

Psychometric properties of Ryff's Psychological Well-Being Scale in Argentina

Propiedades psicométricas de la Escala de Bienestar Psicológico de Ryff en Argentina

Propriedades psicométricas da Escala de Bem-Estar Psicológico de Ryff na Argentina

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Abstract: Aim: To test the Spanish-adapted version of Ryff's Psychological Well-Being Scale in Argentine population and analyze its internal consistency, validity evidence based on internal structure, and its relationship with other variables. Method: Two groups of participants were studied: one consisting of 3228 Argentine adults (general population) aged 20-83 years ($M = 42.21$; $SD = 13.17$), 81.9 % female, and another group of 153 university students aged 18-57 years ($M = 26.71$; $SD = 7.53$), 85 % female. Results: A confirmatory factor analysis revealed a good fit for Ryff's model, with appropriate factor loadings. Reliability was assessed using composite reliability, with results indicating good reliability across all dimensions. Correlations were analyzed with theoretically related variables, including anxiety, depression, and personality, revealing statistically significant correlations in the expected direction. Conclusion: This version of the instrument demonstrated a very good fit, good reliability, and previously described associations of the dimensions with variables such as anxiety, depression, and personality. This version is considered suitable for use in the Argentine population as a tool for studying psychological well-being from a eudaimonic perspective, both in research and clinical settings.

Keywords: psychological well-being; reliability; validity evidence; Argentina

Resumen: Objetivo: probar la versión adaptada al español de la Escala de Bienestar Psicológico de Ryff en población argentina y analizar su consistencia interna y evidencias de validez basadas en la estructura interna y en la relación con otras variables. Método: se trabajó con dos grupos de participantes: uno de 3228 adultos argentinos (población general), con edades comprendidas entre los 20-83 años ($M = 42.21$; $DE = 13.17$). 81.9 % de género femenino. El otro grupo, de 153 estudiantes universitarios, edades entre 18-57 años ($M = 26.71$; $DE = 7.53$), 85 % de género femenino. Resultados: A través de un análisis factorial confirmatorio pudo observarse un buen ajuste del modelo de Ryff, con cargas factoriales apropiadas. La confiabilidad se analizó mediante fiabilidad compuesta. Los resultados indicaron una buena confiabilidad para todas las dimensiones. Se analizaron las correlaciones con variables teóricamente relacionadas: ansiedad, depresión y personalidad. Se observaron correlaciones estadísticamente significativas en las variables bajo análisis, en el sentido esperado. Conclusión: esta versión del instrumento mostró un ajuste muy bueno, buena confiabilidad y asociaciones descriptas previamente de las dimensiones con variables de ansiedad, depresión y personalidad. Se considera que esta versión es adecuada para ser utilizada en población argentina como herramienta para el estudio del bienestar psicológico desde el enfoque eudaimónico, tanto en el ámbito de la investigación como la clínica.

Palabras clave: bienestar psicológico; confiabilidad; evidencias de validez; Argentina

Resumo: Objetivo: Testar a versão adaptada ao espanhol da Escala De Bem-Estar Psicológico de Ryff em uma população argentina e analisar sua consistência interna e evidências de validade com base na estrutura interna e na relação com outras variáveis. Método: Foram estudados dois grupos de participantes: um de 3228 adultos argentinos (população geral) com idades entre 20 e 83 anos ($M = 42,21$; $DP = 13,17$), 81,9 % do gênero feminino; e outro grupo, de 153 estudantes universitários, com idades entre 18 e 57 anos ($M = 26,71$; $DP = 7,53$), 85 % do gênero feminino. Resultados: Por meio de uma análise fatorial confirmatória, pode-se observar um bom ajuste ao modelo de Ryff, com cargas fatoriais apropriadas. A confiabilidade foi avaliada por meio da confiabilidade composta. Os resultados indicaram uma boa confiabilidade para todas as dimensões. Foram analisadas correlações com variáveis teoricamente relacionadas, incluindo ansiedade, depressão e personalidade. Foram observadas correlações estatisticamente significativas nas variáveis analisadas, na direção esperada. Conclusão: Esta versão do instrumento demonstrou um ajuste muito bom, boa confiabilidade e associações previamente descritas das dimensões com variáveis de ansiedade, depressão e personalidade. Esta versão é considerada adequada para uso na população argentina como ferramenta para o estudo do bem-estar psicológico a partir de uma perspectiva eudemônica, tanto em pesquisas quanto em contextos clínicos.

