Positive self can help you achieve success if you listen to the things you say to your self inside your head. You might agree that you would be offended of those same remarks come from a friend or stranger. Many people that find it hard to achieve success find they do not have a good self. In fact they often find that most of the words they say to themselves are not only negative they are completely degrading and detrimental to success. Positive self is a personal reaffirmation indicating you are doing a good job, you are competent, you socialize well or you are good looking. It can be about any fact of your life. Of course, in most cases those spewing negative self truly believe the garbage they tell themselves, which is even sadder. If there is any one on the face of the global important to be friend, it is you. You spend the most time with yourself and you are constantly whispering in your own ear so you have the most influence. After all, if you do not like you are self or treat yourself with respect, which will?

Dagger and Gyungbuk investigated comparative study on life satisfaction between older population in institution and home. The results were summarized as follow, the elders in institution revealed lower scores in life satisfaction than the elders at home. The general characteristics, which affected the life satisfaction scores, were educational level and health status.

In the most part of the world women, live on average, longer than men. Even so, the disparities vary between.
A year or more in countries such as Sweden and united state. No difference or higher life expectancy for men in countries such as Sweden and united state. No difference or higher life expectancy for men in countries such as Zimbabwe & Uganda.

Tiajaclyn Wallace (2003) investigated various variables (exercise, ethnicity, gender, socio-economic status and retirement) had an effect on the quality of life in on individual’s age 65 years of age and older. Results revealed that significant differences between low exercise and high exercise, physical component and mental component, Life satisfaction.

Nilson, Ingeborn (2006) overall aim of this thesis was to study aspects of occupational engagement among older people, with a special focus on evaluation of the experiences of an occupation-based group programme, evaluation of leisure, the leisure repertoire, and the relation between occupational engagement and life satisfaction. The results revealed that very old people were more likely to endorse Social and Cultural activities and least likely to endorse Ballgames and Equipment sport. Traditional gender differences and some differences between older persons in rural versus urban areas and between persons with different cognitive levels were also found. Finally, significant correlations were found between life satisfaction and both engagement in ADL (r =.31) and engagement in leisure (r =.34) among very old people. A forced entry regression revealed the both variables together explained slightly more (12.4%) than leisure alone (11.2%).

capacity, feeling lonely, physical activities and financial resources among people (65+) with reduced self-care capacity. Background: Knowledge about factors related to low life satisfaction among older people with reduced self-care capacity is sparse, although this is important in health care and nursing so that the care is adapted to their needs and perspective. Previous research has mainly focused on isolated aspects such as pain in relation to life satisfaction among older people in general and less among those with reduced self-care capacity in general. Results: The mean age in the total sample was 77.9; women (79.5) were significantly older than men (77.0) were. Low life satisfaction was found among women, as well as those living in special accommodations. Life Satisfaction Index Z was 15.3 (SD 5.6) in the total sample. Gender and living conditions did not explain life satisfaction whilst poor overall self-reported health and poor financial resources in relation to needs had the strongest explanatory value. Also of significant importance were loneliness, the degree of reduced self-care capacity and feeling worried. Conclusion: Life satisfaction in older people with reduced self-care capacity is determined by several factors, with social, physical, mental and financial aspects probably interacting with each other; especially feeling lonely, degree of self-care capacity, poor overall health, feeling worried and poor financial resources in relation to needs. These factors need to be considered in the care of these people to preserve or improve their life satisfaction.

Berh et al (2006) examine the relationship between health related factors and life satisfaction among individuals 80 and above. They show that objective health measures have no significant effect on life satisfaction; where as perceived health has a moderate effect. Indeed, once health is controlled for, age has no impact on life satisfaction like wise; Borg et al (2006) using data from the European study
Hjalmarson, Hanna (2007) study material value is an elusive concept, which seems to vary in structure and level across age groups and gender. This study examines these variations in relation to satisfaction with various life domains. The strongest correlations are found between the various sub-components of material values and satisfaction with advertising and the media, especially for young consumers. For this age group (with the exception of teenage girls), the relations between material values and satisfaction with various life domains are moreover positive, whereas they are negative for adults.

