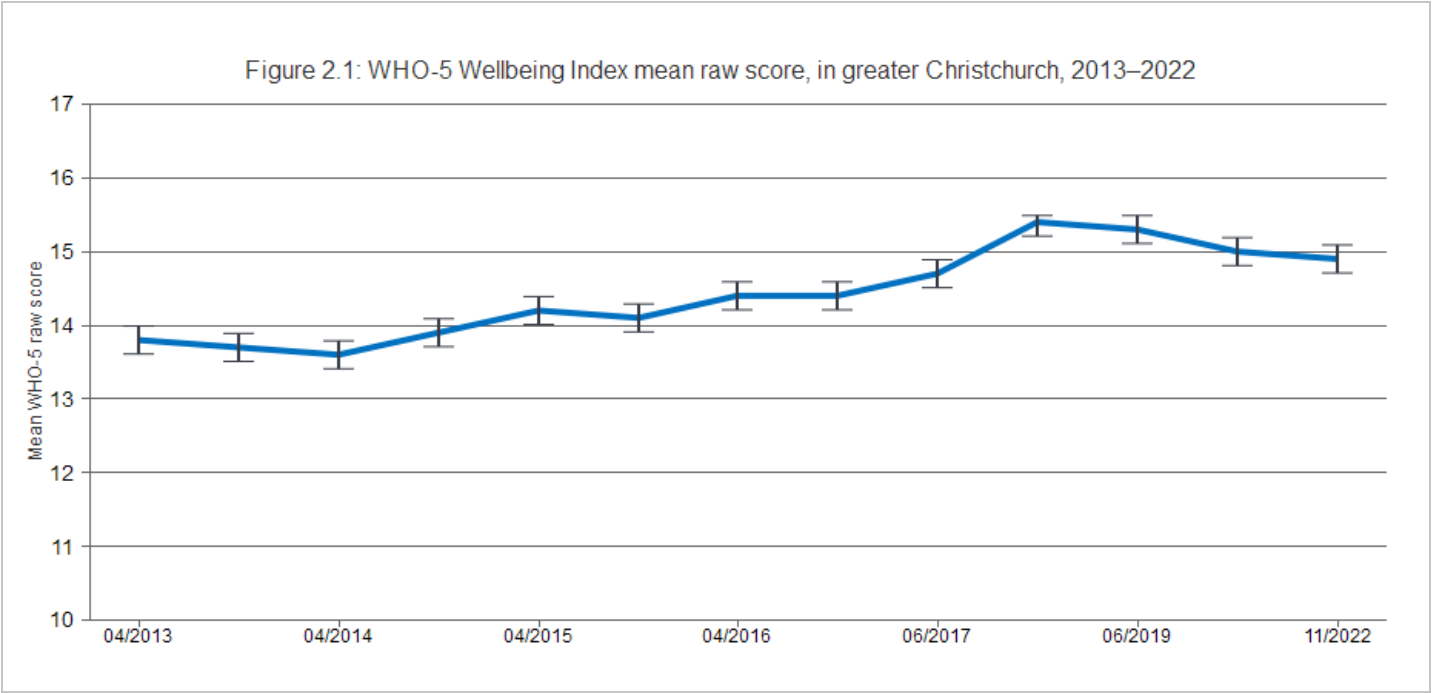


# Subjective Wellbeing: Emotional wellbeing

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Emotional wellbeing is measured here using the five-question World Health Organization Wellbeing Index (WHO-5), which is a widely-used tool for assessing subjective wellbeing [12]. Respondents to the Canterbury Wellbeing Survey are asked to rate the extent to which each of five emotional wellbeing components (cheerful, calm and relaxed, active and vigorous, fresh and rested, and interest in daily life) has been present or absent in their lives over the previous two-week period.

This indicator presents the WHO-5 Wellbeing Index mean raw score for greater Christchurch respondents. The index is scored out of a maximum 25 points, with higher scores indicating better wellbeing.



The figure shows that the emotional wellbeing of greater Christchurch residents (as measured by the WHO-5 Wellbeing Index) improved overall since 2013. After minor fluctuations between 2013 and 2015, the mean WHO-5 score increased to reach the highest levels to date, 15.4, in May 2018. While the mean WHO-5 score has decreased between 2019 and 2020, and 2020 and 2022, neither decrease is statistically significant. There is no suitable pre-earthquake or New Zealand WHO-5 data available for comparison, however, a representative, population-based survey of adults in the UK [12] found a WHO-5 mean raw score of 14.7.

Breakdown by Territorial Authority



The figure shows that survey respondents living in Selwyn District have generally had the highest WHO-5 mean scores across the time-series from 2013 to 2018. While the WHO-5 mean scores for Selwyn and Waimakariri districts were statistically significantly higher than those for Christchurch City, from April 2013 to September 2015, there appears to have been convergence between the three districts' WHO-5 Wellbeing Index mean scores since early 2016. In November 2022 the mean score for Christchurch City is stable at 14.8 (having dropped from 15.2 in June 2019).

