POLISH ADAPTATION OF SOCIAL WELL-BEING SCALE (SWB)

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Summary. The main purpose of this article is to present the psychometric properties of the Polish adaptation of the Social Well-Being Scale (SWB; Keyes, 1998). The presented tool is a self-report scale used to measure five dimensions of social well-being: social integration, social acceptance, social actualization, social coherence and social contribution. In his concept of social well-being, Keyes emphasized that human life includes social tasks and challenges, coping with which can be an important source of subjectively felt well-being.

The study involved 504 people (24.2% men, 75.6% women) aged 17 to 55 years (average age: 24.4 years). The reliability of the individual scales of the questionnaire, estimated using Cronbach's α coefficient, ranges between .70 and .86. To verify the five-factor structure of social well-being dimensions, confirmatory factor analysis was used, which showed a good fit of the model to the data (based on the CFI and RMSEA indicators). To assess the validity of the tool, the relationships between social well-being, measured by SWB, life satisfaction measured by the Satisfaction with Life Scale (SWLS; Diener et al., 1985), and psychological well-being, measured by the Psychological Well-Being Questionnaire (PWB; Ryff, 1989), were examined. The obtained results indicate satisfactory psychometric properties of the adapted tool, thanks to which it can be used in scientific research.

Key words: well-being, social well-being, SWB

The social dimension of well-being

In the tradition of psychological research, well-being has been conceptualized in various ways, usually as the predominance of positive feelings over negative ones, life satisfaction, or proper mental functioning (Ryff, 1989; Ryff, Keyes, 1995).

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Therefore, Keyes (1998) pointed out that most concepts of well-being treat this phenomenon as an individual and ignore the social aspect. However, human lives develop and constantly function in society, and throughout their entire life cycle they experience challenges from society, which – when implemented – allow them to constantly develop (Erikson, 1950). Therefore, the social sphere cannot be omitted in theoretical approaches and empirical research on well-being.

Several decades ago, social well-being was recognized by the World Health Organization (1948) as a central component of human health (along with physical and mental well-being), although in later years it was conceptualized in various ways in various fields of science. In demography and economic sciences, objective components of social well-being, such as gross domestic product or an individual's access to goods and resources, were usually studied (Cicognani, 2014), although the Organization for Economic Co-operation and Development (OECD, 2011) drew attention to the importance of individual, subjective assessment well-being and not just objective criteria, considering that they do not always go hand in hand. Social sciences, in turn, define social well-being as certain behaviors and attributes of an individual related to social functioning (Cicognani, 2014). The subject of this article is the psychological approach to social well-being.

Older empirical research on social well-being in psychology focused on measuring a person's experience of social support or adaptation to life in society (McDowell, Newell, 1987; Larson, 1993). Newer approaches that arise from positive psychology refer to the definition of mental health by the World Health Organization, according to which it is "state of mental well-being that enables people to cope with the stresses of life, realize their abilities, learn well and work well, and contribute to their community" (WHO, 2004, p. 12). This definition emphasizes the importance of the social component of well-being and combines the hedonistic tradition, focused on the subjective experience of happiness, with the eudaimonistic tradition, drawing attention to well-being as a "side effect" of optimal human functioning in various spheres, including the social sphere (Waterman, 1993; Keyes, 1998; Deci, Ryan, 2008).

The most comprehensive model of social well-being created in psychology is the one proposed by Keyes (1998), which stems from the eudaimonistic tradition. Keyes, inspired by Ryff's (1989) dimensions of psychological well-being, proposed five dimensions of social well-being.

Social well-being as conceptualized by Keyes

Most contemporary models of well-being – and there are many of them (cf. Bornstein et al., 2003) – do not take into account optimal social functioning as crucial for positively understood mental health. This challenge was taken up by Keyes (1998), who emphasized that the implementation of social life and its challenges can be an important criterion for assessing the quality of one's life. He noted that

in psychology, well-being was operationalized mostly as a subjective assessment of the quality of life, based on satisfaction with its various areas, current affect and personal functioning. This type of operationalization of well-being covers only the private sphere, not taking into account a person's embeddedness in social structures. They paid less attention to social challenges and tasks, coping with which can be an important source of human well-being.

Keyes (1998) in his proposal starts from the considerations of Durkheim, who also identified dimensions of social health (such as integration with society, a sense of belonging to it, or a sense of collective consciousness), which may be the source of a person's well-being. Keyes (1998) defines social well-being as (resulting from the proper implementation of various types of social challenges) a positive assessment of one's functioning in society, i.e. the feeling that one is a valuable and productive member of society, experiencing social belonging and a positive attitude towards members of society as a whole.

