Review of research literature:

Researchers have long been interested in the scientific analysis of how people evaluate their lives in their lives and judgments related with life satisfaction. These two types of evaluations are interrelated and have been together called subjects well being or happiness. As such all the studies that have been made for studying subjective well
being way also be taken to be studies of what may be called happiness or life satisfaction. Further, a concept closely related to happiness and life satisfaction in that of perceived quality of life. It may be argued that life satisfaction and happiness are the outcomes of a good quality of life. As such, studies investigating the relationship between personality factors and perceived quality of life are also of relevance in this context. In the present of life are also of relevance in this context. In the present review attempt has been made to trace the history of research on subjective well-being or life satisfaction and then to summarize those researches that have been made to find out the relationship of life satisfaction with personality traits and dimensions and demographics.

Others. Throughout history, philosophers and religious leaders have suggested that diverse characteristics, such as love, wisdom and non-attachment are the cardinal elements of a fulfilled existence. Utilitarian such as Jeremy, Bentham, However argues that the presence of pleasure and the absence of pain are the defining characteristic of a good life (1789/1948). Thus the utilitarian were the intellectual forerunners of subjective well-being.
Researchers, focusing on the emotional, mental and physical pleasures and pains that individuals experience. Although there are other desirable personal characteristic beyond whether a person is happy the individual with abundant joy has one key ingredient of good life.

Early in the 20th century, empirical studies of subjective well being began to take shape. As early as 1925, Flugel studied moods by having people record their emotional. Flugels work was the founder of modern experience sampling approaches to measuring everyday lives. After world war II, survey researches began polling people about their happiness

and life satisfaction using simple global survey questionnaires see Snyder & Lopez, 2002. The pollsters studied large numbers of people who were often selected to produce representative samples of nations.

George Gallup, Gerald Gurin and his colleagues and Hadley Cantril pioneered the use of large scale surveys as an assessment technique. They asked people questions such as "How happy are you"? with simple response options varying from "very happy" to "not very happy". Recently Deiner (2000a) proposed that a national index be created in which subjective
The elimination of pain may not result in a corresponding increase in pleasure, ridding the world of sadness and anxiety will not necessarily make it a happy place.

Wilson reviewed the major amount of research on “avowed happiness” in 1967 and Diener (1984) provided a review of the much larger database on subjective well
being that had accumulated by the mid 1980 by that time the filed was published a number a science singe Diener’s review was published a number of books have appeared on the topic of subjective well being (e.g. Aargyle, 1987: Mayers, 1992; strack, Argyle & Schwarz, (1991) and in 1999, Diener, suh, Lucas and smith authored a new review of the literature in psychological bulletin. A handhook volume of chapters related to hedonic psychology (Kahneman, Diener & Schwarz, 1999) and a book dedicated to cross cultural differences in subjective well (Diener & Suh, 2000) provide more thorough reviews of this area.

The scientific discipline of subjective well being grew rapidly one reason for this is that people in the western nations have achieved a level of material abundance and health that allows them to go beyond mere survival in seeking the good life. people around the globe are entering a “post materialistic”

World in which they are concerned with issues of quality of life beyond economic prosperity. Subjective well being also is popular because it is particularly democratic – it grants respect to what people think and feel about their lives; they believe that their opinions matter. In addition,
the study of subjective well being flourished because of the grown trend toward individualism around the globe. Individualists are concerned with their own feelings and beliefs and beliefs and thus the study of subjective well being corresponds well with the western zeitgeist. Finally, the field increased in popularity because researchers succeeded in developing scientific method for studying subjective well being for these reasons the scientific study of subjective well being is now poised to grow into a major scholarly and applied discipline.

**Personality life satisfaction and well-being**

Traits are behavioral response tendencies that show a degree of cross situational consistency and temporal stability. In the past some years the five factor model of personality has been very popular. According to this model there are five cardinal traits. These traits are: extraversion, neuroticism, conscientiousness, agreeableness and openness to experience. All these traits have been
correlated with subjective well being. Diene, Sandvik, Pivot, and Fujita (1992) found that extraversion predicted subjective well being is a representative sample of Americans. They demonstrated that this relation held despite the living circumstances of the respondents. Extroverts were on average happier whether they lived alone or with others, whether they lived in small towns or large cities. Extroverts were also happier across diverse ethnic, gender, and age groups. The fact that the relation between extraversion and subjective well being was similar across different environments and samples suggested that it might be based on biological temperament factors rather than simply on situational differences in the lives of extroverts versus introverts.

