Title: The powerful combination of group interviews and drawings: how to give children a voice in the understanding of well-being.

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Abstract (200 words):

The study of subjective well-being is of great importance as it has been related with positive development throughout the whole life course. The traditional focus given to parents or experts reporting on behalf of children has given way to the emergence of an increasing number of approaches giving children a voice in the understanding of their own well-being.

The purpose of the study presented in this chapter was to identify key concepts regarding well-being as experienced by children in their everyday contexts, and their own understanding of these concepts, through the use of two different qualitative methods – group interviews and drawings. Results from four group interviews (with 19 children with a mean age of 10) and from their drawings showed that children perceived well-being as a multidimensional concept. Children's rights and school domains were central to the concept. Family and time use emerged both through group interviews and drawings. Implications of this study include the recommendation for more generalized use of complementary methods to properly capture children's point of view on socially significant topics, such as well-being.

Key words: Subjective well-being; children; qualitative methods

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Subjective Well-being, its importance and study in adults and children

The study of subjective well-being is of great importance as it has been related with health and longevity (Diener & Chan, 20111), income, productivity, organizational behavior (e.g., performance, absenteeism), educational outcomes (Gutman & Vorhaus, 2012) and individual and social behaviors (e.g., increased sociability, reduced risk-taking; De Neve, Diener, Tay, & Xuereb, 2013). Subjective well-being is also an important indicator of positive development throughout the whole life course, including early and middle childhood (Park, 2004).

There is not a single, unique definition of subjective well-being. The term was introduced by Diener (1994), and can be defined as the "person's cognitive and affective evaluations of his/her life, including both emotional reactions and cognitive judgments of satisfaction" (Diener, Lucas, & Oishi, 2002, p.63).

Children's subjective well-being is an equally complex and multidimensional concept (Ben-Arieh, Dinisman, & Rees, 2017); it can be defined as a set of individual characteristics underlying a positive state, a continuum of positive and negative emotions and the evaluation of significant contexts of children's lives (Rees, Goswami, & Bradshaw, 2010). Such definition of subjective well-being points to a human ecology approach that postulates that child development occurs as an interaction between biological and psychological elements of the child, with the influence of significant contexts (e.g. family, neighborhood, school, community, culture, society; Garbarino, 2014).

Given the complexity of the concept, it is not surprising that the literature is unclear when describing and defining domains of subjective well-being in children. The choice of those domains depends on theoretical perspectives, data availability (e.g., indicators are sometimes collected from different surveys; the sample is not always from the same child age group) and policy focus (e.g., quality of life, child poverty, social exclusion, children's rights) (Lee, 2014; Statham & Chase, 2010). A review by Fernandes, Mendes, and Teixeira (2011) on the measurement of child well-being across studies identified four common dimensions of children's subjective well-being: Material situation/Socio economic context; Health/Physical health, Education/Cognitive achievement and Social relationships/Social Health.

Overall dimensions considered vary greatly across studies, even when we look to some of the most cited studies in the literature (Fernandes et al., 2011). Using the literature on adult well-being, Land et al (2001), for example, in an effort to build an index on children and youth well-being in the US, used seven domains: material well-being, health, social relationships, safety/behavioral concerns, productivity/educational attainment, place in the community, and emotional/spiritual well-being.

Comparative studies have shed a new light on the domains of child subjective well-being. In a survey of child well-being developed in the 27 countries of the European Union existent at that time (i.e. 2006), in addition to Norway and Iceland, Bradshaw and Richardson (2009) described seven domains: some of which are common to Land and colleagues (2001), for example – health, personal relationships, material resources, education, behavior and risks – besides housing, the environment and what they call subjective well-being (e.g., personal well-being). The Innocenti Report Card 11 (UNICEF, 2013) separated for the first time subjective well-being from more objective domains (material, health, education, behaviors and housing; Klock, Clair, & Bradshaw,

2014) identifying, in turn, life satisfaction, relations with family and friends, school and health. Also, the worldwide research survey on children's subjective well-being – the International Survey of Children's Well-Being (ISCWeB) – includes a cognitive subjective well-being dimension (evaluations of life as a whole) as well as particular aspects or domains of life: living situation, home and family relationships; money and economic circumstances; friends and other relationships; local area; school; time use; self; and children's rights (Rees & Main, 2015).

More recently with the increasing complexity of family structure, some studies demonstrate the utility of also including family structural themes when studying children's well-being (Brown, Manning, & Stykes, 2015).

Giving children a voice in the understanding of well-being.

The 1989 United Nations Convention on the Rights of the Child helped to give and increase recognition of the importance of children's own point of view (Ben-Arieh, 2007). This recognition was an important path to establishing a culture of democracy and citizenship (Correia, Camilo, Aguiar, & Amaro, 2019) in addition to informing parents, communities and policy makers about children's point of view on different aspects related to their lives.

