

Social Indicators Research Series 60

Filomena Maggino *Editor*

A Life Devoted to Quality of Life

Festschrift in Honor of Alex C. Michalos

 Springer

Social Indicators Research Series

Volume 60

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Editor

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Preface

I believe that anyone has one or more guides (“maestro,” in Italian). I feel to be lucky since I had very few maestri and Alex is one of them.

I met alex for the first time in 1999 in Rome, at the presentation of a collective book which I also contribute to. I immediately felt a strong scientific affinity and perceived a great humanity. The presentation was done in Italian but it seemed that he understood everything. The message that he transmitted was clear to me: apart from the individual scientific position, the language in the field of quality of life has no limits and boundaries.

From that moment, I kept in touch with him and followed in parallel the development of the International Society for Quality of Life Studies.

I have no need to remark Alex’s high scientific level. In this respect, Alex represented always an important guide for me. But he was an example for me also from the personal point of view.

I noticed that in any conference I attended and where Alex was present, he attended sessions by paying to any presentation always a great attention independently of who was the speaker, famous or young, academic or practitioner, by giving precious suggestions and advices, and by giving encouragements, supports, and opportunities. And there I realized the difference between being a great scholar and being a great maestro.

With time, the initial feelings of affinity and humanity increased more and more. This happened also in particular occasions and difficult moments, when I asked for his suggestions and advices. I felt always being understood and supported.

Chance decided that I had to fill two positions that were previously (and successfully) filled also by him, presidency of ISQOLS and direction of Social Indicators Research journal. In these positions I tried and try to be inspired by his example. I am not sure if I was and am successful in interpreting that inspiration, but I will be keeping on being inspired by him.

Firenze, Italy

Filomena Maggino

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Part I
Quality of Life in Different
Segments of Population

Chapter 1

Children, Adolescents and Quality of Life: The Social Sciences Perspective Over Two Decades

Ferran Casas

Introduction

I met alex Michalos personally for the first time in July 1990, at the ISA conference in Madrid. Before that moment he was only a name I had quoted many times, particularly in my doctoral dissertation on indicators of social risk situations for children.

My second personal contact was in 1996 in Prince George, Canada, when he kindly invited me to participate in the first international conference of the ISQOLS (International Society for Quality of Life Studies) he was chairing. That was a great occasion to meet some of the best-known researchers on quality of life at the time. There, I presented a paper on children's rights and children's quality of life, and he encouraged me to write an article and send it to the journal *Social Indicators Research*, of which he was the editor. The article was accepted and published in 1997 (Casas 1997). In a personal communication Alex wrote me "we need more papers like this".

Although by that time I had already published a certain number of articles in English, particularly on children's problems and children's rights, the words Alex addressed to me were deeply encouraging. I felt more committed to my work on identifying indicators for children's rights, of children's quality of life and, particularly, of children's subjective well-being (SWB).

In 1997, I accepted the post of Director at the newly-created Quality of Life Research Institute at the University of Girona (Casas and Planes 2014) and left my position as professor at the University of Barcelona. Due to my previous experience organising international conferences when I was Director of the Childhood Studies Centre in Madrid (1990–1993), Alex proposed I organise the second international

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ISQOLS conference at the University of Girona in July 2000. I accepted, and we managed it with the support of Joe Sirgy, Don Ratz and many other ISQOLS colleagues. There I met the few “missing” big names that had been unable to attend the Prince George conference. I published the proceedings with Carme Saurina (Casas and Saurina 2001).

After devoting a session to children’s and adolescents’ quality of life at the ISQOLS conference in Frankfurt in July 2003, Alex offered me, together with other colleagues, the opportunity to be co-editor of a book on research into children’s and adolescents’ quality of life, and it became a reality 1 year later (Dannerbeck et al. 2004).

In 2006, Alex invited Asher Ben-Arieh to write a monographic issue of the SIR on child well-being, which finally became two volumes, and for which I was invited to present two articles (Casas et al. 2007a, b).

That year, together with a research team colleague I also submitted an article to *Applied Research in Quality of Life* on kinship foster care and the satisfaction of the different stakeholders involved. Shortly after being informed that the article had been accepted (Montserrat and Casas 2007), I received another personal communication from Alex, telling me that he had been trying to obtain similar data for Canada, but had been unsuccessful – and he therefore very much appreciated our efforts in obtaining the data and publishing the results.

As far as I know, Alex has never published much on children’s and adolescents’ well-being or quality of life. However, after this telegraphic sequence of dates in my personal history it is very easy to realise that Alex has always “been there” and has constantly and proactively been particularly supportive on this topic.

A good deal of the advances I have been able to contribute to in this field have had Alex as a reference. With this I would like to say thanks, Alex, for continuously guiding and supporting us in this minority field of children’s and adolescents’ quality of life!

