

health using multivariate exponential random graph models with an Australian sample of secondary school students. Results show male students with relationally dissonant ties have lower positive mental health measures. Girls with relationally dissonant ties have lower depressed mood, but those girls being targeted by negative ties are more likely to have depressed mood. Their findings have implications for the development of interventions focused on promoting adolescent well-being and consideration of the appropriate measurement of well-being and mental illness.

Singh and Sahu (2013) studied the relation between psychological well-being and emotional intelligence. They have conducted a study on 75 boys and 75 girls ranging from 13 -17 years. They used Jyotsna Codaty Scale (2004) for measuring EI and Warr's PWB (1990) for measuring well-being. Their result indicated that the subjects have higher psychological well-being but low in emotional intelligence. The gender differences are found only in emotional intelligence. There is a positive-non significant correlation between psychological well-being and emotional intelligence.

Extremera et al. (2011) examined the relationship between emotional intelligence abilities and levels of hedonic and eudaimonic well-being in a 12-week follow-up study. Participants were 349 undergraduate students who completed an ability measure of emotional intelligence (MSCEIT), personality questionnaires, and hedonic and eudaimonic well-being measures at time 1. After 12 weeks, participants repeated the hedonic and eudaimonic measures at time 2. Focusing first on cross-sectional analysis, they found emotional intelligence scores to be moderately and significantly related to hedonic and eudaimonic well-being measures. They found that ability EI predicted a

modest but additional variance in prospective levels of hedonic and eudaimonic well-being over and above personality traits. Also, the explained variance of EI was higher for eudaimonic than for hedonic well-being. These findings provide some preliminary evidence on the prospective value of ability EI in the maintenance of positive mood and better outlook on life (hedonia) and, specifically, in the development of aspects of human functioning (eudaimonia).

Schutte and Ryff (1997) studied personality dimensions with psychological well-being. They opined that because measures of personality and well-being share common affective underpinnings and items, previously reported links between these domains may be tautological. To explicate the connections between personality and well-being, 2 samples of midlife adults ($N=215$ and $N=139$) completed measures of personality (NEO Five-Factor Inventory; P. T. Costa & R. R. McCrae, 1992) and psychological well-being (C. D. Ryff's, 1989b, Psychological Well-Being [PWB] inventory) that were maximally distinct, both conceptually and methodologically. Analyses included additional controls for source overlap, common affective underpinnings, and shared item content. Distinctive personality correlates were observed for the 6 PWB outcomes: self-acceptance, environmental mastery, and purpose in life were linked with Neuroticism (N) Extraversion (E) and Conscientiousness (C); personal growth was linked with Openness to Experience (O) and E; positive relations with others was linked with Agreeableness (A) and E; autonomy was linked with N. Psychological wellness and its personality correlates may be more complex than prior studies suggest.

Garcia (2011) studied another important relationship between personality and psychological well-being. The author observed that personality is considered a major determinant of adolescents' well-being; probably due to its relation to emotional reactivity, individual differences in intensity to responses to emotional events, and to the duration of emotional reactions. Personality, however, is a broad concept influenced by heritable traits, environment and learning characteristics. Nevertheless, most research on well-being has focused on traits models of personality. In the present study, personality was measured among 289 high school pupils from Sweden using the Temperament and Character Inventory (TCI) and the NEO Personality Inventory – Revised (NEO-PI-R). Well-being was measured as Psychological Well-Being (PWB) and Subjective Well-Being (SWB: Life Satisfaction, LS; Positive Affect, PA; and Negative Affect, NA). Participants were randomly assigned to three groups: Big Five (NEO-PI-R, SWB, and PWB), TCI (TCI, SWB, and PWB), and a Mixed group (NEO-PI-R, TCI, SWB and PWB). The results show that Neuroticism, Extraversion, Conscientiousness, Persistence, and Self-Directedness were strongly related to well-being. More importantly, in the mixed group, Self-Directedness was strongly related to PWB, LS, and to the absence of NA while the positive relationships between Extraversion-PWB, Extraversion-PA, Neuroticism-NA and the negative relationship between Neuroticism-LS were absent. The inclusion of character as a determinant of well-being is discussed.