Knowing children's point of view promotes evidence-based decision-making and consequently the development of more coherent and effective policies (UNICEF Spain, 2012) aiming to address the UN sustainability goals for the 2030 Agenda. As Fattore et al (2009) have pointed out, when given the chance, children have both the capacity and ability to participate in research about their lives.

The traditional focus given to parents or expert proxies for reporting on behalf of children (Hendershot, 2004; Beh-Arieh, & Shimon, 2014) has since given way to the emergence of an increasing number of studies conducted with children assessing their

points of view (Ben-Arieh, 2012; Casas, 2004, 2011). After a decade of work on child well-being adult-centered indexes, such as the Index of Child and Youth well-being from the US, Child Well-being Index for the European Union, the Microdata Child, Well-being Index, and the Deprivation Index amongst others (Fernandes et al., 2011), a set of survey-based comparative multinational studies with children have emerged in more recent years accessing directly children's point of view about their lives and well-being.

For example, the first comparative child well-being study developed by the OECD was first presented 10 years ago, and involved 30 countries (OECD, 2009); whereas the International Survey of Children's Well-Being (ISCWeB), involved more than 56,000 children from 21 countries for the second wave of data collection (2013-2014; Rees & Main, 2015). More recently, using a Portuguese sample of 914 responses from children and their caregivers, Fernandes, Mendes and Teixeira (2013) developed a child well-being index in which children's views on their well-being assumed a central role.

Survey-based research on children's subjective well-being in Portugal

Most of the studies that measure subjective well-being in children (and adolescents) that consider their views are survey-based (Fattore, Fegter, & Hunner-Kreisel, 2018; Lima & Morais, 2018); and Portugal is not an exception.

Early in 2005, Portuguese children and adolescents (mean age of 12) provided their views regarding their subjective well-being in the KIDSCREEN European project. The aim of the project was to build a standardized cross-cultural questionnaire to estimate the subjective quality of life of children, adolescents and their parents (Gaspar et al., 2010). The KIDSCREEN-52 instrument was translated and piloted for the Portuguese population in 2005 (Matos et al. 2006) and included ten dimensions (e.g. physical well-being, psychological well-being, moods and emotions). Overall, results showed that the

domain “Autonomy” was related to both “Parent Relation and Home Life Context” and “Social Support and Peers”, indicating that autonomy is an important feature in children’s life, and parents and friends are relevant actors providing emotional, personal and social support (Matos, 2005).

In 2009, Bastos and Machado carried out a study that evaluated child poverty as a state of deprivation based on specific child indicators of well-being. In this study, Portuguese children (from the third and fourth grade) answered a questionnaire in which indicators translating children’s own views about well-being were included (e.g. the child’s positive perception of school or positive perception of the neighborhood). Results showed that children's deprivation was particularly affected by issues related to education, health, housing and social integration (Bastos & Machado, 2009).

Recently, Tomyn, Dias and Stokes (2015) carried out a comparative study with a Portuguese and an Australian sample, in which they used a measure to evaluate subjective well-being that asked respondents to indicate their level of ‘happiness’ with seven life domains (e.g. Standard of Living, Health, Achieving in Life). The authors found between group differences on the domains of Standard of Living, Safety and Future Security, with Australian adolescents scoring significantly higher, and in the domain of Community, which correlated more strongly with the other domains in the Portuguese sample. The authors concluded that economic factors, such as differences in average family yearly earnings and employment opportunities, may explain the differences observed for the Standard of Living and Future security domains, and that community connection might play a stronger role in the construction of subjective well-being in Portuguese adolescents.

The contribution of qualitative methodologies to the study of well-being

The use of multiple methods (quantitative and qualitative) in research of children's experiences has been seen as a valuable approach that offers complementary insights and understandings that may be difficult to assess through reliance on a single method of data collection (Darbyshire, MacDougall, & Shiller, 2005), such as surveys. Thus, used independently or in combination with quantitative methods, qualitative methods can help to interpret and better understand the complex reality of the subjective well-being of children, and in some cases, the implications of quantitative data.

Qualitative methods are especially effective in obtaining culturally specific information about the values, opinions, behaviors, and social contexts of particular populations. The strength of qualitative research is the ability to provide complex textual descriptions of how people experience a given research issue – they literally give participants a voice (Mack, Woodsong, MacQueen, Guest, & Namey, 2005). Qualitative methods are also effective in helping describe more complex constructs (Mack et al., 2005), such as subjective well-being (Fattore et al., 2018).

