



How I feel about things: Psychometric data from a sample of Spanish-speaking children¹

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ABSTRACT. This study investigated the psychometric properties of «How I Feel about Things», a questionnaire that assesses perceived quality of life and life satisfaction, in a sample of 729 school children. Participants were a non-clinical sample of 8-14 year old children studying second to eighth grade at three different schools in three socio-economic areas in the Metropolitan area of Santiago de Chile. The internal consistency of the questionnaire was acceptable and its convergent validity was supported with a significant positive correlation with a self-report measure of self-esteem. The questionnaire's discriminant validity was also supported with significant negative correlations with well-known self-report measures that assess depressive symptomatology, general and social anxiety, and general fearfulness. The findings of this study provide initial support for the psychometric properties of «How I Feel about Things» with non-clinical children, although this questionnaire was originally adapted to assess quality of life in children receiving treatment for different anxiety disorders.

KEYWORDS. Life Satisfaction. Quality of Life. Psychometric data. School children. Instrumental study.

RESUMEN. Este estudio investigó las propiedades psicométricas de «Cómo me siento acerca de ciertas cosas», un cuestionario que evalúa la calidad de vida percibida y

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satisfacción vital en una muestra de 729 niños escolares. La muestra consistió en un grupo no clínico de niños de 8-14 años que estudian de segundo a octavo grado de educación básica en tres colegios diferentes en tres áreas socio-económicas de la Región Metropolitana de Santiago de Chile. La consistencia interna del cuestionario fue aceptable y su validez convergente fue apoyada por una correlación positiva significativa con una escala de auto-estima. La validez discriminante del cuestionario también fue demostrada por las correlaciones negativas significativas con escalas de autoinforme reconocidas que evalúan sintomatología depresiva, ansiedad general y social, y miedos generales. Estos resultados brindan apoyo inicial a las propiedades psicométricas de «Cómo me siento acerca de ciertas cosas» con niños no-clínicos, aunque este cuestionario fue originalmente adaptado para evaluar la calidad de vida de niños que recibían tratamiento por diferentes trastornos de ansiedad.

PALABRAS CLAVE. Satisfacción vital. Calidad de vida. Datos psicométricos. Niños escolares. Estudio instrumental.

In recent years there has been an increased interest in the quality of life of children and adolescents, both in health and social care settings. Calls have also been made for psychologists and researchers to take a more positive stand, focusing on wellbeing rather than ill-being, and it has been suggested that assessing life satisfaction in children might allow us to detect children at risk for psychological problems (Beaver, 2008). However, the study of the quality of life of children and adolescents is still lagging behind that of adults (Galindez and Casas, 2010; Gillison, Standage, and Skevington, 2008) and researchers have concluded that the lack of well-validated instruments for children and adolescents has hindered the possibility of reliably assessing life satisfaction of children and adolescents (Huebner and Diener, 2008). Hence, the purpose of the current study was to contribute to the understanding of perceived quality of life of children, and to examine the psychometric properties of a self-report questionnaire of quality of life designed for use with children presenting with psychiatric problems.

Quality of Life (QoL) is a multidimensional concept that encompasses both objective and subjective dimensions. The objective dimensions include individuals' external measurable life conditions, such as work, housing, access to medical resources and economic situation, whereas the subjective dimensions refer to individuals' internal evaluations of their life situation, levels of self-determination and satisfaction (Sacks and Kern, 2008). Several researchers have considered subjective quality of life to be synonymous with subjective wellbeing or life satisfaction (*e.g.*, Al-Fayez and Ohaeri, 2011; Frisch, 1998). Frisch, Cornell, Villanueva, and Retzlaff (1992) did not think that a distinction should be made between subjective and objective quality of life. These researchers considered that the subjectivity was the most important component of the quality of life concept. In a similar line, more recent empirical studies have suggested that subjective wellbeing is determined by people's appraisals of the quality of their lives, rather than their objective life conditions (Keyes, 2009).

