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# **QUALITY OF LIFE DEFINITION AND TERMINOLOGY**

**A discussion document from the International Society for  
Quality of Life Studies.**

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## **Foreword**

Over the first six months of 1998 spirited correspondence was exchanged between ISQOLS members on the topic of QOL definitions. The complete set of communications is available from the archive. This document is an edited version of that correspondence, and some of its characteristics should be noted.

It is intended to be a user-friendly means of following the discussions that took place. As such, it contains only the form of words used by the original authors. No doubt many contributors could have worded their ideas more clearly or succinctly than they did at the time of pressing the 'send' button, but such re-working is for another time and place. This document is simply a cut-and-paste of the original material.

In selecting what to retain I have no doubt shown my biases. However, the contributors have assented to this 'final' version of the document, and I thank them for their gracious tolerance in this process.

It also is important to note what this document is not. It does not represent some 'official' position taken by ISQOLS. Nor does it represent a balanced or exhaustive review of the topic. It is, simply, a record of scholarly exchange on the topic.

Finally, this is not supposed to be the last word on the topic. It is a record of where the contributors have been and will, I hope, continue to evolve as future discussions focus once again on the issue of defining QOL.

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29<sup>th</sup> July 1998

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## 1. QUOTATIONS

“Those who say that money can't buy happiness don't know where to shop.” (cited as 'Anon' , Oswald, 1997, p. 1815).

“There is no happiness except in the realization that we have accomplished something”  
— Henry Ford.

“When I was young, I used to think that wealth and power would bring me happiness....I was right.” — Gaban Wilson.

“When we are happy we are always good, but when we are good we are not always happy.”— Oscar Wilde

-----Joar Vitterso

The Norwegian poet Arne Garborg (1851-1924) who wrote (in my own translation):

“Money can buy you the shell of everything, but never the kernel.”

## 2. DEFINITION IN RELATION TO THE COMPREHENSIVE QUALITY OF LIFE SCALE.

**"Quality of life is both objective and subjective, each axis being the aggregate of seven domains: material well-being, health, productivity, intimacy, safety, community, and emotional well-being. Objective domains comprise culturally relevant measures of objective well-being. Subjective domains comprise domain satisfaction weighted by their importance to the individual."**

-----Bob Cummins 4/3/98

I have now gathered from the published literature 107 definitions, and that does not include definitions by implication, created when people publish a scale which purports to measure 'QOL' with no attendant justification.

On the basis of this literature I have come to a number of conclusions. One is that I believe the stage is set for the emergence of a generally accepted definition, though how this play will unfold is not clear to me as yet. The second is that our conceptualizations of QOL are becoming increasingly sophisticated and that these, in turn, are driving the creation of increasingly sophisticated definitions.

As one outcome, I believe that a rehash of the old WHO definition of health, such the QOL can be defined in terms of "the physical, psychological and social aspects of the disease and the individual and not just the illness" is way past its use-by date. No general definition of QOL should involve such terms as 'illness' and 'disease'. Moreover, the use

of such terms as 'psychological' are so non-specific that they have almost no heuristic value.

So, let me offer an alternative (stated above) and which I have argued in detail elsewhere (Cummins, 1997a). Essentially I will argue for a set of propositions which then logically lead to the emergence of this definition. This set is as follows:

## 2.1 Objective vs. Subjective

**The term 'Quality of life' refers to both the objective and subjective axes of human existence.**

-----Bob Cummins 7/3/98

Of all the findings of QOL studies I suspect that the relative independence of these two constructs constitutes one of the most robust. It goes right back to the dawn of our emerging discipline, with those amazing publications by Andrews and Withey (1976), and Campbell et al. (1976). Since then a plethora of empirical literature has supported the separateness of these two forms of measurement, at least over the normal range of values.

This last caveat is important. At the edges of the objective distributions it is clear that objective conditions begin to drive subjective well-being. For example, the group with the highest SWB are probably those people who, within the context of their culture, are seriously wealthy (most of us do not actually want to know this!) (see Cummins, 1995). At the other end of the distribution it is clear from numerous studies that gross poverty, chronic pain, homelessness, a lack of intimate relationships, etc., all produce levels of life satisfaction that lie below the normal range. But however they relate to each other, together, subjective and objective measures cover all the QOL bases.

-----Richard Board 9/3/98

*One thing we could surely agree upon, as a matter of common human experience, is that subjective human conditions are both the cause and the effect of objective human conditions. Are we not, therefore, jointly exploring the interacting, objective and subjective aspects of the human condition?*

-----Phil Friedman 7/4/98

*QOL does not In my opinion have 2 dimensions ie an objective and subjective dimension. It only has a subjective dimension.*

-----Ross Andelman

1. *While I don't think that objective data are irrelevant to the QOL equation, I agree that the core concept here is subjective. The impetus for the work of Andrews and Withey, Cambell, et al., Cantrell and the rest of the 1976 vintage was the*

*empirically driven realization that social indicators- objective data - did not correlate with SWB.*

2. *Attitudes and beliefs are key, yes, but missing here, I think, are the concepts of perspective and relativity. Calman (1987) best expressed the notion of the gap: "QOL measures the difference, at a particular period of time, between the hopes and expectations of the individual and the individual's present experience. A&W offer an inventory of standards of comparison, e.g. relative to an ideal; change in one's life over time; relative to 'good enough'. My sense is that the objective aspect of QOL plays its biggest role here. Your socio-economic status is part of your internal bench mark, certainly not the whole megilla.*
3. *Finally the other element missing in this discussion is the role of development. A lot is made of intimacy and productivity. Absolutely essential ingredients in the QOL of early and middle adulthood. I think the theory to be truly unifying must be applicable across the life span.*

-----Phil Friedman 10/4/98

*Although I generally think happiness, well-being and QOL are subjective I have no objection to someone obtaining so-called objective measures. For the most part objective measures though correlate poorly with subjective measures. In addition in my clinical experience there is much more value in working to change variables that impact subjective measures of happiness, well-being and QOL than in trying to change objective measures. Thus happiness, well-being and QOL can be shifted much more rapidly from focusing on:*

1. *Shifting attitudes, beliefs and perceptions especially ones relating to self-discipline, self-empowerment, forgiveness, and gratitude*
2. *Fulfilling certain needs that enhance happiness (with each person having different needs that need to be fulfilled). In this case it would be important to help people satisfy those needs.*
3. *Turning to the Source of happiness which dwells within already. This could be called Self-Recognition i.e. recognizing and experiencing the Self within which is the internal Source of happiness through meditation/prayer etc.*

-----Joar Vitterso 10/4/98

*I belong among those believing in the necessity of separating objective and subjective components of QoL. As Bob has reminded us, these two aspects are relatively independent, thus we should not expect to find interaction effect between them. Still, the objective part is important in the interest of maintaining a viable QoL concept. The subjective part is too elusive to carry the heavy weight placed on the notion of life quality. Health is a good example. Usually, "objective" health status and measures of subjective quality of life (SQoL) are relatively unrelated. Nevertheless, I think health is an important component of life quality. Thus, even if we don't capture health aspects in*

*the SQoL, we need to include health in our overall conceptualization of QoL. As I have heard, a similar situation exists among people living in isolated religious sects with extreme values. Such people are supposed to be more happy than the general population, but I do not have any data on this. Having data or not, it \*might\* be the case, and if it is, I don't think we ought to recommend people to seek membership in such communities. However, if SQoL was all that we had, we would have to give such recommendations.*

*So, the way I understand it, subjective well-being is a more restricted concept compared with quality of life. As a tool in political management, the usefulness of SWB is rather limited. However, as a vehicle of understanding individuals and their feelings, motivations, thoughts and actions, it has great potentials.*

*The moral is: To maintain quality of life as a viable concept, we need to include both objective and subjective components!*

-----Bob Cummins 16/4/98

Let me attempt to establish a base camp. A simple point of agreement to which we can refer with confidence knowing the we all share in a common understanding at that level. Since it is my hope that we can build on this statement I have called it ISQOLS statement#1.

ISQOLS statement #1: Quality of life can be measured both objectively and subjectively.

-----Phil Friedman 17/4/98

*I would say that food, shelter, warmth, education, wealth or poverty are social or political or ecological or educational indicators which can be correlated with QOL measures but as Frisch has shown in his QOL scale it is the satisfaction with and importance of food, shelter, warmth, education, wealth or poverty to a person that is the measure of QOL and therefore a subjective measure.*

-----Bob Cummins 23/4/98

(To Phil) I have some difficulty with your objection at a number of levels as follows:

1. Your statement that 'satisfaction with --x--is the measure of QOL, and therefore a subjective measure' is surely tautological. If QOL is to be measured through questions of satisfaction then, yes, QOL is being measured subjectively. But I do not see how this negates the possibility that QOL can also be measured objectively through the use of a quite different question such as 'What is your income?'
2. You state that objective indicators (eg wealth) 'can be correlated with QOL (subjective) measures'. Yes, I agree. But I do not see the relevance of this to the question of whether objective indicators may also constitute a valid measure of QOL.



3. Your statement makes the implied point that subjective indicators are pre-eminent in that 'objective indicators' may be correlated with 'subjective QOL'. In other words, SQOL may be influenced by objective indicators, and SQOL is the primary measure. But, equally, objective indicators may be influenced by SQOL. For example, if someone is chronically depressed this will affect most aspects of their objective welfare.

