

A Reading on the Concept of Quality of Life in Light of Theoretical Approaches

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Receipt date: 06/12/2024; Acceptance Date: 21/04/2025.

Abstract:

This research paper aims to address a topic of significant importance in the field of psychology, which is quality of life. This is undertaken by establishing a theoretical foundation based on various theoretical approaches, starting with the philosophical approach, followed by the medical approach, the social approach, and concluding with the most significant, which is the psychological approach and its key theories, in addition to the integrative approach.

Keywords: Quality of life; dimensions of quality of life; theoretical approaches explaining quality of life; psychological theories.

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1-Introduction: The subject of quality of life has garnered significant attention in scientific research and discussions, becoming a central focus for numerous scholars and theorists across various scientific disciplines and intellectual backgrounds. This has led to an increasing complexity and diversification of the concept, which now spans a continuum of subjective and objective, internal and external, social, economic, and even religious dimensions, among others. Quality of life refers to the type of life an individual lives, and it encompasses happiness, well-being, the fulfillment of various needs, professional development, family environment, social relationships and support, as well as self-control, personal development, and the ability to adapt to one's social and physical environment. These aspects are shaped by an individual's goals, ambitions, and needs, as well as the available freedoms in various domains and social effectiveness, all of which are tied to life-changing variables that add weight and importance to this topic. This necessitates further exploration, starting from an examination of various theoretical, philosophical, medical, social, psychological, and integrative perspectives that have provided distinct interpretations of quality of life, allowing for an understanding of its uniqueness and diversity.

This raises the following question:

- What are the most important theoretical approaches explaining quality of life?

2- The Concept of Quality of Life: It is difficult to arrive at a unified, comprehensive definition of any concept, regardless of its nature. The challenge of formulating a single, inclusive definition of quality of life stems from the diversity and differing perspectives of researchers and their scientific orientations, as well as the various fields in which the concept is applied. These different fields have left their unique mark on how the concept of quality of life is adopted and approached. Hanshizume and Kanagwak have indicated that quality of life is the degree of happiness and psychological well-being linked to an individual's satisfaction with their situation and the conditions they live in (Bouchra, pp. 722-727). According to the World Health Organization (1993), quality of life involves the meaning and significance that an individual attaches to their life situation, matching their goals, values, expectations, attitudes, and physical and psychological conditions with the level of independence and nature of relationships between them and their social and physical environment (Obeid, 2017, p. 355).

Meanwhile, Carol Ryff and others argued that quality of life has multiple meanings, including psychological tranquility, a sense of happiness, and enjoyment of life. They also identified behavioral indicators that allow for measuring the level of quality of life, such as overall satisfaction with life, the continuous pursuit of meaningful goals, and the effort to build and maintain positive social relationships.

On the other hand, Mohamed El-Saeed Abu Halaweh acknowledged that the concept of quality of life is complex and can only be understood within the dialectical relationship between two important concepts: awareness and existence. The interaction between these concepts determines psychological compatibility or the lack thereof, which translates into levels of happiness and life satisfaction. The smaller the gap between what we perceive and what we experience, the more quality of life is achieved. Thus, the critical factor is how individuals evaluate and perceive the social and material elements surrounding them (Tahia & Mostafa, 2013, pp. 88-89).

In a similar vein, Al-‘Aarif Billah Al-Ghandour considered quality of life to be a hybrid combination of objective social factors and psychological factors. The importance of the latter lies in providing meaning to material elements through the process of evaluation (Jamal, 2016, pp. 18-19).

From the analysis of the definitions presented, it is evident that the concept of quality of life is broad and multifaceted, encompassing a range of meanings. One aspect of quality is happiness and satisfaction with the conditions surrounding the individual. It also represents a relationship between the individual and their environment, and their ability to achieve their goals in light of various challenges and changes. Some suggest that quality of life lies in an individual's ability to balance their personal characteristics with various environmental factors, including values, standards, and attitudes.

