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Chapter

Well-Being and Culture: An African Perspective

Erhabor Sunday Idemudia and Adekunle Adedeji

Abstract

Well-being as a subject is often looked at from a Western perspective, including definitions and measurements. This, however, ignores the sociocultural characteristics of individuals or groups that may be crucial to the subjective conceptualization of well-being. The concept of well-being relates to understanding how people derive and interpret wellness regarding their interactions with other humans within the family, community and social context. This viewpoint of well-being is presented in this chapter as "holistic" from a cultural approach. The notion of well-being from an African perspective is usually defined within the framework of group norms, values, kinship relationships and ties entrenched in cultural values. The concept of well-being in this sense also runs counter to the idea of well-being in western cultures. The African is a 'group person', a 'family person' and the 'we person'. These sociocultural features are presumed to affect or influence well-being, mental health and treatment. This chapter expounds on techniques to effectively understand the culture in health from the African perspective. We submit that culturally sensitive measures of well-being will aid deeper exploration of the construct within the African setting and allow for a construct base comparison between Western and African settings.

Keywords: culture/well-being, African perspective, sociocultural determinants

1. Introduction

Well-being has been investigated from a multidisciplinary approach, with each discipline defining the concept and exploring it within its paradigm of their enquiry. The multidisciplinary approach to well-being has made this concept contested in terms of its makeup, definition and breadth [1, 2]. Well-being is often understood as the evaluations of individual life satisfaction [3], subjective feelings or moods such as happiness, sadness and anger [4] and judgements about the meaning and purpose of life [5]. While this concept generally seeks to summarise individual evaluations of life outcomes, debates around well-being have thrived among scientists of various fields and backgrounds. The subjective nature of well-being that allows individuals to evaluate their own lives in the context of broader social forces and environment has facilitated the sociological exploration of this concept [6]. On the other hand, reference to the WHO (1946: 100) definition of health as not the mere absence of diseases but a state of well-being [7] continues to support the biopsychosocial exploration of well-being by health professionals.

While there is no consensus around a single definition or measure of well-being, the agreement is that conceptualising well-being includes the presence of positive feelings and moods (e.g., happiness), the absence of negative emotions (e.g., anxiety or depression), satisfaction with life, fulfilment and positive functioning [8–10]. In simple terms, well-being integrates all aspects of mental and physical health, socioeconomics and environment to produce a more holistic approach to disease prevention, health promotion and facilitate positive life outcomes. Furthermore, the lack of consensus on what constitutes well-being is not limited to the investigation approach or its composition. Another area of disagreement concerning well-being is its generalisation across cultures. Does well-being mean the same thing across cultures? The development of well-being measures and their use in different cultures presupposes that well-being connotes the same thing across cultures and can be captured with the same measures.

The complexity of well-being as a concept is further evident in its multidimensional conceptualisation and the various measures for policy and research. These measures, in the form of scales and indices, are primarily divided into two large categories: objective and subjective well-being [11]. Subjective measures of well-being focus on an individual's internal subjective assessment, based on cognitive judgements and affective reactions, of their own life as a whole [8]. Many of these measures focus on different dimensions within the concept of well-being, for example, the psychological well-being (PWB) scale [12], the life satisfaction questionnaire (LSQ) [3] and the World Health Organisation Quality of Life (WHOQOL) [7].

On the other hand, objective well-being captures societal rather than an individual perspective on well-being based on tangible and quantitative indicators [13]. An example is the United Nations Development Programme Human Development Index [14] or the OECD's Better Life initiative [15]. These objective measures use social indicators frameworks to measure societal development. They use indicators, such as aggregate measures of socioeconomic status (i.e., education, income, employment), health, security, housing, environmental quality and political and social inclusion-built environment, community, and economy (GDP).

Several government policies, social agendas and community initiatives have signalled growing interest in well-being to reduce inequality and facilitate better life outcomes. Similarly, studies have found high levels of well-being associated with a range of positive life outcomes, including productivity, good health, social progress, pro-social behaviour and higher life expectancy [1, 15, 16]. However, to transfer the knowledge from well-being research to practices, it is crucial to understand the characteristics and predictors of well-being in its own right and in the sociodemographic, cultural and environmental context. Various studies have suggested exploring and understanding well-being within the context and character of the people in a particular sociocultural or geographical setting [17]. This will provide an essential foundation and serve as standard metrics for those engaged in health promotion and policymaking to facilitate well-being.

2. Methodology

This chapter titled "Well-being and Culture: An African Perspective" is generally anchored on a review of the literature on well-being and culture from an African perspective using databases, such as PubMed, Scopus and ISI web. Only articles published in English Language and indexed from 2015 to 2022 were referenced. Due to the relevance of some articles to the subject matter, some older articles were also included. The articles were searched using keywords like 'wellbeing, culture, cultural,

African, Africa, health and way of life'. To also increase the pool of articles and papers of interest to the subject matter, hand-searching of some articles cited from these databases was also carried out. Original articles, metanalytic studies, monographs and reviews with relevance to well-being and culture from an African perspective were part of the studies included in this paper.

