

MULTIDIMENSIONAL WELLBEING:

WHAT IT IS, AND HOW IT RELATES TO REDUCING POVERTY AND INEQUALITY

The Wellbeing Research Group at the HSRC, comprising a team of 8 junior and 11 senior scholars spent six months reviewing how wellbeing is spoken about and measured. They looked at which policies and interventions have aimed to improve people's lives - especially in contexts of poverty and inequality, and what might be missing. *Profs Sharlene Swartz and Heidi van Rooyen report.*

Poverty and inequality have long been recognised as comprising multiple dimensions. With regards to poverty, a multidimensional approach recognises the importance of education, health, living environment and economic opportunities amongst other aspects.

Likewise, the World Social Science Report offers an analysis of seven dimensions of inequality that include social, cultural, political and knowledge-based dimensions of inequality alongside those shared with poverty (economic, spatial and environmental).

These multiple dimensions of poverty and equality have far-reaching consequences for the notion of wellbeing. However, it is widely known that material and economic approaches ("what resources people have") have long dominated the ways in which we have conceptualised and measured both poverty and inequality, as well as wellbeing.

In the past decades, the notion of subjective wellbeing ("how people feel about what they have") has received much attention.

What seems to be missing is the notion of collective, relational or social wellbeing — "how people engage with each other, and the structures in which they find themselves" — in order to enhance their wellbeing.

After reviewing each of these three aspects of wellbeing, the HSRC's Wellbeing Research Group produced a number of reports and proposed a research programme.

OBJECTIVE, MATERIAL & ECONOMIC
WELLBEING
What you have



SUBJECTIVE & PSYCHOLOGICAL
WELLBEING
How you feel about what you have



RELATIONAL, SOCIAL & COLLECTIVE
WELLBEING
*How people engage with each other,
and the structures in which they find
themselves to be well (or not)*



We need a new understanding of wellness that fully encompasses the social nature of human beings and that explores experiences of connectedness between the individual and their social environment

A critical review of wellbeing as a concept

The review asks how people conceptualise wellbeing in general and whether these conceptualisations are adequate and appropriate for global South contexts with its struggles after colonisation and with development.

Our key findings include that conventional frameworks for understanding development infers that poor people are defined solely by their economic deficits.

In contrast, a multidimensional approach to wellbeing considers human functioning, capabilities and needs, livelihoods and resources, in a holistic manner.

Such an approach places the person, in their relationships and surroundings, at the centre, and presents opportunities for investigating the prevalence of racialised and gendered distribution of resources and opportunities and considers how these impact an individual and community's ability to be well.

We are convinced that a new Southern understanding of wellness is necessary: one that fully encompasses the social nature of human beings and that explores experiences of connectedness between the individual and their social environment. Reorienting our focus from the material and subjective to the social helps answer critical questions such as how social relations in unequal societies might be employed to improve people's lives.

Linking ideology and policy

In this report, we show how social policies — their form, content and ultimately their impact — cannot be separated from the economic and political circumstances that accompany how they originated and evolved.

Key here is the need for policy to offer visions of social ideals worth striving for on their own terms, and imagining how social policies may be used for redistribution, social cohesion and nation building.

This review includes an analysis of social policy 'safety nets' produced through industrialisation, and following various liberal, corporatist and social democratic approaches, showing how these were taken up in some Asian and African contexts in the twentieth century.

These capitalist approaches are contrasted to African socialist experiments, and include various South African policy case studies (including the impact of the family policy, the Expanded Public Works Programme, the youth policy and social grants) and their potential impact on social, collective and relational wellbeing.

Measures of wellbeing

This systematic literature review, the first of its kind according to our knowledge, considered over 10 000 articles and analysed 180 articles through a series of 11 sort criteria.

It answered the question how wellbeing has been measured, both qualitatively and quantitatively, in South Africa in the period 1994–2016.

Although South Africa has a long history of wellbeing research, this is the first systematic review that focuses on questions of methodology.

The researchers found that the vast majority of methods used to measure wellbeing are quantitative. Only five studies were qualitative or employed mixed methods that included a qualitative component.

It also found that 91 different quantitative scales were used and that wellbeing is defined and measured in various ways. Most frequently, wellbeing is considered as a subjective evaluation of individual life satisfaction, happiness or personal functioning. The leading conceptions of 'wellbeing' used in the studies under review tend to treat 'wellness' as a private phenomenon — largely ignoring the social, relational and collective aspects of wellbeing.

Oppressive Environment

Our output was a conjectural paper and focused on postcolonial literature about people's sense of being able to act individually or collectively to change their lives.

The foundational work of Frantz Fanon, Paulo Freire and Steve Biko, followed by a host of other global South academics, outlines how oppressive environments take their toll on people.

Dehumanising treatment, over time, dehumanises. These scholars argue that many people living in oppressive environments are angry at the treatment they receive, but that they feel powerless (at least as individuals) to fight back against such treatment.

This anger and sense of powerlessness can lead to apathy and, for some, self-destructive or anti-social behaviour.

Our measurements of wellbeing to date have failed to capture the myriad internalised effects of living in oppressive environments, and how these limit freedom.

We do not know who is most affected and how this limits their ability to live the life they have reason to value.

Without this knowledge, it is unsurprising that we do not have interventions, which we argue are warranted, to support people to overcome the consequences of prolonged exposure to dehumanising treatment.

Where to from here?

As we ramp up our work, we are pursuing two further aspects. First, we have inserted an experimental module into the South African Social Attitudes Survey that will help us to understand how empowered people in South Africa feel, and to what extent they believe they are able to individually or collectively change their experiences.

This speaks to our focus on collective agency and wellbeing in oppressive environments. Linked to this is our plan to convene an international "learning initiative" to discuss and document evidence of the effects of racism on human functioning in South Africa.

Second, we are piloting a qualitative study that asks households in highly impoverished and working class communities to describe the collective strategies and networks they employ in order to improve the wellbeing of their households.

This is a direct outcome of the absence of qualitative studies found in our systematic review, and also addresses the gap we encountered in seeing wellbeing as a collective endeavour.

Ultimately, our work will help determine whether we might need a new national Multi-Dimensional Index of Wellbeing that will include all three aspects of wellbeing — the material, the subjective and the social.

Could such an index, run at regular intervals, provide a tangible reminder to spread our policies and interventions across all three domains of wellbeing in South Africa and beyond?

Authors:

Profs Sharlene Swartz and Heidi van Rooyen, the deputy executive director and executive director respectively of the HSRC's Human and Social Development programme.

Contact:

sswartz@hsrc.ac.za

