

Adaptation of the Wellness Evaluation of Lifestyle Scale to Turkish*

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Abstract

Problem Statement: Studies show that wellness is closely associated with individual life style. Thus, any efforts toward improving wellness should target aspects of a person's life style. A means of assessing holistic wellness is needed to design programs that increase individuals'/clients' health and wellness and to develop psychological counseling approaches. In other words, a valid and reliable measurement instrument is required. Recent years have witnessed the development of a great number of models of wellness and of a variety of measurement instruments. In Turkey, however, there are few studies on this subject.

Purpose of Study: The purpose of this study was to adapt the Wellness Evaluation of Lifestyle (WEL) scale to Turkish. The WEL-TJ form of the scale was applied.

Methods: The study sample consisted of 425 students (232 female; 193 male) from a university in Ankara, aged between 18 and 29 years (\bar{x} =21.4; SD = 1.74). We performed explanatory factor analysis, to examine both the construct validity and factor structure of the WEL. Principle component analysis (PCA) rotation and concurrent validity tests were also performed. The reliability of the WEL was also subject to test-retest and internal consistency testing.

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Findings and Results: Varimax rotation was used to analyze factors and items, and it was observed that, with the exception of items in the “Work” subscale, similar items gathered under the same factor. Test-retest reliability coefficients ranged from .38 to .84 for the WEL subscales. Total test-retest reliability was .67. The Cronbach’s alpha reliability coefficient for the overall scale was .92.

Conclusions and Recommendations: The findings of this study indicate that the Turkish version of the WEL scale is suitable for measuring wellness levels among university students in Turkey; however, we also recommend that validity and reliability studies be conducted with a larger group of varied ages.

Keywords: Wellness, the Wheel of Wellness, the Wellness Evaluation of Lifestyle scale, reliability and validity

Prior to the 1940s, health was viewed as the mere absence of disease. However, in 1947, the World Health Organization (WHO) changed this. Health was defined as “not only the absence of disease but also the presence of a satisfactory degree of physical, mental and social wellness” (Witmer & Sweeney, 1992; Fişek, 1985). This was the first time that the mental and social aspects of human life were incorporated into the concept of health. The new definition was also important because it made a connection between health and wellness for the first time.

Dr. Halbert Dunn (1961) pioneered the study of wellness, which was furthered by others who contributed to the conceptualization of wellness (as cited in Palombi, 1991). Dunn (1961, p.4) defined wellness as “an integrated method of functioning which is oriented towards maximizing the potential of which the individual is capable” (as cited in Palombi, 1992). Myers, Sweeney and Witmer (2000, p. 252) defined wellness in more inclusive terms. They referred to it as “a way of life oriented toward optimal health and well-being, in which body, mind, and spirit are integrated by the individual to live more fully within the human and natural community.” Almost all definitions of wellness in the literature point to desirable levels of physical, mental, and spiritual functioning.

In the literature, we see the use of the term “well-being,” in addition to wellness. Well-being is considered to have two dimensions: subjective and psychological. Subjective well-being relates to an individual’s self-evaluation of her life in terms of positive and negative emotional and cognitive aspects (Diener, 1994). Psychological well-being, on the other hand, refers to an individual’s self-awareness of her goals and potential and the quality of her social relations (Ryff & Keyes, 1995). Together, the terms “wellness”, “psychological well-being”, and “subjective well-being” highlight the significance of healthy functioning. However, subjective well-being and psychological well-being are only related to subjective perceptions of one’s life, while wellness is related to life style.

A great number of researchers acknowledge that a healthy life style prevents important medical problems (Bree, Passchier, & Emmen, 1990; Cagle, 2000; Cheng &

Lam, 1997). Conversely, unhealthy life styles are associated with such physical and mental issues as lower self-esteem, anxiety, and headache (Cramer, Nieman, & Lee, 1991; Degges-White, Myers, Adelman, & Pastoor, 2003; Rosenfeld & Richman, 1998). Studies show that health and wellness are closely associated with individual life styles. Thus, any efforts toward improving wellness should target aspects of a person's life style. The accumulated body of research can also be used to guide individuals toward greater control over their life styles, with numerous models put forward by, amongst others, Ardell (1998; 2001); Hettler (1984; as cited in Donaghy, 1995); Travis and Ryan (1988); Sweeney and Witmer (1991); Witmer and Sweeney (1992); and Myers, Witmer, and Sweeney (2000).

