



# What Constitutes Well-being? Five Views Among Adult People from the Netherlands on what is Important for a Good Life

Willem van der Deijl<sup>1</sup> · Werner Brouwer<sup>2,3</sup> · Job van Exel<sup>2,3</sup>

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## Abstract

Well-being has gained interest as object of study in the social sciences and as an outcome measure for policy evaluation. However, little agreement exists with respect to the substantive meaning of well-being, the dimensions of well-being that should be considered in a multi-dimensional approach, and the variety of well-being conceptions people have for their own lives. This study explored conceptions of “a good life for you” among 1,477 adult people from the Netherlands by means of Q-methodology, based on a theoretical framework synthesizing the main theories of well-being. We find five distinct views on what people consider to be a good life for themselves: “Health and feeling well”, “Hearth and home”, “Freedom and autonomy”, “Social relations and purpose” and “Individualism and independence”. While there is strong agreement with respect to the importance of feeling both physically and mentally well, the views diverge considerably regarding aspects such as social relations, autonomy, spirituality, and material welfare. Associations between viewpoints and respondent characteristics had face validity. The findings of this study have significant implications for the development of measures of well-being and policies aimed to improve population well-being. Further research is required into the prevalence of these views on well-being in the population, their relation to respondent characteristics and into differences in views over time and between countries with different socio-economic, political and cultural environments.

**Keywords** Well-being · Capabilities · Subjective well-being · Life satisfaction · Q-methodology

## Introduction

More and more social scientists are committed to the view that it is important and worthwhile to measure well-being, and in an increasing number of countries policy makers have taken interest in well-being as measure for policy development and evaluation. Significant examples include former French President Nicolas Sarkozy, who installed the Commission on the Measurement of Economic Performance and Social Progress (Fitoussi et al., 2009), and former United Kingdom (UK) Prime Minister David Cameron, who launched an initiative to measure and promote national well-being in the UK (Matheson, 2011).

Nonetheless, well-being is a complex and controversial concept. Scientists and policy makers seem to agree that (national) income is not a satisfactory measure of well-being, but the debate about how we should conceptualize well-being for policy, if we are to go “beyond GDP” and consider broader social and environmental goals, is vivid and ongoing (e.g., Aitken, 2019; Anderson & Mossialos, 2019; Bleys, 2012; Bruni et al., 2008; Cook & Davíðsdóttir, 2021; Coscieme et al., 2020; Decancq & Schokkaert, 2013; Eckermann, 2018; Fleurbaey, 2009; Kalimeris et al., 2020; Saracino & O’Connor, 2022; Stiglitz et al., 2019; Van den Bergh, 2022; Van Hoorn et al., 2010). The COVID-19 pandemic, and particularly the trade-offs between the health and well-being of different groups in society that were necessary in developing and implementing measures to contain the spread of the virus, has brought the political and societal debate about “what matters” in life even more to the fore (Bloom et al., 2021; Contestabile, 2020; Deaton & Schreyer, 2022; WHO, 2021).

Two strands of literature have been particularly influential in this debate: the subjective well-being (SWB) -or happiness- approach (Easterlin, 1974, 1995; Veenhoven, 2004; Layard, 2005; Dolan et al., 2008; Nikolova and Graham, 2022) and the capability approach (e.g., Sen, 1985, 1992, 1999; 2009; Nussbaum, 2000, 2003, 2011; Robeyns, 2005, 2021; Deneulin & Shahani, 2009; Afentou & Kinghorn, 2020). The literature on SWB tends to consider people’s own evaluations of their life as good evidence for their well-being, but is divided on at least two aspects of measurement. Firstly, on whether such evaluations should be about direct experiences of ‘pleasure’ (Kahneman et al., 2004) or about cognitive evaluations of life as a whole (Binder, 2014). Secondly, whether well-being should be measured by a single unidimensional SWB measure (Veenhoven, 2004), or whether SWB is just one among several dimensions of well-being (Diener et al., 1985). The capability approach is more explicit in taking well-being to be inherently multi-dimensional, comprising functionings (i.e., doings and beings) and capabilities (i.e., real freedoms to such functionings that people have reason to value) (Sen, 1985; Nussbaum, 2011; Robeyns, 2016; 2020). However, authors within the capability approach are divided about two questions that are central to the formulation of a multi-dimensional measure of well-being: Firstly, which capabilities and functionings constitute well-being? Secondly, how should these different capabilities and functionings be weighed against each other? As a response to the first question, Amartya Sen maintains that the set of functionings should be determined by public deliberation, while Martha Nussbaum has argued for a specific list of capabilities. Considering the difficulty such proposals leave for answering the second question, some authors have used life-satisfaction

in developing capability-based well-being measures (Anand et al., 2009; cf. Richardson, 2015). Sen (1985, 2009) expressed scepticism about subjective approaches to identifying well-being but acknowledged the evidential value of well-deliberated views. Several other capability scholars have argued that empirical input on people's personal values can be valuable in this debate (e.g. Alkire, 2007; Van Ootegem & Spillemaeckers, 2010). Still, few have attempted to empirically investigate conceptions of well-being among the public. Some notable exceptions are Boulanger et al. (2009), Van Ootegem and Spillemaeckers (2010), Carr (2013), Tafaodi et al. (2012), Bonn and Tafarodi (2013) and Hackert et al. (2019), and in the context of poverty, Narayan et al. (2000), and Giacaman et al. (2007).

While these debates are ongoing, many policy institutions have opted for a multi-dimensional route to the measurement of well-being, with SWB as one of the dimensions (e.g., Fitoussi et al., 2009; Durand, 2015). Prominent examples include the UK well-being wheel of measures<sup>1</sup>, the Organisation for Economic Co-operation and Development (OECD) Better Life Index<sup>2</sup>, and the European Union Quality of Life Index.<sup>3</sup> Also, several recent studies have used multi-dimensional measures of well-being to investigate the effects of the COVID-19 pandemic on population well-being (White & Boor, 2020; Simon et al., 2021; Himmeler et al., 2023; Mitchell et al., 2023).

In this study, we aim to contribute to this literature by investigating the aspects of life that people believe to be constitutive to their well-being. More specifically, we will build on the concept of *personal well-being values* from Haybron and Tiberius (2015). Personal well-being values are people's evaluative attitudes about what is good for them. Values in this context differ from preferences in that they are considered to be more robust and more general.

