



## Subjective Well-Being and Mental Health among Research Scholars

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### Abstract

*The present study aimed to assess the subjective well-being and to know the mental health among research scholars. This study was conducted on a sample of 88 research scholars selected through simple random sampling method from different department in Annamalai University. Subjective Well-Being developed by Nagpal R. & Sell H.(1985) was used to assess the Subjective Well-Being. Mental Health Inventory developed by Augustine was used to know their level of mental health. Statistical analysis such as mean, t-test and Pearson correlation was applied by using SPSS 16.0 version. Result revealed that there is significant positive correlation between subjective well-being and mental health. Unmarried research scholars subjective well-being is higher than the married research scholars. Further it is also found that there is no significant difference psychological well-being on the basis of gender.*

**Keywords:** Subjective Well-being, Mental health, Gender, Marital status

### INTRODUCTION

Prosperity and Mental wellbeing can influence everyday life, connections, and even physical wellbeing. Emotional wellness likewise incorporates a man's capacity to appreciate life - to accomplish a harmony between life exercises and endeavours to accomplish mental versatility. It influences as a result of negative reasoning and negative conduct. Great Mental wellbeing is imperative in each phase from early youth until late life.

Mental health is a state of mind characterized by emotional well-being, relative freedom from anxiety and disabling symptoms and a capacity to establish constructive relationships and cope with the ordinary demand and stresses of life (Goldenson, 1984).

### Subjective Well-Being:

Subjective well-being (SWB) is defined as a persons cognitive and affective evaluations of his or her life (Diener, Lucas, & Oshi, 2002).

The cognitive element refers to what one thinks about his or her life satisfaction in global terms (life as a whole) and in domain terms (in specific areas of life such as work, relationships, etc).

The affective element refers to emotions, moods and feelings. Affect is considered positive when the emotions, moods and feelings experienced are pleasant (e.g. joy, elation, affection etc.). affect is deemed negative, though, when the emotions, moods and feeling experienced are unpleasant (e.g. guilt, anger, shame etc.)

Psychological well-being is a positive mental health states and it refers to happiness and satisfaction in many ways. PWB is referred to as subjective wellbeing(Diener,2000). PWB has two important facets “Hedonic” wellbeing is used to refer to the subjective feelings of happiness and “Eudemonic” wellbeing is used to refer to the purposeful aspects of PWB and it refer to the self acceptance,environmental mastery, positive relationships, purpose in life, personal growth and autonomy.

Psychological well-being is multidimensional, and not merely about happiness, or positive emotions. A good life is balanced and whole,engaging each of the different aspects of well-being, instead of being narrowly focused. Ryff roots this principle in Aristotles’s Nichomachean ethics, where the goal of life in’t feeling good,but is instead about living virtuously.

### **Mental health:**

The term mental health refers to how a person thinks, feels, and acts when faced with life’s situations. It is how people look at themselves, their lives, and the other people in their lives; evaluation the challenges and the problems; and explore choices. This includes handing stress, relating to other people, and making decisions.

According to the World Health Organization “mental health is a state of well-being in which every individual realises his or her own potential, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to her or his community.”

### **REVIEW OF RELATED LITERATURE:**

A study was done by Afsana (2016) on mental health and psychological well-being among teachers and lecturers. The rsearch was found mean difference between teachers and lecturers in mental health and psychological well-being. The total sample was consisted of 120 teachers and lecturers. The resaerch tools for mental health scale was measured by dr. a.k. shreevastav and dr. jagdish and the psychological well-being scale was measured by bhogle and prakash (1995). The “t” test is applied to check the significance of mental health and psychological well-being in teachers and lectueures to check the method which was used for test. The result shows, there is no significant difference between teachers and lectuers in mental health and psychological well-being.

Students well-being is a concept that is multi-dimentional. A study was done by Negovan (2010) to understand dimentions of students psychological well-being. In their cuurent study, they found that psychological well-being had four dimentions: subjective well-being related to every day’s events, subjective well-being related to faculty events, psychological well-being and social well-being. The sample for the validation study consisted of 449 university students at the faculty of psychology and educational sciences, university of bucharest, romania.