Moreira et al. (2014) studied the linear and non-linear associations between psycho-biological model of personality and well-being. 1540 adolescents ($M=15.44$, $SD=1.731$) participated in this study. Personality was assessed using the Temperament and Character Inventory (TCI). Well-being was evaluated in a composite perspective:

satisfaction with social support, health-related quality of life, satisfaction with life and affect. Variable centered and individual-centered analyses were performed. Self-directedness was strongly associated with all dimensions of affective and cognitive well-being regardless of the other two character traits. Cooperativeness was associated with non-affective well-being and with positive affect, but only when associated to elevation of self-directedness and self-transcendence. Self-directedness and cooperativeness explained 15.5% of the non-affective well-being variance. Self-directedness and self-transcendence explained 10.4% of the variance in affective well-being. This study confirms the tendencies found in previous studies with adults from other societies, where each character dimension gives an independent contribution to well-being depending on the interactions with other character dimensions. Also, this study highlights the importance of considering the non-linear influences of the character dimensions in understanding of adolescents' wellbeing. These results have strong implications for youth positive mental health promotion, including for school-based policies and practices.

To understand the role of altruism, a personality dimension and psychological wellbeing, Schwartz, Keyl, Marcum, and Bode (2009) conducted a study. Adults who engage in altruistic social interest behaviors experience better mental health and have lower mortality rates than non-altruistic adults. Their study investigated the relationship between altruism and health and well-being in teens, demographic, and lifestyle variables. A cross-sectional survey was implemented with a national sample of teens recruited through the Presbyterian Church (U.S.A.). Measures included the PedsQL, the Ryff's Psychological Well-Being Scale, and a new self-report scale of Altruism (subscales: Receiving/ Providing Emotional Support, Family Helping Behavior, General

Helping Behavior, and Helping Orientation). Data were collected from 457 teens (M age = 15.6, SD= 1.2). Psychometric analyses revealed that a five-factor model fit the altruism data well. Multivariate regression analysis revealed no association between providing emotional support and psychosocial health. There were, however, many associations between altruism and well-being, and differential associations by gender. Family helping was the most salient aspect of altruism for males, showing associations with positive social relations, purpose in life, and self-acceptance. For females, general helping behavior was associated with positive social relations, and helping orientation was associated with better purpose in life. Family Helping was associated with better physical health in females, but not for males. The only correlates of altruism were higher age, more physical activity, and engaging in positive religious coping. They concluded that altruism is positively associated with health for females and with well-being for both males and females. Different gender-specific interventions to guide teens in doing more altruistic activities may have to be designed to capitalize on these different associations.

Kumar (2014) studied the relationship between prosocial behavior and psychological well-being. The researcher has taken a sample of 200 adolescents of an age range 14-16. They were assessed on Ryff's psychological well-being scale and prosocial tendencies measure (PTM) by Carlo & Randall (2002). The result showed that psychological well-being is significantly positively correlated with prosocial behavior. The study also points out that there are gender differences in the subscales of psychological well-being.

Ryan, Laguardia and Rawsthorne (2005) studied the self-complexities and authenticity on well-being. Their results suggest that self-complexity is itself a complex

phenomenon. Although self-complexity may provide somewhat of a buffer from stressful events, it may also in itself pose a degree of stress and strain. Combining this view of complexity with the framework of self-determination theory suggests that a critical issue in personality development is the integration of acquired self-aspects. The degree to which the multifaceted parts of self are experienced as authentic, personally valued, meaningful and volitional- appears to be important both to adjustment and to the avoidance of negative events in life. Thus, no matter how complex one becomes, it remains important to stay true to oneself.

