Children's and young people's voices on their wellbeing

childhood wellbeing RESEARCH CENTRE

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Acknowledgements

Summary

This report contains the findings from a rapid literature search on children and young people's understanding of their own wellbeing and what they think influences it. Listening to children voice their own views is important for a number of reasons. They provide one of the necessary foundations to building relevant and appropriate (survey) measures of wellbeing for these age groups, an aim of governmental working groups. Also, the UN Convention on the Rights of the Child recommends that children's views need to be given due weight in matters that affect them.

In order to find studies containing children's voices, the search focused on finding published materials using one of two types of data collection:

- data collected using qualitative methods covering a broad range of techniques commonly used with children and young people
- data collected through open-ended questions in surveys.

Children and young people from ages eight to 18 were the focus, and UK studies were of particular interest.

Significant numbers of studies were identified based on UK children and young people, as well as some for other countries. Eleven substantial UK studies and nine non-UK studies were found that researched what children understand about their wellbeing in general. A much larger number, in total, of more focused studies were also found in which children and young people voiced their views about particular elements of their wellbeing (for example family and school life), or which focused on children with particular characteristics and experiences (for example looked after or disabled children). The review focused heavily on the studies of general wellbeing, which applied to most children and young people and spanned a wide range of domains.

Listening to children's voices through these research studies uncovered a large number of components they see as affecting their wellbeing. Taken together, these provide a good foundation of children and young people's voices on which to construct survey measures and indicators for monitoring their wellbeing, work that is on-going. The findings in this review suggest there is scope, resources permitting, to extend further the existing set of wellbeing measures for use in surveys with children and young people (for example the injection of pets and spiritual-beliefs). Translating the learning from children's voices into survey measures is likely to be helped by engaging children and young people as advisors on the design and testing of questions. The report also discusses the implications of the findings on children's voices for the task of measuring their subjective wellbeing in surveys. The author offers suggestions for ways of measuring children's wellbeing in general populations, which are in tune with their voiced concerns, but in the context of limited resources for carrying out the measurement.

Where there is a weakness in the materials covered in this review, it is in their failure to identify clearly how age differences affect children's views about wellbeing. This matters if age-appropriate survey questions are to be devised, which will serve as reliable indicators.

Several studies also draw attention to problems of language when devising measures of wellbeing for children, for example young children interpreting adult-talk literally, and not always understanding the meaning of 'satisfaction/satisfied', terminology commonly used in studies of adults' wellbeing. Where there is an omission in this review, it is the attention and space given to the many small sub-groups of children and young people in specific circumstances, which is an area needing further in-depth examination.

1   Introduction

A societal and government concern with the wellbeing of children and young people has led to a need to measure the subjective wellbeing of these groups. A battery of survey measures already exist which offer measurement instruments to carry out this task. However, compared with the very extensive development and research enterprise surrounding survey measures for adults, using cognitive methods and experimental trials, development work on instruments for children and young people is much less evident. In addition, there is a strong recommendation that children and young people have a voice in defining their own (subjective) wellbeing. These arguments come from advocates of children's rights, representatives from official bodies concerned with children, charities, and researchers of children who favour participatory research methods. There is some evidence that adults' views are not necessarily shared by children[1]. It is therefore important to investigate the extent to which children and young people's voices have been explored and heard in any development of survey measures of the wellbeing of children and young people[2]. This is necessary if we are to be confident that:

- we recognise and have covered the aspects of wellbeing that children feel are important to them
- we devise measures and survey instruments that will be meaningful to children and young people when they are used in the field
- we are not asking them about things they cannot relate to because they revolve wholly around adults' conceptions of wellbeing.

However, we must also be aware that children's views vary, not least in respect to their ages and stage of maturity, gender and socio-economic circumstances.

A short summary consideration of children's views on their own wellbeing was included in the briefing paper on *Childhood Wellbeing* by Statham and Chase (2010). This Report aims to widen the coverage of Statham and Chase's earlier summary by reviewing and presenting more of the existing literature. This will address the question of whether children and young people have been given sufficient opportunity to express their voices on wellbeing to be sure that all the elements of importance and concern to them have been raised. Only then can we be confident that children's voices have been or will be integrated into and underpin survey instruments for children and young people.

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[1] Evidence of differences in adults' and children's views can be found in Sixsmith et al (2007), who specifically set out to compare the wellbeing schemas devised by children, their parents and their teachers using photographs taken by children of what was important to them. Differences between adults and children are also noted in Watson et al (2012, Chapter 9) in relation to the meaning of play and playfulness; in 10- to 15-year-old children's understanding, language and definitions of crime (Fitzpatrick et al, 2010); in their views about health and health services (LaValle et al, 2012), community issues (NAPCAN, 2008); 10-15 year olds understanding and use of the concept of 'satisfaction' in comparison with adult usage (Taylor et al, 2010); and Thomas (2009, p5) outlines some other ways.

[2] Bradshaw et al (2006, p.7) claim that children's voices underpin their indicators: "Though children did not participate in the choice of our measures, many of our data sources present the voices of the children." In which case, this review is merely seeking to bring this material to light.

The report provides two things:

- an estimate of the amount of research that was found on this topic, within the short time-frame of the search
- a summary of the findings on the aspects of their lives that children and young people say are important to their own wellbeing (this includes listing the important elements or domains that influence their wellbeing).

Fulfilling the main aim of this literature review provides one of the necessary foundations to the Government's aim to measure and provide results for the nation on levels of children's and young people's wellbeing. This task necessarily involves the identification of a set of domains and appropriate survey measures of subjective (as well as objective) wellbeing that are suitable and appropriate to use with these age groups. Listening to children and young people's voices on what influences their own wellbeing is crucially important to this task. In addition, it is important to give confidence to the public that any measures used are meaningful and reliable, as well as fulfilling the UN Convention on the Rights of the Child (especially Article 12) and UNICEF recommendations. The UN position is that due weight should be given to children's views, which would include, among other things, their wellbeing.

1.1 Defining elements of this rapid literature review

The *literature search* was defined by a number of parameters:

- ***Target age range is eight to 18.*** The focus was on children and young people from age eight upwards, and limited at the upper end to age 18. This report is interested in how much published material is available for children and young people at different ages within the target range. Studies that focused solely on children and young people outside of this range were not considered. However, studies were considered when those within the target age range were included, in addition to those over age 18 or younger than age eight. It was rarely possible to disentangle the material by age in these latter cases.

- ***UK voices are the main focus:*** The primary focus was on materials examining the voices of children and young people living across the UK countries. However, in some cases, material from other countries is included where it seems relevant and important to this UK measurement aim.

More details on the approach, search criteria and sources used are set out in Appendix 1.

We also need to consider the kind of evidence, from the literature, that counts as children and young people's voices . The relevant literature refers either to 'voices', 'participation' or 'agency'. There are disputes over which are the appropriate and best research methods to truly reveal children and young people's voices. This issue is important to this review since it prescribes the sort of research studies and other material that count as evidence of these voices. Some commentators and researchers argue that even when children or young people themselves are the respondents, survey data does not always succeed in revealing their voices as distinct from the voices of adults. We consider this issue in more detail in Section 2 below in order to demarcate the literature that is included and excluded in this review.

1.2 In this report

Following the discussion in Section 2 of the type of studies that are included in this review, a summary of the quantity of materials found is presented in Section 3. Section 4 describes the main findings about children and young people's wellbeing from their voices. Section 5 considers some implications of the findings on voices for measuring children and young people's wellbeing in surveys. Finally, Section 6 presents the conclusions. These assess whether the extent and nature of the evidence found is a sufficiently solid foundation on which to develop UK survey instruments to measure the wellbeing of children and young people. Avenues of research that would support and extend this foundation are also identified.

2 Literature on children and young people's voices: selection criteria

The research methods that can uncover children's voices need to be considered since they are the subject of dispute. One view about collecting the voices of children and young people is that it necessarily has to be done using naturalistic or qualitative research methods (eg. Fattore et al, 2007). Under this heading a wide range of possible methods are considered acceptable, depending on the age of the child, for example:

- qualitative personal interviews with a Topic Guide
- Focus Groups of varied construction
- written contributions
- diaries
- Draw and Tell
- Camera Photos and Tell
- Photos for others to analyse[3].

This school of thought tends to be highly critical of any use of surveys for researching children. They regard survey questions and their coding categories as the constructions of adults. Survey questions and (adult interviewers) are also seen as implicitly prompting, prescribing and influencing respondents' answers. Generally these critics of surveys do not distinguish between different types of survey questions, or between surveys that have or do not have children's participation in their design and question development.

Other studies take a more pragmatic approach, rarely argued for in writing (eg. Rees et al, 2010; Bradshaw et al, 2006; The Children's Society, 2008). They are content to employ the qualitative methods listed above, but also to consider that data from quantitative survey questions administered to children and young people can reveal views about their wellbeing. The fact that children and young people are the survey respondents is sufficient. There are clearly political and epistemological differences underlying the more extreme positions adopted in this debate, and there is not scope to discuss these here[4]. But it is necessary to adopt a position in order to carry out this review.

Where should we stand in this debate? One can agree that pre-coded survey questions are often the construction of their adult inventors, and for this reason they leave less room for children and young people to express their voices outside of prescribed subjects and codes. However, on the side of precoded survey questions, it seems unlikely that anyone would seek to argue against them being genuine indicators of children's wellbeing in all cases, for example in the case when there was a very high agreement rate with a survey statement '*My family is very important to me'*. It is important to remember that best practice in professional and commercial survey fieldwork agencies is to undertake qualitative research and piloting in the first instance when developing surveys for new respondents or

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[3] See Lewis and Lindsay (2000) for further consideration of the appropriate methods and ethical issues in collecting data from children and young people.

[4] See for example the discussions of Standpoint Theory in Fattore et al, (2009) and Minoritarian Theory in Watson et al (2012, Chapter 7).

topics. Some organisations have even set up panels of children as advisors and given them training in basic research. These children are then involved in the design and testing of questionnaire questions. This preparation enables surveys to capture respondents' views more accurately[5]. Also, the use of open-ended questions in surveys moves us further towards allowing children and young people to provide survey responses that potentially reveal their voices.

On the other hand, when qualitative methods are used to access children and young people's views, it is not children and young people who are wholly in charge of the data that are collected. Adults are usually in charge of the questions children are asked, as well as the way the data are later analysed. This recognition of the role of adults, even in the collection of qualitative data from children, is only one of the points that starts to show how there are similarities between data collected using different methods. Critics have also been querying what these qualitative data actually represent. These suggest that we should not make excessive claims, nor hard and fast distinctions, that qualitative data automatically constitutes better quality on children's voices in comparison to data collected by other methods[6].

