainable inclusion [Online Lecture]. Retrieved 15 November 2018 from <https://www.ids.ac.uk/events/leave-no-one-behind-building-sustainable-inclusion/>
- Burns, D., & Worsley, S. (2015). *Navigating complexity in international development: Facilitating sustainable change at scale*. Rugby: Practical Action Publishing.  
doi:10.3362/9781780448510
- Bykvist, K. (2016). Preference-based views of well-being. In M. Fleurbaey & M. D. Adler (Eds.), *The Oxford Handbook of Well-Being and Public Policy* (pp. 321 - 346). New York: Oxford University Press.
- Camfield, L. (2006). *Why and How of Understanding 'Subjective' Well-being: Exploratory work by the WeD group in four developing countries* (Working Paper 26). Retrieved from University of Bath website: <http://www.bath.ac.uk/soc-pol/welldev/research/workingpaperpdf/wed26.pdf>
- Camfield, L., Crivello, G., & Woodhead, M. (2009). Wellbeing Research in Developing Countries: Reviewing the Role of Qualitative Methods. *Social Indicators Research*, 90(1), 5-31. doi:10.1007/S11205-008-9310-Z
- Cammarota, J., & Fine, M. (Eds.). (2008). *Revolutionizing Education: Youth Participatory Action Research in Motion*. New York: Routledge.
- Chakravarty, S. R., & Lugo, M. (2016). Multidimensional indicators of inequality and poverty. In M. Adler & M. Fleurbaey (Eds.), *The Oxford Handbook of Well-being and Public Policy* (pp. 246 - 285). New York: Oxford University Press.
- Chambers, R. (1983). *Rural development : putting the last first*. New York: Wiley
- Chambers, R. (1994). *Paradigm shifts and the practice of participatory research and development* (Working Paper 2). Institute of Development Studies. Retrieved from <https://opendocs.ids.ac.uk/opendocs/handle/123456789/1761>
- Chambers, R. (1997a). *Whose reality counts? : putting the first last / Robert Chambers*. London: Intermediate Technology Publications
- Chambers, R. (1997b). *Whose reality counts? Putting the first last*. London: Intermediate Technology Publications
- Chambers, R. (2003). *Who Counts? The Quiet Revolution of Participation and Numbers* (Working Paper 296). Institute of Development Studies. Retrieved from <https://opendocs.ids.ac.uk/opendocs/handle/123456789/398>

- Charmaz, K. (2014). *Constructing Grounded Theory* (2 ed.). London: SAGE Publications
- Chile, L. M., & Simpson, G. (2004). Spirituality and community development: Exploring the link between the individual and the collective. *Community Development Journal*, 39(4), 318 - 331. doi:10.1093/cdj/bsh029
- Christens, B., & Speer, P. (2006). Review Essay: Tyranny/Transformation: Power and Paradox in Participatory Development. *Forum: Qualitative Social Research*, 7(2). Retrieved from <https://search.proquest.com/docview/869233954>
- Clark, D. A. (2005). Sen's capability approach and the many spaces of human well-being. *Journal of Development Studies*, 41(8), 1339-1368. doi:10.1080/00220380500186853
- Clark, D. A., Biggeri, M., & Frediani, A. A. (Eds.). (2019). *The Capability Approach, Empowerment and Participation*. London, UK: Palgrave Macmillan.
- Clark, V., & Ivankova, N. V. (2016). *Mixed methods research : a guide to the field*. Thousand Oaks: SAGE Publications. doi:10.4135/9781483398341
- Cleaver, F. (2001). Institutions, Agency and the Limitations of Participatory Approaches to Development. In B. Cooke & U. Kothari (Eds.), *Participation: The New Tyranny?* London: Zed Books.
- Cooke, B., & Kothari, U. (Eds.). (2001). *Participation : the new tyranny?* London: Zed Books.
- Cornwall, A. (2008). Unpacking 'Participation': models, meanings and practices. *Community Development Journal*, 43(3), 269-283. doi:10.1093/cdj/bsn010
- Cornwall, A., & Jewkes, R. (1995). What is participatory research? *Social Science & Medicine*, 41(12), 1667-1676. doi:10.1016/0277-9536(95)00127-S
- Costanza, R., Daly, L., Fioramonti, L., Giovannini, E., Kubiszewski, I., Mortensen, L. F., . . . Wilkinson, R. (2016). Modelling and measuring sustainable wellbeing in connection with the UN Sustainable Development Goals. *Ecological Economics*, 130, 350-355. doi:10.1016/j.ecolecon.2016.07.009
- Costanza, R., Kubiszewski, I., Giovannini, E., Lovins, H., McGlade, J., Pickett, K., . . . Wilkinson, R. (2014). Time to leave GDP behind. *Nature*, 505(7483), 283-285. Retrieved from <https://www.nature.com/news/development-time-to-leave-gdp-behind-1.14499>
- Cram, F. (2014). Measuring Māori wellbeing : a commentary. *MAI journal (Online)*, 3(1), 18-32. Retrieved from <http://www.journal.mai.ac.nz/content/measuring-m%C4%81ori-wellbeing-commentary>
- Creswell, J. W. (2009). *Research Design: Qualitative, Quantitative, and Mixed Methods Approaches* (3 ed.). Thousand Oaks: SAGE Publications
- Creswell, J. W. (2013). *Qualitative inquiry and research design: choosing among five approaches* (3 ed.). Thousand Oaks: SAGE Publications
- Creswell, J. W., & Clark, V. (2018). *Designing and conducting mixed methods research* (Third Edition ed.). Thousand Oaks: SAGE Publications
- Dalley, B., & Tennant, M. (Eds.). (2004). *Past judgement : social policy in New Zealand history*. Dunedin: University of Otago Press.