Keyes proposed five social challenges that, if met, contribute to social well-being. Therefore, Keyes also calls these challenges dimensions of social well-being. Referring to the inspiration taken from Durkeim's theory of social cohesion, Seeman's social isolation and Marx's class consciousness (after: Keyes, 1998), Keyes identified the first dimension - social integration. The second dimension - social acceptance - is the social equivalent of self-acceptance, distinguished as an important component of psychological well-being (Ryff, 1989). In turn, based on the concept of self-efficacy (Bandura, 1977) and Erikson's generativity (Erikson, 1950), Keyes proposed the dimension of social contribution. Moreover, referring, among others, to the concepts of self-actualization by Maslow (1968), eudaimonistic well-being by Waterman (1993) and personal growth by Ryff (1998), he distinguished the dimension of social actualization. Finally, as a social antonym of the sense of meaninglessness in life (Seeman, 1959) and a dimension related to Antonovsky's (1994) coherence, Keyes proposed social coherence. The definitions of the five dimensions of social well-being are presented in Table 1. It is also worth emphasizing that the dimensions of social well-being do not refer to the assessment of society's attitude towards an individual, but only to the assessment of one's relations with it (for example, social acceptance does not mean the feeling that society accepts individual, only that the individual feels trust and acceptance towards society as a whole).

Research (Keyes, 2005, 2007; Keyes et al., 2008) shows that social well-being is an important and distinct (i.e. distinguishable from others) component of well-being. The most frequently studied variables related to social well-being include: experiencing social support, relationships with family and friends, and social adaptation (Cicognani, 2014). Research also shows that social well-being is associated with social and political participation (Cicognani et al., 2008), a sense of community (McMillan, Chavis, 1986), and a sense of attachment to one's place of residence (Rollero, De Piccoli, 2010). The results also prove the connection of social well-being

with general life satisfaction, a sense of belonging to a group and the effective implementation of multiple social roles (Javadi-Pashaki, Darvishpour, 2018).

To examine the components of well-being he distinguished, Keyes (1998) proposed the Social Well-Being Scale (SWB). The tool has been translated into several languages so far: Spanish (Blanco, Diaz, 2005), Italian (Cicognani et al., 2008), Persian (Joshanloo, Rostami, Nosratabadi, 2006), and Portuguese (Lages et al., 2018).

Table 1. Dimensions of social well-being in Keyes' concept (own study based on: Keyes, 1998)

Dimension	Definition
Social integration	Assessment of the quality of an individual's relationship with society and the community, the sense of social belonging, the experience of social support and the belief that one is an integral part of society, having something in common with other members of it.
Social acceptance	Trust in other people as a whole, belief that people are naturally good and hard-working; a positive image of human nature (while understanding the complexity of human behavior and the problems arising from it).
Social coherence	Perceiving the social world as logical, orderly and coherent. Concern for knowledge about the world, a sense of understanding the rules prevailing in the social world.
Social contribution	Assessment of one's social value. It involves the belief that one is an important member of society who has something important to offer. It is associated with a sense of self-efficacy and responsibility. The belief that a person's actions are valued by society and contribute to social good.
Social actualization	Positive assessment of the direction of development and potential of society. The belief is that both citizens and the institutions established for this purpose realize this potential. A positive image of the future of society; the belief that society is heading in a good direction that remains under the control of its members.

The problem of own research

The aim of the research presented in this article is the Polish adaptation of the Social Well-Being Questionnaire (SWB; Keyes, 1998). The reliability of the adapted tool was estimated using the Cronbach's α coefficient, while the validity estimation was based on the results of confirmatory factor analysis conducted using the Mplus program (Muthén, Muthén, 2010) and – in terms of convergent validity – on the assessment of the relationship with other types of well-being.

The following results were expected (1) satisfactory reliability of the adapted tool – the Polish adaptation of the Social Well-Being Questionnaire; (2) confirmation of the five-factor structure of social well-being using confirmatory factor analysis and (3) positive relationships of social well-being with other types of well-being (higher with psychological well-being, as eudaimonistic, and lower with life satisfaction – as well-being of a more hedonistic nature). At the same time, it was also expected that these correlations would show only moderate strength because they concern measures of various aspects of well-being (too strong a correlation would call into question the validity of distinguishing social well-being as a separate type of well-being).

Method

Subjects and procedure

The study involved 504 people (24.2% men) aged 17 to 55 ($M_{\rm age}$ = 24.4, SD = 6.56). The subjects were students of various faculties at several Warsaw universities and working people. The research was conducted in groups, using the paper-and-pencil method, maintaining the anonymity of the respondents and with their consent.