Knowing people's personal well-being values can help to overcome some of the reasons behind the indeterminacy of the well-being constructs discussed above. One important reason for the controversy in selecting particular measures is the threat of paternalism when value-laden measures of well-being are used to guide policy. Sugden (2006; 2008) argued that regardless of how well-being constructs are developed, when they are used to guide policy, this necessarily comes with the risk of threatening the freedom and well-being of those who have a different view of what constitutes well-being than the view the applied measure represents. Haybron and Tiberius (2015) defend a view called *pragmatic subjectivism*, which holds that regardless of the policy maker's view on well-being, there are good reasons to base well-being policy on the personal well-being values that exist within the population. In other words, a measure of well-being that is used for policy should plausibly be rooted in the well-being values of the individuals it will affect, in order to have legitimacy. As Haybron and Tiberius write: "to promote well-being while respecting persons, we must promote well-being as people see it" (2015, 717). In order to ensure that measures are built on people's well-being values, we need to understand what people's well-being values are (Van Exel, 2017). Therefore, this paper aims to contribute to

<sup>1</sup> See: <https://www.ons.gov.uk/ons/rel/wellbeing/measuring-national-well-being/first-annual-report-on-measuring-national-well-being/rpt---national-well-being-wheel-of-measures.pdf>.

<sup>2</sup> See: <http://www.oecdbetterlifeindex.org>.

<sup>3</sup> See: [http://ec.europa.eu/eurostat/cache/infographs/qol/index\\_en.html](http://ec.europa.eu/eurostat/cache/infographs/qol/index_en.html).

this literature by exploring people's views on personal well-being values. This paper does not aim to develop a new well-being measure but, ideally, the different views in society on what is important for well-being identified in this study should be captured by well-being measures used for policy evaluation. The views identified in this study could, therefore, be used for evaluating the comprehensiveness of existing well-being measures or, if necessary, as building-blocks for developing alternative instruments.

Meanwhile, the normative framework we employ here is minimal. Considering that well-being is a complex value-laden concept, we neither take a stance on the nature of well-being nor on the correct way to measure it, beyond our commitment – in line with Haybron and Tiberius (2015) – that this should involve taking into account people's personal well-being values. Irrespective of the nature of well-being – be it values, informed-preferences, happiness or an objective list of goods – a better understanding of personal well-being values has significance (Haybron & Tiberius, 2015).

For our empirical investigation of personal well-being values we use Q-methodology, a mixed methods approach to study subjective phenomena in a systematic manner (Watts & Stenner, 2012; McKeown & Thomas, 2013; Brown, 1980). Q-methodology is particularly suited for the purpose of this study as it allows us to confront participants with a wide range of aspects that potentially are important to their well-being, to characterize their view on well-being by analysing their ranking of these aspects, and to identify communalities and differences in viewpoints among participants to identify the main views in the population on what constitutes well-being. Q-methodology has been used before to study a variety of subjective phenomena such as European identity (Robyn, 2004), definitions of love (Watts & Stenner, 2014), and public views on vaccination (Patty et al., 2017) and organ donation (Truijens and Van Exel, 2019). Q-methodology has also been suggested as an appropriate investigation tool in the context of deliberative democracy (Dryzek, 1990; Dryzek & Niemeyer, 2008), fitting particularly well with the democratic commitments within the capability approach. Reckers-Droog et al. (2020) is an example of an application of Q-methodology in the context of a citizens' panel on health-care decision-making. Furthermore, Brown (2006) has advocated the importance of Q-methodology in political spheres for its ability to help identify not only the population's opinions at large, but also the marginalized opinions. For similar reasons, Wolf (2013) has suggested that Q-methodology would be an excellent source of information to inform choices in quality of life measurement. The method has already been used to study conceptions of quality of life in the context of health (Stenner et al., 2003), as part of a study exploring democratically legitimate indicators of well-being in Belgium (Boulanger et al., 2011), in a study on well-being conceptions in Australia (Carr, 2013), and a study on views of older people on what constitutes well-being (Hackert et al., 2019).

The aim of this study is to explore the variety of conceptions of well-being among people from the Netherlands. The assumption we make is that people are reasonably good sources of information about their personal well-being values. That is, when confronted with a broad set of values that could plausibly constitute well-being, we assume that people are able to rank these values ordinally according to their importance for their personal well-being. The outcomes of this study will help identify the

relevant domains of well-being across the population, which may be useful to inform valid measurement of well-being for policy-making.

## Methods and Data

To investigate the variety of conceptions of well-being among citizens in the Netherlands, we developed a set of verbal statements representing potential constituents of well-being. For the purpose of our research interest, we wanted people to reflect on the statements from the perspective of a life that they believed to be good in terms of well-being. We believed it was more natural for people to do this when they were asked to reflect on what constitutes a good life for them, rather than to ask them about what they held to be personal well-being values directly. Therefore, we asked respondents to rank the statements according to their importance for “a good life for you”, using a forced sorting grid with labels “least important” on the left and “most important” on the right (see Fig. 1). Because well-being values are attitudes of individuals towards what is a good life for them, this shift in wording does not appear to make a substantive semantic difference.

In order to identify a set that is broadly representative of all values that citizens could find important for their personal well-being, we constructed a taxonomy of different theories and lists of multi-dimensional well-being originating from different literatures (see Table 1), namely: the capability approach (Robeyns and van der Veen, 2007; Nussbaum, 2000; Qizilbash, 1998); policy research of governmental organizations (Durand, 2015; Fitoussi et al., 2009); and general social indicator studies (Narayan et al., 2000; Ranis et al., 2006; Cummins, 1996). An important source in this process was Alkire (2002), who observed that there is remarkable convergence between the many multi-dimensional well-being lists proposed in the literature.

Across the retrieved lists, we identified 11 distinct domains of well-being to be covered in our set of statements.<sup>4</sup> The identification of these domains was based on a judgment of how the different lists would fit most parsimoniously within the chosen domains. Next, a set of 36 statements was developed that we judged to be representative of the range of topics covered by the different lists across the 11 domains, phrased at a comparable level of generality. An initial set of 27 statements was developed by the first author. In consecutive rounds of discussion with the co-authors, the statements were evaluated for representing each of the topics in the taxonomy sufficiently and the whole of the taxonomy comprehensively, while at the same time manageable and comprehensible for use in the general public. This process resulted in a final set of 36 statements (see Table 2). The statements were all phrased consistent to a good life to facilitate ranking on the “least important” to “most important” scale presented to respondents (see Fig. 1). A pilot test among 100 respondents showed no further

<sup>4</sup>SWB (or happiness) itself is not part of this list because it is a concept of a higher level of abstraction than the dimensions included in the taxonomy. For the purpose of this study, all statements should be of roughly the same level of abstraction. SWB, however, still is an important feature of a good life and compatible with our framework in two ways. Firstly, SWB as subjective evaluation of life could be interpreted as being a person’s evaluation of the identified dimensions. Secondly, SWB as an experience is roughly captured with the dimension of mental well-being.

changes were required to the content or wording of the statements. The statements were developed in Dutch and translated into English by the authors for presentation purposes (see Appendix 1 for statements in both languages according to domains theoretical framework). A number between 1 and 36 was randomly assigned to each statement for purpose of identification during data collection.

