



WELLBEING AS PREDICTOR OF POSITIVE PSYCHOLOGY

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ABSTRACT

The psychology of well-being aims to help people live more rewarding lives. A rewarding life consists of sense of fulfillment towards oneself, others and community or society in general that provides an overall enjoyment of one's life. The experiences of a human being in fulfilling the 3Rs' '**responsibility**', '**relationship**' and '**reflectivity**' helps in understanding, accepting, enhancing and integrating one-self.

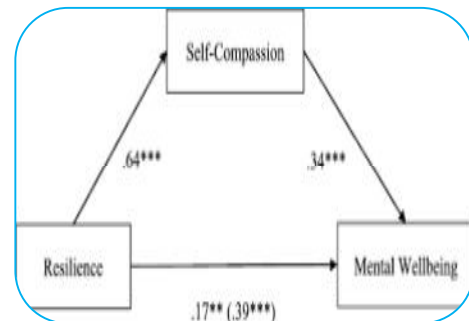
A person who is successful in this journey leads towards betterment that gives him or her sense of well-being. Subjective well-being represents people's evaluation of their lives. Hence Self evaluation is the key to subjective well being as it represents a person's evaluation of his/her life, based on the cognitive and emotional reactions.

The most prominent indicator of the sense of well-being includes life satisfaction. This refers to an individual's own global judgment of his/her quality of life, feeling of contentment and happiness. Happy people tend to have high self esteem, maintain healthy interpersonal relationships, have a meaningful religious or spiritual faith and participate in social activities. **Diener** (1984) stated that, subjective well-being doesn't appear to be related to age, sex, race and education. It has been suggested that, subjective well-being vary according to individual's dispositions, characteristics and resources. Important in this regard, stated by **Lazarus** (1993) is the ability of individuals to recognize the potential dangers associated with combining multiple roles and taking appropriate steps to deal with them before they occur.

An individual tends to go through several stages or periods of development with variation in each. In human life, adolescence is the period of physiological, psychological and social transition between childhood and adulthood. An adolescent is called as a **Teenager**. They are in pursuit of independence and personal identity that is different from parents. Peer influence is highest at this stage. At the same time, they are highly excited about new roles, commitments and the freedom which lead to conflicts, confusion, loneliness and anxiety. Though physically, cognitively, socially and emotionally highly charging, adolescent development period is especially vulnerable, with intimidating new **roles, duties and challenges**.

An adolescent is forced to adjust and engage in a balancing act she or he didn't have to perform during the early years. If the adolescent is not able to cope up or adjust effectively, the condition leads to non-adjustment or maladjustment. This age group is highly precious for human society which is in quest of excellent, liberated and mindful society. Hence each adult needs to give heed to the state of well-being and health of the potent group of people-Adolescent students on whom **the future of society** depends.

Presently adolescents have more freedom and slowly they are gaining more alternatives and looking for information relevant to create a good life for themselves and to those they love. The whole world is becoming more individualistic, and same applies to adolescents. If they lack guidance, their



individualism can create its own societal problems and threats (terrorism, frustration, high expectations and related personal, parents, peer and professional pressures). In the present circumstances if they are not given enough grounding and guidance to pursue this individualism without concern for their personal well being and others well being, the consequences are and could be destructive and damaging to the their selves and society.

As a researcher, my quest was to find answers to questions such as, how important is subjective well-being, what are the sources and resources to enhance in adolescents. The present investigation has been undertaken with main objective of Promoting Subjective well-being among adolescents through enhancement of emotional competencies as emotional competencies and their appropriate use ultimately determines the individuals' Subjective well-being.

KEYWORDS: *psychology , people's evaluation , societal problems and threats.*

INTRODUCTION

1. SUBJECTIVE WELL-BEING

For millennia, thinkers have pondered the question, what is good life? They have focused on criteria such as loving others, pleasure, or self-insight as the defining characteristics of quality of life. Another idea of what constitutes a good life, however, is that it is desirable for people themselves to think that they are living good lives. This subjective definition of quality of life is democratic in that it grants to each individual the right to decide whether his or her life is worthwhile. It is this approach to defining the good life that has come to be called "subjective well-being" and in colloquial terms is sometimes labeled "happiness."