The compromise position adopted in selecting materials for inclusion in this report is as follows:

1. it is accepted that qualitative or naturalistic methods in their various forms, sensitively used, offer an important access route to uncovering children and young people's voices, in contrast to adults'

2. well-constructed surveys that offer children opportunities to answer or fill in open-ended questions can also be a route to uncovering children's voices

3. surveys containing only pre-coded questions, devised by adults, will not necessarily offer children an opportunity to express their voices and, in view of the disputes surrounding such data, are not included in this review[7].

However, having identified the important messages that children and young people voice, it is entirely reasonable, but not the subject of this review, to encapsulate these viewpoints into survey instruments in order to quantify their extent, as researchers and other agencies have been doing.

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[5] A very good example of this practice can be seen the development work carried out to extend the British Crime Survey from being a survey of adults (age 16+) to include 10- to 15-year-olds into the sample (see discussion of the qualitative research preparation in Fitzpatrick et al, 2010, Chapter 3).

[6] For example MacNaughton (2005, pp.130-1) lists a series of questions that need to be considered in collecting such data (eg. Which children express their voices?); Lewis (2010) points out that silences can be communications where children are the concerned; Spyrou (2011) offers further critiques; White and Petit (2004) critique participatory approaches to collecting data for any respondents (they mainly have adults in mind). Dockerell et al (2002) also point out some of the issues and pitfalls in collecting data from children, which are particularly acute for children aged 5 or under; Lundy (2007) questions whether children's voiced opinions can produce meaningful data in all circumstances.

[7] Fieldwork agencies that use children and young people to help them design and test questions for use with these age groups are less open to this criticism. The National Children's Bureau have adopted this approach.

The focus of this review, therefore, is on research or other evidence collected using either qualitative research methods or open-ended survey questions, as described under points (1) and (2) above. Most attention is given to materials published since 2000 as it is a contemporary view of children and young people's wellbeing that is being sought.

It is however important to consider the recognised limitations of qualitative data using small numbers of cases. Such data cannot be regarded as representative of all children and young people. However, since our purpose is to identify the types of issues and domains of life that are important to children and young people's wellbeing, this characteristic of qualitative data as lacking representativeness is not particularly limiting. We only wish to generate as many of the domains as possible that children and young people voice as being important to them. It can be left to (subsequent) survey work to identify the extent to which these views are shared across wider population groups.

3 Material covered in this review

The search strategy outlined in Appendix 1 identified a range of publications that contained information about children and young people's wellbeing. Far more items were generated from the searches than were relevant to this review. This was partly because it was not possible to make databases' classification categories and keywords match precisely the type of material being sought[8]. Where abstracts were available, it was possible to sift out some of the irrelevant material. However, a manual inspection was needed of the remaining items. Some further decisions were also needed in order to settle on what material should go into this review.

The research materials identified as genuinely offering children and young people's voices fell into a number of groupings.

1. **Studies that covered the wellbeing of children in general.** Such studies asked children and young people about their wellbeing in ways that would be appropriate to almost any and all children and young people. Such studies are definitely of interest to this review and are given the most prominence in this review.

2. **Studies that focused on wellbeing in a particular aspect or domain of life relevant to all children**, for example, family relationships, school, or crime. Given that the subject matter of such studies was prescribed in advance, children and young people were less likely to be able to voice the view that this was important to them, without having been prompted by adults. But such studies allow children and young people to communicate to researchers and survey practitioners which issues would need to be faced in asking survey questions on such topics if meaningful data on their wellbeing were to be generated. Such studies can be viewed as offering further detail under some of the important wellbeing domain headings. These studies are of relevance to this review, but in the interests of brevity, they cannot all be discussed. There are many such studies across a wide range of particular groups, although fewer on any one topic area.

3. **Studies that covered aspects of selected children and young people's wellbeing on a particular topic but which could be applied to many children and young people.** This would generally be an aspect of life. One popular topic was the consideration of how low family income or growing up in poverty affected the wellbeing of children and young people. While the focus of these studies was on particular groups (for example, low income), their concern was usually across a range of aspects of wellbeing. Such studies were regarded as important because they offer insights into elements of the wellbeing of substantial sub-groups of children and young people. These studies, like those described in the second group, would need to be considered in elaborating sub-domain levels and measures of wellbeing. Therefore these studies are reviewed in this report, although less extensively than those in the first group.

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[8] For example, distinguishing reliably between studies using survey data and qualitative data is not always possible in searches based on key words. Distinguishing between survey data using open-ended as opposed to closed-ended questions is definitely not possible.

4. **Studies that covered the wellbeing of particular and often very small groups of children and young people about aspects of their wellbeing that related either solely or mainly to the nature of their particular group's experiences.** Studies in this group include those that ask looked after children about entering and leaving care or their experiences of the Family Court system, and those that ask children with particular health conditions or disabilities how their condition affects their wellbeing. A regular aim of these types of studies was the evaluation of services that certain groups of children had to access. They were being given the chance to voice their opinions about such services and how they affected their wellbeing. Such studies were regarded as of secondary importance to this review. This is largely because the number of small sub-groups who have been studied is too large to do them all justice in this relatively short review. They each need separate in-depth consideration by the nature of them being distinct sub-groups.

3.1   The quantities of studies identified

Of the two databases searched, the National Children's Bureau library produced the most items, 256 in total. The Childhood Wellbeing Research Centre (CWRC) database produced 72 items and a further 108 items labelled 'other' were collated from a mixture of known studies or publications, trawling the web site pages of known experts and authors on this topic, and adding items from bibliographies of relevant materials already known. Once duplications had been identified across the sources, 397 unique and seemingly relevant published materials on children's or young people's voices on wellbeing were identified. Further inspection of abstracts or the content of each publication revealed whether they fitted the criteria set out for this review, and enabled many to be discarded.

The numbers of items found to have general relevance to this review are listed in Appendix 2, Table 1, classified by their subject matter. However, since some of the items are collections of papers in an edited book, this is not the full count of separate studies identified. In addition, one of the known experts approached drew our attention to her draft literature review on children and young people's wellbeing in the domain of health and health service interactions (entered as one item in Table 1). Where studies fell into more than one category, a decision was made about which was their main category, except where duplication in counting is indicated in Table 1.

Studies listed in the higher rows of Table 1 (above the 'out of scope' heading) all contain at least some findings based on qualitative or open-ended survey questions. Such data were defined, for the purposes of this review, as necessary to reveal children's or young people's voices. However, large numbers of items were not relevant to the focus of this review. This was either because they did not contain the type of data being sought, (that is, UK or international studies using survey data or quantitative indicators only, or studies focusing on theory, policy, methods or ethics) or because they focused on children in very small groups, who have particular characteristics or experiences.

Studies considered to focus on wellbeing in general and to reveal children's voices consisted of 14 items in the NCB database and 17 in the 'other' materials. These general studies often also included consideration of some of the sub-categories of wellbeing (for

example, school, family, health). It is also important to note that larger studies often had more than one publication in which their findings were presented and discussed. For example, *The Good Childhood Inquiry* generated a number of publications that overlap in their content. Therefore the number of items does not represent 14 or 17 separate or unique studies on wellbeing.

None the less, a number of conclusions can be noted from this consideration and categorisation. A sizeable number of studies revealing children and young people's voices on wellbeing have been undertaken and published, since the start of the 21st century. These studies cover wellbeing in general as well as a wide range of sub-domains in which children and young people's lives are lived out. It is important to remember that the selection of studies found, which might seem somewhat idiosyncratic, was highly dependent on the search strategy employed. This selection rests on the databases to which there was easy access, rather than being a comprehensive literature search. However, experts' opinions were collected, alongside the database searches. This gives us greater confidence that the main general studies have all been identified, as well as the likely range of existing studies and sub-groups of children and young people whose voices on their wellbeing have been studied. However, we do not claim to offer an accurate estimate of each type's numerical representation in the literature.

In the next section, we begin to examine in more detail (albeit still in summary form) the content of some of these studies, along with the age range of participants.

4   The meaning of wellbeing from children and young people's voices

We now consider the more recent studies examining children and young people's voices on their wellbeing in general. There is no intention to rehearse the many domains that have been suggested and used earlier from sources other than children's voices. Holder et al (2011, Appendix G) provided a comprehensive list, from these earlier studies, of 74 domains of wellbeing alongside the frameworks that have used them[9].

Of the studies based on children and young people's voices, nine research studies and two other studies were found for England, two research studies in Wales, and a further UK-wide consultation exercise by the Office of National Statistics (ONS)[10]. Their summary details are displayed in Appendix 2, Table 2. Two of the nine England studies were cross-national, and involved other countries collecting similar data and comparing it with children and young people living in England. We also found three research studies carried out in Ireland, one in Australia, three in Germany, and two in Spain (Table 3 in Appendix 2).

Of the studies in the UK, by far the most substantial have come from the on-going programme of research by The Children's Society. This organisation, in collaboration with the University of York, has generated large amounts of data about wellbeing from the voices of children and young people, certainly since 2005. Their aim in collecting the qualitative voice accounts has been done mainly for purposes of building these insights into subsequent survey instruments. Starting in 2005 with a group of teenagers aged 14 to 16. The Children's Society's research has been progressing back down the age spectrum to give voice to younger children. In the list are also two useful studies carried out in Wales. Of the other non-UK countries, substantial contributions to this topic can be found in several Irish studies by authors including Gabhainn and Sixsmith (2005) an Australian study by authors including Fattore et al (2007) and a Spanish study of adolescents (see Malo et al, 2009). It is well worth including the insights and findings from these particular non-UK studies into the summary of the main findings from children and young people's voices on their general wellbeing. German qualitative studies by Andresen and colleagues on what children aged 6 to 12 think are the important elements of the good childhood have also been integrated with the survey development and data collection for the World Vision survey (Andresen et al, 2010).

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[9] This list of 74 domains comes from existing social wellbeing, quality of life, health-related quality of life and health status measures, surveys, and indicators.

[10] The two other publications displayed in Table 2, namely DCSF (2007) and Children's Commissioner for England (2008-09) contain collections of children's voices, but do not claim to be systematic research studies. The findings from the ONS UK-wide consultation is written up in Evans (2011).

4.1 Findings about children and young people's voices on general wellbeing

What wellbeing meant to children and young people, as voiced in these studies, showed the concept to be complex and multidimensional, as noted in the literature. A chart of the collated components of wellbeing emerging from most of these studies is presented in Table 4.

A variety of ways to present the diverse and extensive sets of findings were considered. In the end, a three-category framework was used, which placed the wellbeing components under one of the following headings:

1. Quality of relationships
2. Quality of environment
3. Self and freedoms.

Both The Children's Society (2008), and other studies presented overarching frameworks looking much like this one. This framework allowed for the other components identified in most studies to be placed within it. However, studies sometimes found children voicing the importance of quality of relationships or environment in general rather than in the context of one of the specific sub-headings. Where this occurred, it is indicated in Table 4 by a capital (**X**) on the relevant heading row.

