

# AKDN

AGA KHAN DEVELOPMENT NETWORK

## QUALITY OF LIFE ASSESSMENT PROGRAMME



Cover: Since 2008, AKF has been implementing the Mopti Coordinated Area Development Programme. Benefiting from the multi-input area development approach, the programme combines interventions in health, education, rural development, financial services and civil society strengthening to improve the quality of life for beneficiaries in the Mopti Region, one of the poorest in the country. **Photographer: Lucas Cuervo Moura**

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# INTRODUCTION

The overall goal of the Aga Khan Development Network (AKDN) is the improvement of Quality of Life (QoL) in the areas where its member institutions work. AKDN's vision and strategies encompass an improvement in material standards of living, health and education, as well as a set of values and norms in the organisation of society which include pluralism and cultural tolerance, gender and social equity, civil society organisation and good governance. AKDN therefore has a holistic view of what constitutes progress that goes beyond material benefits or only poverty alleviation, and which encompasses a more rounded view of human experience and aspirations.

In 2007, the Aga Khan Development Network (AKDN) initiated Quality of Life (QoL) assessments in geographical areas where it undertakes multi-input area development programmes. The QoL initiative differs from conventional monitoring and evaluation practice, which is usually project- or sector-based, rather than trying to understand changes in people's lives overall. QoL Assessments are carried out periodically (every 3-5 years) at a sub-national level in Tajikistan, Afghanistan, Syria, Mozambique, Mali and Tanzania.

The AKDN takes a long-term perspective, usually working in countries over decades, and so these assessments are designed to provide an overview of how people's lives are changing over time. The main aim is to analyse and adjust AKDN's interventions in the light of the findings.

The aim of the QoL studies is not to attribute specific results to the work of AKDN. The assessments can show which domains indicators are poor, and where they are improving over time. They can identify new unmet programming needs. The studies also show how people themselves think about their quality of life, and their priorities and aspirations, so that we can consider whether we have the appropriate intervention strategies. Attributing particular results to AKDN's work is difficult because there are many other influences on the indicators and outcomes included in the study, such as the work of other organisations (including government) and important sets of factors outside its control, such as global recession or climate change.

Impact assessment per se would require a different methodology that would need to isolate specific groups being targeted by particular interventions, which rarely cover the entire population of an area. In some geographical areas, given the scale and nature of AKDN interventions, it is possible to trace the links between activities



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and outcomes. For example, when AKDN is the major provider of electricity with a public-private partnership, then outcomes related to electricity may be attributable to AKDN. When the plan is to develop a geographical area and the overall aim is to improve the quality of life of people living in that area, then we expect to be able to contribute positively to improving QoL indicators over time.

It is important to note that the QoL assessment does not replace more detailed programme- or sector-level monitoring and evaluation. Indeed, monitoring systems require much more detailed data, and evaluations are often better carried out by external organisations to increase their credibility.

## CORE CONCEPTS

The term “quality of life” has been used for centuries but there is a renewed interest in the field of international development in looking beyond a material focus and only measuring standards of living. Concepts of well-being, quality of life and happiness are also gaining attention. There are an increasing number of initiatives, including some by national statistics offices, OECD and others that are using a wider range of measures to track societal progress.

AKDN’s understanding of quality of life is drawn from literature reviews which included Amartya Sen’s work on capabilities, and recent work on well-being and happiness. Sen has argued that rather than measure “utilities”, as economists tend to do, we should measure people’s capabilities, what they are able to do and achieve in their lives. Research undertaken by the Wellbeing in Development (WeD) group at Bath University in the UK indicates that people’s assessment of their QoL is not simply equated with happiness or well-being, but is related to the aspects of life they regard as important.

Research (and common sense) suggests that after certain material basic needs are met, material standards of living or wealth do not correlate directly with quality of life. For example, studies in developed, industrialised countries suggest that many groups within a population face high levels of stress, isolation and social exclusion which affect their quality of life. People’s subjective views of their resources and conditions are therefore important in assessing their quality of life. This is what Sen calls “capabilities to achieve valuable functionings”. What is considered valuable and what constitutes well-being may differ to some extent, in different societies.



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Concepts of well-being, happiness and QoL overlap in various ways. For these assessments, AKDN recognises that QoL has subjective, material and social elements. AKDN’s working definition of QoL based on the Wellbeing in Development research is: “an interplay between the resources that people are able to command; what they are able to achieve with those resources; and the meanings that frame these and drive their aspirations and strategies”. A more normative and simpler definition is: “a person whose basic needs are met, who can act effectively and meaningfully in pursuit of his or her goals, and feels satisfied with life”. Indeed, the latter could well be a definition of a *good* quality of life.