## Data Collection

The study was administered online by research institute CentERdata<sup>5</sup> and completed in 2013, using software specifically developed for the purpose of this study. People who signed up for their panel were invited to participate, quota-sampled to be representative of the adult population of the Netherlands in terms of age, sex and level of education. Selected panel members received an invitation to participate in the study that contained brief information about the purpose of the study, the content of the questionnaire and the handling of the data. By accepting the invitation, they provided consent for the use of the information they provided for the purposes of this study. Respondents received no incentive and were free to terminate their participation at any point during the study. The data from respondents who stopped before the end of the statement ranking exercise were disregarded. This study was approved by the Research Ethics Review Committee of Erasmus School of Health Policy & Management (ETH2122-0070).

Respondents completed the study individually. They were asked to read all the statements, which were presented to them in random order, and, in the process of reading, to place each statement into one of three piles: “unimportant for a good life for you”, “neutral” or “important for a good life for you”. Then, they were asked to re-read the statements they had placed in the pile “important”, select the two statements that they considered most important for “a good life for you”, and place these statements in column 9 of the grid (see Fig. 1). Respondents were instructed that the order in which statements were placed top-to-bottom within a column was not important. Next, they were asked to select the three most important statements from the remaining statements in the pile, and to place them in column 8; and so on, until all statements in the pile were placed on the grid. This process was repeated for the statements in the pile “unimportant”, starting with placing the two least important statements for “a good life for you” in column 1 of the grid. Finally, the statements in the pile “neutral” were placed in the remaining spots in the middle of the grid. After finishing, they were asked to verify their ranking of the statements on the grid and to make any changes if they felt this was necessary. Next, respondents were asked to provide a written explanation for each of the four statements placed in the extreme left and right columns of the grid, on why these statements were the least/most important for a good life for them, and we asked them to briefly describe in their own words what they considered to be a good life, using an open text field. Finally, respondents completed several questions about demographic characteristics.

<sup>5</sup> See: <https://www.centerdata.nl/en/over-ons>.

**Table 1** Taxonomy of different lists categorized into 11 domains

Domain <sup>a</sup>	Theories <sup>b</sup>							
	Capability approach		Human development and social indicator research					
	Robeyns & van der Veen (2007)	Nussbaum (2000)	Qizilbash (1998)	Stiglitz et al. (2009)	OECD (2013)	Narayan et al. (2000)	Cummins (1996)	Ranis et al. (2006)
Achievements			Self-respect and aspiration / achievements	Education (2: in terms of achievement)	Education (2: in terms of achievement)		Productivity	
Environmental conditions	Shelter/ mobility/ living-environment	Control over one's environment (material), other species	Shelter	Environmental conditions / economic insecurity	Housing / quality of the natural environment			Environmental conditions
Labour conditions	Labour				Availability and quality of jobs			Work conditions
Material well-being		Control over one's environment (material)			Income and wealth	Material well-being	Material well-being	Economic security
Mental development	Knowledge and intellectual development	Practical reason / senses, imagination and thought (2: instrumental)	Basic intellectual and physical capacities and literacy self-determination / understanding	Education (1: instrumental)	Education (1: instrumental)	Freedom of choice and action		Empowerment / mental development
Mental health	Mental health	Emotions / senses, imagination and thought (1: intrinsic)	Enjoyment (2)	Health	Mental health and subjective well-being	Psychological well-being	Emotional well-being	Mental well-being
Physical health	Physical health	Bodily health	Nutrition, health, sanitation, rest	Health	Physical health	Bodily health	Health	Bodily well-being
Political representation	Political influence and participation and freedom from non-discrimination	Control over one's environment (political)	Liberty (negative freedom)	Political voice and governance	Civic engagement and good governance			Political freedom / political security (2)

Table 1 (continued)

Domain <sup>a</sup>	Theories <sup>b</sup>							
	Capability approach		Human development and social indicator research					
Recreation and leisure	Robeyns & van der Veen (2007)	Nussbaum (2000)	Qizilbash (1998)	Stiglitz et al. (2009)	OECD (2013)	Narayan et al. (2000)	Cummins (1996)	Ranis et al. (2006)
Safety	Recreation	Play	Enjoyment (1)	Personal activities	Work-life balance	Security	Safety	Leisure conditions
Social relations	Security	Bodily integrity	Security	Personal insecurity	Secure environment	Intimacy and friendship / community	Political security (1)	Social relations / community well-being
Omitted <sup>c</sup>	Social relations	Affiliation	Significant relations with others and some participation in social life	Social connections	Social connections	well-being	community	Inequalities
	Care							

Notes: <sup>a</sup> In alphabetical order. <sup>b</sup> Bracketed numbers indicate that the specific category fitted in more than one domain. <sup>c</sup> Two categories from the retrieved lists were omitted from the final taxonomy, namely care and inequality, on the grounds that both were included in only one of the lists and were not considered to be an essential constituent of personal well-being



**Table 2** Statement scores for the five viewpoints on a good life

Nr.	Statement	Health and feeling well	Hearth and home	Freedom and autonomy	Social relations and purpose	Individualism and independence
1	Being able to meet my material needs	5	9	3	2	8
2	Living according to my own values	7	8	8	2	8
3	Having a good income relative to my social environment	2	6	1	3	8
4	Being in a stable environment with little risk of dramatic events in my personal life	4	5	4	1	1
5	Being knowledgeable with respect to the things that I find important	4	6	5	4	6
6	Feeling at home in the environment where I live	8	9	6	5	4
7	Feeling represented in political decision making that affects my daily life	2	3	4	4	5
8	Living in an environment with sufficient open and natural spaces	5	8	4	4	3
9	Having a meaningful daily activity (work or other)	6	7	7	8	5
10	Having friends and meeting them regularly	6	7	7	9	5
11	Voting in elections	3	4	5	3	5
12	Living in an environment with facilities that are important to me (e.g. libraries, cinemas, nightlife, museums)	2	5	3	5	6
13	Feeling mentally well	9	7	6	6	4
14	Being part of a community or group in which members support one another	3	5	6	8	1
15	Being able to form an opinion about the things that I find important.	5	6	8	4	7
16	Having a healthy lifestyle	6	6	3	5	3
17	Absence of stress and anxiety	6	7	4	5	2
18	The prospect of many healthy years ahead	9	6	2	5	4
19	Living a spiritual life	1	1	4	7	2
20	Having accomplished something – or accomplishing something – I am proud of	4	5	5	8	7
21	Going on vacation	4	4	1	6	9
22	Being in an environment where opinions can be freely expressed	5	5	7	3	5
23	Having a nice romantic relationship	5	3	2	9	7
24	Being in an environment with little risk of natural disaster or social unrest	5	8	2	1	2
25	Feeling physically well	8	5	5	6	4

