

FAMILY-FOCUSED QUALITY OF LIFE ASSESSMENT AND ITS IMPLICATIONS FOR CHILDREN'S SOCIAL WELFARE: AN ECOLOGICAL VALIDITY CONTEXT

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Abstract

The relationship between the quality of life and social welfare is of shared taxonomy, therefore it is difficult to define unambiguously. It is hard to imagine social welfare without the quality of life, but in order to put the quality of life into practice, we need the context of social welfare. For children's social welfare, family and the way it creates quality of life is central. However, we lack instruments to evaluate children's quality of life with family-focused approach. For that purpose, we introduce KIDSCREEN52 survey with 1763 children (aged 8-18 years old) and 1564 parents. Moreover, we raise the question of ecological validity, firstly, because there is a need to develop measurements that are closer to real life situations, in order to productively contribute to the ensuring of children's social welfare.

Keywords: *welfare, well-being, family, ecological validity, quality of life.*

Introduction

Ecological validity has its roots in the field of psychology research discussing to what extent knowledge from experiments could be transferred to everyday life. In some sense, ecological validity is analogous to external validity. According to Andrade (2018), ecological validity examines, specifically, whether the study findings can be generalized to real life settings; thus, ecological validity is a subtype of external validity. In contrast, ecological validity of a study is a judgment and is not a computed statistic. According to Kvavilashvili and Ellis (2004, p. 11), ecological validity focus "to the study of variables that are ecologically important rather than those that are easily manageable".

Recently, the term of ecological validity has gained new attention and is being actively reconsidered. However, according to Schmuckler (2001) up to now there is no consensus on exactly what is meant by the phrase 'ecological validity'. It has also been widely discussed what research variables help to understand ecological validity. Some researchers think that social interaction is one of the most effective ways to develop more ecologically valid measures in social research: 'Social interaction is an essential part of the human experience' (Reader & Holmes, 2016, p. 134). Everyone would easily agree that the most significant interactions we experience are those in the family. Family is considered to be one of the most important quality of life dimensions. In 2008, at the initiative of the European Commission, a second quality of life survey (macro-level) was conducted in 31 countries, and the results found out that "in all the countries, family played a key role as a source of satisfaction with everyday life; people are generally more satisfied with family and personal life than with essential public services" (cited in Dumbliauskienė & Jarmalavičienė, 2012, p. 6).

Quality of life in a family is becoming more important in the policy of welfare. Conceptually quality of life is closely related to social welfare (Krinitcyna, Mikhailova, & German, 2016; Telešienė, 2015). Quality of life is a very broad and complex concept, covering almost all the spheres of a person's life and indicating the degree of meeting human material, spiritual and social needs. Even though welfare has been a synonym of material wellbeing, in the last decades it started to include indicators of the state of individual's coping systems, various behavioral and psychological responses, and cognitive processes associated with suffering or pleasure, that are similar to QoL. In the present study we follow the suggestion of Noll (2000) who proposed to view the quality of life as a component of the welfare concept (quoted in Krutulienė, 2012). In other words, "quality of life is usually understood as a certain level of welfare, individually perceived and evaluated as a lifestyle. Quite often the content of the quality of life is compared to the concept of social welfare, with an addition of country's economic development indicator – gross domestic product (GDP) per capita" (Dumbliauskienė & Jarmalavičienė, 2012, p. 4). Thus, we can see the connection between the quality of life and welfare in a broader sense, when in accordance with Ventegodt and colleagues' (2003) opinion, well-being is considered to be an aspect of subjective quality of life, which is measured by happiness, satisfaction with life and other indicators. Besides, we do believe that the quality of life approach allows the development of new generation welfare models, the need for emergence of which arises from the critique of the Welfare Rationale model, which gives arguments about overly high dependence on welfare politics, which is entitled as the welfare addiction phenomenon.