-----Phil Friedman 23/4/98

*I did say in my previous message that perhaps the differences were semantic. In other words I don't choose to call so-called objective indicators, indicators of quality of life. They are indicators of something e.g. wealth, education, shelter etc. I just wouldn't call them QOL indicators. To me the term QOL implies something more personal and therefore subjective. Obviously it doesn't for you and some others which is fine. If it will make you happy you can say there are subjective and objective indicators of QOL. I just do not prefer to see it that way.*

-----Bob Cummins 2/5/98

I believe we are now agreed that, for some colleagues in ISQOLS, like yourself, the only QOL indicators that have relevance are the subjective indicators. For others, some of the economists perhaps, only the objective indicators have relevance. Still others, like myself, consider both types of indicator to have relevance depending on the context. Consequently, as you state, the meaning that people give to the term 'Quality of Life' will reflect their view of the construct on the subjective/objective dimension.

This solution also reflects the literature where, as we all know, the simple term 'QOL' has no standard meaning whatsoever. We have isolated one dimension of this problem, in the subjective/objective dichotomy, and it highlights the imperative in our communications that we clearly specify our interpretation of the construct beyond the simple use of the term. This requires, in turn, a clear operationalization of QOL in the terms of some form of measurement.

### **2.1.1 Alphas, Betas, and Gammas**

-----Abbott Ferriss 9/4/98

There are three kinds of people: alpha, beta and gamma.

- The ALPHAS believe QoL can only be operationalized by subjective elements; SWB.
- The BETAS rely upon objective measures to define QoL.
- The GAMMAS accept both subjective and objective.
- Then, there are others, DELTAS, whom we will not consider, who don't really care one way or the other.

----- Joe Sirgy 11/4/98

*Among the ALPHAS, BETAS, and GAMMAS are people with very different interests and goals operating at different levels of analysis. There are those who operate at the societal level and conceptualize QOL at a country or world levels. Many economists, sociologists, and political scientists among us work at that level. Let's call these people the MACROS. Then there are those among us who focus on specific groups such as the elderly, the poor, children, women, the cancer patients, the diabetics, the physically handicapped, and so on. The interests of these researchers are limited to understanding the determinants of QOL of their constituency, how to measure QOL of that group, and/or how to assess the impact of specific programs, products, services on the QOL of that group. Let's call these people the GROUPIES. Then we have QOL researchers who focus on communities or geographic regions such as metropolitan areas, cities, towns, etc. Their interests are limited to measuring, for example, city QOL and possibly uncovering factors that would make one city rated highly in terms of QOL than another. Let's call these people the COMMUNITARIANS. Then we have those among us who focus on the family and study quality of family life. Let's call these people the HOUSIES. Then we have many among us who focus on individual QOL, i.e., the person. For example, Phil Friedman and Richard Board have been talking about QOL at the person level. Let's call these people the INDIVIDUALISTS.*

*In other words, we may have a two-dimensional matrix classifying QOL research and researchers. One dimension (subjective versus objective) deals with differences between subjective, objective, and combination of both subjective and objective-ALPHAS, BETAS, AND GAMMAS. The second dimension deals with levels of analysis or what some may call "units of analysis"-MACROS, GROUPIES, COMMUNITARIANS, HOUSIES, AND INDIVIDUALISTS. This matrix contains 15 different cells.*

-----Stan Shapiro 13/4/98

*There is another small group of us out there who might be called "contributarians" or perhaps "determinists". We are interested, for example, primarily in what and how much health or employment or, in my own case, marketing, contributes to the well being and Quality of Life of individuals, families, communities, disadvantaged groups, etc. We also recognize there are both subjective (he who dies with the most toys wins") and objective measures affecting our particular concerns. It strikes me that we could have a three dimensional chart with 75 boxes if we identified five such contributing factors.*

-----Richard Board 13/4/98

*Researchers who maximize the objective elements of the human condition, and minimize the subjective components to oblivion, such as economists, architects, furniture builders, and automobile manufacturers are not interested in happiness or how it might be described.*

*Researchers who maximize the subjective elements of the human condition to the virtual disregard for the objective requirements of the individual, such as artists, performers, and spiritual leaders loose sight of the need for a healthy environment.*

*Researchers who look to the result of the integration between the person and the person's milieu, such as health care providers, teachers, parents, psychologists and sociologists are interested in both aspects of the human condition, as a whole.*

-----Joe Sirgy, 13/4/98

*We can call Stan's dimension an industry/institution-focus dimension. That is, different QOL researchers tend to have different industry/institution foci. There are those among us who are interested in marketing and the contribution of marketing as a societal institution to the QOL at different levels of analysis. Let's call these the MARKETERS. Then we have those who are in the healthcare and medical fields. Let's call these MEDICS. Then we have those who are interested in travel, tourism, and leisure. Let's call these the LEISUREITS. Then we have those who are interested in the effect of job, labor, income, unemployment, and related work issues on QOL. Let's call these the LABORITES. Then we have those who are interested in the effect of finance, financial institutions, credit, and other finance-related issues on the QOL. Let's call these people the FINANCIALISTS. Then we have those who are interested in landscape, architecture, horticulture, and design issues. Let's call these people the DESIGNERS. We have those people interested in the effect of environmental pollution on the QOL at various levels. Let's call these the ENVIRONMENTALISTS. Then we have the housing people--the effects of housing conditions, interior design, and other family resource management issues on QOL at the various levels. Let's call these the HOUSERS. Then we have those people interested in clothing and apparel and the effect of clothing, body image, fashion, etc. on the QOL. Let's call these people the APPARELISTS. I'm sure there are more industry/institution-focused QOL research that I missed here. We can certainly expand the number of categories of the third dimension.*

## 2.2 The objective axis

**The objective axis incorporates norm-referenced measures of objective well-being.** These include the social indicators such as the availability of medical care, income, standard of housing, etc. They also include any variables which can be accurately measured in terms of quantity or frequency, such as the number of friends that a person has or the number of times that they are ill.

-----Richard Board 24/3/98

*The English phrase "well being," was brought to the international forum of the General Assembly of the UN with the presumption that it enjoyed a clear and generally accepted meaning. When the member nations later tested the UN definition for domestic application, it was discovered that "well being" was not supported by consensus in the*

*language. It was found to be ambiguous. There is probably no phrase more defamed than "well being."*

### 2.3 The subjective axis

**The subjective axis incorporates measures of perceived well-being.** This axis is also referred to in the literature as subjective well-being and life satisfaction. It includes those measures of well-being which cannot be measured accurately by anyone other than the person who is experiencing the state. The most gross measure is the single question "How satisfied are you with your life as a whole?", but there are a plethora of more complex instruments which claim to make a more refined measurement.

-----Phil Freidman 6/3/98

*A person with a lower self-esteem score will not be able to hold their SWB score up for very long without bringing up his/her level of self-esteem. In other words a high SWB is not stable until the self-esteem score is also in the high range. In my opinion self-worth is an essential component of a person's quality of life.*

-----Bob Cummins 9/3/98

I certainly agree that under most circumstances I would expect self-esteem and subjective well-being, measured through satisfaction or happiness, to be highly related, and that any incongruence to be short-lived. But this does not mean that SE is a measure of Subjective well-being. Instead, I suggest that the measure of SWB is satisfaction, and that self-esteem is one of the processes that are involved in the generation of SWB. Hence, if this is true, SE should not form part of a definition of SWB unless (a) it is clearly specified as a process and not as an outcome, and (b) the other known processes (such as perceived control, for example) are also included.

### 2.4 QOL domains

**Both objective and subjective QOL can be considered to consist of a number of 'domains' which, in sum, constitute the QOL construct.**

There seems to be wide agreement with the idea of 'domains' but many of the authors who have proposed sets of domains seem to have ignored the crucial second part of this proposition, that together, the domains must encompass the entire QOL construct.

-----Phil Friedman 6/3/98

*I believe domain satisfaction to be something else than overall satisfaction, and the focus of interest within SWB research should be overall evaluations. In the interest of parsimony I think that overall satisfaction takes the different domains into account, if these domains are of significant importance for the individual. From this point of view, the domain propositions are not only redundant, but also biased. True subjective*

*evaluations should be taken from the individual's point of view. I don't think that a sum score made up by some culture-biased scientist (me, you or anybody else) should overrule the individual's own weighting and evaluations of his or her life domains.*

-----Bob Cummins 10/3/98

Domains have utility as psychometric devices. They allow a more refined measurement of QOL than can be achieved through a single question. They can, in fact, be diagnostic in informing about the aspects of life that are failing. Moreover, if the sum of the domains is equivalent to overall life satisfaction as measured by a single global question, then such a grouping of domains is a valid measure of QOL. This is the case for the seven domains which comprise the Comprehensive Quality of Life Scale (Cummins, 1996).

The critical feature of the ComQol definition is that the domains are so central to the experience of life quality that they are cross-cultural. In relation to the proposed seven domains we have strong evidence that this requirement is met. For example, our research with Italians, Greeks, Persians, and Phillipinos indicates that all groups regard the seven domains as relevant to their life quality, and they even rank the relative importance of the domains in very nearly the same order. For example, 'intimacy' is first order and 'community' is last order. Moreover, the use of 'importance' as a weighting factor for 'satisfaction', in the rating of each domain, allows people to individually weight the relative contribution of each domain to their overall life quality (see 2.5).