The Wheel of Wellness was the first model prepared by counseling professionals (Myers, Witmer, & Sweeney, 2000; Sweeney & Witmer, 1991; Witmer & Sweeney, 1992). In developing this holistic model of wellness, Sweeney, Witmer, and Myers furthered Maslow's and Adler's ideas of health. According to the Wheel, wellness is an optimal state of health that is established by the holistic functioning of the physical, mental, and spiritual domains of human existence. The model offers a basis for life-long wellness and is comprised of such life tasks as Spirituality, Self-Direction, Work-Leisure, Friendship, and Love. Self-Direction has the following 12 domains: sense of worth, sense of control, realistic beliefs, emotional awareness and coping, problem solving and creativity, sense of humor, nutrition, exercise, self-care, stress management, gender identity, and cultural identity (Myers, Sweeney, & Witmer, 2000). These areas are viewed as holistic parts of a circle. Changes in one domain of the Wheel of Wellness induce changes in the other domains. Likewise, this model holds that there are five domains of life that function in dynamic-interactive manners: family, society, religion, education, media, and the business world. These domains are also influenced by events like famine, flood, and war. This model has benefited from the accumulation of theoretical and empirical knowledge in the fields of psychology, anthropology, education, and the behavioral and medical sciences (Sweeney & Witmer, 1991; Witmer & Sweeney, 1992; Myers, Witmer, & Sweeney, 2000).

The design of programs that increase individuals'/clients' health and wellness and the development of psychological counseling approaches requires a means of assessing holistic wellness. In other words, a valid and reliable measurement instrument is needed. Recent years have witnessed the creation of a great number of models of wellness and of a variety of instruments based on these models. In Turkey, several subjective and/or psychological well-being scales have been developed, including the Subjective Well-Being Scale (Tuzgöl-Dost, 2004) and the Scale of Psychological Well-Being (Cenkseven, 2004; Akın, 2008). As explained, though closely related, the concepts of well-being and wellness are different. Therefore, these scales measure only subjective and/or psychological well-being - not whole wellness. At the time this study was conducted, we had not encountered a scale that measured whole wellness, though Güneri-Yerin (2003) had prepared the Wellness Inventory. In conclusion, there was need for a valid and reliable scale to measure current wellness. There is still a need for more wellness measuring scales in Turkey.

The Wheel of Wellness developed by Witmer and Sweeney in 1990 is the first model developed according to psychological counseling theories (Sweeney & Witmer, 1991; Witmer & Sweeney 1992). The strength of the model rests in the fact that it is holistic, being composed of multiple factors, and in the fact that it offers a means of measuring the individual impacts of these factors (as cited in Hermon & Hazler, 1999; Granello, 1999). Myers, Sweeney, and Witmer based their Wellness Evaluation of Lifestyle (WEL) on the Wheel of Wellness (Myers, Sweeney, & Witmer, 2000; Sweeney & Witmer, 1991; Witmer, & Sweeney, 1992). This study aimed to contribute to studies on wellness in Turkey. More specifically, its purpose was to adapt the WEL to Turkish.

Method

Participants

The study sample consisted of 425 students (232 female; 193 male) from a university in Ankara. Students' ages ranged from 18 to 29 years ($\bar{x} = 21.4$; $SD = 1.74$). 37% were freshmen ($N = 155$); 27% were sophomores ($N = 116$); 19% were juniors ($N = 81$); and 17% were seniors ($N = 73$).

Data Analysis

The Kaiser-Meyer-Olkin coefficient and Barlett Sphericity tests confirmed that the data were fit for factor analysis. Explanatory factor analysis was performed to examine the construct validity and factor structure of the WEL. Principle component analysis (PCA) (Kline, 1994) was also performed. Factor loading, percentages of explained variance, and scree plots were examined. A varimax rotation matrix was used to facilitate the interpretation of factors. In accordance with Kaiser's normalization (Tatsuoka, 1971), factors with eigen values of 1.00 or higher were included. In addition, concurrent validity was checked. The reliability of the WEL was examined using test-retest and internal consistency testing. These procedures were repeated for each subscale.

Research Instruments

The Wellness Evaluation of Lifestyle (WEL) scale. The WEL consists of five subscales, each measuring one of five fundamental life tasks: Spirituality, Work-Leisure, Friendship, Love, and Self-Direction. The Self-Direction subscale is composed of 12 domains (sense of worth, sense of control, realistic beliefs, emotional awareness and coping, problem solving and creativity, sense of humor, nutrition, exercise, self-care, stress management, gender identity, and cultural identity). The five subscales are scored separately. The sum of the subscale scores provides a total wellness score. Moreover, the sub-domains of Self-Direction are scored separately. Higher scores indicate higher degrees of wellness.

The WEL-TJ form of the WEL scale was used in this study. The WEL-TJ is a four-point Likert scale, with responses ranging from "strongly agree" to "strongly disagree". The WEL-TJ consists of 83 items. The number of items within each subscale varies from 3 to 6. The leisure subscale has 6 items; the Spirituality, Realistic

Beliefs, Nutrition, and Exercise subscales each have 5 items; Cultural Identity has 3 items; and all the rest have 4 items.