3. Current literature on well-being

In recent years, many scholars have attempted a comprehensive review of the literature on well-being concerning different life courses, demography, socioeconomic characteristics and other life outcomes. While findings from these reviews have provided a more straightforward path to promoting well-being, the overwhelming discord in understanding this concept remains unchallenged.

A systematic review synthesising evidence from 393 articles found that various psychological interventions can significantly improve mental well-being [18]. They further highlighted that interventions' significance and effect sizes differ based on target populations and outcomes studied. This implies that the adaptation and effectiveness of an intervention to promote well-being primarily depend on how well-being is contextualised and the targeted group's sociocultural, demographic, economic, etc., characteristics [18]. In another review by Fleuret and Atkinson (2007), the authors identified the need to further promote well-being as an explicitly desired outcome across different policy arenas. They also highlighted the challenges in defining and distinguishing well-being from other similar concepts, even within the same context. For example, they argue many studies failed to differentiate between quality of life, happiness and well-being. However, the review submits that the range of concerns, approaches and settings within which well-being is explored requires a multidimensional exploration. According to the authors, this multifaceted exploration will offer the opportunity to rethink the well-being issue by contextualising it and adapting it to different population characteristics [19], for example, culture.

Similarly, in a meta-analysis, Tan et al. (2020) tested if the association between objective socioeconomic status and subjective well-being and subjective socioeconomic status and subjective well-being differ across 357 studies, with 2,352,095 participants. They found that the association between socioeconomic status and subjective well-being increased with population density and reduced income inequality. The results further suggest that subjective well-being has a stronger link with subjective socioeconomic status [17]. Thereby emphasising that subjective well-being can differ due to demographic features and individual socioeconomic status.

Researchers from different disciplines have continued to examine various aspects of well-being. Depending on how it is conceptualised and measured, well-being is assumed to provide a common metric that can assist policymakers in structuring and evaluating the effects of different policies (e.g., reducing the unemployment rate can improve life satisfaction) [20]. Similarly, measuring and promoting well-being can be helpful for multiple stakeholders involved in social work, disease prevention and health promotion, as well-being predicts positive health-, job-, family-, and economically related outcome [20]. For example, higher levels of well-being are associated with decreased risk of disease, illness and injury; better immune functioning; speedier recovery and increased longevity [20]. Furthermore, economic exploration of well-being also suggests that individuals with high well-being are more valuable at work and are more likely to positively impact their communities.

While findings from these studies have argued well-being as a valid population outcome that measures morbidity, mortality and economic status; they further emphasise that well-being as a subjective measure provides information on how people perceive their life in relation to their sociocultural, demographic and geographical characteristics. Furthermore, the adapted definitions or conceptualisations and measures of well-being have their origin in western culture [21] and reflect middle- and upper-class characterisations of the meaning of a full and satisfying life [22]. The resulting variation in the definition and measurement of well-being is also visible in other biopsychological determinants of life outcomes. In simple terms, the role of cultural and environmental factors in defining what well-being means to an individual and how this is measured by researchers cannot be overstated.

4. The African perspective on well-being

Human well-being remains a focal point of concern in mental health discourse. This results from the implications of well-being for varied life outcomes, such as physical health, life satisfaction, job satisfaction and social relationships. The importance of well-being is emphasised by its inclusion in the sustainable development goals (SDGs) of the United Nations. The inclusion of well-being in the SDGs as one of the factors or variables in societal sustenance and prosperity underscores it as a public health variable.

The criticism of the western-centric nature of well-being's conceptualisation is based on the notion that the culture of a people influences what matters to them, their worldviews and values [23, 24]. For example, Hofstede's cultural dimension theory emphasises key differences across cultures and how these differences impact the behaviours of people from different cultures [25]. In addition, societal peculiarities, such as economic, political and other social characteristics, are significant in determining well-being [8, 26]. As such, what makes 'people feel well' is most likely to vary across cultures. This position is primarily supported by well-being researchers that have proposed that people of different cultures differ markedly in what factors are essential to their well-being [23, 24, 27].

The problem of neglecting cultural realities in defining or identifying the factors contributing to well-being is that cross-country comparisons may be faulty, as well-being indicators may be wrongly generalised across cultures. This generalisation becomes more problematic when cross-country comparisons are used to rank countries on well-being and develop policies and strategies to address well-being. For example, international well-being reports such as the Happy Planet Index, World Happiness Report or quality of life Index, which report on country-level well-being and ranks, use the same indicators or factors to quantify well-being across countries.