The components listed under the three major headings were an amalgamation of headings noted in the various studies. The most extensive list from The Children's Society's work was used as the first set, and others were considered for how they overlapped or extended this set of domains. Sometimes sub-categories were modified to allow for the overlap with another study's findings. The components listed, in the left hand column, under the three major headings, are at a reasonably fine level of detail. This is not usually the level that studies ended up discussing in their conclusions, which were, on the whole, far more general. However, it is important to note that the overlaps in findings between these studies were very substantial, even at a fairly detailed level. The detail is important when it comes, later, to representing these voices in specific survey questions. Even so, it was not possible to represent fully all aspects of every component of wellbeing listed in the row titles, and in a way that avoids unnecessary duplication of row items[11].

The items labelled 'qualities' (that is, love, care, support, fairness, respect etc.) were the most difficult to place. They are placed under the major heading of 'quality of relationships'. But some of these qualities could also fit under 'environment'. However, they were most commonly voiced by children as important to their relationships wellbeing. However, these relationships could span over different environments such as the home, school or neighbourhood. A few items were difficult to fit in and have been left out. For example, at

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[11] In particular, in Table 4 'support' includes parents doing discipline and setting boundaries for children; 'learning achievement' includes 'recognition' and 'competence'; 'values attitudes agency' includes 'autonomy' and 'taking responsibility'; and 'self esteem' includes 'self image'.

least one set of authors has argued that transitions between states be added to the list of wellbeing components[12].

Some columns/studies identified more components of wellbeing than others. This does not represent inferior versus superior studies. Nor does it necessarily represent conflicting findings or views. The aims, constraints and probably funding limited some studies and their focus. So it is not surprising that more narrowly focused studies, often using smaller numbers of children and spending less time talking to them, led to children voicing fewer numbers of components of wellbeing. The ages of the children included also varied. In the same way, studies took different approaches and used different methods of asking children about the meaning of wellbeing. As a result of these many variations, different subsets of components were emphasised to varying extents.

The large amount of work done by The Children's Society, in multiple studies, is covered by only two columns: one in which they presented their early material, plus another adjacent column. The second column identifies the components, additional to the ones identified earlier (2005), that emerged in later consultations and data collections, partly from a younger group of children.

The other major difficulty in assembling this list of components of wellbeing was how to incorporate the findings from Australian research by Fattore et al. (2007, 2009). Fattore and colleagues set out to distinguish the report on their study of children's wellbeing from reports of other overlapping studies. Whereas other researchers classified the activities children talked about into types, Fattore et al sought to identify what was *significant* to children about doing these activities. Their answer was that it was the context in which the activities were performed that was significant and important to children. They subsequently derived indicators from these insights that were aimed at describing the *opportunities* (that is the context) for children to gain the same experience that would enhance their wellbeing. Such opportunities would not necessarily involve the same activities as those used to identify the wellbeing value gained. One schema they present to link their work with indicators research is reproduced for information in Table 5 in Appendix 2. The column of wellbeing domains fits easily into the list drawn up from other studies in Table 4, but the list of wellbeing dimensions is more problematic. While this is an interesting and in many ways highly insightful study, many items do not easily translate into survey questions on wellbeing that could be put to children or young people, and especially to young children (eg. age eight to ten). In fact, what these authors present across their publications is a very adult-focused analysis and assessment of the data they collected from children, notable also for the absence of children's verbatim quotations. The deeper level of understanding of wellbeing they offer, ironically, is therefore not actually presenting children's voices. It presents an adult researcher's analysis and understanding of what children meant and signified by their *voiced* data. This happens in all research to some extent, but these authors have certainly gone further in this respect than other studies in this field. However, it is still possible to draw out from their study publications a set of domains (Fattore et al, 2009, Table 1). Some of their headings overlap with those listed in Table 4, and where

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[12] Transitions between states was flagged up as a wellbeing matter in at least one study (Evans et al, C4EO, 2010), for example transitions between schools, between house addresses, and a parent leaving or joining the home.

possible they are included in a column of Table 4. However, Fattore and colleagues may not approve of the presentation of their work in this way.

It is also worth drawing attention to several other studies. While these are not studies on children's voices about wellbeing, they have important points for note when collecting data from children. Spilsbury et al (2009) found that children and adults mean very different sizes of geographical area when they answer questions about their local area[13]. This can lead to apparent discrepancies between parents' and children's answers, and needs to be paid more attention in the development of survey questions. The word 'satisfaction', commonly used in survey questions on aspects of wellbeing, has also been shown to be understood differently by adults and children, and children have been found to confuse 'satisfaction' and 'satisfactory' (Taylor et al, 2010). The importance of language and the need to provide context to make questions clear for 10- to 15-year-old children who tend to understand questions literally is a point made by Fitzpatrick et al (2010).

We can now conclude the discussion of children's voices on the components of children's wellbeing in general. Listening to children's voices has produced a large number of elements they see as affecting their wellbeing. It is worth drawing attention to two wellbeing components voiced that are less often recognised, especially in indicator studies: pets and spiritual beliefs. In nearly all of the studies of children's voices that included pre-teens, pets were mentioned and often viewed as 'one of the family'. Taken together, the items voiced in the studies reviewed certainly provide a good foundation on which to construct survey measures and indicators for monitoring their wellbeing. Work on creating such measures has already been carried out, for example by The Children's Society, among others. The review of this qualitative material suggests that there is probably scope to extend the set of wellbeing categories and measures currently in use. There is also a need to give particular attention to specific words, commonly used in surveys of adults, and to provide important contexts when devising survey questions for children, or else they will be open to misunderstanding.

4.2   Dimensions of difference in the meaning of general wellbeing

Here we consider whether the understandings of their own wellbeing, as voiced by children and young people, vary by socio-economic circumstances, gender and age. There is certainly evidence from quantitative survey data on variations by these, and more, characteristics. However, the focus here is to consider whether the concerns and meaning voiced about wellbeing varies between different groups of children.

Variance in understandings of wellbeing from children's voices by whether they live in poverty or in deprived areas is reasonably well covered in the literature[14]. Some common messages emerge from such studies. Children's accounts of the effects of living in low income households show that inadequate income had both direct and indirect effects on

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[13] This was shown by plotting out and measuring the areas parents and children had in mind when they answered the questions.

[14] See literature reviews by Ridge (2009, 2011) and earlier work Ridge (2002), Wager et al. (2010), Sutton (2008), Sweeney (2008), Andresen and Fegter (2011) and Andresen (2012) for Germany, and Haju and Thorod (2011) for Norway and Sweden.

their wellbeing. The lack of money affected the material goods, branded goods and essential items such as school uniform and coursework materials they could have. But also even the amount of food and essential everyday items were sometimes restricted. Lack of money and essential and fashion items affected children and young people in a number of ways: their social relationships, their ability to participate in school friendships and leisure events, whether or not they were transported to places, and whether or not they had opportunities to go on holiday. Their self-esteem and potential for self-determination were also affected, and internal family conflict could be generated. Such children expressed feelings of insecurity, anxiety, humiliation and shame.

Children living in poor households experienced further effects because they often live in deprived areas. Such areas add to their problems by generating fears about personal safety from features of the environment (for example, broken glass, discarded drug needles, drunken adults, poor and vandalised facilities, other aggressive [older] children, gangs, and sometimes from the police). The issue needing to be considered here is whether these (mostly negative) wellbeing experiences of children living in poverty would be uncovered by data collection around the list of domains outlined in Table 4, or whether some additional or different approach would be required. I suspect that all of these admittedly extreme experiences could be captured in a good quality and sensitively designed general survey of young people[15]. Living in rural compared to urban areas, as explored in some wellbeing studies (for example, Gabhainn and Sixsmith, 2005), raises some of the same issues[16].

On the issue of gender differences, there is evidence in the Irish study (Gabhainn and Sixsmith, 2005) that girls and boys did produce some variations in their lists of 'important' components for their wellbeing in the early stages of this study. The gender differences may have been greater in the younger rather than older age groups. Other than this evidence, there has been little investigation, via children's voices, of any systematic gender differences in voices about wellbeing. Gender differences in wellbeing, possibly in combination with age differences, could be a focus for further research. However, there is no evidence to suggest that girls and boys would be unable to answer the same survey questions for measuring their wellbeing, even if their emphases differed.

Age differences in the understanding of wellbeing have been given rather token recognition in the studies of children's voices. However, there is evidence pointing strongly to the conclusion that younger and older children identify different dimensions of wellbeing, use different language to describe elements of their wellbeing, and place different emphases on some dimensions. Some studies have noted age differences in passing, without necessarily giving this a systematic analysis. For example, younger children have voiced the effect on their wellbeing of pets, time spent specifically *together* with parents, family

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[15] The most challenging elements would be children's confessions of their feelings, which would definitely need to be done as self-completion questions. Routings could be inserted to explore these extremes; responses to more general (and screening) questions could be used to identify sub-groups of children living in poverty and route them to specific (self-completion) question modules that they alone would answer.

[16] There can be positive effects from the rural neighbourhood in terms of freedom, safety, and landscape as well as negative effects from lack of transport and other facilities, more so for older young people. Differences were found in the dimensions of wellbeing children voiced in rural compared to urban areas in Ireland. These were later collapsed into one set of dimensions across all areas, both genders and different age groups.

holidays, and festivals and outdoor play. Older children mention sex and romantic relationships, help from champions, and give greater importance to friends and peers compared with parents and family (The Children's Society, 2008, 2010). However, a more systematic analysis may uncover a wider range of items. Putting all these together in one survey may lead to embarrassment among both older and younger children, and therefore needs sensitive handling. Also, language differences and abilities between children and young people of different ages would point to the need to phrase questions differently for different age groups, even about the same aspect of wellbeing, as noted in Fitzpatrick et al. (2010). The lack of attention to age differences in the literature may lead, therefore, to the construction of poor indicators, if researchers are not attuned to considering these issues[17]. Age differences are likely to become even more important as wellbeing specialists work on devising measures for children under eight, as they are currently doing.

4.3 Children's voices in particular circumstances

As the earlier list of identified studies shows (Table 1), there are many other published materials voicing children and young people's views about their wellbeing that relate to their particular circumstances. The rapid literature search for this paper suggested that the most extensive of these, by their number, related to children experiencing the care system (see Appendix 3 for a list of studies) or the health services[18]. In the case of the care system and looked after children, studies have often been carried out in order to fulfil the legal duties on statutory agencies to consider and consult with such children. What is also clear from a cursory examination of these materials is that children in these and other particular circumstances have voiced concerns that would not necessarily fit easily into a general survey of the child population.[19] Other research, some still in progress, has been undertaken on small groups of children and their wellbeing (for example those of Gypsy, Roma and Traveller populations, young offenders and disabled children), by The Children's Society among others.

There are a significant number of advocates arguing that these and other vulnerable children should not be left out of exercises to monitoring children and young people's wellbeing. So this is a challenge needing to be considered seriously, which we return to in Section 5 below.