- Dalziel, P., & Saunders, C. (2014). *Wellbeing Economics: Future Directions for New Zealand* (G. Walker Ed.). Wellington: Bridget Williams Books Limited
- de Rosa, D. (2017). Capability Approach and Multidimensional Well-Being: The Italian Case of BES. *Social Indicators Research*, 140(1), 1-31. doi:10.1007/s11205-017-1750-x
- Deloitte Touche Tohmatsu Limited. (2018). *Programme Impact Assessment for Wesley Community Action - Cannons Creek*. Retrieved from <http://www.wesleyca.org.nz/wp-content/uploads/2018/09/Making-Good-Sense-final-2.pdf>
- Department of the Prime Minister and Cabinet. (2019). *Have Your Say: Summary Report, National Engagement on Tamariki Tu, Tamariki Ora: New Zealand's First Child and Youth Wellbeing Strategy*. Retrieved from <https://dpmc.govt.nz/publications/summary-report-national-engagement-child-and-youth-wellbeing>
- Diener, E., Oishi, S., & Lucas, R. E. (2009). Subjective well-Being: the science of happiness and life satisfaction. In S. J. Lopez & C. R. Snyder (Eds.), *The Oxford Handbook of Positive Psychology* (2 ed.). New York: Oxford University Press.
- Dorn, D., Fischer, J. A. V., Kirchgassner, G., & Sousa-Poza, A. (2007). Is It Culture or Democracy? The Impact of Democracy and Culture on Happiness. *Social Indicators Research*, 82(3), 505-526. doi:10.1007/s11205-006-9048-4
- Doyal, L., & Gough, I. (1991). *A theory of human need*. Basingstoke: Macmillan Education
- Drèze, J., & Sen, A. (2002). *India: Development and Participation* (2 ed.). Oxford: Oxford University Press. doi:10.1093/acprof:oso/9780199257492.001.0001
- Durie, M. (1998). *Whaiora : Māori health development* (2 ed.). Auckland: Oxford University Press
- Durie, M. (2003). *Ngā kāhui pou: launching Māori futures*. Wellington: Huia
- Durie, M. (2006). *Measuring Māori Wellbeing* [Guest Lecture Series]. New Zealand Treasury. Retrieved from <https://treasury.govt.nz/sites/default/files/2007-09/tgls-durie.pdf>
- Eckersley, R. M. (2016). Is the West really the best? Modernisation and the psychosocial dynamics of human progress and development. *Oxford Development Studies*, 44(3), 349-365. doi:10.1080/13600818.2016.1166197
- Eppel, E., Karacaoglu, G., & Provoost, D. (2018). *From Complexity to Collaboration: Creating the New Zealand we want for ourselves, and enabling future generations to do the same for themselves* (Working Paper 18/01). Institute for Governance and Policy Studies. Retrieved from [www.occ.org.nz/publications/reports/from-complexity-to-collaboration/](http://www.occ.org.nz/publications/reports/from-complexity-to-collaboration/)
- Eriksson, L., Rice, J. M., & Goodin, R. E. (2007). Temporal Aspects of Life Satisfaction. *Social Indicators Research*, 80(3), 511-533. doi:10.1007/s11205-006-0005-z
- Fals-Borda, O., & Rahman, M. A. (Eds.). (1991). *Action and knowledge : breaking the monopoly with participatory action-research*. London: Intermediate Technology Publications.

- Ferreira, F., & Lugo, M. (2013). Multidimensional Poverty Analysis: Looking for a Middle Ground. *World Bank Research Observer*, 28(2), 220-235. doi:10.1093/wbro/lks013
- Finnis, J. (1980). *Natural law and natural rights*. Oxford: Clarendon Press
- Fleurbaey, M. (2009). Beyond GDP: The Quest for a Measure of Social Welfare. *Journal of Economic Literature*, 47(4), 1029-1075. doi:10.1257/jel.47.4.1029
- Fleurbaey, M., & Blanchet, D. (2013). *Beyond GDP: Measuring Welfare and Assessing Sustainability*. New York: Oxford University Press. doi:10.1093/acprof:oso/9780199767199.001.0001
- Frediani, A. A. (2007). *Participatory Research Methods and Capability Approach: Researching Dimensions of Housing*. Paper presented at the Paper presented at the 4th annual conference of the HDCA, 18-20 September 2007.
- Frediani, A. A. (2010). Sen's Capability Approach as a framework to the practice of development. *Development in Practice*, 20(2), 173-187. doi:10.1080/09614520903564181
- Freire, P. (1970). *Pedagogy of the oppressed*. New York: Continuum
- Freire, P. (1997). Forward. In S. Smith, D. Willms, & N. Johnson (Eds.), *Nurtured by knowledge: learning to do participatory action-research* (pp. xi - xii). New York: The Apex Press.
- Fukuda-Parr, S. (2003). The human development paradigm: Operationalising Sen's ideas on capabilities. *Feminist Economics*, 9(2-3), 301-317. doi:10.1080/1354570022000077980
- Gaillard, J. C., Cadag, J. R., Gampell, A., Hore, K., Le Dé, L., & McSherry, A. (2016). Participatory numbers for integrating knowledge and actions in development. *Development in Practice*, 26(8), 998-1012. doi:10.1080/09614524.2016.1226263
- Gan, M., Heller, D., & Chen, S. (2018). The Power in Being Yourself: Feeling Authentic Enhances the Sense of Power. *Personality and Social Psychology Bulletin*, 44(10), 1460-1472. doi:10.1177/0146167218771000
- Gasper, D. (2009). Understanding the diversity of conceptions of well-being and quality of life. *Journal of socio-economics*, 39(3), 351-360. doi:10.1016/j.socec.2009.11.006
- Gore, C. (2000). The Rise and Fall of the Washington Consensus as a Paradigm for Developing Countries. *World Development*, 28(5), 789-804. doi:10.1016/S0305-750X(99)00160-6
- Gough, I. (2004). Human Well-Being and Social Structures: Relating the Universal and the Local. *Global Social Policy*, 4(3), 289-311. doi:10.1177/1468018104047489
- Gough, I., McGregor, J. A., & Camfield, L. (2007). Theorising Wellbeing in International Development. In I. Gough & J. A. McGregor (Eds.), *Wellbeing in Developing Countries: from Theory to Research* (pp. 3 - 44). Cambridge: Cambridge University Press.
- Gough, I., McGregor, J. A., & Camfield, L. (2014). *Human wellbeing and sustainability: interdependent and intertwined* (Working Paper 19). Retrieved from University of Bath website: <http://www.bath.ac.uk/soc-pol/welldev/research/workingpaperpdf/wed19.pdf>

- Grisez, G., Boyle, J., & Finnis, J. (1987). Practical Principles, Moral Truth, and Ultimate Ends. *American Journal of Jurisprudence*, 32(1), 99 - 151. doi:10.1093/ajj/32.1.99
- Gu, Z., Gu, L., Eils, R., Schlesner, M., & Brors, B. (2014). Circlize Implements and enhances circular visualization in R. *Bioinformatics*, 30(19), 2811-2812. doi:10.1093/bioinformatics/btu393
- Hall, J., Giovannini, E., Morrone, A., & Ranuzzi, G. (2010). *A Framework to Measure the Progress of Societies* (Working Paper 2010/05). OECD. Retrieved from <http://dx.doi.org/10.1787/5km4k7mnrkzw-en>
- Hammond, S. (2006). Introduction to Multivariate Data Analysis. In G. Breakwell, S. Hammond, C. Fife-Schaw, & J. A. Smith (Eds.), *Research Methods in Psychology* (3 ed., pp. 414 - 442). Thousand Oaks: SAGE Publications.
- Hand, D. J. (2016). *Measurement : a very short introduction*. Oxford: Oxford University Press. doi:10.1093/actrade/9780198779568.001.0001
- Hart, R. (1992). *Children's Participation: from tokenism to citizenship* (Working Paper 4). UNICEF. Retrieved from <https://www.unicef-irc.org/publications/100-childrens-participation-from-tokenism-to-citizenship.html>
- Haybron, D. M. (2016). Mental State Approaches to Well-Being. In M. Fleurbaey & M. D. Adler (Eds.), *The Oxford Handbook of Well-Being and Public Policy* (pp. 347 - 378). New York: Oxford University Press.
- Henkel, H., & Stirrat, R. (2001). Participation as spiritual duty; empowerment as secular subjection. In B. Cooke & U. Kothari (Eds.), *Participation: The new tyranny?* (pp. 168 - 184). New York: Zed Books.
- Hesse-Biber, S. N., Rodriguez, D., & Frost, N. A. (2015). A Qualitatively Driven Approach to Multimethod and Mixed Methods Research. In S. N. Hesse-Biber & R. B. Johnson (Eds.), *The Oxford Handbook of Multimethod and Mixed Methods Research Inquiry*. New York: Oxford University Press.
- Hickey, S., & Mohan, G. (Eds.). (2004). *Participation, from tyranny to transformation? : exploring new approaches to participation in development*. New York: Palgrave Macmillan.
- Hurka, T. (2016). Objective Goods. In M. Adler & M. Fleurbaey (Eds.), *The Oxford Handbook of Well-being and Public Policy* (pp. 379 - 402). New York: Oxford University Press.
- Jia, K., & Smith, C. (2016). *Subjective wellbeing in New Zealand : some recent evidence* (Working Paper 2016/3). New Zealand Productivity Commission, Te Kōmihana Whai Hua o Aotearoa. Retrieved from <https://www.productivity.govt.nz/working-paper/subjective-wellbeing-in-new-zealand-some-recent-evidence>
- Johnson, B., & Gray, R. (2010). A history of philosophical and theoretical issues for mixed methods research. In A. Tashakkori & C. Teddlie (Eds.), *Mixed Methods in Social & Behavioural Research* (2 ed., pp. 69 - 94). Thousand Oaks: SAGE Publications.
- Kahneman, D., Wakker, P., & Sarin, R. (1997). Back to Bentham? Explorations of Experienced Utility. *The Quarterly Journal of Economics*, 112(2), 375. doi:10.1162/003355397555235