Tools used

Polish adaptation of the Social Well-Being Questionnaire. The Polish adaptation of the questionnaire, like the original version, consists of 33 test items relating to beliefs regarding the respondent's attitude towards society. The scales of social integration, social acceptance and social actualization each consist of seven items, and the scales of social contribution and social coherence each consist of six items. The respondent is asked to rate each statement on a scale from 1 (I strongly disagree) to 5 (I strongly agree). The original tool had a 7-point scale, but to make the results more comparable to other measures of well-being (including PWB and SWLS), the Polish adaptation used a 5-point response scale. The respondent's task is to respond to statements relating to various aspects of the functioning of society and his or her relationship with it.

Life satisfaction scale. The level of the cognitive dimension of well-being, i.e. satisfaction with life, was measured using the Satisfaction with Life Scale (SWLS; Diener et al., 1985) in the Polish adaptation by Juczyński (2009). SWLS is a self-report scale containing five statements that make up the overall life satisfaction score. In the presented research, a five-point response format was used instead of a seven-point one, for the reasons mentioned above (from 1 - I strongly disagree, to 5 - I strongly agree). The reliability of the tool, estimated based on Cronbach's α coefficient, in this study, is .77.

Psychological well-being questionnaire. The presented research also used a shortened version of the Psychological Well-Being Scale (PWB; Ryff, 1989), in the Polish adaptation of Karaś and Cieciuch (2017). It is a self-report scale consisting of six subscales, each containing three items. These scales measure six aspects of psychological well-being as conceptualized by Ryff (1989): autonomy, environmental mastery, personal growth, positive relationships with others, purpose in life and self-acceptance. The tool contains a five-point Likert response scale (from 1 – I strongly disagree, to 5 – I strongly agree). This tool allows the interpretation of the overall result, which consists of the average of the results of scales measuring individual aspects of well-being. This possibility was used in the presented research. The reliability of the overall score, assessed using the Cronbach's α coefficient, was .79.

Results

Descriptive statistics and demographic variables

Descriptive statistics. Descriptive statistics for the dimensions of social well-being and the overall result of the SWB questionnaire are presented in Table 2. The distribution of results for individual ones is close to the normal distribution, except for the social integration scale, where the slightly heightened kurtosis was noted, indicating an increased concentration of the values of this variable in the studied group.

Table 2. Cronbach's α coefficients for the sub-scales and the overall result of the SWB questionnaire, distribution parameters

Scale	Cronbach's α coefficient	М	SD	Skewness	Kurtosis
Social integration	.86	3.67	.66	72	1.11
Social acceptance	.82	3.04	.64	.03	.32
Social actualization	.75	3.22	.62	39	.38
Social coherence	.70	3.57	.61	09	.12
Social contribution	.77	3.55	.62	22	.39
Overall result/overall score	e .91	3.40	.47	28	1.16

Note: *M* – mean; *SD* – standard deviation.

Gender. To check the possibility of differences depending on gender, the Student's *t*-test was used. The results are presented in Table 3. Differences were noted in the scales of social integration, social acceptance and the overall result (women showed a higher level of the above dimensions).

Table 3. Gender differences – results of the Student's t-test

	Wor	nen	M	en	+	df
•	М	SD	М	SD	_ ι	щ
Social integration	3.72	.67	3.51	.64	-3.04**	498
Social acceptance	3.08	.65	2.92	.59	-2.32*	496
Social contribution	3.56	.63	3.53	.59	44	496
Social actualization	3.25	.61	3.13	.64	-1.85	496
Social coherence	3.56	.62	3.62	.54	1.06	227.05
Overall result	3.42	.48	3.32	.44	-2.10*	498

Note: M – mean; SD – standard deviation; t – Student's t-test value; df – number of degrees of freedom.

Age. Table 6 presents the correlation coefficients between the age of the respondents, the results of the SWB subscales and the overall result of the questionnaire. There was a low but significant positive correlation between age and the results of the scales of acceptance, actualization and coherence as well as the overall result.

Reliability

Cronbach's α coefficient was used to estimate the reliability of individual scales of the SWB questionnaire and the reliability of the overall result. All scales of the SWB questionnaire are characterized by satisfactory reliability. The results are presented in Table 2.

The factor structure of social well-being

To verify the five-factor structure of social well-being, and thus to determine the factorial validity of the Polish adaptation of the SWB questionnaire, confirmatory factor analysis on items was used, conducted using the Mplus program. The estimation of the fit of the model to the data was based on the CFI (Comparative Fit Index) and RMSEA (Root Mean Square Error of Approximation) indices. The obtained indices were CFI = .920, RMSEA = 0.061 (χ^2 = 1388.71, df = 485). The obtained RMSEA index is less than 0.08, while the CFI is greater than 0.90, which means that both indices can be considered acceptable and the five-dimensional model can be accepted as well suited to the data (Hu, Bentler, 1999; Marsh, Hau, Wen, 2004).