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[17] A recent attempt to draw up a child-centred indicator of material deprivation created a scale which counted up the number of 'must-have' items children possessed. Younger children had fewer items than older children, with the implication being that younger children were 'more deprived'. This probably represents the initial single scale's failure to reflect variations in consumption norms across age groups.

[18] A more detailed review of children and young people's views about the health services and their interactions with this provision was recently carried out for the Department of Health, LaValle et al (2012). The review is based on 66 research studies and 46 contributions to a consultation. Larger numbers of studies (677) and consultation contributions (93) were initially obtained. The main conclusions of this review are listed in Appendix 4.

[19] For example, one concern is with the far too regular changes in a child's social worker that leaves them feeling even more vulnerable.

5   Implications for the measurement of subjective wellbeing

This review was conceived in order to inform the task of measuring the subjective wellbeing of children and young people. It is appropriate, therefore, that it should point out some of the implications of these findings on children's voices for this measurement task. The two main areas considered here relate to all children and young people. First, there is the need to reduce the large number of wellbeing elements that have been voiced in studies to a smaller manageable set. Secondly, there is the matter of age differences to consider in devising measures of children's compared with young people's subjective wellbeing. Insofar as we have relevant information, these two areas of 'implications' are considered together below. However, it important to note that the evidence base about age differences is very thin in the literature, and is in need of further study. A third area to consider is that of specific and small sub-groups of children or young people, where the 'implication' to flag up is that further in-depth work is needed.

A large number of themes of wellbeing were mentioned across the various studies on children's voices, as indicated in Table 4. In total, these would be too many to be incorporated into most single surveys of children. Hence, some ranking would be helpful, of what the most important elements are. This is necessary especially where resources, questionnaire space and time, and children's willingness to respond are all constrained. The studies of children's voices reviewed in this report rarely asked children to rank, by importance, the various elements voiced about their wellbeing. None the less, a number of studies did offer their views about which were the most important, and these all agreed that the most important thing to children was their family, by which they meant their relationships primarily with their parents. Relationships with friends were also put high on the list[20]. When children were younger, friends took second place in importance to family/parents. However, 'friends' either competed for equal first place with 'family/parents' or were the most important as children grew to be adolescents. 'Safety and security' were the other summary components suggested to be of crucial importance to children's wellbeing. These elements can cover different domains and environments including the home, school and neighbourhood. However, for most children and young people, neighbourhood was the primary environment in which safety issues arose.

The minimum level of coverage of children and young people's subjective wellbeing in future surveys would need to cover these elements: the quality of relationships with parents and friends, and feelings of safety and security in the neighbourhood and probably also in school.

However, a deeper and more meaningful level of measuring children's wellbeing would be gained by expanding further the measures of children's wellbeing, questionnaire time and resources permitting. The three-fold framework adopted earlier (Table 4) of 'relationships',

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[20] These priorities coincide with the number of mentions of words that were offered in The Children's Society's (2008) 2005 data collection (in open-ended survey questions) on: 'What do you think are the most important things that make for a good life for young people?' and 'What do you think stops young people having a good life?'. In order of mention came: friends (4164 +254 mates), family (3091 +1710 parents), bullying (2311), do (2106 +466 activities), school (1582 + 886 education +298 teachers), drugs (1182), go (1090), home (945), fun (897 +262 enjoyment), money (825), caring (767), loving (723), support (516), freedom (501) and safety (423).

'environment' and 'self' provides, in this author's view, one useful framework within which to consider deepening the measurement of children and young people's subjective wellbeing, while reducing the number of items to be measured. It is certainly not the only possible organisational device around which to group the components of wellbeing voiced by children (see Appendix 2, Table 5 for one alternative example[21]).

Some prioritising or aggregation is also needed to cover the range of elements mentioned, if a more manageable set of elements is to result. For 'relationships', this is largely achieved by using the prioritising that emerged from the studies, unless otherwise stated. Under the heading of 'environment', a natural aggregation appeared, that of three main environments: home, school and neighbourhood (or community) with more and less important elements under each of these headings. Under 'self'', further sub-groups were created by the author of this paper, namely health, educational, choices and psycho-social (which partly overlaps with health). It is more difficult to prioritise these components of wellbeing, since few, if any, were given priority in the studies themselves[22]. Elements placed under the psycho-social heading were those tending to have established measurement scales. In these cases, it is more difficult, and less advisable, to truncate these measures to fit into a more general purpose survey. The advice would be instead to leave the consideration of such topics and their measures for a more focused survey.

The three-fold framework, along with some further aggregation and prioritising, was found to provide a useful framework to take forward the task of measuring children's and young people's wellbeing. It is also a framework within which the findings from the range of studies can also be fitted, as demonstrated in Appendix 5 for a selection of studies.

5.1   Relationships

We can consider relationships in more detail alongside the qualities children indicated were important to them in judging whether these relationships increased or decreased their sense of wellbeing. Table 6 sets out the main relationships children and young people have. They are ranked in order of importance (on the top row), largely based on conclusions reached in studies reviewed. Relationships with parents are at the top of the ranking, with relationships with friends and other family coming in joint second. 'Pets' have been given the same ranking as friends and other family by the author on the grounds that children specifically voiced the importance to them of their pets, in terms of them being *a member of their family*. Teachers are ranked third and relationships with others fourth. The ranking of these relationships is implicit in many of the studies reviewed, but explicit in others. Where resources for measuring wellbeing are restricted, the ranking of these relationships offers a way to focus on measures about relationships in a priority order. The qualities that children look for in relationships which enhance their wellbeing are also listed in Table 6, and these vary according to who the relationship is with. For example, children

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[21] For example, Newton et al (2011) organise some of their findings for 16- to 19-year-olds around the themes of 'people in their lives', 'how they socialise', 'spaces and times they socialise', also adding further themes such as education and learning, behaviour, local environment, community, money, attitudes, health, fast food, music and activities.

[22] In the case of 'health', one study even pointed to the lack of concern among children and young people about their own health issues. Health was mentioned in some studies, but still seemed to be given lower priority. This illustrates the limitation of going over to wellbeing measures driven wholly by children's voices.

look for the full list of qualities from their parents: love, acceptance, care, listening, togetherness and belonging, praise, respect and fairness. However, they seek only subsets of this list from other key relationships.

The author of this paper makes some further suggestions for possible ways of devising practical sub-sets of measures of wellbeing for children and young people about their relationships. These suggestions build on the idea that it is advisable to focus on the things children appear to be looking for in the particular relationships. But there are probably some short-cuts (indicated by 'SC' in Table 6) instead of having to ask questions on all the qualities. One can envisage asking children whether they feel 'loved' by their parents. Affirmative replies on this single question could be regarded as an indication that they would likely say, if asked in separate questions, that they also received the other qualities from their parents as well (eg. care, acceptance, support and possibly respect)[23]. Similarly, asking children whether their friends 'support them' or 'care about them' would also be short-cut questions to cover the range of qualities friends offer. However, not all qualities are covered by the short-cut quality (for example loving parents are not always necessarily listening parents). In summary, asking about these qualities of relationships in surveys will serve to deepen the understanding of children's need for security.

Table 6:   Relationships that are important to children and young people, their rank of importance, and the qualities that are important in each particular set of relationships

Rank in importance	(1)	(2)	(2)	(2)	(3)	(4)
Qualities	Parents	Friends	Wider family*	Pets	Teachers	Others **
Loving	√ SC		√	√		
Accepting	√	√	√	√		
Caring	√	√ SC	√ SC		√	
Listening	√ <>	√	√	√	√ SC	
Supportive	√	√ SC	√ SC	√	√	
Togetherness-belonging	√ <>		√			
Praise	√ <>				√	
Respect-Fairness	√	√			√ SC	√

*these include siblings, grandparents and other relatives
SC the author's suggestions for short-cut alternatives
<> not covered by the short cut
** these can include neighbours, champions and the police

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[23] Ideally this could be tested out by asking questions about all of these qualities and carrying out Confirmatory Factor Analysis on the results to test the clustering and overlaps in responses.

5.2   Environment

Each of the three main sites of environmental wellbeing are displayed in Table 7. Items which appear under these headings are those that tend to have support across many of the studies reviewed. In circumstances were resources are restricted, it might be necessary to choose to cover one or two of the areas under each heading, and the choice might vary according to the age of the child. For example, freedom and autonomy are issues that adolescents voiced as important, but younger children did not. In the case of togetherness – doing things and spending time together with one's family – this is a wellbeing concern of younger children more so than young people. Likewise, achievement and learning opportunities in the school environment were more of a wellbeing concern voiced by older rather than younger children, and safety in the neighbourhood a concern for older more than accompanied younger children. In an extensive consideration of children's wellbeing, or one that focused on only one of these environmental domains, one would expect to cover most or all of the elements under the main sub-heading being examined.

Table 7:   The characteristics of children's and young people's environments that affect their wellbeing

Home	School	Neighbourhood
Freedom-autonomy, and responsibility (YP)	Friendships	Facilities for activities-leisure, Sport, Youth Club (YP)
Togetherness, Play, Fun (C)	Safety-bullying, abuse, intimidation	Safety (YP)
Privacy, 'Space', Time (YP)	Achievement opportunities (YP)	Play, Fun (C)
Enough money	Learning opportunities (YP)	[Transport]
Technology and goods		
Holidays, presents		
[Safety]		

[ ] in parentheses means it does not apply to all children.
(YP) wellbeing concern mainly from young people
(C) wellbeing concern mainly from younger children

5.3   Self

The wellbeing components from these voices that relate to them as individuals are displayed in Table 8 grouped under four main headings. As with environmental elements of wellbeing, it may be that one or other of these groupings becomes the subject of a measurement study. But if all the general (column) headings need to be included in one measurement exercise, it may be necessary to select one of two of the components from under each of the headings, where resources do not allow for coverage of all of them. With this in mind, items that are starred in the table were voiced most often across the range of voices reviewed in this report. These could be used as the basis for an initial selection.

However, surveys could rotate question areas from year to year to cover a wider set of issues. There are also likely to be age differences in deciding whether these items are appropriate, and in the language needed to explore them in surveys. The literature does not provide clear information or guidance about these issues in most cases.

Table 8: Wellbeing sub-domains under the heading of 'Self'

Health	Educational	Choices	Psycho social
Physical	*Achievement	Lifestyle	Self-esteem
Emotional, mental	*Aspirations	Values, Beliefs, Attitudes	*Identity
Behaviours	Learning	*Use of time	Appearance
*Food, Diet	Responsibility	Music	*Agency
*Exercise, Sport		Art, Culture	Self-determination
		Clothes	Responsibility
		*Possessions, Money	Food diet
		*IT, Technology, Media	
		*Freedom-responsibility	
		*Sports, Activities, Outdoors	

*Items more commonly mentioned across the reviewed studies.