Palavras-chave: bem-estar psicológico; confiabilidade; evidências de validade; Argentina

Studying psychological well-being has represented a paradigm shift in psychology, moving the focus from psychopathology to a salutogenic approach (Castro-Solano, 2009; Hewis, 2023). Various theories have competed to explain this construct, each designing specific instruments to evaluate its functioning. Perhaps the most contrasting approaches are the situational models and the personological models of well-being. The former suggest that life satisfaction arises from the accumulation of happy moments throughout one's life course, meaning that satisfaction depends on the previously experienced happy moments (Castro-Solano, 2009; Diener et al., 1991). On the other hand, well-being understood from the perspective of personality posits that it is the result of a stable personality and temperament-related aspects (Anglim et al., 2020; Castro-Solano, 2009). However, the most widely developed perspectives remain the hedonic and eudaimonic approaches (Ryan & Deci, 2001).

The hedonic perspective views well-being as fundamentally linked to happiness and pleasure (Diener et al., 1998; Huta, 2016; Kahneman et al., 1999; Kubovy, 1999). In contrast, the eudaimonic tradition considers well-being to be more than just the pursuit of happiness; it involves the realization and development of human potential or true human nature (Fromm, 1981; Ryff & Singer, 2000; Waterman, 1993). As psychological constructs, each of these traditions has led to the development of distinct theoretical models and evaluation instruments. Subjective Well-Being is the primary representative of the hedonic tradition, while the construct of Psychological Well-Being represents the eudaimonic tradition (Díaz et al., 2006; Ng, 2017).

Currently, within the hedonic tradition, the most commonly used instruments for measuring this construct involve a tripartite structure (Ryff et al., 2021) composed of life satisfaction, positive affect, and negative affect. Life satisfaction is typically evaluated by assessing general satisfaction with life, sometimes accompanied by domain-specific evaluations (Lapuente et al., 2018). It is considered a lasting and long-term aspect of well-being. Positive affect is assessed through frequency indices of how joyful, good-humored, happy, calm and peaceful, or full of life a person feels. Recently, emotions such as interest, engagement, and trust have also been considered (Hefferon et al., 2017). Negative affect, on the other hand, relates to feelings of hopelessness, extreme sadness, nervousness, restlessness, excessive effort, and lack of personal worth.

Within the eudaimonic perspective, Ryff (1989; Ryff & Keyes, 1995) proposed a multidimensional model of well-being. This integration led to six key dimensions that fundamentally refer to well-being as a challenge to prosperity. Each dimension of psychological well-being, therefore, articulates different challenges that individuals encounter as they strive to function positively. People attempt to feel good about themselves while being aware of their own limitations (self-acceptance). They also seek to develop and maintain warm and trusting interpersonal relationships (positive relations with others) and to shape their environment to meet their personal needs and desires (environmental mastery). In maintaining their individuality across various social contexts, they also seek a sense of self-determination and personal authority (autonomy). Additionally, they make a vital effort to find meaning in their endeavors and challenges (purpose in life). Finally, they strive to maximize their talents and personal capacities (personal growth), which is central to this model of well-

being and closely aligns with the Aristotelian conception of personal excellence as the realization of one's unique talents and capacities (Huppert, 2009).

Ryff's Psychological Well-Being Scale has undergone numerous variations in its composition, always respecting the six theoretical factors that constitute it. Initially, it was constructed with 20 items for each of the six dimensions, totaling 120 items (Ryff, 1989). Other shorter versions were developed, with 84 items (Ryff et al., 1994), 42 items (Morozink et al., 2010), and 21 items (Ryff & Keyes, 1995). These versions have reported reliability ranging from low to excellent, which continues to fuel debate about the instrument's length and factor structure (Ryff, 2014). Other psychometric approaches to well-being have involved the use of a single measure (see review by Dominguez-Lara & Navarro-Loli, 2018). Studies have reported a single second-order factor equivalent to "well-being" (van Dierendonck, 2004). Additionally, other studies have correlated Ryff's questionnaire with a general well-being measure equivalent to the sum of all the scales' scores (Hopp et al., 2011; Mazlomi Barm Sabz et al., 2021; Souri & Hasanirad, 2011). A reduced version of the scale has also been proposed with a single well-being construct or factor, although composed of different facets (Dominguez-Lara et al., 2019).

