

ASSESSING WELL-BEING IN CHILDREN: ITALIAN ADAPTATION OF THE COMPREHENSIVE INVENTORY OF THRIVING FOR CHILDREN (CIT-CHILD)

VALENTINA RITA ANDOLFI
CATHOLIC UNIVERSITY OF MILANO

LOUIS TAY
PURDUE UNIVERSITY

EMANUELA CONFALONIERI
DANIELA TRAFICANTE
CATHOLIC UNIVERSITY OF MILANO

Interest in child well-being has been growing over the past years, but there is a lack of measures to evaluate it. In order to provide an instrument grounded on a multifaceted perspective of child well-being, we developed for Italian children an adaptation of the Comprehensive Inventory of Thriving (Su, Tay, & Diener, 2014). The aim of this study is the evaluation of the psychometric features of the Comprehensive Inventory of Thriving for Children (CIT-Child). It was administered to 626 Italian children, aging from 8 to 11. A subsample filled out also the Scale of Positive and Negative Emotions (Diener et al., 2010), and the Multidimensional Student's Life Satisfaction Scale (Huebner, 2001, 2004). Confirmatory factor analysis showed the goodness of fit of a 12-factor model, and correlational analyses proved that CIT-Child measures constructs that are similar, but not identical, to what is measured by the other instruments.

Key words: Child well-being; Multidimensional assessment of thriving; Psychometric features evaluation; Gender and age differences.

Correspondence concerning this article should be addressed to Valentina Rita Andolfi, Department of Psychology, Catholic University of Milano, Largo Gemelli 1, 20123 Milano, Italy. Email: valentinarita.andolfi@unicatt.it

Interest in the well-being of children has been growing over the past years and assessing this issue is now crucial for the development of the major international and local policies on the quality of children's lives (OECD, 2009a, 2009b; Pollard & Davidson, 2001; Roberts, 2010). The goal of these policies is not merely to examine deficits in well-being but also to assess positive aspects of well-being, or thriving. By assessing whether children are thriving, it is then possible for researchers to trace home, school, environmental, and societal conditions that enable children to flourish. The development of more appropriate tools that permit young children to report on their sense of well-being, would also enable broader metrics of the quality of early childhood programs. More broadly, such instruments could have an impact on how society understands and takes care of children (Stiglitz, Sen, & Fitoussi, 2009).

Significant efforts have been invested in conceptualizing child well-being and in developing internationally comparable indicators and frameworks for its measurement and monitoring (Ben-Arieh, 2010; European Commission, 2008; Fattore, Mason, & Watson, 2007; OECD 2009a; UNICEF, 2007). Nevertheless, there has been very little work conducted on developing an integrative measure of child well-being. Systematic reviews of the instruments reveal that most of the extant well-being instruments are aimed at assessing teenagers and adults' well-being (see, e.g., Confalonieri, Gatti, Ionio, & Traficante, 2008; Kedenberg, 1980; Viet & Ware, 1983; Wenger, Mattson, Furberg, & Elinson, 1984).

Even though some measures have been developed to assess well-being in children and preteens (Andelman, Attkinsson, Zima, & Rosenblatt, 1999; Huebner, 2004; Pollard & Lee, 2003), these instruments are often specialized and examine a few common constructs, such as positive emotions and life satisfaction (see, e.g., Pollard & Lee, 2003). Thus, there is a need to develop a theoretically grounded instrument that can integratively assess multiple dimensions of well-being.

Doing research with children also means recognizing their role in society as active individuals who are required to interact with others, developing physically, psychologically, and socially (Bisegger, Cloetta, von Bisegger, Abel, & Ravens-Sieberer, 2005). From birth, children are asked to face social and environmental age-specific challenges, so-called developmental tasks (Havighurst, 1966). As the child ages, developmental tasks become increasingly gender specific, and are linked to different skills and resources. Thus, developmental tasks may cause not only age-related differences in quality of life and well-being, but, especially for adolescents, also gender-related differences (Bisegger et al., 2005). As a result, evaluation of the quality of life of children and adolescents in various age groups must include separation by gender as well (Kolip & Schmidt, 1999).

DRAWING ON AND ADAPTING FROM AN ADULT ASSESSMENT OF WELL-BEING

An instrument that seeks to assess well-being integratively needs to consider two main traditions. Hedonic approach considers well-being as a subjective state composed by an affective component (a prevalence of positive emotional experiences over negative ones) and a cognitive component (a personal judgment on the satisfaction one has with life as a whole, or with specific domains) (Diener, 2009). Eudaimonic approach underscores positive psychological functioning and human development with personal growth and meaning in life, that are often emphasized as core eudaimonic components (Delle Fave, Brdar, Freire, Vella-Brodrick, & Wissing, 2011; Rogers, 1962; Ryff, 1989; Waterman, 1993). Recent trends in well-being research show the emergence of integrated well-being conceptualizations (e.g., Huppert & So, 2009), where the term flourishing (or thriving) is used to describe the combined presence of both hedonic and eudaimonic well-being concepts.

Recently, Su, Tay, and Diener (2014) integrated these different traditions to develop the Comprehensive Inventory of Thriving (CIT), by using a theory-driven approach. This instrument is grounded on several features that have been proposed as indicators of well-being. One of the most important dimensions of psychological well-being, that has been found to be related to health and longevity, was subjective well-being (SWB; Diener, 1984, 2000; Diener & Chan, 2011). Moreover, Ryan and Deci (2000), in Self-Determination Theory, identified three components essential for positive functioning: needs for competence, relatedness, and autonomy. Another relevant contribution to the identification of well-being experience comes from Ryff's (1995) work: after having considered contributions from developmental psychology, clinical psychology, and mental health, the author proposed six dimensions for positive psychological functioning, that is, self-acceptance (a positive attitude toward the self), positive relations with other people, autonomy, environmental mastery,

purpose in life, and personal growth (having a sense of continued development and realizing potential). In addition, Seligman's (2011) Positive emotion, Engagement, Relationships, Meaning, and Accomplishments (PERMA) model of flourishing claims that positive emotions, engagement, relationship, meaning, and accomplishment are the keys to happiness and well-being. Finally, the research of Scheier and colleagues (Rasmussen, Scheier, & Greenhouse, 2009; Scheier & Carver, 1985, 1987, 1992) demonstrated that optimism is a key predictor for physical health and an important aspect of positive functioning.

