

Well-being: a theoretical and empirical tour towards positive results

*Bienestar: un recorrido teórico y empírico hacia
resultados positivos mayores*

*Bem-estar: um passeio teórico e empírico
para resultados mais positivos*

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ABSTRACT: The aim of this paper is to carry out a theoretical and empirical analysis of well-being. First, we will introduce a conceptualization of its different notions thoroughly explaining its components. Then, we will show some variables that are positively related to well-being. We will focus on works that explore well-being in old age and also in quantitative and qualitative elderly and other age group studies performed in Mar del Plata, Argentina. The intention of this work is to strengthen the look on the positive aspects of the subject, deconstruct negative stereotypes about aging and encourage the developing of interventions that promote people's well-being, especially in old age.

Keywords: Well-being; Aging; Positive Psychology.

RESUMEN: El presente trabajo tiene como propósito realizar un análisis teórico y empírico del bienestar. En primer lugar se efectuará una conceptualización del mismo a través de un recorrido por sus diferentes nociones explicando los componentes que lo integran. Luego se expondrán investigaciones realizadas sobre algunas variables que se relacionan positivamente con el bienestar. Se focalizara en los trabajos que indagan el bienestar en la vejez y posteriormente a partir de estudios cuantitativos y cualitativos realizados en la ciudad de Mar del Plata, se expondrán los resultados arribados del bienestar en adultos mayores y otros grupos etarios. La intención de este trabajo es fortalecer la mirada sobre aspectos positivos del sujeto, deconstruir estereotipos negativos sobre la vejez y generar la inquietud de desarrollar intervenciones que promuevan el bienestar de las personas, principalmente en su vejez.

Palabras clave: Bienestar; Envejecimiento; Psicología Positiva.

RESUMO: O presente trabalho tem como objetivo fazer uma análise teórica e empírica do bem-estar. Primeiro, uma conceituação do que é feito através de um passeio pelas suas diferentes noções que explicam os componentes que o compõem. Após pesquisa sobre algumas variáveis que estão positivamente relacionadas com o bem-estar, estas serão expostas. Serão focados trabalhos que investigam o bem-estar na velhice e, posteriormente, a partir de estudos quantitativos e qualitativos na cidade de Mar del Plata (Argentina), que obtiveram resultados de bem-estar nos grupos etários idosos. A intenção deste trabalho é fortalecer o olhar sobre os aspectos positivos do assunto, desconstruir estereótipos negativos sobre o envelhecimento e incentivar a preocupação quanto a desenvolver intervenções que promovam o bem-estar das pessoas, especialmente na velhice.

Palavras-chave: Bem-Estar; Envelhecimento; Psicologia Positiva.

Introduction

Well-being is a subject that has always generated interest throughout the history of humankind. Thinking on what make people happy or make them feel good, and why some

people succeed and others do not, has been the subject of extensive philosophical and sociological debates. In the psychology field, the study of well-being is more recent.

Traditionally, the theories and models were oriented to addressing pathological processes that cause pain or discomfort in the subject, rather than identifying potential human resources related to positive processes or aspects.

With the birth of Positive Psychology (Seligman, & Csikszentmihalyi, 2000) the production of new concepts to understand the human being as a strong, active and able to withstand adversity begins. From this approach, research in psychology begins to focus on the mechanisms and processes underlying the strengths and virtues of human beings and the promotion of well-being (González, 2004).

Understanding and defining what well-being means has not been an easy task for researchers. There are two theoretically related but empirically distinct traditional concepts for this construct (Vielma Rangel, & Alonso, 2010), as well as several theoretical models and different methodologies designed for its measurement. Today, well-being is one of the most important topics studied in general psychology and the social sciences due to its close relationship with human health.

While the study of well-being is essential for all people, it is central for the elderly as they are immersed in a vital time with multiple levels of biological, social and psychological changes that sometimes can lead to critical situations.

The aim of this paper is to analyze the well-being construct. First, we will conceptualize well-being going through its different notions and components. Later, we will address the two traditional concepts and different studies, which inquire into the factors that affect well-being. Finally, we will introduce some outcomes of research aimed at studying well-being in older adults.

The Well-being concept

The scientific study of well-being is a relatively recent construct, but as a subject of philosophical reflection, it goes back at least to the Greek philosophers. For them, the highest good or the good life was a virtue. Aristotle speaks of the "Highest Good" and "Happiness Summit" as the human aim or purpose (Coronel de Pace, 2012).