Indicators, Children’s Well-Being and Children’s Quality of Life

The definition of “well-being” and “quality of life” is particularly important in the field of children’s and adolescents’ studies. We know that for many authors in health sciences these two constructs are more or less synonymous. However, that is not the case for most authors in the social sciences. That fact makes the literature review confusing. There is a long history of social debates and changes in the meaning of child well-being (see Sandin 2014, for a description); however, the history of children’s quality-of-life studies is very short.

Although they have followed different paths in different countries and political regimes, just to highlight a few of the changes that aid understanding of children and their well-being in the Western world, one important turning point seems to appear after the Second World War, when criticism of the authoritarian political

regimes supported a developmental ideology based on the individual child within a democratic family and democratic society. Children's happiness replaced more socially-oriented topics from before the war, such as child labour, failing educational provisions and immigration, for example (Sandin 2014). Another turning point is symbolised by the adoption of the UN Convention on the Rights of the Child and subsequent new topics of discussion: Do children have the same human rights as other human beings, or do they have different rights? The forming of concepts such as "the best interest of the child" and "a child's perspective" mobilised children as citizens and legal subjects and emphasised children's autonomy from the family (Sandin 2014).

As Sandin (2014) says, *a long-term shift involves a movement away from the idea of children that emphasizes their vulnerability and fragility toward a view of children that emphasizes the similarity of children's needs as individuals to those of adults. (...). The notion of children as having separate rights is consequently eroded.*

According to Sandin (2014), *the understanding of well-being is expressed both through the institutions of education and care created for children and through discussions about what is good for children that are voiced by professional groups that claim precedence in the defining of well-being.* Therefore, the concept of well-being is not homogeneous across countries, cultures or political regimes and is linked to the understanding of what "good life" means in each society.

The concept of "quality of life" was born with the "social indicators movement" in the 1960s, and was intended as a much broader concept than well-being, involving the use of both objective and subjective indicators to assess any reality. "Subjective indicators" include people's *perceptions, evaluations and aspirations* (Campbell et al. 1976). Although the inclusion of subjective indicators using data provided by adults was accepted and promoted from the very birth of the social indicators movement, a generalised acceptance of the inclusion of data provided by children in any indicators system was delayed until the twenty-first century. Debates and reluctances appearing during the 1960s against including subjective data in the measurement of social change using "adults' data" at a macro social level have repeatedly appeared in relation to children's and adolescents' subjective indicators over the past two decades.

Andelman et al. (1999), in their review of the literature on children's quality of life, pointed out that although a large amount of research uses the key words "quality of life" and "children", most of it has been developed from a health perspective, in clinical contexts and with small samples of children with some specific health problem. According to these authors, the availability of data from larger samples and non-clinical populations was very scarce and happened in very few countries up to that period. Additionally, a good deal of the research with these key words was evaluating children's QOL without collecting data on children's own assessment of their lives.

The landscape did not change noticeably when other reviewers added other key words to their search, such as "well-being" (Pollard and Lee 2003) or "life satisfaction", or even "adolescents" (Huebner 2004).

The use of statistical data and indicators to analyse the well-being of the overall population of children began before the “social indicators movement”, particularly with the publication of the “State of the Child” reports in the US in the 1940s (Ben-Arieh 2000, 2006, 2008; Ben-Arieh et al. 2001). The “social indicators movement” arose within a climate of rapid social change and with the belief among social scientists and public officials that well measured and consistently collected social indicators could provide a way of monitoring the condition of groups in society at a particular moment and over time, including the conditions of children and families (Land 2000).

A glance at the number of this kind of reports published recently reveals that children’s well-being and its indicators are fields of growing scientific interest. Much of this new and enhanced activity can be accounted for by UNICEF’s *State of the World’s Children* annual report, as well as the Annie E. Casey Foundation’s *Kids Count* initiative in the United States. The UN’s CRC, through its global ratification and reporting and monitoring mechanism, has also played an important role in increasing interest in reporting on children’s situations (Ben-Arieh 2012).

Ben-Arieh has contributed to two seminal compilation studies that presented data from a wide spectrum of studies and experiences on the monitoring and measurement of the “state of children” in large populations (Ben-Arieh and Wintersberger 1997; Ben-Arieh et al. 2001) and have united a previously completely disjointed field of study at the international level.

The same author (2008) suggested that the birth of what he called “the child indicators movement” is related to the convergence of five global trends (Casas 2011):

- Recognising children’s rights, with the approval of the United Nations Convention.
- The “new” sociology of childhood.
- The ecology of child development (Bronfenbrenner and Morris 1998).
- New methodological perspectives in child studies: valuing the subjective viewpoints of child participants, accepting children as a unit of observation, and systematically collecting child statistics in certain countries.
- The desire to improve policy decisions by collecting and disseminating improved data on all areas of child and adolescent life.