Breakdown by ethnicity



The figure shows statistically similar WHO-5 Wellbeing Index mean scores for European respondents (14.8) and Māori respondents (14.3), in November 2022. The mean score for Pacific/Asian/Indian respondents (15.6) was statistically significantly higher than for European respondents in November 2020 but not 2022. While the WHO-5 Wellbeing Index mean scores were generally lower for Māori respondents compared with European and Pacific/Asian/Indian respondents from 2013 to 2016 and 2018 to 2022, the majority of these differences were not statistically significant.

Breakdown by age



The figure shows a pattern of generally similar WHO-5 Wellbeing Index mean scores for the age groups 18 to 24 years, 25 to 34 years, 35 to 49 years, and 50 to 64 years, over the period 2013 to 2022. For the 65 to 74 years, and 75 and over age group, a different pattern is seen. Both of these older age groups have had higher mean WHO-5 scores than all other age groups since 2017. For respondents aged 65 to 74 years, the difference in mean WHO-5 scores is statistically significant (compared with the three youngest age groups) for all years since 2017, and for those aged 75+ years, since 2018.

Breakdown by gender



The figure shows a pattern of higher WHO-5 Wellbeing Index mean scores for male respondents compared with female respondents, over the period from 2012 to 2020 (statistically significant differences are evident at the 09/2013, 09/2014, 09/2016, 06/2017, 06/2019, and 11/2022 time-points).

Breakdown by income



The figure shows a positive relationship between income and emotional wellbeing (WHO-5 Wellbeing Index mean scores) for greater Christchurch, with higher income groups having higher emotional wellbeing. The differences shown between the highest income group (\$100,000+ annual household income) and the lowest income group (<\$30,000) have been statistically significant at all time-points (for 2022, mean WHO-5 scores 15.2 and 13.8, respectively). The differences between the middle-income groups are not statistically significant.

Breakdown by disability



The figure shows that respondents with a disability or long-term health condition, had statistically significantly lower WHO-5 Wellbeing Index mean scores compared with respondents without a disability or long-term health condition, across the time-series from 2013 to 2022. The difference between those with and those without a disability or long-term health condition is both substantial and statistically significant throughout the time-series. Mean WHO-5 scores are consistently lower for the younger group with a disability or long-term health condition, compared to the older group, a difference that is statistically significant at a number of time-points. Between 2018 and 2022 the mean raw WHO-5 score for people with a disability or long-term health condition aged 65 years and over decreased from 14.8 to 13.6, however this change was not statistically significant.

Data Sources

**Source:** Te Whatu Ora Waitaha Canterbury.  
**Survey/data set:** Canterbury Wellbeing Survey to 2022. Access publicly available data from Te Mana Ora | Community and Public Health website [www.cph.co.nz/your-health/wellbeing-survey/](http://www.cph.co.nz/your-health/wellbeing-survey/)  
**Source data frequency:** Annually.

Metadata for this indicator is available at <https://www.canterburywellbeing.org.nz/our-wellbeing/index-data>

## REFERENCES

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This is the full reference list for **Subjective Wellbeing**.