Clark (2007) identifies a robust U shaped relationship even after controlling for individual heterogeneity. Like wise in their study using 1972-2006 data from the U.S general social survey and 1976-2002 data from Euro barometers. Blanch flower and Oswald (2008) show that, even after they controlled for cohort effects, happiness is indeed U-shaped through out the life course. In contrast based on data from the world Gall up pall. Deaton (2007) finds that, internationally, age has on in consistent relation with happiness; the U shape is found only in rich English speaking countries. The author therefore argues that period on cohort effect are specific to countries or groups of countries 4. He does not to compare his results with those of other studies.

Other scholars also shown no age-related decline in life satisfaction (Larson, 1978; Herzog and Rodgers, 1981; Horley and Lavery, 1995; Diener & sun, 1997; Smith et al, 1999; Schilling, 2005; finds that in general, there is an overlay of age
and cohort-related decline in the trajectories of life satisfaction for individuals in young-old age and that once cohort effects are controlled for a decline in life satisfaction is observable across old age.

Like wise, drawing on data from the survey of health and living status of the elderly in Taiwan, Chen’s (2001) study of the aging process and life satisfaction concludes that not only the age effect but also cohort experiences have an impact on life satisfaction. This finding is to a certain extent supported by Mrocze & Spiro’s (2005) analysis (based on longitudinal data from the veterans affairs normative aging study) of age and cohort effects among male war veterans, which shows not only that life satisfactions peaks at around 65 years but also that impending death is associated with a decline in life satisfaction that is not attributable to 9self-related) physical health.

An ELSA Age Concern report (2008), for example, found life satisfaction is higher for older people living with others than for those living alone, even though they have worse physical health. Various factors are known to be associated with the well-being of people living alone and this has been reflected in the focus of the extant literature.

Gender differences have been investigated by Age Concern (2008), who found Amongst women, 54% of those living alone perceived their health as fair/poor Compared with 32% of those living with others, with this difference not found in Men, although men aged 80 and over living alone report higher loneliness than Those not living alone. Women have been found to suffer more from multiple Social exclusion than men, possibly due to their greater longevity.
Age Concern, (2008) Divorced and never-married women who live alone have been found to be at greater risk of poverty and have poorer quality housing (Carp, 2001). Some research has been undertaken to investigate depression in those living alone. Some found living alone results in increased depression (Schulman, Gairola, Kuder & McCulloch, 2002), while others found those living with others reported higher levels of depression (Gustavson & Lee, 2004). There is reason to believe that some significant sub-groups of older people may be at risk of poor well-being if living alone,

Roding, Jenny (2009) The aim of this thesis was to describe and analyze the consequences of stroke in the younger population in terms of experiences of the rehabilitation process, return to work, self-reported physical and cognitive function and life satisfaction. Sex differences, as well as gender specific associations regarding factors of importance for return to work, deteriorated physical ability and satisfaction with life as a whole, were also studied. Data collected from a questionnaire answered by 1068 individuals, 18-55 years old with a first ever stroke registered in Risk-Stroke. In conclusion, younger individuals who have experienced a stroke feel frustrated and invisible due to the fact that their needs are not acknowledged. Age and gender have an impact on outcome of present rehabilitation programs and the problems of younger persons with stroke can be detected at an earlier stage by developing appropriate instrument and delivering information directly aimed at physical functioning

Gwozdz and souse-poza (2009) used data from the German socio-economic panel (GSOEP) and the survey on health, aging and retirement in Europe (SHARE) to assess the effect of ageing and health on life satisfaction of the oldest old
(defined as 75 and older) they observed a U shaped relationship between age and levels of life satisfaction for individuals aged between 16 and approximately 65. Thereafter life satisfaction declines rapidly and the lowest absolute levels of life satisfaction are recorded for the oldest old. This decline is primarily attributable to low levels of perceived health.

New study published in the Journal of Aging Research (2012) older people has greater life satisfaction than their younger counterparts, which found healthy individuals in this demographic often report less negative thinking when compared against other age groups. According to the investigation, the onset of depression can be influenced by variations in the way different generations think, with those who fixate on issues without taking action becoming more prone to depressive episodes. Research from the field of Positive Psychology has posited an average eight year greater life expectancy and better general health for the more optimistic, so do these findings reflect the fact that pessimists die younger, skewing the balance towards a more positive, happy oldest generation.