A study was done by Schimmack, and Diener (2003) on the predictive validity of explicit and implicit self-esteem for subjective well-being, with 141 students at the university of Illinois,

Urbana-Champaign. They found that explicit self-esteem predicted subjective well-being (SWB)

### Objectives

- To assess the subjective well-being of research scholars
- To identify the level of mental health of research scholars
- To find out the subjective well-being and mental health on the basis of demographic variables among research scholars
- To find out the significant relationship between subjective well-being and mental health of research scholars.

### Hypotheses

- There is no significant difference between subjective well-being and mental health on the basis of their age group
- There is no significant difference between subjective well-being and mental health on the basis of their gender
- There is no significant difference between subjective well-being and mental health on the basis of marital status
- There is no significant difference between subjective well-being and mental health on the basis of family
- There is no significant relationship between subjective well-being and mental health of research scholars

### METHODS:

**Sample:** 88 sample were collected by random sampling technique from a Annamalai University.

#### Tools used:

**Subjective Well-Being Inventory (SUBI) developed by Sell and Nagpal, (1985)** was used for data collection. These tools measures feelings of wellbeing experienced by an individual in day -to day life concerns. It consists of 40 items, measuring 11 factorial dimensions: general wellbeing positive and negative effect, expectation-achievement congruence, confidence in coping, transcendence, family group support, social support, primary group unconcern, inadequate, mental mastery, perceived ill-health, deficiency in social contact, higher score indicate more subjective well-being.

**Mental Health Inventory (MHI) developed by Augustine (1978).** These tool measure the mental health of an individual on four dimensions: self, others, environment and life. It consists of 60 statements. The subject is asked to show his agreement or disagreement to the content of the statement by giving a simple “YES” or “NO” answers.

#### Procedure of data collection:

The University research scholars were selected purposively from Annamalai University students of TamilNadu. First of all permission has been taken from the authority of the University. After getting permission dates and time were fixed according to their convenience for collection of data. At first a proper rapport was established with the respondents. Then the sociodemographic information's were collected from each respondent. Later the scales of subjective well-being and mental health questionnaire were administrated on the respondents. In this manner 88 data were collected from the research scholars of the Annamalai university.

**RESULTS AND DISCUSSION:**

**Table 1: Correlation coefficient scores of subjective well-being and mental health of research scholars**

Variable	Mental health
Subjective well-being	0.397**

\*\*Correlation is significant at the 0.01 level (2-tailed).

From the table 1 it is observed that subjective well-being is positively related with mental health (0.397) which is significant at 0.01 level. Thus it can be inferred that there is a positive relationship between mental health and psychological well-being of research scholars. Therefore the formulated hypothesis that there is no significant relationship between research scholars subjective well-being and mental health is rejected.

**Table 2: Showing the Mean, Standard Deviation scores of subjective well-being and mental health of research scholars on the basis of gender.**

Variable	Gender	N	Mean	SD	t-value	Level of significant
Subjective well-being	Male	60	84.43	10.448	.53	Not significant
	Female	28	85.75	11.211		
Mental health	Male	60	38.88	7.68	.26	Not significant
	Female	28	36.43	7.42		

Table 2 shows the mean, standard deviation, t-value of research scholars of subjective well-being and mental health on the basis of gender. The subjective well-being of male scholars was found ( M=84.43, SD=10.448) respectively, and female scholars was found (M=85.75, SD=11.211) respectively. The mental health of male scholars was found (M=38.88, SD=7.68) respectively and female was found (M=36.43, SD=7.42) respectively. female subjective well-being mean value is higher than the male mean value and male mental health mean value is higher than the female mean value. The obtained t-value .53 and .26 is statistically not significant. Therefore the formulated hypothesis that, there is no significant difference subjective well-being and mental health on the basis of gender is accepted.