Translation

Permission was obtained to adapt the WEL by contacting its authors via electronic mail. Correspondence was conducted with Dr. Jane Myers. With her and her colleagues' permission, translation to Turkish was initiated. The initial translation was carried out by the author of this study and two counselors with doctoral degrees and advanced knowledge in both languages. The Turkish translation was then given to 10 counseling/psychology experts for revision. These experts had previously undertaken their graduate studies in the English language and thus possessed advanced knowledge of it. Necessary changes were made, according to common recommendations and criticisms.

Back-translation was also employed to help develop the Turkish version of the WEL. The Turkish translation was then given to three counseling experts with advanced proficiency in English. They retranslated the scale to English. Afterwards, the two translations were given to 10 counseling/psychology experts for revision. These experts had received their graduate degrees in English.

Myers and Sweeney, who developed the original form of the WEL, also participated in the translation. They worked with a Turkish academic to check the compatibility of the Turkish translation. Based on their feedback, necessary changes were made, and the translation phase was completed.

A pilot study was conducted to check the practicality of the scale. The test was given to 60 students. The responses of this sample confirmed the practicality of the measure.

Findings Results

Validity and Reliability Studies

Validity

Validity testing of the whole WEL. Factor analysis was performed to test the construct validity of the WEL. Both the KMO coefficient (.898) and the results of Bartlett's test were significant. Communalities of the factors for each variable ranged from .412 to .770. Twenty-one of the factors had eigen values of higher than 1. These factors accounted for 58.95% of total variance. Loading for the first factor ranged between .21 and .68. The multifactorial structure of the scale was confirmed by a rapid decline in the graph, shared variance values, and factor load values.

A varimax rotation matrix was generated for the 21 factors obtained from the PCA, in order to test independence, significance, and ease of interpretation. Since the number of factors in the original scale was 17, the same number of factors was used in varimax rotation. The results showed that with the exception of items in the Work subscale, similar items gathered under the same factor, and subscale items clustered under the same factors. Hence, the results did not support the Work life

task as an independent factor. Items in the Work subscale were revised and administered again. Subsequent factor analysis also did not show life task as an independent factor. Factor analysis also revealed that the Problem Solving and Creativity, as well as Sense of Control, dimensions of the Self-Direction subscale clustered under the same factor. Likewise, the Emotional Awareness and Coping and Sense of Worth dimensions of the Self-Direction subscale also gathered under one factor.

Validity Testing for the Subscales

The Spirituality subscale. Communalities of the factors for each variable ranged from .434 to .691. One factor had an eigen value of higher than 1. This factor explained 54.417% of total variance. The factor loads of items (component matrix) ranged from .658 to .831.

The Self-Direction subscale. The original scale had 12 domains. Factor analysis showed that 14 factors had eigen values of higher than 1. Communalities of the factors for each variable ranged from .394 to .752. The first of these factors accounted for 6.460% of total variance, while the second accounted for 6.346%, the third for 5.870%, the fourth for 5.035%, the fifth for 4.898%, the sixth 4.774%, the seventh for 3.796%, the eighth for 3.534%, the ninth for 3.300%, the tenth for 3.262%, the eleventh for 2.791%, the twelfth for 2.745%, the thirteenth for 2.617%, and the fourteenth for 2.422%, with the 14 factors together accounting for 57.850% of variance. Factor loads (component matrix) ranged from .25 to .582.

Varimax rotation showed that the Problem Solving and Creativity and the Sense of Control dimensions, which were separate factors in the original scale, clustered under a single factor (Table 1). As with the original scale, the second factor was Nutrition, the third Stress Management, the fourth Sense of Humor, and the fifth Exercising. In addition, the results showed that the sixth factor was comprised of five items. As with the original scale, four of the items of which this factor consisted belonged to the Sense of Worth factor. On the other hand, one of the items that fell under the Emotional Awareness and Coping factor in the original scale was also included in this factor. Considering the original scale and the contents of the items, the seventh factor was identified as "Sexual Identity", the eighth as "Emotional Awareness and Coping", the ninth as "Self-Care", and the tenth as "Cultural Identity." Unlike the original scale, the revised scale included Cultural Identity items and one of the items from the Realistic Beliefs subscale. This study showed that again, unlike the original scale, Realistic Beliefs subscale items were clustered under two different factors (eleventh and thirteenth). Likewise, one item from each of the Sexual Identity and Self-Care subscales gathered under a different dimension.