Although it is increasingly common to find qualitative-based research used to study subjective well-being in children (e.g. Camfield, Crivello, & Woodhead, 2009; Coombes, Appleton, Allen, & Yerrell, 2013; González-Carrasco, Vaqué, Malo, Crous, Casas, & Figuer, 2018; NicGabhainn & Sixsmith 2006; Navarro, 2011; Navarro et al., 2017; Malo, Navarro, & Casas, 2012; September & Savahl, 2009), fewer studies have used a qualitative or combined methodological approach to subjective child well-being than survey based approaches. This is true in Portugal and elsewhere.

For example, in a mixed-methods study Freire, Zenhas, Tavares and Iglésias (2013) found that the definition of happiness amongst adolescents, derived from open-ended written questions, included both psychological dimensions and aspects related to

life domains (personal life, interpersonal relations and family), integrating hedonic (i.e. more related to subjective well-being, such as positive emotions) and eudaimonic (i.e. psychological well-being, like self-fulfillment) components. The quantitative results allowed for further understanding that happiness and meaning contributed in different but complementary ways to well-being. The authors showed that Family, Standard of living, Personal growth, Leisure time, and community, corresponded to important components for happiness.

Recently, Nico and Alves (2017) conducted interviews with children aged 10 to 13 and adolescents/young adults aged 16 to 24 years old in order to analyze how they defined well-being. Their results showed that it is more complex for younger children to define well-being than for adolescents and young adults. Younger participants distinguished between an inner well-being (i.e. feeling relaxed, freedom of action) and an external context-related or social well-being (i.e. family, friends, being loved, having support). Older adolescents related well-being with economic reasons and their significant contexts, but also with happiness. Similar results were also found by Gonçalves (2015) in a qualitative study (individual interviews); family was seen by children (8-12 years old) as a source of support and love; school was also seen as a context of well-being related with the enthusiasm of learning and of promoting self-efficacy feelings. Friends were perceived as a source of positive well-being as they were seen as an emotional support group.

A combined qualitative approach for studying children's well-being

The two most common qualitative methods used to study subjective well-being in children are group interviews or focus groups, and drawings. The types of data these two methods generate are notes, audio (and sometimes video) recordings, and transcripts. We

argue that each method – or combination of methods – is particularly suited for addressing important questions in the domain of children's subjective well-being.

Group interviews in particular have been increasingly used in research with children (Davies, 2001; Doswell & Vandestienne, 1996; Darbyshire et al., 2005; Hoppe, Wells, Morrison, Gillmore, & Wilsdon, 1995; Hurley, 1998; Morgan, Gibbs, Maxwell, & Britten, 2002; O'Dea, 2003; Vaughn, Schumm, Jallad, Slusher, & Saumell, 1996) as children are generally comfortable and familiar with the process of discussing matters in groups.

Group interviews allow for the collection of children's feelings, opinions and reactions through the attitudes and answers of group members; this, in turn, may provide us with new information on the subject under study (Ritchie & Lewis, 2003), allowing us to more deeply discuss and clarify other eventual quantitative data (Galego & Gomes, 2005). For example, in a study by González-Carrasco and colleagues (2018), the researchers divided children into two different focus groups according to whether they had a high or low level of subjective well-being measured with a quantitative measure of well-being (i.e. the Satisfaction with Life Scale or SWLS; Diener, 1994). Focus group data highlighted that the most important differences between the two groups of children were related to family relationships, i.e. children with high levels of subjective well-being mentioning the importance of receiving support from parents, and children with low levels of subjective well-being highlighting the negative impact on well-being of not having any relative to turn to for help when needed (González-Carrasco et al., 2018).

Usually, groups interviews employ an interview technique with discussion taking place under the guidance of a moderator. The moderator facilitates the discussion in a non-directive and unbiased way, using pre-determined questions (Kingry, Tiedje, & Friedman, 1990). A second moderator is often present, acting as note taker, observing

group interactions, supervising the recording equipment, but not participating in the ongoing discussion.

Group interviews or focus groups require considerable preparation and skills to run. When conducting focus groups with children, it is extremely important that the moderator(s) of the focus group have experience in children's group interactions (e.g. in decreasing performance anxiety) and are flexible and creative to the demands of gathering data with children. For example, in a study by Darbyshire and colleagues (2005) the moderators incorporated activities into the groups (e.g. asking children if they would like to jump and talk) to provide variety and interest for the children, and to stimulate their thinking and discussion about the focus on physical activity and its associated people, places and spaces (i.e. the theme of discussion).

