

# Notions and perceptions of quality of life: What clues to intervene in the city?

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## **Abstract**

Using empiric data on quality of life in the Lisbon Metropolitan Area, this paper describes notions of quality of life of the inhabitants of the LMA and their forms of perception and assessment of quality of life. These data are analysed with a view to reflection on the complexity of the variables intervening between objective conditions and subjective perceptions of quality of life and contributing to a discussion on forms of intervention towards improving quality in urban settings.

**Keywords:** *Notions of quality of life; subjective perception of quality of life*

## **1. Introduction**

The data and reflections presented here come from information collected during a study entitled *Perception and Assessment of Quality of life in the LMA – resources, aspirations and needs in the construction of the concept of quality of life*<sup>1</sup> in a questionnaire answered by inhabitants of the Lisbon Metropolitan Area<sup>2</sup>. Forms of perception and assessment of quality of life on the assumption that they result from a permanent judgement of a system of opportunities, resources and constraints that mould the different dimensions and components of people's lives, meaning that we thought it crucial not

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<sup>1</sup> PINTO, Teresa Costa (2006) *Percepção e avaliação da Qualidade de Vida na AML – Recursos, aspirações e necessidades na construção da noção de qualidade de vida*, doctoral thesis, ISCTE

<sup>2</sup> The survey involved asking 424 people living in the 18 municipalities of the LMA to answer a questionnaire. Based on a prior characterisation of the municipalities in the LMA using available statistics, we considered that there was an important cleavage between the peripheries of the Lisbon Metropolitan Area north of the River Tagus and those to the south. Within each group, we endeavoured to interview a number of people proportional to the weight of the resident population aged over 15, diversifying the sample in terms of age and social status (taking occupation and qualifications into account).

only to consider objective conditions but also the degree of wellbeing and levels of satisfaction with this system of opportunities, resources and constraints.

It was not a question of conducting an objective assessment or measurement of quality of life (the idea was not to compile indicators for measuring quality of life to distinguish between areas with higher or lower quality of life in the LMA). Rather, providing the concept with perception and assessment components, we wanted to know how resources, living conditions and subjective appreciations reflected in levels of satisfaction are articulated.

We first looked at how very different socio-spatial structuring conditions, especially those characterising the centre and periphery, produced profoundly unequal conditions of liveability, resulting in the structuring of different ways of life and compromising or facilitating different degrees of quality also corresponding to different forms of perception and assessment of quality of life.

The underlying hypothesis is based on the observation of impacts on the structure of the territory of new urban and social dynamics that configure different parts of the city: increasingly complex differentiation, fragmentation and ranking processes; renewed importance of centres specialising in certain activities, decentralising industrial production to increasingly distant areas and segregating the social groups thronging the peripheries; deterioration of the environment, shortage of facilities, difficult access and mobility marginalise peripheral areas in relation to the metropolitan centre, digging a growing gap between centre and peripheries and their residents' ways of life. Liveability conditions, regarded as potential differentiating elements of quality of life, should induce different perceptions and assessments of quality of life, which led to the hypothesis of their structuring forms of perception and assessment of quality of life, the driving force of the conditions of socio-spatial structure, as we know that these conditions differentiate areas in the way they qualify them, the living conditions that frame daily life and the quality of life that they allow or compromise. The starting point therefore reinforced the possible cleavage between centre and peripheries, seeking differentiating elements (therefore conducive to forms of inequality and socio-spatial segregation) in terms of qualification of the urban space, habitat, environmental conditions, forms of mobility, facilities, etc, distinguishing the different territories in the LMA.

After formatting the subject of our research oriented towards the structural hypothesis described, the analysis was divided in order to ascertain:

1- The notion of quality of life held by individuals and groups based on the assumption that assessing individuals' representation on quality of life can constitute a valid matrix for interpreting their values and preferences and their priorities in what is potentially a "good life"

2- The way in which individuals perceive their quality of life, through the degree of satisfaction with the different areas of their lives and with life in general. The idea of comparing satisfaction with the different areas in the survey enables us to understand which components of life are subject to

more or less positive appreciations and how these appreciations reflect objective circumstances of life

3- An assessment of the *determinants of quality of life*, i.e. the factors that contribute to a more positive perception and supposedly to an improvement in quality of life. Particularly in this point, we wanted to establish relationships between the different areas making up people's lives by means of value judgements that they make on each component. We thereby establish a hierarchy of factors contributing to quality of life, providing essential clues for understanding what may constitute a improvement in quality of life.