For children's social welfare, family and the way it creates quality of life is central. Postmodern family pays increasingly more attention to the quality of life, constantly questioning interpersonal relationships among spouses, parents, and children and the way they create well-being. That is why familial well-being is becoming more and more important in the perspective of welfare (Kaufmann, et al., 2002). There is a lack of quality of life research instruments that aim to study small groups, such as families. KIDSCREEN52 questionnaire enables to reveal patterns of inter-related connections between children's and parents' quality of life assessments and the sociodemographic factors that affect them. We introduce the research with 1763 children, aged 8-18 years old, and 1564 parents who completed KIDSCREEN52 questionnaire separately. Our research design is consistent with new emerging trends in the research about the quality of life, which emphasize the importance of encompassing both the children's and parents' evaluations in the health-related quality of life research, instead

of confining them solely to parents' evaluation (Davis et al., 2006, 2007; Rajmil et al., 2013; Qadeer & Ferro, 2018). Those studies that analyse small groups are considered meaningful: "Ecologically valid paradigms are slowly but surely becoming more common, driven in part by an increase in two-person type designs. With our discussion of ecological validity in mind, it is clear that this trend should continue. However, it may still be beneficial to gain a greater understanding of the potential influence of nuisance variables in social interaction" (Reader & Holmes, 2016, p. 141).

The object of the research is reciprocity in children's and parents' quality of life assessments underpinned with ecological validity in the context of children's social welfare.

The aim of this research is to explore inter-related connections between children's and parents' quality of life assessments underpinned with ecological validity and to discuss implications for children's social welfare.

Methods and organization of the research

The quality of life is a highly complex phenomenon, and an enquiry should be focused on a variety of factors (Starkauskienė, 2011; Servetkienė, 2013; Janušauskaitė, 2008; Veenhoven, 2000; Ventegodt, et al, 2005). Quality of life research instruments are usually comprised of 6 to 10 dimensions, thus encompassing key areas of human life: health, safety, social ties, relationships in the family and in work (school) environment, self-evaluation, independence and others. KIDSCREEN52 survey covers 10 of previously recognized dimensions of quality of life, accounting for rich content of everyday and real life in each dimension as follows:

- Physical well-being dimension describes physical activity, energy, and self-perceived health (5 items).
- Psychological well-being dimension describes positive and negative emotions, life-satisfaction, and optimism (6 items).
- Moods and emotions dimension describe experience of depressive moods and emotions, worries and stressful feelings (7 items).
- Self-perception dimension describes perception of self, whether appearance of body is viewed positively or negatively (5 items).
- Autonomy dimension describes opportunity to choose social activities and leisure time (5 items).
- Parents relations dimension describes relationship with the parents and atmosphere at home (6 items).
- Financial resources dimension describes the money matters (3 items).
- Social support and peers' dimension describes relationship with peers (6 items).
- School dimension describes school environment and capacity, comprising learning, concentration, and feelings about school (3 items).
- Social acceptance (bullying) dimension describes feeling rejected by peers (3 items).

Following KIDSCREEN52 methodology, in addition to the 10 dimensions of quality of life, sociodemographic indicators were identified, such as: education, field of work, income, marital status (of parents) and gender and age (for children).

KIDSCREEN52 questionnaire is completed separately by both children themselves and parents. In order to obtain data not only from children but also from parents of the same family, the questionnaires were coded by pairing, i.e., identical codes were given to questionnaires, one for children and one for parents.

The study design was approved by the bioethical council of the Faculty of Health Sciences, Klaipėda University (Lithuania). The survey was conducted from October 1, 2015 to February 29, 2016 in 11 secondary schools in Lithuania which were selected by using the random number generator of the SPSS software. The research sample is representative and consists of 8 to 18-year-old children and their parents from Lithuania (Grubliauskienė, 2019). The children's age was selected in compliance with the recommendations provided by KIDSCREEN study (Ravens-Sieberer et al, 2006).

Participation in the study was voluntary and anonymous. Children completed anonymous paper questionnaires in the classroom. The aim and procedures of the study were explained before the questionnaires were completed. Parents completed anonymous paper questionnaires, that were brought to them by children in a closed envelope, at home.

Data analysis was performed by using 21st version of IBM SPSS for Windows software (Statistical Package for Social Sciences), and MS Excel program. In order to check for data entry mistakes, frequencies of the responses were calculated. Survey data were compiled into a united database, using participant identification based on the following key characteristics: municipality code, school code, and family code. The use of a unified family code allowed to identify the families who participated in the study (one of the parents and the child) as well as perform a family data analysis.