In assessing the size of the relation between extraversion and subjective well being, Fujita (1993) used a latent traits approach in order to correct for random error of measurement. Measurement error is caused by factors other than the phenomenon of interest that influence the measuring instrument. Random measurement error is reduced or eliminated by using multiple measures of extraversion and subjective well being and examining the
relation between the underlying latent traits that represent the common core of each set of variables by using multiple measures, random factors that might influence one scale are unlikely to affect all the measures of that construct. Fujita found that the correlation between the extraversion and positive affect latent factors was in the neighborhood of 80 when measurement error was controlled indicating an extremely strong relation between the two.

Another big personality factor studied in relation to well being has been neuroticism.

Neuroticism includes a wide range of unpleasant thoughts and emotions; it is not surprising that this trait has a negative correlation with well being. In a latent trait analysis Fujita (1993) has shown that neuroticism and the experience of negative affect were virtually indistinguishable. It is noteworthy that both unpleasant affect and negative cognitions are experienced together.

In their review of studies on subjective well being and personality, Diner (1998) has concluded that
conscientiousness and agreeableness appear to be related to subjective well being but show lower levels of relation to is than do extraversion and neuroticism. Conscientiousness and agreeableness correlate moderately with subjective well being, although this co variation has not been as intensely studied as have been extraversion and neuroticism. It may be that extraversion and neuroticism are based on neural approach and avoidance systems and automatically, where as the relation of conscientiousness and agreeableness to subjective well being depends on whether in particular environments individuals with these traits rewarded. Theoretically. Some

Traits are connected through temperament to subjective well being other traits are associated in an instrumental way with behaviors that produce certain emotions. This model however has not yet received probing research analysis. Openness to experience the fifth traits of the big five factors usually is not mere or less positive or negative affect of life satisfaction for example, Gottfredson (1994) found that openness did not samples containing over 40,000 adults deneve and cooper (1998) found that hedonically defined subjective well being was
consistently related to extroversion emotional stability (the high functioning pole of the neuroticism dimension) and agreeableness. In a study of middle aged adults the relationship between the big five personality traits and the six dimensions of carol Ryff’s eudemonic model of psychological well-being schmutte and Ryff (1997) found distinctive personality correlates for all dimensions of the model. Self acceptance environment mastery and purpose in life were linked with emotional stability, extraversion and conscientiousness. Personal growth was linked with openness.

To experience and extraversion. Positive relation with others was linked with agreeableness and extraversion. Autonomy was linked with emotional stability.

In a recent study by Gutierrez et al (2005) a total of 236 nursing professionals complete the NEO five factor inventory and the Affect – Balance Scale. Regression analysis showed personality as one of the most important correlates of subjective well-being, especially through extraversion and neuroticism. There was a positive
association between openness to experience and the positive and negative components of affect.

Self esteem is a trait that strongly predicts subjective well being in western cultures. For example data in the united states showed that the self esteem of college women correlated 60. With their life satisfaction. However self-esteem is not a universal determinant of subjective well being (see Diener 1998).

Diener & Diener (1995) found that for women in collectivist societies self-esteem was only a weak correlate of subjective well-being. For example for women in India the

Correlation between self esteem and life satisfaction was only 08. In a collectivist culture that values the family over the individual, it may be that how satisfied a person is with herself is much less important to well-being than how satisfied that person is with family

An individual difference characteristic that I related to self-esteem, but conceptually distinct from it, is self-efficacy the feeling that a person can accomplish important goals. Feasel (1995) found that global feelings of self-
efficacy predicted life satisfaction and positive emotions. She also found, however, that feeling efficacious in terms of one’s most important goals was a stronger predictor of well-being than feeling high self-efficacy regarding one’s less important goals. Thus not only is a general feeling of self-efficacy important to well-being, but one must also believe that one has efficacy in the areas of life that one considers important.