- Kapoor, I. (2005). Participatory development, complicity and desire. *Third World Quarterly*, 26(8), 1203-1220. doi:10.1080/01436590500336849
- Karacaoglu, G., Krawczyk, J., & King, A. (2019). *Intergenerational Wellbeing and Public Policy: An Integrated Environmental, Social, and Economic Framework*. Singapore: Springer
- Kesby, M. (2000). Participatory diagramming: deploying qualitative methods through an action research epistemology. *Area*, 32(4), 423-435. doi:10.1111/j.1475-4762.2000.tb00158.x
- Kindon, S., Pain, R., & Kesby, M. (2007). *Participatory Action Research Approaches and Methods : Connecting People, Participation and Place*. London: Routledge. doi:10.4324/9780203933671
- King, A., Huseynli, G., & MacGibbon, N. (2018). *Wellbeing Frameworks for the Treasury*. New Zealand Treasury. Retrieved from [www.treasury.govt.nz/publications/research-policy/dp/2018/18-01](http://www.treasury.govt.nz/publications/research-policy/dp/2018/18-01)
- Kothari, U. (2001). Power, knowledge and social control in participatory development. In B. Cooke & U. Kothari (Eds.), *Participation: the new tyranny?* (pp. 139 - 152). London: Zed books.
- Lunn, J. (2009). The Role of Religion, Spirituality and Faith in Development: a critical theory approach. *Third World Quarterly*, 30(5), 937-951. doi:10.1080/01436590902959180
- Mark, G. T., & Lyons, A. C. (2010). Māori healers' views on wellbeing: The importance of mind, body, spirit, family and land. *Social Science & Medicine*, 70(11), 1756-1764. doi:10.1016/j.socscimed.2010.02.001
- Maslow, A. H. (1943). A theory of human motivation. *Psychological Review*, 50(4), 370-396. doi:10.1037/h0054346
- McGregor, A. J., Camfield, L., & Coulthard, S. (2015). Competing Interpretations: Human Wellbeing and the Use of Quantitative and Qualitative Methods. In K. Roelen & L. Camfield (Eds.), *Mixed Methods Research in Poverty and Vulnerability: Sharing Ideas and Learning Lessons* (pp. 231 - 260). London: Palgrave Macmillan.
- McGregor, J. A. (2007). *Researching Human Wellbeing: From Concepts to Methodology* (Working Paper 20). Retrieved from University of Bath website: <http://www.bath.ac.uk/soc-pol/welldev/research/workingpaperpdf/wed20.pdf>
- McGregor, J. A. (2018). Reconciling Universal Frameworks and Local Realities in Understanding and Measuring Wellbeing. In I. Bache & K. Scott (Eds.), *The Politics of Wellbeing: Theory, Policy and Practice* (pp. 197 - 224). New York: Palgrave Macmillan.
- McLeod, K. (2018). *Our People - Multidimensional wellbeing in New Zealand* (Analytical Paper 18/04). New Zealand Treasury. Retrieved from <https://treasury.govt.nz/publications/ap/ap-18-04>
- Mertens, D. M., Bledsoe, K. L., Sullivan, M., & Wilson, A. (2010). Utilization of Mixed Methods for Transformative Purposes. In A. Tashakkori & C. Teddlie (Eds.), *Sage Handbook of Mixed Methods in Social & Behavioral Research* (Second ed., pp. 193 - 213). Thousand Oaks: SAGE Publications.

- Miles, M. B., & Huberman, M. A. (1994). *Qualitative Data Analysis: An Expanded Sourcebook* (2 ed.). Thousand Oaks: SAGE Publications
- Ministry of Foreign Affairs and Trade. (2019). *Towards a better future, together: New Zealand's progress towards the SDGs - 2019*. Wellington Retrieved from <https://www.mfat.govt.nz/assets/Uploads/New-Zealand-Voluntary-National-Review-2019-Final.pdf>
- Narayan-Parker, D., Patel, R., Schafft, K., Rademacher, A., & Koch-Schulte, S. (2000). *Voices of the poor: Can anyone hear us?* New York: Published by Oxford University Press for the World Bank. doi:10.1596/0-1952-1601-6
- Narayan-Parker, D., & Petesch, P. L. (2002). *Voices of the poor: From many lands*. New York: Oxford University Press for the World Bank. doi:10.1596/0-8213-5049-8
- Narayan, D., Chambers, R., Shah, M. K., & Petesch, P. (2000). *Voices of the poor: Crying Out for Change*. New York: Oxford University Press for The World Bank. doi:10.1596/0-1952-1602-4
- Neuman, W. L. (2011). *Social research methods : qualitative and quantitative approaches* (7 ed.). Boston: Allyn & Bacon
- New Zealand Government. (2019). Promoting well-being in local communities [Website]. Retrieved 6 July 2019 from <https://www.beehive.govt.nz/release/promoting-well-being-local-communities>
- New Zealand Treasury. (2018a). Budget Policy Statement 2019 [Website]. Retrieved 17 February 2019 from <https://treasury.govt.nz/publications/budget-policy-statement/budget-policy-statement-2019-html>
- New Zealand Treasury. (2018b). *Our People, Our Country, Our Future: Living Standards Framework: Introducing the Dashboard*. Retrieved from <https://treasury.govt.nz/publications/tp/living-standards-framework-introducing-dashboard>
- New Zealand Treasury. (2019). Living Standards Framework - Dashboard [Website]. Retrieved 28 June 2019 from <https://lsfdashboard.treasury.govt.nz/wellbeing/>
- New Zealand Treasury, & Te Puni Kokiri. (2019). *An Indigenous Approach to the Living Standards Framework* (Discussion Paper 19/01). Retrieved from <https://treasury.govt.nz/publications/dp/dp-19-01>
- Nussbaum, M. (2000). *Women and human development : the capabilities approach*. New York: Cambridge University Press
- O'Donnell, G., Deaton, A., Durand, M., Halpern, D., & Layard, R. (2014). *Wellbeing and policy*. The Legatum Institute. Retrieved from <https://li.com/wp-content/uploads/2019/03/commission-on-wellbeing-and-policy-report-march-2014-pdf.pdf>
- Ochocka, J., Moorlag, E., & Janzen, R. (2010). A framework for entry: PAR values and engagement strategies in community research. *Gateways: International Journal of Community Research and Engagement*, 3(1), 1-19. doi:10.5130/ijcre.v3i0.1328
- OECD. (2012). *Highlights and conclusions: 4th OECD World Forum on Statistics, Knowledge and Policy Measuring Well-Being for Development and Policy Making*. Retrieved from [www.oecd.org/oecdworldforum/newdelhi2012](http://www.oecd.org/oecdworldforum/newdelhi2012)