Gross and John (2003) studied the effect of emotional regulational strategies and psychological well-being. They conducted five studies and tested two general hypotheses: Individuals differ in their use of emotion regulation strategies such as reappraisal and suppression, and these individual differences have implications for affect, well-being, and social relationships. Study 1 presents new measures of the habitual use of reappraisal and suppression. Study 2 examines convergent and discriminant validity. Study 3 shows that reappraisers experience and express greater positive emotion and lesser negative emotion, whereas suppressors experience and express lesser positive emotion, yet experience greater negative emotion. Study 4 indicates that using reappraisal is associated with better interpersonal functioning, whereas using suppression is associated with worse interpersonal functioning. Study 5 shows that using reappraisal is related positively to well-being, whereas using suppression is related negatively.

Andrew and Daniel (2010) examined the social problem solving as a predictor of well-being. They observed that social problem solving as the cognitive-affective-

behavioral process by which people attempt to resolve real-life problems in a social environment, and is of key importance in the management of emotions and well-being. This paper reviews a series of studies on social problem solving conducted by the authors. First, they developed and validated the Chinese version of the Social Problem-Solving Inventory Revised (C-SPSI-R) which demonstrated very good psychometric properties. Second, they identified the scope of stressful social situations faced by young adults and their self-efficacy in facing such situations (N = 179). Young adults were generally confident about their basic social skills but found it much more stressful to relate to family members, handle conflicts, handle negative behaviors from others, self-disclose to others, and to express love. Third, in two separate studies, they found that social problem solving was closely linked to measures of depression (n = 200), anxiety (n = 235), and family well-being (N = 1462). Measures of anxiety and depression were found to be significantly related to aspects of social problem solving in expected directions and expected strength. In another study, higher parental social problem solving behavior and lower avoidance behavior were found to be related to indicators of family well-being, including better overall family functioning, and fewer parent-adolescent conflicts.

Eshaghnia et al. (2014) investigated the relationship between self-efficacy and psychological well-being components. It also examined which one of these components can predict self-efficacy. The study sample consisted of 392 Young Researchers Club members. They were selected by random clustering technique. Then, they were asked to fill out Sherer General Self-Efficacy Scale (SGSES) and Ryff Psychological Well-being Scale. Results indicated that psychological well-being components explain 42% of self-

efficacy variance. Regression coefficients calculation showed that, among the components, life satisfaction ($p=0.81, 0.02$) and spirituality ($p=0.78, 0.01$) have no significant effect on self-efficacy. Yet, other components including happiness ($p=0.00, 0.20$), personal growth and development ($p=0.05, 0.22$), autonomy ($p=0.00, 0.32$), and effective communication ($p=0.00, 0.39$) have a significant effect on self-efficacy.

Yeager, Bundick and Johnson (2012) explored the relationship between theories of adolescent identity development often emphasize the importance of adolescents' future work goals, yet these theories rarely distinguish the self-oriented motives (enjoying or being a good fit for one's work) from the beyond-the-self-oriented motives (having a positive impact on the world beyond the self) that underlie them. The present article explored the impact and development of both types of motives. Using longitudinal, mixed-methods data from middle school and high school students ($N = 99$), the present article found that: (1) adolescents generated both self-oriented and beyond-the-self-oriented motives for their future work goals, often simultaneously; (2) adolescents who held both self-oriented and beyond-the-self-oriented motives for their work goals were more likely to experience higher levels of purpose and meaning over a 2-year period than those who held neither; (3) school assignments that asked students to reflect on their work goals were positively related only to the development of self-oriented motives for work goals among middle school students; and (4) support from friends was positively related only to the development of self-oriented motives for work goals among high school students.

Adding to that Yeager, Bundick and Johnson (2012) say that past researchers (e.g., Flum & Kaplan, 2006; Kaplan & Flum, 2009) have suggested that schools can and

should promote exploration of one's identity. This is an important aim, and one that is supported, albeit in a qualified fashion, in the present research. However, the evidence presented here suggests that focusing attention only on an adolescent's skills, desires, and interests may be too narrow in scope. These data show that when adolescents' identity development integrates a focus on ways in which they might contribute to the world beyond the self, a more fulfilling life is likely to follow. If we want young people to develop greater meaning and purpose in their lives, schools and parents ought not only help them to find answers to the questions "Who am I?" and "What do I want to be when I grow up," but also the question "Why am I?"(p.216).