Optimism, a cognitive variable that is highly related to self-mastery (Marshall & Lang 1990) is also correlated with subjective well-being (Scheier & Carver (1993) reviewed evidence showing that optimists maintain higher levels of

Subjective well-being when faced with a stressor in addition there is evidence5 that optimism has benefits for physical health.

Why are optimists or positive thinker better off? Scheier Weintraub and Carver (1986) found that optimists tend to use problem-focused coping, seek social support, and emphasize positive aspects of the situation when they encounter stressful feelings and disengage from relevant goals. Thus people effective forms of coping.
In so far as life satisfaction occurs from a person’s perception of his quality of life studies that have investigated optimism in relation to perceived quality of life are also relevant. Previous research has found that a perceived quality of life is influenced by one’s level of optimism. Quality of life is a very subjective term and has been defined in various ways. One definition states that quality of life is based on the subjective evaluation of one’s resources and happiness with these resources (Harju & Bolen, 1998)

(Harju & Bolen, 1998) studied the effects of optimism on quality of life of college students by studying three groups of optimist (low, moderate, and high.) the participants 204 students, completed the following measures the life orientation Test – Revised (Lot –R) the Brief Cope, which measures various coping styles and a quality of life measure constructed by the researchers that was based on past research.
The researchers found that the high optimists rated themselves as having the highest quality of life and more effective coping skills. Gender differences were also found between optimism and quality of life. Men were found to place a high degree of importance on obtaining a high quality of life but actually were less satisfied with their life. Women were found to be more satisfied with their lives but didn’t differ significantly in their levels of optimism with men who were less satisfied with their lives. Women also had higher GPA’s than men and academic performance tended to drop with lower levels of optimism.

More specifically the results of this research found that the “high optimists” were significantly more satisfied with their Quality of life with the reverse being true for the “low optimists.” Although each group rated differently on the quality of life (QOL) inventory, they reported the same amount of regard for quality of life. One the coping styles rating “high optimists” were the only group to rate high on using effective strategies for dealing with life decision or problems. It was also found that mid-level optimists tended to use alcohol more often as a way
This study has important implications for understanding optimistic thinking. First this article speaks frequently of past and current mistakes of this research topic. It also provides evidence to support their research ideas. Their critical analysis of the strengths and weaknesses of studying the effects of optimism has allowed for a better understand of the topic. In their introduction they are very through and precise in detailing the history and important research that has been done on optimism. Also other research on optimism has failed to break down the levels of optimism as this study did. The gender differences in quality of life was also interesting and would be of great value to further study due to the variations in male and female thinking.

The research discussed in the study has many implications for enabling people to sustain happy, fulfilling lives. Due to our fast paced society, future thinking, planning and effective coping skills are crucial to our success at work, school and in social interactions. An overall conclusion to the results according to the researchers is that, high optimists endorsed the highest quality of life.
Other research that has focused on quality of life and optimism has been done but in as much careful detail as the work just mentioned. Keith & Schalock (1994) found that control over interpersonal issues, happiness with an educational situation and positive peer relationships were important factors in having a high quality of life female students have listed positive peer relationships teacher role models, financial and personal security and housing status as deys to having a high quality of life (Berry,) 1995)

A study by Klonowitz (2001) has examined the effects of reactivity, temperament and locus of control variables of subjective well – being in this study subjective well-being is operationalized as heightened life satisfaction.

Hypothesized that (1) reactivity and locus of control influence of these traits on subjective well being. As expected high reactivity and external locus of control were associated with lower subjective well- being, whereas low reactivity and internal locus of control were associated with higher subjective well-being. However the data indicate that reactivity and locus of control influenced different components of subjective well-being more consistently than reactivity. Somatic health is influenced by reactivity.
Locus of control and negative effect, but not positive affect. Current life satisfaction is influenced by locus of control but not reactivity and by both positive and negative effect hope is related to reactivity but not to either locus of control or effects the data collaborate the expectation that effect serves as a mediator in the trait subjective well-being relations, whereas the view that effect moderates the effect of stable dispositions on subjective well-being finds scant support.