**That seven domains can be identified that constitute the QOL construct as follows: Material wealth/well-being, Health, Work or other form of productive activity, Social/family connections, Safety, Community connection, and Emotional well-being.**

In fact, in looking at the degree of agreement with this scheme from among the other published definitions, there is a clear majority in favor of five as: Material, Health, Productivity, Intimacy, and Emotional well-being. However, a reasonable case can be made for the other two. My arguments in this regard have been elaborated in Cummins 1996 and Cummins 1997b.

-----

*A domain of spiritual/religious well-being is missing from the list.*

-----Bob Cummins 15/3/98

We have now conducted three studies in which this eighth domain has been included. And the results are very instructive, not just in relation to this particular domain but in relation to our use of domains in general. The form of question that we used went something like "How satisfied are you (or how important to you) is your religion or spirituality? (remember that we use the product of satisfaction and importance to

calculate subjective well-being with the domain). All three studies provided quite consistent data as follows:

- a) About one quarter to one third of respondents indicated that they had no religion or spirituality. This proportion will vary, of course, with location and sample, but it raises a point of nuisance. With the inclusion of this domain people are differentially responding to 7 or 8 domains. This is undesirable from a psychometric point of view, but could be tolerated if necessary. But it is probably unnecessary as will be shown.
- b) We have devised a rather novel form of regression analysis. I have not seen it reported in the literature, and so am unsure what to call it (enlightenment will be welcomed). It is a form of 'internal' analysis, where we regress the 8 individual domains (including spiritual) against their total. Not surprisingly we find we can explain all of the variance! But the interest in the technique is that the square of the semi-partial correlation coefficients provide an estimate of the unique (as opposed to shared) variance contributed by each domain. And this is where it gets interesting. All 8 domains contribute only about 2 to 4% of unique variance. In other words, the 8 domains together contribute only about 20 to 25% unique variance, and they all share in the remainder.

This has some important implications. It means that, if we ask just one domain question we are able to capture around 80% of the variance. It means that, none of the domains appear to be contributing very much more unique variance than the others. And it also means that, it is not necessary to include an eighth domain of spiritual well-being unless one has a special purpose in doing so.

## 2.5 Domain Importance

**Subjective QOL must reflect the values of the individual respondent, and this involves weighting domain satisfaction by domain importance.**

There is little value in measuring domain satisfaction without knowing how valued is that domain to the individual. For example, if someone is very satisfied with their material well-being but do not regard this domain as being important, then, presumably, their degree of satisfaction or dissatisfaction with the domain has little relevance to their overall subjective QOL.

## 2.6 Definitional Relevance to all Groups

**A definition of QOL must be equally relevant to both the general population and to all defined population sub-groups.**

This is essential to prevent the generation of definitions being generated for disadvantaged sub-groups which use lower criteria for a 'quality life' than would be acceptable to the general population.

-----

*There is no problem in having different definitions for sub-groups.*

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Consider the following definition of QOL which referred to people with an intellectual disability. "...a multidimensional construct (whose) dimensions include normalized and decent living conditions, some degree of autonomy, opportunities for personal growth, and general happiness." (Vitello, 1984,p348). Would the general population consider this to be a suitable guide to define a quality life for them? I do not think so. And so the danger is that, when QOL is defined in such minimal terms, that the attainment of the defined conditions may then be used to infer that such people have attained a high quality of life. The only way to avoid such an abuse of the construct is to define QOL in the same way for everybody.

-----

*In relation to people with an intellectual disability, this would be impossible due to their different life experiences and the way they view life.*

-----

In relation to intellectual disability, we have developed a parallel version of the scale specifically designed to cater for people with this or any other form of cognitive impairment. This is called ComQol-I5 (Cummins, 1997). The '5' indicates this as the fifth edition of the scale which has been under development since 1991. In this the same information is gathered but using a simplified form of questioning. In addition, the testing commences with a protocol designed to determine the level of Likert scale complexity that the person is able to validly employ.

When we use this instrument with people who have an intellectual disability we find that, at least for those living in the community, their subjective life quality is no different from that of the general population. Not only do these people register a level of life satisfaction that is within the normal population range of 75+/-2.5%SM but also a rank-order of the seven domains is not different from that of the general population (Cummins et al, 1997).

-----Ross Andelman 10/3/98

*Psychosocial development continues through adulthood in most developmental theories, including Erickson's. In conceptualizing or measuring QOL in adults, is there any need to accommodate for evolving psychosocial tasks/conflict? Is a general QOL measure designed for middle adulthood, 25-45, appropriate for younger or older adults?*

-----Alex Michalos 13/3/98

*If we ask someone a short happiness question as one means of measuring their qol or part of their qol, there does not seem to be any need to create a special item. We might find different norms for responses from groups of different ages, but that is not the issue. If, on the other hand, we wanted to assess the impact of being infertile on a female's qol, I suppose we would have to craft questions proper to post-puberty females. Or, if we want to know the impact of old age on qol, we might have to craft special questions.*

## 2.7 The Definition

Consistent with the above propositions is the following definition:

**"Quality of life is both objective and subjective, each axis being the aggregate of seven domains: material well-being, health, productivity, intimacy, safety, community, and emotional well-being. Objective domains comprise culturally relevant measures of objective well-being. Subjective domains comprise domain satisfaction weighted by their importance to the individual."**

This definition is operationalized by the Comprehensive Quality of Life Scale (Cummins, 1997b ).

-----Richard Board 4/3/98

*Your wording unnecessarily exposes your ideas to what Kuhn refers to as "challenge". A challenge is a non-complimentary expression that can incapacitate your theory as a catalyst for paradigm, without offering a more acceptable theory. You have already acknowledged that there are those who would argue for five domains. Someone else might add education, for example, and argue in favor of eight. These are challenges. The phrase "well-being," which you use several times, is a built-in challenge. That phrase was rendered meaningless in the Canadian Parliament during the national health care discussions. The question was asked: "Is a woman who is pregnant, in a state of well being?" An affirmative response to that question would disqualify the pregnant woman under national health coverage. As a consequence, the WHO definition was abandoned. That shows the consequences of a challenge to a theory. Other member nations have also rejected the WHO definition for domestic applications. One would be hard pressed to isolate "well-being" from the language of WHO, and redefine it in a useful, new way.*

*To continue as the Devil's advocate, what do you mean by "health?" When you say health, do you mean "the absence of disease", the definition used by the American medical establishment in 1947 when the UN consensus for WHO was obtained? Do you perhaps refer to the WHO definition itself? That definition reads, "Health is not the absence of disease, but complete physical, mental and social well being." This WHO definition of health directly contradicted and challenged the paradigm of the American*



*establishment. In 1993, the American Medical Association, that had been the traditional defender of the "disease theory of health," withdrew its support. It did not, however, adopt the WHO definition or any other. In the words of the AMA President, "the complexity requires a definition in the context within which the word is used." Meaning, of course, that no general definition is recognized.*

-----Alex Michalos 13/3/98

*I don't think it is a good idea to formulate a definition of health on the basis of whether or not a particular national health insurance plan would cover the case of a pregnant woman. I don't think the WHO definition, broad as it is and that is a problem, implies that one has complete health or none at all. Rather, I think a fully healthy person would have complete, physical, etc.*

-----Bob Cummins 25/3/98

1. (To Richard Board) The essential feature of my definition is that it CAN be challenged. It makes an explicit statement about the structure of QOL having seven domains, and so on. This makes it useful because future falsification of its propositions should lead to new understanding about the structure of QOL. In this way a gradual consensus may begin to emerge as to the definition of the QOL construct. It will be a developing structure based on the weight of empirical evidence.
  
2. I agree that the terms used in my definition have no universally agreed meaning. That is why the definition is operationalized by the Comprehensive Quality of Life Scale. This scale provides an unequivocal meaning to the terms in the definition by the form of each question. Thus, for example, three items measure objective health. Subjective health is measured by the product of two items as: 'How important to you is your health' and 'How satisfied are you with your health'. Are these the best forms of items? Are they adequate to represent the construct as defined? Does the definition serve its intended function in encompassing the entire QOL construct? These are issues of empirical verification not philosophical speculation.

-----Richard Board 31/3/98

*When I referred to the need to ward off "challenges" to the central core theory of a paradigm, I was not talking about falsification of the assumptions that follow from it. An "effective challenge" to a core theory of a disciplinary matrix precludes or destroys the paradigm status.*

*If we stipulate a theory broad enough to include all of the major views of QOL, and there is certainly a common denominator from which we can work, we would unite them all. Dissenting views that might form thereafter, would need to take the initiative and show where and how we might be in error.*

*As I see it, the best way to accomplish this is through a common understanding of "happiness." If the word "happiness" were left out of a theory of QOL, as you suggest it might be, a breach with the past would occur. I agree that the word is meaningless and only contributes by inference. However, happiness is part of the tradition. If it were abandoned, many researchers, or at least some researchers, would be compelled to "challenge," the theory by denouncing it. They would not be inclined to attempt to falsify it.*

*Happiness can be defined in a useful way by combining it with the phenomenon it most closely represents. The gratification that results from the realization of potential is a phenomenon of common experience. It is linguistically proper to refer to that phenomenon as "happiness".*