Table 2 (continued)

Nr.	Statement	Health and feeling well	Hearth and home	Freedom and autonomy	Social relations and purpose	Individualism and independence
26	Having a good relationship with my family	6	5	6	7	3
27	Being part of political decision making that affects my daily life	1	2	3	5	5
28	Being free to go where I want to be	7	4	8	2	6
29	Contributing something to society	3	4	7	7	3
30	Feeling at ease in the house where I live in	7	5	6	4	5
31	Being appreciated by my social environment	4	3	5	7	6
32	Spending time on leisure	5	1	5	6	6
33	Being able to make my own choices in life	7	2	9	3	9
34	Being in an environment where everyone's values are respected	5	4	9	5	4
35	Being educated in a way that suits me	3	3	5	6	7
36	Being physically able to do my daily activities	8	2	5	5	5

Note: characterizing statements for each factor are shaded in grey



For factor rotation, we used quartimax because the unrotated factor solution showed that the first principal component captured a substantial proportion of the explained variance (62.0% of total vs. 7.8–11.0% for the other four factors). Such a general factor, as it is called, indicates widely shared agreement among respondents in our study on conceptions of a good life, which we believe constitutes a proper empirical result. Akhtar-Danesh (2017) argues more broadly in favour of using quartimax in Q-methodology.

The rank scores for the statements on each factor were computed as simple loadings-weighted averages of the raw statement rankings provided by respondents; a procedure known as regression scores. For each factor, the statements were then allocated to the sorting grid according to their factor scores. These factor arrays are central in the interpretation of the factors. In addition, the explanations provided by respondents statistically significantly associated with a factor for their ranking of the statements were used to verify and refine the interpretation of the factors; considering the number of statements and a p-value of 0.05, the threshold factor loading for statistically significant correlation was 0.33. In this way, the quantitative data from the factor analysis of the statement rankings and the qualitative data from respondents associated with the factors explaining their statement ranking is combined to provide a comprehensive interpretation and description of each factor as a distinct viewpoint on what constitutes well-being.

In the description of the viewpoints in the [results](#) section, we will refer to the placement of the statements in the factor array as, for example, “(st.17, 9)”, meaning that statement 17 had a rank score 9 in that factor. In addition, for illustration purposes, we will use some citations from the explanations given by respondents associated with the factor to support and illustrate the interpretation. As much as possible we used literal translations from the original Dutch explanations, but some were slightly edited for legibility. Citations are accompanied by the respondent’s identification number.

We use the checklist for reporting a Q-methodology study proposed by Dieteren et al. (2023) to ensure we describe all choices in study design, data collection, data analysis and reporting of the results.

Finally, two follow-up analyses were conducted using data respondents provided after completing their ranking of the statements and providing their explanation for the ranking. First, we conducted a systematic analysis of how respondents described their view on well-being in their own words. We selected a number of words for each viewpoint from the descriptions of respondents associated with that viewpoint on conceptual grounds (i.e., related semantically to the viewpoint). Then, we counted the frequency of their usage across all respondents and compared the usage of the words that related to a particular viewpoint between respondents statistically significantly associated with that viewpoint and the sample average. Secondly, we investigated the relations between the viewpoints and demographic characteristics of respondents.

## Results

Our initial sample included 1,503 respondents from the adult population of the Netherlands. They generally found the questionnaire to be feasible (52.7% indicated 'not' or 'not at all' on a 5-point scale for difficulty), comprehensible (73.4% indicated 'yes' or 'definitely yes' on a 5-point scale for clarity), interesting (62.8% indicated 'yes' or 'definitely yes' on a 5-point scale for interesting) and enjoyable (58.5% indicated 'yes' or 'definitely yes' on a 5-point scale for enjoyable).

We observed that 118 respondents (7.9%) had a missing value in the ranking of the 36 statements. For 90 respondents with one or two missing values and two respondents with four missing values, we were able to impute the missing statement scores based on highly correlated statement rankings of other respondents. After exclusion of 26 respondents for whom missing statements could not be imputed reliably, 1,477 respondents remained for further analysis.

The average age of these respondents was 54.7 years, 54.9% was male and 44.1% had completed higher vocational or university level education, meaning that the respondents were older, and more often male and higher educated than the reference population.<sup>6</sup> Mean net household income was €2,765 and mean health was 8.2 (see Table 3).

The first of the five viewpoints in the adult population of the Netherlands on what constitutes well-being captured a large share of the variance and 1,239 (83.9%) respondents were statistically significantly associated with this viewpoint, of whom 99.7% positively ( $p < .05$ ; corresponding to a factor loading  $> 0.33$ ). Therefore, this viewpoint seems to represent a broader consensus view in the adult population of the Netherlands on what people perceive to be important for their well-being. The four other viewpoints that were identified had considerably fewer associated respondents (i.e., 15.0%, 13.5%, 11.2% and 9.0%, respectively) and seem to represent different clusters of aspects important to well-being, mostly in addition to those identified by the first viewpoint. It is important to note that the respondents associated with these four factors were more evenly divided over positive and negative correlations, meaning that there was significant bi-polarity on these viewpoints. A total of 851 respondents (57.6%) correlated statistically significantly with one of the five viewpoints (of whom 741 (87.1%) with viewpoint 1), 466 respondents (31.6%) with two viewpoints (with positive associations with viewpoints 1 and 2 ( $n=100$ ) or viewpoints 1 and 3 ( $n=90$ ) as most frequent combinations), 54 respondents (3.7%) with three viewpoints and 3 respondents (0.2%) with four viewpoints, while 103 respondents (7.0%) were not associated with any of the five factors. The finding that the most frequent combinations include viewpoint 1 supports the interpretation that this concerns a more broadly held viewpoint in the population, complemented with aspects identified in other viewpoints. Table 2 shows the factor arrays.