## AKDN's Definition of a Good Quality of Life



**“A person whose basic needs are met, who can act effectively and meaningfully in pursuit of his or her goals, and feels satisfied with life.”**

## METHODOLOGY

When selecting which aspects of life to assess, domains were based on the human development literature and on frameworks that look at assets or capital that people use in their livelihood strategies. The research needed to cover a broad range of life domains: the household economy, social and cultural life, the natural and built environment, health and education, and finally, issues of voice and representation. For each of these domains, AKDN drew on existing work to select key outcome indicators, including indicators used for the Millennium Development Goals where appropriate. AKDN agency heads and sector specialists from both within and outside the network were involved in the choice of indicators.

*The emphasis for this programme is on understanding changes in different domains over time, in a particular context, rather than comparing different contexts, where the use of an index could provide a simple but crude measure of comparison.*

AKDN included both conventional development measures such as school enrolment rates and nutrition levels, as well as people's opinions – for example, on levels of trust in their community or how they rate their overall quality of life on a 5-point scale. To capture some aspects of social relations and “voice and representation”, AKDN opted for qualitative methods as more appropriate. For example, an individual's level of trust in community leaders or their aspirations was too complex to approach through survey questions. Similarly, qualitative methods are best used to understand issues affecting access to and quality of services.

The idea of a composite “index” to measure quality of life was rejected on the grounds that it was unnecessarily reductionist and that weighting different components can be arbitrary and difficult. The emphasis for this programme is on understanding changes in different domains over time, in a particular context, rather than comparing different contexts, where the use of an index could provide a simple but crude measure of comparison.

In the first two geographical areas selected for the QoL assessments: Salamieh District in Syria and Gorno Badakhshan in Tajikistan, AKDN carried out exploratory studies to understand people's own socially and culturally embedded perceptions of what a “good quality of life” is, what it is to live well, and the domains and resources that they considered important. These studies confirmed the importance of the domains, topics and indicators selected for the assessments.

The exploratory study in the initial two countries used open questions and semi-structured interviews to test the domains and resources that people felt were important. In both countries, quality of life was understood to include material, social, cultural, psychological and for some people, spiritual aspects of life. Psychological and spiritual aspects of life are not fully covered in the main assessments, partly

because they are difficult to measure, but also because AKDN opted to prioritise dimensions that development agencies address most directly. Thus the programme aims to assess what matters most, to most people. In the exploratory study, the household economy was found to be important to meet basic needs – and economic factors were seen to condition access to education and health services, and influence social status, participation in society and stress levels. Domains were inter-related and there were clear examples of how lack of voice and social connections combine with economic difficulties to stop people from improving their lives. Good relationships at family and community levels were emphasised as key contributors to a good QoL. Improvement in the economic domain was not necessarily accompanied by an increase in satisfaction with other domains deemed to be important, such as health or social relations.

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# ASSESSMENT FRAMEWORK, DOMAINS AND INDICATORS

Following the literature review and exploratory studies, the framework, domains and list of indicators were finalised. **Figure 1** below illustrates the framework. AKDN's programmes affect a range of life domains either directly or through influencing wider policies and other institutions in the public and private sectors. By embedding the domains inside a larger puzzle, the figure illustrates that they are inter-related and interact, while people's own perceptions and levels of satisfaction with different domains, at the centre of the figure, drive their aspirations and strategies.



Figure 1: Framework for the QoL Assessments

**Good relationships at family and community levels are key contributors to a good quality of life.**



Two components were developed for the QoL assessments: a household survey and a qualitative study.

First, the household survey used a structured questionnaire to collect representative quantitative information for a core set of indicators at household and individual level (household head and spouse). The domains covered in the survey include the household economy, health, education, the natural and built environment, some aspects of associational life, voice and representation, as well as overall quality of life. **Table 1.1** below provides details of the survey's indicators.

Table 1.1: Survey Domains and Indicators

### Household Economy

1. % of households with sufficient basic food.
2. Household material asset levels (agriculture-related, housing, consumer durables).
3. Household income levels.
4. Individual savings levels.
5. Individual loans/debt levels.
6. % of working age individuals formally employed.
7. Individuals' priority use of savings (consumption - production).
8. % of households with migrants.
9. % of households with migrants that receive remittances.

### Health

10. % of deliveries by a skilled birth attendant.\*
11. Caesarean sections rate.
12. Chronic malnutrition (stunting) in children under 5-years old.\*
13. % of women receiving antenatal care.\*
14. % of individuals reporting ill-health in the preceding 2 weeks.
15. % of individuals visiting a health facility when ill.
16. Perceptions of individual health status over the preceding year.

### Education

17. Education levels in the population.
18. Primary enrolment rate.\*
19. Primary on-time completion rates.\*
20. Secondary enrolment rate.
21. Secondary on-time completion rates.
22. % of adults with higher education.
23. Adult literacy rate.\*
24. % of children enrolled in pre-school education.

Second, the qualitative study of “sentinel sites” focused on a limited number of villages and urban sites that were chosen to reflect variations in key characteristics which affect quality of life. This study does not yield representative data, but instead aims to capture diversity in the geographical area. In these sites, group discussions and individual interviews were used to explore a range of topics: changes in livelihoods, access to and quality of health and education services, aspects of social relations and associational life, issues of voice and representation, and concerns and aspirations among different population groups such as youth. **Table 1.2** on pages 12-13 provides details of the study’s topics.