According to Huebner and colleagues (Huebner, Seligson, Valois, and Suldo, 2006), there is a need for reliable and valid assessment tools that are both developmentally

appropriate and sufficiently brief to be included in large-scale surveys, such as national and cross-national surveys.

Based on previous research findings, we can conclude that there is still controversy regarding the importance of considering demographic variables when studying life satisfaction in children and adolescents. Many studies have failed to find such a relationship (Huebner, 2004; Huebner, Drane, and Valois, 2000), whereas others have found subjective wellbeing to be negatively correlated with age (Gadernann, Schonert-Reichl, and Zumbo, 2010; Martin, Huebner, and Valois, 2008). In a few studies, boys have reported higher levels of satisfaction with their lives than girls; and children and adolescents in higher socioeconomic groups have reported more satisfaction with their lives than children and adolescents in lower SE groups (Levin, Currie, and Muldoon, 2009; Lindberg and Swanberg, 2006).

The Quality of Life Inventory (QOLI) is based on an empirically and clinically validated model of Life Satisfaction (Frisch *et al.*, 1992). The idea behind this Life Satisfaction model is that the degree of wellbeing is determined by the extent to which the individual has managed to satisfy his/her needs, goals and aspirations within the areas he/she considers important. According to Frisch *et al.* (1992), quality of life is the product between the importance of a particular area for the individual's quality of life and his/her current satisfaction with that area. Frisch (1998) even suggested that clinical questionnaires of well-being, quality of life, and life satisfaction might allow clinicians and researchers to assess and address a whole new realm of mental health and psychological functioning.

QOLI consists of 16 items related to different life domains (Frisch *et al.*, 1992). The respondent rates each item in two ways: according to the degree of importance and according to the degree of satisfaction with the area that each specific item addresses. Hence, the total score is the result of the satisfaction of the individual with the different areas weighted by the degree of importance attributed to these areas. In the validation of QOLI carried out by Frisch and colleagues (1992), the measure was found to have excellent psychometric properties, with test-retest reliability ranging between .77 and .89. The questionnaire was also found to have concurrent validity and high discriminative validity (Frisch *et al.*, 1992).

Although several measures of life satisfaction have emerged for use with children and adolescents over the past years, these questionnaires do not include domain-specific importance ratings, even though using domain importance as a weighting mechanism in quality of life instruments has been suggested as conceptually, psychometrically and empirically reasonable (Hsieh, 2004). Due to this, Ollendick and Davis (2001) adapted QOLI in order to tap the need for a brief psychometrically sound questionnaire for children and adolescents who were receiving therapy for different anxiety disorders. However, to date, no study has been published assessing the psychometric properties of this questionnaire with a nonclinical population of children and adolescents.

In Chile, few studies have assessed the quality of life in children and adolescents (Urzúa, Cortés, Prieto, Vega, and Tapia, 2009). In order to correct this situation, one requirement is to establish psychometrically sound questionnaires that are reliable and

valid in the Chilean context. Hence, the main purpose of the present project was to perform a study to assess the psychometric properties of «How I Feel about Things» with non-clinical children, in this particular case, Chilean school children living in the Metropolitan area of Santiago de Chile. The secondary purpose was to test its internal consistency, discriminant validity (comparing it with Depression, Anxiety and Social Anxiety questionnaires), and concurrent validity (comparing it with a related concept, assessed by a self-esteem questionnaire). Self-esteem has previously been used to assess concurrent validity of life satisfaction questionnaires (Segabinazi, Giacomoni, Dias, Teixeira, and Moraes, 2010).