At present, there are many data series and indicators from which to form opinions and draw conclusions on children’s well-being in the industrialised countries (Bradshaw et al. 2007). The rapidly growing interest in children’s well-being indicators stems, in part, from a movement toward accountability-based public policy, which demands more accurate measures of the conditions children face and the outcomes of various programmes designed to address those conditions. At the same time, rapid changes in family life have prompted an increased demand from child development professionals, social scientists, and the public for a better picture of children’s well-being and their quality of life (Ben-Arieh et al. 2014).

The recent scientific literature on macro-social child and adolescent well-being and quality of life may be identified more easily in the literature databases using the

descriptor “child indicators”. A recent review by Ben-Arieh (2008) allows us to appreciate the breadth and diversity of this literature, which has even led to the creation of a new international journal, *Child Indicators Research*.

In summarising the history of child indicators, Ben-Arieh has suggested that, initially, most systems only included “survival indicators”: rates of mortality, disease, and social problems affecting children (for instance, deschooling, illiteracy, school failure, etc.). During the 1990s, more child well-being researchers emphasised the need for “positive” indicators and, particularly, “subjective” indicators, due to the increased focus on quality of life (Casas 1997, 2011).

Many of these attempts to improve child well-being focused on children’s futures: “that they may experience well-being when they reach adulthood”. This adult-centred orientation has too often caused people to disregard the value of childhood itself, postponing children’s well-being to a later generation. The result is that a large number of policies have not addressed well-being but rather *well-becoming*.

By way of a summary, from a global perspective, the availability of indicators on different aspects of children’s lives is still greatly limited to (a) negative indicators; (b) objective indicators, and with the exception of UNICEF’s reports and those of a few other international agencies, to (c) a few countries.

One of the recent major contributions to the international debate on children’s “positive” conceptualisation of well-being has been the Handbook of Child Well-Being, edited by Ben-Arieh et al. (2014). This handbook includes 114 chapters (more than 238 authors from 32 different countries) on the state-of-the-art in international and transdisciplinary perspectives. This handbook presents a wide range of different theoretical, disciplinary and methodological approaches to child well-being.

Conceptualising Children’s Subjective Well-Being

What did constitute a truly new initial contribution by the social indicators movement was the inclusion of subjective indicators as a key component in appropriately assessing the quality-of-life construct. This inclusion when referring to children’s and adolescents’ quality of life was generally also postponed until the twenty-first century.

Conceptual debates on what constitutes subjective well-being have been intense in recent decades due to the existence of two competing constructs: subjective well-being and psychological well-being. However, there is also a third construct in the scientific international arena: HR-QOL (health-related quality of life).

Definitions of children’s well-being found in the HR-QOL literature are very heterogeneous. As mentioned previously, the health sciences focus on clinical populations with very diverse backgrounds. The assessment of children’s well-being frequently has one crucial aim: to evaluate changes after any health programme or intervention. Therefore, in this context, child well-being is an expected output.

The definition of children's well-being in the tradition of psychological well-being (the *eudemonic* tradition) is very problematic. Research in this tradition has mainly focused on adults. Their measurement instruments are usually very abstract in nature and therefore include a language not appropriate for use with children. Attempts to include *eudemonic* items in children's questionnaires have only started in recent years, and not always successfully; to date, there does not seem to be any consensus regarding an available reliable instrument to be used with children cross-nationally.

With children and adolescents, only one tradition has in fact contributed much in empirical terms to the study of children's well-being using large samples: the *hedonic* tradition, using the subjective well-being (SWB) construct. This is a clear limitation, which will probably be overcome in the next few decades, but which represents the current situation in the field of research.

Therefore, the key word "subjective", when discussing children's SWB, has a dual meaning: (a) it refers to subjective data, collected using subjective measuring techniques; (b) it usually refers to the *hedonic* tradition in research on well-being.

In the *hedonic* tradition, SWB is usually defined as having three components: positive affect, negative affect and life satisfaction. There is general consensus that life satisfaction should be measured using two procedures: (a) by assessing overall life satisfaction – using either one single item scale or context-free psychometric scales; and (b) by assessing satisfaction with the most relevant life-domains – there are different theoretical positions about which are the most relevant domains in children's or adolescents lives. In fact, the few existing domain-based instruments have very different characteristics, and include notably different domains.

Although *happiness* is considered by many authors to be synonymous with *life satisfaction* (see Veenhoven 2000), some authors consider it not to be exactly the same and say it is important to explore the consistency of answers to happiness items in relation to answers to items on overall life. Happiness is often considered a major component of positive affect. Some recent research results even suggest that positive affect is by far the most important component of SWB (Cummins 2014).