Statistical data analysis used the same statistical methods for both children's and parents' surveys; that is, Mann–Whitney U test, Spearman rank-order correlation coefficient, Kruskal–Wallis H test, and Wilcoxon Signed-Rank Test. To assess the reliability of the KIDSCREEN52, analysis of the internal consistency was applied, using the formula proposed by Cronbach. Overall, a *p* value of 0.005 or less was assumed to represent a significant result.

Participants of the research

The research sample consists of 1763 children, aged 8-18 years old, and 1564 parents who completed KIDSCREEN52 questionnaire separately.

In 1763 children from 8 to 18 years an even gender-based distribution of the respondents has been obtained, i.e., 51.14 per cent of girls and 48.86 per cent of boys participated in the study. Age-wise, the numbers were the following: 8 to 10-year-olds accounted for 17.9 per cent of those in the study; 11 to 14-year-olds constituted for 40.4 per cent of participants; and 15 to 18-year-olds comprised 41.6 per cent of all the participants.

1564 surveys were completed by both the child and his/her parents. 38.5 per cent of parents had secondary education; slightly more than one fifth of them (21.2 per cent) had university education; 17.1 per cent were graduates of high schools; similar numbers had incomplete secondary and higher non-university education (accordingly, 9.8 per cent and 9.3 per cent), and only 4.2 per cent of the respondents had primary education. The analysis of the marital status of the surveyed parents revealed that the majority of them, i.e., 72.7 per cent, were married or were unmarried but cohabited; almost one fifth (18 per cent) of the parents were divorced; 5.6 per cent were not married and did not cohabit, and 3.8 per cent were widows and widowers.

Results of the research

The analysis of the results and the assessment of the quality of life dimensions revealed statistically significantly lower results. A large part of parents, with respect to the assessment of one dimension, indicated different results than children, i.e. assessing the physical well-

being dimension 61.15% ($p < 0.01$) parents rated this quality of life dimension lower than their children. This means that parents have a different opinion than their children. Parents believe that their child is physically exhausted, physically unprepared and have low energy levels. It is shown that up to 27.35% of children rate this dimension lower than their parents and 11.5% of children view unanimously the assessment of the physical well-being dimension the same as their parents.

When evaluating the autonomy dimension, it was revealed that children assigned a lower rating of 71.53% than their parents to children's quality of life, i.e., children perceive that they are restricted, weighed down and dependent on their parents. Lower parental ratings of this quality of life dimension are typical to 19.35% of families where different opinions and viewpoints are seen between the family members. Whereas, almost one tenth (9.2%) of families have a similar opinion about this quality of life dimension ($p < 0.01$);

When assessing relationship between children and their parents and also the family life dimension, it was revealed that 52.59% of children rate this dimension worse than their parents, i.e., in the family children feel lonely, unnoticed, underestimated, believe that parents are inaccessible and dishonest. Low parental ratings are typical for 37.17% families and to 10.24% of the family's opinions coincided ($p < 0.01$);

From the results obtained children have rated the financial resource dimension 57.22%. This value is worse than their parents' rating. This category of children feels financial dissatisfaction. They perceive that financial resources do not allow them to live the way that they would like to. Up to 30.01% of parents rate this dimension worse, when compared to their children. While 12.76% of assessed families had alike opinions about the dimension of financial resources ($p < 0.01$);

More than a half of the children (50.49%) that participated in the study consider and rate the social support and peer dimensions worse than their parents. In particular, children were feeling a sense of rejection, they believed that they were unaccepted/unsupported by their peers and could not rely on them. Whereas, in comparison 39.55% of parents rate all of these factors worse than their children and 9.96% children's and parents' opinions were similar ($p < 0.05$);

Two-thirds of children (60.03%) in the school environment dimension gave significantly lower ratings than their parents. One third (30.15%) of parents indicated lower ratings than their children. In addition, 9.82% of parents' and children's opinions overlapped ($p < 0.01$).