### Built and Natural Environments

- 25. % of households with improved sanitation facilities.\*
- 26. % of households with access to an improved water source.\*
- 27. % of households with access to electricity.
- 28. % of households with access to telephone communications.
- 29. % of households with internet access.
- 30. % of households that own agricultural / grazing land.
- 31. % of farming households with access to water for irrigation.
- 32. % of households with access to green spaces (urban only).

### Voice and Representation

- 33. % of individuals who feel they can influence community leaders on decisions concerning their community.

### Social and Cultural Life

- 34. % of individuals who feel physically safe in their community.
- 35. % of individuals who trust most members of their community.
- 36. % of individuals who participate in groups and networks.
- 37. % of individuals with time available for leisure activities.

### Overall Quality of Life

- 38. Individual scores for overall QoL.
- 39. Individual scores for changes in overall QoL in preceding 3-5 years.
- 40. Individuals’ main reasons for positive/negative changes in QoL.
- 41. Individuals’ perceived top three problems in the community.

\* Indicators used for the Millennium Development Goals

**Table 1.2: Sentinel Sites Study Domains and Topics**

### **Household Economy**

1. Livelihood strategies and changes over time (by gender and generation).
2. Access to markets and changes in market access over time.
3. Access to and quality of financial services.
4. Savings behaviour and changes in savings patterns over time.
5. Loan/credit use behaviour and changes in their use over time.
6. Socio-economic causes and implications of migration (including how remittances are employed for consumption - production).

### **Health**

7. Access to and quality of informal/formal health care services and changes over time.
8. Any problems faced by women in using reproductive health care services.

### **Education**

9. Access to and quality of education services and changes over time.
10. Influence of gender on access to (and aspirations for) education.
11. Aspirations and obstacles facing young people in pursuing higher education.

### **Built and Natural Environments**

12. Access to and quality of basic services (electricity, internet, sanitation, telephone, transport, water) and changes over time.
13. Perceived changes in natural resources / the environment.
14. Any changes in the frequency of natural disasters and why these are perceived to be occurring.
15. Community preparedness to deal with natural disasters and changes over time.
16. Use of green spaces by different groups.

### **Voice and Representation**

17. Perceptions of “voice” and influence within the household and community (by gender and generation).
18. Trust in community leaders to provide assistance and effectively represent community interests.
19. Community experiences with local and international civil society organisations.

### **Social and Cultural Life**

20. Gender and generational relations (including womens’ mobility outside the home/village – subject to context).
21. Youth concerns and aspirations (including satisfaction with social life within the community).
22. Conflict resolution mechanisms employed by the community.
23. Participation and civic engagement through community groups/networks (by gender and generation).
24. Perceived trust and reciprocity in community groups/networks.
25. Collective responses to addressing community concerns/assisting community members in need.
26. Strength and inclusiveness of cultural activities (relating to cultural freedom and religious pluralism).

### **Overall Quality of Life**

27. Overall QoL scores (by gender and generation) and changes over time.
28. Factors that are perceived to make a “good” or “poor”QoL.
29. Main reasons for perceived changes in QoL.
30. Key aspirations of different groups within the community and how these aspirations have changed over time.

## KEY PRINCIPLES

It is important to use mixed methods – quantitative survey methods and qualitative research – to ensure a more comprehensive assessment of QoL. While some elements of QoL are more easily measurable, others have to be assessed and drawn out through discussion given their intangible nature. Using a combination of different methods is often the best choice: it allows for complementarity and triangulation, and helps overcome the limitations of each method. Triangulation refers to the use of more than two sources or methods to get answers to the same question, and helps to validate the data.

The key differences between the two Quality of Life study components are given below in **Table 2**.

Table 2: Differences Between the Household Survey and the Sentinel Sites Study

Household Survey	Sentinel Sites Study
<ol style="list-style-type: none"><li>1. Coded questionnaires</li><li>2. Large sample</li><li>3. Statistical analysis (numbers are key units)</li><li>4. Representative data</li></ol>	<ol style="list-style-type: none"><li>1. Semi-structured interviews / discussions</li><li>2. Small sample</li><li>3. Analysis of themes and patterns (words are key units)</li><li>4. Diverse data that relate to the context</li></ol>

The quantitative survey provides a core set of indicators at the household and individual level, which can be monitored over time. Qualitative work helps to analyse and interpret the findings of the survey, enriching results with additional contextual and in-depth information. It should increase understanding of how development and change occurs, from the point of view of programme participants.

**Key principles for the QoL assessments:**

- **Strict ethical standards such as confidentiality and respect for respondents;**
- **Rigour in the testing of the research instruments;**
- **Mixed quantitative and qualitative methods;**
- **Capacity building which develops research and analytical skills and encourages critical thinking;**
- **Using the results from the study to improve AKDN's programmes.**



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