Data Provided by Children and the Increasing Interest in Children's and Adolescents' SWB Indicators

Throughout the history of the human sciences many scientific researchers have devoted great effort to questioning *individual* children in order to "discover" how they function. For example, developmental psychologists have been very interested in finding out about children's personality, intelligence, motivation, capacities, and so on. However, very seldom have data provided by *large samples* of children been considered of any interest, meaning they have rarely been collected. While adults' surveys received great interest in the last century as it became obvious that adults' opinions are of major political relevance, children's and adolescents opinions have

never raised much interest, with the sole exception of that of advertisers interested in selling products to them, who have taken this kind of data collection very seriously indeed.

When social scientists began to collect data from large samples of children, it was for diverse reasons; nevertheless, the results were often unexpected (a few examples are explained in Casas 2011). This evidence forced social researchers to face the fact that we were only now “discovering” that our child population has some different characteristics than these we thought. In other words, the majority of children sometimes do not perceive, think or have the opinions or evaluations on their life and on their world that adults believe they have. Many adults’ attributions on children’s worlds may be wrong. Even our social representations of children and adolescents, shared by the majority of people, may be wrong (Casas et al. 2013a). This happens simply because we never went to ask representative samples of children what do they really think. In the history of the human sciences there are far more studies asking mothers or teachers about children’s satisfaction with school than studies asking children about their own satisfaction with school.

In the academic world, children are slowly being recognized as key informants and competent informers on their own lives. Consequently, their voices, their evaluations and their points of view are increasingly more accepted as key sources of information in scientific research.

The availability of children’s subjective indicators is growing – albeit only slowly. At present, most existing cross-national comparisons including subjective indicators of children’s well-being or quality of life are still using data from only two international databases containing children’s self-reported information on different aspects of their own lives: the HBSC (www.hbsc.org) and the PISA (www.oecd.org/pisa).

To adopt a perspective that focuses on the positive aspects of childhood “at present”, we need additional databases including data on more areas of child well-being and quality of life. Researchers have up to now focused exclusively on health, education, demographics, and social services, but should now expand their interests to totally “new” topics in the child population: satisfaction with services and life aspects, values, social skills, leisure time, interests and activities involving new technologies, social participation, etc.

Although, as several authors have indicated, research in the area of child and adolescent well-being is lagging far behind the wide availability of adult qualitative and quantitative findings, this does not justify a continued lack of interest or credibility, at the population level, in data obtained from young people using instruments that, like instruments for adults, need to be improved over time and compared across cultures (Casas 2011).

What is surprising is that while “subjective adult satisfaction” with services and life conditions has become a very important policy issue, the satisfaction of children and adolescents continues to be treated as irrelevant. Too often, in the social and human sciences, the low reliability and validity of data obtained from children and adolescents are used as an excuse to avoid collecting such data, when curiously,

only advertisers and marketing experts appear to be interested in this population and to have “overcome” difficulties concerning validity and reliability (Casas 2011).

In addressing child well-being and quality of life, we must not forget that by definition, quality of life includes the **perceptions, evaluations, and aspirations** of everyone involved, and those of children and adolescents are therefore essential. In other words, we must not confuse child well-being with **adult opinions of child well-being**. Both are important, but they are not the same, and both are a part of the complex social reality we call child well-being. Therefore, we face the challenge of filling the large information gap concerning the younger population’s point of view of the social reality that affects humanity.

Only in the last few decades have scientists become interested in studying children’s and adolescents’ well-being **from their own perspective**. Until very recently, it was assumed that solely adult evaluations on children’s well-being data would be valid enough.

Assessing Children’s and Adolescents’ SWB

Different kinds of information have been collected and published on the assumption they are related to children’s well-being. However, one of the most solid ways of systematically assessing children’s and adolescents’ well-being is reflected in the use of standardised instruments with large samples of children, which are psychometrically demonstrated to be **valid, reliable and sensitive**. After finding evidence that such instruments are valid, reliable and sensitive in a concrete language and/or cultural context, they can also be tested for their use across languages and cultures.

At present, researchers have a number – although not many – of such psychometric instruments available. A few **specific scales** for assessing child well-being have already been developed (Casas 2011). Some examples are:

- *Perceived Life Satisfaction Scale* (PLSS) (Andelman et al. 1999).
- *Students’ Life Satisfaction Scale* (SLSS) (Huebner 1991).
- *Multidimensional Students’ Life Satisfaction Scales* (MSLSS) (Huebner 1994).
- *Quality of Life Profile – Adolescent version* (QOLP-Q) (Raphael et al. 1996).
- *Comprehensive Quality of Life Scale – Students version* (Com-QOL Students) (Cummins 1997; Gullone and Cummins 1999).
- *Brief Multidimensional Students’ Life Satisfaction Scale* (BMSLSS) (Seligson et al. 2003).
- *Personal Well-Being Index – School Children* (PWI-SC) (Cummins and Lau 2005).

However, in some research **general scales to assess well-being** for the whole (adult) population have also been successfully used on adolescent samples, including:

- *Satisfaction with Life Scale* (SWLS) (Diener et al. 1985) (although several adaptations for children have also been proposed).