Moreover, the definitions differ in their scope. Some focus narrowly on one of the subjective or objective determinants, while others seek to integrate both. According to Hanshizume and Kanagwak, an individual's satisfaction with their living conditions is a key factor in their level of happiness, which constitutes a significant part of their perception of quality of life.

The World Health Organization's broader definition posits that quality of life is reflected in the level of social-psychological harmony achieved by an individual, which increases as the alignment between their internal components—such as values, goals, culture, ambitions, and interests—improves across psychological, physical, and social domains, as well as the external environment. Here, quality is contingent on two elements: harmony and how the individual perceives that harmony. In a similar context, Mohamed El-Saeed Abu Halaweh posits that quality of life lies in life satisfaction and enjoyment, which can only be realized through partial satisfaction with physical, psychological, and social aspects. This satisfaction remains dependent on an individual's cognitive and perceptual processes, which influence their evaluation of these elements through comparative and three-dimensional assessments between the self, others, and the broader environment, in light of available resources, abilities, entitlements, ambitions, expectations, efforts, and goals.

As for Carol Ryff and others, they sought to integrate aspects of earlier definitions, considering the core component of quality of life to be happiness, which arises from life satisfaction and an individual's ability to adapt to their environment in pursuit of their goals and ambitions, as well as their effectiveness and positivity within their social environment.

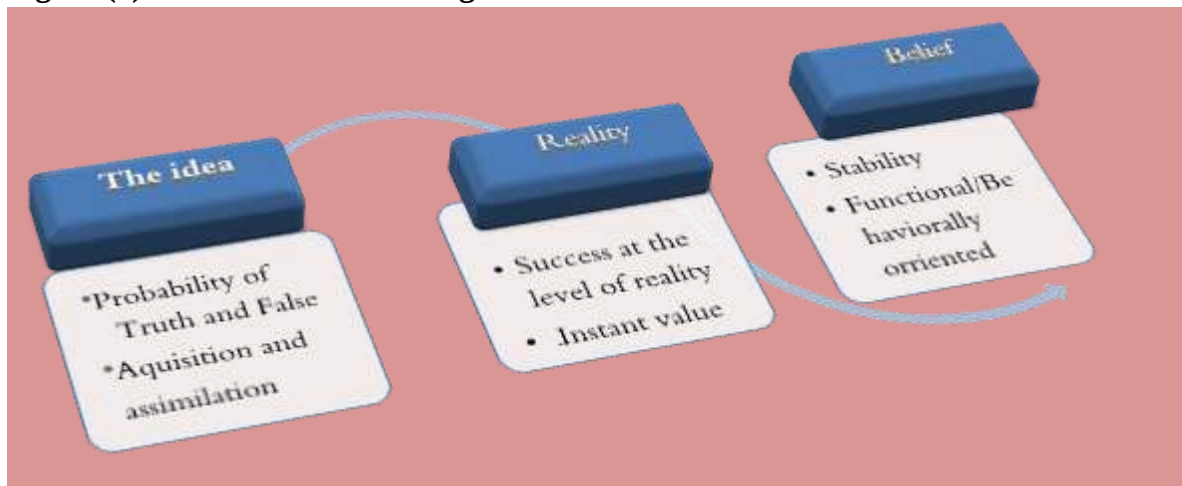
3- Theoretical Approaches Explaining Quality of Life

3.1- The Philosophical Approach: Exploring the philosophical approach to the concept of quality of life requires examining two important and contradictory perspectives. The first is the **pragmatic thought and the pragmatist triad**, where happiness, as a key component of quality of life, is perceived as an immediate value that can be experienced practically and tangibly. This form of happiness strengthens and nourishes ideas, transforming them into beliefs (Abu Halaweh, 2015).

The second perspective is its opposite, where happiness is seen as something unattainable in the material world. According to this view, true happiness can only be achieved by detaching from the material realm and transcending reality, allowing for the free expression of creativity, imagination, and the pursuit of an ideal state in a space of mental and spiritual clarity (Masoudi, 2015, p. 206).