<sup>6</sup> Reference values for population 20 years and older: mean age was 50.1, 50.1% was female and 28.2% had completed higher vocational or university level education (based on data from Central Bureau of Statistics for year of data collection, <https://opendata.cbs.nl/>).

## Viewpoint 1

Central in this viewpoint of what constitutes a good life is the importance of health and feeling well. Feeling mentally well (st.13, 9) is centrally important and is motivated by its intrinsic value, but also for enabling the value of all the other important things. A respondent loading on this factor explained: “*If you are not feeling well, it feels as if all the other aspects in life are not worth it. You will not be able to enjoy anything*” (id. 595). Regarding health, longevity (st.18, 9), feeling healthy (st.25, 8) as well as physical ability (st.36, 8) are considered important. Similarly, many cite the intrinsic value of health as one of the main reasons why they consider it so important: “*Health is the most important thing there is!*” (id. 228). At the same time, a respondent wrote “*I want to stay independent of others*” as a motivation for the importance of health, which resonated among several other respondents as well. Lastly, homeliness is also considered an important aspect of well-being in this viewpoint (st.6, 8; st.30, 7): “*Because this is your basis. If you do not feel comfortable here, how can you feel comfortable anywhere?*” (id. 44).

Statements about political participation (st.27, 1; st.7, 2 & st.11, 3), spirituality (st.19, 1), relative income compared to others (st.3, 2) and having cultural facilities close by (st.12, 2) were considered least important to well-being in this view. About the latter, a respondent loading on this factor explained that “*If this is a little further away, I can always travel to get there*” (id. 1,483). About income relative to others, a respondent loading on this factor eloquently wrote: “*a rich man is not happier than someone who knows he has enough*” (id. 29).

Overall, it is basic immaterial personal goods that matter to well-being in this general viewpoint, much more than material. Hence, viewpoint 1 was labelled “Feeling physically and mentally well”.

## Viewpoint 2

In this view, feeling at home, and having open spaces and feeling safe in the environment where they live are most important for a good life (st.6, 9, st.8, 8, st.24, 8). A respondent loading on this factor explained that “*This brings peace and solidarity. I like greeting people and having acquaintances in the neighbourhood*” (id. 955). Furthermore, being able to meet material needs (st.1, 9) and living according to own values (st.2, 8) is considered important, related to the desire to be independent of others for meeting personal needs: “*being dependent of others for elementary things seems terrible to me*” (id. 1,355). Furthermore, having friends (st.10, 7), having a meaningful daily activity (st.9, 7), and feeling mentally well (st.13, 7) were considered important.

Overall, this view represents a homely take on well-being that is characterized by a regard for one’s living place, quality of one’s social and physical environment, and being able to meet one’s own needs. A respondent loading on this factor put it as follows: “[well-being is] *living in a nice and safe environment, among people you know and trust, where helping each other if necessary is the norm*” (id.1265). Therefore, viewpoint 2 was labelled “Hearth and home”.

### Viewpoint 3

This view values statements that are strongly related to individual freedom and personal autonomy. Particularly valued for a good life are making one's own choices (st.33, 9), respect for everyone's values (st.34, 9), being able and free to form opinions (st.15, 8; st.22, 7), living according to your own values (st.2, 8), and being free to go wherever you want to go (st.28, 8). The respect for everyone's values was explained by a respondent loading on this factor as follows: "*Not everyone needs to have the same values and norms, if we just accept this and do not try to impose anything on each other*" (id. 474). Another respondent loading on this factor put the relationship between autonomy and a good life quite strongly: "*This is, to me, the essence of life: taking responsibility for my own choices and being mentally able to make these choices*" (id. 1,452).

The core of this viW is captured well by explanations like "*Living in freedom, surrounded by people who respect each other*" (id. 234) and "*Living in freedom in a country that has freedom of speech, but where people nevertheless respect one another*" (id. 295). Therefore, viewpoint 3 was labelled "Freedom and autonomy".

### Viewpoint 4

Social relationships and having a sense of purpose are essential to this view on what constitutes a good life. Friendship (st.10, 9), a romantic relationship (st.23, 9) and the community (st.14, 8) are highly valued, as are family relations (st.26, 7) and being appreciated by your social environment (st.31, 7). A respondent loading on this factor explained that: "*a good life means at least that you are surrounded by people with whom you can share life, for better or worse, and whom you can trust*" (id. 1,174). Another respondent loading on this factor explained her choice for ranking friendship highly: "*For me, this social aspect is simply the most important part of a good life*" (id. 1,325). Accomplishment (st.20, 8), a meaningful daily activity (st.9, 8), and contributing to society (st.29, 7) also matter to this viewpoint: "*I need a purpose in life to strive for*" (id. 937) and "*I want to feel useful*" (id. 943).

The importance of family, friends and contributing to a community was summarized well by one of the respondents loading on this factor: "*For me a good life is giving and receiving love, participating in society, space for relaxation, doing things that you find fulfilling and enjoyable.*" (id. 995). Hence, this viewpoint was labelled "Social relationships and purpose".

### Viewpoint 5

This view values being independent of others in terms of being able to make your own choices in life and living according to your own values (st.33, 9, st.2, 8). A respondent loading on this factor explained: "*I want to do things my way. Make my own choices, go my own way, and arrange my life according to my own needs*" (id.344). Different from the other views, and in particular from the "Freedom and Autonomy" view, this viewpoint is also characterized by a high regard for accomplishment (st.20, 7) and materialism, as a means to meet material needs (st.1, 8), to be better off than others

(st.3, 8) and to spend on leisure, like going on vacation (st.21, 9). One respondent loading on this factor explained: “*I want to work hard and be compensated materially, so I can fulfil my desires in life*” (id. 1,065), while others indicated they saw well-being as “*being healthy, having many friends, and making lots of money*” (id. 855) or simply stated they wanted “*to be free*” (id. 60). Another important difference with the “Freedom and Autonomy” view is the stark notion of individualism. Some importance is attached to having a romantic relationship (s.23, 7) and being appreciated by others (st.31, 6), but much less to having to a good relationship with their family (st.26, 3). Furthermore, community and contributing to society were ranked among the least important aspects of well-being in this view (st.14, 1, st.29, 3).

Overall, this viewpoint describes a perspective on well-being in which striving for individual goals and a better-off position in society is most important, to not be restricted in terms of material means or by others in fulfilling personal desires. Therefore, viewpoint 5 was labelled “Individualism and independence”.

