Individual quality of life: approaches to conceptualization and assessment


The term “quality of life” (QoL) is fraught with preconceptions, misconceptions and general all round confusion. How do you define it? What is the best way to measure it? These and related questions have been a driving force behind research during the past decade. Research efforts have produced a vast array of differing measures, definitions and population studies, accompanied by very little theory and, often, a great deal of criticism. Amidst a flurry of attempts to work out the perfect way to assess QoL, the “best” questions and the most accurate way to score the answers, we may have lost sight of the real issue: the individual’s quality of life.

The authors of these 16 chapters challenge many of the current conventional approaches to conceptualization and measurement of QoL which focus on population studies rather than the individual. Assessment has traditionally used standardized questionnaires, composed of predetermined categories and set responses that force the respondent to reply to a specific set of formalized questions. In these circumstances there are no options for choosing and assessing the importance of issues that individuals themselves find relevant although the researchers may not. So, for instance, the experience of pain after surgery may be a major feature of the questionnaire while less obvious factors, such as worries about who will look after pets left at home during hospitalization, are overlooked because the researchers find them trivial, regardless of whether the patients do. Responses to questionnaires are then analysed quantitatively, with individual experiences and perceptions added up and expressed as a group mean for comparison with other groups. The “group” is often as crudely defined as “sick” or “well”, “male” or “female”, “Asian” or “African”. To what extent and with what success, this book asks, can methods of this kind measure an individual’s quality of life?

The editors make it clear from the outset that in their opinion quality of life is a matter of the unique experience of the individual and is therefore not susceptible to traditional methods of enquiry. They propose that individuals should be asked to express their QoL in their own terms, rather than to reply to formalized questions about categories defined and chosen by others. Drawing on contributions from highly respected researchers and academics, they develop this argument in a systematic manner, focusing on the issues that are relevant to the study of individual QoL, as well as the measures that are available for this purpose.

Several of the contributions provide brilliant accounts of the difficulties that arise with interpreting data produced by existing research instruments, and highlight the need for further theoretical work. The difficulties and psychometric pitfalls of the preferred approach, which focuses on the individual, are also explored in detail. Throughout the book the authors present a consistent argument that is best illustrated by the editors’ own QoL instrument, which they call the Schedule for the Evaluation of Individual Quality of Life (SEIQOL). Their description of this measure includes its theoretical basis, the practical ways of assessing QoL from the individual’s point of view, and some of the difficulties and successes met with in using this approach. Overall, this results in a well-balanced account of issues related to individual QoL and the problems associated with both group and individual measurement. This in turn serves to highlight the types of questions researchers should now be tackling.

This is an important book for researchers, health professionals, students and academics alike who are dealing with complex issues of health and well-being. While this exciting new approach will have a valuable role to play in assessing the QoL of individuals, it will also provide new ways to assess the outcomes of interventions in different patient groups. In clinical practice it can be particularly useful for health professionals engaged in one-to-one consultations with patients. They can use individual QoL assessment not only to find our where improvement or deterioration is taking place in areas that are important to the patient, but also to facilitate two-way communication and decision-making, improve patient satisfaction and increase commitment and adherence to therapy.

Some researchers who favour the individual approach have shied away from any form of measurement in view of the vast number of factors involved and the infinite complexity to which they give rise. This collection of articles should give them pause. It provides thought-provoking and convincing arguments that individual QoL can indeed be measured, despite the obvious difficulties and limitations. Many areas still need to be clarified, such as the context in which the assessment is undertaken, the scaling features, the type of statistical procedures needed to provide the necessary psychometric credibility, and the number of values to be measured for each individual. However, this exploration of the issues gives clear and encouraging indications of the way forward for research.

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