Beyond its psychometric properties, this instrument has been widely used in association with both demographic and psychological variables (Ryff, 2014). Recently, Ryff's Psychological Well-Being Scale has been a key instrument for gathering information in the context of the COVID-19 pandemic, becoming the most used tool in various studies worldwide. The scale has been employed in general populations (Fernández-Abascal & Martín-Díaz, 2021; Luis et al., 2021), as well as in clinical populations, such as individuals with eating disorders (Chan & Chiu, 2022), intellectual disabilities (van Herwaarden et al., 2022), or mental disorders (Bloch et al., 2022). Studies have been conducted both cross-sectionally (Chan et al., 2022) and longitudinally (Fernández-Abascal & Martín-Díaz, 2021). Furthermore, research has been carried out with various population groups, such as university students (Tan et al., 2021), pregnant women (Yousefi-Afrashteh & Masoumi, 2021), and healthcare students or workers (Chan et al., 2022; Mamani-Benito et al., 2022), among others. The widespread use of this scale underscores the importance of understanding its psychometric properties in the Argentine context, as this will not only enhance the rigor of research designs but also enable comparisons based on demographic criteria or the specificities of certain population groups.

Given the above, this study aimed to validate the Spanish-adapted version (Díaz et al., 2006) of Ryff's Psychological Well-Being Scale in the Argentine population and to examine its psychometric properties, including internal consistency and validity evidence based on internal structure and relationships with other variables.

Materials and Methods

Participants

In this study, two samples were utilized. Both samples were non-random and employed snowball sampling methods (Heckathorn, 2011; Watters & Biernacki, 1989). The first group consisted of 3228 Argentine adults from the general population, aged between 20 and 83 years ($M = 42.21$; $SD = 13.17$). Of these participants, 81.9% identified as female. Regarding educational level, 4.2% reported having completed secondary education, 28.5% had incomplete tertiary/university studies, and 66.4% had completed tertiary/university education. Additionally, 153 university students, aged between 18 and 57 years ($M = 26.71$; $SD = 7.53$), participated in the study. Of these, 85% ($n = 130$) identified as female, and 15% ($n = 23$) identified as male. Participants indicated the educational level of the primary economic contributor in their family as follows: 1.3% had completed primary education ($n = 2$); 5.9% had incomplete secondary education ($n = 9$); 15.7% had completed secondary education ($n = 24$); 41.2% had incomplete tertiary or university education ($n = 63$); and 33.3% had completed university education ($n = 51$). Data for four participants were not available. The first group was administered the Ryff Scale along with depression and state-trait anxiety tests, while the second group was given a personality questionnaire.

Instruments

Ryff's Psychological Well-Being Scale (Ryff, 1989). The Spanish-adapted version proposed by Díaz et al. (2006) was used. This instrument consists of a total of 29 items, with a Likert-type response format, ranging from 1 (strongly disagree) to 6 (strongly agree). The total scale is divided into six

subscales: self-acceptance (4 items); positive relations with others (5 items); autonomy (6 items); environmental mastery (5 items); purpose in life (5 items); and personal growth (4 items). The Spanish adaptation has shown adequate psychometric properties in Spain, with Cronbach's alpha internal consistency for the subscales ranging from .70 to .84 (Díaz et al., 2006). The 29-item Spanish adaptation was chosen because, despite having fewer items, it maintains the psychometric properties of the original instrument.

State-Trait Anxiety Inventory (STAI; Spielberger et al., 1970), Argentine version (Leibovich de Figueroa, 1991). This self-report instrument consists of 40 items divided into two subscales: one for trait anxiety (as a stable condition of anxiety) and one for state anxiety (where anxiety is understood as transitory). Each dimension comprises 20 items scored on a Likert scale ranging from 0 (not at all) to 4 (very much). In the Spanish population, this instrument demonstrated adequate consistency, with Cronbach's alpha values ranging from .84 to .93 (Guillén-Riquelme & Buéla-Casal, 2011; Leibovich de Figueroa, 1991; Spielberger et al., 1999). In this study, both the state anxiety scale (Cronbach's $\alpha = .92$) and the trait anxiety scale (Cronbach's $\alpha = .88$) demonstrated good reliability.

Beck Depression Inventory-II (BDI-II; Beck et al., 1996), Argentine adaptation (Brenlla & Rodríguez, 2006). This self-report questionnaire assesses the presence and severity of depressive symptoms. It consists of 21 items that indicate symptoms such as crying, sadness, etc. The response options indicate increasing levels of symptom severity. This inventory is one of the most widely used for evaluating depressive symptomatology and has shown adequate internal consistency indices in various adaptations and populations (e.g., Beltrán et al., 2012; Gomes-Oliveira et al., 2012; Sanz & Vázquez, 2011). In this study, Cronbach's α was .91.