- OECD. (2013). *OECD Guidelines on Measuring Subjective Well-being*. Paris: OECD Publishing. doi:10.1787/9789264191655-en
- OECD. (2019). Better Life Index [Website]. Retrieved 28 June 2019 from <https://stats.oecd.org/Index.aspx?DataSetCode=BLI>
- Pain, R., & Francis, P. (2003). Reflections on participatory research. *Area*, 35(1), 46-54. doi:10.1111/1475-4762.00109
- Peet, R., & Hartwick, E. (2009). *Theories of development : contentions, arguments, alternatives* (2 ed.). New York: Guilford Press
- Petrie, R. (2013). *Late-Adolescent Well-Being: The Balance of Life Domains*. (Doctoral Dissertation), Pace University, Retrieved from <https://search.proquest.com/docview/1400497914>
- Pieterse, J. N. (2000). After post-development. *Third World Quarterly*, 21(2), 175-191. doi:10.1080/01436590050004300
- Pink, B., Taylor, S., & Wetzler, H. (2014). Measuring Progress: The International Context. In A. Podger & D. Trewin (Eds.), *Measuring and Promoting Wellbeing* (pp. 163 - 190). Canberra: ANU Press.
- Pouw, N., & McGregor, A. J. (2014). *An Economics of Wellbeing: What Would Economics Look Like if it were Focused on Human Wellbeing?* (Volume 2014 Number 436). Institute of Development Studies. Retrieved from <https://hdl.handle.net/11245/1.417421>
- Pretty, J. N. (1995). Participatory learning for sustainable agriculture. *World Development*, 23(8), 1247-1263. doi:10.1016/0305-750X(95)00046-F
- Profile.ID. (2019). Cannons Creek North: Social Atlas [Website]. Retrieved 12 August 2019 from <https://profile.idnz.co.nz/porirua/about?WebID=140>
- R Core Team. (2019). R: A language and environment for statistical computing [Computer software]. Vienna: R Foundation for Statistical Computing. Retrieved from <https://www.R-project.org>
- Rabinowitz, G. (1975). An introduction to nonmetric multidimensional scaling. *American journal of political science*, 19(2), 343-390. doi:10.2307/2110441
- Ravallion, M. (2011). On multidimensional indices of poverty. *The Journal of Economic Inequality*, 9(2), 235-248. doi:10.1007/s10888-011-9173-4
- Ravallion, M. (2016). *The Economics of Poverty: History, Measurement, and Policy*. New York: Oxford University Press. doi:10.1093/acprof:oso/9780190212766.001.0001
- Robeyns, I. (2005). The Capability Approach: a theoretical survey. *Journal of Human Development*, 6(1), 93-117. doi:10.1080/146498805200034266
- Robeyns, I. (2017). *Wellbeing, Freedom and Social Justice: The Capability Approach Re-Examined*. Open Book Publishers: Cambridge, UK. doi: 10.11647/OBP.0130
- Rojas, M. (2007). The complexity of wellbeing: a life-satisfaction conception and a domains-of-life approach. In I. Gough & J. A. McGregor (Eds.), *Wellbeing in Developing Countries: From Theory to Research* (pp. 259 - 280). New York: Cambridge University Press.
- Ryan, R. M., Huta, V., & Deci, E. L. (2013). Living Well: A Self-Determination Theory Perspective on Eudaimonia. In A. Delle Fave (Ed.), *The Exploration of Happiness:*

*Present and Future Perspectives* (pp. 117 - 139). Dordrecht: Springer Netherlands.

Statistics New Zealand. (2019). About Ngā Tūtohu Aotearoa – Indicators Aotearoa New Zealand [Website]. Retrieved 9 August 2019 from <https://wellbeingindicators.stats.govt.nz/en/about-nga-tutohu-aotearoa-indicators-aotearoa-new-zealand/>

Scott, K. (2012). *Measuring wellbeing: Towards sustainability?* New York: Routledge

Sen, A. (1992). *Inequality reexamined*. London: Harvard University Press

Sen, A. (1996). On the foundations of welfare economics: utility, capability and practical reason. In F. Farina, F. Hahn, & S. Vannucci (Eds.), *Ethics, Rationality and Economic Behaviour* (pp. 50 - 65). Oxford: Clarendon Press.

Sen, A. (1999). *Development as freedom*. New York: Oxford University Press

Sen, A. (2002). *Rationality and Freedom*. London: Harvard University Press

Sen, A., & Muellbauer, J. (1987). *The standard of living*. Cambridge: Cambridge University Press

Seth, S. (2009). Inequality, Interactions, and Human Development. *Journal of Human Development and Capabilities*, 10(3), 375-396.  
doi:10.1080/19452820903048878

Smith, C. (2018). *Treasury Living Standards Dashboard: Monitoring Intergenerational Wellbeing* [Commissioned Report]. Kotata Insight. Retrieved from <https://treasury.govt.nz/publications/commissioned-report/treasury-living-standards-dashboard-monitoring-intergenerational-wellbeing>

Smith, T. S. J., & Reid, L. (2017). Which 'being' in wellbeing? Ontology, wellness and the geographies of happiness. *Progress in Human Geography*, 42(6), 807-829.  
doi:10.1177/0309132517717100

Sointu, E. (2005). The Rise of an Ideal: Tracing Changing Discourses of Wellbeing. *The Sociological Review*, 53(2), 255-274. doi:10.1111/j.1467-954X.2005.00513.x

Statistics New Zealand. (2018a). Differences between Te Kupenga 2013 and 2018 surveys [Website]. Retrieved 28 February 2018 from <https://www.stats.govt.nz/methods/differences-between-te-kupenga-2013-and-2018-surveys>

Statistics New Zealand. (2018b). *General Social Survey 2018: Final content*. Retrieved from [www.stats.govt.nz](http://www.stats.govt.nz)

Statistics New Zealand. (2018c). Indicators Aotearoa [Website]. Retrieved 11 July 2018 from <https://wellbeingindicators.stats.govt.nz>

Stewart, F. (2006). Basic Needs Approach. In D. A. Clark (Ed.), *The Elgar Companion to Development Studies* (pp. 14 - 18). Northampton: Edward Elgar Publishing Limited.

