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1.1 INTRODUCTION

In our society, there is the greatest fear and misunderstanding about the operation, it is about the Cesarean operation among the women. The very idea of Cesarean operation, instead of Normal (Vaginal) Delivery, can frighten the women. Approximately in the year A.D. 1800, in European countries, doctors and midwives felt the need of such an operation, where the mother and the child could be saved and maintained their health.

In the present study, the aim is to find out the difference between the psychological experiences of the normal and the Cesarean operation. As the modern medical science progressed, the effective drugs, tools, facilities and the safe ways of the operation as well as the atheistic methods, came into practice. Now a days the Cesarean operation has become more safe. There is no danger to the mother in such a operation. At the same time, the child could be safely taken out from the womb in the state of the emergency. Now it is common to have a woman with more than one Cesarean operations.

In this age of science and technology, with the help of micro-analysis and various experiments the detailed information about the research is made available. The present researcher being a women, is inspired to study the problem of women. The aim is to contribute something worthwhile to the society, country and to the institution like WHO at large. With this desire I started my Ph.D. work. For this I have taken guidance from the experienced professors of psychology and has done detailed thinking on the pregnant women. For this purpose I had sittings with the pregnant women. In all I had arranged about10 meetings with them and after deciding various variables concerning with the Life satisfaction, Mental hygiene and Self analysis of the pregnant women, I studied this problem.

In Manusmriti, even God has praised the woman by pronouncing that all Gods dwell where woman is being worshiped and where there is no honor to woman all missions fail. Similarly, in the 34th Shloka of the 10th chapter of Bhagvad Gita seven abilities of the woman are described clearly, namely, fame, prosperity, speech intelligence, patience and forgiveness.
In the same manner, there is another Shloka in Manusmriti stating that, one principal is superior than 10 teachers, one father is superior than 100 principals, but one mother is superior than 1000 fathers. This shows the importance of the woman. If the woman of today will lead the healthy and the satisfactory life, then the best child would be created and thus she would provide a best citizen to the country.

1.2 WHAT IS MEANT BY LIFE SATISFACTION?

This is very old subject and it has been studied frequently. Indian philosophies of the past life Charak and others have discussed the mental state of life satisfaction. According to Navavaishik the satisfaction arises from the feelings of happiness and unhappiness. Especially the feeling of happiness is a likable state and it decides the nature and the satisfaction. Charak emphasis's the bodily aspect of the satisfaction. According to him the feelings of happiness and unhappiness are results of imbalance of certain chemicals residing in the body of an individual. Charak's view provides a good basis to means of the life satisfaction. But these are the views of the past.

The science of psychology has discussed the topic at life - satisfaction more deliberately. For example well-known psychologist Freud has discussed the topic of satisfaction in connection with the Theory of the pleasure, in his book called "Beyond Pleasure Principle" in 1950.

Similarly, another famous psychologist, Thorndike, has given us the concept of ‘satisfiers and non-satisfiers' in 1919. This has been accepted by Hull, Jemes, Dewy and other psychologists.

Slowly the concept of life satisfaction entered in the field of industry also. In America and England psychologists studied how satisfaction among workers, play important part in their daily functions around 1942. Now a day's ample emphasis is given to the life satisfaction of the worker. Recent study of Kanago and Mendola (1994) has examined the importance of the life - satisfaction of the worker as an incentive.

In short, - the life satisfaction is the main thing in the life of an individual. For it affects his mental state, so, it requires detail study.
1.2.1 HISTORICAL BACKGROUND:

Ideologically, this line of research is rooted in 18th century Enlightenment thinking. From this perspective, the purpose of existence is life itself, rather than the service of King or God. Self-actualization and happiness become central values. Society itself is seen as a means for providing citizens with the necessities for a good life. In the 19th century, this conviction manifested itself in the Utilitarian Creed that the best society is one which provides ‘the greatest happiness for the greatest number’. In the 20th century it has inspired large scale attempts at social reform and influenced the development of the Welfare State. Efforts towards the creation of a better society manifested themselves in attacks on the evils of ignorance, illness and poverty. Consequently, progress was measured by literacy, control of epidemic disease and the elimination of hunger. Social statistics were developed to record the extent to which progress in these areas had been achieved. Advances in the combat of these social ills were followed by efforts to create welfare-states that ensure a good life for everybody, in particular a good material standard of living. The extent of progress in that area was expressed in terms of monetary gains, security of income and the degree of income-equality. This gave rise to an abundance of social research on poverty and social-inequality, which today is still a major research tradition. In the 1960s, by which time most Western Nations had extensive Welfare States, the new theme of ‘limits to economic growth’ appeared on the political agenda, and values came to shift to ‘post-materialism’. This called for a broader conceptualization of the good life and its measurement. As a result, the term ‘quality of life’ was introduced. The initial use of the concept was polemical; serving to denote that there is more to human existence than material welfare.

Currently, the term 'quality of life' denotes two meanings: 1) the presence of conditions deemed necessary for a good life, and 2) the practice of good living as such. When used at the societal level, only the former meaning applies. When we say that the quality of life of the people in a country is poor, we mean that essential conditions are lacking, such as sufficient food, housing and health care. In other words: the country is not ‘live able’ for its inhabitants. At the individual level, the term quality of life can take on both meanings. When we say that somebody doesn’t have a good life, we may mean that he/she lacks things deemed indispensable and/or that this person does not thrive. These conditions may coincide, but this is not
necessarily the case. A person can be rich, powerful and popular, but still be troubled. On the other hand, someone who is poor, powerless and isolated, may nevertheless be thriving both mentally and physically. I refer to these variants as respectively: ‘presumed’ quality of life and ‘apparent’ quality of life.

1.2.2 USE OF LIFE SATISFACTION

Life-satisfaction is one of the indicators of ‘apparent’ quality of life. Together with indicators of mental and physical health, it indicates how well people thrive. Data about life-satisfaction is used for several purposes.

- Measuring quality of life:

  The most elementary use of life-satisfaction data is to estimate apparent quality of life within a country or a specific social group. This is typically done to assess the extent of a social problem or issue and to recommend possible policy interventions. High satisfaction suggests that the quality of life, in the population concerned, is good. Though conditions may not be ideal, it is apparently acceptable for most of the population. Low satisfaction marks serious shortcomings of some kind. An example is the assessment of life-satisfaction among single people. In all modern nations, single persons express less pleasure with life than married persons, and the divorced and widowed frequently express the lowest levels of satisfaction with life. This difference in life-satisfaction between those who are single and those with a partner is in fact greater than that expressed between rich and poor (Veenhoven, 1984:6/4). This is commonly explained in terms of ‘deprivation’. Apparently, singles lack something essential in life. A problem is that dissatisfaction with life means that something is wrong, but it does not indicate what. The discontent of the unmarried could be due to negative labelling, but it can also be attributed to loneliness and lack of social support.

- Monitoring social progress

  A related application of life-satisfaction data is the monitoring through time. If average satisfaction levels increase, this suggests that the quality of life in the country or social group has improved. When satisfaction declines, this indicates possible problems. An example of monitoring at the national level is Easterlin's (1974)
analysis of the development of life-satisfaction and economic growth in the post-war decades in the USA. He observed stable life-satisfaction in spite of a doubling of economic welfare, and concluded that money does not buy happiness. An example of following social groups is the study of age-differences in life-

Ruut Veenhoven 3 The study of life satisfaction satisfaction during 1950-1970 in the USA by Witt et al., (1979). This study showed that the aged have become relatively more satisfied during the last decades.

- Policy-evaluation

Life-satisfaction data has also been used to assess policy effects; in particular for social policy aimed at improvements in the quality of life. Effects of interventions can be measured by changes in satisfaction before and after, or by differences in satisfaction between beneficiaries and non-beneficiaries. This success criterion is commonly applied in the evaluation of policies concerning the aged; for instance in assessing the benefits of separate housing (Hinrichsen, 1985) and judging the usefulness of activation programs (Ray et al., 1982).

Identification of conditions for a good life

One of the most interesting uses of life-satisfaction data is the empirical validation of ideas about conditions for the good life, and related ideas about the good society. Such ideas can of course be erroneous. For instance, people may derive less satisfaction from 'proper' housing than most politicians think. If so, people in good houses may appear to be about as satisfied as - otherwise comparable people - in poor houses. Life-satisfaction may also remain unaffected by moves from shoddy to good housing, and vice versa. Such checks are vital for any policy that seriously tries to surpass ideological prepossessions and vested interests. A notable study of this kind is ‘The market experience’ by Lane (1991), which tries to evaluate Western economic order by its effects on life-satisfaction.

Most studies that assess life-satisfaction aim at socio-economical differences, such as income, education and employment status. That emphasis is due to the significance of these topics in social policy. If, for example, socio-economically deprived citizens take less pleasure in life, that is an argument for egalitarian interventions. However, socio-economic differences appear to be largely irrelevant for life satisfaction; at least in modern industrialized nations. That pattern of non-
difference is demonstrated in this book as well (See Chapter The greatest differences in life-satisfaction tend to be in socio-emotional matters, such as intimate relationships and mental health. The policy relevance of the latter difference in limited however, because public policy tends to refrain from interventions in private spheres of life.

1.2.3 MEASUREMENT OF LIFE SATISFACTION

In the 1960's, life-satisfaction became a common topic in survey research. This development was accompanied by a critical discussion regarding the validity of survey questions about life satisfaction. It was even doubted that life-satisfaction could be measured adequately by means of standard interviews or questionnaires. Measurement has long been understood as ‘objective’ and ‘external’ assessment, analogous to the measurement of blood-pressure by a doctor. It has now become apparent that life-satisfaction cannot be measured in a similar manner. Steady physiological correlates have not been discovered, and the modern understanding of higher mental functioning does not suggest that they ever will be. Nor have any overt behaviours been found to be consistently linked to inner enjoyment of life. Like most attitudinal phenomena, life-satisfaction is only partially reflected in behaviour.

Though some social behaviours tend to be more frequent among the satisfied (active, outgoing, friendly), such conduct can also be observed among the dissatisfied. Likewise, non-verbal behaviours such as frequent smiling or enthusiastic movements appear to be only modestly related to self-reports of life-satisfaction. Consequently, estimates of someone's life-satisfaction by his peers are often wrong. Suicidal behaviour is probably more indicative of life-satisfaction than any other behaviour. Almost all people who attempt or commit suicide are dissatisfied with life. However, not all dissatisfied people resort to suicide. Since life-satisfaction cannot be inferred from overt behaviour, we have to read off inner consciousness by questioning. Questions on life-satisfaction can be posed in various contexts; clinical interviews, life-review questionnaires and through surveys. The questions can be posed in many different ways; directly or indirectly, and by means of single or multiple items. Some common questions are presented in. Life-satisfaction is commonly assessed by single direct questions within the context of a survey interview. However, that practice meets much criticism. It is claimed that such simple self-reports measure life satisfaction neither validly nor reliably. Social critics in particular refuse to believe
that survey studies give a good estimate of average happiness. Elsewhere, I have considered the objections against measuring life-satisfactions by means of simple survey-questions and inspected the empirical evidence for claims about bias. I will summarise the main points below. For more detail, see Veenhoven, 1984.

1.2.4 PATTERN OF LIFE SATISFACTION

Assuming for the moment that life-satisfaction can be fairly well measured, we can go on to consider how satisfied people are with life and to determine the extent to which their judgments may differ.

- **Level of satisfaction**

Throughout time, the literature on quality-of-life is dominated by pessimists who bemoan the miseries of life. In this tradition, man is believed to be basically dissatisfied. Real enjoyment of life is projected in past paradise or future utopia. Such claims have always been denounced by optimists, who stressed human adaptability and social progress. Due to the lack of an empirical gauge, the discussion has long remained inconclusive. During the last few decades many surveys have been carried out, some drawing on world samples. These surveys support the optimist view.

The first representative surveys were carried out in Western countries and showed an uneven distribution of happy and unhappy citizens; the happy outweighing the unhappy by about 3 to 1. This finding raised much doubt about the validity of survey questions (as discussed previously). However, later cross-national studies showed that dissatisfaction prevails in third world nations, where a large proportion of the population lives at subsistence levels. This latter finding put to rest many of the aforementioned validity doubts. Presents the results of a world-survey which includes both rich and poor nations.

Nevertheless some social critics are still reluctant to believe that in modern western nations most citizens are really satisfied. Reported satisfaction-with-life is discounted as sullen adjustment. Rather than really enjoying their life, people have just given up hope for a better one and try to adjust to the inevitable (e.g. Ipsen, 1978). Various defensive strategies would be used: simple denial of one's misery, downward comparison and a tendency to see things rosier than they actually are. In addition to the above discussion on validity of current measures of life-satisfaction,
two counter-arguments can be mentioned: Firstly, such resignation should give itself away in a discrepancy between the ‘adjusted’ judgment of life and ‘raw’ affective experience. The appraisal of general affect is less vulnerable to cognitive adaptation, because it is a direct experience and thus less open to defensive distortion. It is less threatening to admit that one felt depressed in the last few weeks than to admit disappointment in life. Various Surveys have assessed both general life-satisfaction and the previous weeks’ affect-balance. The results do not suggest that people claim to be satisfied with life, but actually feel lousy (research reviewed in Veenhoven, 1984:106/113). Time-sampling of mood-states also shows that pleasant experiences are more usual than unpleasant ones (see e.g. Bless and Schwarz, 1984 for a meta-analysis of 18 studies). Secondly, people are typically dissatisfied with life when they live in miserable conditions. As we have seen, dissatisfaction is the rule in poor third world countries. In western nations life-satisfaction is typically lower where adverse conditions accumulate, such as in persons who are poor, lonely and ill (Glatzer and Zapf, 1984:282-397). Together these findings suggest that people tend to enjoy their lives once conditions are tolerable. From an adaptive-biological point of view this does not seem strange. Nature is unlikely to have burdened us with chronic dissatisfaction. Like ‘health’, happiness would seem to be the normal condition. Neither is it likely that nature has programmed us to be happy only in ideal conditions. Evolution did not take place in Utopia. This issue is discussed in the section about the determinants of life-satisfaction.

- **Why are there still so many complaints?**

  The prevalence of satisfaction with life-as-a-whole does not wash away the multitude of suffering and complaining. As noted in the foregone paragraph, even the happy are not without complaints. The German Welfare Survey found that half of the highly satisfied report frequent worries (Glatzer and Zapf, 1984:180). If not due to response distortion, what else can explain this pattern of worried satisfaction? Firstly, it is important to note that satisfaction and complaining do not exclude each other logically. One can be fairly satisfied with life-as-a-whole, but still be aware of serious deficits. In fact, both stem from a reflection on life. Secondly, worrying may to some extent contribute to overall satisfaction. Only through a realistic acknowledgement of the threats to one’s happiness can such a state be maintained.
• Differences in life satisfaction

Though most people are satisfied with their life, not everybody is equally satisfied. There are sizeable differences between individual citizens within countries, as well as disparities in average life-satisfaction between countries. See again.