Method

Participants

The sample consisted of 729 children between 8 and 14 years of age (377 boys and 352 girls), attending school in three different socio-economic areas in the region of Santiago, Chile. The age distribution was fairly even, and the children were divided into three age groups (8-10, 11-12, and 13-14), with 39.8% being in the youngest group, 32.8% in the middle, and 27.4% belonging to the oldest age group. The schools in the current sample were selected based on their socio-economic status according to the System of Education Quality Measurement (SIMCE) 2008 database (a unit of the Chilean Ministry of Education; <http://bases.simce.cl/?id=262#>). The children from the high socio-economic group (25.6%) all went to a private school in a well-accommodated neighborhood in Santiago, whereas the children from the middle socio-economic group (56.4%) went to a private school subsidized by the Chilean government in a middle-class community, and the children in the low socio-economic group (18%) went to a public school in a low-income area. This distribution is similar to that of the last CENSO (Instituto Nacional de Estadística, 2004), showing that 22.6% of the population is of middle-high and high socio-economic level, whereas 57.2% is of middle and middle-low socio-economic level, and 20.3% of low socio-economic level.

Almost 70% of the children reported they lived with both their parents (69.5%), whereas 27.5% lived with their mother only, 2.2% with their father only, and 0.8% with their grandparents or another adult. Of the 729 children, 76.8% reported they lived with two siblings or less, whereas 23.2% shared their house with three or more siblings.

Participation was voluntary, and consent was given both by the school principals and the children's parents. The children's assent was also obtained before asking them to answer the questionnaires. More than 90% of the parents gave their consent and no child declined participation in the study.

Instruments

The only questionnaire that was not available in Spanish at the outset of this project was *How I Feel about Things*. Two psychologists translated the questionnaire independently and then a committee of six bilingual post-graduate psychology students compared the two translations and agreed on the best wording for those items where

there were differences. Finally, the instrument was back-translated by a psychologist who had not been involved in the translation process, with only minor differences in the verb form used. The questionnaires that had been translated in other Latin American countries or Spain were reviewed by the above committee and only a few words were changed, in order to increase the Chilean children's understanding of the questions. As already mentioned, all of the questionnaires were tested in the pilot study, with children being specifically asked to comment on any question they did not understand. No questions had to be changed after this pilot application.

- How I Feel about Things. How I Feel about Things is a self-report questionnaire that was developed and adapted by Ollendick and Davis (2001) (both language- and content-wise) from the adult version of QOLI (Frisch *et al.*, 1992). It assesses 10 of the 16 areas of the original questionnaire: parents, siblings, cousins, home, school, teachers, friends, play, health, and self-respect. Each item is assessed in two ways: 1) On a 3-degree scale in terms of its importance for the child's happiness: 0 (*Not important*); 1 (*Important*); 2 (*Very important*); and 2) on a 6-degree scale according to how happy the child is with that domain, ranging from -3 (*Very unhappy*) to +3 (*Very happy*). The maximum total score is 6, and this score is the mean score of the child's satisfaction with all of the different scales that he or she has assigned a one or two on the importance domain multiplied by the happiness that the child has assigned to each of these. Apart from this score, scores are also reported across items that the child assigns a one or two on the importance scale.
- Child Depression Inventory (CDI; Kovacs, 1981). CDI is one of the most frequently used questionnaires to assess depression in children (Stark and Laurent, 2001). Studies of the Spanish version of CDI have demonstrated an internal consistency above .80 and satisfactory validity (Masip, Amador-Campos, Gómez-Benito, and del Barrio, 2010).
- Fear Survey Schedule for Children – Revised (FSSC-R; Ollendick, 1983). FSSC-R is a self-report questionnaire in which children are asked to rate their level of fear of each item on a 3-degree scale (*None, Some, A lot*), with a higher score indicating more fearfulness. Since Ollendick published FSSC-R in 1983 it has become one of the most frequently used questionnaires internationally to assess fears in children and adolescents. FSSC-R has been translated into Spanish and has been used both in Spain and Latin America (Valiente, Sandín, Chorot, and Tabar, 2002; Varela, Sanchez-Sosa, Biggs, and Luis, 2008).
- Social Anxiety Scale for Children – Revised (SASC-R; La Greca and Stone, 1993). SASC-R is a self-report questionnaire based on Watson and Friend's (1969) conceptualization of social anxiety. Each item is assessed on a 5-degree Likert scale according to how much the child feels that the statement applies to him/her. The Spanish version of SASC-R has been found to have good reliability and validity (Olivares *et al.*, 2005).
- Spence Children's Anxiety Scale (SCAS; Spence, 1997). SCAS was developed to assess the severity of anxiety symptoms according to the dimensions of the anxiety disorders suggested in DSM-IV (American Psychiatric Association, 1994).

