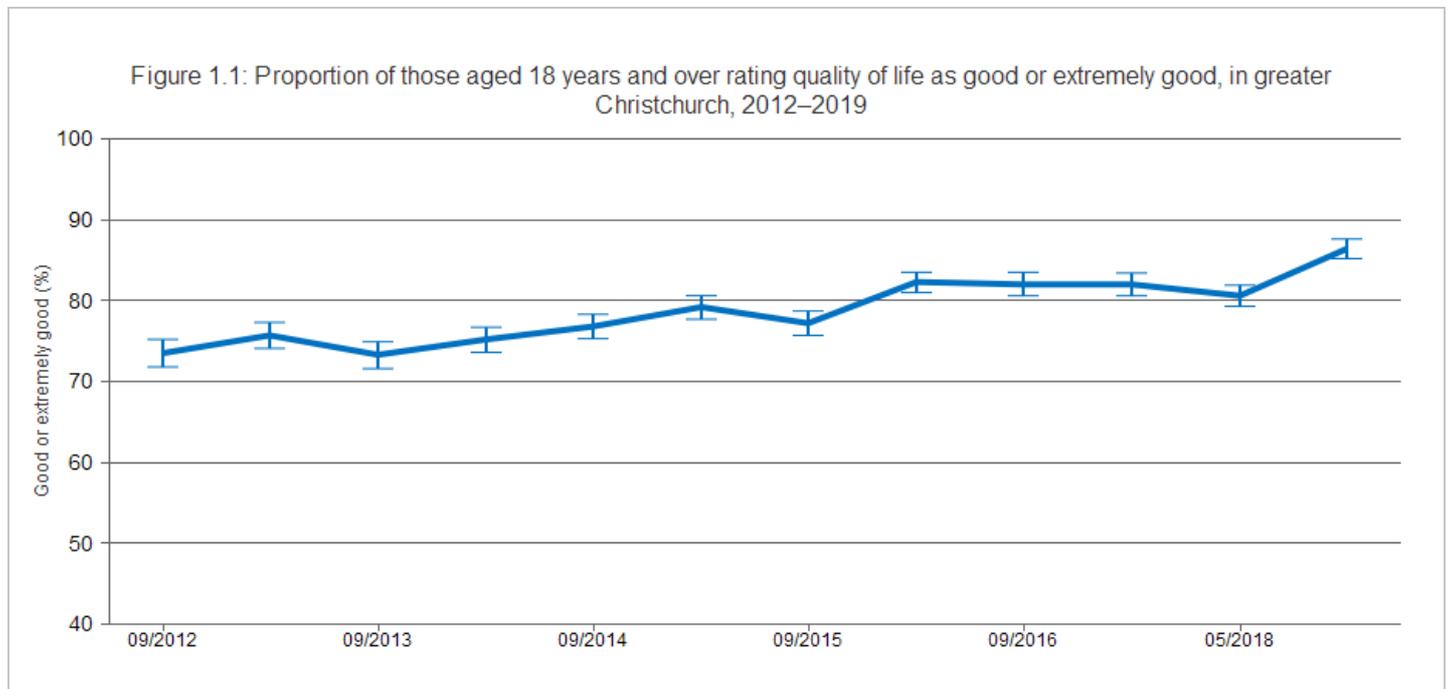


## Subjective Wellbeing: Quality of life

Downloaded from <https://www.canterburywellbeing.org.nz/our-wellbeing/subjective-wellbeing/quality-of-life/> on 19/06/2021 9:55 AM