One of the most essential and valued human quests for humans' good life is about 'human happiness'. In fact, there is an all time secretive and enduring motive for many people as **James** (1902) said, 'how to gain, how to keep and how to recover happiness'. Throughout the history, philosophers considered happiness to be the best and ultimate motivation for human action. Greek philosophers, **Plato** (427-347 B.C) and **Cicero** (106-42 B.C) stated, "happiness as harmonious functioning of man's soul and it's more of so of mind than life". It cannot be derived from any other object in the world.

Kahneman (1999) suggested on lines of simple hedonic calculus that by adding up a person's positive events in consciousness, subtracting the negatives, and aggregating over time, one will get a sum that represents that person's over-all well-being.

Greek word **eudaimonia** is properly translated as **happiness** which is the colloquial term for *subjective well being*. **Waterman** (1984) has argued that such a translation suggests equivalence between eudaimonism and hedonism, which would have been contrary to the important distinction made by the Greeks between the gratification of right desires and wrong desires. From this alternative perspective, eudaimonia is more precisely defined as "the feelings accompanying behavior in the direction of, and consistent with, one's true potential" (**Waterman**, 1984,). **Daimon**, then, is an ideal in the sense of an excellence, a perfection toward which one strives, and it gives meaning and direction to one's life.

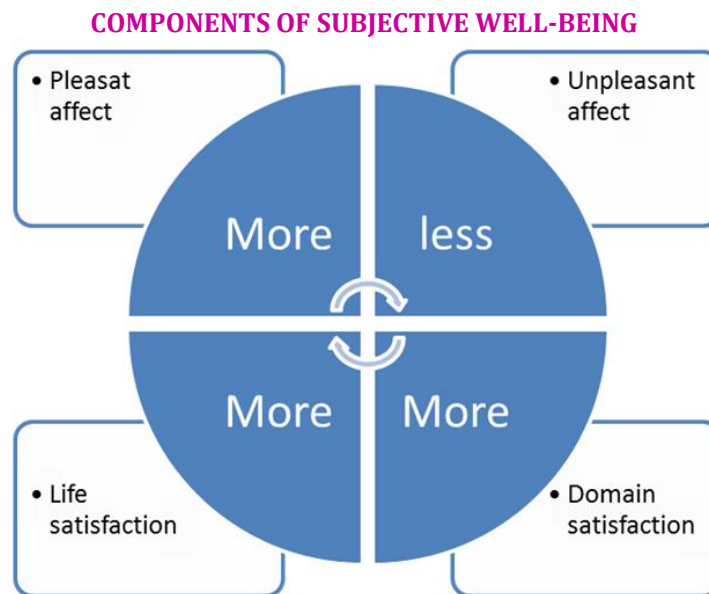
As per the **Webster's third International dictionary** happiness is "a state of well-being characterized by relative permanence, by dominantly agreeable emotion ranging in value from mere contentment to deep and intense joy in living and by a natural desire for its continuation". Thus, "**Subjective well-being**" is used as the psychological term for happiness and both the terms are used interchangeably (**Malhotra**, 2007).

According to **Health Education Authority** (1997) "mental health is the emotional and spiritual resilience which allows us to enjoy life and to survive pain, disappointment and sadness. **World Health Organization** (2004) has defined Community health as "a state of complete physical, mental and social well-being and not merely absence of disease or infirmity". It has referred to **mental health as a positive sense of well being** or state of well being in which individual realizes his/her own abilities, can cope with the normal stressors of life, can work productively and fruitfully.