Children are asked to rate how much they experience each symptom on a 4-degree frequency scale ranging from *Never* (0) to *Always* (3). SCAS has been evaluated in several studies in Australia, Europe and Latin America (*e.g.*, Essau, Sasagawa, Anastassiou-Hadjicharalambous, Guzmán, and Ollendick, 2011; Spence, Barrett, and Turner, 2003) and the Spanish version has been found to have satisfactory psychometric properties.

- School-related Self-esteem Test (Test de Autoestima Escolar, TAE; Marchant, Haeussler, and Torretti, 2002). TAE is a self-report questionnaire that assesses general self-esteem in children between 8 and 13 years of age (3rd-8th grade). TAE was developed based on a selection of items from the Piers-Harris Children's Self-concept Scale (Piers, 1984). TAE consists of 23 statements to which the children are to answer YES or NO and there are norms for Chilean children between 8 and 13 years (Marchant *et al.*, 2002).

Procedure

According to international guidelines on adapting and/or translating tests (International Test Commission, 2010), a pilot study ($n = 45$, age range 8-14) of all questionnaires was carried out before the general administration, but no questions had to be changed.

Once the school principals agreed to participate, consent forms were sent to parents of the children in the included grades. Only children whose parents gave their permission were allowed to participate in the study. The children completed the questionnaires in their classrooms, during regularly scheduled classes; research assistants were available as the children answered the questionnaires, in case they needed help or had any questions as they completed the questionnaires. With the younger children (ages 8 and 9), the research assistant read the items aloud, while the children read along silently. The children could interrupt if questions arose, and all the children were given the time they needed before moving on to the next item. Although only the instructions were read aloud in the older children's classrooms, the assistant was present to answer questions until the end of the testing. The children answered the questionnaires anonymously to reduce the risk of obtaining socially desirable answers, but prior to answering the questionnaires, the children completed a demographic information sheet with questions about their gender, age, school, grade and living conditions. It took between 45 and 60 minutes for the children to answer the questionnaires that were distributed in counterbalanced order to control for order effects.

Data analyses

All analyses were carried out with the Statistical Package for Social Sciences (SPSS) version 18.0 and the factor analysis operations were then conducted using Generalized Least Squares Estimates of Analysis of Moment Structures (AMOS 18). The internal consistency was calculated with Cronbach's α . In order to examine age, gender and group differences, one- and two-way ANOVAs were carried out. A limit was set regarding missing items on the questionnaires: respondents with 10% of missing values or more were excluded from analyses ($n = 2$). However, for smaller proportions of missing values,

the expectation maximization imputation strategy was used, as recommended by Schlomer, Bauman, and Card (2010). Pearson product-moment correlations were calculated to assess the discriminant and concurrent validities of the questionnaire, comparing *How I Feel about Things* with the other questionnaires included in the study.

Results

Factor analysis

In a previous study by Larsson (2004) based on a sample of 383 Swedish children, a two-factor solution with 5 items each was found for *How I Feel about Things*. The first factor included items assessing the children's weighted satisfaction with the most immediate areas of their life (*i.e.*, their parents, siblings, home, health and self-respect). The second factor consisted of items representing the more «external» areas of their lives (*i.e.*, cousins, school, teachers, friends and playtime). This two-factor structure was used as a template for the analyses with the current sample, and the goodness of fit was tested for a two-factor quality of life structure.