Table 1*Varimax Rotation of The Self-Direction Subscale*

Item	Shared Variance	Item	Component Matrix
2	.655	44	.643
3	.744	10	.596
4	.666	33	.587
5	.666	48	.582
6	.651	60	.581
7	.507	32	.562
8	.555	50	.540
9	.695	67	.535
10	.558	18	.526
12	.552	40	.501
13	.638	30	.500
14	.752	13	.497
15	.522	20	.497
16	.516	36	.467
18	.743	54	.465
19	.577	71	.439
20	.525	59	.431
21	.541	21	.429
22	.622	7	.398
27	.509	16	.397
28	.524	38	.395
30	.438	27	.394
31	.628	43	.340
32	.535	14	.373
33	.517	3	.386
36	.624	68	.388
38	.491	5	.377
39	.439	63	.292
40	.632	2	.477
42	.700	42	.407
43	.475	4	.337
44	.589	53	.438
45	.472	9	.375
46	.568	72	.378
48	.443	62	.327
50	.712	6	.347
53	.716	22	.390
54	.659	57	.250
56	.572	56	--
57	.394	8	--
59	.435	64	.203
60	.660	15	--
62	.700	19	.220
63	.438	31	.277
64	.498	12	.199
66	.561	45	.235
67	.661	28	.292
68	.608	66	.298
71	.566	46	--
72	.473	39	--

Item	After Rotation													
	1	2	3	4	5	6	7	8	9	10	11	12	13	14
7	.633													
27	.625													
30	.583													
59	.535													
20	.530													
48	.519													
32	.488													
43	.394													
3		.840												
14		.840												
5		.789												
68		.722												
63		.564												
18			.816											
50			.783											
2			.758											
67			.754											
42				.794										
4				.785										
54				.745										
21				.381										
53					.807									
9					.791									
62					.787									
72					.464									
33					.396									
36						.725								
60						.707								
44						.460								
66						.400								
10						.397								
6														
22								.778						
57								.735						
13								.462						
40									.718					
38									.699					
8									.413					
64										.732				
15										.606				
16										.483				
12											.611			
31											.559			
71											.553			
46											.541			
56												.724		
45												.687		
39													.614	
28														.600
19														.561
														627

The Work subscale. Communalities of the factors for each variable ranged from .261 to .513. Factor analysis showed that one factor had an eigen value of higher than

1. This factor explained 40.212% of total variance. Factor loads (component matrix) ranged from .511 to .716.

The Leisure subscale. Communalities of the factors for each variable ranged from .206 to .639. Factor analysis showed that one factor had an eigen value of higher than 1. This item explained 49.533% of total variance. Factor loads (component matrix) ranged from .454 to .799.

The Friendship subscale. Communalities of the factors for each variable ranged from .237 to .513. Factor analysis showed that one factor had an eigen value of higher than 1. This factor explained 54.074% of total variance. Factor loads (component matrix) ranged from .400 to .674.

The Love subscale. Communalities of the factors for each variable ranged from .673 to .800. Factor analysis showed that two factors had an eigen value higher than 1. The first factor accounted for 50.147% and the second factor for 25.719% of total variance, and the two of these for 75.866% of total variance. After varimax rotation, the first factor had two items (26, 52), and the second factor had two items (47, 73). Given the contents of these factors, the first was associated with Social Relations and the second with Social Support. Prior to rotation, the first factor had a high load and accounted for 50% of total variance. There was a rapid decline after the first factor (on the graph), such that the Love subscale can be said to have a general factor.

Concurrent Validity

The Brief Symptom Inventory (BSI), adapted to Turkish culture by Şahin and Durak (1994), was used to establish the concurrent validity of the WEL. Increases in total scores on the BSI, which was prepared to examine a variety of psychological symptoms, show the frequency of these symptoms. In other words, a high score, on the one hand, indicates the frequency of psychological symptoms and, on the other hand, shows that wellness is low. The two scales were administered to 254 students. The total scores from both were used to calculate the correlation coefficients. There was a medium significant negative relationship between the two measures ($r = -.42$; $p \leq 0.01$). It can be concluded that when wellness scores increase, number of psychological symptoms decreases.

Reliability

The scale was administered to 80 students within an interval of 3 weeks. As shown in Table 2, test-retest reliability coefficients ranged from .38 to .84 and Cronbach's alpha coefficients from .41 to .92 (first administration). The lowest Cronbach's alpha was for Realistic Beliefs, whereas the highest was for Stress Management.