When analyzing the answers to the questions assigned for a physical well-being dimension, it was found that all questions were rated higher by children than by parents. In the assessment the most similar averages were obtained when children and parents answered these questions: *Do you feel physically strong and healthy? / Does your child feel physically strong and healthy?* (average rating of children – 3.84, average rating of parents – 3.70; $p = 0.000$). However, when asked: *Are you able to run well? / Do you think that your child is able to run well?* a larger assessment gap was obtained between the groups (children – 3.88, parents – 2.91; $p = 0.000$).

The analysis of the assessment questions based on the psychological well-being dimension showed that the closest and at the same time the lowest assessment ratings of children and parents were the following questions: *Have you been in a good mood? Has your child been in a good mood?* (children – 3.90, parents – 3.80, $p = 0.004$), *Have you felt cheerful? Has your child felt cheerful?* (children – 3.89, parents – 3.81, $p = 0.008$). Both children and parents gave the highest ratings to these questions: *Have you felt pleased that you are alive? Has your child felt pleased that he/she is alive?* (children – 4.38, parents – 4.21, $p = 0.000$).

When assessing all the answers to the autonomy dimension questions, the results had statistically significantly higher ratings that were attained by parents. In the evaluation, the following questions that were established to have gained the highest scores for both children and parents were: *Have you had enough opportunities to be outside? Has your child had enough opportunities to be outside?* (children – 3.92, parents – 4.47, $p = 0.000$). Additionally, significant differences can be observed between the means of these assessments.

In the analysis of the relationship with parents and the parents' relations and home life dimension, parents and children gave very similar answers to all of the questions related to this dimension. Statistically significant differences were found between children's and parents' assessments in response to three questions in this dimension. The highest, statistically significant ratings were obtained when answering the following question. *Have you been able talk to your parent(s) when you wanted to? Has your child been able to talk to his/her parent(s) when he/she wanted to?* (children – 4.11, parents – 4.39, $p = 0.000$). The children's ratings are slightly higher than the answers to this question received from the parents: *Have your parent(s) understood you? Has your child felt understood by his/her parent(s)?* (children – 3.96, parents – 3.88, $p = 0.015$). Meanwhile, parents' ratings are slightly higher than those received from children when asked *Have you been happy at home? Has your child been happy at home?* (children – 4.18, parents – 4.36, $p = 0.000$).

The averages of the answers to the questions for the three financial resources dimensions statistically significantly differentiate between children and parents and in all of them parents gave higher ratings than children. The highest rating averages in this dimension ratings were obtained when answering this question: *Have you had enough money to do the same things as your friends? Has your child had enough money to do the same things as his/her friends?* (children – 3.63, parents – 3.99, $p = 0.000$).

In the assessment of the social support and peer dimension, parents rated higher than children all of the questions, to which the answers are statistically significantly different between parents and children. The response averages between these two groups are very close. One question can be distinguished that has received the highest ratings in terms of the social support and peer dimension: *Have you been able to talk about everything with your friends? Has your child been able to talk about everything with his/her friends?* (children – 3.61, parents – 3.78, $p = 0.000$).

Analyzing the school dimension, two questions were statistically significantly higher scored by children and three questions by parents. Children rated higher on the following questions: *Have you got on well at school? Has your child got on well at school?* (children – 3.69, parents – 3.40, $p = 0.000$), *Have you been satisfied with your teachers? Has your child been satisfied with his/her teachers?* (children – 3.65, parents – 3.43, $p = 0.000$). Meanwhile, parents rated higher than children answering the following questions: *Have you been able to pay attention? Has your child been able to pay attention?* (children – 3.43, parents – 3.67, $p = 0.000$), *Have you enjoyed going to school? Has your child enjoyed going to school?* (children – 3.11, parents – 3.54, $p = 0.000$), *Have you got along well with your teachers? Has your child got along well with his/her teachers?* (children – 3.71, parents – 3.93, $p = 0.000$).

Assessing the social acceptance (bullying) dimension, the answers to the two questions of this dimension differed statistically significantly between children and parents, although the average answers were very similar: *Have you been afraid of other girls and boys? Has your child been afraid of other girls and boys?* (children – 1.53, parents – 1.59, $p = 0.009$), *Have other girls and boys made fun of you? Have other girls and boys made fun of your child?* (children – 1.66, parents – 1.73, $p = 0.001$).