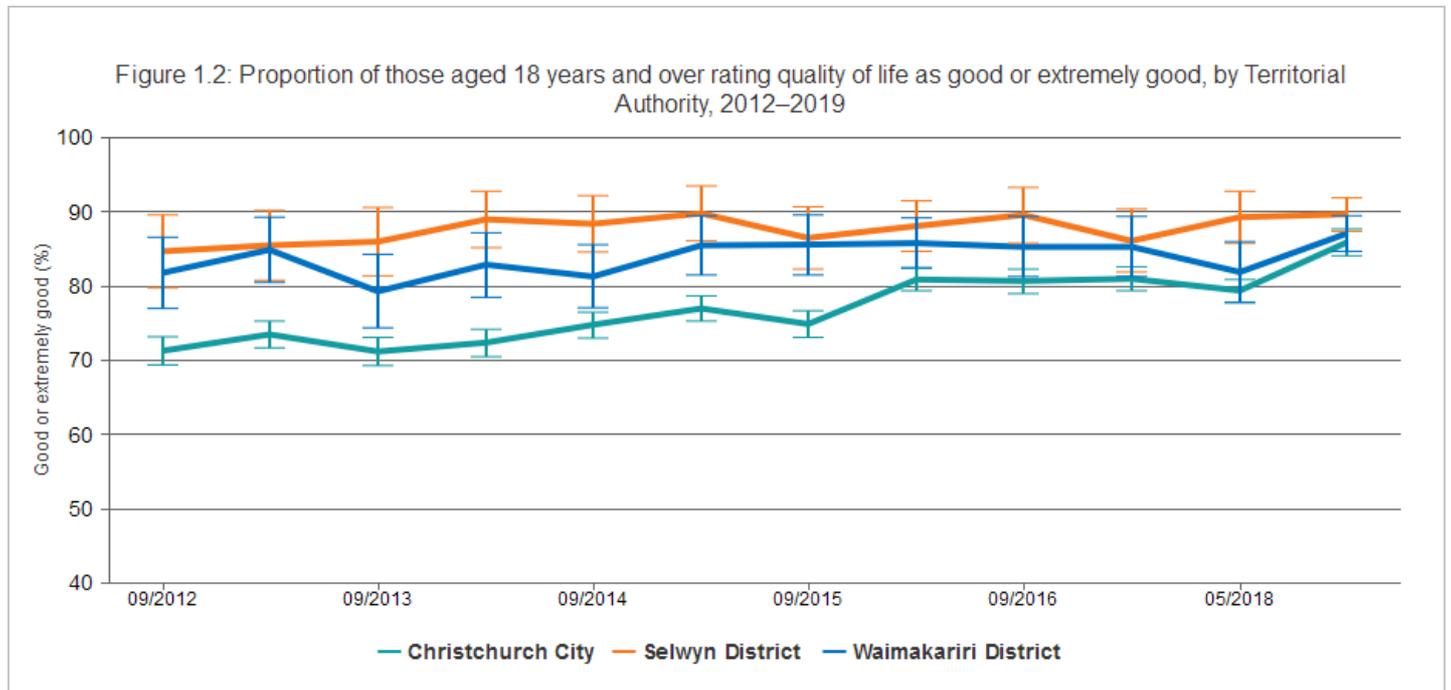
Overall quality of life refers to a person's evaluation of their own circumstances and experience of life, which is shaped by their cultural, social and environmental context [10]. Overall quality of life is generally accepted to be more nuanced and complex than other health concepts such as health status, lifestyle, or life satisfaction [10]. Overall quality of life has been measured in the Canterbury Wellbeing Survey since 2012 [11].

This indicator presents the proportion of those 18 years and over indicating that their overall quality of life was good or extremely good, as reported in the Canterbury Wellbeing Survey.