The data selected for this paper<sup>3</sup> show some surprises and perplexities in the results on ways of structuring perception and assessment of quality of life, which can be regarded as issues that can help define the variables for mediation between objective conditions and levels of satisfaction and contribute to the discussion of ways of improving quality of life in urban settings.

## **2. The notion of quality of life: focus on more material spheres and more personal aspects**

While an analysis of the main socio-urban dynamics of the Lisbon Metropolitan Area<sup>4</sup> points to a segmentation of the territory, differentiating it, in the diversity of its social compositions, from its demographic and economic characteristics and living conditions, it would seem reasonable to expect the same differences in terms of the notion and significance of quality of life, self-positioning and expectations of progress in quality of life. However, while on one hand representations on the idea of quality of life reflect the multiple dimensions of the concept, on the other hand they show a certain homogeneity regarding the notion and significance of quality of life that the inhabitants of the Lisbon Metropolitan Area seem to have. This notion is reflected in a focus on the meaning associated with the more personal dimensions of quality of life (mainly material but also non-material) and a relative disregard for societal dimensions (expressed in the need to belong and for a personal and social identity or, if we like, the typology proposed by Allardt, in needs for "loving")<sup>5</sup>, also a sign of the predominance of an individualistic notion of quality of life based on the priority of more private spheres of life with the consequent relegation of dimensions related to "liveability"<sup>6</sup> in people's everyday lives.

As shown in the two graphs below, the dominant concept of quality of life is unequivocally associated with material conditions (first place in the dimensions making up quality of life) while non-material personal conditions<sup>7</sup> are second. Health is third, though with a significant contribution to quality of life.

Another group formed by two categories from different aspects of quality of life clearly takes a less important place. Firstly, liveability conditions, which

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<sup>3</sup> For a more detailed analysis of these results, cf. PINTO, Teresa Costa, 2007, "Noções e percepções de qualidade de life: que pistas para uma intervenção na cidade?", *Cidades. Comunidades e Territórios*, CET/ISCTE, no. 15

<sup>4</sup> This analysis was conducted as part of the dissertation.

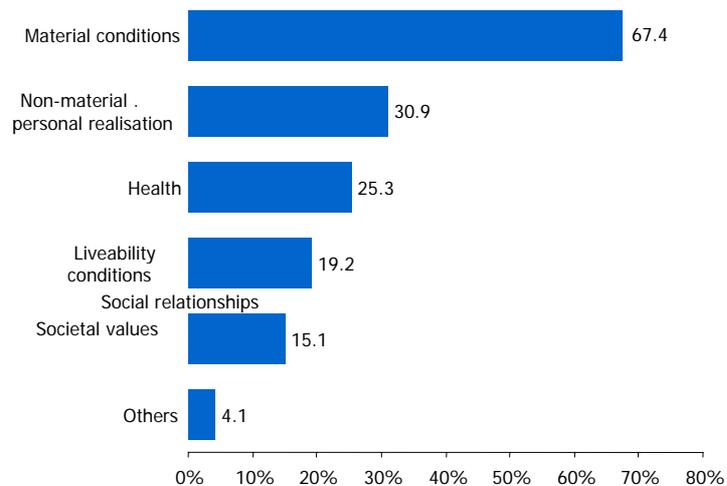
<sup>5</sup> ALLARDT (1993)

<sup>6</sup> As defined by Veenhoven (2000)

<sup>7</sup> The category **non-material conditions for personal realisation** included personal wellbeing, professional realisation, work, leisure, culture, education, peace and quiet, safety, love, affection and happiness.

supposedly structure quality of life, now include dimensions such as environmental conditions, access to facilities and services, appeal of area of residence and safety and inevitably mark the objective conditions of life in which people spend their time and everyday activities. Secondly, the identification of quality of life with societal values and social relationships<sup>8</sup>, an eminently societal dimension contrasts with a marked individualism represented by appreciation of conditions leading to personal wellbeing and realisation.