The pragmatist triad can be represented in the following diagram:

Figure (1): Illustration of the Pragmatist Triad



Source: Prepared by the researcher based on Mohamed El-Saeed Abu Halaweh.

From the previously discussed philosophical approach, we can deduce the following:

- Quality of life is closely linked to happiness and well-being.
- In the philosophical perspective, happiness lies in idealism and transcending, separating from, and ignoring reality.
- Happiness involves spiritual elevation, ignoring life's pains and difficulties.

The **pragmatist triad**, as illustrated in **Figure 2**, helps clarify the following:

- The immediate value of reinforcement in shaping beliefs.
- It shows the foundations of idea and attitude formation, which are based on tangible experiences and the material reality.
- It emphasizes the importance of lived experiences in shaping the mind and cognitive structures of the individual.
- It indicates that behavior can be predicted and controlled through reinforcement, as advocated by behavioral theory.

Despite these positive aspects, philosophers acknowledge that happiness:

- May be material, but it is not limited to the material.
- Requires attention to the immediate and temporary enjoyment and its relationship to the consequences of behavior.
- Is a combination of physical, mental, and spiritual well-being, with the latter being the most important.

- As Muslims, it is crucial to be aware that a person's status in the afterlife is connected to their actions in this life, and true happiness is the happiness of both worlds.

3.2- The Social Approach:

This approach focuses on studying the quality of life from its objective aspects. Proponents of this **objective approach** rely on observable and directly measurable indicators, such as the nature of one's job, profession, level of education, individual income, and social status (Jekhrab & Abdelhafizi, 2016, p. 475).

Additionally, demographic factors and disease prevalence rates are considered. These indicators are characterized by **relativity**, varying across different societies. The nature of professional relationships also plays a significant role in an individual's satisfaction with their work environment and determines its quality (Mohammedi & Bouaicha, 2015).

While this approach helps clarify the elements used to assess quality of life—primarily characterized by observability and measurability—a closer analysis of these objective elements reveals several key observations:

- It overlooks the subjective components of the concept of quality of life.
- Many objective elements, such as income, housing, and education level, are **relative**, changing according to individuals, generations, gender, historical periods, and age groups, as well as the time and place in which they occur.
- The mutual influence between the objective components of quality of life is significant. For instance, an individual's educational level may not reflect their income, and the quantity of social relationships may not indicate the extent of social support, especially if there is a shift or weakening in social status.
- The value and significance of objective elements can be influenced by personal characteristics, both quantitatively and qualitatively.
- Some objective elements have a subjective aspect, and the two may seem contradictory yet are complementary. For example, even if housing is comfortable and meets all requirements, it can feel like a prison to some individuals under certain conditions, such as family conflicts, marital problems, the absence or loss of a spouse, or the death or departure of children.
- The relative importance of objective elements varies. For instance, for a patient, the quality of life may be determined by having the minimum level of material and objective necessities, provided they enjoy good health.

3.3- The Medical Approach:

This approach aims to improve and enhance the quality of life for patients and individuals with various conditions—whether physical, psychological, or mental—through various counseling and therapeutic programs. In line with this goal, lectures and awareness campaigns conducted by healthcare providers focus on the relationship between quality of life and health in its three dimensions (physical, mental, and social).

Healthcare services intended to improve individuals' quality of life are incomplete without assessing their needs and providing alternatives to meet these needs, whether

addressing an existing health issue or preventing future problems. Quality of life also serves as an indicator of health risks associated with specific behaviors and habits, allowing for predictions and anticipatory measures to be taken to control these risks before they become widespread (Masoudi, 2006).

The following figure illustrates the contribution of the medical approach within the concept of quality of life.

Figure(2): Illustrates Quality of Life according to the Medical Approach



Source: Prepared by the researcher based on Masoudi Mohamed.