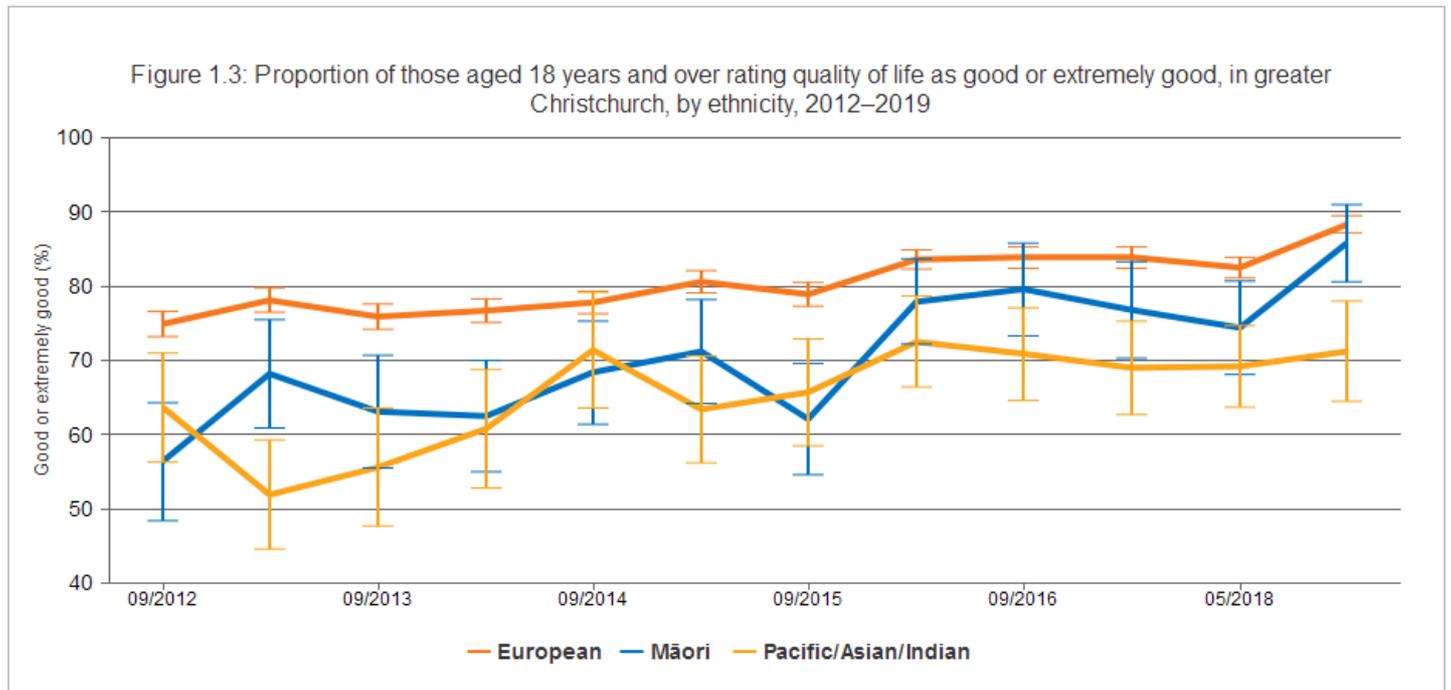
The figure shows an overall increase in self-reported quality of life (proportion of those rating their quality of life as good or extremely good) for greater Christchurch, between 2012 (73.5%) and 2019 (86.4%). The 2019 result is statistically significantly higher than all other time-points in the series. This increase follows a plateau in self-reported quality of life for greater Christchurch; with no statistically significant changes in the proportion rating their quality of life as good or extremely good, between April 2016 and May 2018.