-----Joar Vitterso 8/3/98

*I do not think that the term happiness' has a clear meaning. For example, in most theories of emotion, happiness, as other emotions, is considered to be brief events. Some researchers consider happiness to be a functional state of "action readiness" that signalize to us a message of continuation of ongoing activity e.g. (Oatley, 1992). On the other hand, some scholars think of happiness as a lasting and complete state of being (e.g. Tatarkiewich, 1976). I believe Ruut Veenhoven can provide us with a dozen or more different definitions on happiness. Also, if you look the word up in a dictionary, several different connotations to the term will be revealed. Moreover, folk theories of happiness probably vary a great deal, and we cannot expect the idea of happiness to be identical across individuals (not to speak of differences across nations). My point is that a definition of QoL referring to the term happiness cannot be virtually unassailable.*

### **3. DEFINITION (Friedman 8/3/98)**

**QOL can be defined by a combination of "joy, peace, happiness, love, and self worth/ self esteem.**

-----Bob Cummins 10/3/98

*I do not agree for the following reasons.*

- (a) *The first four terms are all global indicators of well-being and, I would guess, share most of their variance. If so, then it is not parsimonious to include more than one unless some specific type of information is being derived from the other terms.*
- (b) *Self-esteem can have one of three characteristics. It could be (1) A measure of subjective well-being, (2) A product of subjective well-being, or (3) Causally involved in the production of subjective well-being. For my money the data are in on this issue and come firmly down on (3). For example:*

*Pugliesi (1988) concludes "It is conceptually distinct from symptoms of distress and feelings of happiness and satisfaction which are tapped by measures of well-being."*

*Block and Robbins (1993) argue that self-esteem has no necessary relation to mental health (whereas subjective well-being does).*

*Hermans (1992) demonstrates that high levels of self-esteem can co-exist with low levels of subjective well-being (measured by a combination of joy, happiness, enjoyment, and inner calm).*

-----Phil Friedman 11/3/98

I don't think that the measure of SWB is satisfaction. There are different components to SWB: emotional stability (peace/contentment) and joyfulness which largely accounts for happiness; self-esteem, satisfaction, sociability and intimacy. I don't think these are all identical and they may correlate with different things though of course there is some overlap. I would suggest that the intervening variable is attitudes/beliefs. i.e. attitudes/beliefs about the self equal self-esteem. Attitudes about work, relationships, self and life account for life satisfaction to some extent and other attitudes account for emotional stability and joyfulness e.g how much humor you experience and how much sensory quietness. (not the best term) Of course there is a lot of overlap here. In my clinical work when attitudes/belief change everything else changes to.

-----Bob Cummins 12/3/98

*In relation to the measurement of SWB I certainly do not feel that there is anything like a consensus on this issue at the moment, or really any solid data upon which to base a decision.*

*For me, satisfaction represents the end-point of all the cognitive/emotional processes that are related to the generation of SWB. This is a very simple view, it is easy to operationalize, and therefore has heuristic utility. Whether it is correct is actually a major question for our research.*

-----Phil Friedman 13/3/98

Self-esteem is an attitude about the self for sure. I teach clients that they need to let go of judgement and forgive themselves in order to feel more worthy. I am not sure exactly where it fits in actually just that it is very important in feeling good about oneself.

COPERS is an acronym that summarizes the major personality and attitudinal dimensions that people with high levels of well-being as measured by the Friedman Well-Being Scale have:

- C = CONFIDENT, self-assured, assertive, hopeful, optimistic*
- O = OUTGOING, sociable, neighborly, friendly, warm, loving*

- P = PEACEFUL, calm, contented, relaxed, at ease, serene*  
*E = ENTHUSIASTIC, jovial, joyful, energetic, cheerful*  
*R = RESOURCEFUL, reliable, conscientious, organized, practical*  
*self-disciplined, competent, thorough*  
*S = STABLE, secure, steady, trusting, forgiving, grateful*

People with low levels of well-being are not self-confident, self-assured, assertive or hopeful. Compared to people with high levels of well-being they tend to be more un-social or anti-social, socially avoidant, distant, aloof, unfriendly, cold, unloving and unneighbourly. They are also much more tense, worried, nervous, fearful, angry or hostile, sad or depressed, guilty and impulsive. They generally feel discontented, vulnerable and very sensitive in interpersonal relations. They also tend to be much more unenthusiastic, pessimistic, irresponsible, unreliable, unconscientious, disorganized, unself-disciplined and impractical relative to people who have high levels of well-being. They perceive themselves as much more unstable, unsteady, insecure, untrusting, unforgiving, ungrateful, co-dependent and joyless. They frequently engage in automatic negative thoughts.

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-----Bob Cummins 15/3/98

*I do think that the model has limited utility as a measure of 'subjective well-being' for the following reasons:*

(a) *The model essentially taps some of the personality factors that are associated with SWB. For example, if it is matched against the 'Big Five' personality factors of the NEO PI-R (Costa and McCray, 1992) then the following relationships become apparent:*

*Confident = high extraversion*  
*Outgoing = high extraversion*  
*Peaceful = low neuroticism*  
*Enthusiastic = high extraversion*  
*Resourceful = high conscientiousness*  
*Stable = high agreeableness*

*In this, the missing factor is 'Openness'.*

(b) *For me, the measure of SWB should not be in terms of personality for the following reasons; (a) Personality is a stable partial determinant of SWB, but there are other contributing factors as well. For example, if a person who is very high on extraversion suffers from severe arthritis then the constant pain will reduce their SWB. (b) There are cognitive processes outside the Big Five that also contribute to the generation of SWB. Examples here include 'emotion focused*

*coping' and 'secondary control. However, I must add that the extent to which these processes are driven by the Big Five is not at all clear to me.*

- (c) *I currently believe that THE measure of SWB is satisfaction. It seems to me that satisfaction/dissatisfaction is the end product of all the personality factors, cognitive variables, and other impinging variables in interaction.*

-----Phil Friedman 16/3/98

- (a) Openness doesn't correlate with any of my measures of well-being to any substantial extent.
- (b) My research indicates that personality measures are not stable when effective therapeutic interventions are implemented. Also personality measures are strongly influenced by attitudinal variables. Constant pain will reduce SWB only temporarily. These are stresses anyone can encounter.
- (c) As I said I correlated the Friedman Scales with over 100 other scales. The fact that many of them also correlate with the Big 5 shows the power of the Big 5. As you said it is not clear to what extent "emotion focused coping or secondary coping correlate with the Big 5. I bet they do to some extent.

-----Bob Cummins 18/3/98

1. *Are you indicating that your scale is, in fact, strongly tapping the Big Five (except openness)? If so, are you suggesting that an appropriate measure of QOL is, in fact, personality?*
2. *You state that 'personality measures are not stable in the face of intervention', but let me give you an alternative view. That the measures you are using comprise a combination of 'personality' and 'other'. Then, in an intervention, the 'personality' component remains stable, while the 'other' changes. In this case, surely it would be more useful to identify the 'other' as the measure of QOL? That is, for a QOL measure to be useful it must be sensitive to changes in experience.*
3. *In response to my claim that chronic pain will cause a chronic reduction in SWB you state 'Such reduction is only temporary'. Here I believe you are wrong. There are certain, quite common, life circumstances which provide chronic stress from which people cannot escape and, under those circumstances, their SWB is chronically reduced. These include prisoners, people in chronic pain, mothers caring for severely impaired children at home, and people with marked schizophrenia.*

### **3.1 Balance model as the interaction between health and happiness**

-----Phil Friedman 16/3/98

The model of happiness that is most consistent (actually highly consistent) with all of the research that I have conducted is a \*balance model\*. Ultimately I would say this model has to do with \*energy balance\* which has both Eastern and Western roots.

Pragmatically, however, in terms of measurement the research clearly indicates a \*cognitive-affective balance\* model accounts for most of the self-reports of happiness i.e. the ratio of positive thoughts and feelings to positive plus negative thoughts and feelings. Moreover, the research seems to indicate that a ratio of 5 to 1 typically leads to a fairly high state of happiness. Within the \*balance\* model the 2 components that have the most contribution to happiness are emotional stability and joyfulness.

#### 4. DEFINITION (Board 5/3/98)

**QOL is the human condition determined by the interaction between health and happiness.**

QOL refers to the human condition. From that perspective, the initial words of a universally acceptable definition might, therefore, be, "The quality of life is the human condition .

If we define health as "the ability to realize potential" then satisfaction is the phenomenon that results from the realization of potential.

"Happiness" is the gratification that results from the realization of potential. Then "Quality of life is the human condition determined by the interaction between health and happiness."

On the social level, a healthy society can be seen as one that is able to realize its potential. On the level of the individual, health is the ability to realize potential regardless of how great or limited those potentials might be.

Health and happiness are interdependent components of the human condition, which I suggest is another way of saying quality of life.

-----Joar Vitterso 6/3/98

*If health is the ability to realize potential and happiness is the gratification that results from the realization of potential, why not define QoL as the realization of potential?*

-----Richard Board 10/3/98

Health, the ability to realize potential, is fundamentally a matter of choice. People who do not choose to be healthy are soon unhealthy. People smoke, orchestrate accidents for

themselves, etc, with startling regularity. Happy people, in contrast, find ways to live that are healthier.

Without the desire and determination to realize potential, health is vacuous. This is where happiness comes into play. Choice is a human imperative. Humans must choose but they need not choose in conformance with the pleasure principle. That is to say, humans need not comply with the biological inclination to seek pleasure and avoid pain. The gratification that results from the realization of potential allows humans to circumvent that principle. This quest for happiness is compelling, but it frees the will. GROTROP, the Gratifying Result Of The Realization Of Potential. GROTROP is an every day human experience. The quest for GROTROP is more compelling than is any animal instinct. GROTROP is often occluded by pleasure. So much so that the hedonists are convinced that happiness and pleasure are the same thing. GROTROP is the fundamental criterion of human choice even though it might not be recognized as such.