Based on these contributions, the CIT measures a multifaceted well-being by using 54 items that assess 18 facets of positive functioning, representing seven dimensions of psychological well-being: 1) SWB in the form of high life satisfaction and positive feelings (three subscales: Life satisfaction, Positive feelings, Negative feelings); 2) supportive and enriching relationships (six subscales: Support, Community, Trust, Respect, Loneliness, Belonging); 3) interest and engagement in daily activities (one subscale: Engagement); 4) meaning and purpose in life (one subscale: Meaning); 5) a sense of mastery and accomplishment (five subscales: Skills, Learning, Accomplishment, Self-efficacy, Self-worth); 6) feelings of control and autonomy (one subscale: Control); 7) optimism (one subscale: Optimism). Items on three subscales — Loneliness, (lack of) Control, and Negative feelings — are negatively phrased. The rest of the items are phrased in a positive direction so that high scores signify that respondents view themselves positively in important areas of functioning. Participants are instructed to respond to each item on a scale from 1 (*strongly disagree*) to 5 (*strongly agree*).

The CIT can be used for research purposes and in-depth assessment of well-being in health settings, such as in psychiatric and clinical practices. A multigroup confirmatory factor analysis (CFA) was applied on the CIT across four samples and the model fit was adequate, and consistent across groups. Convergent, divergent, and predictive validities were also examined across five different adult samples representing different age groups, diverse occupations, and a wide range of income and education levels. The authors also examined the incremental validity of the CIT over and above existing measures of psychological well-being for predicting all the health outcomes and the CIT showed substantial incremental validity over all the existing measures (Su et al., 2014).

Due to its broad theoretic base and to its reliable psychometric features, the CIT has been translated into different languages for the adult population (Chinese, Russian, Spanish, German, and Turkish), but it has never been used with young people.¹ The purpose of this study is to adapt and assess the psychometric features of the Italian adaptation of the Comprehensive Inventory of Thriving for Children (CIT-Child). We believe this adaptation contributes to the debate about the need for a multidimensional approach to the measurement of well-being and about the measurement of what makes life truly prosperous for children, a field partially unexplored in Italy.

METHOD

Participants

In order to assess the factor structure of the scale, 626 Italian children were requested to fill out the Italian adaptation of CIT-Child. They were from 8 to 11 years old ($M = 9.71$, $SD = 0.97$), 50.3% were male. Among participants 31.4% attended the 3rd grade, 30% attended the 4th grade, and 38.6% attended the 5th grade.

For the assessment of convergent validity, 407 children from the sample filled out also the Italian adaptation of the Scale of Positive and Negative Emotions (SPANE; Diener et al., 2010), and Multidimensional Student's Life Satisfaction Scale (MSLSS; Huebner, 2001, 2004; Italian adaptation by Zappulla, Pace, Cascio, Guzzo, & Huebner, 2014).

All participants were native Italian speakers, residing and attending school in the province of Milano. They came from middle socioeconomic classes. The majority of their parents had a high-school diploma (mothers = 52.3%; fathers = 47.6%); 26.5% of mothers had a middle school diploma, and 15.9% had graduated. Only a minority of mothers had a primary school diploma (1.5%), 0.8% had a Ph.D., and the rest did not specify a level of education. Among fathers 33.1% had a middle school diploma, and 11.3% had graduated. A minority of fathers had only a primary school diploma (1.3%), 1.6% had a Ph.D, and about 5% of the fathers did not specify their level of education. Most of the parents worked as employees (mothers = 45.5%; fathers = 40.8%). Letters that outlined the nature and the aim of the study were sent out to students' parents. Only children whose parents gave their consent to participation in the research were assessed (98%).

Measures

Italian adaptation of the Comprehensive Inventory of Thriving for Children (CIT-Child). The scale consists of a comprehensive range of subscales, each of which assesses one facet of psychological well-being with three items. These subscales should be unidimensional and distinguishable from each other. The Italian adaptation of the CIT for the child population has 45 items assessing 15 facets of positive functioning, representing five dimensions of psychological well-being: 1) supportive and enriching relationships (Relationship, e.g., "There are people I can depend on to help me"); 2) interest and engagement in daily activities (Engagement, e.g., "In most activities I do, I feel energized"); 3) a sense of mastery and accomplishment (Mastery, e.g., "I use my skills a lot in my everyday life"); 4) optimism (Optimism, e.g., "I expect more good things in my life than bad"); 5) subjective well-being, in the form of high life satisfaction and positive feelings (SWB, e.g., "I feel happy most of the time"). Bilinguals, blind to the content of the original English words, performed back-translations. The back-translations were virtually identical to the original English. The original English items and the Italian adaptation of the CIT-Child are reported in the Appendix. We slightly changed some questions to make their content familiar to the child population.

The dimension Meaning in life (e.g., "I have found a satisfactory meaning in life") and the subscale Achievement (e.g., "I am achieving most of my goals"), belonging to the Mastery scale of this dimension in the original CIT version, were removed because during pilot interviews conducted on a sample of 15 children (eight female), aged from 6 to 11 years old, it was observed that children were uncertain about the meaning of these items and had difficulty in answering the questions. The same happened for the dimension Control because it measures an experience of autonomy (e.g., "Other people decide most of my life decisions"), that does not fit the developmental stage the CIT-Child addresses.

Multidimensional Students' Life Satisfaction Scale (MSLSS; Huebner, 2001, 2004). Italian version (Zappulla et al., 2014) of MSLSS is a self-report scale designed for Italian children and adolescents aged from 8 to 18 years old. This measure includes 30 items assessing satisfaction across five distinct domains, including family (seven items, e.g., "I like spending time with my parents"), friends (six items, e.g., "My friends will help me if I need it"), living environment (five items, e.g., "I like my neighbors"), school (five items, e.g., "School is interesting"), and self (seven items, e.g., "I am a nice person"). A mean score was obtained for each domain. Similarly, a general

satisfaction score was calculated as a mean score on all items. A 4-point scale, ranging from 1 (*never*) to 4 (*almost always*) was used to measure participants' satisfaction with life. In order to assess the internal consistency of the 30-item version of the MSLSS, Cronbach's alpha coefficients on 407 children who took part in the research were computed for the five domain scores, and they ranged from .64 to .87. Results indicated that all the subscales proved to have good internal consistency for the sample of the present research.