- *Personal Well-Being Index* (PWI) (Cummins et al. 2003; International Wellbeing Group 2006).
- *Fordyce's Happiness Scale* (FHS) (Fordyce 1988).
- *Cantril's Ladder* (Cantril 1965).
- *Overall Life Satisfaction* (Campbell et al. 1976).

The last three scales are single-item. The psychometric characteristics of some of the other scales may be found in Bender (1997) and Gilman and Huebner (2000). The correlations between these scales are moderate to high.

The most frequently used scale with adolescents in the psychological scientific literature to date is probably the OLS, although its use can be found with a range of different wordings. That said, Cantril's Ladder is probably the most quoted scale, it being the one included in the HBSC international database, the only one that provides data for international comparison across many countries and results are therefore those usually included in studies by UNICEF and other international agencies. However, different authors have pointed out that using a single-item measure for international comparison of such a complex construct as SWB reflects too weak a methodological position.

In principle, the scores obtained using any of these scales can be consistently adopted as subjective indicators at the population level in countries that have versions adapted to their language and culture. Nevertheless, multi-item scales are a much more robust alternative.

Most of the original scales used within these instruments are 5- or 7-point Likert-like scales, which are commonly used to assess psychological constructs. However, it is well-known that data related to SWB – at least in industrialised countries – are negatively skewed, which means that most people will respond only to a restricted portion of the conventional scale. Therefore, crucially these scales need to be not only valid and reliable, but also particularly **sensitive**. Moreover, when subjective quality-of-life measures are used as outcomes, scale sensitivity becomes a critical concern since this construct has a high trait component, and small deviations are highly meaningful. As suggested by Guyatt and Jaeschker (1990), it is really quite curious that this crucial fact regarding the sensitivity of SWB scales has been virtually ignored so often. The only solution to such a challenge is to expand the number of possible responses (Cummins and Gullone 2000).

Such expansion would not appear to systematically influence scale reliability, and is therefore psychometrically feasible, but is made difficult by the convention of naming all response categories. It has been argued that this naming is quite unnecessary and actually detracts from the interval nature of the scale (Cummins and Gullone 2000). The solution adopted by different researchers has been that of using 11-point, end-defined scales. These offer a form of rating (0–10) which lies within the common experience of children and adolescents (and adults) in most countries and produces increased sensitivity of the measurement instrument. This solution has also been discussed with groups of adolescents (Casas et al. 2013b) and adopted by different researchers when administering these scales to children and adolescents, resulting in good understanding (Casas et al. 2012).

As already mentioned, another ongoing debate is that regarding which domains are relevant to assess children's and adolescents' life satisfaction. The two most frequently used scales with adolescents structured by life domains are probably the BMSLSS (Seligson et al. 2003) and the PWI (Cummins 1998; Cummins et al. 2003) or, alternatively, for younger ages, the PWI-SC (Cummins and Lau 2005). These scales usually display rather high correlations with one another (.610 between BMSLSS and PWI in Casas et al. 2012c; ranging from .662 to .756 depending on the country between BMSLSS and PWI-SC, in Casas et al. 2015); however, if we read the items included on them they look very different and such a high correlation even looks strange. While the PWI includes 7 rather abstract items (on health, standard of living, achievements in life, personal safety, community, security for future, and relationships with other people), the BMSLSS includes 5 rather concrete items (on family, friends, school, oneself, and the place you live in). This leads to the idea that they are complementary rather than alternative scales, and that the two together can be merged into a single scale. This idea has been explored in Casas et al. (2014). However, there is another persistent observation in the field of positive psychology, which also contributes to explaining these results: all positive constructs tend to be positively correlated, raising a doubt about the existence of a positive "supra-construct" (Stones and Kozma 1985; Diener et al. 1999). When analysing children's answers to SWB scales, their tendency for extreme positive options is even more evident than among adults, suggesting their **life optimism** tends to be "extreme".

When the tendency to give positive answers becomes "constant" for many participants, as is the case with many items in children's samples, we face a serious methodological problem: extreme answers distort the mean and decrease the variance, raising problems for statistical calculations and interpretations. For this reason, some authors recommend checking and deleting the extreme constant answers (International Wellbeing Group 2006). In some samples of children, this has meant deleting more than 14 % of the subjects (Casas et al. 2012b). However, children's extreme positive feelings are "real" and we need to find solutions in order to listen to and believe children rather than deleting them from our databases. Some researchers of children's SWB have explored an alternative approach to decide which cases in their database should be deleted. It has been observed that even the most optimistic children tend NOT to give extreme positive answers about satisfaction with services in their neighbourhood, for example with the library, public transport or local policy. Therefore, the adopted solution has been to check for extreme positive answers in all satisfaction-related items and not only in the items on the psychometric scales. Children giving extreme positive answers to all satisfaction items have been deleted and those only giving extreme positive answers on psychometric scales have not, because they are considered reliable enough (Casas et al. 2012a).