I will return to calling GROTROP happiness, to minimize the distraction of unusual names and labels. The next task is to tie happiness productively into QOL.

-----Joar Vitterso 11/3/98

*It seems to me that GROTROP resembles the classic notion of "eudaemonia". As I understand it, eudaemonia refers to the process of doing, or more precisely, living in accordance with the right spirit of one's true self. "Hedonism", on the other hand, is related to a more passive state of pleasure, or satisfaction of desire, like having "pleasure-producing" things.*

*What is interesting, however, is that when eudaemonia is operationalized as self-actualization or personal growth, and hedonic enjoyment is operationalized as happiness and satisfaction, we find that the two concepts are relatively independent of each other. Assessment of satisfaction, positive affect and negative affect does not capture the phenomenon referred to as eudaemonia. Carl Rogers was among the first modern psychologists to reflect on this almost counterintuitive reality. He found it both surprising and difficult to understand when he first discovered that those individuals who made real progress towards what he considered "a good life" would typically not regard themselves as happy or contented. More recently, several empirical investigations have revealed that indicators of self-actualization, mastery and personal growth are relatively unrelated to indicators of happiness and satisfaction*

-----Alex Michalos 14/3/98

*I don't think 'the quality of life is the human condition' gets us anywhere, though it is unobjectionable. it doesn't clarify anything.*

*Adding "determined by the interaction between health and happiness" makes it hopelessly complicated. We have no generally accepted analysis of happiness or health, and so far still no compelling evidence that health and happiness are the prime drivers of*

*QOL. All my work with Multiple Discrepancy Theory shows that aspiration and social comparison theorists were closer than anyone else toward understanding what contributes to QOL. But again, what predicts what depends on what we load into our dependent and independent variables, and a lot of what we find is there because our fishing nets would only allow some kinds of fish to turn up. I think that net analogy was Nietzsche's.*

*I think we would make a serious error if we retreated to Plato's notion of happiness as a product of realizing one's potential, for several reasons. First, the idea of human potential carries some heavy metaphysical baggage of an essentialist sort. Plato, and others in that tradition, thought of all things but especially people as having a unique function and insofar as people were allowed to exercise that function, they would be maximally fulfilled, self-consistent/coherent, in harmony with themselves, and literally feel good about it=happy. A nice package, but (1)we have no idea of what a person's potential might be, (2) whatever it is, it varies with environmental influences (the healthy seed in sand does not have the potential of the healthy seed in fertile soil), (3) this sort of theory tends to biologize issues that are political, social, economic, etc.(that was and is one of the attractions for some people of Darwinism, and one of the reasons feminists and people who struggle against racism resist Darwinism), (4) this sort of theory tends to downplay and even remove human agency and choice from the causal account of what makes people happy or what more broadly makes for a good quality of life (a proper blossoming of what's inside is all we need, it suggests), (5) it neglects the evidence we have indicating that closing gaps in aspirations and social comparisons are virtually always more important than closing gaps on perceived needs, (6) it neglects the fact that we can and do measure people's expressed wants and their gaps, but have no idea how to measure people's potential, and finally (7) it just reinforces people's tendencies to give dispositional/trait analyses of things that may be much more situational/ad hoc/existentially determined.*

-----Richard Board 15/3/98

GROTROP happiness is not eudaimonia. It is a psychosomatic phenomenon that is indispensable to human survival and health. GROTROP frees the will and provides orientation in life.

Incidentally, Joar, an excellent consideration of eudaimonia and its objective, daimon, is available by Alan S. Waterman, of Trent State College, in "The Relevance of Aristotle's Conception of Eudiamonia for the Psychological Study of Happiness."

One linguistically sound definition of happiness was constructed and offered by Ruut Veenhoven. "Advances in Understanding Happiness," written in English, was published in French in, *Revue Quebecoise de Psychologie*, 1997. To wit: "Happiness is the degree to which a person evaluates the overall quality of his present life-as-a-whole positively. In other words, how much the person likes the life he/she leads." The language of origin is important because the evolution of the word in English is important.



-----Joar Vitterso 16/3/98

*I disagree with your claim that the Veenhoven definition of happiness seems to envision the same phenomenon as your definition of happiness. A growing body of research demonstrates that the realization of potential is something different from happiness as defined by Veenhoven. Waterman (1993), for one, is among the researchers who recently have focused attention on this important difference. Others are listed below.*

*McGregor & Little (1998) have shown that happiness is something else than the realization of potential. Happiness and satisfaction, as measured by self-reports, are probably tapping into a very broad and global dimension of appraisals of things in terms of goodness and badness. This is very much a stable personal disposition, although personality does not explain all there is to the phenomenon. Nevertheless, the degree to which a person realizes his or her potential, hardly affects that persons level of self-reported happiness. I agree with Alex in that the notion of "realizing one's potential" is very hard to conceptualize. What I have in mind, is that people who live interesting and challenging lives, individuals who seem to lead a rich life, those who report higher degrees of mastery and self-actualization, do not report higher levels of happiness than other people do. Or, to state it more precisely, items reflecting self-realizing aspects of life correlate only modestly with items tapping into happiness and global life satisfaction.*

*Additionally, a more restricted definition of happiness exists in theories of emotions. My favorite, the communicative theory of emotion (Oatley, 1992), for instance, describes happiness as the feeling that occurs when goals and subgoals are being achieved. The function of happiness is to signalize encouragement to the self to continue the current action. The principle behind happiness in this theory is understood within a self-regulation framework which states that human behavior is a continual process of moving towards various kinds of mental goal representations. When movements are towards goals, discrepancy reducing feedback is transmitted in the cognitive system. When movements lead away from a goal, an increase in discrepancy is signaled. Positive emotions are triggered by events that make achievement more likely, and its effect is to prompt continuation. With events that imply loss or damage to a goal, emotions are negative and they interrupt the current plan.*

-----Richard Board 17/3/98

Function ability and health are synonymous. Intentional acts and forbearances that I willfully perform produce gratification for me, whether or not the act or forbearance is pleasant. This gratification is happiness. The greatest motivation of human health is the determination that comes from the gratification that results from the realization of potential (happiness).

The result of the interdependency and the interaction between function-ability and gratification is the human condition.

We humans are free to choose by virtue of the gratification that results from the realization of potential. We are, however, compelled to choose. Even the refusal to choose is a choice. Choice is a human imperative. At some point in our early childhood, we are unknowingly committed to the social paradigm in which we are raised. Unless that paradigm proves to be ineffective as a problem solving device, in which case we become antisocial and disoriented to one degree or another, we remain committed throughout our lives. The greater the success we experience the greater the commitment, and the greater the commitment the more directed our pursuit of happiness becomes.

-----Joar Vitterso 23/3/98

*It surprises me a bit that you continue to use the term realization to describe the phenomenon of happiness despite the growing body of evidence against this proposition. So, let me ask you a short question: What is your comment to the observations made by Carl Rogers some years ago, that individuals who made real progress toward what he called "self-actualization" typically not regarded themselves as happy or contented?*

-----Richard Board 24/3/98

I used "realization" rather than "actualization" in the description of the gratification phenomenon in order to distinguish between "the realization of potential" and "self actualization."

I conclude that neither Rogers, nor Maslow, nor any of the other humanists defined "happiness" in the literature. Neither did Maslow, who introduced the phrase, nor Rogers who used it, say that "self actualization" and happiness were synonymous.

Maslow speaks of "peak experiences" which seem tantamount to spikes of happiness, defined as the gratification that results from the realization of potential, but not all experiences of gratification are intense. "Self actualization" implies a collection of potentials realized, such as in piano playing. Experience tells us that single acts as well as complex acts can provide gratification.

Moreover, not all acts produce gratification even in small amounts that might encourage further action. Some produce the opposite response, frustration. It is for this reason that I speak of the gratification that results from the realization of potential, and not simply to the result of the realization of potential, when describing the phenomenon I call happiness.

Unlike animals which are content, humans do not repose in contentment. Consequently we have people such as Buddha, Jesus, Mother Teresa, and Atila the Hun. The quest for happiness drives people out of contentment. Pleasure satiates and becomes boring.

The gratification that results from intentional action (or forbearance) stimulates further action, and is never a bore. This gratification is a matter of common experience. We

cannot logically deny its existence but we need not call it happiness if, as a group, we elect not to.

Satisfaction, well being, joy, and all similar words express gratification resulting from the realization of some potential.

"Self actualization" presupposes the realization of potential but "self actualization" neither describes happiness nor is it coextensive with "the realization of potential." "Self actualization" is a lesser included concept.

-----Bob Cummins 25/3/98

*The definition you have proposed cannot be challenged. Well, it can on the basis of terminological ambiguity, but not in any simple empirical sense. I have no idea how "the ability to realize potential" could be measured. If it cannot be falsified through data then, for me, it has no heuristic value.*

-----Richard Board 31/3/98

With reference to the "ability to realize potential", that you find troublesome, I would ask you to reconsider. The ability to measure a person's potential to walk, talk, digest food and do almost every other conceivable thing is currently available. This is a new way of looking at human health, but it is a way of measuring the function-ability of any system. The question is not whether a potential can be measured, but whether it can be recognized. Are love, honor, dignity, patriotism authentic potentials? Can they be measured? As you have pointed out these things can be operationalized.