He holds that happiness is the sole end and it has sufficient value in itself; an end goal, meaning everything is oriented toward it, and sufficient because once achieved, one no longer needs or wishes anything else.

The "Care of the Soul" is present also in the legacy of Plato, Confucius and Seneca, among others; and assumptions relating to well-being were developed in the writings derived from Christianity, Buddhism, Hinduism and Taoism, giving way to the research of happiness since then as a matter of worldwide general interest (Vielma Ranger, & Alonso, 2010)

Sociology approached this construct based on the concept of quality of life. In the 60's, the life quality concept was first used in the scientific field referring to the environment and living conditions of people (Alfonso Acosta, 2015). Subsequently, the growing interest in learning about human well-being and the concern for the consequences of industrialization in society highlighted the need to measure this reality through objective data. Therefore, the social sciences started to do research on indicators that could facilitate the measurement of population's well-being data and evaluation (Acosta, 2015).

Well-being was thought to be an objective variable that was measured by the physical and/or economic conditions of the subject. However, it became evident that it was also a subjective construct and it mainly depended on the person's own life perception. Sociologists found that improvements in the material conditions in people's life, either in health, education, or income did not increase the levels of happiness (Castro Solano, 2000; Veehoven, 1995)

Psychology, as aforementioned, focused mainly on pathological aspects related to illness and discomfort (Casullo, & Castro Solano 2000; Veehoven, 1988, 1991) neglecting the positive processes and benefits, such as the effect that well-being and happiness could have on personal psychological functioning.

According to Liberalesso Neri (2002), psychologists not only ignored the issue but also were dedicated to exploring human unhappiness. The emphasis of psychology on unhappiness resulted in a model of the human being, which did not explain the positive aspects of personality and its development potential. Accordingly, Vazquez, Hervas, Rahona, and Gomez (2009) in the Clinical Psychology and Health Yearbook publication, cited Salanova (2008) who makes a review of the scientific literature of the last hundred years - from 1907 to 2007.

In the latter, they noticed that 77,614 articles on stress, 44.667 on depression, 24.814 on anxiety, 6.434 on well-being have been published. They showed how the focus of research in the field of health was mostly on negative and pathological aspects.

What is Well-being?

Initially, there was not an agreement within the scientific community on the definition of well-being. They used the concepts of satisfaction, well-being, happiness and quality of life in a similar way. It is no coincidence that there is confusion in the use of these terms, which have been used many times as synonyms, since they share similarities in content as well as complexity in their study (Martin Carbonell, 2003).

The first studies on subjective well-being, rather than addressing it as a priority object of investigation, they picked it as an indicator of changes' effect on research, which had other purposes. For example, some research was performed to determine to what extent certain economic disadvantages could affect an individual's quality of life and the degree to which certain losses in people's lives could affect their subjective well-being. In addition, programs to change unfavorable situations were developed to assess whether these could generate a positive effect on subjective well-being (Villar, Triado, Sole, & Osuna, 2003).

Casullo and Castro Solano (2000) also pointed out the assumption that the feeling of life satisfaction was linked to intelligence, physical appearance or good economic conditions. In this regards, a change in any of these circumstances (money, intelligence or appearance) explained only 10% of people's well-being (Castro Solano, 2000; Diener, 1984; Lyubomirsky, 2007). The idea that socioeconomic factors or physical appearance alone could ensure personal well-being incorporating the psychosocial aspects and subjective well-being as a more complete model is exceeded. From these findings, the subjective component as a major factor in the inclusive quality of life concept research is rapidly incorporated.

Valdes (1991) considers well-being as a mixed concept in which characteristics are combined in two different types. On the one hand, he mentions features that refer to a person's external circumstances, such as his possession or access to certain material or external goods –for example, wealth or power. On the other hand, he describes features that

refer to certain internal states or moods considered valuable, -such as pleasure, happiness, a feeling of dignity, and the realization of personal projects and desires.

Overall, well-being is defined as the evaluation that people make of their lives (Diener, 1994; Veenhoven, 1991). This assessment includes two components, one cognitive and the other affective. The cognitive component refers to life satisfaction, expressed by the perceived discrepancy between desired and obtained goals. The affective component is related to feelings and mood, although some theorists claim that they have a connection with frequency and intensity of positive emotions (Diener & Suh, 1998). For example, a person who has low levels of subjective well-being would be the one that is unsatisfied with life, has little fun and experiences negative emotions such as anxiety or frequent depression. Conversely, when an individual feels many pleasant emotions and scarce unpleasant emotions, he/she enjoys doing activities and relating with others. Therefore, high life-satisfaction levels will mean having high levels of subjective well-being (Diener, Suh, Lucas & Smith, 1999).