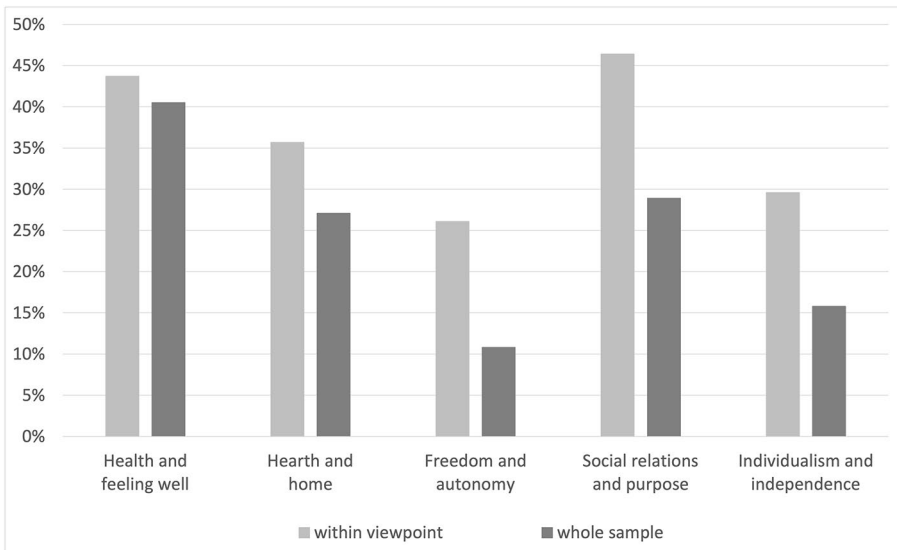
### Descriptions of a Good Life

Analysis of how respondents described their view on well-being in their own words showed that many respondents –also those who scored highly on viewpoints 2 to 5– used fairly generic terms such as health, family, and happiness. However, it also revealed some remarkable differences in words used to describe well-being between respondents associated with the different viewpoints (see Fig. 2). This difference was most striking for the “Freedom and autonomy” view. Respondents loading on this factor were more than two times more likely to use the words ‘free’, ‘freedom’, ‘choose’ or ‘responsibility’ in describing their view on well-being than the sample average. The difference in words used by respondents associated with the “Feeling well and being healthy” view and the whole sample was almost negligible, highlighting that this view captures a broad consensus view on what people perceive to be important for their well-being.

### Demographic Characteristics and Viewpoints

There were some notable differences in demographic characteristics between respondents loading on the five viewpoints (Table 3). Respondents loading on the “Health and feeling well” viewpoint were very similar to the total sample, which is to be expected given the large proportion of respondents statistically significantly associated with this view. Respondents loading on the “Hearth and home” view were more often female and older, and had the lowest mean income (although this was not statistically significant). Respondents loading on the “Freedom and autonomy” view were more often female and higher educated, those loading on the “Social relationships and purpose” view were more often higher educated, and those loading on the “Individualism and independence” view were younger, more often higher educated, and had a higher income. Given that this latter view was the only that valued relative income, these results suggest that such a valuation may not be merely aspirational.





**Fig. 2** Keywords used in descriptions of a good life<sup>8</sup>

<sup>8</sup> The keywords selected to cohere conceptually with the five viewpoints, were the following: health, happiness (for viewpoint 1); house, home, family (nuclear, in Dutch: “gezin”), environment, location, harmony, nature (for viewpoint 2); free, freedom, choose, responsibility (for viewpoint 3); people, other(s), social, friends, cosy / conviviality (in Dutch: “gezellig”, “gezelligheid”) (for viewpoint 4); independent, own, self (for viewpoint 5)

## Discussion

In this study we found evidence for plurality in views on well-being among the adult population in the Netherlands. More specifically, we identified five distinct viewpoints on what constitutes a good life: “Health and feeling well”, “Hearth and home”, “Freedom and autonomy”, “Social relations and purpose” and “Individualism and independence”. The viewpoint “Health and feeling well”, which sees physical and mental health as central to a good life, was supported by 84% of the sample and contributed 62% of total explained variance and, therefore, seems to represent a wide consensus view on what is important for well-being. This seems to be a fairly conventional and straightforward conception of well-being, giving our findings some face validity. At the same time, the four additional viewpoints on well-being show there is considerable difference in how people perceive well-being. Each of these factors highlighted different, additional aspects from the taxonomy (see Table 1), were supported by between 9% and 15% of respondents and contributed between 8% and 11% of total to explained variance.

In other words, even though a clear common picture arises, we must conclude that there is considerable heterogeneity in people’s personal well-being values. It is relevant to note that none of the respondents was perfectly correlated with a single one of the views, and that many respondents were statistically significantly associated with more than one view. Thus, individual perceptions of well-being are likely to be

**Table 3** Relations between viewpoints and demographic characteristics

	Health and feeling well		Heath and home		Freedom and autonomy		Social relations and purpose		Individualism and independence		Total sample	
	Mean	S.D.	Mean	S.D.	Mean	S.D.	Mean	S.D.	Mean	S.D.	Mean	S.D.
Age	53.5	15.9	63.4*	15.7	53.5	16.0	50.3	16.3	46.5**	16.9	54.7	16.1
Sex (% male)	52.3	50.0	42.9*	49.8	43.2*	49.8	50.0	50.9	63.0	49.2	54.9	49.8
Higher educated (%)	42.4	49.5	40.0	49.3	65.9*	47.7	67.9**	47.6	70.4**	46.5	44.2	49.7
Net household income	2,815	1,532	2,638	1,446	2,917	1,571	2,955	2,021	3,505**	2,138	2,765	1,459
Health (0–10)	8.3	1.3	8.4	1.1	8.3	1.3	8.4	1.0	8.0	1.7	8.2	1.4

Note: \*  $p < .05$ ; \*\*  $p < .01$

made up of a mix of the five views identified in this study, with the first viewpoint as a prominent part of this mix for most people. As such, these five distinct views and their defining characteristics together present useful information for measurement of well-being and for policy based on well-being.

A few findings deserve further discussion. The five views together explained 47.6% of the variance in the rankings of statements. Although this is a common proportion of variance explained in Q-methodology studies (Dieteren et al., 2022), a considerable part of the variance is left unexplained. This may concern individual idiosyncrasies but could also indicate that the 36 statements we presented to respondents provided insufficient degrees of freedom to capture more marginalized viewpoints. However, the explanations by respondents of their ranking of the statements and the descriptions of well-being they provided in their own words gave no strong indication this was the case. In addition, 93% of the sample was statistically significantly associated with one (or more) of the five viewpoints.