Scale of Positive and Negative Experience (SPANE; Diener et al., 2010) is a brief 12-item scale, with six items designed to assess positive experiences (positive, good, pleasant, happy, joyful, and contented) and six items designed to assess negative experiences (negative, bad, unpleasant, sad, afraid, and angry). The scale aims to assess the full range of positive and negative experiences: it not only assesses pleasant and unpleasant emotional feelings, but also reflects other states such as interest, flow, positive engagement, and physical pleasure. Each SPANE item is scored on a scale ranging from 1 to 5, where 1 represents *very rarely* or *never* and 5 represents *very often* or *always*. SPANE has many advantages over other scales, designed to assess emotions (see PANAS; Watson, Clark, & Tellegen, 1988). SPANE reflects a large number of positive and negative feelings regardless of their specific labels; questions are framed in terms of the amount of time the respondent experiences each feeling, which appears to be more strongly related to well-being measures (Diener, Sandvik, & Pavot, 1991) and more comparable across respondents than is the intensity of feelings. Moreover, the scale is keyed to the last four weeks, which is short enough to allow the respondent to recall actual experiences rather than rely on general self-concept, pointed out by Diener et al. (2010). The positive and negative scales are scored separately because of the partial independence of the two types of feelings. Both the positive score (SPANE-P) and the negative score (SPANE-N) can range from 6 to 30. The two scores can be combined by subtracting the negative score from the positive score, and the resulting SPANE balance (SPANE-B) score can range from -24 to 24.

The scale has been translated into several languages, including Italian, and can be downloaded for research purposes on the authors' official website.² In the present research, the items "pleasant" and "unpleasant" were removed because, during the interviews conducted before the administration (see paragraph above), it emerged that children did not understand their meaning because they were too abstract. Alphas were satisfactory (SPANE-P, alpha = .70; SPANE-N, alpha = .67; SPANE-B, alpha = .77).

Procedure

Questionnaires were administered by researchers' assistants and were completed by children who filled out only the Italian adaptation of CIT-Child ($N = 219$), during one class period; 407 children filled out the Italian adaptation of CIT-Child, MSLSS, and SPANE, in two class periods. Each class period lasted 50 minutes. Each child completed the questionnaires individually.

RESULTS

Descriptive Statistics and Reliability Analysis

Table 1 shows that an asymmetry toward high well-being score was observed, because of the non-clinical population. As for the alpha coefficient, three (Community, Trust, Self-efficacy)

out of 15 subscales had a low reliability and were not considered in the subsequent analyses. Three other subscales (Support, Loneliness, and Learning) were not sufficiently reliable (alpha ranging from .55 to .58), but we decided to consider them for their relevance in children's experience of well-being. The remaining subscales showed sufficient reliability, so CFA was applied on 12 subscales with reliability ranging from .55 to .81.

TABLE 1
Comprehensive Inventory of Thriving for Children (CIT-Child):
Descriptive statistics and reliability of each subscale and dimension ($N = 626$)

Dimensions	Subscale	<i>M</i>	<i>SD</i>	<i>Z</i> by Kolmogorov- Smirnov	<i>p</i> <	Alpha	
						Subscales	Dimensions
Relationships (18 items)	Support	4.39	0.67	5.10	.001	.55	.77
	Community	3.97	0.82	3.73	.001	.51	
	Trust	3.80	0.82	3.54	.001	.53	
	Respect	3.82	0.87	3.96	.001	.71	
	Loneliness	3.91	0.94	3.43	.001	.55	
	Belonging	4.45	0.78	6.55	.001	.73	
Engagement (three items)	Engagement	4.07	0.76	3.70	.001	.61	.61
Mastery (12 items)	Skills	4.04	0.73	3.61	.001	.60	.78
	Learning	4.03	0.82	4.07	.001	.58	
	Self-efficacy	4.13	0.66	3.83	.001	.48	
	Self-worth	3.59	0.84	2.48	.001	.70	
Optimism (three items)	Optimism	3.99	0.88	3.72	.001	.75	.75
Subjective well-being (nine items)	Life satisfaction	4.20	0.79	4.45	.001	.68	.83
	Positive feelings	4.24	0.79	4.20	.001	.78	
	Negative feelings	3.86	1.09	3.73	.001	.81	
Total scale		4.04	0.50	1.70	.006		.86

The alpha coefficient for the total scale (on 12 subscales) shows a very high consistency (.86). After grouping the subscales in dimensions, as has been theorized by Su et al. (2014), the alpha coefficients improved, ranging from .61 (Engagement subscale: three items) to .83 (Subjective well-being: nine items).

Confirmatory Factor Analysis

Three CFAs were conducted by mean of the MPLUS software on the whole sample to test the factor structure of the Italian adaptation of CIT-Child (Table 2). At first, based on the conceptual model (Su et al., 2014) and on reliability indices, a 12-factor model of well-being (Model 1) was tested using MPLUS 7.11 (Muthén & Muthén, 1998-2012) with the robust maxi-

mum likelihood. Single items were used without aggregation and factors were correlated to each other. Then, we assessed Model 2 with 12 first-order factors loading on five second-order correlated factors,³ and Model 3 in which all the five second-order factors loaded onto one factor (global well-being).⁴

TABLE 2
Comparison among alternative factor models ($N = 626$)

Model	χ^2	df	χ^2/df	CFI	TLI	RMSEA [95% CI]	SRMR
1 – twelve correlated subscales	1060.53	528	2	.925	.911	.040 [.036, .043]	.040
2 – five higher-order factors	444.14	49	9.06	.853	.802	.113 [.103, .123]	.220
3 – one higher-order factor	396.81	55	7.21	.873	.847	.099 [.09, .108]	.083

Note. CFI = comparative fit index; TLI = Tucker-Lewis index; RMSEA = root mean square error of approximation; SRMR = standardized root mean square residual; CI = confidence interval.

We used two ways of evaluating model fit: the χ^2 goodness-of-fit statistic and other fit indices. The χ^2 statistic assesses the magnitude of discrepancy between the sample and fitted covariance matrices (Hu & Bentler, 1999). It increases as a function of df , hence the concern for N . For this reason, χ^2 is likely not to fit the data well if the sample size is high. Some authors suggest to use χ^2/df , which should be 3 or lower than 3 (Iacobucci, 2009). As for TLI and CFI, values equal to or greater than .90 and .95 reflect acceptable and excellent fit to data, respectively. For RMSEA and SRMR, values of less than, respectively, .06 and .08 (Hu & Bentler, 1999) are interpreted to reflect a close fit and a reasonable fit to data (Marsh, Hau, & Wen, 2004). However, these cut-off values constitute only rough guidelines (Marsh, 2007; Marsh, Ellis, Parada, Richards, & Heubeck, 2005; see also Marsh, Hau, Balla, & Grayson, 1998). The results indicated that only Model 1 fits the data adequately, and can be considered the best model. The subscales of the CIT-Child are correlated with each other (see Table 3 for ϕ coefficients); however the low goodness of fit of Model 3 (in which all the subscales loaded onto one factor) suggests that they are distinguishable measures of psychological well-being constructs (as in the original version of CIT, see Su et al., 2014). Factor loadings of the CFA with 12 correlated subscales are shown in Table 4.