Deneve and cooper (1998) have also shown that a number of narrow traits such as repressive defensiveness, trust, locus of control, desire for control and hardness all Exhibit moderate correlations with subjective well-being it is clear that these and other traits such as self – esteem and dispositional optimism are related to subjective well- being (Lucas et al. 1996)

**Personality and Adjustment :-**

An important factor that determines an individual’s adjustment in old age is his personality characteristics. Personality can be viewed as an aggregate of an individual’s dispositions, habits and styles of functioning,
whether personality characteristics are stable over the later part of the life span is a much debated issue. Studies have been carried out the west to resolve this issue these studies do not report any significant change over the later years in many aspects of personality (Conley, 1984; Costa and McCare 1988 moss and Susman 1980; Neugarten 1972; Neugarten, Crolty and Tobin, 1964 Schaie and Parham 1976; Schmitz-Scherzer and Thomae, 1983; Siegler, George and oKun, 1978; Woodruff and Birren, 1971) there are no Indian studies, especially of a longitudinal or sequential type, to corroborate these findings (Ramamurti and jamune 1984,1987,a 1993a 1995) 

Self-concept, considered as a dimension of personality may show some changes during the later years. It has been well documented that the onset of old age brings about several changes that are not acceptable to the individual which affects his self – perception (Anantharaman, 1981 a; chadha 1991; dhillon, 1992; Jamune 1984, 1985, 1989c; Januma and reddy, 1993; paintal, 1992; Ramamurti, 1989c; shanmugam, 1970), Aspects of self-perception include self – perception (acceptance of aging changes and delf – perception of health and disability ( jamuna 1994a;
Findings indicate that many individuals do not accept aging changes (Jamuna, 1989f; Ramanurti 1989g; 1990a; to the extent an individual accepts these changes as normal is contributes to satisfaction ( Jamuna, 1989a, 1994a, Ramamurti, 1989a, 1989f, 1989g, 1991a, 1992e, Ramamurti and Jamune, 1992a, Sunanda, 1990) and is regarded as a sing of well- being in old age (Ramamurti and Jamuna 1992a,)

Another aspect of an individual’s personality which has significance for old age is locus of control. Many western studies indicate that those with internal locus of control do better then those with external locus of control (Baltes and Baltes, 1986; Felton and Kahana, 1974; wolk, 1970). Indian studies have reported inconsistent findings (Jamuna, 1989a, Jamuna and Ramanurti and Jamuna, 1992a, 1993, 1993f, Ushasree, 1991). One view argues that belief in fate is the ultimate determiner of events which enables the elderly to accept things that are unable to change. Thus, belief in Karma as a variant of external locus
of control appears to be an important determiner of adjustment in old age (Jamuna 1994a; Ramamurti, 1989a; Ramanurtti and Jamuna, 1992a, 1993a, 1993f,)

One study by Njus & Brockway (1999) found that students with an internal locus of control showed better adjustment to college in terms of academic achievement and social adjustment.

The study conducted by Puglises (1994) found that locus of control had a negative correlation with course withdrawal.

And failure, although the amount was not significant. In other words the more students had an external locus of control, the more likely they were to withdrawal from the course. The author suggests that additional research be conducted.

**Stress, adjustment and well-being**

A number of studies have sought to determine the relationship between stressful life stress scores of maladjusted and normal groups of subjects have been compared. For example, Cowen et al. (1984) have reported that children referred to a school mental health project were
found to have experienced more negative and uncontrollable life changes than those not referred.

In a study Sandler and Block (1997) found that children judged by their teachers as having adjustment problems has experienced more negative uncontrollable life events than children who were not judged to have adjustment problems.

Heisel et al. (1973) and Hodges et al. (1984) have shown child psychiatric patients to have a higher level of life stress than control children.

As regards research on stressful life events in India the work falls under tow main categories; (A) scaling of stressful life events and (b) comparison of stressed and control groups under the latter category some group comparison studies have been undertaken. For example, Venkoba Rao and Nammalvar (1976) compared the number of events experienced by depressives, with the
number experienced by a control group. They reported that the depressives, on an average, experienced 13.82 events whereas the controls experienced an average of 11.72 events. Chatterjee et al. (1981) however, found significant difference only for events related with personal health and interpersonal relations.