- 1 Aked J, Marks N, Cordon C, Thompson S (2008) *Five Ways to Wellbeing: A report presented to the Foresight Project on communicating the evidence base for improving people's well-being*. London: New Economics Foundation.
- 2 Diener E, Wirtz D, Tov W, Kim-Prieto C, Choi D (2009) New measures of well-being: Flourishing and positive and negative feelings. *Social Indicators Research* 39: 247-266.
- 3 UK Government (2010) *Confident communities, brighter futures: A framework for developing wellbeing*. UK Government: Department of Health and New Horizons.
- 4 Beaglehole B, Mulder RT, Frampton CM, Boden JM, Newton-Howes G, et al. (2018) Psychological distress and psychiatric disorder after natural disasters: Systematic review and meta-analysis. *The British Journal of Psychiatry*: 1-7.
- 5 Bidwell S (2011) *Long term planning for recovery after disasters: Ensuring health in all policies (HiAP)*. Community and Public Health for Healthy Christchurch. 4-5 p.
- 6 Bonanno GA, Diminich ED (2013) Annual Research Review: Positive adjustment to adversity -Trajectories of minimal-impact resilience and emergent resilience. *Journal of child psychology and psychiatry, and allied disciplines* 54: 378-401.
- 7 Galea S, Nandi A, Vlahov D (2005) The epidemiology of post-traumatic stress disorder after disasters. *Epidemiol Rev* 27: 78-91.
- 8 Lock S, Rubin GJ, Murray V, Rogers MB, Amlot R, et al. (2012) Secondary stressors and extreme events and disasters: A systematic review of primary research from 2010-2011. *PLoS Curr* 4.
- 9 Ramanathan CS, Dutta S, editors (2013) *Governance, Development, and Social Work*. London: Routledge Publishers (Taylor and Francis Group).
- 10 Bowling A (2001) *Measuring Disease. A Review of Disease-specific Quality of Life Measurement Scales*. Buckingham: Open University Press.
- 11 CERA (2012) *CERA Wellbeing Survey 2012 Report, prepared by AC Nielsen for the Canterbury Earthquake Recovery Authority*. AC Nielsen and the Canterbury Earthquake Recovery Authority.
- 12 Topp CW, Ostergaard SD, Sondergaard S, Bech P (2015) The WHO-5 Well-Being Index: A systematic review of the literature. *Psychother Psychosom* 84: 167-176.
- 13 Selye H (1936) A syndrome produced by diverse nocuous agents. *Nature* 138.
- 14 Chandola T, Britton A, Brunner E, Hemingway H, Malik M, et al. (2008) Work stress and coronary heart disease: What are the mechanisms? *European Heart Journal* 29: 640-648.
- 15 Selye H (1976) *Stress in health and disease*. Stoneham MA: Butterworth-Heinemann.
- 16 World Health Organization (2013) *Guidelines for the management of conditions specifically related to stress*. Geneva: WHO.
- 17 CDHB (2020) *Canterbury Wellbeing Survey, 2020: Report prepared by Nielsen for the Canterbury District Health Board and partnering agencies*. Christchurch: Canterbury District Health Board.
- 18 *The Quality of Life Project. Report prepared by Nielsen for the Auckland, Wellington, Christchurch, and Dunedin City Councils and partnering agencies*. Available from: [www.qualityoflifeproject.govt.nz/survey.htm](http://www.qualityoflifeproject.govt.nz/survey.htm).
- 19 Vaishnavi S, Connor K, Davidson JRT (2007) An abbreviated version of the Connor-Davidson Resilience Scale (CD-RISC), the CD-RISC2: Psychometric properties and applications in psychopharmacological trials. *Psychiatry research* 152: 293-297.
- 20 Windle G, Bennett KM, Noyes J (2011) A methodological review of resilience measurement scales. *Health and Quality of Life Outcomes* 9: 8.
- 21 Davidson JRT (2020) Connor-Davidson Resilience Scale (CDRISC) Manual. Unpublished.
- 22 Connor KM, Davidson JR (2003) Development of a new resilience scale: The Connor-Davidson Resilience Scale (CD-RISC).
- 23 Windle G (2011) What is resilience? A review and concept analysis. *Reviews in Clinical Gerontology* 21: 152-169.
- 24 Bonanno G (2004) Loss, Trauma, and Human Resilience: Have We Underestimated the Human Capacity to Thrive After Extremely Aversive Events? *American Psychologist* 59: 20-28.

- 25 Richardson GE (2002) The metatheory of resilience and resiliency. *Journal of Clinical Psychology* 58: 307-321.
- 26 Richardson GE, Neiger BL, Jensen S, Kumpfer KL (1990) The Resiliency Model. *Health Education* 21: 33-39.
- 27 Statistics New Zealand (2016) *New Zealand General Social Survey 2016*. Wellington: Statistics New Zealand.
- 28 Families Commission (2013) *Families and whānau Status report: Towards measuring the wellbeing of families and whānau*. Wellington: Families Commission.
- 29 Wollny I, Apps J, Henricson C (2010) *Can government measure family wellbeing?* London: Family and Parenting Institute. Available from: <https://www.familyandparenting.org/Resources/FPI/Documents/CanGovernmentMeasureFamilyWellbeing.pdf>.
- 30 Cotterell G, von Randow M, Wheldon M (2008) *Measuring Changes in Family and Whānau Wellbeing Using Census Data, 1981–2006: A preliminary analysis*. Wellington: Statistics New Zealand.
- 31 Baker K (2016) *The Whānau Rangatiratanga Frameworks: Approaching whānau wellbeing from within Te Ao Māori*. Wellington: Social Policy Evaluation and Research Unit.
- 32 Fletcher M (2007) Issues in developing a conceptual framework for 'family wellbeing'. National Family Wellbeing Symposium, Canberra, 20–21 June 2007.
- 33 Statistics New Zealand (2006) *International developments in family statistics*. Wellington: Statistics New Zealand.
- 34 Statistics New Zealand (2007) *Review of official family statistics. Consultation Paper*. New Zealand: Wellington.
- 35 Statistics New Zealand (2013) *Te Kupenga 2013: A survey of Māori well-being questionnaire*. Wellington: Statistics New Zealand.
- 36 Statistics New Zealand (2018) *New Zealand General Social Survey 2018 data dictionary (version 29)*. Statistics New Zealand.