## Breakdown by Territorial Authority



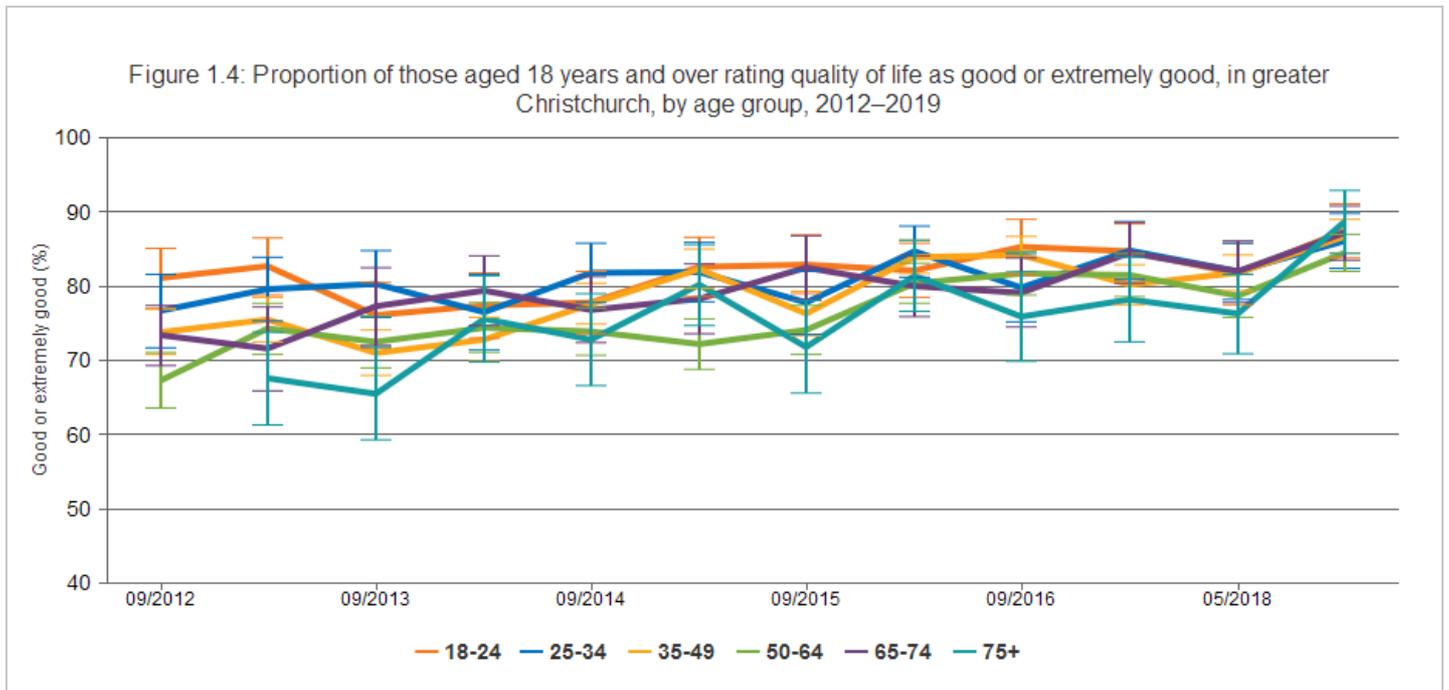
The figure shows that in the earlier years of the time-series, levels of overall quality of life (proportion of those rating quality of life as good or extremely good) were generally lower in Christchurch City, compared with Selwyn District and Waimakariri District (statistically significantly lower for Christchurch City compared with Selwyn District, 2012–2018; although similar to Waimakariri District from April 2016). However, there appears to be a pattern of convergence between the districts over the last four years (largely due to steadily increasing levels of overall quality of life for Christchurch City respondents). Note that these data do not take into account the different socioeconomic profiles of the three Territorial Authorities, with income or socioeconomic status being an important factor for quality of life.