Differences by Gender and by Age

A 2 (Gender: male vs. female) \times 3 (Grade: 3rd vs. 4th vs. 5th) MANOVA between subjects was carried out on the scores in the 12 subscales, to assess the effects of gender and grade on the experience of well-being measured by CIT-Child. Score profiles were different by gender, $F(15, 546) = 3.549$, $p < .001$, Pillai's trace = .089, and by grade, $F(30, 1094) = 2.175$, $p < .001$, Pillai's trace = .113, but interaction did not reach significance ($F < 1$).

TABLE 3
Correlations among the subscales in Model 1 (ϕ coefficients)

	1	2	3	4	5	6	7	8	9	10	11	12
1 Support	–											
2 Respect	.617	–										
3 Loneliness ^a	.545	.633	–									
4 Belonging	.463	.370	.311	–								
5 Engagement	.650	.480	.487	.418	–							
6 Skills	.772	.455	.359	.497	.919	–						
7 Learning	.669	.325	.293	.368	.750	.816	–					
8 Self-worth	.701	.549	.278	.314	.711	.726	.613	–				
9 Optimism	.683	.464	.457	.289	.697	.775	.607	.525	–			
10 Life satisfaction	.714	.574	.581	.409	.738	.791	.575	.630	.884	–		
11 Positive feelings	.667	.532	.543	.387	.764	.653	.618	.510	.717	.800	–	
12 Negative feelings ^a	.286	.423	.656	.157	.289	.167	.173	.158	.211	.434	.535	–

Note. ^a Reversed score. All correlations are significant, $p < .001$.

As for gender, all the subscales, except for Loneliness, Optimism, and Negative feelings, exhibited significant differences (see Table 5). Compared to males, females tended to totalize higher scores for every subscale. Regarding age, younger individuals compared with older individuals, reported significantly higher scores in Engagement, Self-worth, Optimism (3rd grade > 4th grade = 5th grade), and Positive feelings (3rd grade > 4th grade) (see Table 6). Respect is the only subscale in which the 5th graders totalized more than the 4th graders.

Convergent Validity

The MSLSS (Huebner, 2001, 2004; Italian adaptation by Zappulla et al., 2014) and the Italian adaptation of SPANE (Diener et al., 2010) were administered to a subgroup of the sample ($N = 407$), in order to assess the convergent validity of the CIT-Child. The results showed good correlations between the CIT-Child and MSLSS (Table 7) subscales, with coefficients ranging from .16 to .56. The correlation pattern shows that the two instruments are consistent with each other, although they assess different aspects of the experience of well-being. The results from correlation analysis between CIT-Child and SPANE (Table 8) showed a coherent pattern of results. In particular, it is worth noting the strong correlations between SPANE and the two corresponding subscales of CIT, that measure the emotional state of the subject: $r = .55$ for Positive feelings and $r = .514$ for Negative feelings, respectively.

TABLE 4
Factor loadings, CFA 12 correlated subscales ($N = 626$)

Item	Subscales											
	Support	Respect	Loneliness	Belonging	Engagement	Skills	Learning	Self-worth	Optimism	Life satisfaction	Positive feelings	Negative feelings
There are people I can depend on to help me	.588											
There are people who give me support and encouragement	.514											
There are people who appreciate me as a person	.501											
People respect me		.752										
People are polite to me		.732										
I am treated with the same amount of respect as others		.567										
I feel lonely			.554									
Often I feel left out			.634									
There is no one I feel close to			.464									
I feel a sense of belonging in my country				.565								
I feel a sense of belonging in my state or province				.696								
I feel a sense of belonging in my community				.812								
I get fully absorbed in activities I do					.567							
In most of the things I do, I feel energized					.586							
I get excited when I work on something					.618							
I use my skills a lot in my everyday life						.647						
I frequently use my talents						.543						

(table 4 continues)



Table 4 (continued)

Item	Subscales											
	Support	Respect	Loneliness	Belonging	Engagement	Skills	Learning	Self-worth	Optimism	Life satisfaction	Positive feelings	Negative feelings
I get to do what I am good at everyday						.533						
I learned something new yesterday							.408					
Learning new things is important to me							.634					
I always learn something everyday							.610					
What I do in life is valuable and worthwhile								.642				
The things I do contribute to society								.703				
The work I do is important for other people								.631				
I am optimistic about my future									.704			
I have a positive outlook on life									.805			
I expect more good things in my life than bad									.632			
In most ways my life is close to my ideal										.590		
I am satisfied with my life										.604		
My life is going well										.748		
I feel positive most of the time											.671	
I feel happy most of the time											.738	
I feel good most of the time											.788	
I feel negative most of the time												.771
I experience unhappy feelings most of the time												.747
I feel bad most of the time												.767

TABLE 5
Comprehensive Inventory of Thriving for Children (CIT-Child): Mean scores by gender ($N = 626$)

	Male ($N = 315$)		Female ($N = 311$)		F	$p \leq$
	M	SD	M	SD		
Support	4.27	0.70	4.51	0.60	17.95	.001
Respect	3.78	0.90	3.90	0.80	4.51	.034
Loneliness	3.89	0.90	3.96	1.00	0.76	.383
Belonging	4.38	0.80	4.52	0.70	4.58	.033
Engagement	4.01	0.80	4.15	0.70	6.09	.014
Skills	3.94	0.80	4.13	0.70	10.33	.001
Learning	3.91	0.80	4.11	0.80	8.70	.003
Self-worth	3.47	0.90	3.71	0.80	12.63	.001
Optimism	3.95	0.90	4.02	0.90	1.50	.222
Life satisfaction	4.12	0.80	4.28	0.80	5.61	.018
Positive feelings	4.13	0.80	4.37	0.70	14.97	.001
Negative feelings	3.84	1.10	3.93	1.10	0.72	.396

TABLE 6
Comprehensive Inventory of Thriving for Children (CIT-Child): Mean scores by grade ($N = 626$)