**Figure 1. Significance of quality of life by group (%)**



Source: Survey on quality of life in the LMA

If we group the different references to the meaning of quality of life according to types of need proposed by Allardt (1993), who distinguishes between the needs for “having”, “loving” and “being” on a scale that reflects progressive complexity of needs, from having to the need for belonging and personal realisation, we find a focus on the meaning of quality of life in more personal material or non-material dimensions and a relative devaluation of more societal dimensions involving socio-affective needs like those of belonging and personal and social identity as represented in the “loving” category or, if we like in the concept of “social capital”.

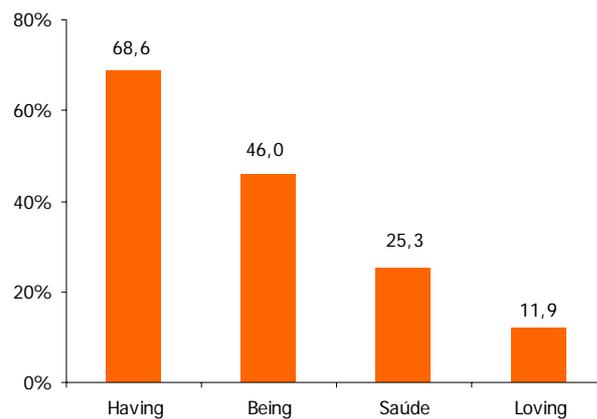
If we look at the graph below, the dimensions of “having”, albeit including material and non-material factors<sup>9</sup>, occupy top position in the meanings with which the respondents associate quality of life. “Being” comes second,

<sup>8</sup> This category included societal values such as justice, solidarity, peace, etc. and dimensions of satisfaction with inter-personal relations.

<sup>9</sup> This category included material conditions, work, access to education and culture, leisure, environmental conditions, appeal of place of residence, tranquillity and stability, access to facilities and services and safety.

focusing on the ability to achieve wellbeing and personal realisation<sup>10</sup>, occupying an important place in the league table of meanings associated with quality of life. Health is in third place, followed finally by the needs for “loving”, reflected in the importance of personal and social relationships<sup>11</sup>. This focus on more personal dimensions is in contrast to a devaluation of components related to liveability conditions and society represented by the need to belong and to build social identities. Even in the “being” category, which contains aspects of personal realisation through community participation and a feeling of usefulness to others, this is the dimension least appreciated, which shows a predominance of a markedly individualistic notion of quality of life based on an appreciation of private spheres of life. This seems to be in agreement with recently published studies on factors determining and meanings associated with quality of life in Europe (Cf. Alber and Fahey, 2004; Delhey, 2004).

**Figure 2.** Importance “having”, “loving”, “being” and health in quality of life (%)



Source: Survey on quality of life in the LMA

Although this is the dominant notion of quality of life, it is not uniform, and its differentiation seems to show territorial, social and age-related cleavages. The least settled life cycle (young people), greater monetary and cultural resources and living in areas with better liveability conditions seem to be variable in a broader, more systemic and demanding conception of quality of life. For example, people living in the metropolitan centre seem to have a broader, less materialistic but more individualistic conception of quality of life and are concerned about conditions guaranteeing personal realisation and wellbeing.

<sup>10</sup> This category included personal and professional realisation, personal wellbeing and societal values.

<sup>11</sup> This category included satisfaction with personal relations, love and affection and happiness.

A lack of focus of the notion of quality of life on more material dimensions and more private spheres is only found in categories with monetary, social and cultural resources enabling them to orient the notion of quality of life towards dimensions of liveability and the need to belong, which are less visible or absent in lower social groups. At the same time, the higher social groups value the components of personal realisation, which shows other capacities and other requirements and needs of quality of life<sup>12</sup>.

### **3. Satisfaction with aspects of life and perception of quality of life: high satisfaction and priority for more private spheres**

The purpose of including analytical dimensions such as the degree of satisfaction with different aspects of life was to show how the subjects assess them so that we could later evaluate their satisfaction with life as a whole and try to understand the structure of personal perception of quality of life.