-----LauraLee Carman 25/3/98

*I would argue that the gratification that results from the realization of potential is "satisfaction." Feelings of satisfaction contribute to happiness. Therefore, realization of potential is thus a contribution to happiness, not happiness itself.*

-----Joar Vitterso 25/3/98

*Richard, you suggested that "the quest for happiness drives people out of contentment". If you had rephrased your statement into "the quest for realization of potential drives people out of contentment" I could probably have followed your point of view (although I still think the formulation 'Realization of potential' is a difficult one).*

*Let me clarify. Consider the impressive stability (broadly speaking) found in the relationship among affects. The so-called mood circumplex provides an illuminating example. Here, the relationship among affects are expressed according to the law of neighboring along the circumference of a circle. I don't know the number of studies in which one has found happiness and contentment to be neighbors in the circle, but there are quite a few. Moreover, affects like excitement, interest and challenge are equally often found to be located some distance apart from happiness and contentment. Actually, I think happiness is somewhere between excitement and contentment, but that is not the*

*point. My argument is that people from many parts of the world use the term happiness to denote a particular kind of affect. Related to other kinds of affects, the common use of the term happiness is rather stable, and we can predict, relatively precisely, where happiness will be located in comparison with other commonly used terms of affect. And happiness is not stationed close to interesting/exiting or challenging experiences. These latter affects, I would believe, are probably more typical reactions to an activity in which some potentials are being realized.*

-----Josh Samli 10/4/98

*Having the opportunity to actualize individual potential may not be a happy event. But it is in the right direction towards enhancing the QOL. It is not necessary to enjoy short term "hedonistic" sensations in capitalizing individual potentials. An individual may be best suited for being a policeman and fighting crime but personally that individual may hate taking risk facing violence but he/she may be one super cop. The individual is not quite happy but is satisfied with the fact that he/she is excelling in this police work.*

-----Joar Vitterso 5/4/98

*I have been reading M. Csikszentmihalyi's latest book: "Finding Flow. The psychology of engagement with everyday life" (Basic Books, 1997). Dr. C. writes: "It is the full involvement of flow, rather than happiness, that makes for excellence in life. When we are in flow, we are not happy... ..But we can be happy without experiencing flow. We can be happy experiencing the passive pleasure of a rested body, a warm sunshine, the contentment of a serene relationship" (p. 32). Again, an operationalization of the realization of potential is difficult, but I believe that flow has very much to do with it. This makes it very unlikely that your definition of happiness as the gratifying results of the realization of potential is a proper one.*

*Of course, Csikszentmihalyi might be wrong. The other studies related to the issue might be wrong too. However, taken together they seem to suggest that your definition of happiness is too broad and vague. Moreover, related to a number of promising theories of emotions that have evolved during the last couple of decades, the understanding of happiness is now integrated in a set of cognitive and motivational theories. I believe that your reference to "realization of potential" is a less integrated concept compared with what is offered from these theories. So, Richard, you need to convince us that your definition of happiness is more functional than those already existing. And I believe you will need some data to do so. Or, to put it the way I heard it the other day: "In God we trust - the rest of us need to bring data".*

-----Richard Board 6/4/98

In order to evaluate the contribution of Mihaly Csikszentmihalyi, I believe one must take his work more globally.

At page 53 of "Flow, The Psychology of Optimal Experience," under the heading The merging of Action and Awareness, the author writes the following. "When all a person's

skills are needed to cope with the challenges of a situation, that person's attention is completely absorbed by the activity. There is no excess psychic energy left over to process any information but what the activity offers. All the attention is concentrated on the relevant stimuli.

As a result one of the most universal and distinctive features of optimal experience takes place: people become so involved in what they are doing that the activity becomes spontaneous, almost automatic: they stop being aware of themselves as separate from the actions they are performing."

It is for this reason that we called the optimal experience "flow." On page 78 he continues, "If we assume however, that the desire to achieve optimal experience is the foremost goal of every human being, the difficulties of interpretation raised by cultural relativism becomes less severe."

The author is talking about a cumulative experience made up of a sequence of contingent accomplishments. Each of these is the result of a potential that has been realized.

Now, against this back drop I will place the quote you extracted from "Finding Flow," in a slightly more complete form.

"It is the full involvement of flow, rather than happiness, that makes for excellence in life. When we are in flow, we are not happy, because to experience happiness we must focus on inner states, and that would take away attention from the task at hand. If a rock climber takes time out to feel happy while negotiating a difficult move, he might fall to the bottom of the mountain. The surgeon can't afford to feel happy during a demanding operation, or a musician while playing a challenging score. Only after the task is completed do we have the leisure to look back on what has happened, and then we are flooded with gratitude for the excellence of that experience ^then, in retrospect, we are happy.

But one can be happy without experiencing flow. We can be happy experiencing the passive pleasure of a rested body, a warm sunshine, the contentment of a serene relationship. These are also moments to treasure, but this kind of happiness is very vulnerable and dependent on favorable external circumstances. The happiness that follows flow is of our own making, and it leads to increasing complexity and growth in consciousness."

The author is discussing "flow," and only secondarily is he discussing "happiness." If you will reread the forgoing text and insert, "the gratification that results from the realization of potential," in place of Happiness," you will find an interesting fit. For example, "It is the full involvement of flow, rather than the gratification that results from the realization of potential, that makes for excellence in life."

Let us recall that we are discussing happiness and not flow. There can be happiness without flow, but as Dr. C points out, in order for flow to occur there must first be the realization of potential.

The author writes, "When we are in flow, we are not happy." To revert to syllogistic logic, he is not saying that we are "non" happy. He is saying that we cannot take the time just then to enjoy the gratification that follows from the act. "Only after the task is completed " can we enjoy the gratification that results from the realization of potential.

If, when he writes that " We can be happy experiencing the passive pleasure of a rested body " one interprets him to be saying that passivity provides happiness, I would disagree. However, he could in fact be of that opinion. Four flows of happiness have been shown to exist. These are, Hedonism (which gave Utilitarianism), Humanism, Stoicism, and Transcendentalism. Dr. C,s writings, taken as a whole, do not suggest that he is a hedonist, however.

You decried this use of the word as "too broad and vague." It must be broad to satisfy the linguistic requirement for general application. I hope you now see it as less vague. In order to be valid, the definition must also apply to any given specific instance. I believe it does. Unless some potential has been realized, no action has been performed. Unless one would argue that an unhappy person could become happy by being bathed in sunlight, as a misinterpretation of Dr. C might imply, happiness is the realization of potential. Non gratifying results cannot be construed as happy events. Therefore, it is safe to say that it is the gratification that results from the realization of potential that we refer to as happiness, whether we acknowledge that fact or not. The best authority I can offer in support of that contention is common human experience.

-----Joar Vitterso 20/4/98

*Thanks for an interesting response. I agree that intensity is an important aspect of affective life, and that perceived centrality or essentially of the current goal is a significant predictor of emotional intensity. I have to admit, however, that we probably depart in our interpretations of flow. Whereas you seem to consider the piano concert as source of GROTOP, and a series of concerts during a lifetime as the cause of flow, I understand it the other way around. Flow, I believe, might occur during the concert, happiness might be that which characterize a whole life (or according to a some emotional theorists, happiness is a kind of action readiness and phenomenological tone which follows as a response to the achievement of goals and subgoals). A return to the citation from Csikszentmihalyi's 1997 book, will probably clarify my view:*

*"If a rock climber takes time out to feel happy while negotiating a difficult move, he might fall to the bottom of the mountain. The surgeon can't afford to feel happy during a demanding operation, or a musician while playing a challenging score. Only after the task is completed do we have the leisure to look back on what has happened, and then we are*

*flooded with gratitude for the excellence of that experience - then, in retrospect, we are happy." (p.32).*

*As far as I am concerned, this distinction between happiness and flow makes Csikszentmihalyi's conceptualization of happiness closer to Veenhoven's definitions of happiness than to your GROTROP.*

-----Richard Board 19/7/98

I conclude that the majority of those who took an interest in the discussion agree that the study of the quality of life, is the study of the human condition. We further agree that the human condition can be studied as a collective phenomenon and/or as an individual phenomenon. These phenomena are interdependent. Each phenomenon has both an objective and a subjective component.

## **5. DEFINITION (Samli 9/3/98)**

**QOL is a general condition where human beings in a society have been able to realize their potential and have equal opportunity to continue doing so.** [For a discussion of QOL as the realization of potential see section 4.]

## **6. QOL AS POSITIVE AND NEGATIVE (Board 1/4/98)**

-----Richard Board 1/4/98

Quality of life traditionally infers a positive condition. In contrast, the subjective human condition is not always some degree of positive response. It could be quite negative. Negative human responses are traditionally not in the realm of QOL. According to the information that I have gathered, QOL does not concern itself with the report of negative human conditions.

## **7. EXOGENOUS/ENDOGENOUS, INPUT/OUTPUT**

-----Bob Cummins 23/4/98

Abbott, you have introduced the terms exogenous and endogenous. Do these terms have a different meaning from objective and subjective respectively?