As recommended by Albright and Hyung Park (2009), multiple criteria were used to assess the goodness-of-fit. Because the chi-square is strongly influenced by sample size, and the difficulty of retaining the null hypothesis increases together with the number of cases, three other fit-indices were studied: the Root Mean Squared Error of Approximation (RMSEA), the Goodness of Fit Index (GFI) and the Adjusted Goodness of Fit Index (AGFI). It has been suggested that for RMSEA, values lower than .05 indicate a good fit and values between .05 and .08 are indicative of a reasonable fit. On the other hand, for the GFI (and AGFI), values greater than .90 indicate a good fit (Bokhorst, Westenberg, Oosterlaan, and Heynes, 2008). Based on these analyses, the two-factor quality of life structure suggested in the earlier Swedish study showed a (reasonably) good fit (RMSEA = .063, GFI = .964, and AGFI = .942) in our Chilean sample of children and adolescents.

Internal consistency

The internal consistency of the questionnaire was calculated with Cronbach's α (.68) and this was considered acceptable for the scale (Streiner and Norman, 2003). The scale was designed to assess quality of life across discrete areas; hence, higher levels of internal consistency were not expected. The factor assessing children's weighted satisfaction with the primary areas of their lives also had an acceptable internal consistency ($\alpha = .60$) whereas the factor assessing children's weighted satisfaction with the more external areas of their lives had a lower internal consistency ($\alpha = .48$), as expected. Due to the low internal consistency of the second factor, the rest of the analyses in the current paper are based on the analyses of individual items or on the total score. As the children answered the questionnaires anonymously, it was not possible to assess test-retest reliability in this study.

Normative data

In Table 1 the percentile values for the total sample of 729 children are provided together with the mean and standard deviation of the scale.

TABLE 1. Percentile values, means and SD for the total *How I Feel about Things* score.

<i>Percentiles</i>	<i>Total score</i>
5	2.15
10	2.70
25	3.60
50	4.50
75	5.10
90	5.60
95	5.70
100	5.80
M	4.27
SD	1.12

Reported quality of life

As can be seen in Table 1, the mean total score for the whole sample on *How I Feel about Things* was 4.27 ($SD = 1.12$). In order to explore the questionnaire's ability to differentiate between groups of children, three-way (Gender \times Age group \times SES group) between-group multivariate analyses of variance (MANOVA) were conducted, one separate analysis of variance for the total score and another one with the 10 items as dependent variables. Due to the large number of variables analyzed ($n = 11$), Bonferroni corrections ($.05/11 = .0045$) were used for each of these analyses.

A main effect for gender was found for School ($F_{1,711} = 13.39, p < .0001$) and Playtime ($F_{1,711} = 11.22, p < .0001$), with girls ($M = 3.84$) being significantly more satisfied with their schools than boys ($M = 3.15$), and boys ($M = 4.63$) significantly more satisfied with their playtime than girls ($M = 4.05$). Separate t -tests were run for the 10 variables and the total score, and the results of these analyses are presented in Table 2.

TABLE 2. Means (SD) for the total sample ($N = 729$), boys ($n=377$) and girls ($n=352$), and t -values on each item and on the total *How I Feel about Things* score.

<i>Item</i>	<i>Total sample</i>	<i>Girls</i>	<i>Boys</i>	<i>t-value</i>	<i>p-value</i>
1. Parents	4.95 (2.02)	4.80 (2.26)	5.10 (1.76)	2.03	.043
2. Siblings	3.65 (3.00)	3.72 (3.05)	3.59 (2.96)	-.58	.560
3. Cousins	3.63 (2.52)	3.70 (2.46)	3.56 (2.58)	-.70	.484
4. Home	4.68 (2.13)	4.46 (2.33)	4.88 (1.92)	2.67	.008
5. School	3.44 (2.42)	3.79 (2.36)	3.11 (2.43)	-3.80	.000
6. Teachers	2.85 (2.39)	2.81 (2.32)	2.89 (2.45)	.46	.646
7. Friends	4.91 (1.88)	5.05 (1.76)	4.77 (1.98)	-1.95	.052

TABLE 2. Means (*SD*) for the total sample ($N = 729$), boys ($n=377$) and girls ($n=352$), and *t*-values on each item and on the total *How I Feel about Things* score. (Cont.)