Table 2
Reliability and Internal Consistency

	Test-retest Correlation	Cronbach-Alpha coefficients *	Cronbach-Alpha coefficients **
Spirituality	.64	.72	.76
Self-Direction	.71	.86	.87
Sense of Worth	.67	.78	.71
Sense of Control	.55	.61	.64
Realistic Beliefs	.71	.41	.53
Emotional Aw. and Coping	.46	.62	.55
Problem Solving - Creativity	.38	.55	.59
Sense of Humor	.75	.69	.72
Nutrition	.84	.80	.82
Exercising	.78	.74	.70
Self-Care	.64	.53	.46
Stress Management	.64	.86	.84
Sexual Identity	.56	.57	.69
Cultural Identity	.66	.49	.57
Work	.64	.55	.47
Leisure	.72	.78	.75
Friendship	.51	.69	.71
Love	.53	.65	.64
Total Scale	.67	.92	.92

* First administration

** Second administration

The correlations between subscale scores and total test scores are illustrated in Table 3. As seen here, there were significant correlations between all the subscale and the total test scores, with the exception of the Realistic Beliefs subscale. The correlation coefficients of all the item-subscals were higher than .25, with the exception of three items in the Realistic Beliefs subscale (12, 28, 39); one item in the Problem Solving and Creativity subscale (32); and one item each in the Self-Care (19), Cultural Identity (31), and Leisure (55) subscales.

Table 3*Total Test and Subscale Scores for the WEL*

Subscales	Correlations of item-total test scores	Cronbach's alpha after item deleted
Spirituality	.3209	.8309
Sense of Worth	.6384	.8123
Sense of Control	.6561	.8139
Realistic Beliefs	-.0951	.8473
Emotional Aw. and Coping	.5825	.8165
Problem Solving – Creativity	.5895	.8172
Sense of Humor	.2791	.8327
Nutrition	.3731	.8294
Exercising	.4580	.8228
Self-Care	.2451	.8390
Stress Management	.9692	.8104
Sexual Identity	.4149	.8251
Cultural Identity	.5103	.8199
Work	.5923	.8169
Leisure	.4612	.8225
Friendship	.5795	.8170
Love	.3065	.8316

Since the reliability of some subscales and some item-subscale correlation coefficients was low, the translations of some items were revised by two experts: one in the field of Turkish Language and Literature and the other in American Culture and Literature. Items in the Work, Sexual Identity, Cultural Identity, Realistic Beliefs, Problem Solving and Creativity, Sense of Humor, and Friendship subscales were altered. Subsequently, the scale was administered to 410 students, and the new Cronbach's alpha coefficients ranged from .46 to .92 (Table 2, second application). Cronbach's alpha increased for subscales whose items were altered. Conversely, the coefficient for the Work subscale decreased. On the other hand, while there was an increase in the Cronbach's alphas of some of the subscales whose items were not altered, there was a decrease in the coefficients of other subscales. There was no change in the internal consistency coefficients of the total Self-Direction and the total Wellness scales. After alteration, the correlation coefficients of item-subscale correlation coefficients were higher than .25 for all the items, with the exception of two in Realistic Beliefs (12, 28), one in Self-Care (19), and one in Work (29). In fact, three of these four coefficients were higher than .20. The item-total correlations ranged from 0.17 to 0.75.

Discussion and Conclusion

Factor analysis of the entire scale showed that items with similar content clustered under the same factor. The only exception was the Work subscale, which did not emerge as an independent life task. This could be attributed to cultural differences. In other words, the results of studies with Turkish samples may reveal

findings that are dissimilar to those in the existing international literature. Similarly, this difference could be due to the identity of this study's sample. The participants were students, the great majority (88.67%) of whom had no work experience.

Factor analyses of the whole scale and the Self-Direction subscale showed that the Problem Solving and Creativity and Self-Control subscales were clustered under the same factor. Hattie, Myers, and Sweeney (2004) found similar results. Yet, they treated Problem Solving and Creativity as different from Self-Control. The authors concluded that further investigation was needed, before any firm decisions could be made about these subscales. The results of this study are in accordance with the findings of Hattie, Myers, and Sweeney (2004).

Factor analysis of the entire scale showed that Emotional Awareness and Coping, as well as Sense of Worth, which were subdomains of the Self-Direction subscale, were indeed one factor. This result was not surprising, given that the contents of these two subscales were closely related. Again, factor analysis of the Self-Direction subscale showed that one item in the original Emotional Awareness and Coping subscale was included in the Sense of Worth subscale. Considering the content of this item (*I am able to experience a full range of human emotions, both positive and negative*), it could be proposed that experiencing emotions as they are felt could be interpreted as an indication of self-worth. Put more clearly, emotions are not clearly expressed in Turkish society, and it is therefore thought that the expression of feelings is associated with Sense of Worth. Factor analysis of the Self-Direction subscale showed that its tenth factor, unlike that of the original scale, included Cultural Identity items and one Realistic Beliefs item. The fact that this item (*I am responsible for keeping other people happy*) was included in the Cultural Identity dimension could be attributed to the collective nature of Turkish culture.