Stiglitz, J. E., Sen, A., & Fitoussi, J.-P. (2009). *Report by the commission on the measurement of economic performance and social progress*. Retrieved from <http://www.stiglitzsen-fitoussi.fr/en/index.htm>.

Streeten, P. (1984). Basic needs: some unsettled questions. *World Development*, 12(9), 973-982. doi:10.1016/0305-750X(84)90054-8

- Sugden, R. (1993). Welfare, Resources, and Capabilities: A Review of Inequality Reexamined by Amartya Sen. *Journal of Economic Literature*, 31(4), 1947 - 1962. Retrieved from <https://www.jstor.org/stable/2728332>
- Sumner, A., & Mallett, R. (2013). Capturing Multidimensionality: What does a Human Wellbeing Conceptual Framework Add to the Analysis of Vulnerability? *Social Indicators Research*, 113(2), 671-690. doi:10.1007/s11205-013-0295-x
- The University of Auckland. (2019). New Zealand Index of Multiple Deprivation [Website]. Retrieved 12 August 2019 from <http://www.imd.ac.nz>
- The World Bank Group. (2019). Understanding Poverty [Website]. Retrieved February 3 2019 from <http://www.worldbank.org/en/topic/poverty>
- Thompson, M. J. (2017). Introduction: What Is Critical Theory? In M. J. Thompson (Ed.), *The Palgrave Handbook of Critical Theory* (pp. 1 - 14). New York: Palgrave Macmillan.
- Thomsen, S. a., Tavita, J., & Levi-Teu, Z. (2018). *A Pacific Perspective on the Living Standards Framework* (Discussion Paper 18/09). New Zealand Treasury. Retrieved from <https://treasury.govt.nz/publications/dp/dp-18-09>
- United Nations. (2008). *People Matter: Civic Engagement in Public Governance* (World Public Sector Report). Retrieved from <http://www.un.org/en/development/desa/publications/world-public-sector-report-2008-people-matter.html>
- United Nations. (2015). *Transforming our world: The 2030 agenda for sustainable development* (Report 70/1). Retrieved from <https://sustainabledevelopment.un.org/post2015/transformingourworld>
- United Nations Development Programme. (1996). *Human Development Report*. Retrieved from [http://hdr.undp.org/sites/default/files/reports/257/hdr\\_1996\\_en\\_complete\\_no\\_stats.pdf](http://hdr.undp.org/sites/default/files/reports/257/hdr_1996_en_complete_no_stats.pdf)
- Ussher, S., & Walker, P. (2015). Making What Matters Count. *New Zealand Sociology*, 30(3), 41-55. Retrieved from <https://search.proquest.com/docview/1736618235?accountid=14782>
- Venables, W. N., & Ripley, B. D. (2002). *Modern Applied Statistics with S* (4 ed.). New York: Springer
- Weijers, D., & Morrison, P. (2018). Wellbeing and Public Policy: can New Zealand be a leading light for the 'wellbeing approach'? *Policy Quarterly*, 14(4), 3 - 12. Retrieved from [https://www.victoria.ac.nz/data/assets/pdf\\_file/0008/1713626/Weijers\\_Morrison.pdf](https://www.victoria.ac.nz/data/assets/pdf_file/0008/1713626/Weijers_Morrison.pdf)
- White, S. (1996). Depoliticising development: The uses and abuses of participation. *Development in Practice*, 6(1), 6-15. doi:10.1080/0961452961000157564
- White, S. (2009). *Bringing Wellbeing into Development Practice* (WeD Working Paper 09/50). Retrieved from University of Bath website: <http://www.bath.ac.uk/soc-pol/welldev/research/working.htm>
- White, S. (2010). Analysing wellbeing: a framework for development practice. *Development in Practice*, 20(2), 158-172. doi:10.1080/09614520903564199

- White, S. (2016). Introduction: The Many Faces of Wellbeing. In S. C. White & C. Blackmore (Eds.), *Cultures of Wellbeing Method, Place, Policy* (pp. 1 - 44). London: Palgrave Macmillan.
- White, S. (2017). Relational wellbeing: re-centring the politics of happiness, policy and the self. *Policy and Politics*, 45(2), 121-136.  
doi:10.1332/030557317X14866576265970
- World Commission on Environment and Development. (1987). *Our common future*. Retrieved from <https://sustainabledevelopment.un.org/content/documents/5987our-common-future.pdf>

# Appendix A – Information Sheets



## **Understanding Complexity in Wellbeing and the 'Leave No One Behind' Agenda: Studies in Aotearoa New Zealand**

### **Information Sheet – Interview**

You are invited to take part in this project aiming to learn more about how wellbeing is defined and experienced for people in Aotearoa New Zealand.

#### **Who am I?**

My name is Chelsey Reid, and I am a postgraduate student at Victoria University of Wellington. This study fulfils a partial requirement for the completion of my Masters of Development Studies.

#### **What is the aim of the project?**

This project involves participatory activities and interviews that explore connections between different aspects of wellbeing and illbeing, and how changes in these aspects affect your ability to improve or maintain your wellbeing. This research project has been approved by the Victoria University Human Ethics Committee (reference #0000026692).

#### **How can you help?**

I am inviting people who feel they are having difficulty meeting their material and non-material needs, and/or have inadequate socioeconomic resources to be able to participate in their communities and wider society. Your participation in this research is your choice. If you agree to take part, I would like to interview you about your perceptions and experiences of your own wellbeing. If at any stage you feel uncomfortable, you are free to skip a particular question, or stop the interview at any time without having to give reasons. You can withdraw yourself (and your information) from the study by contacting me before 15 January 2019.

#### **What will happen to the information you give?**

I would like to audio-record the session with your permission, and will make a summary transcript available to you to check before I use it for analysis. Only my supervisors and I will read the notes or transcript of the interview. The interview transcripts, summaries and any recordings will be kept securely for three years and destroyed/electronically wiped on 26 July 2022.

By default, your identity will remain private, unless you **choose** to be identified in the published results. If you choose for your identity to remain private, your name and information will be kept confidential, and will be viewed only by myself and my supervisors. No opinions will be attributed to you in any way that will identify you in any reports, presentations, or public documentation. However, you should be aware that in small projects your identity might be obvious to others in your community.

### **What will the project produce?**

If you agree to participate, your contribution will be used to write a Master's thesis. It is intended that the results may be published in one or more journal articles, reports, or presentations linked to this research. You may request a copy of these publications or presentations at any time.

### **If you decide to participate, you have the right to:**

- choose not to answer any question;
- ask for the recorder to be turned off at any time during the interview;
- withdraw from the study before 15 January 2019;
- ask any questions about the study at any time;
- receive a copy of your interview summary;
- read over and comment on a written summary of your interview;
- be able to read any reports of this research by emailing the researcher to request a copy.

**If you have any questions about this project, either now or in the future, please feel free to contact me or my supervisors:**

Chelsey Reid      chelsey.reid@vuw.ac.nz

Researcher

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Co-Supervisor      School of Government and Public Policy

### **Human Ethics Committee Information**

If you have any concerns about the ethical conduct of the research you may contact the Victoria University HEC Convenor: Dr Judith Loveridge. Email [hec@vuw.ac.nz](mailto:hec@vuw.ac.nz) or telephone +64-4-463 6028.