Harrington and Loffredo (2011) studied the dispositional private self-focused attention variables such as insight, internal self-awareness (ISA), and self-reflectiveness (SR) have been found to relate to well-being. This study sought to determine which dispositional private self-focused attention variables have the most predictive power for subjective well-being as measured by the Satisfaction With Life Scale (Diener, Emmons, Larsen,& Griffin, 1985) and for a *eudaemonic* form of well-being as measured by the Psychological Well-Being Scale (Ryff, 1989). A total of 121 college student participants completed an online version of the Self-Consciousness Scale–Revised, the Rumination–Reflection Questionnaire, the Self- Reflection and Insight Scale, the Satisfaction With Life Scale, and the Psychological Well- Being Scale. Results of a multivariate regression analysis using the Self-Consciousness Scale–Revised (Scheier & Carver, 1985) sub factors of SR and ISA, the Rumination–Reflection Questionnaire's (Trapnell & Campbell, 1999) subscales of Rumination and Reflection, and the Self-Reflection and Insight Scale's (Grant, Franklin, & Langford, 2002) Self-Reflection and Insight subscales

revealed that the Insight subscale was the only statistically significant predictor (a positive predictor) for all 6 dimensions of psychological well-being. Insight was also the only significant positive predictor for satisfaction with life. The Rumination subscale was a significant negative predictor for 3 dimensions of psychological well-being, and the Reflection subscale was a significant positive predictor for 1 dimension. Implications of dispositional self-awareness variables and their relation to dimensions of well-being are discussed.

Maria et al. (2013) studied and explored the associations between adolescents' assertive behavior, psychological well-being, and self-esteem. The sample consisted of 1,023 students ($14.9 \pm .51$; 47.6% boys). Two dimensions of the Scale for Interpersonal Behavior (distress and performance), 2 factors of the General Health Questionnaire-12 (depression/anxiety and social dysfunction), and 2 factors of the Rosenberg Self-Esteem Scale (positive self-esteem and negative self-esteem) were used; data were analyzed using hierarchical linear regression. It was found that (a) the more anxious respondents felt in assertive situations, the less frequently they engaged in these situations; and that (b) both dimensions of assertiveness were associated with psychological well-being and self-esteem.

Kitamura and Kishida (2004) focused on psychological well being and life history correlates in Japanese students ($N=574$). They observed that a factor structure similar to Ryff's original model emerged. Both depression and anxiety correlated only moderately with scores on some subscales of the inventory, suggesting the relative independence of these dimensions of psychological well-being and negative affectivity. With negative affectivity controlled, some early life experiences were significantly linked with

psychological well-being. Relationships with romantic partners were linked with greater autonomy and experiences which enhance self-esteem were linked with greater personal growth. Careful psychometric work on the Japanese version is required to use the scale; then a replication and extension of the present study would be feasible.

Davoren, Fitzgerald, Shiely, and Perry (2013) studied on positive mental health and well-being of the third level students. They used the Warwick Edinburgh Mental Well-being scale (WEMWBS) for measuring of positive mental health and well-being. The aim of this research was to investigate the distribution and determinants of positive mental health and well-being in a large, broadly representative sample of third level students using WEMWBS. Undergraduate students from one large third level institution were sampled using probability proportional to size sampling. Questionnaires were distributed to students attending lectures in the randomly selected degrees. A total of 2,332 self-completed questionnaires were obtained, yielding a response rate of 51% based on students registered to relevant modules and 84% based on attendance. One-way ANOVAs and multivariate logistic regression were utilised to investigate factors associated with positive mental health and well-being. The result showed that the sample was predominantly female (62.66%), in first year (46.9%) and living in their parents' house (42.4%) or in a rented house or flat (40.8%). In multivariate analysis adjusted for age and stratified by gender, no significant differences in WEMWBS score were observed by area of study, alcohol, smoking or drug use. WEMWBS scores were higher among male students with low levels of physical activity ($p=0.04$). Men and women reporting one or more sexual partners ($p<0.001$) were also more likely to report above average mental health and well-being. The findings of this study are somewhat unusual in