During focus groups, moderators can also provide young children with complementary ways for them to express their ideas so that researchers access children's meanings, especially in areas of sensitive questioning (Morgan et al., 2002; Thomas & O'Kane, 2000). For example, in a study by Morgan and colleagues (2002) with children who have asthma, aged 7 to 11, the authors found that some aspects of the focus group discussion (e.g. talking about bulling or feeling afraid) were potentially distressing for some participants. In this case, sensitive wording of questions helped to give participants maximum flexibility regarding whether to divulge information and in what way (e.g. instead of asking "Have you ever been bullied because of your asthma?" the authors asked: "Have any children in your school been bullied because of having asthma?").

Group interviews give the researcher the opportunity to deepen the discussion with the informants which other qualitative methods such as open-ended, written questions cannot provide (Bengtsson, 2016).

The inclusion of exercises and activities in combination with group interviews is an excellent strategy to maintain children’s concentration and interest as well as enabling participants to work together (Hennessy & Heary, 2005; Darbyshire et al., 2005). In some studies, a happy-sad face exercise or a secret box exercise has been used (Pannilage, 2017), but evidence indicates that drawings are usually well received by children because no extensive linguistic ability is needed, and they are a useful way of making children’s ideas and concerns visible and concrete (Mitchell, 2006; Racheli & Tova, 2010). Also, some children consider it to be easier to express through drawings than through verbal language (Santos, 2013), particularly verbally shy or inhibited children. Two additional advantages of using drawings are that children with limited literacy may also be given a voice and provide input to the research (Clark & Moss 2001); and that children usually are familiar with drawing in other contexts, such as school, and consider it a pleasurable activity (Dolidze, Smith, & Tchanturia, 2013).

In order to illustrate the contribution of qualitative methods in the research of subjective well-being in children, our goal in this study was to explore the perception of Portuguese children's well-being through two different qualitative methodologies: group interviews/focus groups and drawings, analyzing the meanings attributed both to the concept of well-being and to the domains underlying it. Using group interviews and drawings simultaneously allows a methodological triangulation process to be conducted, i.e. seeking to recur to different methodologies which provide a greater comprehension of the results obtained (Bakhet & Zauszniewski, 2012).

Method

Participants

The study was designed as part of the "Children's Understandings of Well-Being: Multinational Qualitative Study" (Fattore et al., 2018). The larger study aimed to comprehend how children understand well-being using a locally oriented, culturally contextualized and multi-national approach.

Matching the age-inclusion criterion of the broader study (i.e. between 8 and 12 years old), participants included 19 children, all Portuguese, 70% were female (N=13), with a mean age of 10 (*SD*=1.2), and an average of two siblings (*M*=2.1, *DP*=1.62). Approximately 68% of the children were recruited from community centers, making the sample socioeconomically diverse.

Instruments

A script derived from the "Children's Understandings of Well-Being: Multinational Qualitative Study" protocol (Fattore et al., 2018) was used for the group interviews. The first part of the protocol corresponds to a set of open questions about important places, important people, and important activities from children's perspective, facilitated through the use of (individual) drawing, with the purpose of identifying key concepts regarding well-being as experienced by children in their everyday contexts. The first two questions were designed as ice-breakers and were added to the script with the aim of setting a more relaxed environment (e.g.: "Before we begin, I would like to know you better and that you tell me a bit about yourselves. What are your favorite things to do?"). Two questions were also added to the script and were used during the drawing period. The first question regarding the drawing itself (e.g.: "Now I would like to ask you

to make a drawing of something or someone that is the most important to you and that makes you happy") and the second question regarding the comprehension of these drawings (e.g., "What did you draw?").

The second part of the script included questions which aimed to explore children's comprehension of key concepts and domains in the Children's Worlds Study (Rees & Main, 2015, namely in the domains of "School" (e.g.: "What's the best thing about school?"); "Economic Well-being" – things owned and money (e.g.: "Is it important for children to have their own money?"); "Being heard" domain (e.g.: "Can you tell us about the times you felt like your opinion mattered?"); "Safety" (e.g.: "Are there particular places where you feel safe?"); "Action/Activity" ("e.g.: "Are there particular places where you wish you had more freedom?"). Moreover, specific questions were added from previous qualitative studies on subjective well-being conducted with Portuguese children (Gonçalves, 2015) (e.g.: "When we talked with some children your age, they identified … as being important to them and making them feel good. Are these important things to you as well?").

Finally, the script included feedback questions on study procedures which were part of the international study script (e.g. the child's opinion on the previously posed questions).

Data collection procedures

A first contact via e-mail and telephone was made with potential participating institutions (two schools, two children's after-school activities centers, one community center), inviting them to take part in the project. After a positive response by three of the institutions (the two children's after-school activities centers and the community center), informed consent forms were personally made available in order to be handed to

children's legal tutors; the informed consent provided information regarding the purposes of the project and the ethical aspects considered in the project, including privacy, confidentiality and anonymity of the collected data. This document also included the permission to audiotape children's voices, and left the researchers' contacts for further information.