Individual differences. In all countries there are citizens who are satisfied and dissatisfied. Though distributions vary, the full range between extremely satisfied and extremely dissatisfied can be found everywhere. Shows that even in Western-Europe 1% of the population marks the most negative scale category, whereas in economically poorer parts of the world (south-east Asia) only 2% report maximal satisfaction. Differences in life-satisfaction between citizens of a country result partly from dissimilarity in life-chances and partly from variation in ability to cope. We will consider this matter in more detail in the section on determinants of life-satisfaction.

Nation differences also shows that the pattern of life-satisfaction is not the same everywhere. Both level and dispersion differ considerably across various parts of the world. Within these areas, there are also noticeable differences between nations. Other questions on life-satisfaction show almost identical cross-national differences (Veenhoven, 1993b). Differences in average life-satisfaction in countries are largely a matter of variation in the quality of living conditions between countries. Below we will see that 81% of these differences can be explained by variation in material wealth, social equality, political freedom and access to knowledge.

1.2.5 DETERMINANTS OF LIFE SATISFACTION

Having established that people differ in satisfaction with life, the next question is why. The aim of creating greater happiness for the greater number requires an understanding of the determinants of life-satisfaction. So far, the determinants of life-satisfaction are only dimly understood. Still, it is clear that the matter is very complex. Various levels of human functioning are involved; collective action and individual behaviour, simple sensory experiences and higher cognition, stable characteristics of the individual and his environment as well as chance factors. presents a tentative ordering of factors and processes involved in the assessment of life satisfaction. The model presumes that we judge life by drawing on the flow of life-experiences; particularly on positive and negative experiences. This is what the utilitarian
philosophers referred to as ‘pleasures and pains’. The flow of experiences is a mental reaction to the course of life-events. This includes major one-time events, such as marriage or migration, as well as repetitious mundane events, like getting up in the morning and doing the dishes. The events which happen in life are partly a matter of good or bad luck; such as in the case of accidents. The occurrence of life-events also depends on given conditions and capacities. Traffic accidents are likely to be less frequent in well organized societies and are less likely to occur among more attentive individuals. Thus the chance of ‘rewarding’ and ‘aversive’ events are not the same for everybody. This is commonly referred to as life-chances.

Present life-chances are rooted in past events and chance-structures; in societal history as well as individual development. An example may illustrate this four-step model: A person's life-chances may be poor, because he/she lives in a lawless society, is in a powerless position in that society, and is personally neither smart nor pleasant. Such a person is likely to encounter a lot of adverse experiences. He/she may be robbed, duped, humiliated and excluded. As a result that person will frequently feel anxious, angry and lonely. Based on this flow of experience, the person will conclude “I feel lousy most of the time” and “My wife is not good”. Striking an overall balance he/she will evaluate life as-a-whole as dissatisfying.

Causality can skip a step. For instance, poor legal protection may instigate feelings of anxiety (step 3) directly, because the person anticipates events that are likely to happen, but have not occurred. Or life-chances can even enter the evaluation of life right away, when comparisons shape the judgment. Likewise, not all life-events in step 2 follow from life-chances at step 1. Some events are a matter of good or bad luck and happen irrespective of social position or psychological capabilities. Nor is the flow of life-experiences entirely shaped by the course of events. How pleasant or unpleasant we feel also depends on dispositions and interpretations as well.

- **Life chances**

Research on determinants of life-satisfaction has focused almost exclusively on life-chances; particularly at the individual level. A lot of correlational studies have tried to identify conditions which predispose one to a positive appreciation of life. Elsewhere I have summarized the results of this literature (Veenhoven, 1984; 1994a). Below I will mention the main points.
Quality of society

As noted above, average satisfaction with life differs greatly across nations. These differences can probably not be explained by cultural bias in the measurement of life-satisfaction. As will be seen at the end of this chapter, they cannot be attributed either to cultural variation in outlook on life. On the other hand, there is strong support for an interpretation of the variation in life-satisfaction in terms of differential quality of living-conditions. Shows that life-satisfaction is typically greater in the economically most prosperous nations. This relationship appears to be curvilinear; among poorer nations this relationship is more pronounced than in affluent societies. This is in line with the law of diminishing returns. Below we will see a similar pattern at the individual level: correlations between life-satisfaction and income-position are strong in poor countries and weak or zero in richer nations. The difference can partly be explained by sufficiency of nutrition, but not entirely. Apparently, material welfare provides more gratification’s than that of mere subsistence. Life-satisfaction also tends to be higher in more socially egalitarian societies. This difference is partly due to the greater economic prosperity in these societies. However, the relationships with gender-equality and income-equality remain quite strong even after controlling for income per capita. Social inequality involves greater risk of adverse life-events and is a source of frustration in itself. The correlation may also be a reflection of related matters, such as suboptimal allocation of human resources and a culture of intolerance. Average life-satisfaction is also greater in nations where human rights and political freedom are highly respected. The partial correlations suggest that these differences are partly due to the higher income in these countries. The effects of political freedom are also likely to result from better protection against injustice and assault. Freedom can also make people choose life-styles that better fit their personal needs and situational opportunities, which is likely to result in more rewarding life-experiences. Furthermore, life is found to be most satisfying in the countries that provide the best access to knowledge, as measured by literacy, school-enrolment and use of mass media (radio, newspapers, TV etc.). The partial correlations also show that the correlation remains after control for economic wealth.

So far, it is still unclear as to what extent knowledge itself is involved in the creation of gratifying life-experiences, and to what extent the relationship is due to related cultural effects. Together, the above mentioned characteristics explain 81% of
the differences between countries in life satisfaction. One of the problems in this field is the limited number of countries on which comparable data on life-satisfaction is available. For this reason, spurious effects and conditional correlations are hard to demonstrate empirically. A related problem is that the lack of time-series hinders the distinction between cause and effects. However, the amount of data is growing every year. World Value Study II will yield data on some 50 nations in the early 1990's. Data on life-satisfaction is gathered in the ongoing World Database of Happiness, which already involves some interesting time-series (Veenhoven, 1993b). Another problem is that current measures of societal quality are very limited; in particular the indicators of the ‘cultural climate’ in countries. As of yet there are few reports of improvement in this area.

- **Position in society**

  Numerous studies all over the world have considered differences in life-satisfaction across age and gender. The differences tend to be small and variable. At this point in time the contextual differences involved have not been identified; for example, why are males slightly happier in some countries and females in others? Another commonly investigated issue is the relationship of life-satisfaction with income. Studies in affluent Welfare Societies typically report only small correlations, but in other countries quite substantial differences are observed. The poorer the nation, the higher the correlations tend to be. See.

  This pattern does not fit the theory that life-satisfaction derives from social comparison, but rather suggests that it depends on the gratification of needs that are finite. This implication will be discussed in more detail at the end of this chapter. The pattern of correlation with education is similar. Again there are high correlations in poorer countries and weaker correlations in more prosperous ones. Recent studies in richer nations have even shown slightly negative correlations with level of education. This does not mean that education itself breeds dissatisfaction. As we have seen, the most educated countries are the happiest. The slight dissatisfaction among the highly educated is probably due to a lack of jobs at that level and possibly to the loss of earlier advantages in the process of greater social equalization. The correlation between life-satisfaction and occupation has generally been more stable. All over the world, professionals and managers tend to be those who are most satisfied with life. It
is not clear to what extent this difference results from the rewards of work tasks, related advantages in income and social prestige or differential selection.

Together, the above socio-demographic variables invariably explain not much more than 10% of the variance in individual happiness; at least in richer societies.

One of the purposes of this book is to check this result. It inspects whether measurement error reduced the explained variance to this low level. If this were the case, it would mean that these variables explain in fact much more of satisfaction than so far observed. Next to social-status matters, social-participation has been considered. Life-satisfaction tends to be higher among persons who have paid work. However housewives are not less satisfied. Neither does retirement make life less satisfying. Life-satisfaction is more consistently related to participation in voluntary organizations. Life-satisfaction is also quite consistently related to the presence and quality of intimate ties. However, not all kinds of ties are equally related to life-satisfaction in all countries. In western nations, marriage is more important than contacts with friends and relatives. Studies in western nations have reported that children do not add to the life-satisfaction of married persons. However, among those who have children, life-satisfaction is closely related to quality of contacts with children. Together these variables explain typically another 10% of the variance in life satisfaction in developed nations.

- **Personal abilities**

  The strongest correlations invariably concern personal capability in dealing with the problems of life. Life-satisfaction tends to be greater among those who are in good physical health and who have a lot of energy. The satisfied also share characteristics of good mental health and psychological resilience. Curiously, life-satisfaction tends to be unrelated to intelligence; at least to school-intelligence as measured by current IQ-tests. However social skills do differentiate between satisfied and dissatisfied. High life-satisfaction is typically accompanied by social assertiveness and good empathy attributes. With respect to personality, the satisfied tend to be socially extrovert and open to experience. There is a notable tendency towards internal control beliefs, whereas those who are dissatisfied tend to feel they have little control over events. Many of the findings regarding individual variation in life-satisfaction can be seen as differences in ability to control one’s environment. It
has not been established to what extent this pattern is universal. Possibly, the characteristics enumerated here are more instrumental to life-satisfaction in modern individualized Western Societies than in collectivistic societies. The common variance explained by such personal variables tends to be around 30%.

There are several problems with these correlational findings. Firstly, it is not always clear whether or not the reported correlations are spurious. For instance, the positive correlation of life-satisfaction with marital status is partially produced by a selection effect; the married typically being in better mental health. This problem can be solved by systematic checks. A growing number of studies have carried out elaborate checks for spuriousness. A second problem can be seen in the direction of causality. It is not always clear what is cause and what is effect. In the example of marital status, the positive correlation could have resulted from the possible advantages of married life or, on the other hand, from the better marriage prospects for those who are the most satisfied. (In actual fact, both effects are probably involved. (See Veenhoven, 1989b). This problem can be solved by considering longitudinal data. As of yet, such data are scarce. However, the amount is growing. A final problem is that effects can be conditional. For example, married status adds more to life-satisfaction in some modern Western Societies such as Denmark and the Netherlands than in more traditional countries such as Ireland and Italy. Identification of such contingencies requires comparable data in a sizeable number of countries; preferably from different epochs. More and more of such data is becoming available. The data needed for solving these problems is gathered in the previously mentioned World Database of Happiness.

- **Course of life events**

  The effect of life-events on life-satisfaction has received little attention. One of the few sophisticated studies that considered the matter is the four wave ‘Australian Quality of Life Panel Study’ by Heady and Wearing (1992). First of all, this study showed that the course of life-events is not the same for everybody. Some people encounter troubles over and over again; they have accidents, get laid off work, quarrel with family, fall ill, etc. On the other hand, there are also people who are lucky most of the time; they meet nice people, get promoted, have children who do well, etc.
These systematic differences in the course of events depend to some extent on life-chances. Favorable events appeared to happen more often to persons who were well-educated and psychologically extroverted. Adverse events were reported more frequently among neurotics, but occurred less to people with good intimate attachments. Both favorable and unfavorable events happened more to those who were young and psychologically open. Altogether, life-chances explained about 35% of the variation in life-events over eight years. This study also demonstrated that the course of life-events affects satisfaction-with-life. First it was found that the balance of favorable and adverse events in one year predicts reported life-satisfaction in the next year. The more positive that balance, the greater the satisfaction with life. Life-events explained some 25% of the differences in life-satisfaction, of which about 10% was independent of social position and personality. Further, longitudinal analysis showed that change in the characteristic pattern of events was followed by change in life-satisfaction. Respondents who shifted to a more positive balance became more satisfied with their life.

- **Flow of experience**

  As of yet, hedonic experience is not well understood. Though feelings of disgust and delight are quite tangible, it is not always clear either how they come about or why.

- **Function of hedonic experience**

  Many of our likes and dislikes seem to be inborn reactions to situations that are good or bad for human survival. Evolution has probably eliminated our forefathers who did not enjoy food, shelter and company, and those too fond of danger. As such, certain life-events are likely to elicit pleasant experiences, while others invoke unpleasant feelings. Playing tennis with friends is typically more fun than sitting in jail alone. Though it is quite plausible that hedonic experience reflects the fulfillment of basic needs, it is not so clear what these needs might be. Current theory suggests that there are various ‘organic needs’ (food, shelter, sex), ‘social needs’ (belonging, esteem) and broader ‘self-actualization’ needs (mastery, control, variety, meaning, etc.). Conceptions differ however, and it is difficult to establish to what extent these strivings are inborn and how they are linked to hedonic experience. Cognitive theories
suggest that pleasant experience can also be induced by perceived realization of goals. For instance, the playing of tennis may be enjoyable because we are engaging in a chosen behaviour. On the other hand, a person in prison, who does not have this freedom of action, is likely to be very dissatisfied because he/she cannot realize desired goals. The gratifying effects of the fit between perceived reality and wants may draw on an underlying need to control.

- **Like and Dislike**

  Many adverse events evoke similar reactions in most people; particularly events that exceed human adaptability. Everybody suffers when burned or starved. However, within the limits of human faculties, reactions tend to differ. For instance, not everybody feels equally as bad when his/her house burns down. Reactions may vary depending upon (a) previous exposure to hardship, (b) the meaning attributed to the event and (c) the person’s psychological resilience. Nevertheless, most people do get upset by the loss of their property. Much greater variability is probably to be found in life’s more pleasurable experiences. Though most of us enjoy parties, this is not true for everyone. Some people lack the social skills required for parties, or have a limited capacity for enjoying themselves. The various personal characteristics that mould experiential reactions to life-events belong to the same class of ‘life-chances’ that also influence the course of events. Low social status may result in fewer invitations to parties and to feelings of unease at having to attend such an event. Nevertheless, it is life-events which evoke experiences and not life-chances. The effects of daily events on experiences has been studied by means of time-sampling. In this method, respondents note several times during the day how they feel at that moment and describe what they are doing. On the basis of such studies Csikszentmihalyi (1991) found that we tend to feel better in company than we do alone, and to feel better when engaged in leisure activities than we do at work. Also structured leisure activities such as sport appeared more rewarding than unstructured pastimes, such as television-viewing. Personality explains about 30% of the variance in pleasant affect, while the situation explains another 10% and the person-situation interaction 20%.