Table 4 shows the correlations between latent variables – five dimensions of social well-being and the correlations between the results of individual scales, calculated using the SPSS program.

^{**} *p* < .005, * *p* < .05.

Table 4. Correlations between dimensions of social well-being

	Social integration	Social acceptance	Social contribution	Social actualization	Social coherence
Social integration		.55***	.75***	.50***	.51***
Social acceptance	.46**		.50***	.67***	.50***
Social contribution	.63**	.41**		.43***	.61***
Social actualization	.43**	.54**	.35**		.56***
Social coherence	.39**	.41**	.46**	.37**	

Note: Above the diagonal, correlations between latent variables are presented; below the diagonal – correlations between scales calculated according to the key.

*** p < .001, ** p < .005.

The factor loadings of the items, calculated using the Mplus program, are presented in Table 5. The loadings of only two items are below .4 (item 23 – You don't think social institutions like law and government make your life better – the scale of social actualization and item 33 – You think it is hard to predict what will happen next in society – social coherence scale).

Table 5. Factor loadings of test items of the Social Well-Being Questionnaire

		Socaccep		Social contribution				Social coherence	
Item 1	62***	Item 8	61***	Item 15	.54***	Item 21	78***	Item 28	65***
Item 2	.69***	Item 9	.65***	Item 16	.59***	Item 22	82***	Item 29	60***
Item 3	.80***	Item 10	74***	Item 17	74***	Item 23	15**	Item 30	84***
Item 4	.86***	Item 11	72***	Item 18	75***	Item 24	.71***	Item 31	58***
Item 5	.82***	Item 12	76***	Item 19	.50***	Item 25	.54***	Item 32	.65***
Item 6	70***	Item 13	57***	Item 20	80***	Item 26	74***	Item 33	15**
Item 7	.79***	Item 14	.65***			Item 27	.54***		

Note: Reverse-coded items are presented with a minus sign.

^{***} The results are significant with p < .001,

^{**} The results are significant with p < .005.

Convergent validity

To assess the convergent validity of the adapted tool, the correlation between social well-being measured by SWB and other aspects of well-being was examined: psychological well-being, measured by PWB (Ryff, 1989) and life satisfaction, measured by SWLS (Diener et al., 1985). Significant positive correlations were expected for both validation tools used, but slightly higher in the case of the PWB tool because, like SWB, it measures eudaimonistic well-being. The results are presented in Table 6.

Table 6. Correlations between individual scales of the Social Well-Being Questionnaire (SWB) and other measures of well-being and the age of the respondents

	Psychological well-being (PWB)	Life satisfaction (SWLS)	Age
Social integration	.54**	.45**	05
Social acceptance	.34**	.24**	.18**
Social contribution	.61**	.39**	.06
Social actualization	.29**	.16**	.09*
Social coherence	.55**	.24**	.11*
SWB overall score	.61**	.39**	.10*

Note: ** p < .01, * p < .05.

Discussion of the results

The study of well-being is one of the main areas of interest in positive psychology – a dynamically developing trend in contemporary psychology. According to the creator of this trend, Seligman (2002), the areas studied by positive psychology include both the individual level, including positive human properties (such as courage or wisdom), as well as the group level, including social life.

Keyes (1998) also emphasizes that human life is divided into private and public spheres, which place different demands on people, the implementation of which leads to various consequences. According to Keyes, the challenges of life in society may constitute a criterion that an individual uses to assess the level of his or her well-being.

The main goal of this research was to verify the Polish adaptation of the Social Well-Being Scale created by Keyes (1998), used to measure five dimensions of social well-being: social integration, social acceptance, social contribution, social actualization and social coherence.

To estimate the reliability of the tool, Cronbach's α coefficient was used – the reliability of all scales of the adapted questionnaire can be considered satisfactory, which allows for further use of the Social Well-Being Questionnaire in scientific research. The research also verified the factorial validity of the SWB tool. The results of the conducted confirmatory factor analysis confirm the good fit of the five-factor structure of social well-being and prove that social well-being includes five separate dimensions distinguished by Keyes (1998).