Castro Solano (2000) makes a similar but inverse conceptualization in relation to well-being and satisfaction. He points out that satisfaction is a triarchical construct including emotional states (positive affects and negative affects) and a cognitive component. Emotional states are more labile and momentary, as well as independent, while the cognitive satisfaction component- which he calls well-being- is the result of the cognitive integration that people make about how their life was (or is) doing.

Zamarrón (2006) found that subjective well-being is made up of three basic elements: life satisfaction, positive affect and low levels of negative affect. These elements are closely related. Life satisfaction can be divided into different areas such as satisfaction with marriage, friends, work, etc. Positive affect can be assessed through specific emotions such as joy, affection and pride, while negative affect can be measured through emotions or feelings such as shame, guilt, sadness, anger or anxiety. Therefore, people going through positive emotional experiences are more likely to perceive their lives as successful and positive.

Thus, the scientific literature on the subject shows that many researchers (Satorres Pons, 2013; Triadó, 2003; Veenhoven, 1994) agree with two major components of subjective well-being:

- An emotional or affective component, related to feelings of pleasure and displeasure experienced by the person. This would be a component subject to change and in short to medium term (weeks, even days).

- A cognitive component, more stable over time, on the individuals' judgment on their evolutionary path, that is to say, life satisfaction.

Other researchers as Garcia-Viniegras and Gonzalez Benitez (2000) understand well-being as the balance between expectations, hopes, dreams, collected or potential realities, in terms of expressed satisfaction, contentment, happiness, ability to face life events in order to find a right balance (Molina Sena & Melendez Moral, 2007).

Palacio Alonso Rios, Payares, Maldonado, Campo, Quiñonez and Zapata (2010) consider well-being to be a state of balance and a search of activities that make the individual happy and enable him/her to have a better life.

There are various concepts that address well-being. They all refer to the degree to which the individual judges his life as a whole. This assessment can be done considering the three essential meanings mentioned by Diener (1984), virtue, life satisfaction and positive affect. Therefore, one can say that well-being is one of the great hopes of all individuals, since many of the decisions and actions taken are performed to reach this state, regarded as something positive.

Subjective and Psychological Well-being

Triado (2003) proposes that from the first notions about well-being there is a duality that is currently kept in scientific research. The two points of view from which personal well-being may be contemplated are the following:

- A view usually described as 'hedonistic', which associates well-being with feelings of pleasure and happiness.
- An 'eudaemonist' view that associates well-being to achieving one's own potential and to the realization of what we can be.

Then he mentions that subjective well-being is associated with a hedonistic view and he associates it to the subjective experience of happiness, which results from a global balance between the situations of pleasure and displeasure, between good and bad elements of one's life. The second view is related to eudemonia, also called "psychological well-being".

The latter is understood as the state generated in the process and achievement of those values that make us feel alive and real - that makes us grow as people - and not so much on the activities that bring us pleasure or prevent us from feeling pain.

Perhaps from a broader perspective, and taking Ryff (1989) into account, psychological well-being can be related to having a purpose in life, to one finding the meaning of life, to facing challenges - and overcoming them with effort - and to achieving worthy goals. On the other hand, the subjective well-being (SWB) would have more to do with the absence of problems and the presence of positive feelings.

Villar, *et al.* (2003) postulated that the psychological well-being view tries to find concrete and stable criteria and qualities to assess to what extent the person meets these criteria or possesses those qualities, while in the case of SWB, the only measure is the subjective experience.

Some research on well-being

Castro Solano (2000) distinguishes two well-being lines of research. The first one is related to the evaluation of positive emotions and the perception of overall life satisfaction. A second line of approach considers that wellness is multidimensional and that it is necessary to consider the social and environmental aspects for well-being assessment.

This concept led to numerous studies, which were conducted in order to inquire what factors influence well-being. Gonzalez Herero (2004) sets out several studies demonstrating the positive relationship of different variables with subjective well-being, such as: church attendance and participation in religious groups (Freudiger, 1980; and McClure, & Loden, 1982); income (Andrews, & Withey, 1976; Freudiger 1980; Riddick, 1980); marital status, marriage being one of the factors having the greatest impact on SWB (Glenn, & Weaver, 1979). Personality is also considered one of the strongest and most consistent predictors of subjective well-being.