5.4 Sub-groups of children and young people

This review has been unable to carry out an in-depth examination of all the sub-groups of children and young people who have been researched and offered the opportunity to make their voices heard on wellbeing. But it is important that they not be forgotten. Looked-after children are an important sub-group, as are those with particular health issues, and young offenders. However, this is an area which needs further in-depth work to do justice to each of the many sub-groups of children and young people identified as a focus of existing studies.

It is important, as a first step, that the detail of the voiced messages from such studies of small sub-groups be drawn out and collated. A further step would involve considering whether and how these messages might be turned into measurable indicators within the context of a general purpose survey of all children or young people. These tasks need to be undertaken in future work on this topic.

5.5 Measuring wellbeing in surveys

In summary, the above discussion offers several ways of proceeding with the task of measuring children and young people's subjective wellbeing, in the light of constrained resources, namely:

1. Use measures that cover relationships with family and friends, as well as safety and security issues, as a minimum.

2. Add to the above to deepen understanding by asking about qualities of relationships, components of environment, and elements of 'self'. It might be possible to use short cuts where they are available, focus on the most often-voiced components of wellbeing, or take particular sub-domains one at a time, possibly in rotation, in successive surveys.

For moving forward on gaining more understanding about age differences, further research is required to identify the wellbeing concerns of different age groups, and the language needed to frame meaningful survey questions to children. In formulating meaningful survey questions suitable for different age groups, the model approach used to extend the British Crime Survey from adults to 10- to 15-year-olds is a good one to copy. In addition, current best practice is to use youth advisory panels to assist in the generation and testing of survey questions.

The conclusion in relation to measuring the wellbeing of sub-groups of children is that further in-depth work is needed to collate and assess the voiced wellbeing concerns of such children and their implications.

6   Conclusions

We can now conclude on this discussion of studies collecting and analysing children's voices on their own wellbeing in general. A sufficient number of substantial studies collecting relevant data were identified. Significant numbers of studies were identified based on UK children and young people as well as some for other countries. These covered the meaning of wellbeing to children and young people as well as the components of that wellbeing. The content of these studies included consideration of what children understand about their wellbeing in general, as well as more focused studies of the experiences and voices of children and young people in particular circumstances or with particular characteristics and experiences.

Listening to children's voices through these research studies uncovered a large number of components they see as affecting their wellbeing. Taken together, these certainly provide a good foundation of children and young people's voices on which to construct survey measures and indicators for monitoring their wellbeing. Work on creating such measures has already been carried out, for example by The Children's Society and York University. This review of qualitative material on children's voices suggests that there is probably scope to extend further the existing set of wellbeing measures for use in surveys with children and young people, were resources to allow it. The process of translating the learning from children's voices to survey and question design is also likely to be helped by a policy of engaging children and young people as advisors on the design and testing of questions. This approach is now best practice in the field.

Where there is a weakness in the materials covered in this review, it is in their failure to identify clearly where there are important distinctions to be made between children. There is a need for clearer understanding on how age differences between children aged eight to 16 have a varying impact on what they mean by wellbeing and its components. This is the most serious omission from the literature. If measures of wellbeing are to be devised to cover children under age eight, it is crucial to understand more about what wellbeing means to different age groups of children. This is necessary if we are to be able to ask children of certain ages and maturity survey questions that are meaningful to them and therefore useful as indicators.

As with all research, however, it is always possible to do more. Addressing the weaknesses described above would make a useful start for a new research agenda. This could be done by carrying out reanalyses of the existing data from the earlier studies mentioned in this review, paying particular attention to age differences. Additional possibilities for further research come from the as yet unanalysed verbatim answers provided by 14- to 15–year-old respondents to the open-ended questions contained in the Young People's Panel of the British Household Panel Study data, described further in Appendix 6. Further, an in-depth consideration of the literature covering many small sub-groups of children and young people in specific circumstances is also needed.

Appendix 1: Details of the rapid review search for publications

The rapid review search for relevant published materials on this topic involved the following:

1. **A search of the Childhood Wellbeing Research Centre's (CWRC) internal database**

   This search was kindly undertaken by Irene Kwan. The database is populated largely with studies published since one year before the centre was launched in 2009-2010, plus others generated in earlier literature searches undertaken by CWRC. Keywords were: wellbeing; children's voices, /views/ participation, or /agency.

   Search retrieved 72 items.

2. **A search of the library materials at the National Children's Bureau**

   This was kindly facilitated and carried out by librarian Jayne Parkin.

   Keyword contains term 'children's views' or 'participation' and keyword contains term 'quality of life' or 'wellbeing' and date greater than 1999.

   Search retrieved 289 records; reduced to 256 after an initial sift.

3. **Contact with known experts**

   The website pages of known experts in the field of children's wellbeing were examined for further publications, and some were contacted by email to ask about any recent publications or further recommendations. The approach to one expert led to the discovery that she was about to complete a review of children's voices on health and health services for the Department of Health. On the basis of this information, a decision was made not to put any further effort into identifying publications on children's health wellbeing. The basic details about the search and the published materials found in this health review are included in this report as well as its main conclusions.

4. **Examination of recent issues of obvious journals**

5. **Further studies were identified from the lists of references in publications**
   identified above, via a snowball effect.

Appendix 2: Tables

Table 1: Numbers of publications found in search by type of wellbeing and origin*

	CWRC database	NCB library collection	Others +
General wellbeing		14	18
Family/parents		3	3
School-education, SEN, bullying	2	10	7
Friends		1	
Kin relations	2	2	4
General health, health services		23	1
Mental, emotional health	1	9	3
Neighbourhood-environment, spaces, parks	1	9	2
Neighbourhood safety	1	2	1
Housing		2	
Leisure, sport, play	1	2	1
Poverty, disadvantage, social exclusion	2	12	6
Consumers-materialism, commercial world		6	1
Media		3	
Racism		3	1
Child care		2	
Groups of children with particular characteristic/experience			
Looked after children	6	23	11
Disabled children		1	1
Blind children		1	
Homeless	1	1	1
Offenders, secure settings, justice	2	5	5
Family courts	3		
Refugees, asylum seekers	2	2	3
Gypsies, Travellers, Roma		3	
Autistic		2	
Cystic fibrosis		1	
Cerebral palsy		9	
Volunteering		1	
Bereaved		1	
Abuse, neglect or violence	2		4
Drug and alcohol abuse	1		1
Largely out of scope			
Survey data or quantitative indicators only, UK*	9	30	14
Methods or ethics only	1	10	11
Theory or policy only	12	82	22
International studies or indicators*	6	39	21
Not relevant, out of scope	2	2	
Total, (including column overlaps)	**72**	**256**	**108**
Overlaps with other databases, N	18	28	28

* Categories and numbers of items are not necessarily mutually exclusive. They also contain non-UK studies that do qualify for consideration under the specifications of this review.

+ collated from known studies, websites and communications with known experts

CWRC – Childhood Wellbeing Research Centre   NCB – National Children's Bureau.

Table 2:   Summary details of UK studies on children and young people's voices on general wellbeing

Study and References	Topics covered	Area Location. Methods of data collection	Age groups and size
The Children's Society Pople and Solomon (2010). The Children's Society (2006, 2008).	Open-ended Questions. 1. What do you think are the most important things that make for a good life for young people? 2. What things do you think stop young people having a good life?	England National representative survey of YPs in 2005. This survey included 2 open-ended questions asking children about their views on well-being and the factors which hindered it. Analysed by quantifying keywords. Cross-cutting themes, 10 Key topics identified	11,000 approached, 8000 responses obtained. YPs aged 14-16
The Children's Society 2007-08 Pople and Solomon (2010). Rees et al. (2010a, 2010b). The Children's Society (2009)	Consultation Exercise 2007-08 on themes developed from 2005 survey's open ended questions. The launch of *The Good Childhood Inquiry* initiated further collection of voice materials. This was building up to developing survey questions to go into the field 2008.	England. Children asked to submit views on *My life* postcards (N=5337), via *My life* website (N=3642) and Focus Groups (N=51, 407 CYPs). Additional wellbeing topics were added to the 2005 list as a result –possibly more relevant to younger children	Consultation 5000 CYP Ages 5-15 Postcards, Website, Written responses. Ages 5-17 Focus Groups. Ages 3-21. Subsequent survey. 7000 CYP Ages 10-15
The Children's Society in 2009-10 The Good Childhood. Report 2012. (2012).	Further consultations run with younger children about important themes to children's wellbeing. This was building up to developing survey questions to go into the field in 2010-11.	England	Consultations Age 8-9. Subsequent survey 6000 CYP Ages 8-15
The Children's Society ongoing work. July-Sept 2010. Pople and Solomon (2010).	Subjective wellbeing Events and celebrations e.g. birthdays and Christmas; Unkind/upsetting behaviour of friends, peers and siblings e.g. teasing, arguing, unkindness etc.; Local area e.g. a pleasant environment & things to do; Groups that you belong to; Freedom and choice; Global issues of poverty, homelessness, crime.	England. Focus Groups	26 children Aged 8-11

Study and References	Topics covered	Area Location. Methods of data collection	Age groups and size
Counterpoint Research (2008). DCSF	To gain clarity about what CYPs -mean by 'wellbeing' ; - what they define as a 'good childhood'; - what they think determines their wellbeing; and -whether these factors vary by family finances	England. Group interviews/discussions	Year3. Age7-8. Year7. Age 11-12 Year9. Age 13-14 Year11.Age 15-16 Groups of boys, or girls in 2 broad socio-economic circs for each age band. Numbers in groups missing from publication
Ipsos MORI (2011).	Groups discuss: 1. What makes a good day? 2. What makes a bad day? How do children experience the interplay between materialism, inequality and wellbeing?	UK, Sweden and Spain. CYPS interviewed in groups recruited through schools (7 in UK).	Ages 8-13. N=250
Sargent (2010).	Questions: 1. What makes you worry? 2. What do you need to be happy? 3. If you could change one thing in the world what would it be?	Australian and English children. Uses open-ended questions in a survey instrument.	Pre-adolescents 8-12. AUS Yr.7. Age 12.7.N=199 ENG Av. Age 11.7. N=198
Christensen (2002).	Children's understanding of what is good for them and a focus on time.	England (North). Urban and rural settings compared. Ethnography and individual quali interviews with children. Includes a survey of other children as part of the study	N=70 Age 10-11.
Holder et al. (2011).	Focus group using open-ended questions. 1.What do young people value about their lives? 2. What do young people want to be able to do? 3. What do young people want to be able to feel? Young people volunteered eight domains as important to them which overlapped with 9 identified from literature. Further questioning took place on nine domains identified, which young people were happy to endorse with some clarification /language changes.	England, Kent. 3 Focus groups. Ad hoc volunteer sample	N=12 Age 11-16