-----Richard Board 27/4/98

*The statement that "Quality of life can be measured both objectively and subjectively," can be restated in endogenous/exogenous terms as follows:*

- *First, there can be an endogenous response to an endogenous stimulus. A dream, for example.*
- *Next, there can be an endogenous response to an exogenous stimulus. If the exogenous stimulus is subjective, that is to say dependent upon the subject for existence, we might have an hallucination, or self deception.*
- *Finally, if there is an endogenous response to an exogenous stimulus that is objective, that is to say a stimulus that is independent of the subject, we have what we might call reality.*

-----Abbott Ferriss 4/5/98

*Cummins asks whether I intended exogeneous to equal objective and endogeneous to equal subjective. Answer: no.*

*SWB has been given a fairly distinctive definition. Ed Diner (1994) and Diner, Suh, Oishi (1997), and Andrews and Whithy, have reviewed its meaning and provided operational definitions, as have many others, SWB is an evaluation of life satisfaction, marital satisfaction, lack of depression and anxiety "in terms of internal experiences of the respondent." It is not synonymous with mental health. "SWB is not a sufficient condition for psychological well-being."*

*Endogeneous refers to whatever originates from within the body. Consequently, it is a broader concept (and, consequently, less useful in research).*

*Concerning the objective dimension, I don't have access to as precise a definition, as has been given SWB. The list of exogeneous variables in my note of 4/20/98 suggests that it includes social influences upon the person as well as more tangible influences, for example, life events, effects of the (welfare) character of the social system, etc. as well as income, occupation, etc. Including such influences as these in the concept "exogeneous" probably goes beyond the definition most would accord "objective."*

*In this connection, Phil (4/16/98) cites Firsch whose QOL scale taps satisfaction with food, shelter, warmth, education, wealth or poverty. Andrews' 1972 and 1988 survey of the U. S. population included assessments of health, having fun, income, job, marriage, friends, your community, politics and government (Andrews, 1991). These areas represent the structural organizations of society:-- the family, the economy, community, recreation, government, health/medical complex (I believe he omitted religion the inclusion of which would about complete the list of institutions.) I have elsewhere (1990) attempted to make the case that changes in these institutions are the bases of change in the QOL. They are the sources of the exogeneous influences.*

-----Richard Board 12/5/98

*Endogenous is broader than "subjective well-being" in that an endogenous response might be either gratifying or frustrating. Presumably, SWB is an expression of gratification that is affirmative, to some degree.*



*Endogenous and exogenous, combined with subjective and objective allow for precision that subjective and objective, alone, do not. Human responses might be either endogenous or exogenous. The stimuli that motivate the response might be either endogenous or exogenous, subjective or objective.*

-----Bob Cummins 11/5/98

To Abbott. The reason that I sought your definition of 'exogenous' and 'endogenous' was to clarify our use of terminology. As Richard has reminded us on many occasions, terminology does matter and the two terms in question, while commonly used in other contexts, are not a common part of the QOL lexicon. It is therefore interesting to determine whether they add a useful conception beyond the terms objective and subjective.

You have described 'endogenous' as referring to "whatever originates from within the body", but also as being a "broader concept" than subjective well-being. I think this is actually confusing. Consider, for example, the QOL domain of Health which may be one of the few domains we all agree is a constituent of QOL (probably a dangerous assumption !). Health is entirely endogenous and yet can exist (can be measured) both objectively (actual disease/health state) and subjectively (perceived health). This surely generates a terminological conundrum. If endogenous is both subjective and objective, then is it a synonym for QOL? And if so, how does exogenous fit into the picture?

Looking at the variables listed in your email of 20/4/98 it seems to me that all of them can be categorized as either objective or subjective. Moreover, this form of categorization has utility in that it informs about the type of measurement that is required to operationalize the variable in question. In conclusion, I cannot see (yet) the utility of these two extra terms.

-----Abbott Ferriss 13/5/98

*I offer an example to demonstrate that the terms add a distinction that "objective-subjective" does not.*

*Consider a room heated to 85 degrees - an exogenous, objective circumstance.*

*A male and female are in the room, with normal temperatures: 98.9 degrees, an endogenous condition determined objectively by measurement..*

*The male says: "Ahhh, I love this cosy warm room." -- a subjective reaction arising endogenously,*

*The female says: "I am suffocating, Open the window." - also a subjective reaction arising endogenously.*

*The thermometer provides an objective determination of an exogenous condition. Cummins' health example makes the same distinction. The "objective" measure of an endogenous condition differs from the term, "objective," when used to describe the*

*exogenous circumstance. (Endogenous is not a synonym for QoL.) There is purpose in separating the external influences upon the person from the internal conditions and responses.*

-----Bob Cummins 16/5/98

As far as I can understand, the two sets of terms are being applied to two situations as:

1. To describe the origin of the stimulus that modifies QOL by impinging on the person.
2. To describe the consequence of the stimulus in terms of output.

With this in mind I have attempted to understand the distinction between terms by generating examples as follows.

#### INPUT

Subjective-exogenous = perceived beauty of a sunset

Subjective-endogenous = optimism

Objective-exogenous = praise from your mother

Objective-endogenous = physical fitness.

#### OUTPUT

Subjective-exogenous = satisfaction with living conditions

Subjective-endogenous = positive affect

Objective-exogenous = overt behavior (our only form of objective output) directed towards an external agent e.g. patting a dog

Objective-endogenous = Overt behavior directed towards an internal agent e.g. working-out in the gym.

My analysis of the above table leads me to the following conclusions:

1. The objective vs endog/exog distinction does not seem to be very useful. In each case it is serving only to differentiate 'own body' (endog) from all other reference targets.
2. In relation to the subjective vs endog/exog distinction, the endog/exog dichotomy can be substituted by objective/subjective. So ,

Subjective-exog = subjective-objective

Subjective-endog = subjective-subjective

The restriction to obj/subj terminology makes communication simpler to understand and there is no loss of meaning ( except for the use of endog as 'objective referenced to the body. But this can be specified in these words , as required for special situations where the body is the target).

3. Let me indicate how the complexity of the exog/endog has already caused unnecessary confusion.

Richard 24/4/98 "If the exogenous stimulus is subjective, that is to say dependent upon the subject for existence, we might have an hallucination."

This can surely be stated more simply as "An objective stimulus, perceived by a subject, may create an hallucination." In this simple form it is easier to see that the sentence requires attention before it makes sense. This was not so apparent in its original form.

Richard 28/4/98 "Subjective appreciation/happiness is a subjective expression of an endogenous response."

Why not just "happiness is a subjective response"?

Abbott 13/5/98 "The "objective" measure of an endogenous condition differs from the term,"objective," when used to describe the exogenous circumstance."

The measure in question is room temperature. The objective measure is 98.9 degrees. The subjective measures are from a male (who responds 'just right') and from a female (who responds 'too hot'). So why not " people differ in their subjective response to ambient temperature"? I cannot see the benefit here of incorporating exog/endog into the description. Indeed the inclusion of these terms just seems to confuse the act of communication. At least for me.

-----Abbott Ferriss 14/5/98

*A more explicit description of the classification is as follows:*

*Types of Social Indicators Relative to QoL - Examples*

	<i>Exogenous</i>	<i>Endogenous</i>
<i>Objective</i>	: <i>Environmental Toxins Index</i> : <i>Infant Mortality Rate</i>	: <i>Diabetic Rate</i> : <i>Mean SAT Score</i>
<i>Subjective</i>	: <i>Index of Consumer Confidence</i> : <i>Percent agreeing that better off this year</i>	: <i>SWB</i> : <i>Percent Happy or very happy</i>

*Another distinction that warrants consideration in the combination of indicators is between indicators that cause or bring about a QOL result and those that indicate the result itself. For example, The percent expenditure (governmental) on basic social services is an in-put measure. The percent of children under 5 years who are malnourished is a status or out-put measure. In the literature examples, may be found wherein this distinction is not observed, and the in put measure is taken as an out put measure.*

-----Joe Sirgy 15/5/98

*We started out with the distinction between subjective and objective QOL (1st dimension). I added another dimension that I referred to as the unit (or level) of analysis. This dimension distinguishes among the different entities of interest--individuals, families, communities, specific groups, regions, countries, world. Mind you that these are orthogonal dimensions. In other words, within each level of analysis we have subjective and objective indicators of QOL.*

*Then Stanley Shapiro added another dimension which I referred to as industry or institutional focus. That is, many QOL researchers approach the subject matter from an industry or institutional focus. For example, many of us in marketing are interested in the effects of certain marketing variables (e.f., mass media advertising, marketing to increase consumption of consumer goods, telemarketing) on the QOL of individuals, communities, etc. This industry-institutional dimension has many categories and I identified so many in a previous message.*

*Now we add the Ferriss' endogenous versus exogenous dimension to make it a four-dimensional matrix. In other words, within each cell (e.g., subjective/individuals/marketing) we may have endogenous and exogenous QOL effects. For example, one can examine the effects of the rate of advertising (or changes in advertising expenditures) over time on the Index of Consumer Confidence. This is what Ferris refers to as an exogenous condition. However, if one examines the effects of the rate of advertising over time on individuals' subjective well being (again we are still in the subjective/individuals/marketing cell), we have an endogenous condition.*

*Abbott. In your note of May 13, 1998, you made another contribution, i.e., the added distinction between input versus output measures. My understanding of your explanation of the input-output measures seems to significantly overlap with Stanley Shapiro's industry/institutional focus. The industry/institutional focus seems to capture what I think you mean by "input." Can you clarify your thoughts on this?*

-----Abbott Ferriss 18/5/98

*The dichotomy is sometimes found in educational research. Inputs to the educational institution may be increase in teacher's salaries, expenditure for computers for student use, the high school GPA of students entering college, average SAT scores of entering*

*students, etc. (In Stan's terms, the industry is Education and the institution is the School or College.)*

