"Wellbeing is a state of being with others, where human needs are met, where one can act meaningfully to pursue one's goals, and where one enjoys a satisfactory quality of life."

This is the definition of wellbeing that the ESRC Research Group on Wellbeing in Developing Countries (WeD) has arrived at through its work over the last five years. Research into wellbeing involves exploring the extent to which people can achieve this state of being, and the social conditions that either enable or block this possibility. In particular we have been concerned to use this notion of wellbeing to help us understand the persistence of poverty in developing countries.

This is a hybrid definition that differs from many of the ways the term wellbeing is currently used in academic and policy discourse. It combines both objective and subjective conceptions and transcends them by recognizing the way each is socially constructed. This definition means that any attempt to assess wellbeing or to understand the processes that affect it must take account of three dimensions: the material, the relational and the affective/cognitive. In emphasising the basic challenge of defining what is meant by doing 'well', the definition highlights the permeability of boundaries between normative and positive approaches in the social sciences.

In defining wellbeing, a large degree of modesty is required. All elements of the definition have been debated at least since the Buddha 24 centuries ago and Aristotle 23 centuries ago. But there is clear evidence in Aristotle, for example, that all three dimensions are present when he discusses eudaimonia in the *Nicomachean Ethics*.

**We discuss needs, goals, and subjective experiences in turn:**

**Needs:**

Following recent writings from different disciplines we can identify universal human needs, the denial of which generates harm in all circumstances. These needs include health, autonomy, security, competence and relatedness, the satisfaction of which at a basic level enhances objective wellbeing everywhere. These needs go beyond the usual material components to include psychological and relational needs. Many in turn require a set of intermediate need satisfiers, such as food, health care, secure livelihoods etc, which have material foundations or are located in, or pursued through social relationships. Significantly the WeD definition recognises the need for meaning since it is this that makes social life possible.
People’s goals inform the actions they pursue to achieve them. But the goals and the actions will in large part be shaped by the material, social and cultural contexts in which people are embedded, from their family through community, nation state to the increasingly interconnected global society. Thus we cannot study the wellbeing of persons divorced from their social contexts.

In taking account of social structures and social order we recognise that people are differentially enabled or constrained. Social human beings differ from each other – they are old-young, male-female, hold one system of beliefs or another and have different histories. These differences matter in terms of what people perceive themselves as needing and wanting, what they can aspire to and how they are able to act within society.

This recognises that wellbeing has not only an objective and a subjective dimension but a social or relational dimension. Though actions usually take place within local frames of meaning, this does not mean that people cannot act outside these frames. The different forms of relationship within which people are embedded offer opportunities for choice (however constrained) between different goals and of different identities. Thus the pursuit of meaningful action – action consistent with one’s values and goals – is ever-present.

First, the WeD approach allows for a tension between a universalising and a concretising/local perspective in evaluating wellbeing. On the one hand, wellbeing is functioning meaningfully and feeling well within a specific context. On the other hand it is having resources, capabilities and opportunities to achieve goals which go beyond those that present themselves in local contexts. If this seems messy, it is the price that has to be paid for a dynamic and open view of wellbeing.

Second, it follows that there are trade-offs between these different components in the real world, especially for poor people in impoverished contexts. Poor people may have to sacrifice education or food to obtain health care, sacrifice...
Researching Wellbeing

The adoption of this hybrid notion of wellbeing has implications for research methodology: it means developing and using a suite of different measures of wellbeing, and rejecting all single measures. This underpins the disaggregated six-component methodology adopted in the WeD research programme (McGregor 2007). The six methods can be grouped into three pairs dealing with outcomes, structures and processes.

1 Outcomes have been studied objectively and subjectively.

a) The Resources and Needs Questionnaire (RANQ) was designed to map the distribution of resources and needs satisfactions between households within the 26 research communities. Both needs and resources were interpreted widely: for example, resources included social and cultural resources.

b) To assess subjective outcomes, WeD studied quality of life (QoL), defined as the satisfaction of people with the achievement of the goals which they regard as important. This entailed researching local values and personal goals; people’s perceived resources (of all kinds) to pursue these goals; and finally people’s satisfaction with the achievement of these personal goals in an instrument called the WeDQoL.

2 Social human beings exist in collectivities at different levels, from households and communities, through regions and nation states to the global community. To understand the way these frame ideas of and the pursuit of wellbeing, the WeD programme concentrated on the community and the nation state, and the collectivities these labels obscure.
a) **Community profiles** compiled information on the research communities using secondary data, key informant interviews and participatory methods.

b) **Structures research** used the welfare regimes framework\(^3\) (ref) to identify key features of the national economic, political and cultural systems of the four research countries: Bangladesh, Ethiopia, Peru and Thailand.

3 Finally, the research framework emphasises that wellbeing outcomes cannot be understood without reference to time and the processes that generate them. Two forms of process research were developed.

a) **Income and expenditure** studies showed how stocks of resources translated into incomes and expenditures over a period of one year, using seasonal sample household surveys or monthly household diaries.

b) More general **process research** studied, using qualitative techniques, the key forms of action that individuals and households engage in as they seek to achieve their desired state of wellbeing.

Reflecting the multi-dimensional definition of wellbeing with which we began, these six research tools are intended to be used together as a suite. Because all of the instruments derive from the same conceptual framework, they can be analysed in relation to each other, and are now all linked via an integrated database.

*WeD  20.06.07*

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