  Inner manufacturing of feeling Though it is clear that events evoke experiences, it is not so clear how such effects come about. In fact, little is known of
how likes and dislikes are processed. We have some idea about the psycho-physiology of sensations, but the inner fabrication of affective experience is hardly understood. Psychology has been more successful in grasping thinking than affect. In the 1960's the discovery of pleasure centres in the brain seemed to promise a breakthrough (Olds and Milner, 1954; Rolls, 1979). That promise has become somewhat bleak by now. There is no such thing as a single happiness gland. Pleasurable experience seems to result from different bio-chemical signals in both the body and the brain, the interactions of which are still largely unknown.

Capacity for enjoyment

Wherever situated, the human capacity for enjoyment is great. Reward areas in the brain seem to be greater than areas that produce unpleasant experience and most people tend to feel good most of the time (Bless and Schwarz, 1984). Suffering may be more salient than satisfaction, but apparently it is not more frequent. There is some logic in this phenomenon. Why would nature doom us to be dissatisfied most of the time? If experiences of like and dislike serve to indicate conditions that are good and bad for the organism, we should expect that satisfaction will be the rule. Evolution tends to produce a good fit of species to its environment, which will be reflected in predominance of pleasurable experiences. Dysphoric experience has to keep us away from harmful situations; it instigates withdrawal. In this view dissatisfaction can be permanent only in adverse living conditions, from which no escape is possible. In such conditions species tend to die out. So, chronic dissatisfaction can at best be a temporary phenomenon in the declining stage. However, the human species does not seem to be drawing to its end, and if we become extinct it will be due to ecological disaster rather than to mal adaptation to our living environment. The organic disposition to enjoy things may not be equally strong in everybody. There can be temperamental differences in satisfaction-proneness. Twin-studies show greater resemblance in satisfaction between monozygotic twins than dizygotic twins, even when reared apart. However, this does not necessarily mean that satisfaction is an inherited trait; the similarity in satisfaction can also have resulted from traits other than satisfaction, such as heritable variation in ‘energy’ and ‘resilience’. The results from longitudinal studies, which have followed children from a young age, have found little evidence for a stable trait of satisfaction/dissatisfaction. Babies observed to be cheerful did not appear to exhibit higher levels of life-satisfaction in adulthood. (Research reviewed in Veenhoven, 1994b.)
• **Inner process of evaluation**

What goes on inside a person’s head when he/she evaluates life? Speculation on such matters was a major theme in the study of happiness by the early philosophers. This issue has received a considerable amount of renewed interest during the present century. It is not just curiosity about the inside of the ‘black box’ which has led to renewed interest, but rather the far-reaching consequences which follow from the different perspectives on the possibility of creating greater happiness for a greater number of people (to be discussed in the next section).

Calculus or inference?

Utilitarian philosophers spoke of happiness as the ‘sum of pleasures and pains’, established in a ‘mental calculus’. This view on the evaluation process is still dominant today. It is believed that life-satisfaction is assessed in a similar way to accountants calculate profit. We would count our blessings and sufferings and then strike a balance. The judgement is then a ‘bottom-up’ process, in which appraisals from various aspects of life are combined into an overall judgment. Following this line, Andrews and suggested that satisfaction with life-as-a-whole is calculated on the basis of satisfactions with various aspects of life. In this view, we first evaluate domains of life, such as our job and marriage, by comparing the reality of life with various standards of success. Only then would we compute an average, weighted by perceived importance of domains and standards. Andrews and demonstrated high correlations between satisfaction with life-as-a-whole and appraisals of various aspects of life, but found no evidence for the presumed weighing. Michalos' (1985) Multiple-Discrepancy-Theory also depicts life-satisfaction as the balance of various sub-evaluations. Sub-evaluations are assessments of the discrepancy between perceptions of how one’s life is, with notions of how one would like it to be. The five main standards for comparison are: what one ‘wants’, what one ‘had’ earlier in life, what one ‘expected’ to have, what one thinks ‘other people’ have, and what one thinks is ‘deserved’. Michalos provides ample evidence that small discrepancies are accompanied by high satisfaction with life-as-a-whole. Multiple regression analysis showed that life-satisfaction is primarily a function of the perceived discrepancy between reality and ‘wants’.
Though satisfaction with life-as-a-whole is statistically correlated with appraisals of various aspects of life, it has not been established that life-satisfaction is causally determined by these sub-evaluations. The correlation could also be due to ‘top-down’ effects. For instance, when assessing one’s job-satisfaction, a person may reason “I am generally happy, so apparently I like my job”. Panel-analysis has demonstrated strong effects of this kind. Actually, the effect of life-satisfaction on the perceived discrepancy between what one has, as against what one wants, is greater than the effect on the respective life satisfaction evaluation for some domains (Heady and Veenhoven, 1989). These findings have been criticised on methodological grounds by Scherpenzeel and Saris (1996).

Inference on the basis of feeling

A rival theory is that evaluations of life draw on cues that provide indications of the quality of life as a whole. An internal cue of this kind is how well one generally feels. If pleasant feelings dominate, then it is assumed that life can't be bad. This could be called ‘affective inference’. An external cue is how satisfied other people think one is. This is called ‘reflected appraisal’. The available evidence suggests that internal affective cues are far more important than external social ones. Life-satisfaction is much more related to matters of mood than to reputation. Reports of daily feelings correspond closely to satisfaction with life-as-a-whole, whereas peer-ratings of life-satisfaction correlate only modestly with self-ratings. In assessing how we generally feel, we seem to focus on the relative frequency of positive and negative effects, rather than on the remembered intensity of joy and suffering (Diener et al., 1991). A typical heuristic seems to involve departing from the mood of the moment, which can be read quite vividly. If there are no reasons to assume that this mood is atypical, it is used to appraise satisfaction; “I feel generally good, hence I seem to be satisfied with life” (Schwarz and Strack, 1991).

- **Differences in evaluating life-as-a-whole and life-domains**

The evaluation-process is not identical for all objects. Global inference is the rule in evaluations of life-as-a-whole, and piecemeal calculations most common in evaluations of domains of life. Schwarz and Strack (1991) showed that evaluations of life-as-a-whole focus on how one generally feels. This facilitates the judgmental task. Most people know fairly well how they generally feel. The alternative of ‘calculating’
life-satisfaction is more difficult and time-consuming. It requires selection of standards, assessments of success and integration of the appraisals into an overall judgment. Not only does this involve more mental operations, but it also entails many arbitrary decisions. Still, people sometimes choose to follow this more difficult road. A condition which encourages people to make this choice, is the presence of ambiguity when trying to define one’s typical mood; for instance, a state of depression may not fit one's idea of how one generally feels. Another factor that encourages the calculative approach may be the availability of salient information for the purposes of comparison, such as the earlier mentioned confrontation with a person in a wheelchair. Evaluations of specific aspects of life are hard to derive from estimates of general feelings. Affect is less informative in this case. One can be satisfied with one’s job, but still feel generally dissatisfied, because of a bad marriage and poor health. On the other hand, calculating is less difficult when specific life domains are concerned. Domains of life are easier to oversee than life-as-a-whole, and standards of success are often more evident. The differences in evaluative strategies are depicted in.

- **Relationship between life satisfaction and domain-satisfaction**

  Both evaluation strategies will result in a sizeable relationship between satisfaction with life-as-a-whole and satisfaction with life domains. If life satisfaction is calculated, people will probably estimate a weighted average of life-domain/aspect satisfactions as Andrews and Withey suggest. This so called ‘bottom-up’ appraisal will result in firm correlations between life satisfaction and domain-satisfactions, because the former is based on the latter. If people rather ‘infer’ life-satisfaction, life-satisfaction and domain-satisfactions will be statistically related as well. Firstly, because all satisfaction judgments draw on affect (though life-satisfaction more than most domain-satisfactions). Secondly, because satisfaction in domains is derived from general satisfaction with life (the so called top-down appraisal). Both views on the appraisal process can explain differences in correlations across domains, but for different reasons. If general life-satisfaction is ‘calculated’ from domain satisfactions, we can expect stronger correlations with more important domains. If life-satisfaction is ‘inferred’ from how well one feels generally, life-satisfaction will correspond most closely with domain-satisfactions that are most likely to draw on affect level. This
means that life-satisfaction will correlate stronger with marriage-satisfaction than with government-satisfaction and life satisfaction will also correlate stronger with domain-satisfactions that are most likely to be appraised in the top-down way.

The two views on the appraisal process also imply differences in strength of correlations across nations, but again for different reasons. If life-satisfaction is ‘calculated’ from domain-satisfactions, and if important domains get a greater weight in that computation, we can expect the strongest correlations with those domains satisfactions which rank the highest in a country, while the ranking can vary from country to country due to the situation the country is in. If life-satisfaction is ‘inferred’ from affect, the strength of the correlation will depend on the degree to which domain-experience elicits affect. In the case of correlation between life-satisfaction and income-satisfaction that could mean that a stronger correlation in poor countries where the poor really suffer more, than in rich nations, where differences in income are of less consequence for affective life. Later in this book we will inspect the relationship between life-satisfaction and domain-satisfaction in more detail. We will do so on the basis of correlations that we corrected for correlated measurement error.

1.2.6 POSSIBILITY OF GREATER LIFE SATISFACTION

Much of the research on determinants of life-satisfaction is prompted by the hope of finding ways to create greater happiness for a greater number. However, the search could also lead to the conclusion that this hope is false. For instance, further research may confirm theories of satisfaction which imply that the improvement in living conditions does not reduce discontent.

One such theory is that life-satisfaction is relative. Another is the theory that life-satisfaction is a stable trait.

• Is life satisfaction relative?

As we have seen above, one theory of how we evaluate life assumes that satisfaction is the result of a comparison between life-as-it-is to conceptions of how-life-should-be. Standards of how-life-should-be are seen to draw on perceptions of what is feasible and on comparison with others. These standards of comparison are
thought to vary. The more money we earn and the more our neighbors have, the higher the amount of money we would deem necessary for a decent living.

Together these assumptions imply that it is not possible to create lasting satisfaction; neither at the individual level, nor the societal level. At the individual level, this theory predicts that satisfaction is a short lived phenomenon. We would be satisfied when life comes close to ideal, but as we come closer to our ideal we would tend to set higher demands and hence end up as dissatisfied as before. Likewise, social comparison would not provide lasting satisfaction. When we have surpassed the Jones, reference drifts upwards to the Petersons, and we again feel dissatisfied. At the societal level, this theory implies that average satisfaction tends to neutral as well. If satisfaction and dissatisfaction balance out in the lives of individual citizens, the average in the country cannot be far from zero. Social comparison is also likely to result in a neutral average; the satisfaction of the citizens who do better is neutralized by the dissatisfaction of the ones who do worse. Another implication of this theory is that life-satisfaction should be approximately the same in all countries.

Empirical evidence

Elsewhere, I have reviewed the empirical evidence for the theory that life-satisfaction is relative (Veenhoven, 1991; 1995). The main points are summarized below.

The study reported in this book provides another check. One implication of this theory is that changes in living conditions, from good to bad, or vice versa, will have no lasting consequences for life-satisfaction. However there is good evidence that we do not adjust to everything; for instance, we don't adjust to the misfortune of having a handicapped child or the loss of a spouse. Another implication which appears questionable is that earlier hardship favors later satisfaction. This is not supported by the evidence. For example, survivors of the Holocaust were found to be less satisfied with life than Israeli’s of the same age who had not undergone this experience. One further empirical check to be mentioned is the correlation between life-satisfaction and income. The theory that life-satisfaction is relative should predict a strong correlation in all countries, irrespective of their wealth. Income is a salient criterion for social comparison, and one on which we typically make comparisons with others. As we have seen in, this prediction is not confirmed by the data. In several rich countries the correlation is close to zero. This book shows that the correlations between satisfaction and income are also modest in not-so-rich countries,
see Chapter 16. (The data presented in that chapter are corrected for measurement error and confirm earlier studies without such a correction). Predictions at societal level are not confirmed either. Average life-satisfaction is typically positive, rather than neutral and differs widely between nations. Contrary to prediction it is higher in rich countries than in poor ones. The cross-national study reported in this book confirms that pattern (Chapter 15). It can therefore be concluded that there is so far little or no empirical support for the theory that life-satisfaction is relative.

- **Theoretical flaws**

  The theory that ‘life-satisfaction is relative’ assumes that life-satisfaction is a purely cognitive matter and does not acknowledge affective experience. It skips step 3 in, and acknowledges only one of the evaluation strategies mentioned in step 4. Thereby, it focuses on conscious standards and neglects less conscious needs. The basic fault in this theory is that the evaluation of life is assumed to be a piece meal mental calculus (the route on the right in), rather than a global inference on the basis of general mood (the route on the left in).

  As argued above, affective experience signals the gratification of basic needs. Contrary to ‘wants’, ‘needs’ are not relative. Needs are absolute demands for human functioning, that do not adjust to any and all conditions; in fact, they mark the limits of human adaptability. To the extent that it draws on need-gratification, life-satisfaction is not relative.

- **Difference with domain satisfactions**

  There is good evidence that satisfaction with income is largely a matter of comparison and that standards of comparison in this domain tend to shift (Van Praag, 1989). This is further supported by research on satisfaction with health and work. Thus, the theory that satisfaction is relative does apply to some domain-satisfactions. As argued above, the evaluation of specific life-domains tends to follow the right hand route in. However, the evaluation of life as a whole typically follows the left-hand route. Therefore, the theory does not apply to global life-satisfaction.
• **Is life satisfaction a trait?**

Another theory, which suggests that the hope of creating greater happiness for the greater number is futile, holds that satisfaction is a fixed disposition. This theory figures at the individual level as well as the societal level. Both variants imply that a improvement of society does not make people more satisfied.

**Personal character trait?**

The individual level variant sees satisfaction as a personal trait; a general tendency to like or dislike things. This tendency can stem from an inborn temperament as well as early experience. This trait is believed to shape the perception of life-experiences as well as the overall evaluation of life. In this view, improvement of living conditions will not result in greater satisfaction with life. The evaluative reaction will remain the same; the discontented will always be disgruntled while the satisfied will always see the better side of things. Elsewhere, I have taken stock of the empirical evidence for the theory that life-satisfaction is a trait (Veenhoven, 1994b; 1995). In this previous work I examined whether or not life-satisfaction is 1) temporally stable, 2) cross-situationally consistent and 3)

**Internally caused.** Life satisfaction does not appear to be a stable trait. The results can be summarized as follows: Firstly, life-satisfaction does not remain the same over a period of time; particularly not over the length of a lifetime. Individuals revise their evaluation of life periodically. Consequently life-satisfaction changes quite often; both absolutely (f.e. happy persons becoming unhappy) and relatively (f.e. the most happy person in a group becomes the least happy). Secondly, life-satisfaction is not insensitive to change in living conditions. The improvement or deterioration in living conditions is typically followed by a rise or decline in the appreciation of life. This appears for instance in the aftermath of widowhood and divorce. Thirdly, satisfaction is not entirely an internal matter. It is true that evaluations of life are influenced by personal characteristics and collective orientations. However, these inner alignments modify the impact of environmental effects rather than overshadow them.