## Breakdown by ethnicity



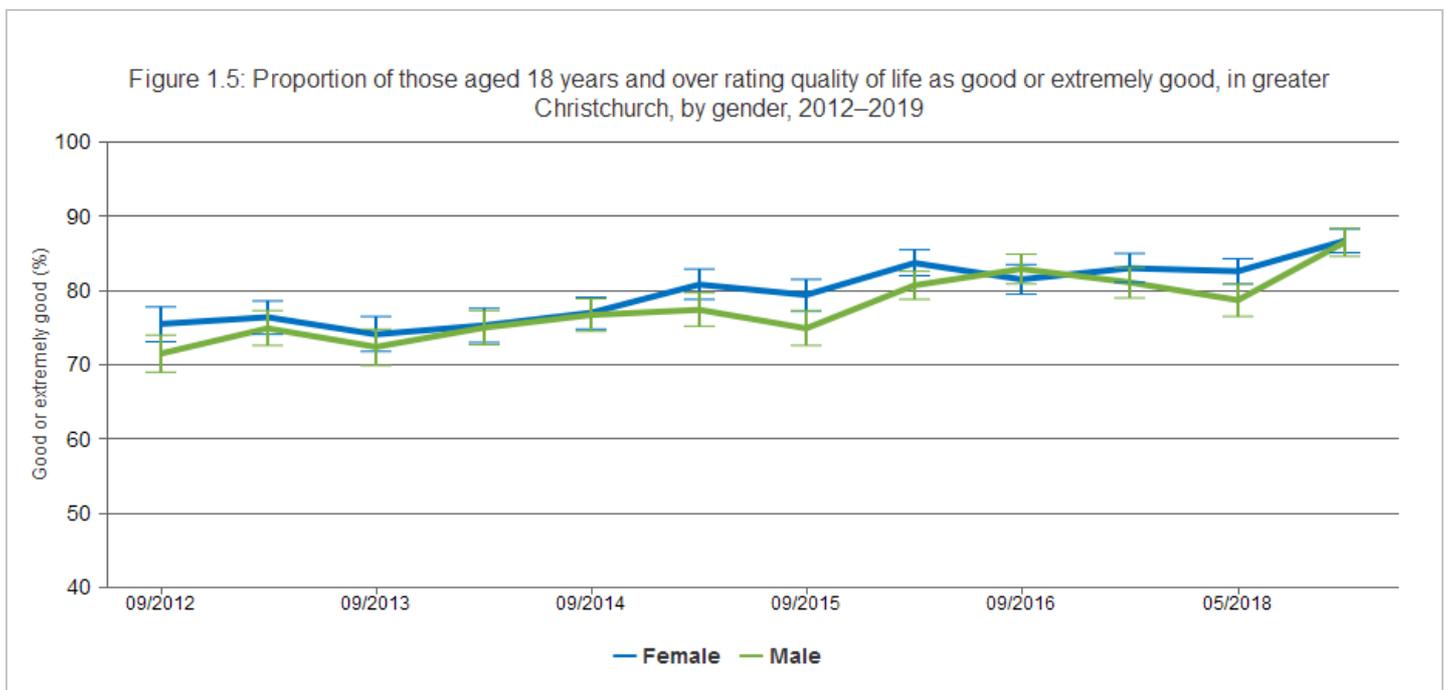
The figure shows that levels of overall quality of life (proportion of those rating their quality of life as good or extremely good) have generally been higher for European respondents, compared with Māori and Pacific/Asian/Indian respondents (statistically significantly higher for Europeans compared with Māori and Pacific/Asian/Indian, 2012–2019; with the exception of April 2016 to June 2017 and June 2019 for Māori). In 2019, the proportion of European respondents rating their quality of life as good or extremely good remains statistically significantly higher than that for Pacific/Asian/Indian respondents (88.3% compared with 71.2%, in 2019) but not for Māori respondents (85.8%). While there is some variability in the results for Māori (due to smaller absolute numbers in the sample) there appears to be an overall pattern of convergence of the proportion for Māori and European respondents over the last five years. However, the proportion of Pacific/Asian/Indian respondents rating their quality of life as good or extremely good has remained relatively constant over the last four years and does not appear to be following the same upward pattern seen for European and Māori respondents.