## **Understanding Complexity in Wellbeing and the 'Leave No One Behind' Agenda:**

### **Studies in Aotearoa New Zealand**

#### **Information Sheet – Focus Group**

You are invited to take part in this project aiming to learn more about how wellbeing is defined and experienced for people in Aotearoa New Zealand.

#### **Who am I?**

My name is Chelsey Reid, and I am a postgraduate student at Victoria University of Wellington. This study fulfils a partial requirement for the completion of my Masters of Development Studies.

#### **What is the aim of this project?**

This project involves participatory activities and interviews that explore connections between different aspects of wellbeing and illbeing, and how changes in these aspects affect your ability to improve or maintain your wellbeing. This research project has been approved by the Victoria University Human Ethics Committee (reference #0000026692).

#### **How can you help?**

I am inviting people who feel they are having difficulty meeting their material and non-material needs, and/or have inadequate socioeconomic resources to be able to participate in their communities and wider society. Your participation in this research is your choice. If you agree to participate, you will take part in a focus group to discuss your perceptions and experiences of your own wellbeing. The focus group will take about 2 hours of your time.

The information shared during the focus group is confidential. That means after the focus group, you may not communicate to anyone, including family members and close friends, any details about the focus group. You can withdraw from the focus group at any time before it begins, and/or while it is in progress. However, it will not be possible to withdraw the information you have provided up to that point as it will be part of a discussion with other participants.

**What will happen to the information you give?**

I would like to audio-record the session with your permission, and will make a summary transcript available to you to check before I use it for analysis. Only my supervisors and I will read the notes or transcript of focus group. The focus group transcripts, summaries and any recordings will be kept securely for three years and destroyed/electronically wiped on 26 July 2022.

By default, your identity will remain private, unless you **choose** to be identified in the published results. If you choose for your identity to remain private, your name and information will be kept confidential, and will be viewed only by myself and my supervisors. No opinions will be attributed to you in any way that will identify you in any reports, presentations, or public documentation. However, you should be aware that in small projects your identity might be obvious to others in your community.

**What will the project produce?**

If you agree to participate, your contribution will be used to write a Master's thesis. It is intended that the results may be published in one or more journal articles, reports, or presentations linked to this research. You may request a copy of these publications or presentations at any time.

**If you decide to participate, you have the right to:**

- choose not to answer any question;
- ask for the recorder to be turned off at any time during the focus group;
- withdraw from the focus group while it is taking part however it will not be possible to withdraw the information you have provided up to that point;
- ask any questions about the study at any time;
- receive a copy of your focus group summary;
- read over and comment on a written summary of your focus group;
- be able to read any reports of this research by emailing the researcher to request a copy.

**If you have any questions about this project, either now or in the future, please feel free to contact me or my supervisors:**

Chelsey Reid      chelsey.reid@vuw.ac.nz

Researcher

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# Appendix B – Consent Forms



## Understanding Complexity in Wellbeing and the 'Leave No One Behind' Agenda:

### Studies in Aotearoa New Zealand

#### Consent Form – Interview

This consent form will be held for 3 years.

Researcher: Chelsey Reid, School of Geography and Earth Sciences, Victoria University of Wellington

I have read the Information Sheet and the project has been explained to me. My questions have been answered to my satisfaction. I understand that I can ask further questions at any time.

I agree to take part in an audio recorded interview and that the transcripts and recordings will be kept securely for a period of up to 3 years, after which they will be destroyed or electronically wiped.

I understand that:

- My participation is completely voluntary, and I may withdraw myself (and any information I have provided) from this project at any time before 15 January 2019 without having to give reasons.
- Any identifiable information I have provided will be destroyed on 26 July 2019.
- I am free not to answer one or more questions if I choose, mention things I'd rather not discuss, and/or request that the recording be turned off.
- I understand that the results of this project will be used for a Masters thesis and may be published as journal article(s), conference presentation(s), and/or professional report(s), and that I can be given a copy if I request it.

- Any information I provide will be kept confidential to the researcher and the supervisors.

**Please Turn Over**

Please tick the boxes to indicate which of the following apply:

- ☐ I would like to receive a copy of the summary transcript of my interview.
- ☐ I would like to receive a copy of the final report, and any future publications or presentations emerging from this research.

Please indicate your identification preferences by ticking one of the boxes below:

- ☐ Yes, I would like my identity disclosed and my opinions to be attributed to me in the research.
- ☐ No, please do not disclose my identity – I wish for my name and opinions to remain confidential.

By signing below, I give my consent to take part in this research.

Full name:	
Email:	
Phone:	
Address: (if hard copy of results preferred)	
Date:	
Signature:	



**Understanding Complexity in Wellbeing and the 'Leave No One Behind' Agenda:  
Studies in Aotearoa New Zealand**

**Consent Form – Focus Group**

This consent form will be held for 3 years.

Researcher: Chelsey Reid, School of Geography and Earth Sciences, Victoria University of Wellington

I have read the Information Sheet and the project has been explained to me. My questions have been answered to my satisfaction. I understand that I can ask further questions at any time.

I agree to take part in an audio recorded focus group and that the transcripts and recordings will be kept securely for a period of up to 3 years, after which they will be destroyed or electronically wiped.

I understand that:

- I am agreeing to keep the information shared during the focus group confidential. I am aware that after the focus group, I must not communicate to anyone, including family members and close friends, any details about the focus group.
- My participation is completely voluntary, and I may withdraw myself while it is in progress. However, it will not be possible to withdraw the information I have provided up to that point as it will be part of a discussion with other participants.
- Any information I have provided will be destroyed on 26 July 2019.
- I am free not to answer one or more questions if I choose, mention things I'd rather not discuss, and/or request that the recording be turned off.

- I understand that the results of this project will be used for a Masters thesis and may be published as journal article(s), conference presentation(s), and/or professional report(s), and that I can be given a copy if I request it.
- Any information I provide will be kept confidential to the researcher and the supervisors.

**Please Turn Over**

Please tick the boxes to indicate which of the following apply:

- ☐ I would like to receive a copy of the summary transcript of my focus group.
- ☐ I would like to receive a copy of the final report, and any future publications or presentations emerging from this research.

Please indicate your identification preferences by ticking one of the boxes below:

- ☐ Yes, I would like my identity disclosed and my opinions to be attributed to me in the research.
- ☐ No, please do not disclose my identity – I wish for my name and opinions to remain confidential.

By signing below, I give my consent to take part in this research.

Full name:	
Email:	
Phone:	
Address: (if hard copy of results preferred)	
Date:	
Signature:	



## Appendix C – Recruitment Flyer

**What does ‘Wellbeing’ look like for you?**

**Join my research**



My name is Chelsey Reid, and I am doing my Masters research into people's experiences of what wellbeing means to them in Aotearoa New Zealand.

**Do you want to create positive change in your life? Do you sometimes find it difficult to make ends meet? Or, do you sometimes feel that you're not able to do things you would want to in your community?**

**I would like to talk to you.**

I really would like to know what you think a good life and a bad life look like to you. I would love to know what you think affects your wellbeing, and how changes in life can affect your ability to lead or maintain a good life.

If you agree to join my research, I promise to do my best to make sure your voice is heard by people who make policies that affect your life.