A significant correlation between the results of all individual scales of the SWB tool with the results obtained using tools measuring other aspects of well-being – psychological well-being as conceptualized by Ryff (1989) and life satisfaction according to Diener's theory (Diener et al., 1985), confirms the external validity of the adapted tool and proves that social dimensions of well-being are related to, but not identical to, other aspects of well-being. The highest correlation with measures of other aspects of well-being was demonstrated by the scale of social integration and social contribution, and the lowest (but also significant) by the scale of social actualization and social acceptance. At the same time, as expected, the scales of the Social Well-Being Questionnaire were more strongly associated with the results of the tool measuring psychological well-being (PWB), which can be considered the eudaimonic dimension of well-being, than with the level of life satisfaction (measured by SWLS), which is the hedonic component of well-being, which has theoretical justification.

According to the assumptions of positive psychology (Trzebińska, 2008), optimal human functioning is associated with activity and contribution to the common good. Perhaps social integration and social contribution are associated with greater individual activity than in other dimensions of social well-being and therefore their relationship with other measures of well-being is stronger. Social integration is associated with the feeling that one is an important member of society, the concept of social contribution is also associated with the feeling that one can contribute something of value to society. The similarity of these two variables was also demonstrated by the high correlation between them. The remaining dimensions may be related more to the assessment and perception of society than to one's activity, which is why their relationship with other measures of well-being may have turned out to be relatively lower.

The conducted research also noted some demographic differences: women had a higher level of social integration and acceptance and a higher overall score. It also turned out that there is a significant positive correlation between the age of the respondents and the results from three scales of the tool: social acceptance, social actualization, social coherence and the overall result of the questionnaire.

Keyes and Waterman (2003) prove that the relationship between age and well-being is not clear: according to the results of some studies, the level of well-being decreases with age, while according to others it increases or stabilizes. In Keyes' (1998) research on the validation of the SWB questionnaire, the four dimensions of

social well-being increased with age, while coherence decreased. Keyes (1998) explains the decline in coherence with age by saying that in the United States, younger adults may perceive the world as more coherent than older adults because it is dominated by their own youth culture. However, in studies on the Polish population, coherence increases with age. Perhaps youth culture is not so dominant in Poland, and the increase in coherence with age is related to gaining greater life experience, which contributes to the perception of the social world as coherent. The increase in the intensity of other dimensions of social well-being with age, demonstrated for the Polish population, is consistent with the results obtained by Keyes. The lack of a relationship between social contribution and integration with age may be because relatively young people were studied and this relationship could be visible at a later age.

Although Keyes's (1998) research did not demonstrate a relationship between gender and social well-being, research on the Polish population showed that the level of some dimensions of well-being is higher in women. This may be because the social roles and challenges faced by women in early adulthood are different from those faced by men and are more closely related to the well-being experienced by women. Such an explanation would indicate the mediating role of age in the relationship between gender and well-being. This hypothesis seems justified, for example about the results of the Argyle research (in: Keyes, Waterman, 2003), which proved that women's well-being decreases with age, while men's well-being increases.

The SWB questionnaire is one of the few Polish tools enabling the measurement of well-being. Positive psychology is also a very popular and rapidly developing trend in Poland, therefore the development of Polish adaptations of existing tools seems to be particularly necessary. Therefore, the Polish adaptation of the SWB questionnaire may contribute to the further development of research in this field.

However, the conducted research is certainly not free from certain limitations. Firstly, the studied groups were unequal in terms of gender. Secondly, the study group included mainly people in early adulthood. Undoubtedly, the conducted research would be worth repeating for other age groups, also taking into account the equality of the groups in terms of gender.

Finally, it is worth adding that, as Waterman et al. points out (2010), the question about the relationship between individual forms of well-being, such as subjective well-being (of which the social well-being discussed here is a form), psychological well-being and eudaimonistic well-being is still open and there is still no clear solution to the question whether they constitute three different phenomena or only different aspects underlying the same construct. The development of a Polish adaptation of a questionnaire for measuring social well-being may contribute to the further development of research in the field of developmental psychology and help to learn the full picture of the multi-faceted issue of well-being.