## Breakdown by age



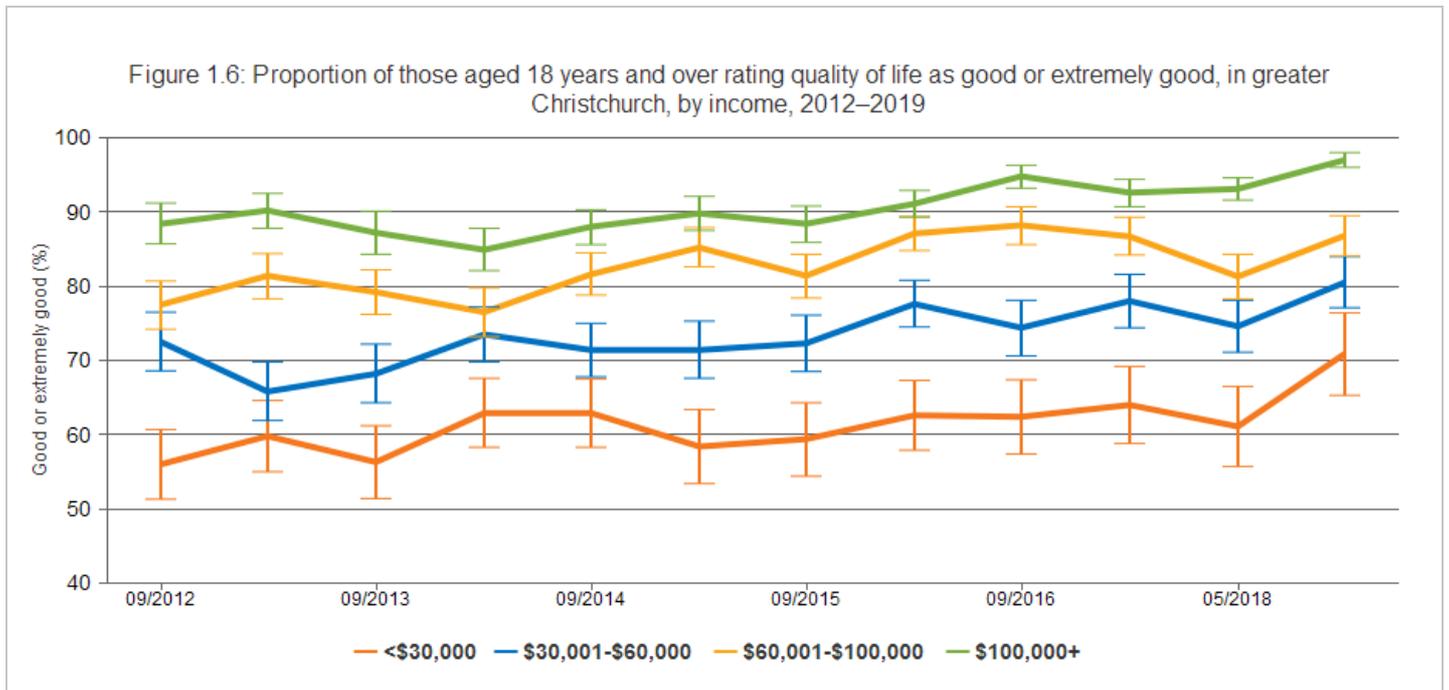
The figure shows a pattern of converging overall quality of life (proportion of those rating their quality of life as good or extremely good) for the age groups over the time-series. While there have been some statistically significant differences between young people and the older age groups, at some earlier time-points, there have been no statistically significant differences between any age groups since late 2016.