The fact that all of these scales display lower explained variances among children or young adolescents than among older adolescents or adults raises still another debate: we may be missing life domains which are relevant for children but not for older adolescents or adults. For example, satisfaction with "achievements" in life may be very much related to work among adults, but not at all among children and adolescents.

In recent years, different research articles have made the proposal of including new items on existing scales, demonstrating that the new items contribute to the construct with unique explained variance, and significantly improve the overall explained variance. For example, Tomyyn and Cummins (2011) have proposed including a new item on satisfaction with school for adolescents using the PWI-SC; Casas et al. (2011) proposed a new item on satisfaction with time use in the PWI; and Vaqué et al. (2015) have tested a new item on satisfaction with food with younger children using the PWI-SC.

The Need for More Available International Data: The *Children's Worlds* Research Project

One of the outstanding on-going projects to obtain more data from children is the *Children's Worlds* project, the International Survey of Children's Well-Being (ISCWeB) (<http://www.isciweb.org/>). This study aims to collect data on children's lives and daily activities, their time use and in particular on their own perceptions and evaluations of their well-being, from as many countries and in as representative a way as possible. The purpose is to improve children's well-being by raising awareness of it among children, their parents and their communities, but also among opinion leaders, decision makers, professionals and the general public.

The project began in 2009 when a group of researchers, mainly from the International Society for Child Indicators (ISCI), held a meeting hosted by UNICEF-Geneva to discuss the potential need for the survey. The group agreed that such a survey would fill an important gap in knowledge about children's lives internationally. One of the products of the meeting was an early version of a survey questionnaire. This first draft questionnaire was tested and piloted in the summer and autumn of 2010 in six countries – Brazil, England, Germany, Honduras, Israel and Spain – and a second draft version was piloted in the first half of 2011 in five countries – Germany, Romania, South Africa, Spain and Turkey.

In October 2011, members of the research group reviewed the learning from the second pilot and drew up a third set of the survey questionnaires with separate versions for children aged 8, 10 and 12. These questionnaires were then in the first large-scale wave of data collection.

The first wave of data collection took place between the winter of 2011 and the winter of 2012 in 14 countries from around the globe. The countries involved in this stage were: Algeria, Brazil, Canada, Chile, England, Israel, Nepal, Romania, Rwanda, South Africa, South Korea, Spain, Uganda and United States. Around 34,500 children in mid-childhood participated in this wave of the survey and the questionnaires were translated into a wide range of languages including – Arabic, Basque, Catalan, Galician, Hebrew, Hungarian, Korean, Nepali, Portuguese, Romanian, several versions of English and several versions of Spanish.

The sample is based on school, and therefore the classes (grades) of the majority of children in the targeted age groups were sampled in each country. In half of the countries (Algeria, Brazil, Chile, Israel, Romania, South Korea and the US) all three age groups were sampled, in two countries (Canada and Uganda) only two of the age groups were sampled and in five countries (England, Nepal, Rwanda, South Africa and Spain) children from only one age group were sampled. Most of the samples were convenience-samples except for Chile, South Korea and Spain, in which a representative sample was obtained.

Some preliminary findings from this wave of data collection were presented in November 2012 at a meeting hosted by UNICEF Innocenti Research Centre in Florence, and at the ISCI conference in Seoul in May 2013.

The second wave of the survey was conducted during the winter of 2013 and spring of 2014, with representative samples of children aged 8–12 in 15 countries around the globe – Algeria, Colombia, England, Estonia, Ethiopia, Germany, Israel, Nepal, Norway, Poland, Romania, South Africa, South Korea, Spain and Turkey, with the support of the Jacobs Foundation. Each participating country surveyed a representative sample of at least 1000 children in each of three school year groups – around the ages of 8, 10 and 12 (Rees and Main).

A representative sample of children in mainstream schools in the whole country or a specific region was obtained for each country. The sampling strategy varied from country to country, subject to the characteristics of each. More detailed information on this can be found in each of the country's reports. Results are planned to be presented in May 2015 and the database will be made public available 1 year later.

The final format of the ISCWeB questionnaire includes three versions for the different age groups – one questionnaire for children around eight, another for those around ten and a third for those around 12 years of age. The three questionnaires all cover the following key aspects of children's lives:

- Basic characteristics (age, gender, country of birth)
- Living situation, home and family relationships
- Money and economic circumstances
- Friends and other relationships
- Local area
- School
- Time use
- Self
- Overall subjective well-being
- Children's rights

The questionnaires for the older two age groups also cover two further topics – recent changes in children's lives and qualities aspired to for the future.