Diener, (1984) defines well-being as a subjective positive emotional state with general life satisfaction. It involves the ways the individual feels about him/her self and is due to achievement of goals in life. The most common and comprehensive indicator of the sense of well-being includes life satisfaction which refers to an individual's own global judgment of his/her quality of life, feeling of contentment and happiness.

(**Diener, 1984**) Subjective well-being has been conceptualized as a broad construct, encompassing four specific and distinct components:

- ❖ **Pleasant affect or positive well-being** (e.g. joy, elation, happiness, mental health).
- ❖ **Unpleasant affect or psychological distress** (e.g. guilt, shame, sadness, anxiety, worry, anger, stress, depression)
- ❖ **Life satisfaction** (a global evaluation of one's life)
- ❖ **Domain or situation satisfaction** (self, age, work, family, leisure, health, finance.).



According to most recent and effective research works (**Diener, Suh, Lucas and Smith, 1999**): "Subjective well-being represents, people's evaluation of their lives, and includes happiness, pleasant emotions, life satisfaction and a relative absence of unpleasant moods and emotions. It is concerned with how and why people experience their lives with positive ways, including both cognitive judgments and affective reactions. In other words, whether people perceive many pleasant things, engage in interesting activities and are satisfied with their life in general- that contribute to Subjective well-being.

In The Guide lines for National Indication Subjective well-being & ill-being (**Diener, 2006**) Definitions and Assessment of the following are given.

- **Subjective well-being** refers to all of the various types of evaluations, both positive and negative, that people make of their lives. It includes reflective cognitive evaluations, such as life satisfaction and work satisfaction, interest and engagement, and affective reactions to life events, such as joy and sadness. Thus, Subjective well-being is an umbrella term for the different evaluations people make regarding their lives, the events happening to them, their bodies and minds, and the circumstances in which they live. Although well-being and ill-being are "subjective". It means they occur within a person's experience, manifestations of subjective, "well-being and ill-being" can be observed objectively in verbal and nonverbal behavior, actions, biology, attention, and memory. The term well-being is often used instead of subjective well-being because it avoids any suggestion that there is something arbitrary or unknowable about the concepts involved.

- **Positive affect** denotes pleasant moods and emotions, such as joy and affection. Positive or pleasant emotions are part of subjective well-being because they reflect a person's reactions to events that signify to the person that life is proceeding in a desirable way. Major categories of positive or pleasant emotions include those of low arousal (e.g., contentment), moderate arousal (e.g., pleasure), and high arousal (e.g., euphoria). They include positive reactions to others (e.g., affection), positive reactions to activities (e.g., interest and engagement), and general positive moods (e.g., joy).
- **Negative affect** includes moods and emotions that are unpleasant, and represent negative responses people experience in reaction to their lives, health, events, and circumstances. Major forms of negative or unpleasant reactions include anger, sadness, anxiety and worry, stress, frustration, guilt and shame, and envy. Other negative states, such as loneliness or helplessness, can also be important indicators of ill-being. Although some negative emotions are to be expected in life and can be necessary for effective functioning, frequent and prolonged negative emotions indicate that a person believes his or her life is proceeding badly. Extended experiences of negative emotions can interfere with effective functioning, as well as make life unpleasant.
- **Happiness** has several meanings in popular discourse, as well as in the scholarly literature. For example, happiness can mean a general positive mood evaluation of life satisfaction, living a good life, or the causes that make people happy, with the interpretation depending on the context. For this reason some researchers avoid using the term altogether. Some scholars in some fields use the term frequently because of its important historical and popular roots, whereas some scholars in other fields prefer to use more specific terms for the different aspects of well-being.
- **Life satisfaction** represents a report of how a respondent evaluates or appraises his or her life taken as a whole. It is intended to represent a broad, reflective appraisal the person makes of his or her life. The term life can be defined as all areas of a person's life at a particular point in time, or as an integrative judgment about the person's life since birth, and this distinction is often left ambiguous in current measures. It is preferable to instruct the respondent as to whether the question refers to his or her life since birth or to present life across all domains.
- **Domain satisfactions** are judgments people make in evaluating major life domains, such as physical and mental health, work, leisure, social relationships, and family. Usually people indicate how satisfied they are with various areas, but they might also indicate how much they like their lives in each area, how close to the ideal they are in each area, how much enjoyment they experience in each area, and how much they would like to change their lives in each area. Assessments of specific aspects of well-being and ill-being, such as feeling positive and trusting toward one's neighbors and community, and feelings of engagement at work, should prove helpful to policymakers beyond global measures.
- **Quality of life** usually refers to the degree to which a person's life is desirable versus undesirable, often with an emphasis on external components, such as environmental factors and income. In contrast to Subjective well-being, which is based on subjective experience, quality of life is often expressed as more "objective" and describes the circumstances of a person's life rather than his or her reaction to those circumstances. However, some scholars define quality of life more broadly, to include not only the quality of life circumstances, but also the person's perceptions, thoughts, feelings, and reactions to those circumstances. Indices that combine objective and subjective measures, such as happy life years and healthy life expectancy, have also been proposed.