	3rd grade ($N = 195$)		4th grade ($N = 187$)		5th grade ($N = 244$)		F	$p \leq$
	M	SD	M	SD	M	SD		
Support	4.44	0.60	4.38	0.70	4.36	0.70	1.13	.325
Respect	3.77	0.90	3.74	0.90	3.93	0.80	3.42	.033
Loneliness	3.82	1.00	3.95	0.90	3.98	0.90	1.64	.195
Belonging	4.43	0.80	4.46	0.80	4.44	0.80	0.07	.929
Engagement	4.24	0.70	4.02	0.70	4.01	0.80	6.03	.003
Skills	4.10	0.80	4.03	0.70	4.00	0.70	1.12	.328
Learning	4.08	0.90	4.03	0.80	3.95	0.80	1.15	.316
Self-worth	3.74	0.80	3.54	0.80	3.54	0.90	4.98	.007
Optimism	4.19	0.80	3.87	0.90	3.95	0.90	6.71	.001
Life satisfaction	4.29	0.70	4.21	0.70	4.13	0.80	1.80	.166
Positive feelings	4.38	0.70	4.17	0.90	4.20	0.80	4.31	.014
Negative feelings	3.80	1.20	3.86	1.00	3.94	1.00	0.84	.433

TABLE 7
Correlations between Italian adaptation of CIT-Child and MSLSS ($N = 407$)

CIT-Child	MSLSS					
	Family	Friends	School	Environment	Self	Total
Support	.423	.441	.327	.222	.408	.485
Respect	.260	.471	.296	.161	.282	.397
Loneliness ^a	.271	.402	.258	.163	.281	.368
Belonging	.243	.335	.247	.429	.188	.393
Engagement	.424	.418	.445	.302	.475	.563
Skills	.407	.358	.419	.229	.474	.514
Learning	.403	.314	.550	.316	.412	.564
Self-worth	.332	.308	.360	.213	.375	.435
Optimism	.440	.374	.366	.219	.504	.509
Life satisfaction	.547	.398	.409	.268	.455	.559
Positive feelings	.469	.481	.383	.300	.452	.558
Negative feelings ^a	.288	.383	.169	.193	.259	.335

Note. MSLSS = Multidimensional Students' Life satisfaction Scale. ^a Reversed score. All correlations are significant, $p < .001$.

TABLE 8
Correlations between Italian adaptation of CIT-Child and SPANE ($N = 407$)

CIT-Child	SPANE		
	Positive feelings	Negative feelings	Balance
Support	.437	-.271	.400
Respect	.320	-.365	.395
Loneliness ^a	.333	-.367	.402
Belonging	.239	-.176	.235
Engagement	.510	-.304	.459
Skills	.388	-.242	.356
Learning	.409	-.177	.327
Self-worth	.382	-.188	.320
Optimism	.433	-.331	.434
Life satisfaction	.491	-.348	.475
Positive feelings	.550	-.353	.510
Negative feelings ^a	.347	-.514	.500

Note. SPANE = Scale of Positive and Negative Experience. ^a Reversed score. All correlations are significant, $p < .001$.

DISCUSSION

The aim of the present study was to adapt and validate a measure of child well-being derived from the Comprehensive Inventory of Thriving (CIT; Su et al., 2014) in a sample of Italian children (CIT-Child). One feature that distinguishes the CIT-Child from existing measures of psychological well-being is that it endorses a holistic perspective of positive functioning. Thriving, as assessed by the final version of CIT-Child, is broadly defined to include five different dimensions of positive functioning, loading 12 facets. Our results showed that the Italian adaptation of the scale to children is a valid and reliable instrument for the evaluation of integrate well-being. Confirmatory factor analysis, conducted on the Italian form, indicated that the proposed 12-factor solution of the CIT-Child fits our data quite well. In fact, all the indices confirmed a good fit for this model. Internal consistency indices of the 12 subscales of the adaptation of the CIT were acceptable, and the internal consistency improved when subscales were grouped according to the dimensions proposed by Su et al. (2014) (Relationship, Engagement, Mastery, Optimism, Subjective well-being).

Convergent validity of CIT-Child was examined using correlations between the subscales, the indices of life satisfaction of the MSLSS, and the positive and negative emotionality from SPANE. Results show that the CIT-Child has significant correlations with all the MSLSS dimensions, and that the subscales related to the emotional state of participants (Positive feelings and Negative feelings) are correlated with the SPANE. These relations evidence that CIT-Child measures constructs, that are similar, but not identical, to what is measured by other instruments, aimed at assessing life satisfaction and emotional states. Compared with the CIT, the MSLSS and the SPANE assess few components of well-being. In fact, the MSLSS measures child satisfaction with life in different contexts, and the SPANE is able to capture only the emotional component of life satisfaction. Satisfaction with life and emotionality are important features of well-being, that can be referred to the hedonic perspective, but most recent conceptualizations recognize the need for an integrate perspective in which other components must be considered in individual's thriving (see Huppert & So, 2009).

The role of gender and age differences in well-being is not completely clarified in the literature, despite their importance being increasingly recognized by educators, researchers, and psychologists. In some aspects, children usually report higher levels of well-being than adolescents (Bisegger et al., 2005; Ravens-Sieberer, Görtler, & Bullinger, 2000; Simeoni, Auquier, Antoniotti, Sapin, & San Marco, 2000). Even in the present research, in fact, the perception of well-being tends to decrease with age for both males and females. Younger individuals (3rd grade), compared with older individuals (5th grade), perceived themselves as more engaged in daily activities, confident and optimistic, experiencing more positive emotions. The older participants perceived themselves as more respected than younger participants.

With regard to gender differences, findings are inconsistent, but several studies seem to indicate higher values of well-being in adolescent males than in adolescent females (Bisegger et al., 2005; Ravens-Sieberer et al., 2000; Simeoni et al., 2000). In the present research also, results highlight significant differences for gender. Compared to males, females perceive themselves more supported by others and feel like they belong to their social context and their Nation. Females reported a greater involvement, respect, higher self-worth, trust in their own abilities, willingness to learn in everyday life activities than males; furthermore, they were more satisfied with their lives, experiencing more positive feelings than males.

These results could be affected by social desirability consensus, as studies demonstrated that this bias is more common among younger than older children and among girls than among boys (e.g., Crandall, Katkovsky, & Crandall, 1965). However, from a developmental perspective, many aspects of the decrease in well-being during adolescence can be explained. The literature indicates that puberty is a stressful event and can be related to negative feelings in boys and girls (Ata, Rojas, Ludden, & Thompson, 2011; Burke, Schaefer, & Thompson, 2012; Gatti, Ionio, Traficante, & Confalonieri, 2014; Petrie, Greenleaf, & Martin, 2010).

Limitations and Future Research Directions

Future research might contribute to overcome the limitations of the present study. As for the assessment of the validity of CIT-Child, a further data collection should be planned to test its predictive validity in relation to other health-related measures, as the authors did with the original version of the instrument (see Su et al., 2014). Moreover, the divergent validity of the instrument should be investigated, contrasting the measure of CIT-Child dimensions with the measure of other traits, that is, temperamental profile or internalizing and externalizing attitude, that can share some indicators with well-being experience.