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References

- Antonovsky, A. (1994). The sense of coherence: A historical and future perspective. In H.I. McCubbin, E.A. Thompson, A.I. Thompson, & J.E. Fromer (Eds.), *Sense of coherence and resiliency: stress, coping, and health* (pp. 3–40). Madison: University of Wisconsin Press.
- Bandura, A. (1977). Self-Efficacy: Toward a Unifying Theory of Behavioral Change. *Psychological Review*, 82(2), 191–215.
- Blanco, A., & Diaz D. (2005). El bienestar social: suconcepto y medicion [Social well-being: Theoretical structure and measurement]. *Psicothema*, 17(4), 582–589.
- Bornstein, R.F., Davidson, W.S., Keyes, C.L., & Moore, K.A. (2003). *Well-being: Positive development across the life course*. London: Lawrence Erlbaum Associates Publishers.
- Cicognani, E. (2014). Social Well-Being. In A.C. Michalos (Ed.), *Encyclopedia of Quality of Life and Well-Being Research* (pp. 6193–6197). New York: Springer.
- Cicognani, E., Pirini, C., Keyes, C., Joshanloo, M., Rostami, R., & Nosratabadi, M. (2008). Social participation, sense of community and social well-being: A study on American, Italian and Iranian university students. *Social Indicators Research*, 89, 97–112.
- Deci, E.L., & Ryan, R.M. (2008). Hedonia, eudaimonia, and well-being: An introduction. *Journal of Happiness Studies*, 9(1), 1–11.
- Diener, E., Emmons, R.A., Larsen, R.J., & Griffin, S. (1985). The Satisfaction with Life Scale. *Journal of Personality Assessment*, 49, 71–75.
- Erikson, E.H. (1950). Childhood and society. New York: Norton.
- Hu, L., & Bentler, P.M. (1999). Cutoff criteria for fit indexes in covariance structure analysis: Conventional criteria versus new alternatives. *Structural Equation Modeling*, 6, 1–55.
- Javadi-Pashaki, N., & Darvishpour, A. (2018). What are the predictor variables of social well-being among the medical science students? *Journal of Education and Health Promotion*, 7(20), 1–5.
- Joshanloo, M., Rostami, R., & Nosratabadi, M. (2006). Examining the factor structure of the Keyes's comprehensive scale of well-being. *Journal of Iranian Psychologists*, 9, 35–51.
- Juczyński, Z. (2009). Narzędzia Pomiaru w Promocji i Psychologii Zdrowia. Warszawa: Pracownia Testów Psychologicznych Polskiego Towarzystwa Psychologicznego.
- Karaś, D., & Cieciuch, J. (2017). Polska adaptacja Kwestionariusza Dobrostanu Psychologicznego (*Psychological Well-Being Scales*) Caroll Ryff. *Roczniki Psychologiczne*, 20(4), 815–835.
- Keyes, C.L.M. (1998). Social well-being. Social Psychology Quarterly, 61, 121–140.
- Keyes, C.L.M. (2002). The mental health continuum: From languishing to flourishing in life. *Journal of Health and Social Behavior*, 43(2), 207–222.

- Keyes, C.L.M. (2005). Mental illness and/or mental health? Investigating axioms of the complete state model of health. *Journal of Consulting and Clinical Psychology*, 73(3), 539–548.
- Keyes, C.L.M. (2007). Promoting and protecting mental health as flourishing: A complementary strategy for improving national mental health. *American Psychologist*, 62(2), 95–108.
- Keyes, C.L.M., & Waterman, M.B. (2003). Dimensions of well-being and mental health in adulthood. In M.H. Bornstein, L. Davidson, C.L.M. Keyes, & K.A. Moore (Eds.), *Well-being. Positive development across the life course* (pp. 477–497). London: Lawrence Erlbaum Associates.
- Keyes, C.L.M., Wissing, M., Potgieter, J.P., Temane, M., Kruger, A., & van Rooy, S. (2008). Evaluation of the mental health continuum-short form (MHC-SF) in Setswana-speaking South Africans. *Clinical Psychology & Psychotherapy*, 15(3), 181–192.
- Lages, A., Magalhaes, E., Angunes, C., & Ferreira, C. (2018). Social Well-Being Scales: Validity and Reliability Evidence in the Portuguese Context. *Revista Psicologia* 32(2), 15–26.
- Larson, J.S. (1993). The measurement of social well-being. *Social Indicators Research*, 28, 285–296.
- Marsh, H.W., Hau, K.T., & Wen, Z. (2004). In search of golden rules: Comment on hypothesis-testing approaches to setting cutoff values for fit indexes and dangers in overgeneralizing Hu and Bentler's (1999) findings. *Structural Equation Modeling*, 11(3), 320–341.
- Maslow, A.H. (1968). Toward a Psychology of Being. New York: Van Nostrand.
- McDowell, I., & Newell, C. (1987). *Measuring health: A guide to rating scales and questionnaires*. New York, NY: Oxford University Press.
- McMillan, D., & Chavis, D. (1986). Sense of community: A definition and theory. *Journal of Community Psychology*, 14, 6–23.
- Muthén, L.K., & Muthén, B.O. (2010). *Mplus user's guide. Sixth edition*. Los Angeles: Muthén & Muthén.
- Organization for Economic Co-operation and Development. (2011). *Better life compendium of OECD wellbeing indicators*. Paris: OECD.
- Rollero, C., & De Piccoli, N. (2010). Does place attachment affect social well-being? *Revue Européenne de Psychologie Appliquée, 60, 233–238.*
- Ryff, C.D. (1989). Happiness is everything, or is it? Explorations on the meaning of psychological well-being. *Journal of Personality and Social Psychology*, 57(6), 1069–1081.
- Ryff, C.D., & Keyes, C.L. (1995). The structure of psychological well-being revisited. *Journal of Personality and Social Psychology, 69,* 719–727.
- Seeman, M. (1959). On the meaning of alienation. *American Sociological Review*, 24, 783–791.
- Seligman, M.E.P. (2002). Positive psychology, positive prevention, and positive therapy. In C.R. Snyder, & S.J. Lopez (Eds.), *Handbook of Positive Psychology* (pp. 3–9). New York: Oxford University Press.