According to **Saraswathi** (1995) Well-being of the body, mind and emotions, the sense of ethics and mortality, represent the concept of health. It is not necessarily the absence of disease. The natural harmony of the self becomes disturbed due to attractions of the senses and the world. This is due to the diversion of the mind from the inner self to an imposed outer identity. This creates an imbalance, which is reflected in one's behavior, performance, thought processes and emotional expressions. When one is happy and contented everything seems to go smoothly. But when one is unhappy or struggling to attain something that is lacking in his/her life, then one tends to lose equilibrium and clarity of mind. It is not the symptom but the cause of the disturbance that has to be treated. In the **Bible** it is said that man does

not live by bread alone. This means that instead of seeing just one aspect of one self, one has to develop a holistic view. One has to aim for total well-being. Only then can one claim to be true human being.

According to **Yadava et.al** (2007) Well-being contains many domains like physical well-being, mental well-being, emotional well-being and spiritual well being:

- ❖ **Physical well-being:** When one considers one's needs, one also has to see where the imbalances in one's lifestyle lie. These imbalances create disturbances in the harmonious structure of the body, giving birth to illness and disease. One has to identify the cause and domain to treat with appropriate skill.
- ❖ **Mental well-being:** It is experienced when a person has no subject to stress, tension, anxiety, frustration & depression, jealousy, anger, pride (control of Emotions).
- ❖ **Emotional well-being:** Emotion is a raw expression of conscious energy in the human personality which cannot be controlled intellectually all the time. Emotions are colorless in themselves, but colored by different situations, circumstances and events. One has to train oneself to divert emotions. One needs to maintain emotional harmony through channelizing emotions towards the experience of one's inner nature. In Bhagavad-Gita, it is called **Nishkamabhava**
- ❖ **Spiritual enlightenment:** It is the last state of well-being and is the outcome of total change and universal vision in attitude, interaction and behavior. Spiritual enlightenment is the outcome of .having attained physical health, mental well-being, emotional harmony and psychic enfoldment (potential to experience known and unknown, visible and invisible). Hence to attain spirituality, one must live a complete life and attain total well-being in all the aspects of personality (**Saraswathi**, 1995)
- ❖ Thus, well-being refers to the harmonious functioning of the physical as well as psychological aspects of a person as the subjective feeling of contentment, happiness, satisfaction with life experiences and of one's role of in the world of work, sense of achievement, utility, belongingness and no distress or dissatisfaction. **Yadava et.al** (2007) stated that, to attain well-being of personality, regulation of life-style is required. To regulate life-style, body requires health, mind requires well-being, emotions need to be harmonized, psyche needs to be awakened and spirit needs to be awakened. This gives rise to complete human personality.