Varimax rotation revealed that the Love subscale consisted of two factors. Considering the contents of these factors, the first was designated Social Relations and the second Social Support. Parallel to this finding, Myers, Sweeney, and Witmer (2000) have asserted that the Love subscale involves dimensions of social interest, relations, and support.

The Cronbach's alpha reliability coefficient for the full scale was .92. Coefficients for the subscales ranged from .41 to .86. The subscale with the lowest coefficient was Realistic Beliefs, while the subscale with the highest coefficient was Stress Management. Following the second administration of the WEL, and after altering some items in those subscales with low reliability coefficients and low item-subscale correlations, the Cronbach's alpha for the WEL was found to be .92, and those of the subscales was found to range from .47 to .84. The Work subscale had the lowest coefficient, whereas the Stress Management subscale had the highest. The coefficient of the Work subscale decreased. As mentioned, the sample comprised university students, most of whom had no work experience. This could be the reason for the low coefficients obtained with the first administration of the scale. Hence, "work-related statements" that were originally given in parentheses were replaced with "school-related statements" before the second administration. Alternating these statements may have confused participants. To prevent such confusion, the change

was reversed after this study was concluded. On the other hand, the internal consistency coefficients of the total scale and that of the Self-Direction dimension remained the same. The changes observed in the alpha coefficients of the subscales could also be attributed to possible differences in the ways the samples were administered.

For all but four of the item-subscale, correlation coefficients were higher than .25. Three of these four items had coefficients higher than .20. Item-subscale correlation coefficients ranged from .17 to .75. Negative correlations are not preferable, since they affect summation. Item-total correlation coefficients higher than zero and .25 are favorable. Items with coefficients lower than .20 are often eliminated from scales. However, this is not a clear-cut rule. Özdamar (1999) recommends that in deciding whether to eliminate such an item, one should consider the change in the alpha coefficient and the mean of the scale that would result from the item being eliminated. Since the item-total coefficients that were lower than .25 did not have negative values, they were not eliminated. It is safe to conclude that the range of internal validity coefficients was satisfactory.

However, it was observed that the test-retest reliability coefficients and Cronbach's alpha coefficients of the subdomains Sense of Control, Problem Solving and Creativity, and Emotional Awareness and Coping were low. These are the subdomains of the Self-Direction subscale, which is one of the five fundamental life tasks. As discussed in the Methods section, scores for each of these subdomains was obtained separately and then added to scores for the others, to obtain the total Self-Direction subscale score. The test-retest reliability coefficients and Cronbach's alpha coefficients for the Self-Direction subscale were .71 and .87 respectively. This suggested that there should be a total Self-Direction score, instead of individual measurements for each subdomain.

Despite these shortcomings, this study indicates that the WEL (Turkish version) is a reliable scale for measuring the wellness of university students. At the same time, the following recommendations should be made: The Work life task of the WEL does not seem to be a separate factor. This could be due to the nature of this study's sample. Thus, further studies are needed with samples of individuals with work experience. The participants in this study were students at a private university. Further research is needed to test the generalizability of the results. In addition, the findings of this study suggest that validity and reliability studies should be conducted with a larger group of varied ages.

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İyilik Hali Ölçeği'ni Türkçe'ye Uyarlama Çalışması (Özet)

Problem Durumu

İlgili alan yazında, genel olarak iyilik hali kavramının bireyin bedensel, zihinsel ve ruhsal boyutlarda işlerliğinin geliştirilmesinin amaçlandığı bir yaşam biçimi olarak tanımlandığı görülmektedir. Araştırmalar sağlıklı tutumlar içeren bir yaşam tarzının, birçok sağlık problemini önlediğini gösterirken; sağlıksız yaşam tarzının çok sayıda fiziksel ve psikolojik bozuklukla ilişkili olduğunu göstermektedir. Bireylerin yaşam tarzlarında yapılacak değişikliklerle sağlık ve iyilik hallerini artırmanın olanaklı olduğu düşüncesinden hareketle, çeşitli iyilik hali modelleri geliştirilmiştir. Psikolojik danışma teorilerine dayanan ilk model Myers, Sweeney ve Witmer tarafından geliştirilen İyilik Hali Çemberi'dir (The Wheel of Wellness). Model yaşam boyu sağlıklı davranışlar için bir temel oluşturmaktadır. Danışanların, sağlık ve refahını arttıracak program ve psikolojik danışma yaklaşımları geliştirebilmek için öncelikle, onların bütüncül iyilik halinin değerlendirilmesi gereklidir. Diğer bir deyişle, bu konudaki mevcut durumu saptamayı sağlayacak geçerli ve güvenilir bir ölçme araçlarına ihtiyaç vardır. Yurt dışında son yıllarda iyilik hali modelleri ve bu modellere dayanan çeşitli ölçekler geliştirilmesine karşın Türkiye'de bu konudaki çalışmalar daha sınırlıdır.