This research has been approved by the Victoria Human Ethics Committee (reference #0000026692) and will take place between mid-November to early December 2018. You can choose to have your identity protected so that your name will not be used in anything arising from the research.

You will receive a \$50.00 grocery gift card for participating.



**Contact me: Chelsey Reid**



**Call or text: 027 506 1260**



**Email: chelsey.reid@vuw.ac.nz**

If you have any concerns about the ethical conduct of the research you may contact the Victoria University HEC Convenor: Dr Judith Loveridge. Email [hec@vuw.ac.nz](mailto:hec@vuw.ac.nz) or telephone +64-4-463 6028.

# Appendix D – Interview Schedule

## Interview Schedule

### Pre-Interview Checklist:

- Confirm location, where to sit, etc. Make sure they are comfortable, ask if they would like to start the session in a special way (eg. with a karakia)
- Introduce myself and explain topics to be covered in interview
- Go through information sheet and consent form with them
- Check with them before we start, ask if they have questions
- Confirm their consent to participate, ask to record interview
- Begin recording, start interview

### 1. Background

Can you tell me a little about yourself?

Explore - Where did you grow up?

Tell a little about your family.

Do you work right now? What do you do for income?

What kind of interests do you have? What do you enjoy doing?

### 2. Wellbeing

In general, what do you think it means to have a good life?

If you're living a good life, what kinds of things do you have access to? What are you able to do, and why?

What opportunities do you need to lead a good life? What makes it easy?

Out of everything you mentioned, what do you think has the most impact on your ability to lead a good life? Why?

### 3. Illbeing

In general, what do you think it means to have a bad life?

If you're living a bad life, what kinds of things do you not have access to? What aren't you able to do, and why?

What factors do you think make people fall into a bad life? What makes things harder?

Out of everything you mentioned, what do you think has the biggest impact on your life in a negative way? Why?

#### **4. Navigating Changes in Wellbeing**

On a scale of 1 – 10, where 1 is the worst life, and 10 is the best life, where would you say you are right now? Why?

How do you think different parts of your life are connected together? For example, if something changes for better or for worse in one aspect, how will that affect other aspects of your life?

Can you give me an example of a time where something good or bad went on to affect other parts of your life? How did this affect your ability to maintain a good life for yourself?

What are some other ways you try to maintain a good life for yourself, or improve it?

Is there anything else you'd like to add?

#### **Quantitative questions to supplement the qualitative exercise:**

1. Write down, in order of importance, 10 things that are most important for you, to be able to live the kind of life you value. (That is, the ten most important contributors to your wellbeing, in order of importance.)

2. Now, for each of the 10 items you listed above, list the most important 4 items (from the same list – and in order of importance), that you would like to accompany that specific item. (I am trying to understand bundles of contributors to a good life, as you define a “good life”.)

## **Appendix E – Focus Group Schedule**

### Pre Focus Group Checklist:

- Opening introductions & small icebreaker activity, ask if anyone would like to begin the session in a special way (eg. with a karakia)
- Explain topics we will be exploring in focus group
- Go through information and consent forms with them
- Ask if they have any questions
- Confirm their consent to participate, ask to begin recording
- Begin recording, start focus group

Research Question and Prompt	Activity
<p><b>1. What does a good life look like to you?</b></p> <p><i>Intention – to gain an understanding of wellbeing as defined by participants</i></p> <p>What things do you need? What should you have access to?</p>	<p>Participants write their ideas of a good life on post-it notes and post them onto a wall. 1 idea per post it.</p> <p>Then participants group the ideas into as many domains as they like.</p> <p>Follow-up questions:</p> <p>Tell me about .... why is this important?</p> <p>Tell me about... what about it makes life good?</p> <p>What do you mean by....</p> <p>What opportunities do you need to have these things?</p>
<p><b>2. What does a bad life look like to you?</b></p> <p><i>Intention – to gain an understanding of illbeing as defined by participants</i></p> <p>What things make life worse?</p>	<p>Participants write their ideas of a bad life on post-it notes and post them onto a wall. 1 idea per post it.</p> <p>Then participants group the ideas into as many domains as they like.</p> <p>Follow-up questions:</p>

	<p>Tell me about .... why is this important?</p> <p>Tell me about... what about it makes life worse?</p> <p>What do you mean by....</p> <p>What factors make people fall into these things?</p>
<p><b>3. How much would you say each domain contributes to a good/bad life?</b></p> <p><i>Intention – to measure the impact domains have on people’s lives</i></p> <p>What makes the biggest difference to you?</p>	<p>Participants each get a sheet of stickers.</p> <p>They place stickers on the domains that they feel have the greatest impact on their ability to lead/ not lead a good life.</p> <p>Follow up questions:</p> <p>On a scale of 1 – 10, where 1 is the worst life, and 10 is the best life, where would you say you are right now? Why?</p>
<p><b>4. How do you think different parts of your life are connected together?</b></p> <p><i>Intention – to establish the relationships between wellbeing domains to gain a deeper understanding of the dynamics and complexity of wellbeing</i></p> <p>If something changes for better or for worse in one aspect, how will that affect other aspects of your life?</p>	<p>Participants map connections between domains by drawing arrows between them.</p> <p>Participants can use one of 3 colours for their arrows to represent the “strength” of the association. Green → Weak Yellow → Medium Red → Strong</p> <p>Follow up questions:</p> <p>Tell me about ... how does it affect other parts of your life?</p> <p>How does a change in ... affect your ability to maintain a good life for yourself?</p>

	What are some other ways you try to maintain a good life for yourself, or improve it?
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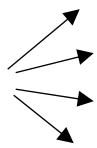
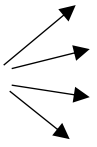
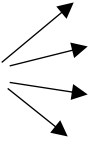
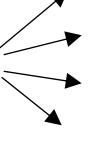
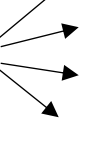
**Quantitative questions to supplement the qualitative exercise – to be done by individuals, independently:**

1. Write down, in order of importance, 10 things that are most critical for you, to be able to live the kind of life you value. (That is, the ten most important contributors to your wellbeing, in order of importance.)
2. Now, for each of the 10 items you listed above, list the most important 4 items (from the same list – and in order of importance), that you would like to accompany that specific item. (I am trying to understand bundles of contributors to a good life, as you define a “good life”.)

# Appendix F – Free-List Survey

## ‘Bundling’ Domains

1. Write down, in order of importance, 10 things that are most important for you, to be able to live the kind of life you value.
2. Then, for each of the 10 items you have identified, list the most important 4 items (from the same list) that you would like to accompany that specific item.