Study and References	Topics covered	Area Location. Methods of data collection	Age groups and size
DCSF, (2007) Opinion Leader (2007)	Consultation 'Time to talk' with CYP as part of the development of *The Children's Plan*. Covers a range of topics and wellbeing.	England. A range of references are also cited as sources for the material and CYP quotations; eg Demos (2007) Seen and heard. Morgan (2004) Safe from Harm. Park et al (2004) YPs in Britain. Youth Review (2002) spaces & play.	Age range uncertain. Park reference is 12-19s
Children's Commissioner for England (2008/09).	Summary of consultation on what makes children and young people happy and healthy	England No details on where Quoted voices come from or how collected.	Aged 2-18.
Welsh Assembly Government Social Research (2010). Parry et al (2010).	Qualitative study of wellbeing among children and YPs in Wales. Children's voices from age 4 spoke for themselves.	Wales Individual plus Group interviews. Digital recordings. Recruited from schools, clubs, charities, community groups and orgs. In either English or Welsh language. Topic Guide.	CYPs Total N=82. CYPS <18. N=61. Age range 4-25.
Newton, Ponting and Green (2011).	Considers questions: 1.What does wellbeing mean to 16-19 year olds? 2.Do 16-19 year olds think that measuring their wellbeing is worthwhile?	Wales Recruits participants through schools. Uses wellbeing debates to facilitate engagement with the topic. Groups of 5-6 carry out interactive activities and discuss. Some analysis of keywords by counting their occurrence	Age 16-19. N=129.
Evans, (2011). ONS	Views sought on what children, YPs (and adults) think affects their personal wellbeing. 1. What makes you happy? Older groups asked some of same questions as adults: 2. What matters most in your life? What is well-being?	Across 4 UK countries. Mainly in schools for children. This collection of children's views took place at a series of events which were part of the National (UK) well-being debate, organised by ONS to gather views from adults (and children) Nov 2010 to April 2011. Children, YPs views only collected at face-to-face events held in schools.	Age 5 upwards.

Table 3: Summary details of non-UK studies on children and young people's voices on general wellbeing

Study and Reference	Topics covered	Area Location. Methods of data collection	Age groups and size
O'Higgins (2002)	Perceptions of happiness, health and wellbeing	Ireland Individual interviews.	N=31 first year post primary school CYPs
Gabhainn and Sixsmith (2005)	A study of children and young people's understanding of wellbeing.	Ireland Recruited CYPs classes within schools, urban and rural. Research explains the study to CYPs and gives them disposable cameras. CYPs take photos. These discussed by other (separate age, gender and rural-urban) groups of CYPs in order to create a scheme of domains of wellbeing and how they are related. These schemas integrated into one (across ages, rural-urban and gender) by end.	33 class groups of CYPs. N=324 Age 8-19
Sixsmith, Gabhainn, Fleming and O'Higgins (2007)	A comparison of the understanding of wellbeing by children, parents and their teachers.	Ireland - Rural setting. Children are issued with disposable cameras. The photos are then used by other children, parents and teachers working in separate groups each to draw up a set of wellbeing domains. These are then compared.	Children aged 8-12. N=24.
Fattore, Mason and Watson (2006)	Topics: Stage 1. What constitutes wellbeing? How do definitions relate to everyday experiences of CYP. Stage 2. In depth exploration of dominant themes identified at Stage 1. Stage 3. Participants complete a task oriented project exploring particular themes to uncover more about meaning of wellbeing.	Australia, New South Wales. Via schools in rural and urban locations. Stage1. Semi-structured individual or Group interviews Stage 2. Individual or Group interviews and tasks. Stage 3. Sessions of individual CYPs with a researcher.	CYPs all Age 8-15. Stage 1. N=126 Stage 2. N=96 Stage 3. N=56
Thoilliez (2011)	Questions: 1. What makes children feel happy? 2. How do they experience the world they live in and the world they would like to have?	Spain. Carried out in 3 public and 2 private primary schools. Questions used biographical methods	Ages 6 to 12. N=40
Casas – see Malo et al (2009).	Factors that facilitate and make personal wellbeing difficult in adolescence.	Participants in two Centres of Secondary Education (ESO) in the province of Girona (NW Catalonia, across 4 grades/levels of secondary school, (extended subsequently to other regions of Spain). Pupils with high Personal Well-being Index given semi-structured interviews.	12-16 year olds in secondary schools.

Study and Reference	Topics covered	Area Location. Methods of data collection	Age groups and size
World Vision (2007, 2010), Andresen et al (2010; Andresen and Fegter, 2011).	2007. Children guided to display their socio-spatial and psychosocial networks through toys and games. This also covered wellbeing at school, the school environment, wellbeing at home, freedoms at home, parent relationships, friendships in quantity and quality. 2010. Qualitative interviews focused on children's use of time, opportunities for self-determination, the social spatial environment, and the good life for all children.	Germany. Qualitative studies integrated into 2 collections of World Vision Survey in 2007 and 2010. Children were given semi structured interviews and played games to collect qualitative data alongside the collection of the quantitative survey data. Most children interviewed in own homes and rooms.	Ages 6-11. N=12.
Andresen and Fegter (2011); Andresen et al (2010).	This covers what the children think constitutes a good life. Considers differences in answers by whether child is socio-disadvantaged or not. What do children consider to be their:- -Values and ideas about the good life; -Decision making and scope for action; -real-life spatial and temporal options; -social environment and daily lives; -psychosocial conditions; -leisure time options.	Germany *Latitudes of socially disadvantaged children*, participating in German summer camps in two cities, 2009. Disadvantaged children took part in survey (containing open ended questions), and ethnographic study which included interviews (N=55) and camera photos on important elements to child (N=168).	Ages 6-12/13. N=200.

Table 4: Components of wellbeing voiced by children and young people in selected studies*

Study / Age range	ChSoc 14 16	ChSoc 8 14	CPR 7 16	Christ 10 11	Holder 11 16	Wales 4 25	Newton 16 19	ONS UK 5 12 YPs	Ipsos 8 13	Sargeant 8 12	G+S 8 19	Fattore 8 15	And+Fet 6 12	Malo 12 16
Quality of Relationships	X			X		X	X			X	X	X		X
Family-parents	x		x	x	x	x	x	x x	x	x	x	x	x	x
Parental conflict		x	x											
Family-siblings		x		x					x	x			x	
Family-kin		x										x	x	
Pets = Family		x						x	x	x	x		x	
Friends	x		x	x	x	x	x	x x	x	x	x	x	x	x
'Romantic'						x	x	x			x			x
Teachers	x		x			x	x					x	x	
Local people	x		x			x	x					x		x
Champions						x						x		
Police						x								
Qualities												X		
Love-care 'being there'	x		x	x		x		x	x		x	x	x	x
Support, listening	x		x	x	x	x					x	x	x	x
Fairness	x					x				x				x
Respect, trust	x		x		x	x					x	x	x	x
Privacy, quiet, 'space'		x	x	x		x						x	x	
Belonging		x		x		x	x	x	x		x	x		x
Quality of Environment	X					X			X	X	X	X		
Home, safety	x		x	x	x	x				x	x	x	x	
Holidays-festivals		x								x	x		x	
School	x		x	x	x	x				x	x		x	x
Local area, safety	x		x		x	x	x			x	x	x	x	
Local area, facilities	x		x			x	x	x x	x		x	x	x	x
National-gov, media						x			x					
Global, justice		x								x	x			

Study Age range	ChSoc 14 16	ChSoc 8 14	CPR 7 16	Christ 10 11	Holder 11 16	Wales 4 25	Newton 16 19	ONS UK 5 12 YPs	Ipsos 8 13	Sargeant 8 12	G+S 8 19	Fattore 8 15	And+Fet 6 12	Malo 12 16
Technology, TV, goods						x	x	x x	x	x	x	x		x
Money-enough	x					x	x	x	x	x	x	x	x	x
Money relativity			x			x			x	x				
Transport, availability				x		x						x	x	
Self, Freedoms	**X**					**X**	**X**					**X**		**X**
Health-physical	x					x	x			x		x	x	x
Food, diet, exercise		x			x	x	x	x x			x		x	
Health emotional	x	x	x		x	x								
Health behaviour/s	x					x	x				x			x
Lifestyle leisure-fun	x		x	x	x	x	x	x x	x	x	x	x	x	x
Lifestyle choices	x		x	x	x	x	x			x			x	x
Lifestyle use of time	x	x	x	x	x	x	x			x			x	x
Lifestyle-togetherness		x		x				x	x					
Lifestyle play, outdoors		x	x	x		x	x	x	x	x	x	x	x	x
Music, art, culture							x	x		x	x			
Learning growth	x				x	x	x	x			x	x	X	x
Learning aspiration	x				x	x	x	x		x	x	x	X	x
Learning achievement	x				x	x	x	x x		x	x	x	x	x
Bullying, abuse, intimidation		x	x		x	x				x	x		x	x
Values belief, spiritual	x										x		x	
Values attitudes-agency	x				x	x	x	x x			x	x	x	x
Identity, self esteem, appearance	x				x	x		x				x	x	x

X – study suggests this general aspect is voiced as important to children and/or young people

x – study suggests this specific sub-domain is voiced as important to children and/or young people

*Notes on Table 4 column headings

'**ChSoc 14-16**'. The Children's Society 2005 research work in England. Relevant references are The Children's Society (2006, 2009)

'**ChSoc 8-14**'. The Children's Society research work in England since 2005 towards The Good Childhood Inquiry, and Surveys of children's wellbeing in 2008 and 2010. Relevant references are Pople and Solomon (2010), The Children's Society (2009, 2012)

'**CPR**' Counterpoint Research (2008). A report done for DCSF in England. This study also contains and reports on interviews with parents and children on the same topics. The Report often combines together its written summaries of findings on children and parents in a way that makes it difficult to be sure one is identifying children's voices in particular.

'**Christ**'. Christensen (2002) research carried out in England.

'Holder is' Holder et al.'s (2011) research carried out in England and domains listed in more detail in Table 5.

'**Wales**'. Research carried out by the Welsh Assembly government and reported in WAG (2010) or Parry et al (2010)

'**Newton**' Research contained in Newton et al, (2011).

'**ONS-UK**'. Results from consultation events held across all 4 UK countries as part of National Well-being Debate, in primary and secondary schools for children.

'**Ipsos**'. Research carried out on children and young people in the UK, Sweden and Spain reported in Ipsos Mori and Nairn (2011).

'**Sargeant**'. Research described in Sargeant (2010) on children in England and Australia.

'**G&S**'. Research carried out in Ireland reported in Gabhainn and Sixsmith (2005)

'**Fattore**'. Research carried out in Australia reported in Fattore et al (2007, 2009).

'**And+Fet**'. Research carried out in Germany linked to World Vision surveys and Latitudes research in Andresen and Fetger (2011), Andresen (2010).

'**Malo**'. Research carried out in Spain, Malo et al (2009).

*Notes on Table 4 row headings.
- 'support' includes parents doing discipline and setting boundaries for children;
- 'Learning achievement' includes 'recognition' and 'competence';
- 'Values attitudes agency' – includes 'autonomy' and 'taking responsibility'; and
- 'self esteem' includes' self image'.
- 'Ident, self estm, appearnc' means 'Identity, self esteem and appearance'.