Furthermore, we found strong consensus with respect to some features that were *not* considered very important for a good life by the adult population of the Netherlands, as for example political participation and representation. This finding may seem surprising, but it aligns closely with previous empirical work on well-being conceptions in developed countries (e.g. Van Ootegem & Spillemaeckers, 2010). There are several possible explanations for this finding. Firstly, it could be that people have such bad connotations with politics that they rank it low even though on further reflection they would contend that it is an important part of their well-being. From the written comments we learned that at least some respondents say that it is important, but simply not so important for their well-being. A second interpretation is that political participation does not matter greatly for well-being. Political governance is surely a major causal factor in creating freedom and opportunities within a country, but perhaps not in itself an intrinsic part of well-being until it goes awry and does become a source of concern. Interestingly, a study into the quality of life in the Palestine territories (Giacaman et al., 2007) found political representation to be one of the central well-being values. In this vein, another possible interpretation is that political representation may be an important part of well-being but something that people stop appreciating explicitly as soon as they feel it is satisfactorily achieved or secured. Finally, this finding may also relate to the phrasing of the statements and the scale presented to respondents for ranking the statements. For instance, the findings for the aspect political participation and representation, but also for other aspects of well-being, might have been different if we had phrased some of the statements in a way that could be taken to be contrary to a good life (at least by some respondents) and a scale ranging from “most unimportant” to “most important” to a good life for you. However, we chose to phrase all aspects as consistent to a good life because we anticipated this would be more natural to respondents in this context. After all, the statements were based on a taxonomy of aspects that contribute to well-being (see Table 1). Consequently, we envisaged that all the aspects would be considered important to their well-being by respondents at least to some extent. Therefore, we presented respondents with a ranking scale that ranged from “least important” to “most important” (see Fig. 1). In addition, we considered it important to prevent possible ‘double negatives’ (i.e., respondents having to rank a statement phrased contrary to

a good life as unimportant to their well-being) because this is typically complex for respondents and perhaps even more problematic in an online data collection. Regardless of the correct interpretation, the finding that political participation and representation were not considered very important to well-being seems significant and deserves further study, also in view of declining political participation (e.g., voting, (active) party membership) and considerable volatility in voting behaviour in recent elections in the Netherlands. This is one of the aspects where in person interviews with respondents could have provided valuable insights, as it allows inviting respondents to expand on their explanations, Conversely, is a limitation for Q-methodology studies conducted online.

Secondly, from the pilot testing of the research instrument and the rich qualitative information collected through the questionnaire we have no reason to believe that important constituents of a good life were missing from the set of 36 statements. Nevertheless, a larger number of statements at a lower level of abstraction might have given room for identification of more specific or marginalized views on well-being in the Netherlands, but would also have been cognitively more demanding for respondents and less suited for online administration. Thirdly, from the demographic characteristics of the respondents we know that people of different age, sex, level of education, income and health status were included in our sample (see Table 3). This varied composition of the sample supports the representativeness of the five views that were identified in this study for those to be found in the Netherlands. Although it may be difficult to generalize findings about personal well-being values to other countries (e.g., Headey et al., 2022), it seems more likely that similar views would be found in countries that have comparable socio-economic, cultural and political characteristics. In such countries, the set of 36 statements used here may also be sufficiently comprehensive. Nevertheless, it would be interesting to explore the comprehensiveness of the statement set in countries both with similar and different socio-economic, cultural and political characteristics, and to replicate this study in order to see how views on well-being vary within and across different countries.

Finally, studies using Q-methodology commonly rely on a purposively selected group of 30 to 50 respondents (Sneegas et al., 2021; Dieteren et al., 2023), which fits the requirements of the technique (Watts & Stenner, 2012). For this study, we recruited a substantially larger sample aimed to be representative of the adult population of the Netherlands in terms of age, sex and level of education (for follow-up analyses, not reported here). We found that the respondents included in this study were older and more often male and higher educated than the reference population. However, this is not considered to be a problem. As mentioned, Q-methodology studies generally rely on purposive sampling of a varied group of respondents to improve the odds that the main viewpoints on the topic in the reference population are captured (Watts & Stenner, 2012). This study included a varied sample of the adult population in the Netherlands in terms of age, sex, level of education, income and health status and, therefore, we expect that the five views on well-being identified in the analysis will be representative of those to be found among the reference population. Although associations between these viewpoints and demographic characteristics of respondents must be considered with some caution, they appear to have face validity. Older respondents more often loaded on the “Hearth and home” view

and less often on the “Individualism and independence” view. Female respondents more often loaded on the “Hearth and home” and “Freedom and autonomy” views. Higher educated respondents more often loaded on the “Freedom and autonomy”, “Social relationships and purpose” and “Individualism and independence” views, while respondents with a higher income also more often loaded on the “Individualism and independence” view. Health was not associated with any of the viewpoints, which may be related to health being at the core of the “Health and feeling well” view that was supported by most respondents.

Reflecting on this substantive contribution, a few comments can be made. Both the happiness and the capability approaches have been explicitly motivated from dissatisfaction with material measures of well-being (Sen, 1985; Veenhoven, 1996; see also Fleurbaey, 2009).<sup>7</sup> We find that material well-being does not seem to play a very central role in our sample; material goods came forward as important to well-being only in the “Individualism and independence” view, both in absolute and relative terms. On the one hand, this low importance attached to material goods can be taken as an indication that material measures of well-being overemphasize the material aspects of well-being. On the other hand, defenders of material measures may cite the instrumental value that income and wealth have. In this vein, some of the written comments indicate that it is not necessarily having sufficient income or being rich that is valued, but rather the independence and dignity material wealth provides alongside the enjoyable opportunities for leisure that come with it (such as vacations). Hence, material measures could be a good proxy of well-being in virtue of these features. Still, the low appreciation of material well-being in absolute and relative terms we observe in most of the views justifies the questioning of this framework, at least in the Netherlands. The responses may also highlight the importance of the distinction between “being well off” and “being well” stressed by Sen (1985). In analogy with political participation and representation, threshold levels and adaptation may play a role here as well. In countries where the level or distribution of material wealth is more a matter of individual or social concern than in the Netherlands, material aspects may be valued higher.