The state of well-being in the psychological sense is defined as "good mental health" and "positive emotional state" (**Mohan and pant**, 2007). It is a state in which an individual is able to use his or her cognitive and emotional capabilities, function in society, and meet the ordinary demands of everyday life. According to **Mohan** (2003), people with healthy and wholesome personality growth and high Subjective well-being maintain a balance and coordination in the following areas:

- **Physical:** External body with a balanced nutrition, exercise and relaxation
- **Cognitive:** Right perceptions, proper learning, positive thought process and creative thinking
- **Social:** Empathetic attitude, right interpersonal interaction with people, altruism
- **Emotional:** Control and reduction of negative emotions (anger fear, anxiety, hatred and disgust etc). Enhancement of positive emotions (joy, contentment, love and interest etc).

Nagpal and Sell, (1985) defined Subjective well-being as "a composite measure of independent feeling about a variety of life concerns in addition to an overall feeling about life in positive and negative terms". They add that, both general well-being in its positive affect and general well-being in its negative affect about life are two essential factors that remain almost stable overtime that they can be called as personal traits. The individual is considered as the best judge of his/her situation and state of well-being. It is this subjective component which links quality of life to Subjective well-being.

Nagpal and Sell (1995) stated that, an individual's state of Subjective well-being is significantly influenced by the factors given below.

1. General well-being positive affect (GWBA)

This factor reflects the feelings of well being arising out of overall perception of life as functioning smoothly and joyfully.

2. Expectation-Achievement Congruence (E-AC)

This factor refers to the satisfaction and feelings of well being generated by success and the standard of living as per one's expectation.

3. Confidence in coping (CC)

This factor relates to perceived personality strength, the ability to master critical or unexpected situations. It reflects what is sometimes called positive mental health in an 'ecological sense', ie. the ability to adapt to change and to face adversities without breakdown. It confirms mental mastery or inadequate mental mastery.

4. Transcendence(T)

This factor relate to life experiences that are beyond the ordinary day to day material and rational existence. They reflect feelings of subjective wellbeing derived from values of a spiritual quality. The factor confirms rootedness and mental mastery as well.

5. Family group concern (FGC)

This factor reflects positive feelings derived from the percentage of the wider family (beyond the primary group of parents or spouse) as supportive, cohesive and emotionally attached.

6. Social support (SS)

This factor describes the social environment beyond the family as supportive in general and in times of crisis

7. Primary group concern (PGC)

This factor covers feelings about the overall wellbeing of family life (relationship with spouse, parents, siblings and cousins)

8. Inadequate mental mastery (IMM)

This factor implies a sense of insufficient control over self, inability to deal efficiently with certain aspects of everyday life that are capable of disturbing the mental equilibrium. This inadequate mastery is perceived as disturbing or reducing subjective well being due to anxiety, tension, worry, sadness, lack/low self confidence (**Bryant and Veroff, 1984**) which is related to depression and the factor irritability in neurotic out-patients described by **Lipman et.al (1969)**. This factor reflects mental mastery over self and environment.

9. Perceived ill-health (PIH)

This is a one-dimensional factor since happiness and worries over health and fitness are highly correlated, and both load significantly here. Worry over disturbed health, sleep, anxiety, tension, sadness, inability to maintain self control, are few of the aspects.

10. Deficiency in social contacts (DSC)

The common feature constituting this factor is worries about being dislikes and feelings of missing friends.

11. General well being-negative affect (GWBNA)

This factor reflects a generally depressed outlook on life.

Myers (2000) has found that, to apply and maintain the effects on Subjective well-being of both positive and negative events one needs to follow certain aspects. Otherwise the effects largely go after three months and are undetectable after six months as by that time people adapt back to their genetically determined set points. Hence to apply feelings of well-being, they need to follow aspects such as:

- ✓ **Stability:** People tend to stick to their judgment of well-being once formed though not necessarily for life time
- ✓ **Definiteness:** People decide whether to judge their life favorably or not
- ✓ **Time emphasis:** evaluation of life as a whole i.e past, present and future
- ✓ **Consciousness:** the state of really believing in it
- ✓ **Appropriateness:** the degree to which the subjective evaluation fits with the given standards of good life.