*Notes on Table 4 cell indicators.
X – this general domain indicated to be important
x – this specific component or dimension of wellbeing indicated to be important.

Table 5: Fattore et al's (2009, Table 1, p.71) schema of wellbeing domains and dimensions

Well being domain	Well being dimension
Agency	Children have opportunities to effect change in everyday situations and relationships – (family, educational institutions, local community). Children have opportunities to participate in broader civic, political processes.
Safety and security	Children are safe from abuse and neglect within their families. Children area safe from violence, bullying and discrimination within their peer groups and community. Children live in homes where they feel protected, safe and secure. Children live in communities that are child-friendly and inclusive of other children.
Self	Children have a positive sense of self-worth and integrity and feel they are a good person. Children are appreciated and respected for who they are and given positive recognition within their family, by peers and teachers. Children have a sense of personal space or a home environment where they can relax and be themselves.
Activities, freedom, competence & fun	Children enjoy their experiences of learning so they feel competent, connected to learning institutions and motivated to learn. Children have the capacity and are supported to set out and attain goals. Children participate in structured and unstructured activities that promote positive sensory experience and enjoyment.
Dealing with adversity	Children live in families where they can routinely discuss and seek practical assistance on problems they confront. Children have friends who stick by them and they can confide in. Children have adults outside their family they can turn to for support. Children have feelings of self-worth and control so they can solve problems they confront. Children have strategies which can provide diversion and relief from stress and hurt.
Material and economic resources	Children live in households that have enough material resources to get by and do their thing, including having socially perceived necessities. Children live in households free from poverty. Children have access to enough income to allow them to participate in social and cultural activities.
Physical environment	Children are safe and secure within community spaces. Children have access to appropriate physical environments and community resources to allow creative and exploratory play in their local community environment. Children have opportunities to access ecologically diverse natural environments.
Physical health – eat well, be active	Children have access to basic health services when needed. Children participate in health promoting behaviours that allow them to engage in life, such as physical activity, healthy eating. Children are free from illness, morbidity and mortality, including activity-limiting disabilities.
Social responsibility and moral agency. Being a good person	Children have positive values that guide their behaviour, including valuing and appreciating others in their community. Children have appropriate obligations and responsibilities at home and act in a responsible way with their family. Children have opportunities to actively engage in community life, and act in a socially responsible way within their communities.

Appendix 3: References on voices about wellbeing from children experiencing the care system

Block, S.D., Oran, H., Oran, D., Baumrind, N. and Goodman, G.S. (2010) Abused and neglected children in court: knowledge and attitudes. *Child Abuse and Neglect*, 34(9):659-670.

Children's Rights Director for England. (2010) *Before Care: a Report on Children's Views on Entering Care.* Manchester: Office for Standards in Education, Children's Services and Skills.

Dickson, K., Sutcliffe, K. and Gough, D. (2010) What outcomes matter to looked-after children and young people and their families and carers? A systematic review of their experiences, views and preferences. EPPI Centre, Social Science Research Unit, London: Institute of education.

Forkby, T. and Hojer, S. (2011) 'Navigations between regulations and gut instinct: the unveiling of collective memory in decision-making processes where teenagers are placed in residential care'. *Child and Family Social Work*, 16(2):159-168

Gaskell, C. (2010) '"If the Social Worker Had Called at Least It Would Show They Cared". Young Care Leaver's Perspectives on the Importance of Care'. *Children & Society*, 24(2):136-147.

HM Inspectorate of Prisons (2011) *The care of looked after children in custody: a short thematic review*. London: HM Inspectorate of Prisons.

McLeod, A. (2010) '"A friend and an equal': do young people in care seek the impossible from their social workers'. *British Journal of Social Work*, 40(3):772-788

Morgan, R. (2010) 'Children's experience of the Children's Act 1989', *Journal of Children's Services,* Vol.5 (3) pp.6-13.

Office of the Children's Rights Director (2010) *Children's messages on care 2010:* A report by the Children's Rights Director for England. Manchester: Ofsted. https://www.rights4me.org/content/beheardreports/400/REPORT_childrens_messages_on_care_2010.pdf

Office of the Children's Rights Director for England. (2011). *Children on the edge of care:* A report of children's views by the Children's Rights Director for England. Manchester: Ofsted.

Office of the Children's Rights Director (2011) *Younger children's views:* A report of children's views by the Children's Rights Director for England. Manchester: Ofsted.

Ofsted (2011) *Social care inspection: The Children's audit*. A report of children's views by the Children's Rights Director for England. Manchester: Ofsted http://www.ofsted.gov.uk/resources/social-care-inspection-childrens-audit

Ofsted (2011) *Family Justice Review: the children's verdict*. A report by the Children's Rights Director for England. Manchester: Ofsted.

Thomas, N. and O'Kane, C. (2009) 'Children's participation in reviews and planning meetings when they are 'looked after' in middle childhood' in Courtney, M. and Thoburn, J. (eds) *Children in State Care*, Ashgate.

Appendix 4: Main conclusions from LaValle et al. (2012) rapid literature review on children and young people's views on their health, wellbeing and involvement in health services

Physical health

The rare surveys that have included children and young people showed high levels of satisfaction with various aspects of health care, but children and young people were less likely than older NHS users to report positive experiences. Poor or no communication was noted from health staff who tended to communicate with parents, rather than with children and young people.

While experiences varied, failure to involve children and young people consistently in decisions about their care was reported by many of the studies reviewed.

Positive views were expressed about experiences of child-friendly children's wards and clinics. However, being cared for in unsuitable and unwelcoming environments was another recurrent theme.

The experiences of vulnerable groups were similar to those of all groups but they also had specific experiences of their own.

Mental health

Experiences in relation to mental health were similar to those in relation to other health provision, that is, some positive and some negative experiences were noted. Experiences that were specific to this type of health provision, were (1) coping with the stigma attached to mental illness, and (2) mental health services being seen as an add-on rather than a mainstream service.

Children and young people's difficulties with mental health services were amplified if they were in care, in the youth justice system or asylum seekers.

Public health

Based on LaValle and colleague's consultations with children and young people, they noted the importance attached to being healthy and having a healthy lifestyle. Children and young people did not always feel they had access to the information and advice that would enable them to make healthier choices.

Children and young people raised the issues that advertising failed to answer the questions they had about sensitive issues, such as sexual health.

Children and young people were shown to have been consulted about a wide range of public health issues. These consultations clearly showed that children and young people want to be listened to, be involved in discussions of public health, and have their views implemented in the design of services.

Appendix 5:   Overlaps in findings on children's voices from selection of separate studies

Studies*	Children s Society	Counterpoint, CPR	Wales	Holder	Gabhainn&Sixsmith	Ipsos, Nairn
Relationships						
People	Family, friends, community	Family, friends, siblings, kin, others, pets, teachers	Family, friends, peers, teachers, others, champions	Family, friends	Family, friends, pets, opposite sex	Family, friends
Qualities	Loved, cared for.	Loved, cared for, listened to, together	Respected	Listened to, respect		
Environment						
Home	Money	Play, fun, feeling protected, family intact, time together		Play, space, time	Houses, bed, travel&holidays, cars, play	Together, in tact family, time, holidays
School		Prizes, stars, praise, listened to.	Bullying, abusive behaviour			
Neighbourhood	Leisure, local facilities	Sports, activities	Streets and parks for play, entertainment, feeling safe	Feeling safe		Facilities, outdoors, sports
Self						
Health	Behaviour, sports, being healthy	Sports	Behaviour, diet, exercise	Physical needs, food & drink, shelter	Food, sport	
Education	School	Achieving	Achieving, curriculum	Do well at school	School	
Choice	Choice, leisure, sports activities, attitudes, time use	Getting things you want, activities	Responsibility Technology	Choices, clothes	Music, TV, Toys, games, IT, Art, books, phones, money, religion	Plenty to do, outdoors, sports, clothes, IT
Psycho-social	Appearance		Identity, belonging	Confidence, problem solving		

*For references to studies cited see Table 4. As far as possible, the words used are those used in each study to describe their main themes.

Appendix 6: Further possibilities for research on young people's voices on wellbeing

British Household Panel Study (BHPS)– Young People's Panel surveys
BHPS's Young People's Panel contains open-ended questions addressed to 14 and 15 year olds which offer the possibility for coding and analyses of the verbatim quotes. The relevant questions from the various waves of data collection in which they were included are listed below.

1)BHPS- Young People's Panel – 1994 – age 14-15 year olds: (Wave 4)
"MY FINAL QUESTION IS ABOUT WHAT HAS BEEN HAPPENING IN THE LAST YEAR IN YOUR OWN LIFE THAT HAS BEEN ESPECIALLY IMPORTANT TO YOU. Write in:"

2) BHPS- Young People's Panel – 1995 – age 14-15 year olds: (wave 5)
"My final question is about what has been happening in the last year in your own life that has been especially important to you.
Q83 Please tell me anything that has happened to you (or your family) which has stood out as important. This might be things you've done or things that have been of interest or concern. Just whatever comes to mind as important to you.
In the last year what has happened to you or your family which has stood out as important to you?"

3) BHPS- Young People's Panel – 1996 – age 14-15 year olds (Wave 6)
"MY FINAL QUESTION IS ABOUT WHAT HAS BEEN HAPPENING IN THE LAST YEAR IN YOUR OWN LIFE THAT HAS BEEN ESPECIALLY IMPORTANT TO YOU. Write in:"

4) BHPS- Young People's Panel – 1997-2005 – age 14-15 year olds (waves 7 to 13, 15, 18)
"If you could change just one thing to make your life better, what would you change and why? Write in as much as you like in the space provided. If you could change just one thing to make your life better, what would you change and why?"

5) BHPS- Young People's Panel – 2004, 2007 – age 14-15 year olds (wave 14, 17)
"We want to find out about what has been happening in the last year in your own life. Please write in anything that has happened to you (or your family) that has stood out as important. This might be things you've done or things that have been of interest or concern. Just whatever comes to mind as important to you."

6) BHPS- Young People's Panel – 2006 – age 14-15 year olds (wave 16)
"Thinking of your own future, what would you like to be doing with your life in about ten year's time from now? Write in as much as you like in the space provided. Write in what you would like to be doing:"

References

Andresen, S. (2012). 'Abuse of children through poverty and powerlessness: Children's perspectives and experiences', Manuscript under consideration for publication received from author, University of Frankfurt, Germany.

Andresen, S., Diehm, I., Sander, U. and Ziegler, H. (2010). *Children and the good life: New challenges for research on children*. New York: Dordrecht.

Andresen, S. and Fegter, S. (2011). 'Children growing up in poverty and their ideas on what constitutes a good life: Childhood studies in Germany'. *Child Indicators Research*, 4:1, pp.1-19.