The question items fall into four basic types:

1. Fact-based items – e.g. age, gender, household possessions.
2. Agreement items. These consist of statements (e.g. '*I feel safe at home*'). In most cases children are asked to respond on a five-point scale labelled 'I do not agree',

‘Agree a little’, ‘Agree somewhat’, ‘Agree a lot’, ‘Totally agree’. There is also a ‘Don’t know’ option. Some of the agreement items in the questionnaires for 10-year-olds and 12-year-olds use an 11-point numbered (0–10) scale with the end points labelled ‘Don’t agree at all’ and ‘Totally agree’.

3. Frequency items. These mostly consist of questions about various aspects of time use, but also experiences of bullying and worries about family money. These items are all on a four-point scale with descriptions of frequencies relevant to the topic – e.g. ‘Rarely or never’, ‘Less than once a week’, ‘Once or twice a week’, ‘Every day or almost every day’.
4. Satisfaction items. These consist of questions about satisfaction with various aspects of life and with life as a whole. In the versions of the questionnaire for 10-year-olds and 12-year-olds these items all use an 11-point (0–10) response scale with the end points labelled as ‘Not at all satisfied’ and ‘Totally satisfied’. In the questionnaire for 8-year-olds, taking into account children’s typical levels of cognitive and linguistic development at this age, these questions are phrased as being about ‘happiness’ rather than ‘satisfaction’ and a shorter five-point scale is used with each point on the scale being represented by a symbolic facial expression (emoticons).

The length of the questionnaire (total number of items to answer) was determined through the piloting process and as a result the questionnaire contains fewer items for younger age groups. In total, there are 112 items in the questionnaire for 12-year-olds, 104 items for 10-year-olds and 71 items for 8-year-olds.

Among the items described above, the questionnaires contain versions of three previously tested psychometric SWB scales. First, there is a context-free scale intended to measure cognitive SWB comprising five items which form a short modified version of the Student Life Satisfaction Scale (SLSS, Huebner 1991). Then there are two scales made up of domain satisfaction items – the seven-item Personal Well-being Index – School Children (Cummins and Lau 2005) and a modified version of the five-item Brief Multidimensional Student Life Satisfaction Scale (Seligson et al. 2003). As well as the previously tested scales, two new sets of items are included. The first is a set of six items on positive affect which are influenced by Russell’s Core Affect Scale (Russell 2003). The second is a set of six items designed to represent various aspects of psychological well-being based on a framework proposed by Ryff (1989).

A key issue for the project has been to try to ensure that the various versions of the questionnaire in the different languages spoken by children in the participating countries are as compatible as possible. With this aim, the translation process has been as follows. Each country started with the standard English-language version of the questionnaires. The questionnaires were then translated into the relevant languages and then, independently of the original translation, translated back into English. Each back-translated English version was compared with the original English version and this comparison was used to highlight any discrepancies or issues. Any identified issues were then resolved by revising the translations as required (Rees and Main 2015).

Research Results: Many New Findings in Just a Few Years

The increasing interest in exploring how different SWB psychometric scales work with children and adolescents in different countries and using different languages has led to a series of new debates throughout the present century. However, we must highlight a particularly crucial new question that has appeared: why is SWB constantly decreasing between approximately 10 and 16 years of age in almost all countries?

This is a new question because researchers have never before asked large samples of children or adolescents whether they are satisfied with their own lives using a sensitive scale. It was previously an irrelevant question for leading researchers: only a few started asking this question to a few children in very few countries before the beginning of the new century. As a consequence, we have remained ignorant and now the evidence looks very surprising. A few data collections by Huebner in a southern state of the US are among the few exceptions to this situation. Park & Huebner appear to have been the first researchers to compare children's SWB between two countries using multi-item psychometric scales (Park et al. 2004; Park and Huebner 2005).

Throughout this century different research results in different countries have begun to highlight this constant decrease (Goldbeck et al. 2007). We did not previously know when it starts or finishes; now we have some evidence that it may start at 10 and perhaps finish around 16, or perhaps 18, depending on the country. We are not yet sure if this decrease happens in different countries in the same way. In Brazil, the few data we have from a local sample seem to suggest a decrease only up to 15, while in Romania it seems to continue after 18. At present, we have evidence of such a decrease in most European countries (Currie et al. 2012), and also in Algeria, Australia, Brazil, and Chile, using several psychometric instruments (Holte et al. 2014).

Some of these research results are suggesting that the decrease is gender sensitive. Boys' decrease in life satisfaction seems to be more influenced by a decrease in all school-related aspects, while girls' is more related to their own body, doing sports and physical exercise.

Several explanations have been suggested by different colleagues. These are alternative hypotheses to be tested in the next future:

- Stress increases with age among adolescents, particularly because of school requirements.
- Depression increases throughout adolescence, particularly in urban contexts and in industrialised countries.
- As adolescence progresses, the starting point of "extreme optimism" slowly changes into a "more realistic evaluation of the world".
- This phenomenon is one of the "natural" characteristics of adolescence that has always existed. We simply did not know about it, and it is nothing to worry about.