We believe our findings have some significant implications for the conceptualization and development of measures of well-being. The heterogeneity of personal well-being values challenges the idea that there will be wide consensus about one uniform list of goods that constitute well-being, as different aspects matter to different people, and to a different extent (e.g., Al-Ajlani et al., 2020). Nonetheless, our study shows some clear insights for the direction public deliberation about such a list may take, and that Q-methodology may be a helpful method in such processes. In considering the validity of SWB measures of well-being, we find that individuals value a variety of goods besides feeling mentally well, which may suggest that purely affective measures may not capture everything that people value adequately or sufficiently. Nonetheless, feeling well was one of the central aspects to the main viewpoint on well-being identified in this study. Finally, threshold levels and adaptation may play a role in the relative importance of some aspects to well-being, like income, political

<sup>7</sup> This is of course not to say that they would not see income as an important causal factor in explaining human well-being (see: Sen, 1985; Hagerty & Veenhoven, 2003; Veenhoven & Hagerty, 2006).

participation and spirituality. This means that people may only value these aspects as important for their well-being when subsistence or aspiration levels for these goods are not (or no longer) met. It would, therefore, be interesting to replicate this study in countries that differ from the Netherlands in terms of the level and distribution of wealth and their political and religious environment and freedoms (or in the Netherlands, if over time significant changes occur in these areas). Further study is also necessary regarding how to deal with this heterogeneity in well-being in relation to policy aimed at improving well-being.

Concluding, this study shows that views on well-being differ across the adult population in the Netherlands, but that for most people physical and mental health are central to conceptions of a good life for them. There were no clear indications that we missed important constituents of a good life or views on well-being at the time of this study in the Netherlands, but this may not hold over time. Different constituents of a good life and views on well-being may also be found in other countries, especially if the socio-economic, political or cultural environment is sufficiently different. Still, we believe the findings of this study have significant implications for the measurement of well-being as well as for policy based on well-being. Most importantly, researchers intending to develop a measure of well-being for informing policy and policy makers aiming to develop policies to improve population well-being should consider that people's personal well-being values are heterogeneous, and that for most people health and happiness are central personal well-being values.

## Appendix 1: Statement set in Dutch and English According to Domains Theoretical Framework (Numbers Randomly Assigned)

Domain	Nr	Dutch	English
Achievement	2	Leven naar mijn eigen waarden en normen.	Living according to my own values.
	20	Bezig zijn met iets -of iets bereikt hebben- waar ik trots op ben.	Having accomplished something - or accomplishing something - I am proud of.
	29	Een bijdrage leveren aan de samenleving.	Contributing something to society.
Environmental conditions	6	Me thuis voelen in de omgeving waar ik woon.	Feeling at home in the environment where I live.
	8	Wonen in een omgeving met voldoende open ruimte en natuur.	Living in an environment with sufficient open and natural spaces.
	12	Wonen in een omgeving met voor mij belangrijke culturele voorzieningen (zoals bibliotheek, bioscoop, horeca, museum).	Living in an environment with facilities that are important to me (e.g. libraries, cinemas, nightlife, museums).
	30	In een huis wonen waar ik me op mijn gemak voel.	Feeling at ease in the house where I live in.
Labour conditions	9	Een zinvolle dagelijkse activiteit hebben (werk of anderszins).	Having a meaningful daily activity (work or other).
Material well-being	1	In staat zijn om in mijn materiele behoeften te voorzien.	Being able to meet my material needs.

Domain	Nr	Dutch	English
Mental development	3	Een goed inkomen hebben in vergelijking met mijn omgeving.	Having a good income relative to my social environment.
	5	Goed op de hoogte zijn van dingen die ik belangrijk vind.	Being knowledgeable with respect to the things that I find important.
	15	Mijn eigen mening kunnen vormen over dingen die ik belangrijk vind.	Being able to form an opinion about the things that I find important.
	19	Een spiritueel leven leiden.	Living a spiritual life.
	33	Mijn eigen keuzes kunnen maken in het leven.	Being able to make my own choices in life.
Mental Health	35	De opleiding hebben die bij mij past.	Being educated in a way that suits me.
	13	Me mentaal goed voelen.	Feeling mentally well.
Physical health	17	Geen stress of angst voelen.	Absence of stress and anxiety.
	16	Een gezonde leefstijl hebben.	Having a healthy lifestyle.
	18	Het vooruitzicht hebben op nog vele gezonde jaren.	The prospect of many healthy years ahead.
Political representation	25	Me fysiek fit voelen.	Feeling physically well.
	36	Fysiek in staat zijn om mijn dagelijkse activiteiten te doen.	Being physically able to do my daily activities.
	7	Mij vertegenwoordigd voelen in politieke besluitvorming die invloed heeft op mijn dagelijks leven.	Feeling represented in political decision making that affects my daily life.
	11	Stemmen bij verkiezingen.	Voting in elections.
Recreation and Leisure	27	Deelnemen aan politieke besluitvorming die invloed heeft op mijn dagelijks leven.	Being part of political decision making that affects my daily life.
	21	Op vakantie gaan.	Going on vacation.
Safety	32	Tijd besteden aan ontspanning.	Spending time on leisure.
	4	Een stabiele en rustige omgeving hebben, met weinig risico op dramatische gebeurtenissen in mijn persoonlijk leven.	Being in a stable environment with little risk of dramatic events in my personal life.
	22	Een omgeving hebben waarin je veilig je mening kunt uiten.	Being in an environment where opinions can be freely expressed.
	24	Een veilige omgeving hebben, met weinig risico op natuurrampen of sociale onrust.	Being in an environment with little risk of natural disaster or social unrest.
Social relations	28	Vrij zijn om te gaan en staan waar ik wil.	Being free to go where I want to be
	34	Een omgeving hebben waarin respect is voor ieders waarden en normen.	Being in an environment where everyone's values are respected.
	10	Vrienden hebben en ze regelmatig ontmoeten.	Having friends and meeting them regularly.
	14	Deel zijn van een groep of vereniging waar mensen elkaar helpen of steunen als het nodig is.	Being part of a community or group in which members support one another.
	23	Een fijne romantische relatie hebben.	Having a nice romantic relationship.
	26	Een goede verstandhouding hebben met mijn familie.	Having a good relationship with my family.
	31	Gewaardeerd worden door mijn omgeving.	Being appreciated by my social environment.

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## Authors and Affiliations

Willem van der Deijl<sup>1</sup> · Werner Brouwer<sup>2,3</sup> · Job van Exel<sup>2,3</sup>

✉ Job van Exel  
vanexel@eshpm.eur.nl

<sup>1</sup> Erasmus Institute for Philosophy and Economics, Erasmus University Rotterdam, Rotterdam, the Netherlands

<sup>2</sup> Erasmus School of Health Policy & Management, Erasmus University Rotterdam, Rotterdam, the Netherlands

<sup>3</sup> Erasmus Centre for Health Economics Rotterdam (EsCHER), Erasmus University Rotterdam, Rotterdam, the Netherlands