After informed consent forms were signed, the group interviews were scheduled. Prior to the beginning of each interview, children's assent was also requested, i.e. children were given the option of not participating in the interview. Four group interviews (N=7; N=6; N=4; N=2) were conducted. A calm and quiet environment was established allowing for data to be collected more thoroughly, systematically and without background noise. The data collected from the interviews consisted of recorded audio, which allowed the researcher to focus solely on the children - as well as in their drawings - during the interview. Interviews lasted 41 minutes on average.

For the drawings, children were provided with materials (i.e. A4 white sheets, crayons, colored pencils, rubbers) with children taking on average 15 minutes to complete their drawings.

Data analyses procedures

Group interviews were transcribed and data were analyzed using a content analysis technique (e.g., Erlingsson & Brysiewickz, 2017; Ritchie & Lewis, 2003), with the same technique being applied to the drawings.

For the content analysis of the interviews, all the material gathered, i.e. sections of the participants' answers (paragraphs), was considered valid and used as registered units (RUs) or units of analysis, with the exception of responses to the question "What is it like to be a child in Portugal?", and to the feedback questions on study procedures which

were part of the international study script. After identifying these RUs, a mixed category system was developed, i.e. all the main dimensions in this study were theoretically grounded on the literature review (e.g., Rees et al., 2010; Rees & Main, 2015), and the categories and subcategories were mostly data driven or bottom-up (both use inductive and deductive reasoning). A category dictionary was developed to operationalize the definition of the dimensions, categories and subcategories. A manifest analysis was conducted as results show what informants actually said (vs. latent analysis) (Bengtsson, 2016).

In order to figure out what were the more frequent dimensions occurrence analysis was also used (Vala, 1986). Finally, only the dimensions, categories or subcategories with at least two RUs were considered. The attribution of a given RU to a category or subcategory was not mutually exclusive, i.e. sometimes the same paragraph was considered in more than one category or subcategory since it made reference to more than one subject. For example, a child said: "One of the most important things about school I think it's classes, every class, and I also think that the best thing is also recess… Recess too, and I also like the education they give us." This particular RU was included in the "School" dimension, both in "Learning/Stimulation" and "Play time/Interaction" categories.

Regarding the drawings, each child made one drawing except for two participants who asked for a second sheet of paper, hence making a total of 21 drawings. However, two of those were left out of the analysis because, during completion time, the children drew an abstract form, which did not allow use of the questions of the script for the drawing period.

For analytical purposes, 19 drawings were considered, with each sheet of paper counting as a registered unit. Using content analysis, each drawing was analyzed and,

together with the explanation the child provided of their own work, some main dimensions of child well-being were identified (data-driven). In order to figure out what were the more frequent dimensions an occurrence analysis was performed, allowing quantification of how often a given domain came up in the drawings. Similar to the coding of the group interview content, each RU could refer to more than one domain.

Regarding data reliability, a set of procedures was carried out with the aim of minimizing bias and increasing reliability in coding. This categorization process was discussed often with another researcher. First a dictionary of categories was created; second, before the final stage of the content analysis, the body of transcriptions was read several times for the researcher to be more familiar with the data; this reading was discussed with another researcher, on several occasions, as suggested by Hill, Knox, Thompson, Williams, Hess and Ladany (2005).

Throughout the rest of the chapter, each dimension, category and subcategory will be exemplified by quotes from the interviewed children in order to better illustrate some of the RUs. Moreover, and in order to provide a better understanding, dimensions will appear in italics, categories will appear underlined and subcategories as both italicized and underlined.

Results

Content and occurrence analysis of children's interviews, including 778 registered units (RU), indicated 8 dimensions, 27 categories and 27 subcategories of children's subjective well-being (see Table 1).

Table 1: Theory-driven dimensions of children's subjective well-being and frequency of registered units per dimension.

Dimensions	RU(%)
Children's Rights	38.81
School	22.23
Material Goods	16.45
Economic Aspects	13.62
Family	3.72
Free Time Usage	2.69
Helping Others	2.05
Health	.43

The dimension that included more registered units (RU) of children's subjective well-being was *Children's rights* (RU=302). The Children's rights dimension referred mostly to the categories of Safety, Freedom and Being Heard (Table 2).

Table 2: Categories in the Children's rights dimension, and frequency of registered units per category.