A group's culture largely shapes its social reality, what is desirable, the standards for behaviours and what is socially applauded. Cultural differences in the dimension of individualism vs. collectivism significantly impact what is essential for well-being [28, 29]. In cultures that are more individualistic than collectivistic, such as in Western Europe, North America, Australia and New Zealand, personal achievements, the pursuit of personal goals, personal control and self-expression are more likely to be emphasised over social relationships, loyalty and interdependence [25, 29]. As such, the prevailing cultural prescriptions for a living would inadvertently feature in members' subjective well-being [24].

African culture is highly collectivistic, with an emphasis on social connectedness. The definition of the self in relation to others is a central aspect of the collectivistic African culture [24]. As such, African cultural prescriptions emphasise social relatedness variables [24], such as family bonding, familial piety, communal relations, prosociality and spirituality. There is minimal research on the conceptualisation of well-being and its influencing factors from the African perspective [30]. What influences well-being in the African context? This question requires research to understand the culture-specific factors that contribute to well-being. Although a majority of research on well-being originates from the west and not much data exists on well-being in Africa, measures of well-being have been in use in Africa since the 1980s [21] (Botha & Snowball, 2015). Research on well-being is gaining momentum [31–33]. Most recent studies on well-being in Africa have focused on using contextual data to identify and analyse what uniquely contributes to well-being in the African context. Research on well-being from these different African contexts has highlighted the factors that define well-being. These studies provide evidence against the indiscriminate use of foreign measures of well-being. For example, Osei-Tutu et al. (2020), in a research based on the Ghanaian context, explored the concept of well-being by interviewing local cultural experts on the models of well-being implicit in four Ghanaian languages of Ga, Akan, Dagbani and Ewe. Findings revealed local models of well-being that encompass good living expressed as moral living, material success and proper relationality and peace of mind. Participants also indicated good health and positive affective states as necessary for well-being.

Furthermore, with a South African sample, Ferrari (2022) investigated what contributed to the well-being of a group of South African women using a focus group discussion approach. The author found that women's well-being is derived from the relational roles they play as wives, mothers and social support to peers. Likewise, Ohajunwa et al. (2021) used a qualitative approach involving one-on-one interviews, focus groups, photographs, reflective journal entries and observations to understand the well-being within four villages in Bomvanaland in the Eastern Cape Province of South Africa. The authors reported that spirituality is a central aspect of the well-being of members of these communities. Spirituality is captured in the belief that one has a role to play in the world and that a spiritual bond exists between people. Other research on well-being in the African context has equally emphasised social embeddedness and interdependence with others [24], transcendence, justice, wisdom and knowledge, humanism (altruism) and positive family relationships as core contributions to well-being [34]. These various studies demonstrate the importance of contextual exploration of psychological processes, in this case, what contributes to well-being. In contrast to western models of well-being that highlight the importance of personal growth, aspirations and fulfilment in well-being, African models of well-being have strongly emphasised the value of positive relationships with others.

5. Conclusion and recommendation

Previous studies have highlighted culture as a significant predictor of Africans' social interaction and day-to-day living [35–37]. So far, we have argued that different cultures and everyday experiences affect individual perceptions of their well-being. More holistic, these differences in population sociocultural features allow us to revisit our conceptualisation of well-being. This toss is good in many ways. While the sense of independent lifestyle in many western and developed countries may associate with

better well-being outcomes [38–40], for many African populations, a substantial value is placed on the indigenous social support system that encourages or necessitates extended family networks, neighbours and community [41–43]. These indigenous social support systems are arguably the root of the sense of well-being among the African population.

This implies that westernised measures and definitions of well-being may be inapplicable in an African setting. A sociocultural conceptualisation and operationalisation of well-being keeping in mind the role of family, community solidarity and other Afro-specific cultural features is, therefore, necessary for a more precise exploration of the determinants of well-being and promotion of well-being among the African population. These explorations will provide the well-needed framework for policymakers and social and health workers to plan and evaluate interventions to promote positive life outcomes.

For the individual, re-evaluating well-being in the context of one own culture may encourage self-awareness of curial determinants of life outcomes and facilitate behaviours that aid better well-being outcomes. Furthermore, cultural adaptation of the well-being concept for family and community may allow for a more realistic evaluation of one's position and need. In other words, such re-evaluation of well-being will help African families and communities identify factors peculiar to their well-being and individual or group needs that facilitate well-being. Cultural adaptation of well-being in African settings will aid the measurement, understanding and promotion of community, family or individual relevant determinants of life outcomes.

For research, developing a culturally sensitive measure of well-being will aid deeper exploration of the construct within the African setting. It will also allow for a construct base comparison of subjective well-being between western and African settings. Furthermore, keeping in mind the debate around what constitutes well-being, an Afrocentric exploration of the concept may provide a basis for establishing the core components of well-being across cultures.

Conflict of interest

The authors declare no conflict of interest.

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