*Outputs are measures of performance resulting from the educational process:-- measures of student learning, as measured by the National Assessment of Educational Progress, the Iowa or other tests. Subsequent life-time achievements of the graduates might also be considered an out put.*

*What usually is missing in educational studies is "Through-put" – what takes place in the school system and classroom to bring about learning.*

*Often measures of such activity are missing. Use of library resources might be an example. (Emory University built a new library addition to house computers for student use and other technologies that facilitate acquisition of information. An increase in student use of the library has been observed. The latter is a "Through-put" measure.)*

*Turning now to QOL considerations, in reading studies of developing nations I have found that the paucity of data has led researchers to employ in-put measures as indicators of QOL.*

*I have recently been examining a study of the climate for workers by state in the U.S. A composite measure of QoL consists of eight measures, among them, the following which I consider in-put measures: Environmental policy of the government, a state-by-state rating of the government's environmental policies; state government expenditures for a number of programs, including salaries of workers, etc.; state/local revenue contributions to elementary & secondary schools. and, sales tax receipts and individual income tax receipts as a percent of governmental tax revenue. Each of these may have some impact upon QoL, but they should not be used as QoL measures; rather, they should be considered independent variables with QoL as the dependent variable.*

*Sirgy's example of advertising/consumer confidence illustrates aptly: An increase in advertising expenditures( in-put) results in a change in the Index of Consumer Confidence (out-put), other-things-being-equal. Other examples of confusion of in-put and out-put measures may be found in "ZPG's Children's Environmental Index," The ZPG Reporter, 273, June 1995; Zero Population Growth, Washington, DC. I reviewed the index that ranks 207 U. S. cities in SINET 43, August 1995.*

*Referred to above: "The Climate for Workers in the United States, 1990" The Southern Labor Institute and the Southern Regional Council, Atlanta, GA.*

-----Richard Board 18/5/98

*In a balance sheet for an individual or business, proprietorship (P) equals the assets (A), less the liabilities (L). Therefore,  $P=A-L$ .*

*In the balance sheet of life, quality of life, QOL, or just (Q) for the convenience of formulation, equals living conditions (C), plus the human response to those conditions (R). Therefore  $Q = C+R$ .*

*The factors of in-put, and out-put are analogous to the in-put, and out-put of money into a commercial enterprise. The resultant changes of in-put and out-put are recorded in an income and expense statement, that is commonly referred to as the profit and loss or P&L statement. The P&L closes into the balance sheet. Likewise, the in-put and out-put in the flux of life, naturally close into, and modify QOL.*

*The correlation between in-put and out-put in a business allows for an assessment of the value of continued in-put. The adoption of that custom might be an assist in assessing social programs to monitor diminishing returns for such efforts as education, welfare, and health-care.*

*The contemplation of the methods by which these variables might be evaluated, empirically or otherwise, has been close to this discussion. If  $Q = C+R$  is not a theory for quality of life, it is a beginning.*

-----Ruut Veenhoven 20/5/98

*Recently I tried the 'input'-'output' scheme for ordering QOL-concepts. Following system-theory I added 'throughput'. Thus I distinguish three kinds of QOL-concepts: 1) Concepts that denote quality of the environment, such as wealth of the nation and safety in the streets. This is exogenous 'input' QOL. 2) Concepts that denote how well a person copes with this environment, f.e. physical performance status or psychological resilience. This endogenous 'throughput' QOL. 3) Concepts that describe the result of 1+2. At the level*

*of the person that is survival and happiness (long and happy living). This is endogenous 'output' QOL. At the level of society this is for instance what one leaves behind (f.e. contribution to human knowledge). That is exogenous output.*

*One of the advantages of ordering QOL-concepts in a system-theoretical scheme, is that the relationships of the good become more clear: output depends on input-throughput configuration. It also refrains us from adding apples and pears in a QOL-index. Further details can be found in Veenhoven (1998).*

## **8. A GRAND THEORY**

----- Cummins 2.5.98

*(To Richard) I am interested in your concern that we have no 'Generally accepted theory' of QOL. For a start, I have no idea what such an animal could possibly look like. As I gaze further into the construct from the vantage of my own discipline (psychology) I become more and more impressed at the relevance of so many different branches. This is*

exciting because I am starting to appreciate that understanding the construct is a very unifying process for much of psychology, if rather complex! But this is just from one discipline. When the other disciplinary approaches are added it is clearly such a vast enterprise that, for me, it is really not even worth considering at this stage. But this in no way detracts from the excitement of the chase, in trying to contribute understanding of the component parts which, at some future time, may form part of a grand whole. It is also my firm belief, as previously stated, that these building blocks will be formed from empirical research.

You also (27/4/98) state that “the use of "quality of life," to describe what might be measured as quality of life, is ambiguous. Quality of life must be identified before we can intelligently discuss its measurement.”

I do not agree with this at all. QOL, as some grand inclusive theory, does not need to be fully comprehended before we can investigate it empirically. The term is useful to the research enterprise as an indicator of researcher intention, that is they believe that their research bears upon the construct. Whether this is true or not cannot be evaluated at this time, but their contribution adds to the available information upon which we can all draw in developing our understanding of the construct. However, the more that we can specify an agreed, empirically based framework for QOL, within which researchers can direct their labors, the more likely is their research to have relevance to the developing construct.

In this regard, it is interesting to note that the statement “QOL can be measured objectively and subjectively” does not, I believe, actually provide any such guidance to researchers at all. What it does indicate is that, at this stage of our understanding, both objective and subjective data can be submitted to the grand jury in the sky for consideration as having relevance to the QOL construct.

-----Richard Board 25/5/98

*The State of California in-puts a billion dollars for a reading program. As a result as the state wide reading scores of first graders increases significantly. Is this a change in QOL?*

*Is it necessary for there to be an affirmative endogenous response, to the improved reading skills, on the part of the first graders or society in general, in order for the QOL to be effected?*

*Does a change in objective living conditions, without a corresponding change in subjective appreciation, constitute a change in QOL? Does a change in the Stock Market's average price per share automatically constitute a change in the quality of life?*

-----Joar Vitterso 25/5/98

*Richard asks: "The State of California in-puts a billion dollars for a reading program. As a result as the state wide reading scores of first graders increases significantly. Is this a change in QOL? "*

*In my opinion, this question points to the importance of separating objective and subjective QOL. In modernized countries, literacy is a highly valued skill. Thus, high literacy rates should be taken as an indicator of objective QOL in such countries, whether it enhances the subjective QOL of its members or not. However, the importance of literacy as an indicator of QOL might vary among societies. As pointed out by Bob and others, the standards of objective will depend (to some extent) on cultural norms. We have to live with such uncertainties, and accept that the decision of including or excluding indicators of objective QOL will remain elusive.*

----- Richard Board 4/5/98

*I am pleased that you have stated so emphatically that 'QOL' has no standard meaning whatsoever (see I.I, Cummins 2/5/98). QOL is a linguistic symbol as are the words "quality of life." They are supposed to be meaningful but they mean nothing. They are on the scrap heap of rejected language.*

*Please rephrase your premise. What is it that is relative to the human condition that is indispensable to the quality of life? What is it that without which, in the presence of humans, there is no quality of life? Put that into an affirmative statement and, to use your words, you will see what "such an animal," as a generally accepted theory, " could possibly look like."*

-----Bob Cummins 11/5/98

To Richard. My statement was that, within the literature " the simple term QOL has no standard meaning whatsoever." That, of course, is true. However, I then proceeded to indicate my belief that an empirical approach will gradually come to provide such a standard meaning and, indeed, that we had already commenced this process by accepting the statement 'QOL can be measured both subjectively and objectively'. The two paragraphs from my 2/5/98 email that conveyed this are as follows:

“We have isolated one dimension of this problem, in the subjective/objective dichotomy, and it highlights the imperative in our communications that we clearly specify our interpretation of the construct beyond the simple use of the term. This requires, in turn, a clear operationalization of QOL in the terms of some form of measurement.

The term (QOL) is useful to the research enterprise as an indicator of researcher intention, that is they believe that their research bears upon the construct. Whether this is true or not cannot be evaluated at this time, but their contribution adds to the available information upon which we can all draw in developing our understanding of the construct. However, the more that we can specify an agreed, empirically based



framework for QOL, within which researchers can direct their labors, the more likely is their research to have relevance to the developing construct.”

Thus, far from suggesting that the term QOL should be abandoned, it is my view that the term is very useful within the framework I have specified above.

You have also asked two questions as: "What is it that is relative to the human condition that is indispensable to the quality of life? What is it that without which, in the presence of humans, there is no quality of life? Put that into an affirmative statement and, to use your words, you will see what "such an animal," as a generally accepted theory, " could possibly look like."

I guess that the answer is 'life' (as opposed to death). But this does not seem to have helped me much in recognizing the animal 'QOL grand theory'.

----- Richard Board 12/5/98

*We seem to agree that "the simple term QOL has no standard meaning whatsoever." We seem to agree, also, that the word can and should be recycled. We have not yet agreed on what the symbol QOL, or the "phrase quality of life," should mean, however.*

*It seems to me that you have taken an important step toward a generally acceptable definition by identifying life as the sine qua non of the quality of life, QOL. We have already established the assumption that we will be talking of human life when we talk of life. Life and its counterpart, death, are fundamental qualities of the human condition. Does it not follow, therefore, that whatever else quality of life might imply, it implies the human condition?*

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