Discussion

The results show a reliability threshold level with a Cronbach's alpha greater than 0.70, which is considered acceptable. To assess the intra-scale compatibility of statements, the correlation matrix was determined, and the value of $r > 0.30$ was assumed as the criterion for consistency. Internal validity could be considered a mediator for the ecological validity in a way "when internal validity is low it may be less ecologically valid" (Kvavilashvili & Ellis, 2004, p. 18).

Thinking from the perspective of ecological validity we note the challenge that our everyday lives are rather complex than we can encompass in surveys. Therefore, "when we are asked about them we need ways to simplify our thoughts to provide answers. We do this by using sets of stable assumptions (expectations) to inform our observations" (Carr, Robinson, & Gibson, 2001, p. 1240). Children may not have the same internalized standard as adults for judging their current level of quality of life. Thus, we assume that this is a reason why in the present study the physical well-being dimension was scored higher by children than their parents, while on the rest of the five dimensions (autonomy, family relationships and home life, financial resources, social support and peers, school environment) parents had higher scores than their children.

The present study results show that parents' and children's evaluation of quality of life is different across all the survey questions, and the majority of the differences are statistically significant. Moreover, the results of statistical analysis reveal that differences in parents' and children's assessments of quality of life are related to gender, age (of children) and marital status, income and education (of parents). This implies that the child's quality of life in the family is not a sum of individual family members' assessments. Similarly, the quality of life in society is not only a sum of individual life qualitative evaluations (Norkus, 2004).

Considering quality of life as the discrepancy between our expectations and our experience provides a way of explaining how we evaluate it. Moreover, expectations are learnt from experience (Carr, Robinson & Gibson, 2001, p. 1240). The present study results illustrate the path of learning from experience. For example, in the dimension of the physical well-being children, more than their parents, consider themselves to have more physical energy and be more physically fit. The closest averages among children's and parents' evaluations were when answering the question: *Have you felt fit and well? Has your child felt fit and well?* On the other hand, when participants were asked to give details about their physical abilities, such as: *Have you been able to run well? Has your child been able to run well?* the results show bigger difference in evaluation averages. This means that in the general understanding physical wellbeing is evaluated better than when looking at separate items of physical capability.

Conclusions

The results of the psychometric analysis of the Lithuanian KIDSCREEN52 confirm the high quality of this tool. In terms of reliability and validity, the Lithuanian KIDSCREEN52 version is comparable to the original English version. Moreover, we extend the discussion to ecological validity to provide future empirical studies with a framework that could lead to a more responsive welfare research.

Considering how the responses about quality of life assessment of both children and parents correspond to each other and where they differ from the ecological validity approach, we note a pattern of shared taxonomy that could be illustrated with trends as follows:

The study showed that 6 out of 10 dimensions of quality of life were statistically significantly different between children and parents. One of them, that is physical wellbeing dimension, was scored higher by children than their parents, while on the rest of the five dimensions (autonomy, family relationships and home life, financial resources, social support and peers, school environment) parents had higher scores than their children.

It was established that the average scores on all dimensions are different in parents' and children's groups. Children score statistically significantly highest on the following questions: *Have you felt pleased that you are alive? Have you felt loved by your parent(s)?* On the other hand, parents' highest scores are when answering the following questions: *Has your child had enough opportunity to be outside? Has your child been able to choose what to do in his/her free time?*

Conflicts of interest

The authors declare that they have no conflicts of interest

Acknowledgements: This research is funded by the European Social Fund according to the activity 'Improvement of Researchers' Qualification by Implementing World-Class R&D Projects' of Measure No. 09.3.3-LMT-K-712.