In a study by Sexena et al. (1983) a group of psychiatric outpatients was compared with a group of normal individuals. The researchers reported that 14 out of 44 events showed significant differences in their frequencies between the groups. The patients experienced 2\(\frac{1}{2}\)times more mean number of events that the normal subjects and all types of events

Personal, occupational, financial, Familial and marital were experienced by a significantly greater number of patients than control.

Srivastava (1999) investigated the relationship between psychosocial stress and health. The study was conducted on a sample of 210 males from middle-class urban population. The findings revealed that psychosocial stress experienced by the subjects significantly correlated with their emotional responses, symptoms of neuroticism,
maladaptive and pathological behavior and psychosomatic diseases.

In a comparison of neurotic, psychotic and normal groups, Chattopadhyay and Des (1983) showed that neurotics had significantly higher scores than psychotics and normal with regard to both recent and remote events. Normal’s hard higher stress scores on desirable events only, whereas for psychotics no such difference was found either with regard to recent remote events or desirable – undesirable event.

In addition to the above group comparison studies, many studies have tried to unveil the relationship between life events and a number of dependent measures assumed to indicate the presence of psychological or physical problems. Though there has been considerable variability in measures used in different studies, the results have been quite consistent. Nearly all the studies have reported a significant relationship between life events and dysfunctional behavior. In particular, the frequency of negative life events and/or total life events has been found to be positively related to levels of dysfunction. Further it has been found that the symptoms or behavior problems have
higher correlation with negative events then with total life events. It appears that negative events, rather than life change as such are more strongly related to distress. The studies that have used correlational designs have reported pearson correlation coefficients I the range of 0.10 to 0.68 with the majority between 0.20 to 0.30.


Negative live events have also been found to be related with fighting conflict with parents and drug use [Barrera, (1981); Fontana & Dovidio, (1984); Friedrich, Reams &

In India also some research has been done on the relationship between the experience of life events and the development or precipitation of physical and psychiatric illness, particularly depression (Chatterjee et al. 1981; Gupta et al.; 1981.; prakash et al., 1980, Venkoba Rao & Nammalvar, 1976).

Life events stress has been found to be correlated with alcoholism (Rangaswami, 1983). Chaturvedi (1983) has demonstrated the distressful effect of unhappy marred life, 

Death of spouse or children and hazardous family relations on psychosomatic disorder.

Rao et al. (1982) have reported a relationship between marital stress and anxiety neurosis.

Ravinder Dang et al. (1998) have made a comparative study of life events in unipolar depression and schizophrenia.
A 2 x 2 factorial was used to investigate the possible role of life events in Male and Female (gender patients of unipolar depression and schizophrenia (mental status). A total of 120 consecutive patients were taken from the local department of psychiatry. They were individually administered the presumptive life events scale, with instructions to report the degree of stress perceived on the occurrence of a particular event during the past one year before the onset of illness. Data were analyzed with the help of ANOVA separately for total scores and the four types of life events. The main effects of mental status were significant in all the analysis whereas gender was significant in personal and undesirable events, with males obtaining higher mean stress.

Than the females. Significantly higher scores were obtained by the sample on undesirable life events as compared to other types of life event.

The studies reported above been retrospective in nature. In these studies reports of life events and dysfunction during a prior time period are obtained at a single poing to time. It is because of this methodological limitation that it is difficult to conclude whether life events are the cause of dysfunction or its result. To circumvent this difficulty some
researchers have used prospective designs. In these studies life events are measured prior to the assessment of the dependent variable. Studies by Burt, Cohen & Bjorck (1986, Compas, Wagner, Slavin & Vannatta (1986) Gersten, Langner Eisenberg & simcha – Fagan (1977) Padilla, Rohsenow & Bergman (1976), Saarinen & Cohen (1985f) and winger, Campos & Howell (1986) have used prospective designs. The results of these studies have used prospective designs. The results of these studies have indicate that life events are not linearly related to development of psychological symptoms. Gerstein et al. (1977) Swearlingken & Cohen (1985f) and Wagner et al. (1986) have reported insignificant relationship, between life events and mental health problems. However, Bert et (1986) and Campos et al. (1986) have found significant correlation between life events and mental health problems. In addition to this Bert et al. (1986) Swearlingken and Cohen(1985f) Wagner et al. (1986) and Campos et al., (1986) have also reported significant correlation between symptom level and subsequent negative life events All these results appear to show that symptoms are better predictors of subsequent stressful events than events are of subsequent symptomatology.
The awareness that a person in aging can be a source of unhappiness. The onset of old age heralds life’s last stage and is viewed as an indication that the end of life is drawing near. This perception of threat can be a major source of anxiety and stress. In other words the perception of the process of aging itself can cause stress (Ramamurti, 1989f, 1994f).