- Trzebińska, E. (2008). *Psychologia pozytywna.* Warszawa: Wydawnictwa Akademickie i Profesjonalne.
- Waterman, A.S. (1993). Two conceptions of happiness: Contrasts of personal expressiveness (eudaimonia) and hedonic enjoyment. *Journal of Personality and Social Psychology*, 64(4), 678–691.
- Waterman, A.S., Schwartz, S.J., Zamboanga, B.L., Ravert, R.D., Williams, M.K., Agocha, ..., Donnellan, M.B. (2010). The Questionnaire for Eudaimonic Well-Being: Psychometric properties, demographic comparisons, and evidence of validity. *The Journal of Positive Psychology*, *5*(1), 41–61.
- World Health Organization. (1948). World Health Organization constitution. Basic documents. Geneva: WHO.
- World Health Organization. (2004). Promoting Mental Health: Concepts, Emerging Evidence, Practice (Summary Report). Geneva: WHO.

POLSKA ADAPTACJA KWESTIONARIUSZA DOBROSTANU SPOŁECZNEGO (SWB)

Streszczenie. Głównym celem niniejszego artykułu jest zaprezentowanie właściwości psychometrycznych polskiej adaptacji Kwestionariusza Dobrostanu Społecznego (*Social Well-Being Scale*, SWB; Keyes, 1998). Prezentowane narzędzie jest skalą samoopisową, służącą do pomiaru pięciu wymiarów społecznego dobrostanu: społecznej integracji, społecznej akceptacji, społecznej aktualizacji, społecznej spójności oraz wkładu społecznego. Keyes w swej koncepcji dobrostanu społecznego podkreślał, że życie człowieka obejmuje zadania i wyzwania społeczne, z którymi radzenie sobie może stanowić dla człowieka ważne źródło subiektywnie odczuwanego dobrostanu.

W badaniu wzięły udział 504 osoby (24,2% mężczyzn, 75,6% kobiet) w wieku od 17 do 55 lat (średni wiek: 24,4 lata). Rzetelność poszczególnych skal kwestionariusza, oszacowana za pomocą współczynnika α Cronbacha, zawiera się w przedziale pomiędzy ,70 a ,86. W celu weryfikacji pięcioczynnikowej struktury wymiarów społecznego dobrostanu zastosowana została konfirmacyjna analiza czynnikowa, która wykazała dobre dopasowanie modelu do danych (oparte na wskaźnikach CFI i RMSEA). Dla oszacowania trafności narzędzia zbadano związki dobrostanu społecznego, mierzonego za pomocą SWB, z satysfakcją z życia mierzoną Skalą Satysfakcji z Życia (SWLS; Diener i in., 1985) oraz dobrostanem psychologicznym, mierzonym Kwestionariuszem Dobrostanu Psychologicznego (PWB; Ryff, 1989). Uzyskane rezultaty wskazują na zadowalające właściwości psychometryczne adaptowanego narzędzia, dzięki czemu może ono być stosowane w badaniach naukowych.

Słowa kluczowe: dobrostan, dobrostan społeczny, SWB

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Annex:

Kwestionariusz SWB

C.L.M. Keyes polska adaptacja: D. Karaś, J. Cieciuch

Oceń swój stosunek do poniższych stwierdzeń, uwzględniając następujące opcje odpowiedzi:

- 1 zdecydowanie się nie zgadzam
- 2 nie zgadzam się
- 3 trudno powiedzieć
- 4 zgadzam się
- 5 zdecydowanie się zgadzam

		1	2	3	4	5
1	Nie czujesz przynależności do niczego, co mógłbyś/ mogłabyś nazwać społecznością.					
2	Czujesz, ze jesteś istotną częścią swojej społeczności.					
3	Spodziewasz się, że gdybyś miał(a) coś ważnego do powiedzenia, ludzie z twojej społeczności wysłuchaliby cię.					
4	Czujesz się bliski/bliska innym osobom z twojej społeczności.					
5	Uważasz, że twoja społeczność daje ci poczucie komfortu.					
6	Uważasz, ze gdybyś miał(a) coś do powiedzenia, twoja społeczność nie potraktowałaby tego poważnie.					
7	Uważasz, ze inni członkowie społeczeństwa cenią cię jako osobę.					
8	Uważasz, że inni ludzie są niewiarygodni.					
9	Uważasz, że ludzie są życzliwi.					
10	Uważasz, że ludzie są skoncentrowani tylko na sobie.					
11	Czujesz, że ludzie nie są godni zaufania.					
12	Sądzisz, że ludzie żyją tylko dla siebie.					
13	Uważasz, że ludzie są dzisiaj coraz bardziej nieuczciwi.					