Adjective List for Personality Evaluation (AEP; Ledesma et al., 2011; Sánchez & Ledesma, 2007, 2013). This self-administered instrument consists of 67 trait-descriptive adjectives, based on Costa and McCrae's Five-Factor Model. This instrument was chosen due to the robustness of the theory on which it is based, and its shorter length compared to other personality assessment instruments (e.g., Big Five Questionnaire, Bermúdez, 1995; TEA Personality Test, Corral-Gregorio et al., 2009), requiring approximately 10 to 15 minutes to complete. Moreover, it was developed in the Argentine context and validated in a large sample (Agreeableness: α between .75 and .84; Neuroticism: α between .73 and .85; Conscientiousness: α between .73 and .80; Extraversion: α between .79 and .85; Openness to Experience: α between .72 and .77; Ledesma et al., 2011; Sánchez & Ledesma, 2007). In the AEP, participants respond to each item by indicating how well the adjective describes them. The response format is Likert-type, ranging from 1 (does not describe me at all) to 5 (describes me perfectly). Each factor (Agreeableness/Antagonism, Conscientiousness/Irresponsibility, Extraversion/Introversion, Neuroticism/Emotional Stability, and Openness to Experience/Closed to Experience) provides a value obtained from the average of the adjectives corresponding to each dimension, with items being reverse-coded where necessary. This results in a value between 1 and 5 for each scale, with a higher score indicating a greater presence of the evaluated trait.

Procedure

Although the Spanish version of the instrument was used, a small pilot study was conducted with 10 university students to administer the instrument and an open-ended survey regarding the items to assess whether the words or expressions used were comprehensible. Given the familiarity of the terms with the Argentine population, no changes were made to the instrument.

This study was approved by the Bioethics Committee of the University of Mar del Plata. All procedures followed were in accordance with the recommendations of the Declaration of Helsinki and the American Psychological Association (2010). Participation in the study was voluntary, and digital informed consent was required. The survey was made accessible through Google Forms and disseminated via social media platforms. Access links were shared on Facebook, Instagram, X, and WhatsApp. Official channels of the institution where the study was based were used, and the survey was also shared on official sites associated with scientific institutions in the field of psychology and related disciplines. To prevent duplicate submissions, the form was set to allow only one response per user. Participants were encouraged to share the survey with their contacts and acquaintances.

Data Analysis

The data were systematized and entered into a database. Items formulated in reverse were recoded. To analyze item-total correlations, Spearman's rho was used due to some variables not following a normal distribution. For evaluating evidence based on internal structure, Confirmatory Factor Analysis (CFA) was performed using the Lisrel program (Scientific Software International, 2006). The estimation method used was Unweighted Least Squares (ULS), one of the most recommended methods when working with ordinal variables, especially with a large number of variables (Flora et al., 2012; Lloret-Segura et al., 2014). Model fit was assessed using the indices NFI, CFI, GFI, and AGFI (cutoff $>.90$), as well as RMSEA (cutoff $<.08$; 90% confidence intervals) and SRMR (cutoff $<.05$) as measures of error (Bentler, 1990; Bentler & Bonett, 1980; Hu & Bentler, 1998). Composite reliability $[(CR^{\wedge})]$; Bacon et al., 1995; Hair et al., 1995) was estimated, referring to the total amount of variance in the true scores of the items relative to the total variance of the scale scores (Brunner & Süß, 2005). Omega for the dimensions was also calculated. Additionally, factor correlations were analyzed using Pearson's r correlation coefficient (effect sizes for correlations were considered with Cohen's criteria, 1988: $r = .10$, $r = .30$, and $r = .50$ were considered small, moderate, and large effect sizes, respectively). Finally, correlations with theoretically related variables—anxiety, depression, and personality—were analyzed.

Results

Confirmatory Factor Analysis

First, descriptive statistics for the items and item-total correlations were examined, revealing statistically significant correlations in all cases. The correlations ranged from .22 to .78 (rho) (Table 1).