Added to this there is increasing incapacity, Weakness and consequent depression. Indian studies revealed that many individuals experienced stress with the onset of old age (Ramamurti, 1989f, 1994b). Stress may not only be due to aging itself but may also be due to various conditions associated with aging (Ramamurti, 1989f) 1994f; B.S.k. Reddy, 1989 Reddy and Ramamurti, 1990, 1992) such as loss of a job, reduced income, declining health and strains in interaction with family members.

In the case of employees, including executive, stress could be both on the job and off the job (Avinash & Aswathappa, 1991, Reddy, 1990; V.S. reddy & Ramamuriti, 1987, 1989, 1992). As these conditions are attendant on aging and are unique to the aging individual they should be perceived as stress caused by aging (Ramamurti, 1989f, 1994b; Srivastav & Gupta 1994). These stress effects sometimes
manifest themselves in the form of psychosomatic conditions and contribute to ischemic heart disease (Ramamurti, Manuna & Sujatha 1984)

People adopt different method of coping which are termed as styles of coping. Some of the frequently used coping styles in the case of the Indian elderly are problem-focused and cognitive appraisal – focused coping strategies. Emotion-focused coping strategies are less frequently used and are mere common among less successful individuals. The main sources of stress among the rural elderly are financial,

Health and family relationships. The methods of coping used by the rural elderly are cognitive appraisal – focused coping strategies (Reddy & Ramamurti, 1990, 1992). In view of the large number of problems faced by the elderly, it would be worthwhile to design interventions to train the elderly to develop their own resources in meeting these problems squarely. Training modules can be organized for individuals on the verge of old age on how to effectively deal with the problems of aging (Jamuna & Ramamurit, 1993; Jamuna, Reddy & Ramamurti, 1991a; Ramamuti, 1989c, 1989f, 1994b, 1991c, 1993, 1994b,
Demographic variable and life satisfaction

The strong association between temperament and subjective well-being does not mean that event and circumstances are irrelevant to people’s subjective well-being. In the first major review of happiness Wilson (1967 showed that both personality and demographic factors correlate with subjective well-being. He stated that the happy person is a young, healthy, well-educated well-paid extroverted, optimistic, worry-free religious, married person with high self-esteem job morale, modest aspirations, of either sex and of a wide range of intelligence” (P294). However, Campbell, Converse and Rodgers (1976) studied the well-being of Americans and
found that demographic variables such as age, income and education did not account for much variance in reports of well-being, echoing earlier findings by Bradburn (1969) and others. In a study by Andrews and Withey (1976) it was found that all the demographic factors they measured (e.g., age, sex, income, race, education, marital status) accounted for less than 20 percent of the variance in subjective well-being. In a similar study, Andrews and Withey (1976) could only account for 8 percent of the variance. More recently, Argyle estimated the explained variance to be about 15 percent. In the past 30 years, researchers systematically cataloged the various demographic correlates of subjective well-being (Diener et al. 1999) with a number of replicable findings emerging: (a) demographic factors such as age, sex, and income are related to subjective well-being; (b) these effects are usually small; and (c) most people are moderately happy, and thus demographic factors tend to distinguish between people who are moderately happy and those who are very happy (Diener & Diener, 1996).

Income, for example, is consistently related to subjective well-being in both within-nation (e.g., Diener et al. 1993; Haring, Stock, & Oakum, 1984) and Between-1 nation analyses (e.g., Diener et al. 1993; but at both the individual and the national level, income change over time has little
net effect on subjective well-being (Diner et al. 1993; Diner & Such 1998). Goals and expectations must be taken into account to understand the relation between income and subjective well-being; the benefits of a rising income are offset if one’s material desires increase event faster than wealth.