<i>Item</i>	<i>Total sample</i>	<i>Girls</i>	<i>Boys</i>	<i>t-value</i>	<i>p-value</i>
8. Playtime	4.34 (2.20)	4.01 (2.23)	4.64 (2.14)	3.87	.000
9. Health	4.57 (2.23)	4.45 (2.36)	4.69 (2.11)	1.42	.155
10. Self-respect	4.01 (2.43)	4.05 (2.54)	4.12 (2.33)	.39	.694
Total score	4.27 (1.12)	4.21 (1.14)	4.31 (1.11)	1.19	.235

A main effect for age was found for the total score ($F_{2,711} = 19.01, p < .0001$) and on five of the 10 items: Parents, Home, Teachers, Health and Self-respect (see Table 3). According to Scheffé's post-hoc test, the youngest age group (8-10 year olds) reported a significantly higher satisfaction with their Parents and Teachers than the 11-12 year olds, and this age group, in turn, had significantly higher ratings than the oldest age group (13-14 year olds). There was also a significant difference between the age groups on the total score, with the 8-10 year old children rating their general quality of life significantly higher than the other two age groups.

Furthermore, the youngest children rated their self-respect as significantly more positive than the oldest children. The 11-12 year old age group did not differ significantly from either age group. Finally, the youngest children were significantly happier with their Home and Health than the other children. No difference was found between the other two age groups on these two variables.

TABLE 3. Means (*SD*) and *F*-values for the three age groups on each item and on the total *How I Feel about Things* score.

<i>Item</i>	<i>8-10</i>	<i>11-12</i>	<i>13-14</i>	<i>F-value</i>	<i>p-value</i>
1. Parents	5.58 ^a (1.27)	4.95 ^b (2.08)	4.06 ^c (2.44)	27.34	.000
2. Siblings	3.65 (3.41)	3.73 (2.90)	3.56 (2.44)	.86	.918
3. Cousins	3.80 (2.94)	3.68 (2.21)	3.31 (2.19)	2.29	.102
4. Home	5.33 ^a (1.39)	4.36 ^b (2.24)	4.12 ^b (2.61)	19.13	.000
5. School	3.81 (2.53)	3.32 (2.23)	3.05 (2.42)	4.85	.008
6. Teachers	3.85 ^a (2.26)	2.54 ^b (2.18)	1.79 ^c (2.24)	52.81	.000
7. Friends	4.72 (1.96)	4.95 (1.86)	5.12 (1.77)	4.28	.014
8. Playtime	4.68 (2.05)	4.20 (2.28)	4.01 (2.27)	2.67	.07
9. Health	5.06 ^a (1.94)	4.36 ^b (2.32)	4.13 ^b (2.39)	10.56	.000
10. Self-respect	4.63 ^a (2.10)	4.00 ^b (2.36)	3.39 ^c (2.76)	9.87	.000
Total score	4.62 ^a (.94)	4.13 ^b (1.15)	3.92 ^c (1.19)	19.01	.000

Note: Superscripts of a, b, and c signify significant differences among groups ($p < .05$).

A main effect for socioeconomic status was found on the variables assessing satisfaction with Teachers and Friends (see Table 4). According to Scheffé's, these differences are explained by a significantly higher satisfaction with friends among children in the higher socio-economic area than among children in the two other areas,

and a higher satisfaction with teachers among children in the lower socio-economic area than among children in the other two socio-economic areas.

TABLE 4. Means (*SD*) and F-values for the three socio-economic groups on each item and on the total *How I Feel about Things* score.