3.4- Psychological Approach: This perspective emphasizes the role of psychological concepts and terms in defining the concept of quality of life. The psychological approach suggests that quality can only be understood and interpreted through concepts like values, psychological needs and their fulfillment, self-actualization, and levels of individual ambition (Abu Halawa, 2015). Key psychological concepts that play a role in reinforcing the credibility of this approach include **self-perception, attitudes, expectations, satisfaction, adjustment, and mental health.**

Values form a central pillar around which quality of life indicators revolve. The infinite ladder of aspirations is shaped and determined by the value system, which guides behavior and stimulates motivation. Values also explain the expectations and anticipations of individuals. Moreover, values play a decisive role in an individual's life; there is no meaning to a person's life in an environment where their values are absent, and they cannot either change or adapt to that environment.

Perception is also critical, as quality of life is fundamentally an expression of **self-perceived quality** (Jikhrab & Abdelhafidi, 475). In summary, the psychological approach grants the ability to discuss **perceived quality of life**, highlighting the role of psychological concepts such as perception, emotions, expectations, and values as mediators between the individual and their environment.

Within the psychological approach, modern theories have emerged that examine quality of life from various angles. Some focus on the **cognitive dimension**, such as how individuals perceive their quality of life, while others emphasize the mutual influence between the individual and their environment—both natural and social. Key theories include:

3.4.1- Lawton's Theory (1996):

Lawton emphasized the significance of the **environment** and its impact on perceived quality of life. Two key factors influence how individuals perceive their quality of life:

A. **Spatial Dimension:** The perceived quality of life is influenced by the environment in which an individual lives, with a dual effect. One is **direct**, such as its impact on health, and the other is **indirect**, carrying long-term positive indicators.

B. **Temporal Dimension:** This refers to the positive correlation between quality of life and aging. As individuals grow older, they tend to perceive their quality of life more positively, as they gain more control over their environment and circumstances.

Lawton identified four key dimensions of quality of life: **behavioral competence**, **environmental control**, **perceived quality of life**, and **psychological quality of life** (Abu Halawa, 2015).

3.4.2- Ryff's Theory (1999):

Ryff's theory centers around the concept of **psychological well-being**, where the feeling of happiness and joy reflects an individual's sense of quality of life. Ryff integrated six dimensions of quality of life, with six indicators for each, as depicted in the following figure.

Figure (3): illustrates the dimensions of quality of life.



Source: Prepared by the researcher based on the work of Anad Mubarak Bushra, .

It is evident from this figure that Raef primarily focused his attention on adaptation, social effectiveness, and the ability to accept, manage, and develop oneself, alongside how to utilize the environment to achieve goals in a manner that ensures safety and psychological well-being, which is manifested in happiness.

3.4.3- Schalock's Theory (2002): Schalock's goal in addressing the concept of quality was to provide it with a broader scope. His theory is distinguished by a focus, firstly, on the number of dimensions of quality, which are eight, with each dimension comprising the same number of indicators, specifically three. Secondly, it emphasizes the preference, importance, and weight of the subjective dimensions of quality over the material and

objective elements, as these are the critical factors influencing an individual's perception of their quality of life. The following table details Schalock's theory:

Table (1): illustrates the domains of quality of life and their indicators according to Schalock's theory.

the domains of quality of life and their indicators	<i>Emotional happiness</i>	Satisfaction/Self-conception/Low pressures
	<i>Interpersonal relationships</i>	Interactions /Relationships Attribution
	<i>Material happiness</i>	Financial status/Work/Housing
	<i>Personal growth</i>	Education/Competence/Personal Performance
	<i>Physical happiness</i>	Health/Daily activities/Free time
	<i>Self-determination</i>	Independence/ Objectives Tests
	<i>Social integration</i>	Integration/Social cohesion/Societal roles
	<i>Human and legal rights</i>	Individual rights/Group rights /Law and due processes

Source: Prepared by the researcher based on the work of Anad Mubarak Bushra.