Costa, and McCrae (1980) found that the extroversion dimensions are related to positive affect and satisfaction whereas the neuroticism dimension is related to negative affect and dissatisfaction.

Costa, McCrae, and Zonderman (1987) in a longitudinal study, could see that people who changed their marital status, residence, or employment, compared to those who maintained these stable conditions showed no significant changes in their well-being. These events could temporarily alter individuals' well-being levels, but they soon returned to the baseline. This argument suggests that well-being is apparently related to people's temperamental components (Casullo, Castro Solano, 2000).

Finally, other studied aspects were self-esteem and optimism. Studies reported that people with high self-esteem and optimism typically experience higher levels of subjective well-being (Diener, 1994; Gonzalez Herero, 2004, Scheier, and Carver, 1985). With regard to the relationship between age and subjective well-being, the results of a study of 60,000 adults in 40 countries that sought to know the relationship between age and subjective well-being, reported that out of the three measured components (life satisfaction, positive affect and negative affect) only positive affect decreases with age. Life satisfaction shows a slight upward trend from 20 to 80, while the negative affect hardly changed with age (Diener & Suh, 1998; in González Herero, 2004).

As far as studies dealing with well-being in old age, the relationship between psychological well-being and its variables have been observed. Some examples are: social activity (Okun, Stock, Haring, & Witter, 1984), coping (Vera Noriega, Sotelo Quinones, & Dominguez Guedea, 2005), social support (Arias, 2004; Muchinick, 1984), the operation of the self as regulator (Liberalesso Neri, 2002), the social level and lifestyle (Garcia-Viniegras & Gonzalez Benitez, 2000), sociodemographic variables, functional status and health (Izal, & Montorio, 1993).

These findings demonstrate the wide variety of factors that can contribute to well-being. For this reason, it is considered a multidimensional and pluri-determined concept, since there are many variables involved to give it a different meaning for each individual.

Carol Ryff (1989) questions the studies that measures well-being in a one-dimensional way and states that generally psychological well-being has been considered as the absence of discomfort, ignoring other aspects related to human development. For this reason, he developed a multidimensional questionnaire, which articulates the theories of optimal human development, positive mental functioning and life cycle theories, identifying six dimensions of personal well-being:

- Self-acceptance. Understood as the positive evaluation of oneself or "feeling good about oneself," being aware of one's own limitations.
- Positive relationships with others. The importance of socially significant stable relationships, interpersonal relationships as well as the ability to love. These affective bonds are seen as one of the main components of mental health, being both a maturity criterion.
- Autonomy. An essential quality to support one's individuality in different social contexts, based on the convictions and the maintenance of independence and self-determination in the course of time.
- Environmental mastery. The capacity to choose or create environments that meet the unique physical conditions and needs. It implies the ability to manage and control complex environments or the surrounding world.
- Purpose in life. The understanding of purpose or meaning of life, a sense of direction or intention. He/she who functions positively has objectives, intentions and direction.
- Personal growth. The optimal psychological functioning requires not only the development of the aforementioned features, but also a sense of continued growth to develop one's own potential. Having clear objectives and realistic goals that endow meaning to the experiences lived and the ones to come.

Research done by this author holds that psychological well-being is a related concept, but different from subjective well-being (Villar, *et al.*, 2003). From a quantitative perspective, the research results (Ryff & Keyes, 1995) indicate that some dimensions of psychological well-being such as self-acceptance and environmental competence is apparently related to measures of happiness and life satisfaction, i.e. with SWB measures. On the other hand, the other dimensions including psychological well-being showed no (or did so very weakly) a relationship with this type of well-being. Among the dimensions that showed no relationship, those who may represent more genuinely a sense of psychological well-being are purpose in life and personal growth.

Another study, conducted by Keyes, Shmotkin, and Ryff (2002) states that both constructs (subjective well-being and psychological well-being) are globally connected.

There are dimensions in a construct shared by both and others that are unique. For the psychological well-being, these unique dimensions included purpose in life and personal growth. Finally, another important contribution was that SWB remains relatively stable over the years, while measures of psychological well-being have major differences, showing clear effects with age. Within the dimensions that remain relatively stable with age according to Ryff's study, are self-acceptance and positive relationships with others, as typical dimensions of subjective well-being, while purpose in life and personal growth, more typical of psychological well-being, show a decrease over the life cycle, which is accentuated in old age.