• **National character trait?**

The societal variant of this theory (folklore-theory) assumes that this tendency to like or dislike life is part of a common national-character. Some cultures would
tend to have a gloomy outlook on life, whereas others are optimistic. France is often mentioned as an example of the former kind, and the USA as an example of the latter. Even if the quality of life in France would be improved substantially, French character would prevent the French from taking more pleasure in life. Elsewhere I have examined the empirical evidence for this theory (Veenhoven, 1993: ch5; 1994b; 1995). In this previous work I examined whether the differences in subjective satisfaction were indeed unrelated to variation in the objective quality of life. I considered five qualitative differences: economic affluence, social equality, political freedom and access to knowledge. I found strong correlations. Improvements in these societal conditions tend to be followed by an increase in average life-satisfaction. Not all improvements produce greater satisfaction however: economic growth adds to life-satisfaction in poor countries, but not in rich ones. I also examined the residual variances for any indication of cultural patterns, such as possible underrating of life-satisfaction in Mediterranean nations or an overstatement in Anglo-Saxon countries. However, no such patterns appeared. Latin countries are not systematically less satisfied than their standard of living would predict. Nor is satisfaction in Anglo-Saxon countries typically higher. Furthermore, I have compared the life-satisfaction of migrants with satisfaction in the country-of-settlement and in the country-of-origin. If life-satisfaction reflects the quality of the conditions in which one lives then the life-satisfaction of migrants in a country must be close to the level of others in their adopted society. If however, life-satisfaction is a matter of socialized outlook, the satisfaction of migrants should be closer to the level reported in their former country. First generation migrants in two nations were considered: In Australia, migrants from Britain, Greece, Ireland, Italy, Netherlands and former Yugoslavia. In Germany, migrants from Greece, Italy, Spain, Turkey and the former Yugoslavia. The ‘outlook hypothesis’ failed this test as well. Together these findings seriously undermine the argument that life-satisfaction is a static phenomenon.

In summary then, there is sense in trying to make life more satisfying for a greater number of people. Although, it is not quite clear how this can be achieved, there is nevertheless little doubt that it is possible in principle.
1.3. ADJUSTMENT:

Today the present social life is very complicated. A modern human being struggles to live in modern society, for that every human being tries to adjust with their own needs. All human behavior is motivated by needs, and we behave to adjust to these needs to satisfy them rarely these needs are easily satisfied or thoroughly acceptable to up. Rather they are frustrated by conditions in the environment or in our minds which block our satisfaction and conflict is inevitable. When conflicts occur the behavior that involves the least possible resistance in often selected. Whether it is appropriate or not. When it is not satisfactory new appropriate methods of resolving the conflict must be evolved.

Before we can understand how to adjust with over selves or our environment we need to understand why it is necessary to adjust ? In studding this why this adjustment ? We shall find the answer or these three questions, We shall learn to understand over selves better, to understand other better, and to understand better the world, the environment around us. In other words we need to study the adjustment process. In learn how to get along with other people, with our different fields and with over selves too. Life is a continuous, everlasting struggle till last breath of life. As long as we live shall encounter problems that will demand some kind of adjustment and it is continuous process. We can’t avoid problems but we can only learn to handle them to face them happily with tensions, and we shall be able to handle them only as we learn more about ourselves. It is surprising that so many of us know more about clothes, vehicles, movies, materials and like than we do about ourselves, about the conditions affecting our emotional ups and downs we avoid to know, to recognize ourselves yet to recognize our self is to take the first step toward recognizing our assets and liabilities such a realistic appraisal of self must be the beginning of an exploration in adjustment. To know own self is an inevitable psycho necessity for successful progressive life, Mc Dougell has rightly said “Life is nothing but the series of adjustment and readjustment”.

Adjustment is a universal continuous process, living organisms from the simple, single celled amoeba to multi-celled man are constantly making adjustment of various kinds. These adjustment may concern the satisfaction of basic, physical needs like hunger, thirst, sex, sleep or the fulfillment of psychological needs such security, love, affection, to gain approval.
Most of the people confused about the word ‘adjustment’ with the word ‘conformity’. These two words are not synonyms conformity is only one form of adjustment and the quality of adjustment achieved by conforming may be good or bad, depending on the circumstances under which it occurs. Conformity is one way process one should conforming to the wishes of other persons, some people confused that adjustment is one-way process. They believe that person is continually forced to adjust to his environment but fail to realize that man also can shape his environment. Both man his world are modifiable. As our environment changes, we modify our behavior accordingly, and these modifications in turn affect environment. Therefore adjustment is a process of continuous interaction. Man must have deep sense of adjustment at the same time, man is master of circumstances. Actually a person who can adjust, can change the atmosphere too, for capacity to change one must have deep sense of adjustment it is two sides of the coin. The individual and his world are not study, both change and both are being upon and shaped continually but these changes are so little that one cannot see apparently and after the changes it may create adjustment, problems and demand adjustment. There is a dynamic relationship between person and his world all the times. A person may feel that he could cope with the changes but the monotony of his life gets him down so the change and monotony both demand adjustment.

First of all by becoming aware of our own behavior and our own problems we try to understand why certain goals, values, ambitions are important for us why some particular events upset us and other makes us happy why we like and what we like & don’t like, why we don’t like, what we are, and what we do. In our own observation of ourselves, we start to appreciate our positive strong points and are willing to consider our weaker points.

A behavior refers to anything that a person says or does common synonyms include activity action, performance, response, reaction and skill. In our concern about adjustment we all have to consider more than just behavior that is observable to other We all have thoughts and feelings, emotions, an inner self and an outer self, observable behavior and private behavior unobservable to others. Adjustment refers to changes in our ways of behaving, thinking and feeling to meet the demands of our environment.
What are the demands to which a person must adjust and what is their source? Some originate in sources outside him, whereas others have their origin in tissues activity within.

The psychologist is more concerned with psychological survival than physical. Human behavior is interpreted as adjustment to demands which are basically social or interpersonal and influence the personality development of the person. Psychological demands to which the person making adjustments may be external and internal. There are a large number of external demands that arise from the physical conditions of human existence.

- **External Demand**:
  
  The most important external demands that challenge a man’s adjective capacities from his social environment, from living in society, than later, the social institutors of the culture into which he is born demand conformity to certain social values and culturally developed patterns of behavior. Throughout life these various demands are expressed as expectations that others have of him.

- **Internal Demand**:
  
  The internal demands that originate in issue activity are often called physiological needs. Man is born with a number of such needs whose satisfaction is required to preserve his life and comfort, although these needs are inborn, people must learn what satisfies each particular need in order to do something about it most of these physiological needs such as temperature regulation, sleep, hunger and thirst, can be gratified through internal adjective behavior needs of all kinds direct human behavior.

  Sometimes demands that were originally external become internal through the process of socialization.

  An adjustment has been interpreted in two ways: adjustment as achieved and adjustments as a process.
1.3.1 DEFINITION OF ADJUSTMENT:

Adjustment as has been interpreted earlier has been defined variously by various authors. A few has been quote here.

i. Adjustment is defined by warren(1934) as “any operations where by organism ofougann becomes more favorably related to the environment, or to the entire situation environmental and internal”.

ii. According to English & English (1958)
   a. “Adjustment is a static equilibrium between an organism and its surrounding in which there is not stimulus change working on a response on need is unsatisfied and all the contaminative functions is never attained, it is the cortical end of a continuum of degrees of partial adjustment.
   b. A condition of a harmonious relationship the environment wherein one is able to obtain satisfaction for most of one’s needs and to meet fairly well with demands physical and social, put upon one.
   c. The process of making changes needed in one self or in one’s environment attain relative adjustment.
   d. For evaluating the adequacy of adjustment lazarus (1961) has put forward four main classes of criterion. (a) Psychological comfort (b) Work efficiency (c) Physical Symptoms (d) Social Acceptance

iii. Lehner and Kube (1964), speak of adjustments “a process of interaction between ourselves and environment. In this process one can either adopt environment or after it. Satisfactory adjustment is depends on successful interaction.

iv. According to Eysenck (1972), “Adjustment is a state in which the needs of the individual on the one hand and the claims of the environment on the other are fully satisfied. Harmony between the individual and the objective or social environment.”
1.3.2 ADJUSTMENT PROCESS:

Following are the basic factors in the process of adjustment.

- **Motivation:**
  
  Feelings of inferiority ambitious towards a specific career, anxiety over failure and drives towards activates that bring prestige or a affections are all examples of motivation. Motives are persistent conditions that dominates and directs the behaviour of individual until he responds in such a way as to remove them. Any basic physical need, any strong desire, any highly anticipated goal is a motive.

- **Frustration and Conflict:**
  
  In environmental condition or an incompatible motive may block or conflict with activity aroused by the initial motive and prevent the individual from satisfying it, sometimes the problem was not so much the frustration as such but what it meant to the individual is important.

- **Variable behavior:**
  
  The behavior that result when motives are blocked has been called trial and error. The individual whose motive frustrated usually performs a number of activities most of which are successful.

- **Satisfaction:**
  
  Satisfaction involves the removal of the motivating condition, the relaxation of tension aroused by the desire. The individual in is these. Cases is making the adjustment. It is through this process of satisfying motives tending to be repeated in a similar situation in the future.

- **Non - Adjective Behaviors:**
  
  Non adjective behavior in respect to the motive under consideration, but it may be adjective so far as other motives are concerned. This is a important point much behavior that seems abnormal or socially inappropriate is adjective from one point. It is merely one adjective in terms of our arbitrary that influential social standards or frame of reference.
• **Readjustment:**

  In order to satisfy the motive the individual uses a persistent non-adjective reaction must modify his behaviour. He must eliminate the non-adjustive reactions, those which fail to satisfy the motive under consideration and substitute that satisfy the motive under consideration. Readjustment in the human being may mean a reorganization of his motive with emphasis on certain motives rather than on others.

  Adjustment as the process of continuous interaction leads us to realize that no human adjustment is ever complete or ideal. That is why we speak of adjustment as an attempt to relate satisfactorily to the environment because of the continuous modification in ourselves and our there environment, there is always some gap between our need and there complete satisfaction. And there is a reciprocal process and a relatively satisfying adjustment is the best can achieve

  An individual wants to satisfy his values, need etc., When his needs are satisfied an adjustment is made.

1.3.3 **TYPE OF ADJUSTMENT:**

  The area of adjustment is too large, psychologists like Lehner and Kude (1964), Blair (1962) and Ryana (1969) and so many others have discussed the area of adjustment. As we have seen that adjustment is a continuous process beginning from life up to the end of life. The area of adjustment is very large. The major areas of adjustment are studied here under the types of adjustment.

• **Family Adjustment:**

  The family is the oldest social institution known to man. Although its specific structure has differed in different times and places, it has been in most culture the basic unit of social order. In our culture large family unit that included grandparents, parents, children and possible and aunt, uncle or causing, all together under one roof, has almost disappeared and the small family unit, consisting, as a minimum of husband and wife or parent and child has taken its place.

  We may better understand how family relationship affect personal adjustment, and the satisfaction of psychological needs, consideration of the dynamics of family interaction is important families are constantly changing new members are born into them grow up and leave to establish careers and families of their own, old members
pass away. All these changes affect to some degree, the adjustment of the other members.

The husband wife relationship, marital expectations and factors in marital success affected on family adjustment parent child relationship is important for family adjustment. Statistics indicates that the more children, there are in family the fewer are the chances of divorce. Parent - child relations consider two major patterns of interaction negative and positive negative patterns are (i) Rejection (ii) Over protection (iii), Over Indulgence (iv) "Authoritarianism (v) Ambivalence Monopolization.

The positive patterns of interaction are (i) Unqualified love (ii) Sensitivity (iii) Permissiveness (iv) reasonable techniques of control.

It is inevitable for parents to make frequent mistake. But if they can manage to strike a balance between extremes of over protection and rejection, between excessive exercise of authority and often lack of guidance, between to much and too little attention, they will be giving their children a reasonable chance to develop satisfactory adjustment patterns.

- **Marital Adjustment:**

  Adjustment in marriage is necessary everyone has to adjust in their married life. Such adjustment bring unity and happiness, compromise and self sacrifice on the other hand unmarried people can hardly adjust themselves they feel loneliness and they feel that something is missing in the life. Married people are happier than unmarried people this is the advantage of marriage and married life.

  Marriage gives chance for the satisfaction of our needs, affection and sexual expression. Marital adjustments is an effort on the part of mates of satisfy each other's needs by the process of give and take. Landis (1977) in his study of marital adjustments has used the term adjustment to "refer to the state of accommodation which is achieved in different areas. Where conflict may exist in marriage.

  Marital adjustment is the process of modifying, adapting or altering individual and couple patterns of behaviour and interaction to achieve maximum satisfaction in the relationship. In order to establish marital adjustments amongst the partners and within themselves; establishment-of harmonious relationship is necessary adjustment in marriage is a constant process of interaction.
From the psychological point of view marriage is more or less permanent, and culturally determined union between a man and a woman, for the purpose of attaining mutual happiness. In successful marriage life love, affection interest, faith -and feelings are necessary.

- **Social Adjustment**:

  As the individual's family responsibilities decrease and as their economic status improves, they are better able to engage in social activities than they were during adulthood. When family responsibilities and adjustments to work made an active social life difficult, many people, especially women find that an active social life alleviates the loneliness they experience when their children are grown and have home of their own.

  Middle aged people enjoy entertaining friends at dinners or parties, although much of the social life of middle age centers around gathering of members of the same sex. They tend to spend most of his time with his family, intimate friends and his children's newly established families. Socio-economic status is affected to social adjustment.

  There are also sex different in social activities men have more friends and acquaintances, than women but women have a more affectionate and a closer relationship with their friends than man have man belong to more community organization but women devote more time and effort to the activities of the organizations, women have more social contacts with family members and relations than with outsiders. Socially adjusted person is involve with family members as well as with society, friends, outside of family and work institution.