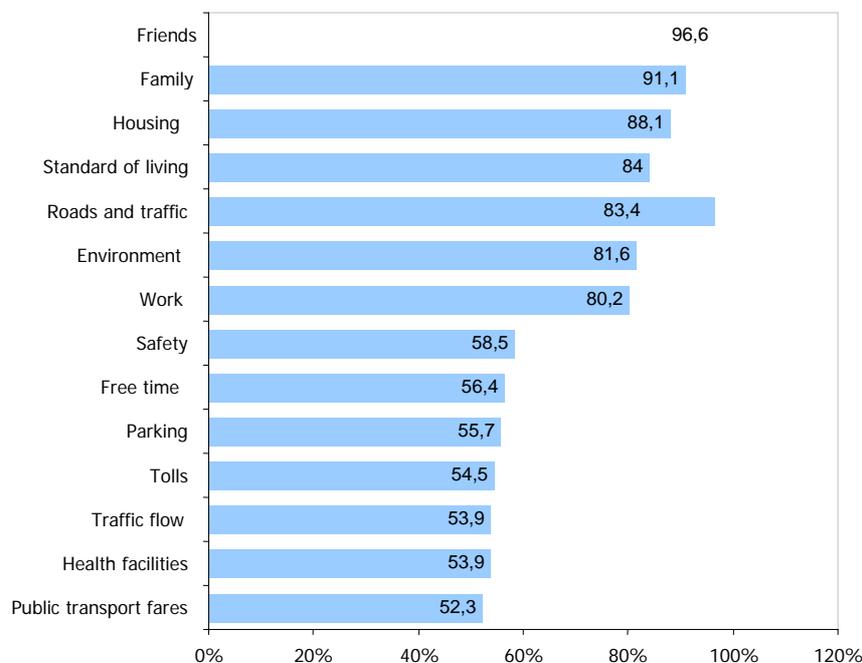
The first important note on the perception of quality of life is the high levels of satisfaction mentioned by the respondents with different aspects of their lives. As shown in Graph 3, no aspect has a positive assessment of less than 50%, while most were above 80%. The second important note, when comparing satisfaction with different aspects, is that the highest levels of satisfaction are associated with more private spheres of life, i.e. family, friends and home, which coincide partially with the aspects most appreciated and that contribute most to quality of life according to the respondents. This satisfaction with and appreciation of more private aspects can be understood, on one hand, in the context of resources that people control more easily and on the other in the trend in today's societies towards growing individualisation and corresponding focus on more private, individual spheres. With less, but still high satisfaction, we find mobility (traffic flow, public transport fares, tolls and parking), along with health facilities, available free time and safety conditions, all aspects that reinforce the idea of lower satisfaction with liveability conditions but that had taken second place in the dominant representations on the concept of quality of life.

These levels of satisfaction suggest that they may not reflect the diversity of forms of liveability, different social conditions or the influence of different phases in the life cycle. They are however, consistent with recent European studies on satisfaction with life (cf. Delhey, 2004; Albert and Fahey, 2004), which show that people tend to be more satisfied with the private, intimate aspects of life that they can most easily control and less satisfied with those whose conditions depend not on them but on public policies or the market. Another justification (cf. Cummins, 2003) for higher levels of satisfaction with private spheres is the tendency to appreciate aspects related to self-esteem and more personal areas, reflected in greater satisfaction.

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<sup>12</sup> Cf. PINTO, Teresa Costa (2007) "Noções e percepções de qualidade de vida: que pistas para uma intervenção na cidade?", *Cidades. Comunidades e Territórios*, CET/ISCTE, no. 15

**Figure 3. Satisfaction with different aspects of life**



(% of very satisfied/satisfied) (%)

Source: Survey on quality of life in the LMA

#### **4. Personal perception of quality of life: different between high satisfaction with life in general and self-positioning in quality of life**

The indicator “satisfaction with life” has been used in the literature on subjective perception of quality of life or subjective wellbeing as the most comprehensive individual testimony to conditions of life, although we recognise its relative independence from objective circumstances and the influence of aspirations, expectations and social and temporal comparisons<sup>13</sup>.