Table 1

Descriptive Statistics of the Items on the Ryff Psychological Well-Being Scale by Díaz et al. (2006)

	<i>M</i>	<i>SD</i>	Asymmetry	Kurtosis	Item-Total Correlation
Item 1	4.52	1.20	-1.06	0.68	.63**
Item 2	2.82	1.65	0.41	-1.14	-.54**
Item 3	4.46	1.41	-0.83	-0.16	.47**
Item 4	2.61	1.56	0.54	-1.00	-.52**
Item 5	2.79	1.59	0.42	-1.08	-.74**
Item 6	4.74	1.28	-1.00	0.40	.66**
Item 7	4.40	1.32	-0.76	-0.14	.78**
Item 8	2.43	1.48	0.80	-0.48	-.55**
Item 9	3.05	1.59	0.16	-1.22	-.51**
Item 10	4.58	1.30	-1.06	0.63	.66**
Item 11	4.69	1.21	-1.02	0.71	.70**
Item 12	4.85	1.17	-1.21	1.43	.52**
Item 13	3.17	1.50	0.05	-1.10	-.22**
Item 14	5.01	0.99	-1.32	2.38	.37**
Item 15	4.62	1.20	-1.09	0.90	.73**
Item 16	4.61	1.21	-0.98	0.61	.72**
Item 17	4.56	1.06	-0.99	1.10	.66**
Item 18	4.82	1.03	-1.16	1.71	.55**
Item 19	3.42	1.49	-0.11	-1.03	-.60**
Item 20	4.33	1.33	-0.82	0.01	.68**
Item 21	5.23	0.90	-1.35	2.46	.48**
Item 22	2.53	1.55	0.69	-0.77	-.51**
Item 23	2.81	1.53	0.47	-0.92	-.44**
Item 24	4.80	1.10	-1.14	1.34	.75**
Item 25	5.16	1.03	-1.57	2.87	.54**
Item 26	2.53	1.63	0.85	-0.58	-.40**
Item 27	5.01	1.00	-1.25	2.00	.60**
Item 28	5.18	1.00	-1.52	2.85	.55**
Item 29	4.74	1.18	-0.91	0.49	.65**

* $p < .05$; ** $p < .01$

The first model tested was the one suggested by the original version of the instrument, namely, six interrelated factors. The model fit is presented in Table 2, and the summary graph of the model is shown in Figure 1. The model demonstrated a good fit to the data, with appropriate factor loadings. Only one factor loading was below .30 (i.e., 22 points) for item 13. Nevertheless, this item was retained due to its content validity and the overall excellent fit of the model.

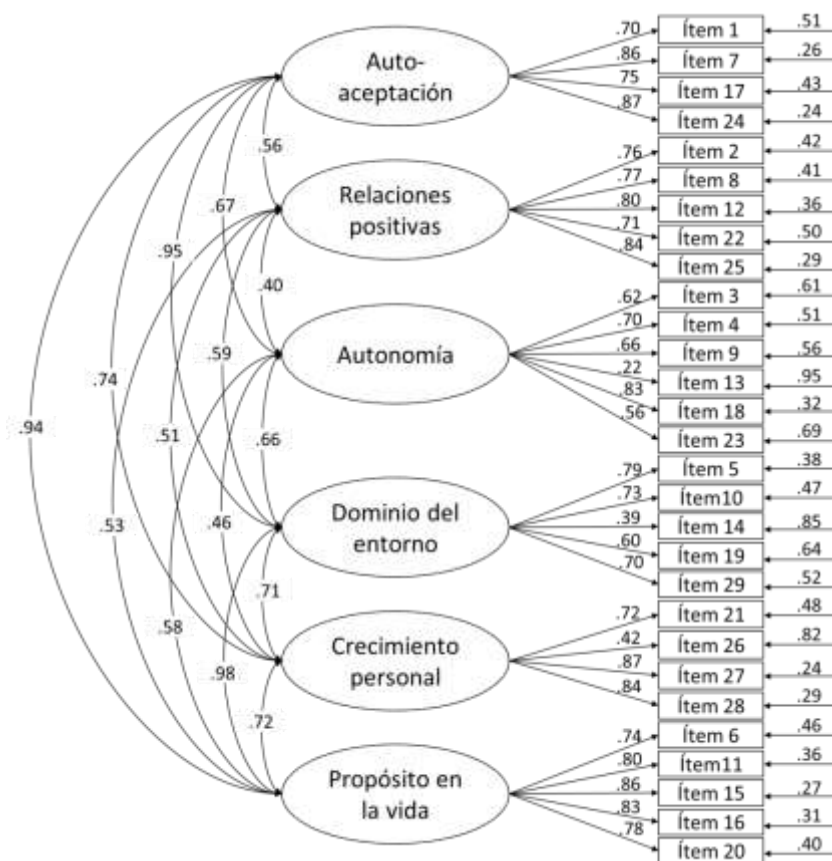
Table 2

Fit of Models 1 and 2 for the Ryff Psychological Well-Being Scale (1989)