According to **Argyle, Martin, and Crossland** (1989), subjective well being is used as a psychological term for happiness and added that people are said to be happy or have high subjective well being if they are satisfied with their life conditions, experience frequent positive emotions and infrequent negative emotions. Hence subjective well-being is composed of three related components: positive affect (pleasant emotions and moods), absence of negative affect (unpleasant emotions and moods) and satisfaction with life as a whole.

Positive affect is divided in to joy, pride, affection, elevation, interest, ecstasy whereas **negative affect** is separated in to anger, guilt, depression, stress, fear etc. **Life satisfaction** is categorized by satisfaction with current life, satisfaction with past and satisfaction with future, significant others' views of one's life and desire to change one's life. People are said to have high subjective well-being if they are satisfied with their life conditions, experience frequent positive emotions and infrequent negative emotions.

Human beings, based on one's developmental period have certain specific significant developmental goals which remain the sources of satisfaction in their lives. According to **Hall** (1976) for people, the most often mentioned sources of satisfaction are family, home life, living standard, money, social relationships, social values, work and health. Again their experiences of well-being in the above should fulfill the aspects such as stability, definiteness, time emphasis, consciousness and appropriateness. According to **Diener et.al** (1984), a significant portion of stability in subjective well-being is due to one's own "**personality**".

Fredrickson (2000) stated that, subjective well-being is a positive emotional state that represents an individual's functioning on his/her personal resources ranging from physical, intellectual, psychological, social and spiritual based on independent and broadened cognitive and affective thought evaluations about variety of life concerns in addition to overall feeling of life. Promotion of such a state can be possible through enhancement of positive emotions. According to **Fredrickson's** (1993) Broaden-and-Build theory, positive emotions broaden thought-action tendencies and build the resources of an individual.

According to **Frijda**, 1988, **Lazarus**, 1991, **Ben-Ze'ev**, 2000, **Izard**, 2002 & **Schulkin et al.**, 2003, emotions function as informal information processing systems. They help us to quickly assess what is going on in our social and physical environment and decide on reactions that promote our survival and well-being. **Tobias** (1996) & **Mathews et al** (2002) stated that effective use of emotional competencies for emotional processing of information in daily experience strongly enhances human performance and well being. This has spawned a vast management coaching industry, restructured educational delivery in the public and private sectors and heightened public awareness on the importance of emotional processing in daily experience.

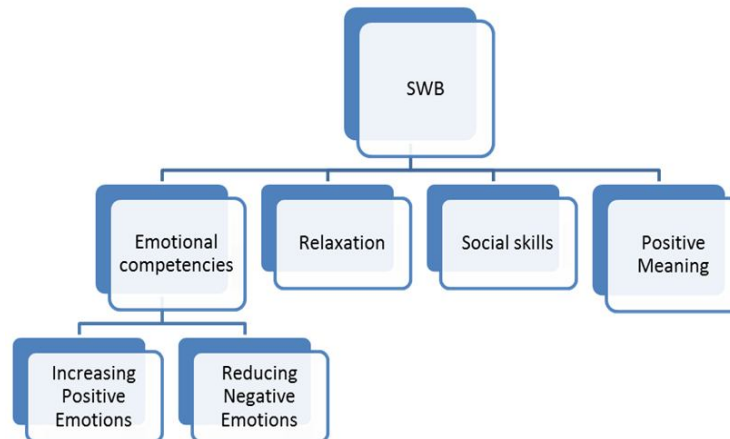
According to Diener (2004) and Feldman, (2004) high subjective well-being is extremely important since their reports mentioned the good results of it in many areas of individuals:

- Stronger immune system and live longer,
- tends to be more creative
- Better citizens at work and skip less
- Help others and highly altruistic
- More successful and earn more income
- Maintain better family and social relationships
- Better able to cope with difficult situations
- Happy with themselves and others

- High self esteem and optimistic
- More spiritual

2. Some important sources of subjective well-being are given below

- Body-mind and mind-body relaxation
- Emotional competencies
 - Increasing positive Emotions
 - Reduction of negative emotion
- Social skills with family, peer and significant others
- Finding positive meaning



OBJECTIVES OF THE STUDY

1. To study the Subjective well-being of under graduate adolescents
2. To study the emotional competencies of under graduate adolescents

RESULTS AND DISCUSSION

From the mean differences and t-ratio values in the above table, it is evident that the mean scores of the experimental group has significantly increased from the Pre-Intervention stage (PI) to Post-Intervention stage (P1) in overall Subjective well-being as well as in certain specific factors of Subjective well-being. The mean differences with t-values of factor wise Subjective well-being: SWB total-**20.68 (4.298**)**, general well-being-positive affect, **1.76 (5.408**)**, expectation-achievement congruence, **1.14 (5.832**)**, confidence in coping, **1.08 (3.689**)**, transcendence, **1.02 (4.957**)**, social support, **0.98 (4.774**)**, primary group concern, **0.74 (7.190**)** inadequate mental mastery, **1.84 (1.556*)**, perceived ill health, **0.64 (9.993**)** deficiency in social contacts, **0.64 (3.672**)** and general well-being negative affect, **1.2 (4.599**)**. The mean difference in factor family group concern was low because it was found to be maximum in the stage-1. The mean differences of other factors were found to be highly **significant and the intervention as effective**.

The results further indicate that, there is highly significant change in the experimental group **immediately after intervention program**. In **General well-being positive affect, perceived ill-health, expectation-achievement congruence, confidence in coping, transcendence, social support, primary group concern, deficiency in social contacts, general well-being negative affect and overall Subjective well-being** there is significant difference. This brings about a positive change in their outlook towards life, confidence to face problem situations, spiritual qualities, values, increased positive emotions as joy, interest, gratitude and reduced general depressed outlook towards life due to failures, limitations and ambiguities as adolescents. Youth according to **Singh and Swati (2007)** are more subjected to loss of identity, low self esteem, stress, and depression which depend on the individual, family, social relationships, health, emotional expressions, energy levels and many others.

These hamper their development and well-being. If adolescents are not well directed, their energy levels and the above can be damaging.

There is a significant difference in their ability to maintain mental mastery, by controlling and regulating negative emotions. The emotional competency, as **coping with negative emotions through self audit thinking patterns, broadened thought patterns, finding positive meaning** and techniques. These changes do prove the intervention effective as impact is highly positive. According to **Verma, Dubey and Gupta (1998)** well-being as a construct refers to the harmonious functioning as well as psychological aspects of personality, giving satisfaction to self and to society, freedom from health worry, control of distress managing and maintaining energy levels with cheerful and relaxed emotional behavior.

CONCLUSION

According to most recent and effective research works : "Subjective well-being represents, people's evaluation of their lives, and includes happiness, pleasant emotions, life satisfaction and a relative absence of unpleasant moods and emotions.

In contrast to Subjective well-being, which is based on subjective experience, quality of life is often expressed as more "objective" and describes the circumstances of a person's life rather than his or her reaction to those circumstances.

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Hence to attain spirituality, one must live a complete life and attain total well-being in all the aspects of personality ☐ Thus, well-being refers to the harmonious functioning of the physical as well as psychological aspects of a person as the subjective feeling of contentment, happiness, satisfaction with life experiences and of one's role of in the world of work, sense of achievement, utility, belongingness and no distress or dissatisfaction.

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In General well-being positive affect, perceived ill-health, expectation-achievement congruence, confidence in coping, transcendence, social support, primary group concern, deficiency in social contacts, general well-being negative affect and overall Subjective well-being there is significant difference.

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