- **Emotional adjustment**

  It is also important in determining one’s personality. The behavior is colored by emotions. Emotional adjustment is attained by the individual when he is expected to behave according to societal expectations. Emotions have both direct and indirect effects on personality. The direct effects come from physical and mental disturbance, while the indirect effects come from the reactions of member of the social group towards the person who is experiencing the emotion. If the emotions are unpleasant such as fear and jealousy or if they are strong and uncontrolled, they are
damaging to the personality pattern. If they are pleasant and if they are controlled in such a way as person’s physical and mental well being, they have a favourable effect on the personality pattern. Directly, the emotions affect the individual’s physical and mental functioning and his attitudes, interests and values.

- **School & College adjustment**
  The child has to adjust to the outer world also. The peer group and school teachers both need to be taken into consideration while talking of school adjustment. During young years the child looks for teacher’s acceptance and warmth and as the child grows into adolescence, peer acceptance and show of expressions becomes more important. Many a times peer pressures lead to maladjustment behaviour among the youngsters like drug addiction, smoking, drinking, truancy, etc.

  College is also an important area of social adjustment. The experiences of behaviour patterns, the peer group relationship, learning process and achievement are the factors that determine college adjustment.

- **Sexual (Marital) adjustment**
  Sexual adjustment in terms of interpersonal issues in selecting mate, personal needs and sex in marriage are of consideration. Acceptance of one’s sexuality is also of prime concern. And, resultant acceptance of one’s proclaimed sexuality by people related to the person and the society also helps in better adjustment of the person.

- **Career (Occupational) adjustment**
  Making the right career choice is tough. The right education and skills learning leads to a job. Work place satisfaction may or may not be present. It depends upon socio-economic considerations, interests, abilities, aptitudes, job requirement, attitude towards work place, etc. The impact of working under a female boss has been seen to cause stress to some men can a woman work? There exists an intermix of societal dictates and life-style related to working especially with regard to women. Such decisions also influence the person’s approach to job. The delicate intricacies between the desired career choice and the option available for job also affects adjustments job satisfaction is closely related to personal adjustment.
• **Old age adjustment**

Adjustment issues during old age need to be highlighted as during this age there are physiological changes in the body which may at times lead to adjustment problems. People who could not save the money and are not supported by their children are worst affected during old age. In any case, the money is reduced and there are financial hardships after retirement. In India, the individualistic culture has grown in the youth today, and with the breakdown of joint families has care and protection of the has been reduced. This has left old people to feel isolated and useless. All such situations lead to adjustment problems during old age.

So, adjustment is one of the most important psychological activities of human beings.

• **Financial Adjustment:**

Money or economic status will have a profound influence on the financial adjustment. Today as result of premarital experiences in the business world, many wives resent not having control of money, need to run home and they find it difficult to adjust to living on their husbands earnings after having been accustomed to spending their own money as they wish. Financial adjustment is very difficult where the wife resign the job for any reason. It is important for marital adjustment.

Financial adjustment is related to the vocation, family's financial situation poses to good marital adjustment. If wife is working the financial support give the security, and confidence. Socio-economic standard changed and living style developed.

• **Health Adjustment**

For health adjustment three points are important (i) To understanding your own needs (ii) A healthy respect for other and (iii) Being healthy V.S. being normal.

If health adjustment merely meant satisfying one's own needs, this approach would seem sound. Health adjustment requires taking rights and feelings of other into consideration. People who only consider their own needs in any situation, are likely to be seen as selfish and crude. They might obtain short term satisfaction for their
immediate needs, but only at the expense of their relationships with others. In the long runs, such individual are often isolated, or are merely tolerated by others.

i. Health adjustment includes an understanding of our own individual needs.

ii. Health adjustment includes a respect for human life and an awareness of the right of others.

iii. Health adjustment is flexible and tolerant, and it represents choices made from options rather than simply responding in 'acceptable' or 'normal' ways.

    Flexibility is also important, we each respond and behave according to destructive and consistent patterns. These patterns include thoughts and feelings as well as behaviour, and collectively they from our personalities (Mischel, 1976). If we could understand and these patterns of behaviour, we might be able to understand and improve our own adjustment.

    To improve our adjustment we must look for the most effective, appropriate and acceptable methods of dealing with our problems, and do this, we must increase our self awareness other awareness and problem awareness.

    Lord krishna is "Bhagvat Gita" (Ch.11 54-72) a well known religious tratic of Hinduism a book on counseling psychology, while counseling nervous. Arjuna off battle field enumerates a number of characteristics of a well-balanced (Healthy) personality (Sthita Pragna), the major being the self-less devotion and service to humanity with quality of mind.

    As per “Bhagvat Gita’s” concept a well adjusted person should have following characteristics.

    i. When a man put a away all the desire of his mind and when his spirit is content in itself. The he is called stable in intelligence.

    ii. A person whose mind is untroubled in the midst of sorrows and is free eager desire a mind pleasures, he from whom passion, fear and rage have passed away.

    iii. Without affection on any side, who dies rejoice as he obtains good or evil, who drows away the senses from the object of sense on every side. Having brought all the sense under control.

    iv. A well balanced person has no selfish aims or personal hopes. He is not disturbed by the touches of outward things. He accepts what happens without attachment. He is covert nothing, is jelous of none, he has no desires and
makes no demands, and in that spirit there is produced an end of all sorrow for him.

v. For the uncoltrolled there is no intelligence nor for the uncontrolled is there the power of concentration and for him without concentration, there is no peace and without peace there is no happiness.

vi. A well adjusted person who abandons all desires and acts free from longing without any sense of mineness or egotism. He attain to peace.

vii. Healthy is the greatest gain, contentment is the greatest wealth, faith is the best friend and nirvana is the highest happiness.

viii. Joy serenity, the consciousness of inward strength and of liberation, courage and energy of purpose and constant life in god are their characteristics.

In short a well adjusted person should have following characteristic.

a) Awareness of one’s own strength and limitation.

b) Respect for one’s self as well as for others.

c) Adequate level of aspiration.

d) Reasonable satisfaction in terms of one’s basic needs.

e) No critical or fault finding attitude.

f) Flexible in his behaviour.

g) Capable of struggling with odd circumstances.

h) Realistic perception of the world.

i) Feeling of home with surroundings.

j) Possessing adequate philosophy of life.

1.3.4 CHARACTERISTICS OF WELL ADJUSTED PERSON:

i) Physical Health

The person should be free from physical ailments like headaches, ulcers, indigestion and impairment of appetite. These symptoms in person have sometimes psychological origin and may impair his physical efficiency.

ii) Psychological Comforts

A well-adjusted person has no psychological diseases as depression, compulsion and anxiety. These psychological diseases if occur excessively cause to seek professional advice.

iii) Work Efficiency
The person, who makes full use of his occupational or social capacities, may be termed as well adjusted person in his social set up. 10

iv) **Social Acceptance**

Everybody wants to be socially accepted by other persons. If a person obeys social norms, beliefs and setup values. We may call him well adjusted but if he satisfies his needs by anti-social means then he is called maladjusted.

v) **Flexibility in behavior**

A well adjusted person shows flexibility in his behavior. He adjusts himself in changing circumstances by making changes in his behavior.

vi) **Healthy Attitudes and interests**

A well adjusted person possesses healthy habits, attitudes and interests.

vii) **Healthy philosophy of life**

A well adjusted person possesses healthy philosophy of life that governs his conduct and activities. He possesses enough coverage and power of tolerance for facing failures in his life. In short "a person said to be adjusted when he is so related to a reasonably adequate environment that he is relatively happy, efficient and has a proper degree of social feeling."

1.3.5 IMPORTANCE OF ADJUSTMENT:

Every organism tries to have harmonious relationship with its surroundings in order to satisfy its primary needs like hunger, thirst and security. This relationship is established by the constant effort on the part of organism in adjustment to its environment. Man, unlike other animals, has to adjust with psychological and socio-cultural environment in which he has to live in addition to physical environment. Man has got a great role to play in the process of adjustment because some of the psychological need like acceptance, affection, companionship, self esteem etc, is to be satisfied in a socio-cultural set up. This is necessary to develop a healthy personality. The development of personality is largely determined by the way in which the human being is able to adjust successfully in his life. Allport (1962) rightly pointed out, “personality is the dynamic organisation within the individual, of those psychological systems that determine his unique adjustment to his environment.” Therefore, an
individual’s unique adjustment is the core of his personality. It emphasizes on the relationship between the organism and environment.

Environment is dynamic, which goes on changing constantly and the organism, if at all has to survive must make up certain modifications to keep pace with the environment. It is necessary for its psychological process to go on smoothly. So, the organism learns to move along with the environment and this learning is termed as adjustment. Marital satisfaction, more anxiety and more depression.

1.4. WELLBEING:

Wellbeing addresses issues such as what is happiness and why some people are happy and others are not. Wellbeing has been repeatedly found to represent a central human value (Roysamb, 2006). Among many of the important aspects of life such as money, health, education, happiness and life satisfaction, people across different nations have found to value different aspects of wellbeing (Suh, Diener, Oishi, & Triendis, 1998; Diener, 2000; Seligman, Park, & Peterson, 2004).

Wellbeing includes the domains of cognitive functioning, behavioral functioning, physical health, and mental health. These domains comprise of positive thought processes, social engagement with one’s community, and positive health behaviors such as restorative sleep and resistance training (Moore & Keyes, 2008).

Wellbeing refers to a stable condition of coherence of personality that leads to a full range of positive emotions and no negative emotions regardless of external circumstances (Cloninger, 2004). It is a dynamic state, in which the individual is able to develop their potential, work productively and creatively, build strong and positive relationships with others, and contribute to their community. It is enhanced when an individual is able to fulfill their personal and social goals and achieve a sense of purpose in society (Foresight Mental Capital and Wellbeing Project, 2008). Wellbeing is more than just the absence of an illness. It includes physical health and safety, social and emotional health, spiritual wellness and subjective sense of well-being. Mental health researchers consider the idea of wellbeing beyond the absence of symptoms of depression and distress to include the presence of happiness and life satisfaction (Diener, Oshi, & Lucas, 2003). This led to the development of the concept of subjective wellbeing.
Subjective Well-being (SWB) examines such topics as happiness, life satisfaction and morale (Strack, Argyle, & Schwarz, 1991; Myers & Diener, 1995; Diener, Suh, Lucas, & Smith, 1997). People evaluate conditions differently depending on their expectations, values, and previous experiences. Subjective well-being researchers assign importance to this subjective element and assess individuals’ thoughts and feelings about their lives (Diener & Lucas, 2000).

Subjective wellbeing comprises of three main components: a cognitive evaluation of life satisfaction, the presence of positive affect, and the relative absence of negative affect (Diener & Lucas, 1999). Although these components are separable (Lucas, Diener, & Suh, 1996), they often interrelate, suggesting the existence of a higher order construct of subjective wellbeing.

Keyes and Waterman (2008), in their review of literature, conclude that subjective wellbeing consists of three domains: emotional well-being, psychological well-being, and social well-being. In other words, individuals evaluate their lives in terms of whether they feel good about it, function well personally, and function well socially.

The emotional well-being cluster reflects the presence and absence of positive feelings about life operationalized as evaluations of happiness and satisfaction with life, and the balance of positive to negative affect experiences over a time period (Keyes & Waterman, 2008). Thus, emotional well-being can be conceptualized as the balance of feelings (positive and negative) experienced in life (Bradburn, 1969) and the perceived feelings (happiness and satisfaction) (Andrews & Withey, 1976). Studies clearly support a proposed factor structure of emotional well-being with a more cognitive domain of life satisfaction (quality of life) and a more affective domain (happiness; Bryant & Veroff, 1982).

Emotional well-being is defined as the emotional quality of an individual’s everyday experience - the frequency and intensity of experiences of joy, stress, sadness, anger, and affection that make one’s life pleasant or unpleasant (Kahnmannen & Daeton, 2010). It refers to a holistic, subjective state which is present when a range of feelings, among them energy, confidence, openness, enjoyment, happiness, calm, and caring are combined and balanced (Stewart-Brown, 2000, p.32).

Experiencing emotional well-being does not mean being happy all the time, but it does mean feeling okay and not suffering mental distress, depression or anxiety. When feelings are managed constructively and not causing too much distress, and are
able to maintain positive and effective relationships with others, then it can be said to be a state of emotional wellbeing (Weare, 2004).

Most evidence suggests that emotional factors, like optimism, are primary predictors of emotional wellbeing (Coughlin, 2010). Other factors include: acceptance of self and other; playing to ones strengths and using ones talents; creating strong and lasting relationships with others; low levels of defensiveness and openness to emotional experience; autonomy, mastery, and competence; clear values and a strong character; creating meaning and purpose in life; passionate engagement; and the ability to learn and grow from trauma and adversity (Coughlin, 2010).

Another term for emotional wellbeing is mental health, which is different from mental illness. Emotional well-being is strongly associated with mental health - the ability to grow and develop, to make relationships and to be resilient in the face of difficulties (Weare, 2004). Mental health is defined as a state of well-being in which the individual realizes his/her own abilities, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his/her community (World Health Organization, 2005). Mental health is a positive capacity, as described above for emotional wellbeing. Mental health can be seen as a continuum, where an individual's mental health may have many different possible values (Keyes, 2002).

Unlike, mental health, however, emotional well-being as a term has the advantage of being positive, salutogenic, and non-medicalized (Weare, 2004). Emotional wellbeing is thus a more general and preferred term as compared to mental health, because of the stigma associated with mental illness.

Relationships and Wellbeing A number of empirical evidences suggest that intimate relationships are associated with wellbeing (Glenn, 1990; Ladd, Kochenderfer, & Coleman, 1996; Berndt, Hawkins, & Jiao, 1999; Waite & Gallagher, 2000; Williams, 2003; Dush & Amto, 2005; Soons, Liebrower, & Kalmijn, 2009). Social ties provide support that enhances psychological well-being as well as stress that contributes to psychological distress (Kiecolt-Glaser & Glaser 2002).

Research suggests that majority of people consider relationships to matter the most in life and give its fullest purpose (Klinger, 1977). Relationships are sources of joy and happiness (Duck, 1986). Relationships with other people are the bases for self-esteem and for the ability to relate to others (Duck, 1983; Duck & Perlman, 1985). Maintaining a few confiding relationships has been found to correlate with
happiness and subjective wellbeing (Argyle, 2001). Relationships are often held up as the single most important correlate of subjective wellbeing (Argyle, 2001).

They are said to be one of the most powerful sources of support throughout the life span, and the research evidence clearly shows that being involved in satisfying relationships is associated with enhanced emotional and physical health. It is not surprising that most people view relationships as the most powerful ingredients of a good and satisfying life (Neyer & Lenhart, 2006).