Categories	RU (%)
Safety	34.09
Freedom	30.46
Being heard	30.46
Basic Needs	1.98
Relational aspects (friendship and love)	.99
Education	.99
Family	.66

The category Safety (RU=194) was mainly related with *Safe Elements/Contexts* (60.57% of the RU), which included the child's home, school, neighborhood, family and friends (J2: "At home because I know that it is my place, it's the place where I live and I really like to be there, I feel much safer"), although they also reported *Unsafe Elements/Contexts* (30.65% of the RU) which were mainly related to the presence of ethnic diversity in the neighborhood and at school ("M2: At my school there's a group of I don't know what. There are a lot of people there… there are more bad people than good people and they're always picking on me and I don't like that. I feel less safe"). In a less expressive way, Safety also included *Protection and Support from Others* (6.7% of the RU; "M1: To always having someone supporting us and stuff.").

Under the category Freedom (RU = 92) children identified home, school and after-school programs as *contexts of freedom* (55.43% of the RU) ("C2: At home I also feel free because I have my things, and outside it is because I have plenty of space to do whatever I want") or *contexts of no freedom* (27.17% of the RU; "R: (…) There are some things that I can't do (…) [at the after-school program]"). Children also reported *Desirable Elements* (18.47% of the RU), that is, aspects that they would like to have as a

right in their significant contexts such as school, the outside environment, neighborhood, home and after-school programs ("S5: I wanted it in my neighborhood, I mean it… in my neighborhood we don't have a playground, we only have a bit of space for kids to play but nobody does because there's really nothing there, just dogs, we get in there and the dogs start barking and biting and so children can't be there, they play on the road.").

Under the category of Being Heard (RU=92) similar to the previous category, children mentioned home and school contexts as being simultaneously *Contexts/Audiences that listen* and *Contexts/Audiences that do not listen* (C2: "From my part I've had many people wanting to listen to what I had to say, like my uncles for example, when I'm like alone they do like this… they interview me as if we were on TV, and then they enjoy listening to me and I enjoy listening to them because they also give me a lot of attention, and I like people who give me attention."). Under this category, children also reported *Desirable Contexts/Audience* (10.86%), with answers relating, for instance, with stressful situations: M2: "I think I should be more listened to in places where I am more concerned. In places where I am more concerned, more stressed or have some type of problems. And I would also like to be more listened to at school".

The *School* dimension (RU=173) included eight categories (see Table 3).

Table 3: Categories and subcategories in the School dimension, and frequency of registered units per category.

Categories	RU (%)	Subcategories
Relational Aspects	24.27	Positive relations Negative relations
Evaluative component	22.54	Positive evaluation Negative evaluation
Learning/Stimulation	17.34	
Representation of a Good teacher	12.71	Support Flexibility/freedom Type of school work Discipline
Support	6.35	
Emotional component	1.73	Positive emotions Negative emotions
Playing/Interaction	1.15	
Negative Structural aspects	1.15	

School is the dimension of children's subjective well-being with the most derived categories. For interviewed children, school referred to Relational Aspects: Friends and teachers are perceived either in a *Negative* way or in a *Positive* way ("A4: My teacher is bad. And my classmates tease me so that I hit them, and I don't know what to do."). The Representation of a Good Teacher included that he/she was mostly perceived as a source of *Support* ("A2: He has to know how to listen to his students, to not judge their opinions even if they're wrong."), being simultaneously a figure related to *Freedom/Flexibility* ("R1: A good teacher lets us do a lot of things."), but also to *Discipline* almost exclusively associated with punishments and grounding ("J2: I think that a good teacher should ground his students when they misbehave.").

Overall, from the interviews children assessed school (Evaluative Component) both positively and negatively, as they talked about teachers, not liking school, homework and school's administration issues, Simultaneously school was perceived as a place for Learning/Stimulation ("J2: I really like school because I basically really like to learn new things.") as well as for fun (Playing/Interaction; "C4: The best part about being at school is recess."), triggering *Positive Emotions*.

The third dimension, *Material Goods* (RU=128) included two categories: an Evaluative Component (65.62% of the RU) where two data-driven subcategories were included (Positive evaluation; Negative evaluation), and Types of materials (38.28% of the RU). When talking about material goods, children mentioned all sorts of items and Types of Materials, with answers referring mostly to clothing and house items, school supplies, a house, money, food, cars, cell phones, videogame devices and laptops.

The reference to material goods mostly regarded its assessment (Evaluative Component), with children reporting a *Positive Evaluation* of material possessions and with their answers mostly referring to the importance and value of items such as books, cell phones or computers ("S5: Because we're home, we don't have anything to do and that stuff [cell phones and computers] is very cool."), although some materials such as electronic devices, were also perceived negatively (*Negative Evaluation*: "J2: I don't think any child under 18 years old should have a cell phone or a computer because they are not old enough.").