## Breakdown by gender



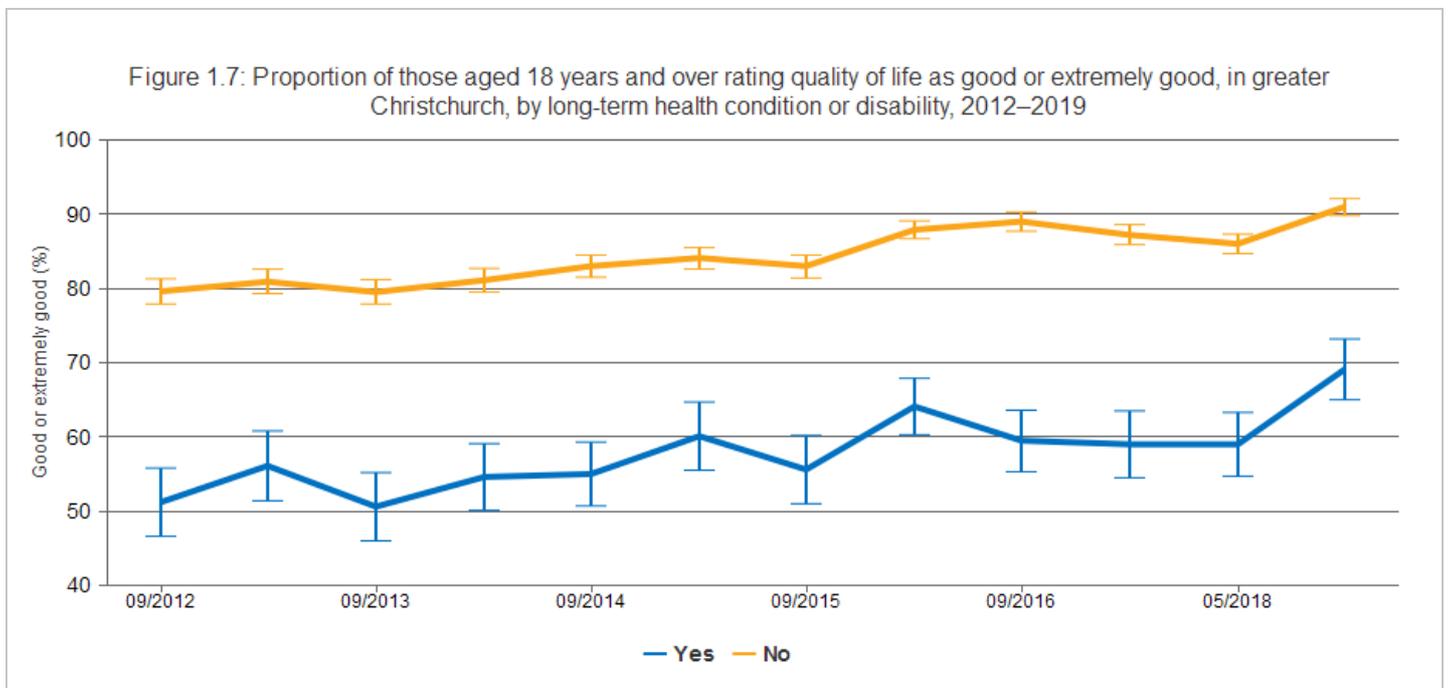
The figure shows a pattern of generally similar overall quality of life (proportion of those rating their quality of life as good or extremely good) for female and male respondents, over the period 2012 to 2019 (no significant differences at any time-point).

## Breakdown by income



The figure shows a clear positive relationship between income and overall quality of life, with the proportion of those rating their overall quality of life as good or extremely good increasing with increasing annual household income. The differences between the four income groups shown in the figure have been statistically significant at most time-points across the time-series. In 2019, almost all (97%) of those respondents from the \$100,000+ income group rated their quality of life as good or extremely good, compared with 70.9 percent of those from the <\$30,000 income group (a statistically significant difference).

## Breakdown by disability



The figure shows lower levels of overall quality of life (proportion of those rating their quality of life as good or extremely good) for respondents with a long-term health condition or disability, compared with those without, from 2012 to 2019. The substantial difference between the groups has been persistent and statistically significant for all time-points in the series (for 2019, the proportion of respondents rating their quality of life as good or extremely good was 69.1% for those with a long-term health condition or disability and 91.0% for those without). There appears to be an overall upward trend for both groups, although trend analysis is not available for these data.

## Data Sources

**Source:** Canterbury District Health Board.

**Survey/data set:** Canterbury Wellbeing Survey to 2019. Access publicly available data from the Community and Public Health (Canterbury DHB) 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

---

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, et al. (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 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.
- 5 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.
- 6 Galea S, Nandi A, Vlahov D (2005) The epidemiology of post-traumatic stress disorder after disasters. *Epidemiol Rev* 27: 78-91.
- 7 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.
- 8 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.
- 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 noxious agents. *Nature* 138.
- 14 Selye H (1976) *Stress in health and disease*. Stoneham MA: Butterworth.
- 15 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.
- 16 World Health Organization (2013) *Guidelines for the management of conditions specifically related to stress*. Geneva: WHO.
- 17 Canterbury DHB (2019) *Canterbury Wellbeing Survey, June 2019: Report prepared by Nielsen for the Canterbury District Health Board and partnering agencies*. Christchurch: Canterbury District Health Board.
- 18 [www.qualityoflifeproject.govt.nz/survey.htm](http://www.qualityoflifeproject.govt.nz/survey.htm).
- 19 Statistics New Zealand (2016) *New Zealand General Social Survey 2016*. Wellington; Statistics New Zealand.