Brown and Harris (1978) show that the presence of a close and confiding relationship significantly reduced the risk of developing depression after a major loss or disappointment. Brown and Harris argue that long-term feelings of self-worth and self-esteem are especially significant, that they are provided important close relationships, and that, to a major extent, these feelings could stave off psychiatric disorder in a crisis.

Intimate relationships seem to buffer people from pathogenic effects of stress. In the face of stressful life events people who have intimate relationships have fewer stress related symptoms, faster recoveries from illness, and a lower probability of relapse or recurrence than those who do not have intimate relationships (Prager, 1995). There is substantial evidence that the perceived availability of social support buffers the effect of stress on psychological distress, depression, and anxiety (Cohen & Wills, 1985; Cohen, Mermelstein, Kamarck, & Hoberman, 1985; Kawachi & Berkman, 2001). Evidence for the buffering effect of intimate relationships have been found when stress is due to pregnancy (Dimitrovsky, Perez-Hirshberg, & Itskowitz, 1987); the birth of a child (Robinson, Olmsted, & Garner, 1989; Collins, Dunkel-Schetter, Lobel, & Scrimshaw, 1993); the illness of one’s child; one’s own illness, particularly, heart disease (Hobfoll, Nadler, & Leiberman, 1986; Waltz, 1986, Waltz, Badura, Ptaff, & Schott, 1988; Coyne & Smith, 1991); retirement (Salokangas, Matilla, & Joukamaa, 1988); and death of a spouse (Lopata, 1979; Lewittes, 1989). People tend to suffer stress and illness when their relationships become disturbed (Duck, 1998) and the presence of strong, close relationships preserves people from the worst effects of stress, whether the presence is just felt to be available or is actually provided (Sarason et al., 2001).

Baumeister and Leary (1995) proposed that people have a fundamental need to belong, such that they are strongly motivated to seek out positive social interactions and avoid interactions that are conflicted or that contain negative affect. Their work
outlines the considerable psychological toll exacted from an absence of positive and meaningful interpersonal relationships (Heatherton & Voks, 2000).

Those who feel ostracized or rejected experience negative reactions, including physical illness, emotional problems, and negative affective states (Rutter, 1979; Downey & Feldman, 1996; Williams, 1997). Furthermore, social support is known to be an important contributor to positive mental and physical health (Cohen & Wills, 1985), and people who are disliked, antagonistic, or emotionally distressed are less likely to receive support and assistance from others (Bolger, Foster, Vinokur, & Ng, 1996).

Bertera (2005) found that positive social support did not appear to prevent anxiety and mood disorder episodes caused by social negativity. These findings show the significance of negative social interaction on mental ill health, rather than any positive impact of interaction on good health.

People who lack intimate relationships are at risk for a variety of ills. They have higher mortality rates, more accidents, and higher risks for developing illnesses than those who have intimate relationships (House, Landis, & Umberson, 1988; Berman & Margolin, 1992). They show depressed immunology functioning (Kiecolt-Glaser et al., 1988). They are more vulnerable to feelings of loneliness (Wheeler, Reis, & Nezlek, 1983) and more likely to develop symptoms of psychological disturbance (Reisman, 1985; Steil & Turetsky, 1987; Chamberlaine, Barnes, Waring, & Wood, 1989; Peterson et al., 1993). Relationships that do not allow confiding, fail to provide beneficial effects of those that do (Coffman, Levitt, Deets, & Quigley, 1991). Even people with sizable social networks are likely to develop symptoms of psychological disturbance in the face of stressful events if they lack confiding relationships (Lowenthal & Haven, 1968; Brown, Bhrolchain, & Harris, 1975; Cohen & Hoferman, 1983; Miller & Lefcourt, 1983). Support from non-intimate partners has even been predictive of negative outcomes (Hobfoll & Lieberman, 1989; Lewittes, 1989).

An increased risk of distress, illness, and poor adjustment seems to accompany poorly functioning personal relationships (i.e., those that are unsatisfying, unstable or heavily conflicted). Poorly functioning relationships with parents, spouses, and friends have been associated with negative outcomes. People who have conflicted or unsatisfying close relationships are more likely to demonstrate poor self-efficacy (Fisk, Coyne, & Smith, 1991; Coyne & Smith, 1994); psychological symptomatology
(Rhodes, Ebert, & Meyers, 1994), especially depression (Keitner & Miller, 1990; Peterson et al., 1993; Vinokur & van Ryn, 1993); and physical complaints (Waring & Russell, 1980).

Therefore, strong and satisfying relationships lead to enhancement of mental and physical health and a lack of such relationships cause psychological and physiological difficulties.

Sullivan facilitated the idea of relationships being highly significant by stressing that interpersonal relationships form personality. The concept of relational self indicates that the self in embedded within interpersonal relationships. Finally, a number of researches show that relationships play an important role in the mental as well as physical aspects of wellbeing. Therefore, the aforementioned theoretical considerations and empirical evidences suggest that being in an intimate relationship seems to have a strong influence on an individual’s self and wellbeing.

1.4.1 PSYCHOLOGICAL WELL BEING:

Psychological well-being refers to both a theory and measurement scales designed and advocated primarily by Carol Ryff. In her seminal paper, "Happiness is everything, or is it? Explorations on the meaning of psychological well-being," she contrasts this with subjective well-being or hedonic well-being. Ryff attempted to combine different conceptions of well-being from the ancient Greek to the modern psychological such as theories of Individuation from Carl Jung, Self-actualization from Abraham Maslow and others.

Subjective well being has long been considered a central component of good life (Park, 2004). From an evolutionary perspective, subjective well being plays an adaptive role in human survival motivating the individual to engage in exploration and to build resources that enhance coping with life’s tragedies and stresses (Diener, 2000). Subjective well being is very important for the optimal mental health of the individual. According to Diener (2004), subjective well being is a multidimensional construct and refers to people’s evaluations of their lives – including cognitive judgments, such as life satisfaction; and affective evaluations (moods and emotions), such as positive and negative emotional feelings. It is a multidimensional construct that includes cognitive and affective components.

Diener (2000) proposes that subjective well being consists of 3 components:-

- Relatively high levels of positive affect (elation, contentment, pride, affection,
happiness and ecstasy). Relatively low levels of negative affect (guilt, shame, anxiety, worry, stress, depression and envy) and the overall judgment that one’s life is a good one i.e. life satisfaction. Diener (2004), later, bifurcated life satisfaction into:- o Domain satisfaction (work, family, leisure, health, finances, self & one’s group) and o Global life satisfaction (satisfaction with current life, satisfaction with past, satisfaction with future, significant other’s views of one’s life and desire to change to change one’s life). Subjective well being has considerable stability and cross situational consistency. Although individual’s immediate emotional reactions and appraisals may change in response to ongoing life events, long term subjective well being is likely to be consistent and stable yet there are reliable individual differences (Diener, 2004).

Subjective well being has several antecedents, but amongst them temperament’s contribution is considered very significant. Heady and Wearing (1999) proposed that temperament determines individual’s basic level of happiness - the hedonic set point. Life events can temporarily increase or decrease the level of happiness, but individuals usually return to their basic levels of happiness. Individuals adapt to life events rather quickly whether negative or positive (Suh et al., 1996). Temperament determines how sensitive an individual is to different life events. Along these lines, Kagan (1994) hypothesized that biologically based emotional styles - inhibited or uninhibited - channels positive and negative affects. Nonetheless, environmental factors also contribute to individual differences in subjective well being. Research suggests that encouraging authoritative parenting and effective communication among family members and focusing on emotional and instrumental support are all ways to promote subjective well being among youth (Park, 2004). Though important in itself subjective well being contributes to a variety of positive outcomes and works as a buffer against a variety of negative outcomes, including psychological disorders. Subjective well being serves not only as a key indicator of positive development but also as a broad enabling factor that promotes and maintains mental health.

Psychological well-being can be simply defined as the individual’s current evaluation of her happiness. Such an evaluation is often expressed in affective terms; when asked about Psychological well-being, participants will often say, “I feel good” (Schwartz & Strack, 1999). Psychological well-being is thus, at least in part, a proxy for a global affective evaluation.
According to Ed Diener, an American psychologist, psychological well-being is multidimensional and includes positive and negative emotions (e.g. the frequency, duration and intensity of joy, pleasure, happiness but also anger, guilt, fear, depression, sadness), as well as global life satisfaction, and satisfaction with different aspects of one's life (partnership, income, friends). Aspects of good psychological functioning (including feelings of autonomy, competence and purpose) can also be seen as part of a person’s psychological well-being. Several different definitions of psychological well-being have been offered:

"Well-being, which we define as people's positive evaluations of their lives, includes positive emotions, engagement, satisfaction and meaning."

"Psychological well-being is a broad category of phenomena that includes people's emotional responses, domain satisfactions, and global judgments of life satisfaction. Each of the specific constructs need to be understood in their own rights, yet the components often correlate substantially." (Diener, Suh, Lucas and Smith, 1999)

Kahnemann and Riis (2005) consider psychological well-being as being a hybrid concept with two components, which can be labelled "experienced well-being" and "evaluated well-being". Both components are psychological and refer to a time of reference. The first component is concerned with very short-term (or momentary) affective states – i.e., life as lived. The second component covers a much longer (or indefinite) time period, and refers to global psychological evaluations of one's life overall – which could be considered life as remembered. In many instances, these two components can be expected to be highly correlated with each other. However, they are not always. The determinants and consequences of happiness are often treated as unitary but they should be measured separately.

Reconciling these various definitions, the 2013 OECD Guidelines on Measuring Psychological Well-Being takes an inclusive approach, where psychological well-being is understood as: “Good mental states, including all of the various evaluations, positive and negative, that people make of their lives, and the affective reactions of people to their experiences”. In practice, the measurement framework proposed by the OECD distinguishes between three components of psychological well-being, each of which need to be measured separately:
• **Life evaluation** – which refers to reflective assessments of a person’s life as a whole, or some specific aspect of life. For example, classic evaluation measures can include questions about satisfaction with life as a whole, or satisfaction with specific domains of life (such as health or income).

• **Affect** – which refers to both positive and negative feelings and emotions, such as happiness, contentment, worry, sadness, depression, anger, fear, etc. Affect measures are usually captured with reference to a specific time period (such as feelings “yesterday” or feelings “in the last four weeks”).

• **Eudaimonia** – a diverse and (as yet) less well-defined construct, often used to refer to feelings of meaning and purpose in life (capturing the idea of a life “lived well”), but which can also be used in the context of good psychological functioning or “flourishing” (including feelings of autonomy, competence, social engagement, caring, and interest in learning/personal growth).

Since the dawn of civilization great thinkers have discussed the quality of human existence, and the “good life”. Since at least the sixth century B.C., the Classic Greeks explored the issue under the rubric of eudaemonia, that is human flourishing or living well. This followed with the Hellenistic Greeks and the Romans exploring ataraxia, a form of happiness within one’s own controls. 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 good 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" (SWB) and in colloquial terms is sometimes labeled "happiness" The field of subjective well-being comprises the scientific analysis of how people evaluate their lives—both at the moment and for longer periods such as for the past year. It is the field in the behavioral sciences in which people’s evaluations of their lives are studied. It includes diverse concepts ranging from momentary moods to global judgments of life satisfaction, and from depression to euphoria. Its scientific study has shown increasing interest in the past two decades and presently SWB spans fields from management to mental health. Psychologists too have indicated their growing interest in this field under a variety of
terms and methodologies. The field has grown rapidly in the last decade, so that there are now thousands of studies on topics such as life satisfaction and happiness.

1.4.2 HISTORY OF RESEARCH ON SUBJECTIVE WELL-BEING:

The field of subjective well being, emerged five decades ago, as psychology progressed from radical behaviorism and emphasis on negative states. Several different lines of research come together in the history of the field of SWB. A major influence on the field came from sociologists and quality of life researchers who conduct surveys to determine how demographic factors such as income and marriage influence subjective well being. Another influence in the field came from researchers working in the area of mental health, who wanted to extend the idea of mental health beyond the absence of symptoms of depression and distress to also include the presence of happiness and life satisfaction. Yet another influence was from personality psychologists who studied the personalities of happy and unhappy people. Finally, social and cognitive psychologists studied how adaptation and varying standards influence people’s feelings of well-being. These various strands were brought together in integrative reviews by Diener (1984) and Veenhoven (1984). Owing to the diverse influences on the field, a variety of methods such as surveys, laboratory experiments, and intensive studies of individuals have been employed. Additionally, numerous theoretical orientations have also contributed to the understanding of construct of subjective well-being. Humanistic psychology stimulated the interest in positive well-being. A number of factors such as temperament, adaptation to conditions, and goal striving substantially influence levels of SWB. However, there is currently no single conceptual scheme that unites the field, although attempts at unification have been made. Since the emergence of the field over five decades ago, the SWB literature has progressed rapidly. First, as recent surveys show, psychologists and other social scientists have taken huge steps in their understanding of the factors influencing people’s SWB. As such, SWB research solicits increasing attention of politicians, government officials and the public alike. Understanding subjective well-being has become a core human endeavor (Steel, et al., 2008).
1.4.3 DEFINITION OF SUBJECTIVE WELL-BEING:

The term “subjective well-being” denotes a stable, overall sense of well-being; and alludes to emotional (e.g., how frequently one experiences positive emotions like happiness) and cognitive components (e.g., judgments of one’s satisfaction with life) that are relatively enduring rather than momentary. It refers to people’s evaluations of their lives - including cognitive judgments, such as life satisfaction; and affective evaluations (moods and emotions), such as positive and negative emotional feelings, for e.g., people’s emotional reactions to events, their moods, and judgments they form about their life satisfaction, fulfillment, and satisfaction with domains such as marriage and work (Diener, 2000).

Everyone’s moods, emotions, and self-evaluative judgments fluctuate over time; SWB researchers study these fluctuations but also examine the longer term mean level differences that exist between individuals and societies. It includes what lay people call happiness, peace, fulfillment, and life satisfaction (Diener et al., 2004).

Similarly, Veenhovan (2000) defined subjective well being as “a set of affective and cognitive appraisals concerning one’s life including -how good it feels, how well it meets expectations, how desirable it is deemed to be, etc”.

According to Siegrest (2003) “subjective well being refers to people’s judgments about their own state. These judgments concern their enduring mood (e.g., happiness) as well as their evaluation of the self (e.g., satisfaction with one material and psychosocial environment (e.g., life satisfaction, work satisfaction).