Age and sex are related to subjective well-being, but these effects are small, too and depend on the component of subjective well-being, measured. For example, in an international sample of 40 nations, Diener and Suh (1998) found that although pleasant affect declined across age cohorts, life satisfaction and unpleasant affect showed little change. In two separate international samples consisting of approximately 40 nations each, Lucas and Gohm (2000) found that sex differences in subjective well-being were small (only about one fifth of a standard deviation difference), with women reporting greater unpleasant and pleasant affect (though only significant differences in unpleasant affect were replicated across both international samples). Based on these results one could not simply say the men are happier than women or that the young are happier than the old. The conclusion depends on the component of subjective well-being that is measured (Diener et al. 1999) argued that if theory in this area is to
progress, researchers must study the separable components of subjective well-being—happiness in not a single thing.

Similarly, researchers must be careful about the conceptualization and measurement of independent variables. For example, Wilson (1967) concluded that physical health is correlated with subjective well-being. However, recent findings qualify this conclusion. The relation depends on whether self-report or objective ratings of health are assessed. Although self-reported health correlates positively with subjective well-being (e.g., Okun, Stock, & Haring, 1984) the correlation is weak when objective health ratings are examined (Watten Vassend, Mirer, & Severest, 1997). Subjective well-being influences the subjective perception of health and this inflates the correlation between subjective well-being and subjective health. It appears that the way people perceive the world is much more important to happiness than objective circumstances.

Other demographic characteristics such as marital status and religious activity are also positively correlated with subjective well-being; but the effects of marriage can differ for men and women and the effects of religious
activity may depend on the specific type of religiously
being assessed.

Thus the answer to whether particular demographic
factors increases subjective well – being is likely
dependent on people’s values and goals, personality and
culture. Gutierrez and et al. 2005, have found that the most
basic demographic variables (sex, age and relationship
status are differentially associated with the different
element of subjective well being, and the explanation for
these associations is highly likely to be found in the links
between demographic variables and personality. In the
same way as control of the effect of demographic variables
is necessary for isolating the effect of personality o
subjective well – being, control of personality should
permit mere accurate analysis of the role of demographic
variables in relation to the subjective well – being
construct.

Many studies have been made on the cultural and national
differences in subjective well-being.

International surveys of life satisfaction show consistent
mean leve difference across nations e. g. Inglehart &
Klingemann 2000, Veenhoven 1993), for instance,
between the years 1958 and 1987 Japanese life satisfaction fluctuated

Around 6 on a 10 – point scale (Veenhoven 1993). Denmark’s national average life satisfaction on the other hand, fluctuated around a value of 8. Cultural differences parallel to the international differences have been observed within the united states across different ethnic groups, for instance, Oishi (2001a) found that European Americans were significantly more satisfied with their lives than Asian Americans. Similarly, Okazaki (2000) observed that Asian Americans. Reported higher levels of depression and anxiety then did European Americans. Thus, there are differences between nations, and between ethnic groups within nations.

Diener et al. (1995) found large differences in subjective well being between nations, which correlated substantially with the average levels of income in theose nations. Diener and Biswa – Diener (2002) reviewed a number of studies that report correlations in the neighborhood of 60. To 70 between the wealth of nations and their mean levels of subjective well- being. When we realize that wealthy nations are likely to score higher on human rights equality longevity and democratic governance the strong relation
between wealth and subjective well-being of societies is not surprising. Although attempts
Have been made to disentangle the effects on subjective well-being of income and the various social indicators that co-occur in wealthy versus poor nations, these have not been successful because of the high intercorrelation of the predictors and the limited sample size of nations available for such analyses. For example, Diener et al. (1995) conclude that individualism was crucial to the higher happiness levels of wealthy nations, but Shyness (1998) failed to replicate this pattern, such attempts seem unlikely to achieve a replicable conclusion until we study a larger number of nations and have longitudinal measures of key variables.