Another issue on which further research is required is the differences by gender and by age in well-being experience. The inconsistency of the data on this issue, which can be observed in the research field, is mostly due to the use of different questionnaires, that address sometimes very different dimensions and use different indicators of well-being (Bisegger et al., 2005). Furthermore, other relevant aspects vary among the studies: the context of investigation (e.g., work, school, family), the object of interest (e.g., the disparity of roles in the workplace, chronic illness), and the age of participants (e.g., children, adolescents, adults, elderly). To sum up, further investigations are needed to explore the role of gender and age in well-being among children, and CIT-Child can offer a valid instrument to carry out this research, with further validation on preteens and teenagers. We hope that our instrument can offer reliable data to assess the impact of educational and psychological interventions on the experience of well-being in children.

NOTES

1. Translations are available on http://internal.psychology.illinois.edu/~ediener/CIT_BIT.html
2. <http://internal.psychology.illinois.edu/~ediener/SPANE.html>
3. In the model, Support, Respect, Loneliness, and Belonging were loaded on Relationships; Engagement was loaded on Engagement; Skills, Learning, Self-worth were loaded on Mastery; Optimism expressed Optimism; Life satisfaction, Positive feelings, Negative feelings expressed Well-being.
4. Global Well-being was expressed by Relationships, Engagement, Mastery, Optimism, Subjective well-being.

REFERENCES

- Andelman, R. B., Attkinsson, C. C., Zima, B. T., & Rosenblatt, A. B. (1999). Quality of life of children: Toward conceptual clarity. In M. E. Maruish (Ed.), *The use of psychological testing for treatment planning and outcomes assessment*. Mahwah, NJ: Lawrence Erlbaum.

- Ata, R., Rojas, A., Ludden, A. B., & Thompson, J. K. (2011). Factors influencing body image in adolescence. In V. R. Preddy, R. R. Watson, & C. R. Martin (Eds.), *The international handbook of behavior, diet, and nutrition* (pp. 3221-3240). New York, NY: Springer.
- Ben-Arieh, A. (2010). From child welfare to children well-being: The child indicators perspective. In S. B. Kamerman, S. Phipps, & A. Ben-Arieh (Eds.), *From child welfare to child well-being: An international perspective on knowledge in the service of policy making* (Vol. 1, pp. 9-22). Dordrecht, Netherlands: Springer Netherlands.
- Bisegger, C., Cloetta, B., von Bisegger, U., Abel, T., & Ravens-Sieberer, U. (2005). Health-related quality of life: Gender differences in childhood and adolescence. *Sozial-und Präventivmedizin*, 50, 281-291. doi:10.1007/s00038-005-4094-2
- Bullinger, M., Morfeld, M., Petersen, C., & Ravens-Sieberer, U. (2001). Zur gesundheitsbezogenen Lebensqualität von Frauen und Männern [Health-related quality of life in women and men]. In U. Worringer, C. Zwingmann (Eds.), *Rehabilitation weiblich – männlich: geschlechtsspezifische Rehabilitationsforschung* (pp. 195-220). Weinheim, Germany: Juventa.
- Burke, N., Schaefer, L., & Thompson, J. K. (2012). Body image. In V. S. Ramachaudran (Ed.), *Encyclopedia of human behavior* (pp. 365-371). New York, NY: Academic Press.
- Confalonieri, E., Gatti, E., Ionio, C., & Traficante, D. (2008). Body esteem scale: A validation on Italian adolescents. *TPM – Testing, Psychometrics, Methodology in Applied Psychology*, 15, 153-165. doi:10.4473/TPM.15.3.3
- Crandall, V. C., Katkovsky, W., & Crandall, V. J. (1965). Children's beliefs in their own control of reinforcements in intellectual-academic achievement situations. *Child Development*, 36, 91-109. doi:10.2307/1126783
- Delle Fave, A., Brdar, I., Freire, T., Vella-Brodrick, D., & Wissing, M. (2011). The eudaimonic and hedonic components of happiness: Qualitative and quantitative findings. *Social Indicators Research*, 100, 185-207. doi:10.1007/s11205-010-9632-5
- Diener, E. (1984). Subjective well-being. *Psychological Bulletin*, 95, 542-575. doi:10.1037/0033-2909.95.3.542
- Diener, E. (2000). Subjective well-being: The science of happiness and a proposal for a national index. *American Psychologist*, 55, 34-43. doi:10.1037/0003-066X.55.1.34
- Diener, E. (2009). Subjective well-being. In E. Diener (Ed.), *The science of well-being* (Vol. 37, pp. 11-58). New York, NY: Springer.
- Diener, E., & Chan, M. (2011). Happy people live longer: Subjective well-being contributes to health and longevity. *Applied Psychology: Health and Well-Being*, 3, 1-43. doi:10.1111/j.1758-0854.2010.01045.x
- Diener, E., Sandvik, E., & Pavot, W. (1991). Happiness is the frequency, not the intensity, of positive versus negative affect. In F. Strack, M. Argyle, & N. Schwarz (Eds.), *Subjective well-being: An interdisciplinary perspective* (pp. 119-139). New York, NY: Pergamon.
- Diener, E., Wirtz, D., Tov, W., Kim-Prieto, C., Choi, D. W., Oishi, S., & Biswas-Diener, R. (2010). New well-being measures: Short scales to assess flourishing and positive and negative feelings. *Social Indicators Research*, 97, 143-156. doi:10.1007/s11205-009-9493-y
- European Commission. (2008). *Child poverty and well-being in the EU: Current status and the way forward*. Luxembourg, Belgium: European commission, Directorate-general for employment, social affairs and equal opportunities. Retrieved from <http://ec.europa.eu/social/BlobServlet?docId=2049&langId=en>
- Fattore, T., Mason, J., & Watson, E. (2007). Children's conceptualisation(s) of their well-being. *Social Indicators Research*, 80, 5-29. doi:10.1007/s11205-006-9019-9
- Gatti, E., Ionio, C., Traficante, D., & Confalonieri, E. (2014). "I like my body; therefore, I like myself": How body image influences self-esteem. A cross-sectional study on Italian adolescents. *Europe's Journal of Psychology*, 10, 301-317. doi:10.5964/ejop.v10i2.703
- Havighurst, R. J. (1966). *Developmental tasks and education*. New York, NY: McKay.
- Hu, L. T., & Bentler, P. M. (1999). Cutoff criteria for fit indexes in covariance structure analysis: Conventional criteria versus new alternatives. *Structural Equation Modeling: A Multidisciplinary Journal*, 6, 1-55. doi:10.1080/10705519909540118
- Huebner, E. S. (2001). *Manual for the Multidimensional Students' Life Satisfaction Scale. 2001 Version*. Columbia, SC: University of South Carolina. Retrieved from https://www2.cas.sc.edu/psyc/sites/default/files/directory_files/huebslssmanual_0.pdf
- Huebner, E. S. (2004). Research on assessment of life satisfaction in children and adolescents. *Social Indicators Research*, 66, 3-33. doi:10.1023/b:soci.0000007497.57754.e3