	NFI	CFI	GFI	AGFI	RMSEA [IC 90%]	SRMR
Model 1: six interrelated factors	.978	.980	.988	.986	.060 [.058; .061]	.046
Model 2: six first-order factors and one second-order general factor	.977	.978	.987	.985	.061 [.059; .062]	.048

Figure 1

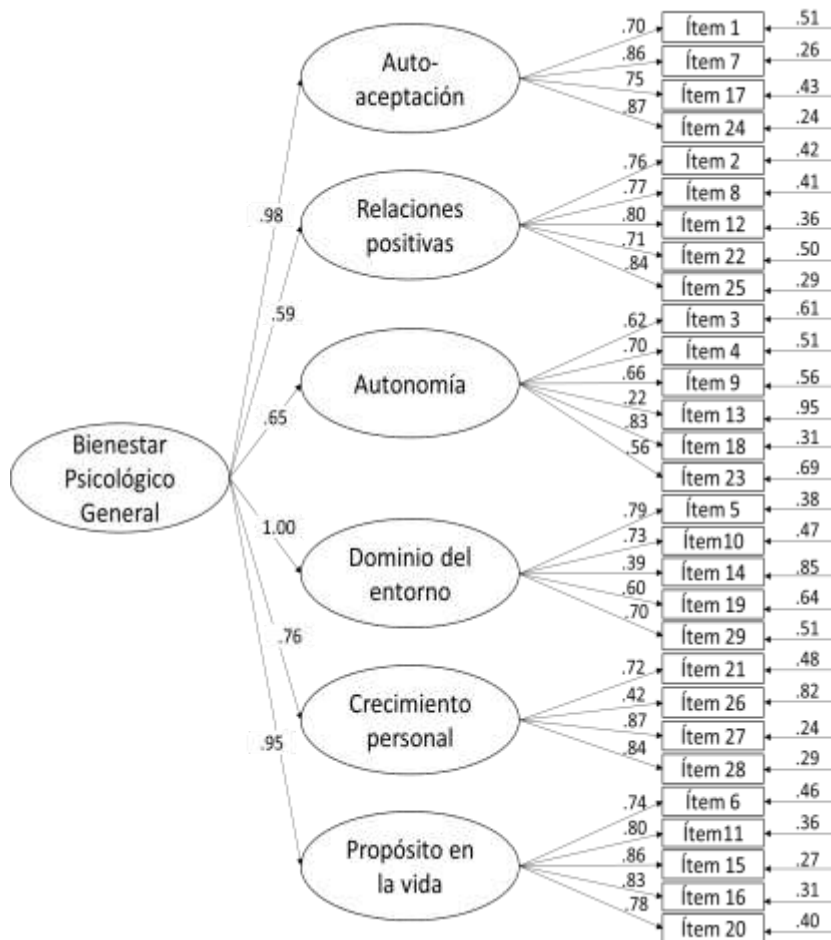
Summary of Model 1: Six-Factor Model for the Ryff Psychological Well-Being Scale (1989)



Considering the unidimensional use of the scale occasionally reported in the literature (van Dierendonck, 2004), a second Confirmatory Factor Analysis (CFA) was conducted to examine the fit of a model with six first-order factors and one second-order general factor. The fit indices for this second model are also presented in Table 2, with a summary shown in Figure 2. The results indicate that this model also provides an excellent fit, similar to the six interrelated factors model, supporting the unidimensional use of the instrument.

Figure 2

Summary of Model 2: Six First-Order Factors and One Second-Order General Factor for the Ryff Psychological Well-Being Scale (1989)



Reliability

The reliability of the scale's dimensions was assessed using composite reliability. The results indicated good reliability for all dimensions (Self-Acceptance .88; Positive Relationships .88; Autonomy .78; Environmental Mastery .78; Personal Growth .82; Purpose in Life .90). Additionally, reliability was estimated using the Omega coefficient. The results were similar for all dimensions, except for Personal Growth, which showed a significant decrease (Self-Acceptance .84; Positive Relationships .84; Autonomy .75; Environmental Mastery .76; Personal Growth .67; Purpose in Life .87).