3.4.4- Fordyce's Theory:

The concept of quality of life is flexible and has several dimensions and designations; it encompasses enjoyment of life, achievement, a sense of psychological comfort and reassurance, as well as feelings of happiness and satisfaction. This concept has several characteristics, as quality is a long-term feeling rather than a temporary one, and it is linked to the extent and quality of needs fulfillment (Nadia, 2010).

Table (2): illustrates the comparison between psychological theories that explain quality of life.

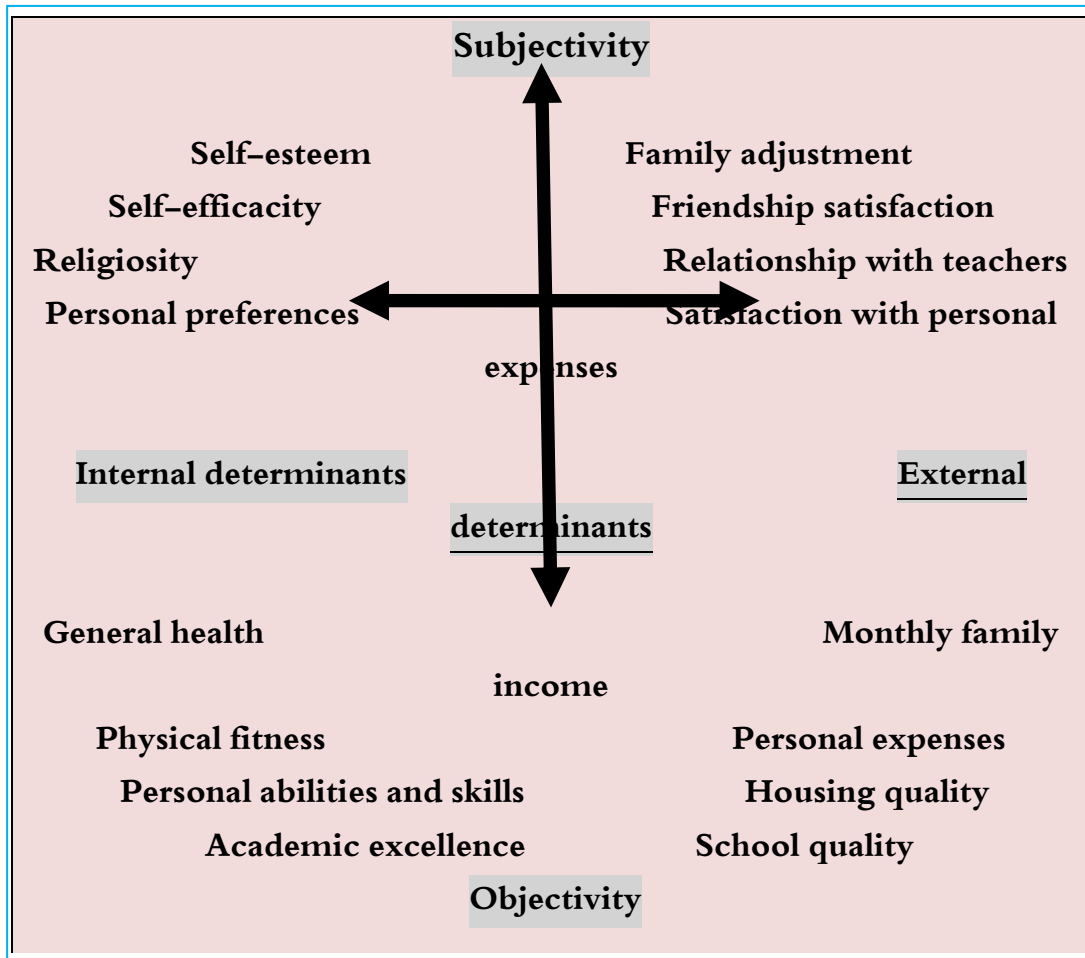
The point of agreement			
The interest in subjective dimensions as more important determinants than objective determinants in the degree of the individual's feeling of quality of life, which is embodied in his psychological and social compatibility.			
Fordyce Theory Satisfaction and contentment with life Are linked to the satisfaction of needs. -It has two characteristics: Permanence and emotional stability.	Schallock's Theory - A detailed analysis Dividing quality of life into eight areas, which are: Emotional happiness/Interpersonal relationships/Material happiness/Personal growth/Physical happiness/Self-determination/Social integration/Human rights	Ryff's theory - Reflection of the feeling of quality of life in the feeling of happiness. - Happiness is measured through six dimensions, each of which has six indicators: Independence/Environmental empowerment/Personal growth/Positive social relationships/Self-acceptance/Purpose of life.	Lawton's Theory - The dual effect of the environment on the individual's perception of quality of life. - The individual's perception of quality of life is affected by the temporal context. - Happiness is measured through four dimensions: Behavioral competence/environmental control/perceived quality of life/psychological quality of life.