- Huppert, F. A., & So, T. (2009, July). *What percentage of people in Europe are flourishing and what characterizes them*. Paper presented at the IX ISQOLS Conference, Florence, Italy.
- Iacobucci, D. (2009). Everything you always wanted to know about SEM (structural equations modeling) but were afraid to ask. *Journal of Consumer Psychology*, 19, 673-680. doi: 10.1016/j.jcps.2009.09.002
- Kedenberg, D. (1980). Modified Quality of Life Scale. *Quality of Life Scale: A preliminary analysis*, 11, 599-605. doi:10.1037/0735-7028.11.4.599
- Kolip, P., & Schmidt, B. (1999). Gender and health in adolescence. In E. Ziglio & V. Mangiaterra (Eds.), *Health policy for children and adolescents (HEPCA)*, (series No. 1, pp. 1-38). Copenhagen, Denmark: World Health Organization. Retrieved from <http://www.euro.who.int/document/e66082.pdf>
- Marsh, H. W. (2007). Application of confirmatory factor analysis and structural equation modeling in sport/exercise psychology. In G. Tenenbaum & R. C. Eklund (Eds.), *Handbook of sport psychology* (3rd ed., pp. 774-798). New York, NY: Wiley.
- Marsh, H. W., Ellis, L., Parada, L., Richards, G., & Heubeck, B. G. (2005). A short version of the Self Description Questionnaire II: Operationalizing criteria for short-form evaluation with new applications of confirmatory factor analyses. *Psychological Assessment*, 17, 81-102. doi:10.1037/1040-3590.17.1.81
- 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, 320-341. doi:10.1207/s15328007sem1103_2
- Marsh, H. W., Hau, K.-T., Balla, J. R., & Grayson, D. (1998). Is more ever too much? The number of indicators per factor in confirmatory factor analysis. *Multivariate Behavioral Research*, 33, 181-220. doi:10.1207/s15327906mbr3302_1
- Muthén, L. K. & Muthén, B. O. (1998-2012). *Mplus user's guide* (7th ed.). Los Angeles, CA: Authors.
- OECD. (2009a). *Doing better for children*. Retrieved from <http://www.oecd.org/els/social/childwellbeing>
- OECD. (2009b). *Measuring and fostering well-being and progress: The OECD roadmap*. Retrieved from <http://www.oecd.org/dataoecd/40/0/44005046.pdf>
- Petrie, T. A., Greenleaf, C., & Martin, S. (2010). Biopsychosocial and physical correlates of middle school boys' and girls' body satisfaction. *Sex Roles*, 63, 631-644. doi:10.1007/s11199-010-9872-5
- Pollard, E., & Davidson, L. (2001). Foundations of child well-being. *Action Research in Family and Early Childhood Monograph Series*. Retrieved from <http://unesdoc.unesco.org/images/0012/001246/124620Eo.pdf>
- Pollard, E., & Lee, P. (2003). Child well-being: A systematic review of the literature. *Social Indicators Research*, 61, 59-78. doi:10.1023/a:1021284215801
- Rasmussen, H. N., Scheier, M. F., & Greenhouse, J. B. (2009). Optimism and physical health: A meta-analytic review. *Annals of Behavioral Medicine*, 37, 239-256. doi:10.1007/s12160-009-9111-x
- Ravens-Sieberer, U., Görtler, E., & Bullinger, M. (2000). Subjektive Gesundheit und Gesundheitsverhalten von Kindern und Jugendlichen-Eine Befragung Hamburger Schüler im Rahmen der schulärztlichen Untersuchung [Subjective health and health behavior of children and adolescents: A survey of Hamburg students within the scope of school medical examination]. *Das Gesundheitswesen*, 62, 148-155. doi:10.1055/s-2000-10487
- Roberts, R. (2010). *Well-being from birth*. London, UK: Sage.
- Rogers, C. R. (1962). The interpersonal relationship: The core of guidance. *Harvard Educational Review*, 32(4), 416-429.
- Ryan, R. M., & Deci, E. L. (2000). Self-determination theory and the facilitation of intrinsic motivation, social development, and well-being. *American Psychologist*, 55, 68-78. doi:10.1037//0003-066x.55.1.68
- Ryff, C. D. (1989). Happiness is everything, or is it? Explorations on the meaning of psychological wellbeing. *Journal of Personality and Social Psychology*, 57, 1069-1081. doi:10.1037//0022-3514.57.6.1069
- Ryff, C. D. (1995). Psychological well-being in adult life. *Current Directions in Psychological Science*, 4, 99-104. doi:10.1111/1467-8721.ep10772395
- Scheier, M. F., & Carver, C. S. (1985). Optimism, coping, and health: Assessment and implications of generalized outcome expectancies. *Health Psychology*, 4, 219-247. doi:10.1037/0278-6133.4.3.219
- Scheier, M. F., & Carver, C. S. (1987). Dispositional optimism and physical well-being: The influence of generalized expectancies on health. *Journal of Personality*, 55, 169-210. doi:10.1111/j.1467-6494.1987.tb00434.x
- Scheier, M. F., & Carver, C. S. (1992). Effects of optimism on psychological and physical well-being: The influence of generalized outcome expectancies. *Health Psychology*, 16, 201-228. doi:10.1111/j.1467-6494.1987.tb00434.x