Besides the impressive amount of new knowledge accumulated using quantitative methods over a couple of decades, it is worth pointing out that the relevant

aspects of current knowledge on children's well-being is also coming from the emerging qualitative approaches. On the one hand, it is difficult to believe that all aspects related to a "good life" can be quantified; on the other, many aspects of what children consider well-being may happen that have never been included in any of the existing instruments that assess children's well-being. Some authors argue that we should not only ask children about their well-being in a more open way, but also let them lead the kind of research needed to accumulate knowledge from children's points of view. According to Mason and Watson (2014) children have been *traditionally marginalized in the formal processes of knowledge production, which have positioned them as "objects" of change processes. Advocates for children's involvement as participants in research argue that positioning children as subjects in the research process increases their control in the production of knowledge about their lives.*

Even some traditional quantitative research may be improved accepting children as advisers of adult researchers. For example, before deciding the format in which well-being psychometric scales would be administered to children in the pilot survey of the Children's Worlds project in Catalonia, researchers explored the already existing formats. They identified 14 different formats in just a few European countries. Researchers found that they did not have a solid criterion to decide which format was best for children and decided to ask children themselves, showing them these existing formats. The children in question immediately said some of the most frequently used formats were not appropriate for use with children of their age – and they reorganised and improved a few of the existing formats, finally suggesting a new format for each age group.

Some Reflections on the Future of Indicators of Children's and Adolescents' SWB

At present, normative data on children's or adolescents' SWB do not seem to be available from any country, although this is an aim of the Children's Worlds project. Scores from psychometric scales on SWB on representative samples of children and adolescents would be robust normative data if available from all ages and from as many countries as possible.

However, if children are so extremely optimistic and therefore tend to score so high in overall life satisfaction, does it make sense to have macro-social data? Is there any political decision or intervention programme that makes sense in order to improve their situation? The million-dollar question is probably this: can the constant decreasing tendency of SWB between 10 and 16 years of age be changed? Our answer is surprisingly YES, it does make a lot of sense. We have many subgroups of children and adolescents whose overall life satisfaction is far below the mean. Some of them have already been pointed out in different studies, but much more research is needed in more countries in order to identify such groups and suggest appropriate actions to overcome these situations.

Having normative data is a pre-requisite to be able to compare against any population subgroup. For example, research teams in different countries (Brazil, Israel and Spain) have recently started to collect data on life satisfaction and satisfaction with different life domains among children placed out-of-home (i.e., foster care, residential care or kinship care). In order to know how far the SWB of these subgroups lies from the SWB of the overall population we need to compare the results with the normative data.

A second crucial need is the availability of more data from longitudinal studies in order to better understand the evolution of SWB throughout childhood and adolescence. The few ongoing longitudinal studies on children's subjective well-being are suggesting that not all children's SWB decreases dramatically from the age of 10–16. Transition periods (i.e. from primary to secondary school) seem to impact the subjective well-being of many children but not all – and much more boys than girls. This impact can probably be buffered. On the other hand, the social and cultural context seems to have an important role in increasing or buffering the path of the decrease: for example, the decrease from 12 to 16 years of age is much more noticeable among adolescents in the region of Oran, in Algeria, than among adolescents in Catalonia, Spain (Casas et al. 2013c).

In summary, the field of study of indicators of children's and adolescents' SWB is very young in terms of history, but is showing an increasing energy and productivity. This activity is quickly contributing to new knowledge from the point of view of children and adolescents, and some of its results are challenging traditional beliefs regarding the youngest generation. However, there is still much more work to be done than the work already published in scientific journals in order to answer some of the basic new questions generating important debates in the international arena, and particularly to demonstrate which kind of social environments and supportive actions may increase children's and adolescents' SWB, or, in some cases, slow down its dramatic decrease. We hope this short paper may stimulate more researchers to join us and also stimulate the assuming of new challenges for those already on board.

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Chapter 2

Measuring Trends in Child Well-Being and Child Suffering in the United States, 1975–2013

Kenneth C. Land, Vicki L. Lamb, and Qiang Fu

Introduction

Every generation of adults, and American adults in particular, is concerned about the well-being of their children and youth (Moore 1999; Land 2012). From the stagflation and socially turbulent days of the 1970s in the US through the decline of the rust belt industries and transition to the information age in the 1980s to the relatively prosperous *e*-economy and multicultural years of the late-1990s followed by the digitized-roboticized, economically uncertain, and politically anxious early years of the twenty-first century, Americans have fretted over the material circumstances of the nation's children, their health and safety, their educational progress, and their moral development. Are their fears and concerns warranted? How do we know whether circumstances of life for children in the United States are bad and worsening, or good and improving? On what basis can the public and its leaders form opinions and draw conclusions?

To systematically address these and related questions, for the past 15 years the Child and Youth Well-Being Index (CWI) Project at Duke University has developed and studied the CWI as an instrument for measuring trends over time in

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