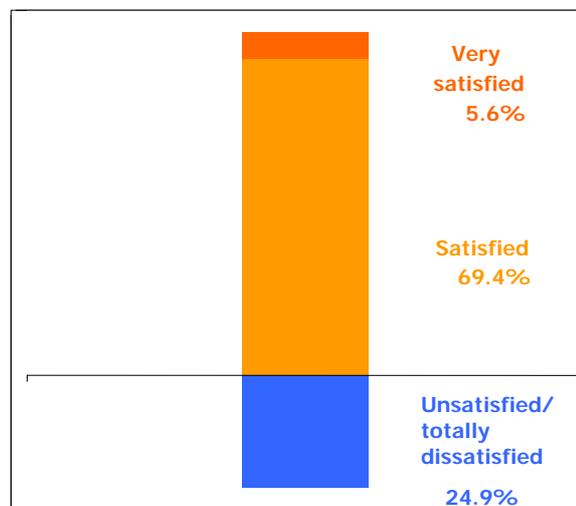
Just as we found high levels of satisfaction with most aspects, levels of satisfaction with life in general can also be considered high. As shown in Graph 4, 75% of the respondents said that they were very satisfied or satisfied with their lives, although practically ¼ expressed discontent.<sup>14</sup> This means that we must recognise a possible gap between objective conditions

<sup>13</sup> For each aspect under analysis, the respondents were asked about their degree of satisfaction with life in general on a scale consisting of very satisfied, satisfied, unsatisfied and totally dissatisfied. In addition, there was also a self-classification of quality of life. The respondents were also asked to position themselves as to their quality of life on a scale of 0 to 10 in which 0 was zero quality of life and 10 was maximum quality of life.

<sup>14</sup> However, these levels of satisfaction are coherent with the results obtained by the Delhey study (2004) which placed Portugal in 18<sup>th</sup> place out of 28 European countries in terms of satisfaction, even so with a level of satisfaction of 73%.

of life and degrees of satisfaction, suggesting other explanatory hypotheses referring to aspirations and expectations, social and temporal comparisons potentially involved in the construction of a notion of quality of life that supports highly diversified needs and requirements, as we have seen above<sup>15</sup>. In this research, the high levels of satisfaction suggest that they may not exactly reflect the diversity of forms of liveability in the different territories analysed, different individual conditions of life or the influence of the phase in the life cycle.

**Figure 4.** Satisfaction with life in general (%)



Source: Survey on quality of life in the LMA

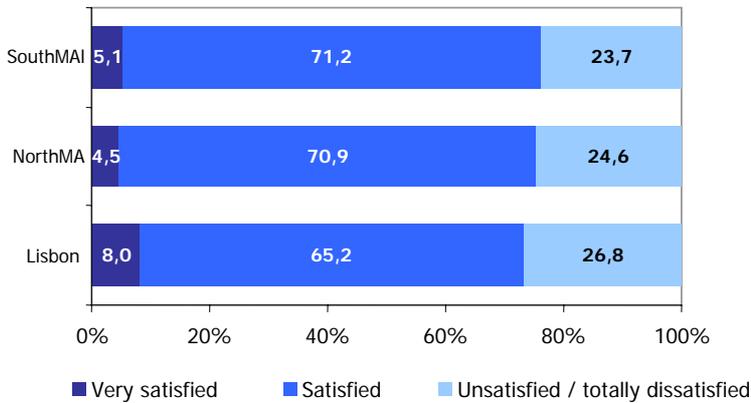
These levels of satisfaction contrast with relatively low self-classification of quality of life. The inhabitants of the metropolitan centre, who had shown a broader, more demanding notion of quality of life, attributing more value to personal realisation and liveability, are curiously those who demonstrate lower levels of satisfaction with their lives and also a lower average self-positioning in the level of quality of life. There are two factors that may be able to explain this apparent dissonance. On one hand, Lisbon seems to be a dual territory from a social point of view, shown by high polarity of standards of living, qualifications and occupations<sup>16</sup>. On the other hand, its

<sup>15</sup> To prove this hypothesis the same study recognised that the improvement in standard of living in many European countries did not correspond to an average increase in subjective quality of life, which remained stable for more than three decades. Higher aspirations seem to be the key to understanding this paradox (Cf. Easterlin (2001).