Evidence Based on Relationships with Other Variables: Anxiety, Depression, Personality

Evidence based on relationships with other variables was analyzed through correlations with theoretically related variables, namely depression symptoms, state anxiety, trait anxiety, and personality traits. Theory and empirical literature suggest that psychological well-being is inversely related to depression (Franzen et al., 2021; Rossi et al., 2019) and anxiety (Jiménez-Puig et al., 2021; Peñacoba et al., 2020; Yüksel & Bahadır-Yilmaz, 2019); and that certain personality traits, such as extraversion and emotional stability, are positively correlated with well-being (Anglim et al., 2020; Joshanloo, 2023).

The results are presented in Table 3, along with the descriptive statistics for each variable. Statistically significant correlations were observed between most of the variables under analysis, all in the expected direction. Higher levels of psychological well-being were inversely associated with lower

levels of anxiety and depressive symptoms. Conversely, psychological well-being was directly associated with the traits of Extraversion, Agreeableness, Conscientiousness, and Openness to Experience. Higher levels of Neuroticism were associated with lower levels of well-being.

Table 3

Descriptive statistics and correlations between psychological well-being, anxiety, depressive symptoms, and personality traits. Sample size (n) is indicated in parentheses

	1	2	3	4	5	6	7	8	9	10	11	12	13	14
1. Self-Acceptance														
2. Positive Relationships	.49** (560)													
3. Autonomy	.44** (560)	.38** (560)												
4. Environmental Mastery	.63** (560)	.50** (560)	.50** (560)											
5. Personal Growth	.61** (560)	.33** (560)	.24** (560)	.39** (560)										
6. Life Satisfaction	.84** (560)	.37** (560)	.35** (560)	.61** (560)	.55** (560)									
7. Extraversion	.45** (153)	.48** (153)	.30** (153)	.44** (153)	.32** (153)	.39** (153)								
8. Agreeableness	.51** (153)	.33** (153)	.12 (153)	.29** (153)	.52** (153)	.57** (153)	.30** (153)							
9. Conscientiousness	.41** (153)	.20** (153)	.26** (153)	.44** (153)	.35** (153)	.55** (153)	.32** (153)	.36** (153)						
10. Neuroticism	-.28** (153)	-.38** (153)	-.48** (153)	-.40** (153)	.02 (153)	-.16* (153)	-.32** (153)	-.01 (153)	-.25** (153)					
11. Openness to experience	.23** (153)	.13 (153)	.31** (153)	.15* (153)	.26** (153)	.18* (153)	.34** (153)	.15* (153)	.01 (153)	-.06 (153)				
12. State-Anxiety	-.40** (407)	-.31** (407)	-.28** (407)	-.43** (407)	-.21** (407)	-.32** (407)	-.25** (153)	-.12 (153)	-.27** (153)	.57** (153)	-.28** (153)			
13. Trait-Anxiety	-.53** (407)	-.50** (407)	-.51** (407)	-.55** (407)	-.24** (407)	-.42** (407)	-.48** (153)	-.19** (153)	-.34** (153)	.73** (153)	-.17* (153)	.66** (407)		
14. Depression	-.49** (407)	-.44** (407)	-.25** (407)	-.48** (407)	-.31** (407)	-.41** (407)	-.33** (153)	-.11 (153)	-.32** (153)	.46** (153)	-.12 (153)	.63** (407)	.66** (407)	
<i>M</i>	4.60	4.90	4.40	4.74	5.22	4.74	3.59	3.98	3.69	2.77	3.42	15.7 3	20.1 0	8.75
<i>SD</i>	1.02	1.11	0.94	0.80	0.81	0.98	0.76	0.58	0.65	0.64	0.65	8.66	9.41	8.49

* $p < .05$; ** $p < .01$

Discussion

The objective of this study was to validate the Spanish-adapted version (Díaz et al., 2006) of Ryff's Psychological Well-Being Scale (1989) in the Argentine population and to examine its psychometric properties (internal consistency, factorial validity, and criterion validity). The choice of the version proposed by Díaz et al. (2006) was based on its good fit in Spanish-speaking populations, suggesting a higher adaptation to the cultural, linguistic, and contextual characteristics of this population. This adaptation minimizes the risks of biases derived from cultural or linguistic differences and ensures consistent and relevant understanding of the items by the participants. Cultural adaptation is crucial as the perception of well-being can vary significantly between different cultures, and a non-adapted scale may not accurately reflect the experiences and feelings of the individuals being assessed (Gutiérrez-Carmona & Urzúa, 2019).