Source: Prepared by the researcher

3.5-The Integrative Approach:

Proponents of this approach advocate for a comprehensive and holistic perspective on the various elements and dimensions of quality of life, including both material and social aspects as well as subjective ones. An example of a model based on this vision is Evans's model from 1881, which integrates internal and external components. Additionally, the model developed by Abu-Sari, Shawqi, Anwar, and Morsi encompasses all the variables that influence the formation of quality of life, both subjective and objective, as well as internal and external. This is illustrated in the following figure.

Figure (4): illustrates Abu-Sari and others' perspective on the determinants of quality of life.:

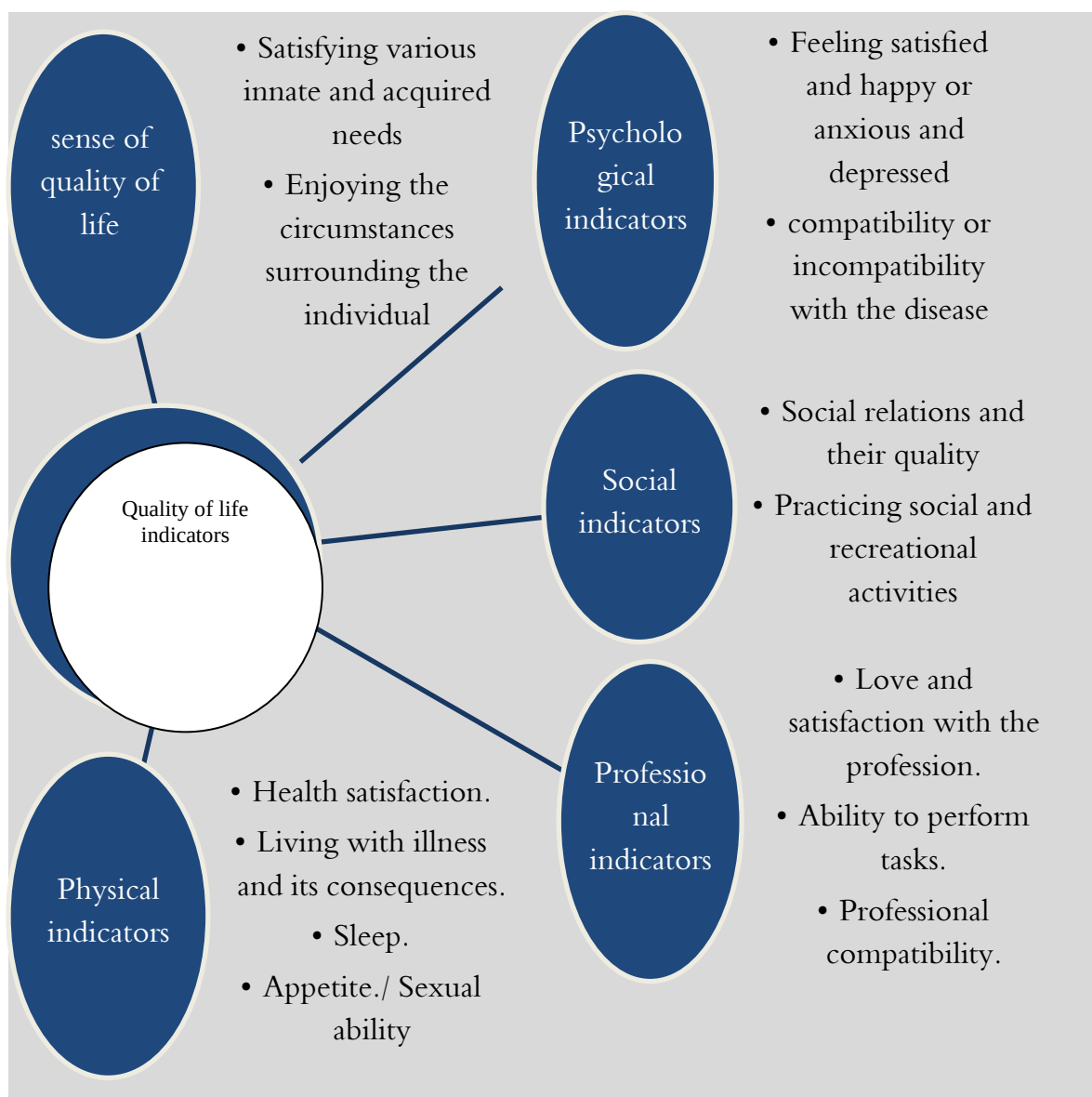


Source: Prepared by the researcher based on Mushri.

The horizontal dimension encompasses the internal personal determinants in contrast to the external determinants of quality of life, based on whether they reside within the individual or outside of them. The vertical dimension represents the distribution of these determinants according to the principles of measurement and the assessment of their realization, which is divided between subjective foundations as perceived by the individual from their personal perspective, and objective foundations that include tests and measures, as well as comparisons of the individual to others or based on other quantitative and qualitative standards (Mushri, 2014).

4- Indicators of Quality of Life After presenting various approaches and theories, we conclude with a summary of the most important indicators of quality of life, which are illustrated in the following figure:

Figure (5): illustrates the indicators of quality of life.



Source: Prepared by the researcher based on Raghda Ali Naeisa.

Conclusion:

This research paper addressed a range of theoretical approaches to quality of life, which varied in their terminology and content. The philosophical approach focused primarily on the concept of quality as limited to the dimension of happiness, which can only be achieved if the individual can disconnect from their reality and problems and elevate themselves to a realm of imagination. In contrast, the medical approach emphasized the dimensions of physical, psychological, and mental health, which, when met, enable the individual to acquire the other elements encompassed within the concept of quality.

The proponents of the social approach directed their attention toward observable and measurable objective indicators, such as occupation, social relationships, the richness of the environment, and the quality and level of services available to the individual, among others. Meanwhile, the psychological approach provided a different perspective through

its encompassing theories, which sometimes showed shared analyses and at other times distinct ones. For instance, Raef's theory was notably clearer, more detailed, and more comprehensive compared to the contributions of Lauten, with the overlap between them being in the environmental dimension.

Additionally, there is a close alignment between the theories of Raef and Schalock, both in terms of the number of dimensions and their nature, as well as the explicit nature of their indicators, such as the dimensions of autonomy and personal growth, or implicitly regarding other indicators. As for Fordyce, his concept of quality of life was associated with the level of the individual's needs fulfillment, characterized by continuity and sustainability of this fulfillment. Finally, the integrative approach aimed to address certain shortcomings found in previous theories and to achieve a balance between subjective and objective, as well as internal and external determinants, thus providing a comprehensive model that allows for the interpretation of the concept of quality of life.

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