References

- Andrade, C. (2018). Internal, External, and Ecological Validity in Research Design, Conduct, and Evaluation. *Indian journal of psychological medicine*, 40 (5), 498-499. https://doi.org/10.4103/IJPSYM.IJPSYM_334_18
- Carr, A. J., Gibson, B., & Robinson, P. G. (2001). Measuring Quality of Life: Is Quality of Life Determined by Expectations Or Experience? *British Medical Journal*, 322 (7296), 1240-1243. Retrieved from: <http://parlinfo.aph.gov.au/parlInfo/search/display/display.w3p;query=library/jmart/NN646>
- Davis, E. et al. (2006). Pediatric quality of life instruments: a review of the impact of the conceptual framework on outcomes. *Developmental Medicine and Child Neurology*, 48, 311-318.
- Davis, E. et al. (2007). Parent-proxy and child self-reported health-related quality of life: using qualitative methods to explain the discordance. *Quality of Life Research*, 16 (5), 863-871.
- Dumbliauskienė, M. & Jarmalavičiienė, S. (2012). Gyvenimo kokybės kompleksinio vertinimo metodologinės problemos [Methodological problems in complex evaluation of the quality of life]. *Geografijos metraštis [Geography Yearbook]*, 45 (1), 3-16.
- Grubliauskienė, J. (2019). *Edukacinė šeimos dimensija su sveikata susijusios vaikų gyvenimo kokybės vertinimo kontekste [The educational dimension of the family in the context of health-related assessment of children's quality of life]*. Daktaro disertacija [PhD Thesis]. Klaipėdos universitetas [Klaipėda University].
- Janušauskaitė, G. (2008). Gyvenimo kokybės tyrimai: problemos ir galimybės [Quality of life researches: problems and possibilities]. *Filosofija. Sociologija [Philosophy. Sociology]*, 4, 34-44.
- Khalifa, H. A. M. (2019). Quality of Life and Its Relation to Creative Thinking among a Sample of Female Adolescents in Jeddah. *The International Journal of Social Sciences and Humanities Invention*, 6 (2), 5297-5311. doi:10.18535/ijsshi/v6i2.06.
- Kaufmann, F. et al. (2002). *Family Life and Family Policies in Europe: Volume 2: Problems and Issues in Comparative Perspective*. Oxford University Press. Retrieved from: <http://econpapers.repec.org/bookchap/oxpobooks/9780198233282.htm>.
- Krinitcyna, Z. V., Mikhailova, T. R., & German, M. V. (2016). Quality of Life as the Basis for Achieving Social Welfare of the Population. *SHS Web of Conferences*, 28, 1060. doi:10.1051/shsconf/20162801060. <https://search.proquest.com/docview/1800708110>.

- Krutulienė, S. (2012). Gyvenimo kokybė: sąvokos apibrėžimas ir santykis su gero gyvenimo terminais [Quality of life: Definition of the concept and its relation to the notion of good life]. *Kultūra ir visuomenė. Socialinių tyrimų žurnalas [Culture and Society. Journal of Social Research]*, 3 (2), 117-130.
- Kvavilashvili, L. & Ellis, J. (2004). Ecological Validity and Twenty Years of Real-Life/Laboratory Controversy in Memory Research: A Critical (and Historical) Review. *History and Philosophy of Psychology*, 6, 59-80. Retrieved from: <http://hdl.handle.net/2299/1971>.
- Norkus, Z. (2004). Ar galime gyventi geriau? Velfarizmas ir jo alternatyvos [Can there be a better life? Welfarism and its alternatives]. *Politologija [Politics]*, 4 (36), 3-39.
- Qadeer, R. A. & Ferro, M. A. (2018). Child-parent agreement on health-related quality of life in children with newly diagnosed chronic health conditions: a longitudinal study, *International Journal of Adolescence and Youth*, 23, 1, 99-108. DOI: 10.1080/02673843.2017.1297242.
- Rajmil, L., Lopez, A. R., Lopez-Aquila, S., & Alonso, J. (2013). Parent-child agreement on health-related quality of life (HRQOL): a longitudinal study. *Health and Quality of Life Outcomes*, 11, 101. Retrieved from: <https://doi.org/10.1186/1477-7525-11-101>
- Ravens-Sieberer, U., Gosch, A., Erhart, M., et al. (2006). *The KIDSCREEN Questionnaires. Quality of life questionnaires for children and adolescents. Handbook*. The European European KIDSCREEN group. Pabst Science Publishers.
- Reader, A. & Holmes, N. (2016). Examining Ecological Validity in Social Interaction: Problems of Visual Fidelity, Gaze, and Social Potential. *Culture and Brain*, 4 (2), 134-146. doi:10.1007/s40167-016-0041-8. <https://www.ncbi.nlm.nih.gov/pubmed/27867831>
- Schmuckler, M. A. (2001). What is Ecological Validity? A Dimensional Analysis. *Infancy*, 2 (4), 419-436. doi:10.1207/S15327078IN0204_02. https://onlinelibrary.wiley.com/doi/abs/10.1207/S15327078IN0204_02.
- Servetkienė, V. (2013). *Gyvenimo kokybės daugiadimensinis vertinimas, identifikuojant kritines sritis [Multidimensional assessment of the quality of life identifying critical areas]*. Daktaro disertacija [PhD Thesis]. Mykolo Romerio universitetas [Mykolas Romeris University].
- Starkauskienė, V. (2011). *Gyvenimo kokybės veiksniai ir jos kompleksinio vertinimo modelis [Quality of life factors and its integrated measurement model]*. Daktaro disertacija [PhD Thesis]. VDU [Vytautas Magnus University].
- Telešienė, A. (2015). *Asmeninė ir socialinė subjektyvi gerovė Lietuvoje [Subjective personal and social wellbeing in Lithuania]*. *Filosofija. Sociologija [Philosophy. Sociology]*, 26, 4, 293-303.
- Veenhoven, R. (2000). The Four Qualities of Life. *Journal of Happiness Studies*, 1 (1), 1-39.
- Ventegodt, S., Flensburg-Madsen, T., Andersen, N. J., & Merrick, J. (2005). The life mission theory VII. Theory of existential (Antonovsky) coherence: a theory of quality of life, health, and ability for use in holistic medicine. *Scientific World Journal*, 6 (5), 377-380.
- Ventegodt, S., Merrick, J., & Andersen, N. J. (2003). Quality of Life Theory I. The IQOL Theory: An Integrative Theory of the Global Quality of Life Concept. *The Scientific World Journal*, 3, 1030-1040.