The fourth dimension, *Economic Aspects* (N=106) included three categories – Evaluative Component, Economic Difficulties, Emotional Component (see Table 4).

Table 4: Categories and subcategories of the Economic Aspects dimension, and frequency of registered units per category.

Categories (% of RU)	RU (%)	Subcategories
Evaluative component	44.33	Positive evaluation Negative evaluation
Economic difficulties	36.69	Concern Unconcern
Emotional component	18.86	Positive emotions Negative emotions

Reference to *Economic Aspects* emerged mostly associated to its assessment [Evaluative Component (44.33%)], as more often negative [*Negative Evaluation* (27.5%)] relating to the downsides of children having their own money ("J2: I don't think children should have money at their disposal because they are not mature enough for it.") compared with more positive evaluations [*Positive Evaluation* (15.6%)], although the importance of children having their own money was also mentioned ("A2: I think children should [have their own money] so that they can learn how to manage their own money and how to buy things."). Monetary/Economic Aspects was also related to Economic Difficulties (35.80%), with children mostly displaying *Concern* (74.4%) towards a lack of money ("M2: I think it is concerning, because when a child doesn't have any money they also can't buy food and then they starve, they don't have money for school, for their own house, for college, for… the stuff they need. I think it is concerning because parents get stressed and children even more so.") than *Unconcern* (RU=10, 25,6%) on this matter. The Monetary/Economic Aspects dimension also related to an Emotional Component (18.4%) with children perceiving how they spend their money as promoting mostly *Positive Emotions* (75%) rather than *Negative Emotions* (25%).

Under the *Family* dimension (RU=29), three categories emerged – Work, Emotional Support and Instrumental Support. *Family* was mostly associated with Work (48.3% of the RU) as a source of wealth (“C2: If we work, we can ensure that we have more things, that we have more money to do more things.”), but also with a source of Emotional Support (37.9%).

The Free Time Usage dimension (RU=21) emerged associated with several sets of activities, mostly related to sports (“L5: I like to go to the pool, to ride my bike, to ride my skateboard”).

The *Helping Others* (RU=16, 2%) dimension regarded helping both significant and non-significant others, but mainly significant others such as parents, siblings or other kin (“G4: If I had [a lot of money] I would share with my brother, I would give some to my aunt to take care of her baby, and the rest I would share with my mom to buy food.”).

Finally, the *Health* dimension (RU=5, 0.6%) was one of the least expressive dimensions for children (A4: “We need medical care assistance”).

From a total of nine dimensions that emerged from the content analysis of the drawings, *Famil*y and *Free time usage* emerged as the most expressive domains related with child subjective well-being (see Table 5).

Table 5. Children’s subjective well-being domains from drawings, and absolute frequency of registered units per domain.

Dimensions	RU (%)
Family	57.9
Free time usage	31.58
Friends	10.53
Pets	10.53
Friendship	5.26
Health	5.26
Happiness	5.26

Safety/Protection from parents	5.26
Freedom	5.26

Drawings about the family domain most frequently included parents and siblings (36%). Drawings about free time usage most frequently included sports activities (e.g., rugby, skating). Figures 1 and 2 illustrate these two dimensions.

Figure 1. Drawing addressing the *Family* dimension.

Figure 2. Drawing addressing the *Free Time/Leisure Time* dimension.

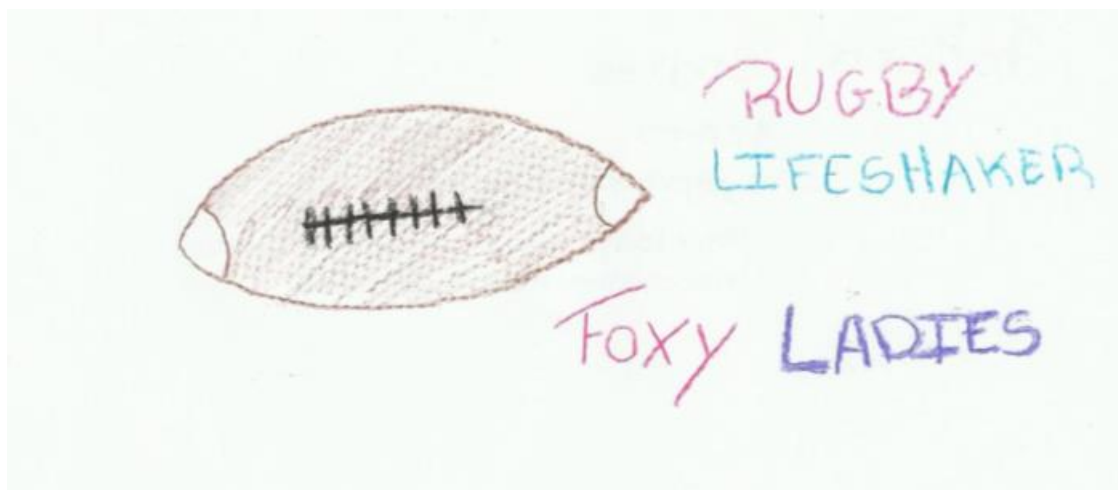

Figure 3 illustrates a drawing addressing different dimensions simultaneously.