Araştırmanın Amacı

Çalışmanın amacı, Ülkemizde bu alandaki boşluğu gidermek amacıyla, Myers, Sweeney ve Witmer tarafından geliştirilen İyilik Hali Ölçeği (İHÖ) "The Wellness Evaluation of Lifestyle (WEL)" isimli ölçme aracının uyarlama çalışmasının yapılmasıdır.

Araştırmanın Yöntemi

Araştırma grubunu, 232'si kız, 193'ü erkek 425 üniversite öğrencisi oluşturmaktadır. Öğrencilerin yaşları 18 ile 29 arasında değişmekte olup, yaş ortalaması 21.4'dir (SS = 1.74). Araştırmaya katılanların % 37'si birinci, % 27'si ikinci, % 19'u üçüncü ve % 17'si ise dördüncü sınıfta okumaktadırlar.

Çalışmada, WEL'in TJ formunun uyarlama çalışması yapılmıştır. 83 maddeden oluşan ölçek; Maneviyat, Çalışma-Serbest Zaman, Arkadaşlık, Sevgi ve Kendini Yönetme olmak üzere beş alt ölçekten oluşmaktadır. Beş alt ölçekten biri olan Kendini Yönetmenin 12 alt alanı bulunmaktadır. Bireyin beş alt ölçekten aldığı puanların toplamı, toplam iyilik hali puanını vermektedir. Bununla birlikte beş alt ölçek ayrı ayrı da puanlanmaktadır. Ayrıca, Kendini Yönetme alt ölçeğinin alt alanları da ayrı puan vermektedir. Puanın yüksekliği yüksek iyilik hali düzeyine işaret etmektedir. Ölçek dörtlü likert tipidir.

İHÖ'nün uyarlama çalışmaları çerçevesinde, kapsam geçerliliği için İngilizce'den Türkçe'ye çevirisi ve geri çevirisi yapılmış ve uzman görüşü alınmıştır. WEL'in yapı geçerliliğini ve faktör yapısını incelemek amacıyla açılımlayıcı (exploratory) faktör analizi kullanılmıştır. Faktörleştirme tekniği olarak da temel bileşenler analizi

(principle component analysis, PCA) ve varimax eksen döndürme (rotation) tekniği seçilmiştir. Ayrıca Benzer ölçekler geçerliliği yapılmıştır. İHÖ' nün güvenilirliği, biri test-tekrar test, diğeri iç tutarlılık olmak üzere iki yolla hesaplanmıştır. Bu işlemler tüm alt ölçekler için de yapılmıştır.

Araştırmanın Bulguları

İHÖ' nün tümüne ilişkin varimax eksen döndürme (rotation) yapılmıştır. Analiz sonucunda faktörler ve maddeler incelenmiş, Çalışma alt ölçeği maddeleri hariç, benzer maddelerin aynı faktörde ve alt ölçek maddelerinin de aynı faktörde toplandığı gözlenmiştir. Çalışma alt ölçeği ayrı bir faktör olarak ortaya çıkmamıştır.