Bradshaw, J., Hoelscher, P. and Richardson, D. (2006). Comparing child well-being in OECD countries: Concepts and Methods, UNICEF Innocenti Research Centre Working Paper IWP-2006-03.Florence: UNIICEF Innocenti Research Centre.

Bradshaw, J., Keung, A., Rees, G. and Goswami, H. (2011). Children's subjective well-being: international comparative perspectives, *Children and Youth Services Review*, 33, 548-556.

Children's Commissioner for England (2008-09) *Happy + Healthy: Summary of children and young people's views on what makes them happy and healthy*, London: 11Million.www.11MILLION.org.uk

Christensen, P.H. (2002). 'Why more 'Quality Time' is not on the top of children's lists.' *Children and Society*, Vol.16 (2), pp.1-12.

Counterpoint Research (2008). *Childhood Wellbeing: Qualitative Research Study*. London: Department for Children, Schools and Families http://www.dcsf.gov.uk/research/data/uploadfiles/DCSF-RW031%20v2.pdf

Department for Children Schools and Families (2007). *Children and young people today: Evidence to support the development of the Children's Plan*. London: Department for Children, Schools and Families. http://www.education.gov.uk/publications/eOrderingDownload/7343-DCSFYoung%20People%20Today.pdf

Dockerell, J. et al. (2000). 'Researching children's perspectives: a psychological dimension' in Lewis, A. and Lindsay, G. (eds.) (2000). *Researching children's perspectives*, Buckingham: Open University Press.

Evans, J. (2011). *Findings from the National Well-being Debate*, Newport: Office for National Statistics.

Evans, K., George N., White K., Sharp, C., Morris, M., Marshall, H. and Mehta, P. (2010). *All children and young people make sustained progress and remain fully engaged through all transitions between key stages*. London: Centre for Excellence and Outcomes in Children and Young People's Services (C4EO). http://www.c4eo.org.uk/themes/schools/sustainedprogress/files/kr_full_sustained_progress.pdf

Fattore, T., Mason, J. and Watson, E. (2007). 'Children's conceptualisation(s) of their well-being'. *Social indicators research*, 80, 5–29.

Fattore, T., Mason, J. and Watson E. (2009). 'When Children are asked about their well-being: towards a framework for guiding policy'. *Child Indicators Research*, 2(1):57-77.

Fitzpatrick, A., Grant, C., Bolling, K., Owen, R. and Millard, B. (2010). *Extending the British Crime Survey to children: A Report on the methodological and development work*, London: TNS-BRMB and the Home Office.

Gabhainn, N. and Sixsmith, J. (2005). *Children's Understandings of Wellbeing* (Centre for Health Promotion Studies, Dept of Health Promotion, National University of Ireland).

Harju, A. and Thorod, A. (2011) 'Child poverty in a Scandinavian welfare context: from children's point of view'. *Child Indicators Research*, vol. 4, no. 2, pp.283-299. DOCLINK http://www.childrenscommissioner.gov.uk/content/publications/content_480

Hicks, S. and Newton, J. (2011). *Measuring children's and young people's wellbeing*, Newport: Office for National Statistics.

Holder, J., Beecham, J. and Knapp, E. (2011). Developing a wellbeing outcome measure for use in economic evaluations of children's services: Identifying domains important to children and young people, Childhood Wellbeing Research Centre, CWRC WORKING PAPER No 008. London: Institute of Education. http://www.cwrc.ac.uk/projects/documents/Developing_CYPOC_report_final_with_WP_number.pdf

IPSOS Mori and Nairn, A. (2011). *Children's Well-being in UK, Sweden and Spain: The Role of Inequality and Materialism A Qualitative Study*, London: IPSOS Mori. http://www.unicef.org.uk/Documents/Publications/IPSOS_UNICEF_ChildWellBeingreport.pdf

LaValle, I., Payne, L., Gibb, J. and Jelicic, H. (2012). *Children's experiences and views of health provision: A rapid review of the evidence*, Report to Department of Health, London: National Children's Bureau.

Lewis, A. (2010) 'Silence in the context of "Child voice"', *Children and Society*, 24: 14-23.

Lewis, A. and Lindsay, G. (eds.) (2000). *Researching children's perspectives*, Buckingham: Open University Press.

Lundy, L. (2007). '"Voice" is not enough: conceptualising Article 12 of the United National Convention on the Rights of the Child', *British Educational Research Journal*, 33: 927-42.

MacNaughton, G. (2005). *Doing Foucault in Early Childhood Studies: Applying post structuralist ideas*, London: Routledge.

Malo, S., Navarro, D., Alfara, J., Gonazalez, M., Casas, F. and Vinas, F. (2009). 'Factors that facilitate and make personal well-being difficult in adolescence from the point of view of 12 to 16 year-old secondary school students.' Presentation of research findings to IX ISQOLS Conference, Istituto Degli Innocenti, Florence, July 19-23, 2009.

Martin, K. and Hart, R. (2011). *Trying to get by: consulting with children and young people on child poverty*. London and Slough: Office of the Children's Commissioner and NFER.

NAPCAN (2008). *Children's Agency in Communities: A review of the literature and the policy and practice context*. ARACY/ARG NHMRC Research Network Seed Funded Collaboration.

Newton, J., Ponting, C. and Breen, D. (2011). *Young People and wellbeing: Contemporary science debates in Wales*. Cardiff: ESRC Centre for Business Relationships, Accountability, Sustainability and Society, BRASS, University of Cardiff, together with ONS and TECHNIQUEST.
http://www.brass.cf.ac.uk/projects/Sustainable_Lifestyles_and_Communities/sustainable-lifestyles--Wellbeing-and-Young-People.html

O'Higgins, S. (2002). Through the looking glass: Young people's perceptions of the words health and happy: MA thesis, Galway: Department of Health Promotion, National University of Ireland, Galway.

Opinion Leader (2007). Overarching report on 'Time to Talk' consultation activities, Children's Plan consultation Interim summary report of the deliberative event on Saturday 29 September 2007, London: Department for Children, Schools and Families.

Park, A., Phillips, M. and Johnson, M. (2004) *Young People in Britain: The Attitudes and Experiences of 12 to 19 Year Olds*, National Centre for Social Research. London: DfES Research Report RR564.

Parry, O., Warren, E., Madoc-Jones, I., Baker, S., Hughes, C., Pithouse, A. and Crowley, A. (2010). *Voices of Children and Young People in Wales Study: A qualitative study of Wellbeing among children and young people under 25 years old*. Cardiff: Welsh Assembly Government Social Research.

Pople, L. and Solomon, E. (2011). *How happy are our children: measuring children's well-being and exploring economic factors*. London: The Children's Society.

Rees, G., Haridhan, G. and Bradshaw, J. (2010a). *Developing an index of children's subjective well-being in England*, The Children's Society: London.

Rees, G., Bradshaw, J., Goswami, H. and Keung, A. (2010b). *Understanding Children's Well-being: A national survey of young people's well-being*, London: The Children's Society.

Ridge, T. (2002). *Childhood Poverty and Social Exclusion: From a child's perspective*, Bristol: The Policy Press.

Ridge, T. (2009). *Living with poverty: A review of the literature on children's and families experiences of poverty*, Research Report No.594, Department for Work and Pensions, Norwich: HMSO

Ridge, T. (2011). 'The everyday costs of poverty in childhood: a review of qualitative research exploring the lives and experiences of low-income children in the UK'. *Children and Society*, 25(1):73-84

Sargeant, J. (2010). 'The altruism of pre-adolescent children's perspective on 'worry' and 'happiness' in Australia and England'. *Childhood*, vol.17, no.3 (Aug). pp.411-425.

Sixsmith, J., Nic Gabhainn, S., Fleming, C. and O'Higgins, S. (2007). 'Children's, parents' and teachers' perceptions of child wellbeing'. *Health education*, 107 (6), 511–523.

Spilsbury, J.C., Korbin, J.E. and Coulton, C.J. (2009). 'Mapping children's neighborhood perceptions: Implications for child indicators'. *Child Indicators Research*, vol.2, no.2. pp.111-131.

Spyrou, S. (2011). 'The limits of children's voices: from authenticity to critical reflexive representation, *Childhood – A Global Journal of Child Research*, 18: 151-65.

Statham, J. and Chase, E. (2010). *Child wellbeing: a brief overview*. Childhood Wellbeing Research Centre Briefing Paper, London: Institute of Education. http://www.navo.org.uk/downloads/documents/FinalChildDFEwebsite.pdf

Sutton, L. (2008). 'The state of play: disadvantage, play and children's well-being'. *Social Policy and Society*, vol.7, no.4. pp537-549..

Sweeney, L. (2008). *Your shout: the views of young people living in poor communities in North East England*. Report of a one-day young people's engagement event. London: Institute for Public Policy Research. http://www.ippr.org/publicationsandreports/publication.asp?id=635

Taylor, R.L. and others (2010). 'Children's conceptualization of the term 'satisfaction': relevance for measuring health outcomes'. *Child: Care, Health and Development*, vol.36, no.5. pp.663-669.

The Children's Society (2006). *The Good Childhood: a question for our times*, London: The Children's Society.

The Children's Society (2008). *Happy and they know it? Developing a well-being framework based on children and young people consultation*. London: The Children's Society.

The Children's Society (2009). *The Good Childhood Inquiry: What children told us.* London: The Children's Society.

The Children's Society (2012). *The Good Childhood Report 2012: A review of our children's well-being*, London: The Children's Society.

Thoilliez, B. (2011). 'How to grow up happy: an exploratory study on the meaning of happiness from children's voices'. *Child Indicators Research*, vol. 4, no. 2.pp.323-351.

Thomas, J. (2009). 'Working Paper: Current measures and challenges of measuring children's wellbeing', Household, Labour Market and Social Wellbeing, Newport: Office for National Statistics.

UNICEF (2007). UNICEF Child poverty in perspective: An overview of child well-being in rich countries, Florence: UNICEF Innocenti Research Centre Report Card 7.

Wager, F., Hill, M., Bailey, N., Day, R., Hamilton, D. and King, C. (2010). 'The Impact of poverty on children and young people's use of services', *Children and Society*, 24, pp.400-412.

Watson, D., Emery, C. and Bayliss, P. (2012) . *Children's Social and Emotional Wellbeing*, Bristol: The Policy Press.

Welsh Assembly Government (2010). *Voices of Children and Young People in Wales*
http://wales.gov.uk/docs/caecd/research/110328voicescyp.pdf

White, S. and Petit, J. (2004). *Participatory approaches and the measurement of human well-being*, Helsinki: World Institute for Development Economics Research (WUN).

World Vision (2007). *Kinder in Deutschland 2007, World Vision Survey*, Frankfurt: Fischer Taschenbuch Verlag.

World Vision (2010). Kinder in Deutschland 2010, World Vision Survey, Frankfurt: Fischer Taschenbuch Verlag.