14	Uważasz, że ludzie troszczą się o innych ludzi.			
15	Twoje zachowanie ma wpływ na inne osoby z twojej społeczności.			
16	Uważasz, że masz coś wartościowego, co możesz dać światu.			
17	Twoja codzienna aktywność nie przynosi niczego wartościowego dla twojej społeczności.			
18	Nie masz czasu ani energii, żeby zaoferować coś swojej społeczności.			
19	Uważasz, że twoja praca dostarcza jakąś ważną rzecz dla społeczeństwa.			
20	Czujesz, że nie wnosisz niczego ważnego do społeczeństwa.			
21	Uważasz, że społeczeństwo przestało się rozwijać.			
22	Z punktu widzenia takich ludzi jak ty, społeczeństwo nie poprawia się.			
23	Nie uważasz, ze instytucje społeczne, takie jak prawo lub rząd, czynią twoje życie lepszym.			
24	Uważasz, że społeczeństwo ciągle się rozwija.			
25	Myślisz, że nasze społeczeństwo umożliwia swoim członkom twórcze życie.			
26	Uważasz, że nie ma czegoś takiego jak postęp społeczny			
27	Uważasz, że świat staje się coraz lepszym miejscem dla każdego.			
28	Świat jest dla ciebie zbyt skomplikowany.			
29	Tylko naukowcy są w stanie zrozumieć, jak funkcjonuje świat.			
30	Nie widzisz sensu w tym, co się dzieje na świecie.			
31	Większość kultur jest tak dziwna, że nie możesz ich zrozumieć.			
32	Uważasz, że warto zrozumieć świat w którym żyjesz.			
33	Uważasz, że trudno jest przewidzieć co się wkrótce wydarzy w społeczeństwie.			

Kwestionariusz Dobrostanu Społecznego – klucz obliczania wyników

Kwestionariusz Dobrostanu Społecznego (Social Well-Being Scale, SWB) składa się z 33 itemów reprezentujących pięć skal: wkład społeczny (social contribution), społeczna integracja (social integration), społeczna aktualizacja (social actualization), społeczna akceptacja (social acceptance) oraz społeczna koherencja (social coherence).

Osoby badane udzielają odpowiedzi na skali od 1 (*zdecydowanie się nie zgadzam*) do 5 (*zdecydowanie się zgadzam*). Kwestionariusz zawiera pozycje wprost i odwrócone.

Klucz obliczania wyników:

Wynik ogólny to średnia lub suma wyników poszczególnych itemów, zakodowanych w następujący sposób:

Itemy: 2, 3, 4, 5, 7, 9, 14, 15, 16, 19, 24, 25, 27, 32

- zdecydowanie się nie zgadzam = 1,
- nie zgadzam sie = 2,
- trudno powiedzieć = 3,
- zgadzam sie = 4,
- zdecydowanie się zgadzam = 5

Itemy: 1, 6, 8, 10, 11, 12, 13, 17, 18, 20, 21, 22, 23, 26, 28, 29, 30, 31, 33

- zdecydowanie się nie zgadzam = 5,
- nie zgadzam sie = 4,
- trudno powiedzieć = 3,
- zgadzam się = 2,
- zdecydowanie się zgadzam = 1

Możliwe jest również wyliczenie wskaźników pięciu składników dobrostanu społecznego, według następującego klucza (gdzie literą "r" oznaczone są itemy wymagające odwrócenia skali odpowiedzi):

- ➤ Społeczna integracja (*Social Integration*): itemy 1r, 2, 3, 4, 5, 6r, 7
- Społeczna akceptacja (Social Acceptance): itemy 8r, 9, 10r, 11r, 12r, 13r, 14
- ➤ Wkład społeczny (Social Contribution): itemy 15, 16, 19, 17r, 18r, 20r
- > Społeczna aktualizacja (Social Actualization): itemy 21r, 22r, 23r, 24, 25, 26r, 27
- > Społeczna koherencja (Social Coherence): itemy 28r, 29r, 30r, 31r, 32, 33r