İHÖ' nün alt ölçeklerine ilişkin geçerlilik çalışmaları sonucunda, Maneviyat, Çalışma- Serbest Zaman ve Arkadaşlık alt ölçeklerinin öz değeri 1'den büyük olan tek faktörden oluştuğu saptanmıştır. Bu faktörlerin, söz konusu ölçeklere ilişkin toplam varyansı açıklama oranları, sırasıyla, %54.41, % 40.21, % 49.53 ve %54.07'dir. Kendini Yönetme alt ölçeğine ilişkin faktör analizi sonuçları, ölçeğin öz değeri 1'den büyük olan 14 faktörden oluştuğunu göstermiştir. 14 faktör birlikte toplam varyansın %57,850'sini açıklamaktadır. Varimax eksen döndürme sonuçları, birinci faktörde orijinal ölçekte iki ayrı alt ölçek olan Problem Çözme ve Yaratıcılık boyutu ile Kontrol Duygusu boyutlarının aynı faktörde ortaya çıktığını göstermiştir. Orijinal ölçekle paralel olarak ikinci faktörün Beslenme, üçüncü faktörün Stres Yönetimi, dördüncü faktörün Mizah Duygusu, beşinci faktörün Egzersiz Yapmak alt ölçek maddeleriyle ilişkili olduğunu göstermiştir. Altıncı faktörün beş maddeden oluştuğu izlenmiştir. Bu faktördeki dört madde orijinal ölçekle tutarlı olarak Değerli Olma Duygusu alt ölçeğinde yer alan maddelerdir, ancak orijinal ölçekte Duygusal Farkındalık ve Başa Çıkma alt ölçeğinde yer alan maddelerden bir tanesinin de bu boyutta yer aldığı gözlenmiştir. Orijinal ölçek ve madde içerikleri dikkate alınarak yedinci faktörün Cinsel Kimlik, sekizinci faktörün Duygusal Farkındalık ve Başa Çıkma, dokuzuncu faktörün Kendine Bakma, onuncu faktörün ise Kültürel Kimlik alt ölçekleriyle ilişkili maddelerden oluştuğu belirlenmiştir. Onuncu faktörde orijinal ölçekten farklı olarak Kültürel Kimlik maddeleriyle birlikte bir tane de Gerçekçi İnançlar maddesinin yer aldığı gözlenmiştir. Gerçekçi İnançlar alt ölçeği maddelerinin, orijinal ölçekten farklı olarak bu çalışmada iki ayrı faktörde yer aldığı izlenmiştir. Ayrıca, orijinal ölçekten farklı olarak Cinsel Kimlik ve Kendine Bakma alt ölçeklerine ait birer maddenin tek başlarına ayrı bir boyutta yer almıştır. Sevgi alt ölçeğine ilişkin faktör analizi sonuçları ise bu alt ölçeğin -iki faktörlü olduğunu göstermiştir. İki faktör birlikte toplam varyansın %75,86'sını açıklamaktadır. Bununla birlikte, bulgular, "Sevgi" alt ölçeğinin genel bir faktöre de sahip olduğunu göstermektedir.

İHÖ'nün benzer ölçek geçerliliği için Kısa Semptom Envanteri (KSE) kullanılmıştır. İHÖ ile KSE toplam puanları arasında orta düzeyde ve negatif yönde istatistiksel olarak anlamlı bir ilişki saptanmıştır ($r = -.42; p \leq 0.01$). Ölçeğin, test-tekrar test güvenilirlik katsayıları alt ölçekler için .38 ile .84 arasında, İHÖ' nün tümüne ilişkin ise .67 olarak belirlenmiştir. İHÖ' nün Cronbach alfa güvenilirlik katsayısı ölçeğin bütününe ilişkin .92, alt ölçekler için ise .47 ile .84 arasında değişmektedir.

Arařtırmanın Sonuları ve Önerileri

İHÖ, bireylerin iyilik halinin belirlenmesi ve yařam kalitelerinin güçlendirmesine yardım saęlayacak geçerli ve güvenilir bir ölçme aracı olarak kullanılabilir nitelikte görünmektedir. Bununla birlikte, alıřmanın bulgularına dayanılarak řu önerilerde bulunulabilir. Öleęin tümüne iliřkin olarak yapılan faktör analizi sonucu, "alıřma" alt öleęi ayrı bir faktör olarak ortaya ıkmanıřtır. Kültürler arası ölek uyarlama alıřmalarında evrensel davranıřların farklı olabileceęi beklentisinin yanısıra arařtırma örnekleminde yer alan bireylerin henüz öęrenci olmaları ve büyük bir çoęunluęunun (%88.67) iř yařamına katılmamıř olması bu alanın farklı bir faktör olarak ortaya ıkmasına engel olmuř olabilir. Bu nedenle alıřan bireylerle bu alt ölek üzerinde alıřılabilir. Bununla birlikte, Kontrol Duygusu, Problem özme ve Yaratıcılık ve Duygusal Bilinlilik ve Bařa ıkma alt öleklerin test tekrar test güvenilirlik katsayıları ve cronbach-alfa deęerlerinin düşük olduęu görölmüřtür. Sözü edilen bu alt ölekler beř temel yařam görevlerinden biri olan Kendini Yönetme alt öleęinin alt alanlarıdır. Yöntem bölümünde de bahsedildięi gibi bu alt alanlar ayrı ayrı puanlandıęı gibi Kendini Yönetme alt öleęi olarak toplam puan da vermektedir. Kendini Yönetme alt öleęinin test tekrar test güvenilirlik katsayısı .71 ve cronbach's alfa deęeri .87'dir. Bu nedenle bu alt alanların ayrı ayrı puanlanması yerine toplam puan olarak kullanılması önerilmektedir. Ayrıca, bu alıřma Ankara da bir vakıf üniversitesinde gerçekleştirilmiřtir. Türkiye'nin farklı bölgelerindeki üniversitelerde yapılacak alıřmalar, bu alıřmanın bulgularının karşılařtırılabilmesi olanaęını saęlayabilir.

Anahtar Sözcükler: İyilik Hali, İyilik Hali emberi, İyilik Hali öleęi, güvenilirlik and geçerlilik