**Table 3: Showing the Mean, Standard Deviation of subjective well-being and mental health of research scholars on the basis of their age.**

Variable	Age	N	Mean	SD	F-value	Level of significant
Subjective well-being	23-27	50	87.00	11.174	2.47	Not significant
	28-32	33	82.21	9.749		
	33-37	5	80.80	6.419		
Mental health	23-27	50	37.30	7.728	.34	Not significant
	28-32	33	36.12	7.236		
	33-37	5	35.20	9.121		

The subjective well-being and mental health scores of research scholars on the basis of age were analysed and are given in the table 3. The subjective well-being of mean, SD scores of 23 to 27 years age group scholars was found ( M=87.00, SD=11.174) respectively. 28 to 32 years age group scholars was found (M=82.21, SD=9.749) respectively and 33 to 37 years age group scholars was found (M=80.80, SD=6.419) respectively. The mental health of mean, SD scores of 23 to 27 years age group scholars was found ( M=37.30, SD=7.728) respectively, 28 to 32 years age group scholars was found (M=36.12, SD=7.236) respectively and 33 to 37 years age group scholars was found (M=35.20 SD=9.121) respectively.

The 23 to 27 years age group research scholars of subjective well-being and mental health is higher than the 28 to 32 years age group and 33 to 37 years age group. The obtained F-value 2.47 and .34 is statistically not significant. Therefore the formulated hypothesis that, there is no significant difference subjective well-being and mental health of research scholars on the basis of their age is accepted.

**Table 4: Showing the Mean, Standard Deviation of subjective well-being and mental health of research scholars on the basis of marital status.**

Variable	Marital status	N	Mean	SD	t-value	Level of significant
Subjective well-being	Married	16	79.38	6.908	2.33	Significant
	Unmarried	72	86.07	10.983		
					1.16	Not significant
Mental health	Married	16	34.75	6.894		
	Unmarried	72	37.18	7.677		

Table 4 shows the Mean, Standard Deviation, t-value of research scholars subjective well-being and mental health on the basis of marital status. The subjective well-being of the married scholars was found (M=79.38, SD=6.908) respectively, unmarried scholars was found (M= 86.07, SD=10.983) respectively. The mental health married scholars was found (M=34.75, SD=6.894) respectively and unmarried scholars was found (M=37.18, SD=7.677) respectively. The unmarried subjective well-being mean value is higher than the married mean value. The obtained subjective well-being t-value 2.33 is statistically significant. Therefore the formulated hypothesis that, there is no significant difference subjective well-being on the basis of marital status is rejected. The unmarried mental health mean value is higher than the married mean value. The obtained mental health t-value 1.16 is statistically not significant. Therefore the formulated hypothesis that, there is no significant difference mental health on the basis of marital status is accepted.

**CONCLUSION:**

In this study it is concluded that subjective well-being is positively related with mental health. Result found that unmarried subjective well-being mean value is higher than the married mean value. Subjective well-being is an overall assessment of feelings and attitudes about one’s life at a particular point of time ranging from negative to positive and involves subjective evaluation of one’s current status in the society. Moreover the study shows that subjective well-being and mental health are related i.e. good mental health will lead to subjective wellbeing and psychological well-being will improve the mental health. Well -

being helps in developing positive relationship with others and establishes better adjustment with healthy environment.

### **Implications:**

The (WHO) defines health as a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity.” Thus, in order to attain health, improvement of the mental health of individuals is essential. This is all the more important because mental disorders are responsible for a high degree of burden due to illness. Owing to this growing burden of mental disorders, it is essential that effective preventive and promotional measures be taken in mental health to reduce the impact of mental disorders on the individuals and society.

### Ways to improve your mental health and well-being

- Practicing relaxation techniques such as meditation and yoga
- Mindfulness techniques are helpful to manage anxiety and negative or intrusive thoughts.
- Promote healthy lifestyles including nutrition and exercise.

The message that there is no wellbeing without emotional wellness is deserving of notice. emotional well-being is firmly identified with physical wellbeing, mediations for advancing psychological well-being, for example, stretch administration, will likewise enhance physical wellbeing. With the expanded enthusiasm for psychological wellness and its administration, emotional well-being advancement and avoidance of ailments have moved toward becoming foremost difficulties for specialists notwithstanding the treatment of dysfunctional behaviours.

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