<i>Item</i>	<i>SES 1</i>	<i>SES 2</i>	<i>SES 3</i>	<i>F-value</i>	<i>p-value</i>
1. Parents	5.23 (1.58)	4.81 (2.16)	4.99 (2.05)	3.22	.04
2. Siblings	4.32 (2.13)	3.48 (3.12)	3.38 (3.37)	5.24	.006
3. Cousins	4.12 (2.25)	3.41 (2.56)	3.62 (2.63)	3.67	.026
4. Home	4.65 (2.13)	4.66 (2.14)	4.74 (2.15)	0.63	.939
5. School	3.33 (2.47)	3.26 (2.45)	3.93 (2.26)	4.17	.016
6. Teachers	2.33 ^a (2.40)	2.87 ^a (2.36)	3.33 ^b (2.34)	9.37	.000
7. Friends	5.49 ^a (1.37)	4.65 ^b (2.00)	4.89 ^b (1.94)	12.47	.000
8. Playtime	4.62 (2.00)	4.28 (2.32)	4.18 (2.12)	1.88	.153
9. Health	4.42 (2.23)	4.55 (2.23)	4.77 (2.25)	.91	.403
10. Self-respect	4.21 (2.24)	3.89 (2.64)	4.38 (2.10)	3.00	.05
Total score	4.46 ^a (0.98)	4.15 ^b (1.18)	4.32 ^{ab} (1.12)	5.38	.005

Note: Superscripts of a, b, and c signify significant differences among groups ($p < .05$).

An interaction effect was found for SE status and age group on the playtime variable ($F_{4, 711} = 5.18, p < .0001$). This interaction can be explained by the fact that among children from the middle SE area, the three age groups differed significantly regarding their satisfaction with their playtime, with the 8-10 year olds ($M = 4.88$) rating their satisfaction with their playtime as significantly higher than the 11-12 year olds ($M = 4.27$), who, in turn, were significantly more satisfied with their playtime than the 13-14 year olds ($M = 3.44$). Among children in the lower SE group, no difference was found between the three age groups on this variable ($M = 4.04, 4.10$ and 4.62 , respectively). However, the 8-10 year old children in the higher SE area ($M = 4.89$) were significantly more satisfied with their playtime than the 11-12 year old children in their area ($M = 4.14$), whereas these children did not differ significantly from the 13-14 year olds ($M = 4.71$).

Validity

In order for a scale to have discriminant validity, it should show low correlations with other scales that assess related, but different, constructs. According to the findings of this study, a significant negative correlation was found between *How I Feel about Things* and four of the examined questionnaires, namely CDI ($r = -.43, p < .0001$), SCAS ($r = -.16, p < .0001$), FSSC-R ($r = -.09, p = .01$), and SASC-R ($r = -.07, p = .04$). On the other hand, for a scale to have concurrent validity, it should show a moderately high correlation with scales that assess similar constructs. This was assessed with a self-esteem measure, the TAE, and it was found that *How I Feel about Things* had a significant positive correlation with TAE ($r = .36, p < .0001$).

Discussion

There is a need for psychometrically sound brief questionnaires that assess general quality of life in children. Therefore, the main purpose of the present research was to assess the life satisfaction of 8-14 year old school children in Santiago de Chile and to explore the psychometric properties of *How I Feel about Things*.