Mood reflects the perception and evaluation of an individual’s affective state whereas satisfaction with one’s life conditions involves cognitive judgments that are based on some standard of comparison. These cognitive judgments point to existing or non-existing discrepancies between expectation and real experience”. van Hoorn (2007) posits SWB as a broad category of phenomena that includes people’s emotional responses, domain satisfactions, and global judgments of life satisfaction.

All these definitions posit that subjective well-being is people’s subjective evaluations of their lives, and includes concepts such as life satisfaction, pleasant emotions, feelings of fulfillment, and satisfaction with domains such as marriage and work, and low levels of unpleasant emotions.

According to Diener and Tov (2008) although “happiness” and subjective well-being are used somewhat interchangeably, subjective well-being is the preferred term by researchers working in this field because the word “happiness” has varied
meanings, ranging from a pleasant current mood to quality of life. The term “happiness” can refer either to momentary positive feelings or to long-term well-being. However, for ease of exposition, researchers sometimes use the term “happy people” primarily to refer to individuals who have a stable, long-term sense of well-being and are not simply in a temporary positive state momentary (Diener & Tov, 2008).

Thus, subjective well-being is an umbrella term that includes a variety of related concepts that all pertain to how people feel and think about their lives. Whether emotions or cognitions, all forms of subjective well-being represent the person’s evaluation of his or her life, whether at the moment or across time.

People experience abundant subjective well-being when they feel many pleasant and few unpleasant emotions, when they are engaged in interesting activities, when they experience many pleasures and few pains, and when they are satisfied with their lives. There are additional features of a valuable life and of mental health, but the field of SWB focuses on people's own evaluations of’s physical and mental health and functioning) and its relation to the their lives. To some individuals the ideal state is one of wealth, to others, having significant relationships, while some report helping those in need is central.

These individuals vary in external circumstance, yet they may share a subjective feeling of well being momentarily. The field of subjective well-being has several cardinal characteristics. First, it is concerned with well-being from the perspective of the respondent; hence, importance is granted to the respondent’s own views of their life. Second, the researcher is mainly interested in long-term levels of satisfaction and affect, though, short-term moods and emotions are studied as well. Third, healthy personality variables are also researched, not just negative states such as depression and anxiety. Attainment of subjective well-being not only involves avoiding sadness, but also experiencing life satisfaction and pleasant emotions. Subjective well-being researchers, thus, explore the full range of psychological well-being such that focus is upon factors that keep one from being depressed and factors that lead one to becoming elated. This trend is not surprising because happiness and life satisfaction are major goals for most people. Emphasis is placed on understanding the processes that underlie SWB, in turn, people’s goals, coping efforts, and dispositions are studied. The field has grown rapidly in the last decade, so that there are now thousands of studies on topics such as life satisfaction and happiness.
1.4.4 WHY DOES PSYCHOLOGICAL WELL-BEING MATTER?

In general, people's own views about their lives, and the quality of their day-to-day experiences, can play an important part in building up a picture of the well-being of the population. There are several reasons why it can be helpful to use psychological well-being as a complement to other more objective measures of life circumstances: First, people’s feelings about life, and their emotional states, can be seen as intrinsically important for their quality of life. Someone who is deeply unsatisfied with their life, who feels that their life has no meaning or purpose, or who experiences extreme depression and sadness is unlikely to be viewed as having a good quality of life. While it is clear that people are sometimes willing to trade short-term feelings of happiness for other outcomes of value, it is also clear that people regard psychological well-being as an important outcome in its own right. Second, psychological well-being measures seem to be able capture aspects of life that other more conventional economic indicators can fail to highlight. For example, the importance of mental health, the quality of a person’s relationships, and feelings of freedom, autonomy and trust. Rising economic prosperity is a very important mechanism for improving people’s well-being, but rising GDP alone does not always guarantee political stability, social harmony, or increasing happiness. For example, data from the Gallup World Poll suggests that in Egypt and Tunisia people’s psychological well-being sharply declined in the years preceding the start of the Arab Spring in 2010, even though real GDP per capita was growing. Life satisfaction has also been shown to help to explain the choices people make about moving between countries, over and above the economic factors that drive migration, such as GDP per capita. Thirdly, there is evidence to suggest that low psychological well-being can be a precursor to other issues and problems in people's lives, while high levels of psychological well-being have been associated with a range of positive life outcomes. Psychological well-being has been prospectively linked to objective well-being outcomes in fields such as health, experiences of work, and aspects of social connections – as reviewed by De Neve, Diener, Tay and Xuereb (2013); Diener and Chan (2011); Lyubomirsky, King and Diener (2005); and Pressman and Cohen (2005).
1.4.5 COMPONENTS OF PSYCHOLOGICAL WELL-BEING:

Psychological well-being’s components are briefly described below.

- **Self Acceptance:**
  
The most recurrent criterion of well-being evident in the previous perspectives is the individual's sense of self-acceptance. This is defined as a central feature of mental health as well as characteristic of self-actualization, optimal functioning, and maturity. Life span theories also emphasize acceptance of one's self and one's past life. Thus, holding positive attitudes toward oneself emerges as a central characteristic of positive psychological functioning.

- **Positive Relations with Others:**
  
  Many of the preceding theories emphasize the importance of warm, trusting interpersonal relations. The ability to love is viewed as a central component of mental health. Self-actualizers are described as having strong feelings of empathy and affection for all human beings and as being capable of greater love, deeper friendship, and more complete identification with others. Warm relating to others is posed as a criterion of maturity. Adult developmental stage theories also emphasize the achievement of close unions with others (intimacy) and the guidance and direction of others (generatively). Thus, the importance of positive relations with others is repeatedly stressed in conceptions of psychological well-being.

- **Autonomy:**
  
  There is considerable emphasis in the prior literature on such qualities as self-determination, independence, and the regulation of behavior from within. Self-actualizers are described as showing autonomous functioning and resistance to enculturation. The fully functioning person is described as having an internal locus of evaluation, whereby one does not look to others for approval, but evaluates oneself by personal standards. Individuation is seen to involve a deliverance from convention, in which the person no longer clings to the collective fears, beliefs, and laws of the masses. The process of turning inward in the later years is also seen by life-span developmentalists to give the person a sense of freedom from the norms governing everyday life.
• **Purpose in Life:**

Mental health is defined to include beliefs that give one the feeling that there is purpose and meaning to life. The definition of maturity also emphasizes clear comprehension of life's purpose, a sense of directedness, and intentionality. The life-span development theories refer to a variety of changing purposes or goals in life, such as being productive and creative or achieving emotional integration in later life. Thus, one who functions positively has goals, intentions, and a sense of direction, all of which contribute to the feeling that life is meaningful.

• **Personal Growth:**

Optimal psychological functioning requires not only that one achieve the prior characteristics, but also that one continue to develop one's potential, to grow and expand as a person. The need to actualize oneself and realize one's potential is central to clinical perspectives on personal growth. Openness to experience, for example, is a key characteristic of the fully functioning person. Such an individual is continually developing, rather than achieving a fixed state wherein all problems are solved. Life-span theories also give explicit emphasis to continued growth and to facing new challenges to tasks at different periods of life. Thus, continued growth and self-realization are prominent themes in the aforementioned theories.

• **Environmental Mastery:**

The individual's ability to choose or create environments suitable to his or her psychic conditions is defined as a characteristic of mental health. Maturity is seen to require participation in a significant sphere of activity outside of oneself. Life-span development is described as requiring the ability to manipulate and control complex environments. These theories emphasize one's ability to advance in the world and change it creatively through physical or mental activities. Successful aging also emphasizes the extent to which the individual takes advantage of environmental opportunities. These combined perspectives suggest that active participation in and mastery of the environment are key ingredients in an integrated framework of positive psychological functioning.

In sum, the integration of mental health, clinical, and life-span developmental theories points to multiple converging aspects of positive psychological functioning.
Conceptually, these criteria are distinct from prominent empirical indicators of well-being such as happiness and life satisfaction.

1.4.6 THEORIES OF PSYCHOLOGICAL WELL BEING:

Theories of the causes of SWB tend to emphasize either top-down or bottom-up influences.

- **Top-down perspective**

  In the top-down view, global features of personality influence the way a person perceives events. Individuals may therefore have a global tendency to perceive life in a consistently positive or negative manner, depending on their stable personality traits. Top-down theories of SWB suggest that people have a genetic predisposition to be happy or unhappy and this predisposition determines their SWB "setpoint". Set Point theory implies that a person's baseline or equilibrium level of SWB is a consequence of hereditary characteristics and therefore, almost entirely predetermined at birth. Evidence for this genetic predisposition derives from behavior-genetic studies that have found that positive and negative affectivity each have high heritability (40% and 55% respectively in one study).\(^3\) Numerous twin studies confirm the notion of set point theory, however, they do not rule out the possibility that it is possible for individuals to experience long term changes in SWB.

  Diener et al. note that heritability studies are limited in that they describe long-term SWB in a sample of people in a modern western society but may not be applicable to more extreme environments that might influence SWB and do not provide absolute indicators of genetic effects. Additionally, heritability estimates are inconsistent across studies.

  Further evidence for a genetically influenced predisposition to SWB comes from findings that personality has a large influence on long-term SWB. This has led to the dynamic equilibrium model of SWB. This model proposes that personality provides a baseline for emotional responses. External events may move people away from the baseline, sometimes dramatically, but these movements tend to be of limited duration, with most people returning to their baseline eventually.
• Bottom-up perspective

From a bottom-up perspective, happiness represents an accumulation of happy experiences. Bottom-up influences include external events, and broad situational and demographic factors, including health and marital status. Bottom-up approaches are based on the idea that there are universal basic human needs and that happiness results from their fulfillment. In support of this view, there is evidence that daily pleasurable events are associated with increased positive effect, and daily unpleasant events or hassles are associated with increased negative effect.

However, research suggests that external events account for a much smaller proportion of the variance in self-reports of SWB than top-down factors, such as personality. A theory proposed to explain the limited impact of external events on SWB is hedonic adaptation. Based originally on the concept of a "hedonic treadmill", this theory proposes that positive or negative external events temporarily increase or decrease feelings of SWB, but as time passes people tend to become habituated to their circumstances and have a tendency to return to a personal SWB "set point" or baseline level.

The hedonic treadmill theory originally proposed that most people return to a neutral level of SWB (i.e. neither happy nor unhappy) as they habituate to events. However, subsequent research has shown that for most people, the baseline level of SWB is at least mildly positive, as most people tend to report being at least somewhat happy in general and tend to experience positive mood when no adverse events are occurring. Additional refinements to this theory have shown that people do not adapt to all life events equally, as people tend to adapt rapidly to some events (e.g. imprisonment), slowly to others (e.g. the death of a loved one), and not at all to others (e.g. noise and sex).

1.4.7 FACTORS AFFECTING SUBJECTIVE WELL BEING:

In a classic article, reviewing the limited empirical evidence regarding the "correlates of avowed happiness", concluded that 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”. In the ensuing forty years numerous studies have been conducted giving a better view of processes underlying subjective well being.
Early subjective well-being researchers focused on identifying the external conditions that led to satisfying lives. Education and wealth have been found to have significant correlations with subjective well-being. Strong correlations were found between health and subjective well-being for self-reported measures, but not for objective health ratings by. Poor health is also considered to negatively influence subjective well-being as it interferes with goal attainment. Work, too, is thought to be related to subjective well-being as it offers optimal level of stimulation that people find pleasurable, positive social relationships, and a sense of identity and meaning. Unemployed people have higher distress, lower life satisfaction, and higher rates of suicide than employed; causing lower subjective well being. In addition to these, religion, job satisfaction, leisure satisfaction, life events etc. too affect subjective well-being.

However, Vaillant (2003) posited that, when heritable variables are controlled, subjective well-being—unlike tested intelligence— is not affected by environmental factors such as income, parental social class, age, and education. He cited that relationships are more important to subjective well-being than is money. Reviewing the various studies, researchers (Ben-Zur, 2003; Diener et al., 2003; Eddington & Shuman, 2004; Vaillant, 2003), concluded that demographic factors like income, health, physical attractiveness have only modest influence on long term levels of emotion, accounting for only small percentage of variance. Furthermore, people adapt or habituate to events.

Research instead shows that subjective well-being is fairly stable over time, that it rebounds after major life events, and that it is often strongly correlated with stable personality traits. This prompted researchers to probe various other factors that keep one from being depressed and factors that lead one to becoming elated, with an emphasis on understanding the processes which underlie happiness; for instance, people’s goals, coping efforts, and dispositions etc.

In assessing the dispositional factors, investigations reveal moderate to strong correlations between subjective well-being and personality traits, revealing strong association between extraversion and pleasant affect; as well as neuroticism and negative affect (Costa & McCrae 1980; Lucas & Fujita, 2000; Shweta & Sokhey, 2005; Watson & Clark, 1984, 1992). Agreeableness, openness to experience and conscientiousness too correlated with subjective well-being (DeNeve & Cooper,
Similarly, temperament has also been shown to correlate with subjective well-being (Kagan, 1994; Park, 2004). In addition to these, intelligence, repressive defensiveness, trust, locus of control, desire for control, positive coping styles, and hardness all exhibited moderate correlations with subjective well-being (Diener, 1984; DeNeve & Cooper, 1998; Shweta & Sokhey, 2005). Self-esteem, sense of control, optimism, self-efficacy, are also positively related to subjective well-being (Eddington & Shuman, 2004). Similarly, Emmons (1986) revealed that various features of one’s goals (including the existence of important goals, progress towards those goals, and conflict among different goals) can have important implications for emotional and cognitive well-being; other researchers (Cantor & Sanderson 1999, Higgins et al., 1999) have suggested that the way we approach our goals influences subjective well-being (Diener, Oishi & Lucas, 2003). Furthermore, early parent-child relationship characteristics, including the quality of attachment relationships and parents’ warmth, sensitivity, and responsiveness have been posited to be important influences on individual differences in the development of positive and negative emotionality and life satisfaction (Diener et al., 2003; Suldo & Huebner, 2004). Positive relationship with peers, too enhance subjective well-being. Park (2004) opines that the quality rather than the quantity of social interactions is related to subjective well-being. The surge of interest in probing processes underlying subjective well-being is not surprising because happiness and life satisfaction are major goals for most people. So besides investigating the causes and correlates of subjective well-being, theorists also explore its impact on people’s lives.

1.5. WHO ARE DISABLED?

In India, the broad definitions of different categories of disabilities have been adopted in the Persons with Disabilities (Equal Opportunities, Protection of Rights and Full Participation) Act, 1995 as well as under the Rehabilitation Council of India Act, 1992.