-
- Seligman, M. E. P. (2011). *Flourish: A visionary new understanding of happiness and well-being*. New York, NY: Free Press.
- Simeoni, M. C., Auquier, P., Antonietti, S., Sapin, C., & San Marco, J. L. (2000). Validation of a French health-related quality of life instrument for adolescents: The VSP-A. *Quality of Life Research*, 9, 393-403. doi:10.1023/a:1008957104322
- Stiglitz, J. E., Sen, A., & Fitoussi, J. (2009). *Report by the commission on the measurement of economic performance and social progress*. Retrieved from http://library.bsl.org.au/jspui/bitstream/1/1267/1/Measurement_of_economic_performance_and_social_progress.pdf
- Su, R., Tay, L., & Diener, E. (2014). The development and validation of the Comprehensive Inventory of Thriving (CIT) and the Brief Inventory of Thriving (BIT). *Applied Psychology: Health and Well-Being*, 6, 251-279. doi:10.1111/aphw.12027
- UNICEF. (2007). *Child poverty in perspective: An overview of child well-being in rich countries*. Firenze, Italy: UNICEF Innocenti Research Centre.
- Viet, C. T., & Ware, J. E. (1983). The structure of psychological distress and well-being in general populations. *Journal of Consulting and Clinical Psychology*, 51, 730-742. doi:10.1037/0022-006x.51.5.730
- Waterman, A. S. (1993). Two conceptions of happiness: Contrasts of personal expressiveness (eudaimonia) and hedonic enjoyment. *Journal of Personality and Social Psychology*, 64, 678-691. doi:10.1037/0022-3514.64.4.678
- Watson, D., Clark, L. A., & Tellegen, A. (1988). Development and validation of brief measures of positive and negative affect: The PANAS scales. *Journal of Personality and Social Psychology*, 54, 1063-1070. doi:10.1037//0022-3514.54.6.1063
- Wenger, N. K., Mattson, M. E., Furberg, C. D., & Elinson, J. (Eds.). (1984). *Assessment of quality of life in clinical trials of cardiovascular therapies*. New York, NY: Le Jacq.
- Zappulla, C., Pace, U., Cascio, V. L., Guzzo, G., & Huebner, E. S. (2014). Factor structure and convergent validity of the long and abbreviated versions of the Multidimensional Students' Life Satisfaction Scale in an Italian sample. *Social Indicators Research*, 118, 57-69. doi:10.1007/s11205-013-0418-4
-

APPENDIX

Comprehensive Inventory of Thriving for Children (English version between brackets)

Indica quanto sei d'accordo con ciascuna delle seguenti frasi, mettendo una crocetta sul numero che corrisponde alla tua scelta, sulla seguente scala: [Indicate how much you agree with each of the following statements, crossing the number corresponding to your choice, on this scale:]

1. *per niente d'accordo* [fully disagree];
2. *poco d'accordo* [partially agree];
3. *né d'accordo né in disaccordo* [neither agree nor disagree];
4. *abbastanza d'accordo* [mostly agree];
5. *molto d'accordo* [strongly agree].

Relationships	Support	Ci sono persone a cui posso chiedere aiuto quando ne ho bisogno [There are people I can depend on to help me]	1	2	3	4	5
		Ci sono persone che mi stanno vicino e mi incoraggiano [There are people who give me support and encouragement]	1	2	3	4	5
		Ci sono persone che mi considerano un bravo bambino [There are people who appreciate me as a person]	1	2	3	4	5
	Respect	Gli altri mi rispettano [People respect me]	1	2	3	4	5
		Gli altri si comportano bene con me [People are polite to me]	1	2	3	4	5
		Sono trattato con lo stesso rispetto degli altri [I am treated with the same amount of respect as others]	1	2	3	4	5
	Loneliness	Mi sento solo (*) [I feel lonely]	1	2	3	4	5
		Mi sento spesso lasciato in disparte (*) [Often I feel left out]	1	2	3	4	5
		Non c'è nessuno che mi capisca veramente (*) [There is no one I feel close to]	1	2	3	4	5
	Belonging	Sono affezionato al Paese in cui vivo [I feel a sense of belonging in my country]	1	2	3	4	5
		Sono affezionato al posto in cui vivo [I feel a sense of belonging in my state or province]	1	2	3	4	5
		Sono affezionato alla città in cui vivo [I feel a sense of belonging in my community]	1	2	3	4	5
Engagement		Riesco a concentrarmi molto nelle cose che faccio [I get fully absorbed in activities I do]	1	2	3	4	5
		Nella maggior parte delle cose che faccio mi sento pieno di energia [In most of the things I do, I feel energized]	1	2	3	4	5
		Mi sento molto attivo quando sono impegnato in una attività [I get excited when I work on something]	1	2	3	4	5

Appendix continues

Appendix (continued)

Mastery	Skills	Nella vita di tutti i giorni uso al massimo le mie capacità [I use my skills a lot in my everyday life]	1	2	3	4	5
		Riesco spesso a utilizzare le mie capacità [I frequently use my talents]	1	2	3	4	5
		Nella vita di tutti i giorni riesco a fare quello per cui io sono portato [I get to do what I am good at everyday]	1	2	3	4	5
	Learning	Ieri ho imparato qualcosa di nuovo [I learned something new yesterday]	1	2	3	4	5
		È importante per me imparare cose nuove [Learning new things is important to me]	1	2	3	4	5
		Imparo qualcosa di nuovo tutti i giorni [I always learn something every day]	1	2	3	4	5
	Self-worth	Quello che faccio è importante ed ha valore [What I do in life is valuable and worthwhile]	1	2	3	4	5
		Quello che faccio è utile agli altri [The things I do contribute to society]	1	2	3	4	5
		Quello che faccio è importante per gli altri [The work I do is important for other people]	1	2	3	4	5
Optimism		Sono sicuro che nella mia vita tutto andrà bene [I am optimistic about my future]	1	2	3	4	5
		Sono sicuro che la mia vita sarà bella [I have a positive outlook on life]	1	2	3	4	5
		Penso che nella mia vita mi accadranno più cose belle che brutte [I expect more good things in my life than bad]	1	2	3	4	5
Subjective well-being	Life satisfaction	In molte cose la mia vita è come la vorrei [In most ways my life is close to my ideal]	1	2	3	4	5
		Sono contento della mia vita [I am satisfied with my life]	1	2	3	4	5
		La mia vita va bene [My life is going well]	1	2	3	4	5
	Positive feelings	La maggior parte delle volte mi sento contento [I feel positive most of the time]	1	2	3	4	5
		La maggior parte delle volte mi sento felice [I feel happy most of the time]	1	2	3	4	5
		La maggior parte delle volte mi sento di buon umore [I feel good most of the time]	1	2	3	4	5
	Negative feelings	La maggior parte delle volte mi sento triste (*) [I feel negative most of the time]	1	2	3	4	5
		La maggior parte delle volte mi sento infelice (*) [I experience unhappy feelings most of the time]	1	2	3	4	5
		La maggior parte delle volte mi sento di cattivo umore (*) [I feel bad most of the time]	1	2	3	4	5

Note. (*) Reverse scored item.