<sup>16</sup> Cf. PINTO, Teresa Costa (2006)

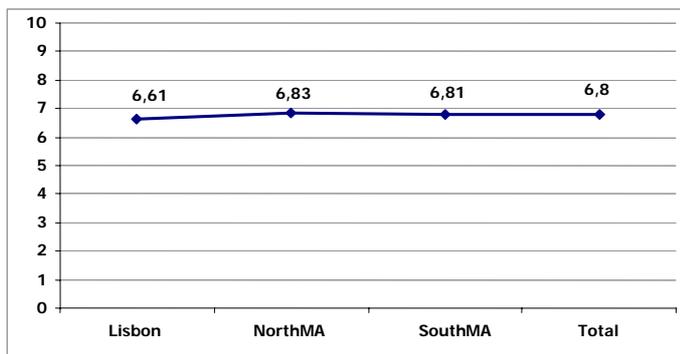
inhabitants show higher requirements and expectations, and we can see this in their own conception of quality of life. Thus, lower satisfaction with life, accompanied by lower average self-positioning in the case of inhabitants in the metropolitan centre, may mean a combined effect of lower standards of living associated with certain social groups and greater requirements of more qualified liveability associated with an urbanite elite. We should also note that Lisbon has the most polarised results of the sample, with a higher percentage of very satisfied and dissatisfied compared to the two other areas of residence.

**Figure 5. Satisfaction with life by area of residence (%)**



Source: Survey on quality of life in the LMA

**Figure 6. Self-positioning in quality of life by area of residence**

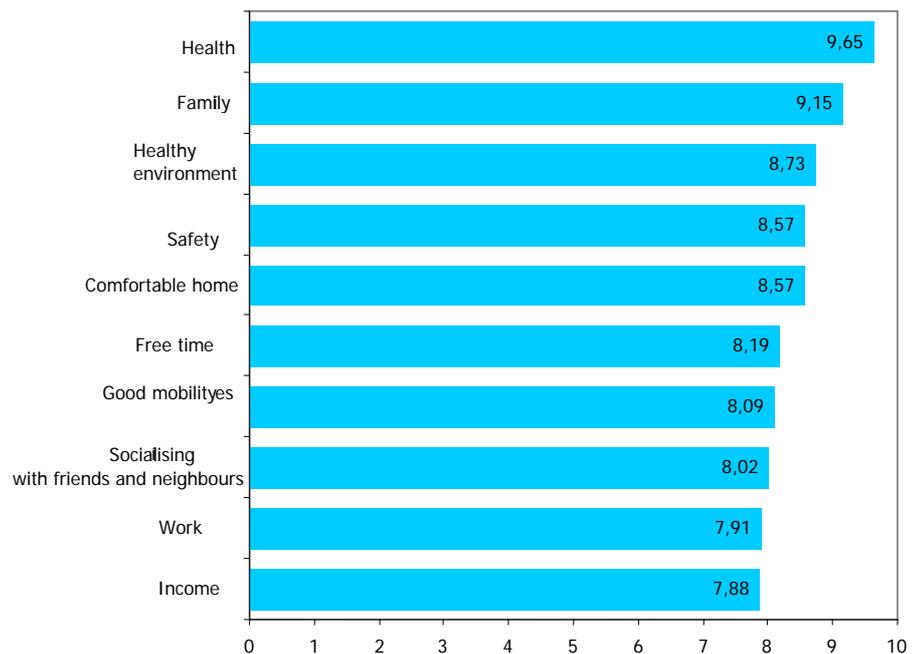


Source: Survey on quality of life in the LMA

### 5. Determinants of quality of life: priority to more private, personal aspects

From the subjects' direct testimony on the factors that contribute most to their quality of life<sup>17</sup>, more private aspects are the most decisive. Health and family, as shown in Graph 14, are those scoring highest (over 9) and are therefore those that potentially contribute most to quality of life. Scoring between 8 and 9, there are liveability factors, such as environmental conditions, safety, mobility and personal conditions such as the home or free time and relational dimensions such as socialising with friends and neighbours. The aspects with the lowest scores (between 7 and 8) include some of the aspects that can most influence quality of life, such as work and income. The fact that these aspects had lower scores may mean that, at the moment, they contribute less to people's quality of life. It therefore seems reasonable to assume that better conditions in these levels may mean an increase in quality of life.