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Summary

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Quality of life in the present era has become a trend in society and a goal that all economic, political, social and educational systems seek to achieve for the new social life (Khalifa, 2019). The relationship between the quality of life and social welfare is of shared taxonomy, therefore it is difficult to define unambiguously. It is hard to imagine social welfare without quality of life, but in order to implement quality of life, there is a need for the context of social welfare, which could be described with social and personal well-being indicators, such as a subjective perception of socioeconomic status, social optimism, social ties and level of active involvement (Telešienė, 2015; Krinitcyna, Mikhailova, & German, 2016;). In the opinion of Krutulienė (2012), the problem lies in that the terms “quality of life”, “welfare” and “well-being” are usually used as synonyms. In this article we follow Noll’s (2000) view which indicates that quality of life is a component of the welfare concept (cited in Krutulienė, 2012).

Postmodern family pays increasingly more attention to the quality of life, constantly questioning interpersonal relationships among spouses, parents, and children and the way they create well-being. That is why familial well-being is becoming more and more important in the perspective of welfare (Kaufmann et al., 2002). However, we lack instruments to evaluate children’s quality of life with family-focused approach. For that purpose, we introduce KIDSCREEN52 survey with 1763 children (aged 8-18 years old) and 1564 parents. Moreover, we raise the question of ecological validity, firstly, because there is a need to develop measurements that are closer to real life situations, in order to productively contribute to the ensuring of children’s social welfare. Secondly, even though such terms as quality of life and welfare are tightly and synonymously intertwined in their usage, the instruments that measure them are very different, which limits opportunities to transfer data among various fields. We claim that ecological validity could help better understand the relationships between different measurement indicators. KIDSCREEN52 survey covers the widest range of already recognized dimensions of quality of life, accounting for rich content of everyday and real life in each dimension.

The results of statistical analysis reveal that differences in parents’ and children’s assessments of quality of life are related to gender, age (of children) and marital status, income and education (of parents). Moreover, ecological validity approach enables to note a pattern of shared taxonomy that implies that the child’s quality of life in the family is not a sum of individual family members’ assessments or causal looping dependency of the individual’s behavior. We do believe that the quality of life approach allows the development of new generation welfare models that are oriented to self-regulated and indeterministic individual behavior enabling for universal abilities that can help people create satisfying lives and that is increasingly in demand in all environments.

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