In this study, the scales demonstrated good reliability across all dimensions of the instrument. This supports the robustness and internal consistency of the adaptation, suggesting that the Spanish version of the scale is a reliable tool for measuring psychological well-being in the Argentine population.

Regarding evidence of validity based on internal structure, confirmatory factor analyses were conducted considering two models. The first model, with six interrelated factors, showed a good fit, while the second model, with six first-order factors and one general second-order factor, yielded similar results. These findings, consistent with previous studies (Gallagher et al., 2009; Ryff & Singer, 2006; Sirigatti et al., 2009), support the original model proposed by Ryff (1989). The confirmation of these models is crucial as it validates the underlying theoretical structure of the instrument, demonstrating that the different domains of psychological well-being are conceptually distinct yet interrelated.

Additionally, the results are also compatible with van Dierendonck's (2004) model, which underpins Díaz et al.'s (2006) adaptation. Although one item (item 13) had a factorial loading below the expected level, it was retained due to its theoretical relevance and contribution to content validity. Moreover, the overall fit of the model was very good (Bentler, 1990), suggesting that the inclusion of the item does not negatively affect the quality of the model.

In terms of evidence of validity based on relationships with other variables, correlations were found that support theoretical postulates related to psychological well-being as a concept, and with previous studies on the topic. For depressive symptoms, the widely accepted idea that higher well-being is associated with lower depressive symptomatology was again confirmed (Barkham et al., 2019; Evans et al., 2021; Keyes, 2005; Ryff, 2014). This finding aligns with the notion that psychological well-being acts as a protective factor against depression, possibly mediated by mechanisms such as resilience and social support (Rodríguez-Chávez & Cabrera-Porras, 2023). Similar results were found regarding anxiety, as described in the literature (Barkham et al., 2019; Evans et al., 2021; Maund et al., 2019; Ryff, 2014). The inverse relationship between well-being and anxiety reinforces the idea that psychological well-being may buffer the impact of stressors (Huppert, 2009; Park et al., 2023). These results add evidence to the discussions on the clinical utility of the well-being construct in psychotherapy and mental health (Güleç-Keskin & Gülirmak, 2022; Tomba & Bech, 2012; Tomba et al., 2010). Regarding personality, it was observed that psychological well-being was directly associated with traits of extraversion, agreeableness, conscientiousness, and openness to experience. Similar results were found in other studies, where openness to experience was related to personal growth, and agreeableness was associated with positive relationships with others (Joshani & Rastegar, 2007; Ryff, 2014; Schmutte & Ryff, 1997). In contrast, higher levels of neuroticism were associated with lower levels of well-being, as reported by Costa and McCrae (1980) and Turel et al. (2018), in the case of female participants. As Ryff (2014) suggests, neuroticism was related to environmental mastery, life satisfaction, and self-acceptance.

This study was not without limitations. Firstly, although the fit of the instrument was very good, one of its items had a low factorial loading (item 13). In this regard, it was retained based on content validity. The retention of items with low factorial loading can be justified if these items are crucial for capturing important aspects of the measured construct (DeVellis, 2016). Secondly, despite the large sample size, it presents certain demographic characteristics that are not representative of the population, especially in terms of educational level, where there is a high proportion of individuals with ongoing or completed university/tertiary education. Future studies should expand the sample to include individuals with lower educational levels to assess whether there are changes in the structure of the instrument in this population. Including a representative sample will also allow for examining the validity and reliability of the instrument across different demographic subgroups (Rios & Wells, 2014). Finally, other instruments that estimate the well-being construct were not included. Future work should compare Ryff's questionnaire with other measures of psychological well-being and subjective well-being.

The version of the instrument proposed by Díaz et al. (2006) demonstrated very good fit and robust reliability. The dimensions of the instrument showed significant associations with anxiety, depression, and personality variables, consistent with existing literature. These results underscore the relevance and applicability of the instrument in the Argentine population, highlighting its utility for assessing psychological well-being from an eudaimonic perspective. In research, this instrument can contribute to a deeper understanding of the factors that promote well-being. Additionally, it may facilitate cross-cultural comparisons that enrich the global understanding of psychological well-being (Ryff, 2018). In clinical practice, its use may enable more precise and effective interventions aimed at improving individuals' quality of life (Park et al., 2023). The validation of this scale in the Argentine population opens new possibilities for its use in epidemiological studies and the assessment of psychosocial interventions (Keyes & Annas, 2009). Therefore, its implementation is recommended for both future studies and therapeutic contexts to advance the knowledge and promotion of psychological well-being.

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