Anna Mafikeng's, Ulla Kinnunen (2002) the study investigated the roles of self-esteem and optimism in the relationship between psychological work stress and well being for a sample of Finnish employees. The results of the moderated hierarchical regression analysis revealed that low levels of self-esteem and optimism had a direct negative effect an emotional exhaustion and mental distress among men employees. Self-esteem moderated the relational between poor organizational climate and emotional exhaustion and mental distress among male employees. Among female employees, optimism moderated the relationship between time pressure at work, job security and poor organizational climate on mental distress. Self-esteem and optimism are important resource, which both have main effect as well as moderate effects on well being, although these effects are gender specific.
Salsali and Silverstone (2006) argue that self-esteem increased with age. Lowered self-esteem in students, may reflect their current position in their life cycle in terms of financial security, respect, social position and prestige. Which are known to impact on self-esteem? However, the results also highlight the need for further normative data on the Robson self-concept questionnaire. Gender bias is an artifact of the RSCQ or reflects genuine gender difference in self-esteem.

Jungmeen Kim and Dante Cicchetti (2006) this study showed that latent growth modeling to investigated longitudinal relationship between self-esteem process and depressive symptoms among maltreated and non-maltreated children aged (6-11yrs). On average self-esteem and self-agency increased and depressive symptoms decreased over time. Multivariate growth modeling indicated that, regarded of gender physical abuse was negatively related to initial level of self-esteem and physical abuse and physical neglect were positively associated with level of depressive symptoms. Emotional maltreatment was predictive of change in self-esteem and depressive symptoms. The finding contributes to enhancing our understanding of the development process where by early maltreatment experiences are linked to later maladjustment.

E.K Ulla, Westerlund, joakim Holmberg, Kirsten.(2008) the objective was to analyze self-esteem in children (10-11 yrs ) with in a spectrum of attention disorder, that is besides attention deficit hyperactivity disorder(ADHD), also children with sub threshold ADHD and even milder attention deficits and learning problems. The results were significant gender differences were found girls reporting lower self-esteem concerning mental well-being and poor relationship with parents and peers. However, children with ADHD/sub threshold
ADHD did not report significantly lower global self-esteem when compared to a Swedish municipality.

Schraml, Karin, Perski, Alexander, Simonsson-sarnecki, Margareta (2008) the aim of this study were to survey the incidence of stress symptoms among 16 yrs old to investigate the related gender difference and to understand the factors that May contributes to stress symptoms. The study is questionnaire based and the sample included 304-fist year high school students from two comparable schools. The results reported that more than 30% of the students reported serious stress symptoms. Almost every second girl and every fifth boy reported that they felt stressed to a high degree 82% were found to have serve stress symptoms. Beside The perception of high demands low level of global self-esteem, sleep disturbances and poor social support played crucial role in the prediction of stress symptoms.

Diamantopoulos, Sofia, Rydell, Ann-marget (2008) they studied that can both low and high self-esteem is related to aggression in children? The main results showed that both low levels of global self-worth and exaggerated but disputed self-esteem were related to aggression. The finding indicated that, depending on how self-esteem is conceptualized, aggressive children may appear to have both a low and a high self-esteem. Regarding gender differences, exaggerated self-esteem was more strongly to aggression in boys than in girls.

Maksnes, Unnik (2010) cross-sectional study investigated gender differences on domain of stress, self-esteem and emotional state (depression & anxiety). The results showed that girls had significantly higher mean scores on all stress domains and on emotional state compared with boys.
.Hill & Argyle, (2001) happiness is a multi dimensional construct comprising of emotional and cognitive element. He presents a triplicate conceptualization of happiness consisting of the average level of satisfactions over a specific time, frequency& degree of positive affect and the relative absence of negative affect. Researchers have identified three distinct results routes to happiness. Positive emotion and pleasure, engagement and meaning.

Neto (2001) studied the personality predictor of happiness and the results showed predicted positive correlations for happiness with satisfactions with life, self-esteem and sociability & negative correlations of happiness with embarrass ability, lonelinesss, shyness and social anxiety four predicators (satisfaction with life, shyness, loneliness ad sociability) accounted for 58% of the variance in happiness scores.