Casullo (2002), starting from this conceptualization, designs an instrument in two versions: one for young people (BIEPS- J) and another one for adults (BIEPS-A) including the following dimensions:

- Situation control. It implies that people have a sense of control of their everyday life affairs.
- Self-acceptance. It holds that people can accept multiple aspects of themselves, including the good and the bad, and feel good about the consequences of past events.
- Psychosocial bonds. It refers to the ability to establish good relationships with others.
- Autonomy. It points out the individual's power to make decisions independently.
- Projects. It implies that people need life goals and projects, as well as to consider there is a meaning in life.

Although this scale has been used in multiple investigations, it had not been applied in the case of older adults. As from the year 2008, given the interest in exploring this issue, several studies, with BIEPS-A scale, were made. First, a well-being comparative study by gender in adults aged 60 and over was made. The results showed that women obtained higher average scores than men in the global well-being dimension; however, these differences are not statistically relevant (Arias, & Soliverez, 2008). Subsequently, another study explored the psychological well-being in adults over different types of households. The results showed the existence of significant differences between those living in retirement homes and those living at home, the latter being those who got the highest scores (Arias, & Soliverez, 2009).

A third work that intended to explore possible psychological well-being changes between two age groups within the senior population, 60 to 75 and 76 to 91 years old, showed that in old age the psychological well-being remains relatively stable and at high levels in different aspects -even in the group of oldest seniors (Arias, & Soliveréz, 2009).

Finally, in order to make a well-being comparative analysis between a seniors group and another one with young adults, the analysis of the data showed that global well-being is highest in the first group. In the dimensions analysis significant differences could be observed in the acceptance dimension, and the one corresponding to bonds. While autonomy scores were also higher in older adults, the difference with young people was not significant.

The only dimension in which old people had lower scores was the one about projects (Soliveréz & Sabatini, 2009). In a later study, the psychological well-being was tested in a larger sample, including in the comparison four age groups: 1) from 20 to 40, 2) from 41 to 60, 3) from 61 to 70 and 4) from 71 to 90 years old. In this case the results again showed that although there were no significant differences by age group between average scores in global well-being nor in the corresponding to the bonds dimension, there was a difference in the average scores of the self-acceptance/control, autonomy and projects dimensions. The 71-90 year-old group got the highest scores in the self-acceptance/control and autonomy dimensions while the youngest group - from 20 to 40 years old - obtained the highest score -compared to the other groups- in the projects dimension (Arias, & Soliveréz, 2009).

Considering Ryff findings, we may say that they are consistent with ours, since the dimensions she found were lower in the elderly group would be equivalent to the results we found in the projects dimension. Later, with the intention to deepen these results and to analyze how these dimensions are expressed, two focus groups were investigated. Two groups, one of men and the second one of women 60 to 75 years old were formed, and Casullo's scale was used: Acceptance /Control; Autonomy, Bonds, and Projects.

The analysis showed that subjective well-being in old age is high, which eventually increases inwardness, self-acceptance and the redefinition of experience. For this reason, there is life satisfaction and greater presence of positive emotions. With regard to psychological well-being, what happens in this life stage is that the time horizon is shortened, then what is interpreted as "projects" has a different meaning and relevance for senior and for young people (Soliveréz, 2011). This difference could be explained by considering that older

people perhaps, reach integrity and they do not need the development of new projects to fully live this stage of life.

Conclusion

From this work, we can understand the difficulty in scientific literature to agree on a definition of well-being. From ancient times, there has been interest in learning how to feel well, or what would be the way to achieve well-being. Not having the concept very clear, it made its measurement difficult and therefore no different intervention strategies were thought of. It is generally agreed that well-being emerges from the assessment that the subject makes of his/her life, so it is then subjective. It also has a pluri-determined nature as there are many factors that affect it.

Ryff will extend its conception saying that it is a lot more complex than simply positive stability over time, as she also considers self-acceptance, affective bonds and vital sense as of great importance. These contributions are interesting to be analyzed in aging, as all changes that can lead to this process could diminish well-being; however, the results show that in old age the psychological well-being has high levels in the different aspects that make it up and even in the oldest seniors group.

Older adults have higher well-being than young people despite facing more problems and adverse situations, as they develop coping strategies that enable them to incorporate them and even give them meaning in their life story. It seems that as times goes by, one appreciates more what one has and not what one craves nor what one cannot do. This acceptance together with the enjoyment of affective bonds and having a project that implies personal development would be the ideal well-being components. Knowing the impact of these factors, it is important to develop interventions to prolong or promote old people's well-being so they can enjoy a psychologically positive experience in this vital stage.

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