Income is not strongly related to subjective well-being at very low levels of money, where small increments in wealth can have a substantial impact. For example, among respondents the slums of Calcutta, Biswas–Diener (2001) report a strong correlation of .45 between Income and life satisfaction. Diener and Biswas-Diener (2002) report that the satisfaction between income and subjective well-being is much smaller in economically developed nations. At the between-nation level Inglehart
and Klingeman (2000) report a curvilinear similar to that found for individuals (Dienersset al. 1993, in which differences matter most to subjective well-being at low levels of wealth. One explanation for why income matters most at low levels is based on the idea that at low levels of income, increases are likely to be related to inherent human needs, for example obtaining food and shelter, whereas at high levels of income, increases simply lead to the purchase of more luxury items (Veenhoven1991). The hypothesis is that subjective well-binge results from meeting innate and universal human needs and not from meeting desires that are not related to needs. In sum, the explanation for why higher subjective well-being is reported in wealthy nations is unclear, but the finding is replicated many times. Social psychological research in North America has demonstrated that self – serving bias occurs in various social judgments ranging form attributions Zuckerman 1979 to reports of personality Dunning et al. 1989),. Self serving biases are deviations from reality that put the respondent in a more favorable light then is warranted by the facts. One self serving bias is self – enhancement, which refers to rating oneself as relatively better compared to how one rates others.
Such self–serving biases, however, however, occur less frequently among east Asians and are weaker when they do occur e.g. Heine et al. 2000. In contrast, researcher have found self-critical tendencies in self- evolutions and attributions among East Asians (Heine et al. 1999). Thus cultural difference in self enhancement might be one factor causing cultural differences in mean levels of well being. Oishi and Diener 2001c found that European Americans over estimated the number of anagram tasks they solved a week earlier whereas Asian Americans underestimated the number. In a daily diary study, Oishi 2001a found that European Americans life satisfaction judgments of the week as a whole was significantly higher then the average of their daily satisfaction during the same seven days, whereas Asian Americans life satisfaction of the week as a whole was almost identical to the average of their daily satisfaction.

In a related vein, recent research revealed cultural differences in approach versus avoidance orientation Lee et al. 2000, Brimley & celery 2002 for instance, Lee et al, 2000 demonstrated the thinking about one’s group membership, Which is a chronic collectivist tendency, made people focus on negative consequences (i.e., avoidance or loss focus), whereas thinking about one’s self
independent of others, which is a chronic individualist tendency, made people focus on positive consequences (i.e., approach or gain focus). In the context of subjective well-being research, Elliot et al. (2001) found that Asian Americans, South Koreans and Russians pursued more avoidance goals than did Europeans Americans. In sum, cultural factors such as self-enhancement versus self-criticism and approach versus avoidance goals play a role in understanding mean differences in subjective well-being across nations.

In India early studies on life satisfaction appeared in the late 1960s and the early 1970s (Ramamurti, 1968a, 1970b, 1972). In recent years life satisfaction has not only been studied as a significant aspect of the well-being of the elderly, but also in terms of the factors determining it (Anuradha and Prakash, 1991; Bhardwaj, Sen and Mathur, 1991; Chadha, 1991; Chadha, Aggarwal and Mangla, 1992; Godhavari, Madhumathi and Sunil Kumar, 1991; Jamuna, 1989d, 1991; Jamuna and Ramamurti, 1988b; Jayasree, 1987; Nagpal and Chadha, 1991b; Pinto 1995; Pinto and Prakash, 1991; Ramamirti, 1989b, 1990b, 19991a;
Ramamurti and Januna, 1984, 1990b, 1992, 1993, 1993d; Ramamurti, Januna and Raddy, 1994a, 1994b; Sunand, 1990, Isja and Ra,a,irto. 1988). These studies highlighted that satisfaction with the pasts and the present life is a very important variable that contributes to successful aging (Ramamurit, 1987, 1989b, 1989g, 1991a; Ramamurti and Januna, 1993).

Life satisfaction gives meaning to one’s life and combined with a life review (Dave, 1994; Pinto, 1995; Ramamurit Januna and Raddy, 1994b). It can be a source of a feeling of self-worth. In the Indian context most of the elderly review their past life in terms of completion of their past life in terms of completion of their personal, familial and social obligations and those who believe that they have done justice to their obligations experience a sense of fulfillment in consonance with the self-fulfillment theory of Butler (1968). Life satisfaction promotes mental health. The variables of creative, ego integrity, autonomy and altruistic behaviors contribute to life satisfaction (Ramamurti, 1991b, 1992c, 1995a, Ramamurti and Januna, 1992a, 1993a, 1993d; Ramamurti et al, 1993, 1994b).