Swinney (2002) described and examine the relationship among self-esteem, locus of control and perceived health status in African Americans with cancer and to identify predicators of perceived health status. A significant positive relationship was discovered between self-esteem powerful other health locus of control (p<.05) participants tended to view god as powerful other capable of influencing their health and well-being. Self-esteem and an internal health locus of control were found to account for 23%of the perceived variance in health status. In addition, interview data indicated that participants with normal to high level of self-esteem and on internal health locus of control perceived their status of health and well-being positively.

Natving, Albrektsen and overnstrom (2003) studied the association between psychosocial factors and happiness among school adolescents. Results showed an
increasing degree of stress experience reduced the feeling of happiness significantly. Further more, increasing levels of general self-efficacy increased the odds of feeling, happy, where as the more specific measure of school self-efficacy showed no independent effect. Social support from teacher also enhanced happiness significantly. A less consistent pattern was found for support from peers but the happiest pupils experienced significantly, more support than pupils who reported being unhappy. No significantly, trend was found with decision control. We also explored associations between happiness and psychosomactic symptoms. Pupils feeling unhappy reported particulars symptoms more often and they also had the highest mean number of reported symptoms to evaluate whether these health indicators represent different dimensions of health; a comparison of strength of association with common risk factors is made.

Stokes, Frederick (2003) examined the relationships between body, image and happiness in adult women. Results indicated that happiness significantly and positive correlated with the three components of body esteem, sexual attractiveness, weight concern and physical condition. There were no significant differences among the types of body satisfaction expressed by women of different ages.

Menec (2003) studied the relation between every day activities and successful aging; a 6year longitudinal study. Results indicated that greater over all activity level was related to greater happiness, better functions and reduced mortality. Different activities were related to different out come measures: but generally, social and productive activities were positively related to happiness, function and mortality, where as more solitary activities (e.g. hand-work hobbies) were related only to happiness.
Furnham and Petrides (2003) studied relationship with trait emotional Intelligence and happiness while investigating the association of happiness with cognitive ability and trait emotional intelligence. Trait emotional intelligence was found to be positively associated with happiness. Cognitive ability was not related either to happiness or to trait emotional intelligence. This study showed that a large amount of variance in happiness is determined by people’s emotions related perceptions and disposition like, for example emotional regulation relationship skills and social competence. as in 2003, Brackett and Mayer reported that emotion affects behavior because it correlates with positive social relationships.

Lyubomirsky,king and Diener (2005) studied the benefits of frequent positive affect:does happiness lead to success? The results reveal that happiness is associated with and precedes numerous successful outcomes, as well as behaviors, paralleling success. Furthermore, the evidence suggests that positive affect the hallmark of well-being may be the cause of many of desirable characteristics; resources and successes correlated with happiness, limitations empirical, is success and important future research question are discussed.

Subranian, Kim and kawachi (2005) investigated individual level determinants of self-rated health and happiness, as well as the extent of community level covariation in health and happiness. Results revealed that the controlling for demographic markers a strong income and education gradient was seen for self-rated poor health and unhappiness, with the gradient being stronger for poor health. Community level correlation between self-rated poor health and happiness
were stronger (0.65) than the individual level correlation (0.16) between the two outcomes.

Gannan and Ranzijn (2005) predict unique variance in life-satisfaction beyond IQ and personality. Warner and Bosco (2005) reported that couples who are both low in emotional intelligence report less happiness in their dating relationship.

Bray & Gynnell (2006) studied suicides rates, life satisfaction and happiness as marker for population mental health. Results shows that an inverse association exists between suicides rates and life satisfaction ($r=0.44$; 95% CI:-0.68,-0.11) and happiness ($r=0.42$ 95% CI:-0.67, 0.08) similar though weaker associations were seen with hospital discharge data and MHI-5 data but not with the prevalence of mental disorders. The association between suicides rates and life satisfaction was weaker amongst +15-44 year olds than amongst 45-65 years olds. it was strongest in the 65+age group. A similar pattern was observed for the association with happiness, in a sub group analysis the association between suicide and life satisfaction in eastern European as similar to that in the whole data set but a positive association was seen in investor Europe.