① _____		① _____ ② _____ ③ _____ ④ _____
② _____		① _____ ② _____ ③ _____ ④ _____
③ _____		① _____ ② _____ ③ _____ ④ _____
④ _____		① _____ ② _____ ③ _____ ④ _____
⑤ _____		① _____ ② _____ ③ _____ ④ _____

⑥ \_\_\_\_\_

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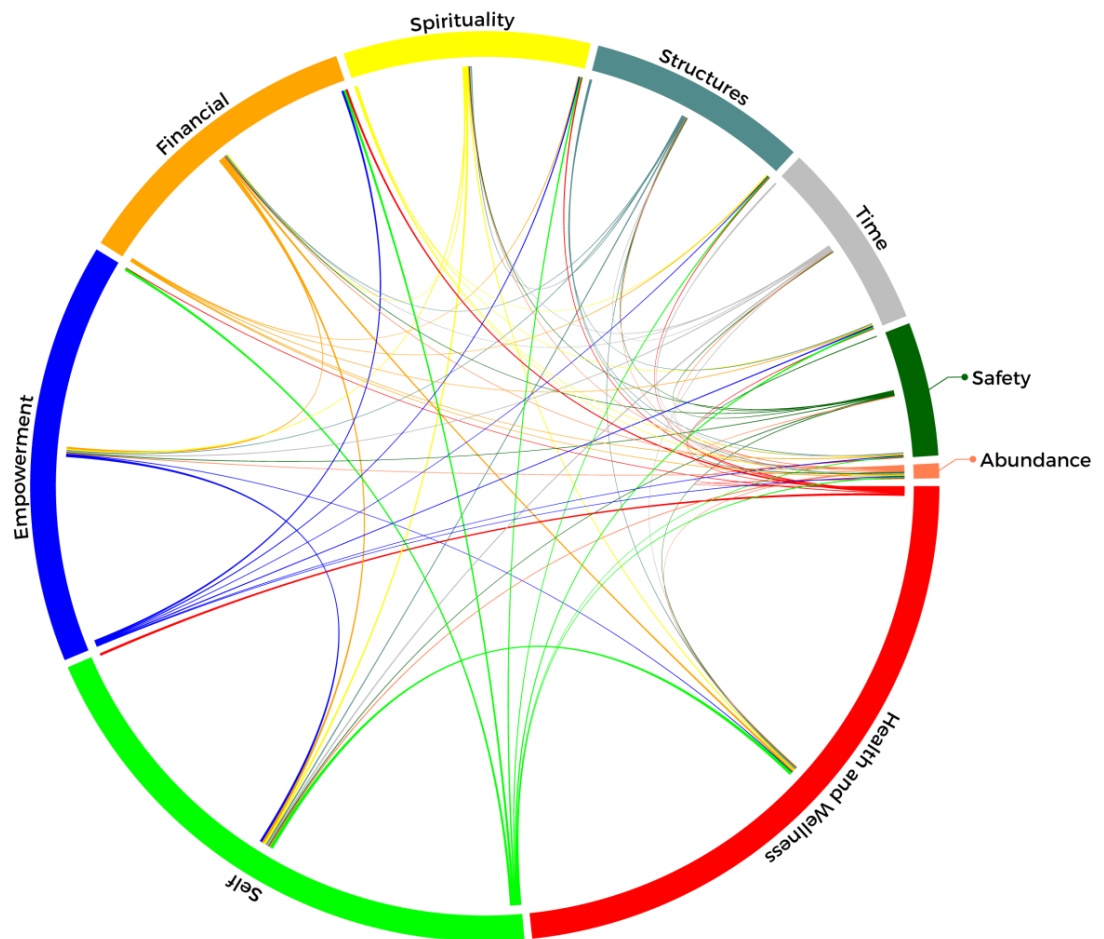
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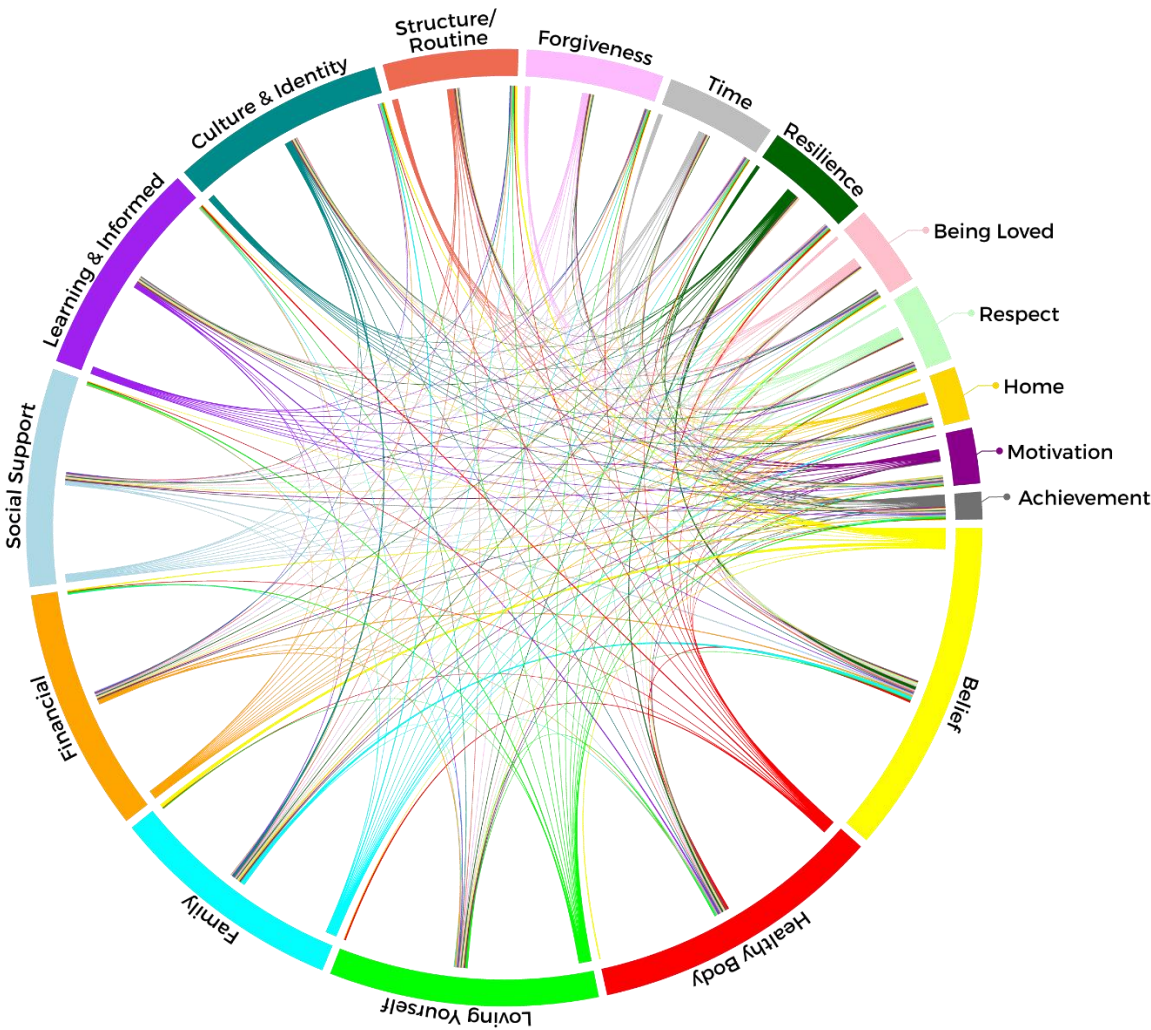
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## Appendix G – Chord Diagram: FGD 1



# Appendix H – Chord Diagram: FGD 2



## Appendix I – Chord Diagram: FGD 3