A confirmatory factor analysis was carried out based on a two-factor solution suggested in an earlier study (Larsson, 2004). Although the goodness-of-fit indices that were obtained indicated a good fit of the suggested model, the internal consistency of one of the two factors was modest. Due to this, the analyses in this paper have been based on the individual item scores and the total score of the sample. It would be interesting to investigate the dimensionality of *How I Feel about Things* further in a future study. For this, different samples should be included and it might be of value to carry out different analyses for different age groups, considering the significant differences found between age groups on the individual item level. The comparisons between groups of children revealed that boys and girls did not differ significantly on their perceived general quality of life, even though they differed significantly on two areas of quality of life. Girls reported a higher satisfaction with their schools than boys, and boys, in turn, had significantly higher satisfaction ratings regarding their playtime than girls. The questionnaire was found to discriminate between children of different ages, with the youngest children (8-10 year olds) rating their general quality of life and several of the assessed areas significantly higher than the other age groups. They reported higher quality of life ratings regarding their parents, homes, teachers, health and self-respect than the older children. Likewise, the 11-12 year olds had significantly higher satisfaction ratings in regards to their parents and teachers than the 13-14 year olds, but these two age groups didn't differ significantly on the ratings regarding the other areas. When comparing the three socio-economic groups, the children in the higher socio-economic group reported a higher quality of life regarding their friends than children in the other two socio-economic groups. On the other hand, children in the lower socio-economic area reported a higher satisfaction with their teachers than children in the other two socio-economic areas. In the case of this particular study, this might be partly explained by the fact that the school in the lower socio-economic area had implemented programs with their teachers to enhance a positive school climate and have a warmer atmosphere than most schools of similar socio-economic level. On the other hand, the higher ratings of the quality of life as regards friends among children in the higher socio-economic area might be related to the fact that they generally live with their families in relatively safe areas where most of their friends come from a similar background, whereas there are quite a lot of problems with criminality and alcohol and drug consumption in the neighborhoods of the other two schools.

To assess the discriminant validity of *How I Feel about Things*, it was compared with other scales that assess related, but different, constructs. Although «How I Feel about Things» was found to correlate negatively with the depression scale and the general anxiety scale, the relations found between quality of life and social anxiety and fear, although significant, were modest. To assess the scale's concurrent validity, it was compared with TAE, a questionnaire assessing self-esteem, as in previous studies. This comparison revealed a significant positive correlation between the two questionnaires.

It appears that children with a higher degree of depressive symptoms, general anxiety, fearfulness and social anxiety are less satisfied with their lives. On the other hand, children who report higher self-esteem are more satisfied with their lives. However, this might also be based on a methodological weakness, related to some children having a general tendency to endorse negative versus positive statements about themselves. In a future study, it would be interesting to assess whether children's different scores are related to a general response tendency, or if their scores are related to the presence (or not) of mental health problems. On a different note, another methodological aspect that would need further investigation is the modest internal consistency of the questionnaire (.68). This might be related to the fact that the questionnaire only consists of 10 items, and the fact that these 10 items assess highly diverse areas of life. In many respects, the low internal consistency is not unexpected since it is certainly possible that children could be highly satisfied with one or more aspects of their lives but less so with others. At the individual level, in fact, the questionnaire might be quite useful in determining specific aspects of children's lives that are both satisfactory and unsatisfactory.

The decrease in reported quality of life with increased age has been seen in a few previous studies. This is probably related to the fact that children acquire an ability to de-center their experiences as they grow older, indicating that they become more able to reflect on, and question, their life situation (Trzesniewski, Kinal, and Donnellan, 2011). When acquiring this skill, they probably also start to question their quality of life and the different areas that constitute this.

How I Feel about Things was originally created to compare the self-reported quality of life in children with specific phobias with that of children with no psychological diagnosis, and also to compare the self-reported quality of life in children suffering from different kinds of psychological disorders. Another purpose of the questionnaire is to examine the effect of psychological treatment on these children's quality of life, and to explore how the children's quality of life varies before and after treatment. In order to extend the use of this questionnaire for use with other clinical populations, it is first necessary to explore the psychometric properties of the questionnaire and to have norms for the general population in the age range for which the questionnaire was designed. As a next step in this process, it would be interesting to extend the use of the questionnaire to a larger group of children from different contexts and countries, and to use it with different clinical groups to determine if quality of life varies with different psychological disorders. Finally, it would also be important to use the questionnaire with children applying for psychological treatment (*e.g.*, Griffin, Guerin, Sharry, and Drumm, 2010) to assess if the reported quality of life changes when the psychological disorder is treated.

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