Ozer and Benet (2006) studied personality and prediction of consequential outcomes using Big five factors as heuristics for organizing the research literature, numerous consequential relations are identified. Personality dispositions are associated with happiness, physical and psychological health, spirituality and identify at an individual level associated with the quality of relationship with peers, family and romantic others at an interpersonal level and associated with occupational choice, satisfaction and performance as well as community, involvement, criminal activity and political ideology at social institutional level.
Tamra Sillick and Nicola’s (2006) research explained the extent to which perceived parental love is associated with happiness level in adulthood and investigated whether emotional intelligence and self-esteem mediate the relationship. Emotional intelligence and self-esteem were related to both perceived parental love and happiness. The relational between perceived parental love and happiness were mediated by emotional intelligence and self-esteem. When perceived maternal and paternal love was explained separately, maternal love was positively associated with adult happiness with mediation through higher emotional intelligence and self-esteem. While early paternal love had a direct association with adult happiness. There was no mediating effect to self-esteem or emotional intelligence. also only maternal love made a unique contribution to predicting adult happiness, suggesting that perceived love received from a mother during childhood may be particularly important to the development of happiness.

Amal jugdish (2006) aimed at exploring and finding the correlation among emotional intelligence, happiness and self-confidence in university students. They also investigated the effect of gender on emotional intelligence, happiness and self-confidence. Their revealed that emotional intelligence was positively related to happiness and self-confidence, further the results indicated that there existed no significant mean differences in total scores on emotional intelligence and happiness and self-confidence due to gender.

Chamorro-Premuzic, Bennett and Furnham (2007) found that the four of big-five factors, namely stability, extraversion, conscientiousness and agreeableness were positively correlated with both happiness and trait emotional intelligence. Which explained 18% of unique variance (over and above age and big five?) in
happiness. Further a significant amount of shared variance between happiness and big-five was explained by trait emotional intelligence which partly mediated and path from stability and conscientiousness to happiness and fully mediated the link between agreeableness and happiness.

Adrian Furnham and Lrene Christoforous (2007) indicated through their study which set out to re-examine the predictors of self reported trait happiness types. It was hypothesized that extraversion and neuroticism would be respectively positively and negatively correlated happiness and trait emotional intelligence would be positively predictors of happiness. It was hypothesized that specifically individual difference variable (extroversion, trait emotional intelligence, religious, neuroticism) would be predictive of different happiness conditions or motivations. They found that neuroticism was not a significant predictor of negative happiness, this study demonstrated that higher trait emotional intelligence and extraversion are predictive of over all happiness and most happiness type, although other factors ;like religiousness also important. Permrzic, Bennet and Furnham (2007) found emotional intelligence as a predicator of happiness.

Padela and Heisler (2010) studied the association of perceived abuse and discrimination after September 11, 2001, with psychological distress, level of happiness and health status among Arab, American. Results suggest that over all 25% of the respondents, reported post September 11 personal or familial abuse and 15% reported that they personally had a bad experience related to their ethnicity, with higher rates among Muslims than Christians. After adjustment for socioeconomic and demographic factors. Perceived post September 11 abuse was associated with higher levels of psychological distress, lower level of happiness
and worse health status. Personal bad experiences related to ethnicity were associated with increased psychological distress and reduced. Happiness perception not being respected effect of September-11 with respect to personal security and safety were associated with higher level of psychological distress.

Hafen Christopher, Kamlesh Singh and Brett Laursen (2010) examined the relation among the Big-five-personality trait, emotional intelligence and happiness of male-female university students. Their finding revealed that specifically for females, emotional intelligence mediated association from conscientiousness and emotional instability to happiness, while males evidenced only direct associations. The finding suggests different association than those of past studies regarding personality and happiness in western sample. According to this study, results from an Indian sample emotional intelligence may serve as an intermediary from personality to happiness for females. But has but has independent contributions to happiness for males.

Meetu Khosla and Vandana Dokania (2010) examined the influence of happiness on experienced affect, emotion regulation and emotional intelligence. Happy as compared to unhappy men had significantly greater in emotional intelligence. Similarly happy women were found to be more emotionally intelligent than unhappy women. The findings revealed the significance of happiness in promoting emotional intelligence.

With this much background, we may pass on to next chapter dealing with problem and hypotheses of the investigation.