Does wellbeing travel?
Debating universalism and cultural difference in understandings of wellbeing

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Small Group Discussion: Autonomy

Facilitator: Dr Debbie Watson, University of Bristol

Rapporteur: Oscar Garza, University of Bath

Rapporteur's Summary of Discussion:

This session discussed the concept of autonomy within four main areas: 1) Measurement concerns and issues; 2) Autonomy in a cross-cultural context; 3) Autonomy and its relevance for health and schooling; and finally 4) Policy implications.

Measurement:

The discussion started by acknowledging that measurements are imperfect and with the awareness that they can be taken as the only truth. However, it was mentioned that autonomy has been highly correlated with different domains of life and that Self-Determination Theory has used multiple methods in the measurement of autonomy, aiming to capture the variability of the term. Autonomy has been measured in general surveys, and in domain-specific, situation-specific, and momentary-focused studies.

Autonomy in a cross-cultural context:

The difficulty of designing culturally specific measures was questioned. Yet, it was emphasised that autonomy has to be differentiated from independence of choice, or detachment, or separateness as cultural relativist literature tends to use the term. Rather, autonomy was linked with empowerment (giving a voice to all), with people perceiving themselves as the source of causation of their behaviour. In fact, Self-Determination Theory has found that the variance of autonomy is more significant within the person than interpersonal variation. On the other hand, new measurements are trying to capture the total complexity by measuring not only whether there is satisfaction of psychological needs but also thwarting of the satisfaction of the needs.

Autonomy in health and school education:

During the discussion there were concerns in relation to the paternalistic approach and usual top-down discourse dominating the area of health. In this topic, the importance of understanding that people always have reasons for not doing what is good for them (for example eating healthy,

stopping smoking) was underscored. Therefore, it is essential to engage people to talk about their behaviour to find out their motives for not doing what it is best for them. Additionally, it is necessary to provide them with more information about their health, and assist them to endorse such values so that people themselves can make pro-health choices autonomously. Similarly, in terms of children's education at schools, the most important thing is to train teachers to be autonomy-supportive by engaging them in reflecting about their own experiences with past teachers and discussing which kind of teachers were the best and worst. The aim is to offer children a place with a supportive and sensitive environment where they can enjoy and have some satisfaction which, in turn, makes them want to go to school; in contrast to the high school drop-out rates observed in different places.

Implications and Policy

In terms of policy, it was noted that current structures and policies undermine and thwart the emergence of autonomy-supportive environments because society is structured in a way that is mainly focus on achievement. Within this structure teachers, for example, have to comply with the evaluation of outcomes; therefore they end up doing whatever it takes to advance in this policies which are 'outcome-focused reward'. And the same applies to companies and work situations.