**Figure 7. Factors decisive to quality of life (average scores)**



Source: Survey on quality of life in the LMA

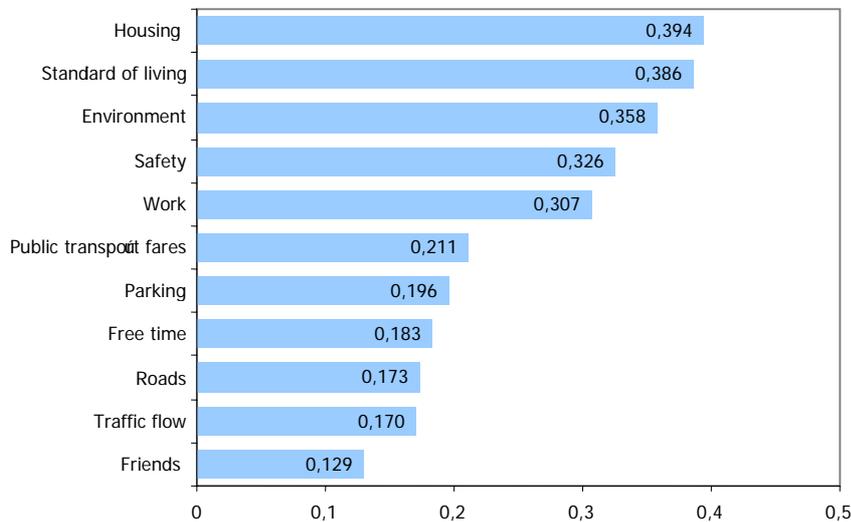
<sup>17</sup> The respondents were asked to score a list of 13 aspects contributing to quality of life on a scale of 0 to 10.

The use of simple linear correlation techniques<sup>18</sup> and the multivariate regression model<sup>19</sup> is an alternative for finding the aspects with the greatest influence on increasing subjective quality of life, irrespective of the respondents' direct opinion<sup>20</sup>. With any of the techniques used, we find that the greater the correlation between satisfaction with an aspect and positioning in quality of life, the more influence this aspect has on quality of life, suggesting that an improvement in conditions in the most correlated aspects will have a positive impact on perception of quality of life.

The graph below shows the results of the simple linear correlation. The most correlated aspects are different from those to which the respondents attributed most importance. Housing and standard of living, followed by environment, safety and working conditions are the aspects most closely correlated to positioning in the degree of quality of life, and aspects now appear in which there are factors defining important dimensions of liveability, such as environmental and safety conditions, which, as we have seen, are less marked in representations on the concept of quality of life.

The multivariate regression model confirms the results of the simple linear correlation, finding three factors that most explain quality of life: standard of living, housing and the environment, in that order.

**Figure 8.** Correlation between satisfaction with aspects and perception of quality of life (Spearman's correlation coefficient<sup>21</sup>)



<sup>18</sup> We used Spearman's rank correlation coefficient (non-parametric p) since, although all the variables were measured on a Lickert-type scale, the number of categories considered by the respondents in some of them was lower than four.

<sup>19</sup> In the regression model, we chose to exclude the variable on social relations for the reason mentioned above. On the aspects with a Sig. of 0.1 or more were considered.

<sup>20</sup> We first chose to correlate satisfaction with the different aspects and positioning on quality of life and then try as multivariate regression model taking the same variables into account, in which the former are considered independent.

<sup>21</sup> Only aspects with a Sig. of 0.1 or more were considered.

Source: Survey on quality of life in the LMA

## **6. How do we assess quality of life? The complex mediation between objective conditions and subjective perceptions**

The data presented here, especially those on high levels of satisfaction with the different aspects and life in general, are even more surprising after analysing the diversity of social and territorial compositions marking the profile of the Lisbon Metropolitan Area<sup>22</sup>. On the other hand, these levels of satisfaction, even with less satisfactory areas (like mobility, free time, safety and health facilities, all variables strongly affecting quality of life), seem to homogenise the social space of the metropolitan area, confining any differences to the specificities of the subjects' social profiles, their life paths and experiences and the way this is reflected in resources and capacities, aspirations and expectations, which are variables that can constitute assessment matrices that are also diverse.