Figure 3. Drawing addressing *Family* (parents), *Friendship* and *Pets*.

Discussion

The purpose of this study was to identify key concepts regarding well-being as experienced by children in their everyday contexts, and their own understanding of these concepts, through the use of two different qualitative methods – group interviews and drawings.

Overall, results from group discussions and drawings showed that children perceived well-being as a multidimensional concept, which is in line with previous data from other countries (e.g., Rees et al., 2010; Rees & Main, 2015). Well-being is a concept that is difficult to assess, particularly with younger children (Nico & Alves, 2017). In order to achieve these results, this study illustrated how a combination of different

qualitative methods can enrich the research and analysis of children's understanding of complex concepts. Different methods can offer complementary insights and understandings that may be difficult to assess through the use of a single method of data collection (Darbyshire et al., 2005). As Flick (2004) pointed out, a triangulation of methods can be helpful to increase rigor and depth to any investigation.

Throughout the four group discussions, Children's Rights were the most expressive dimension of children's well-being from children's point of view. These results might be explained by the focus that the Portuguese curriculum and teachers have given to the topic of Children's rights in their discourses and activities during the most recent years of schooling (Direção-Geral da Educação, 2013).

Second to Children's Rights, the School domain also gained some expression. School context appears as a complex system, where peers and teachers assume positive and negative roles illustrating the complexity of the impact of school for positive adjustment. Some studies showed that children and adolescents' perception of psychological school involvement are very important for their wellbeing (Haapasalo, Valimaa, & Kannas 2010). Furthermore, children's individual experiences, such as bullying, friendships, and interactions with teachers, affect their well-being more than the type of school they attend (e.g., Gutman & Feinstein, 2008).

Through the use of children's drawings, this study further clarified and made visible children's ideas about well-being. For example, in their drawings children made visible some dimensions of child well-being that were less expressive through group interviews, in particular family and free time usage. These results pointed out that the use of different qualitative methods in research of children's experiences can be seen as a valuable approach that offers complementary insights. Through group discussion the use of pre-determined questions helps to discuss topics initiated by the researcher

(Kingry, Tiedje, & Friedman, 1990), whereas drawings are a useful way of making children's individual ideas and concerns more visible (Mitchell, 2006; Racheli & Tova, 2010), enriching and complementing data derived from the former.

Overall the results presented in this chapter show that family represents an important context for children's well-being, which is in line with previous studies that point out that parents and friends are relevant actors in children's lives, providing emotional, personal and social support (Matos, 2005), and augmenting well-being. Evidence is clear in showing how children's interactions with those around them – and the way in which children make sense of those interactions – are fundamentally important to how they feel about themselves and their lives (Levin & Currie, 2010; Matos, Dadds & Barrett, 2006; The Children's Society, 2018). Children in their own understanding acknowledge family's important role.

Free Time Usage, together with Family, have been pointed out as important components for happiness (Freire et al., 2013; Gonçalves, 2015). In Western countries sports activities for children have been a widespread leisurely pursuit (Ommundsen, Londal, & Loland, 2014). Recent data have shown that children's well-being and their emotional and behavioral difficulties were associated with frequency of physical activity (The Children's Society, 2018). The *Longitudinal Study of Australian Children* (LSAC, 2017) has also showed that children's use of time was associated not only with their social and emotional wellbeing but also with temperament. So, activities can act as a protective factor for children and adolescents health (see Gaspar, Ribeiro, Matos, Leal, & Ferreira, 2012).

In addition to emotional support, more evident through the drawings, family is also associated with work, and its function as a source of wealth, emphasized in our results

from group discussions. In parallel, children also displayed concerns regarding lack of money. According to Yuan (2008), economic hardship decreases children's well-being and ongoing high-level economic hardship is most detrimental for children's well-being. At the same time parenting stress and parental well-being substantially explain these associations. Future studies can combine qualitative data gathered from children and their families and compare such information.

In order to develop effective policies to improve children's lives, it is important to understand the various domains of child well-being and their causes and consequences. Research should continue to focus on children's own conceptualization of well-being, and their understanding of dimensions and categories to properly identify and meet the needs of children. This goal is best addressed by the continuous development and improvement of a combination of methods, such as group interviews and drawings, which give children a voice.

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