“Person with Disability” refers that a person suffering from not less than forty percent of any disability certified by a medical authority.

The National Policy for Persons with Disability, announced in February 2006, attempts to clarify the framework under which the state, civil society and private
sector must operate in order to ensure a dignified life for persons with disability and support for their caregivers.

**Table No. 1.5.1**

*WHO has adopted a sequence underlying illness-related phenomenon as; Disease Impairment, Disability, Handicap*

**Explanation of Disability by WHO (1992)**

<table>
<thead>
<tr>
<th>Condition</th>
<th>Concerned with</th>
<th>Represent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Impairment</td>
<td>Abnormalities of body structure and appearance; organs or system functioning</td>
<td>Disturbances at organ level</td>
</tr>
<tr>
<td>Disabilities</td>
<td>Impairment in terms of functional performance and activities</td>
<td>Disturbances at personal level</td>
</tr>
<tr>
<td>Handicaps</td>
<td>Disadvantages resulted from impairment and disabilities</td>
<td>Interaction with and adaptation to individual’s</td>
</tr>
</tbody>
</table>

**Table No. 1.5.2**

*Source: WHO Classification of Impairments, Disabilities and handicaps (1992)*

<table>
<thead>
<tr>
<th>Sr. No.</th>
<th>Disability</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td>Blindness</td>
</tr>
<tr>
<td>2.</td>
<td>Low Vision</td>
</tr>
<tr>
<td>3.</td>
<td>Hearing Impairment</td>
</tr>
<tr>
<td>4.</td>
<td>Loco motor disability</td>
</tr>
<tr>
<td>5.</td>
<td>Mental retardation</td>
</tr>
<tr>
<td>6.</td>
<td>Mental illness</td>
</tr>
</tbody>
</table>

The Persons with Disabilities—Equal opportunities, protection of Rights and full participation Act, 1995 defines disability means that “A person suffering from not less than forty percent of disability as certified by a medical authority. The Act classifies the disability as follows;

*Blindness/Visual Impairment*

As per PWD Act 1995, blindness refers to a condition where a person suffers from any of the following conditions, namely:
• Total absence of sight or
• Visual acuity not exceeding 6/60 meter or 20/200 feet (Snellan) in the better eye with correcting lenses; or
• Limitation of the field of vision subtending an angle of 20 degree or worse

The term visual impairment is used to describe those who are permanently handicapped by defective vision, caused by congenital defect, illness or injury (Evan, 1995).

The definition of blindness is used to describe individuals who are totally blind and unable to perform any work for which eyesight is essential (Khaw, 1994).

- **Low Vision:**

The WHO working definition of Low Vision (WHO, 1992) is as follows:

“A person with low vision is one who has impairment of visual functioning even after treatment and/or standard refractive correction and has a visual acuity of less than 6/18 to light perception or a visual field of less than 10 degrees from the point of fixation, but who uses, or is potentially able to use vision for the planning and/or execution of a task”.

The Department for Education and Skills, (DfES, 2001), defines that those with relatively minor visual difficulties are sometimes described as having low vision.

- **Hearing impairment**

The PWD Act, 1995, defines hearing impairment as loss of sixty decibels or more in the better ear in the conventional range of frequencies.

Jangira and Mukhopadhyay (1986) defines that hearing impaired persons have hearing loss one or both ears due to impairment in the auditory mechanism. The hearing loss is a continuum ranging from mild to severe and profound loss. Deaf persons on this continuum are those whose auditory channel fails to serve as a means of processing speech.
 Loco motor Disability

“Loco motor Disability” as defined in the Act is the disability of bones, joints or muscles leading to substantial restriction of movement or any form of cerebral palsy.

 Mental Retardation

“Mental Retardation” as defined in the Act as a condition of arrested or incomplete development of mind of persons which is specially characterized by sub-normality of intelligence.

The PWD Act (1995) defines “person with severe disability means a person with eighty percent, or more of one or more disabilities. It, however, does not clearly define persons with multiple disabilities.

Definition by the National Trust: As per the National Trust for Welfare of Persons with Autism, Cerebral Palsy, Mental Retardation and Multiple Disabilities Act, 1999, multiple disabilities means a combination of two or more disabilities as defined in clause (I) of Section (2) of the Persons with Disabilities Act, 1995. In addition to the above, multiple disabilities include individuals who are Deaf blind, autistic, cerebral palsied, neurologically impaired. These disabilities may either be congenital or acquired.

1.5.1 EDUCATION OF THE DISABLED IN INDIA – A HISTORICAL PERSPECTIVE:

According to Miles (2000), rudimentary attempts to educate students with disabilities were made in India long before such attempts were made in Europe. The formal education of children with disabilities began in India in 1869 when Jane Leupot, with the support of the Church Missionary Society, started a school for “blind students” in Benares (Miles, 1997). Miles also reported that the first formal school for children with intellectual and physical disabilities was established in the eastern part of India in Kurseong in 1918.

The education of children with disabilities in segregated settings continued well after India gained independence from Great Britain in 1947, with various non-government organizations assuming increasing responsibility for their education. By 1966 there were 115 schools for students with a visual impairment, 70 schools for
students with a hearing impairment, 25 schools for students with an orthopedic disability and 27 schools for students with an intellectual disability (Aggarwal, 1994). According to Pandey & Advani (1997), by 1991 there were about 1,200 special schools for students with various types of disabilities in India. In 1974, the Ministry of Welfare, Government of India, initiated the Integrated Education of Disabled Children (IEDC) program to promote the integration of students with mild to moderate disabilities into regular schools. The program was also designed to promote the retention of children with disabilities in the regular school system. However, the program met with little success. Rane (1983), in his evaluation of this program in the State of Maharashtra, reported that (a) the non-availability of trained and experienced teachers, (b) lack of orientation among regular school staff about the problems of disabled children and their educational needs, and (c) the non-availability of equipment and educational materials were major factors in the failure of the program. Also, a lack of coordination among the various departments to implement the scheme was another major factor in the failure of the IEDC plan (Azad, 1996; Pandey & Advani, 1997).

Due to its shortcomings, the IEDC program was revised in 1992. Under the revised scheme, 100 percent assistance became available to schools involved in the “integration” of students with disabilities. Various nongovernment organizations are now fully funded to implement the program. According to the most recent estimates, the IEDC is being implemented in 26 States and Union Territories, serving more than 53,000 students enrolled in 14,905 schools (Ministry of Information and Broadcasting, 2000). In 1987, the Ministry of Human Resource Development (MHRD), in association with UNICEF and the National Council of Educational Research and Training (NCERT) developed the Project for Integrated Education for the Disabled (PIED). This project produced several positive results. Jangira and Ahuja (1993) reported that as a result of improved program planning and better management skills now made available to the teachers, the capacity of various states to implement integration programs was enhanced. Both regular school teachers and students became more receptive toward students with disabilities (Azad, 1996). The success of the PIED project led to an increased commitment by the Department of Education to integrate students with disabilities (Jangira & Ahuja, 1993).

In 1996, the Government of India enacted the Persons with Disabilities (Equal Opportunities, Protection of Rights and Full Participation) Act (PWD Act) of 1995
(Ministry of Law Justice and Company Affairs, 1996). The Act provided for both preventive and promotional aspects of rehabilitation. It covered such aspects as education, employment, non-discrimination, prevention and early detection, social security, research and manpower development, and affirmative action. Seven categories of disability were covered in the legislation, namely “blindness,” “low vision,” “leprosy cured,” “hearing impairment,” “locomotor disability,” “mental retardation” and “mental illness.”

The PWD Act required the Central, State, and Union Territory Governments to ensure that all children with disabilities had access to a “free and appropriate” education until the age of 18 years. In order to expand educational opportunities for children with disabilities, the Central Government, in its Five-Year Plan (1997-2002), set aside 1,000 million rupees specifically for the provision of integrated education (Ministry of Welfare, 1997; Ministry of Information and Broadcasting, 2000).

The Government of India’s policies were based on the principle of Universal Elementary Education (UEE) which resonated with the ‘education for all’ mantra adopted by several western democracies after its launch at the UN World Conference in 2000.

In the year 2002, the elementary education, i.e. education for children within the age group of 4 to 14 years, was made a ‘fundamental right of every child’ in India under the 86th Constitutional Amendment. As a result, the thrust was increased to promote the education of the disabled also along with the out of-school children.

The influential National Policy on Education of 1986 stated that the education of children with special needs was an ‘inseparable part’ of the mainstream education system and thus, endorsed the expansion of elementary education to achieve this aim (MHRD, 1986).

The centrally sponsored government scheme - the Integrated Education for Disabled Children (IEDC) scheme - was launched by the Ministry of Social Welfare in 1974 (Rane 1983). The Right of Children to Free and Compulsory Education Act, 2009 leads the way by offering every child the right to education in their neighbourhood school and giving the National Commission for Protection of Child Rights (NCPCR) with a mandate to monitor the implementation this Act. In addition, the Persons with Disability (Equal Opportunities, Protection of Rights and Full Participation) Act 1995, together with the Rehabilitation Council of India Act 1992
(amended in 2000) and the National Trust for Welfare of Persons with Autism, Cerebral Palsy, Mental Retardation and Multiple Disabilities Act, 1999 provide the legislative backbone to the national policies surrounding disability and education of children with special needs. The PWD Act 1995, for instance, affirms the central government’s commitment to ensure full participation of people with disabilities in the society including education, public sector employment and health.

The government scheme Sarva Shiksha Abhiyan (SSA) programme launched in 2002 based on the principles of ‘education for all’. The World Bank alone invested $500 million in Phase I (2003-2007) to expand facilities and improve infrastructure in order to get children to access learning in their neighbourhood school. In Phase II (2007-2012) the Bank further committed to provide $1.35 billion for specific targets such as, to expand access to schools, increase retention, raise learning levels and improve inclusive education for children with special needs (Sankar, D. 2007).

1.5.2 ROLE OF PARENTS OF DISABLED CHILDREN:

The true sufferers are the parents of disabled children. The parents having the female disabled child suffer with more stress, emotional problems and neurotic problems. Likewise the parents’ with mentally retarded child also face intensive problem of stress. Sometimes the parents have to take the advice of their physician or counselor to give some basic training. In Western countries many social issues are advantage to the parents in Government side also. In Indian context the social situations are more pathetic because of the financial problems of the parents and also lack of proper education.

In this juncture the researcher focused his direction to verify the stress levels, emotional maturity levels and personality of the parents in different variables, with the relationships and differences between them.

1.5.3 DISABILITY IN INDIA:

Over the last fifty years, right to education has evolved in India inspired by a host of factors including judicial interpretations, enactment of special laws and amendment to the constitution. The constitution of India has made education a fundamental right for all children including the children with disabilities in the age group of 6-14 years. Section 26 of Persons with Disabilities Act (1995) affirms the
capacity of Indian State to afford free education beyond 14 years of age, particularly in the context of children with disabilities.

According to the Census (2001) there are 2.19 crores people with disabilities in India who constitute 2.13 per cent of the total population. This includes persons with visual, hearing, speech, loco motor and mental disabilities. Seventy five per cent of persons with disabilities live in rural areas, 49 per cent of disabled population is literate and only 34 per cent are employed. The earlier emphasis on medical rehabilitation has now been replaced by an emphasis on social rehabilitation.

In India different definitions of disability conditions have been introduced for various purposes, essentially following the medical model and, as such, they have been based on various criteria of ascertaining abnormality or pathologic conditions of persons. In absence of a conceptual framework based on the social model in the Indian context, no standardization for evaluating disability across methods has been achieved. In common parlance, different terms such as disabled, handicapped, crippled, physically challenged, are used interchangeably, indicating noticeably the emphasis on pathologic conditions.

Persons with Disability Act, 1995 Through the Act is built upon the premise of equal opportunity, protection of rights and full participation, it provides definitions of disabled person by following the medical model. According to the Persons with Disabilities (Equal Opportunities, Protection of Rights and Full Participation) Act, 1995, "Person with disability" means a person is suffering from not less than (40%) forty percent of any disability as certified by a medical authority (any hospital or institution, specified for the purposes of this Act by notification by the appropriate Government). As per the act "Various types of Disability" are, (i) Blindness; (ii) Low vision; (iii) Leprosy-cured; (iv) Hearing impairment; (v) Loco motor disability; (vi) Mental retardation; (vii) Mental illness, which were defined as below. "Blindness" refers to a condition where a person suffers from any of the following conditions, (i) Total absence of sight. (ii) Visual acuity not exceeding 6/60 or 20/200 (snellen) in the better eye with correcting lenses; (iii) Limitation of the field of vision subtending an angle of 20 degree or worse;

"Person with low vision" means a person with impairment of visual functioning even after treatment or standard refractive correction but who uses or is potentially capable of using vision for the planning or execution of a task with appropriate assistive device; "Leprosy cured person" means any person who has been
cured of leprosy but is suffering from- (i) Loss of sensation in hands or feet as well as loss of sensation and paresis in the eye and eye-lid but with no manifests deformity; (ii) Manifest deformity and paresis; but having sufficient mobility in their hands and feet to enable them to engage in normal economic activity; (iii) Extreme physical deformity as well as advanced age which prevents him from undertaking any gainful occupation, and the expression "leprosy cured" shall be construed accordingly; "Hearing impairment" means loss of sixty decibels or more in the better ear in the conversational range of frequencies; "Loco motor disability" means disability of the bones, joints muscles leading to substantial restriction of the movement of the limbs or any form of cerebral palsy; "Mental retardation" means a condition of arrested or incomplete development of mind of a person which is specially characterized by sub normality of intelligence; "Mental illness" means any mental disorder other than mental retardation; Initially parental response may be a form of emotional disintegration. This may evolve into a period of families’ adjustment and later into reorganization of the families daily day to day life situations. Some of the parents cannot cope up beyond certain level of stress due to the emotional disintegration. So they decide to give their child for adoptions or to aboard or to place the child in any institutions. These decisions are not easy and it is so stressful to the families especially to the parents. Government of India Schemes and Benefits for the Disabled Assistance to Disabled Persons for Purchase/ Fitting of Aids and

- Appliances (ADIP Scheme) National Scholarship for Disabled
- Railway Concession including Escort
- Income Tax Exemption for Parents
- National Awards
- Age Relaxation for Employment
- 3% Reservation in govt. employment
- NHFDC Loan Schemes
- Union Territory of Puducherry Schemes and Benefits of Disabled Disability Pension
- Scholarship
- Marriage Assistance
- Loan Assistance for Self employment
- Group Insurance
- Special school scheme
- Aids and Appliances
- Vocational training
- Transport Allowance