This homogenisation obliges us to seek the complexity of reasons for this gap between possible objective living conditions and their levels of satisfaction, which can include anything from adaptive behaviours (Cummins, 2000) to social and temporal comparisons, with an explanatory role in the formation of aspirations and expectations between the perception of living conditions and their assessment (Campell et al., 1976, Michalos, 1985).

However, by using a quantitative method supported by a questionnaire survey, it was not possible to take into account the variables and processes that form and explain these gaps and cleavages. Underlying a given territory with different socio-spatial structuring conditions are inhabitants with certain social profiles, life paths, resources and aspirations in very different age groups, and so quantitative analyses based above all on bivariate techniques make it difficult to explain the complexity of this set of variables. An explanation for the variables producing these uniform levels of satisfaction or even incongruence between supposedly good living conditions and lower satisfaction requires us to use to a more qualitative method to build "quality of life profiles" articulating current social paths and profiles, capacities and resources with "notions of quality of life" demonstrating a difference in life's goals and results with levels of demand and needs that distinguish between subjects when appreciating their quality of life and those of the different aspects making it up<sup>23</sup>. These different notions of quality of life, behind which we find extremely diverse constraints, aspirations and expectations, are reflected in different degrees of satisfaction, because they involve greater or smaller gaps between aspirations and achievements. Only the use of this type of method will enable us to understand the living conditions experienced by the subjects and clarify the adjustment mechanisms involved between objective resources and subjective wellbeing, i.e. how, in the words of Fahey et al. (2003) "the subjective experience of objective conditions" is made.

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<sup>22</sup> Cf. Pinto, Teresa Costa (2006), Ch III

<sup>23</sup> Cf. Pinto, Teresa Costa. (2006), Ch V

## **7. What can be done to promote quality of urban life? Current concerns**

An analysis of the data seems to justify some questions, when read from the point of view of the promotion of quality of urban life. In general, the results identify dimensions inspiring greater satisfaction – relational and identity elements, especially private and personal spheres of life (relationships with friends and importance of family and home), and more critical dimensions related to mobility, health facilities, free time and safety, and can constitute indicators for priority intervention. On the other hand, the aspects most appreciated for quality of life apart from health and family include factors related to liveability – the environment, safety and mobility, suggesting that intervention in these areas could improve quality of life.

In the same way, the aspects most related to quality of life - home, standard of living, environment, safety and work show factors having regard to the subjects' own resources and liveability that may be critical in the context of life today, especially safety and the environment, which are more critical dimensions in urban contexts today.

However, a notion of quality of life focusing on more material spheres and more personal aspects rather than liveability conditions and more societal areas and high levels of satisfaction with both life in general and the different aspects (even those that are more critical in today's urban contexts) makes us question the idea of intervention based on an immediate reading of these results if we do not cross-reference them with the dynamics of change found in contemporary cities. We are referring to the growing heterogeneity of urban ways of life reflecting a vast diversity of aspirations, needs and requirements as to the mode and quality of urban life, to the heterogeneity and diversity of profiles of city dwellers in the plurality and diversification of their modes and styles of life and the increasing ethnic and cultural heterogeneity. We are also referring to the coexistence of populations in the city: inhabitants, workers and visitors each supporting different needs and values of urban life. As Ascher said (1998), it is increasingly necessary to create an "à la carte" city that responds differently to very diverse notions and requirements of quality of life.

We can add others of a negative nature to these dynamics. They have to do with increasingly visible processes of social polarisation and fragmentation and the emergence of new forms of social and urban poverty and exclusion obliging us to rethink intervention strategies aimed at quality of life of and in the city. This means that, in addition to an analysis (and forms of intervention) of quality of life by specific social groups or urban populations located in the territory, we must also take into consideration an analysis of the "societal quality" of urban systems and how they guarantee levels of social cohesion, sustainability and empowerment enabling their inhabitants to develop broader, more demanding notions of quality of life focusing not so much on more material and private aspects of quality of life but on liveability conditions and those permitting wellbeing and personal realisation.

Promoting quality of life therefore means investing in conditions guaranteeing people the capacity to broaden their opportunities for choosing their lifestyles and meeting their needs and preferences. We have gone back to Sen's definition of quality of life (1993), when he claims that it should be appraised by people's capacity and freedom to choose their life goals and projects, i.e. their capacity for "freedom of wellbeing"

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