that students with an adverse lifestyle pattern have a higher than average mental health and well-being. Students represent a unique subgroup that is relatively privileged when compared to the general population. Findings from this study may not be applicable to the general population. Previous research suggests that hazardous alcohol consumption and a high number of lifetime partners are social norms in this culture, meaning those closer aligned with the norms for their culture may report more positive mental health and well-being. There is a need to replicate this research yielding a higher response rate to confirm the factors associated with positive mental health and well-being among third level students. A study of the general population is also suggested.

Psychological well-being: Validating the original constructs.

Van Dierendonck (2005) extensively studied Ryff's scale in terms of its factorial validity and internal consistency reliability. The study included a sample of psychology students (N=233) and a sample of professionals from a diverse occupational background (N=420). The psychometric quality of the SPWB was tested for the versions with 3-items, 9-items and 14-items. It appeared that the factorial validity was only acceptable for the 3-items per scale version. However, the internal consistency of these 3-items scales was below generally accepted levels.

Therefore, it is suggested to reduce the length of the 14-item scales to 6, 7 or 8 items, depending on the specific subscale. This resulted in an improved overall psychometric quality. In addition, two new scales were developed that together refer to spiritual well-being. A second order factor analysis, including vitality, happiness, self-esteem and the Big Five personality dimensions, revealed four underlying dimensions of

positive psychological health: subjective well-being, self-actualization, interpersonal relations and autonomy.

Ryff's model of psychological well-being has been reexamined in the following literature over its authentic factor structure (Abbott et al. 2006). They applied latent variable models for factor analysis of ordinal/categorical data to a 42-item version of Ryff's psychological well-being scales administered to women aged 52 in a UK birth cohort study ($n = 1,179$). Construct (predictive) validity was examined against a measure of mental health recorded one year later. Their result was that inter-factor correlations among four of the first-order psychological well-being constructs were sufficiently high (> 0.80) to warrant a parsimonious representation as a second order general well-being dimension. Method factors for questions reflecting positive and negative item content, orthogonal to the construct factors and assumed independent of each other, improved model fit by removing nuisance variance. Predictive validity correlations between psychological well-being and a multidimensional measure of psychological distress were dominated by the contribution of environmental mastery, in keeping with earlier findings from cross-sectional studies that have correlated well-being and severity of depression. The authors conclude that the preferred model included a single second-order factor, loaded by four of six First-order factors, two method factors, and two more distinct first-order factors. Psychological well-being is negatively associated with dimensions of mental health. Further investigation of precision of measurement across the health continuum is required.

The authors also analysed the same data (Abbott, 2010) to assess the effective measurement range of Ryff's psychological well-being scales (PWB). It applies normal

ogive item response theory (IRT) methodology using factor analysis procedures for ordinal data based on a limited information estimation approach. The data come from a sample of 1,179 women participating in a midlife follow-up of a national birth cohort study in the UK. The PWB scales incorporate six dimensions: autonomy, positive relations with others, environmental mastery, personal growth, purpose in life and self-acceptance. Scale information functions were calculated to derive standard errors of measurement for estimated scores on each dimension. Construct variance was distinguished from method variance by inclusion of method factors from item wording (positive versus negative). The IRT analysis revealed that the PWB measures well-being most accurately in the middle range of the score distribution, i.e. for women with average well-being. Score precision diminished at higher levels of well-being, and low well-being was measured more reliably than high well-being. A second-order well-being factor loaded by four of the dimensions achieved higher measurement precision and greater score accuracy across a wider range than any individual dimension. Future development of well-being scales should be designed to include items that are able to discriminate at high levels of well-being.

Ryff and Singer (2008) have once again dug the conceptual underpinnings of psychological well-being in their recent article. It says that in an effort to strengthen conceptual foundations of eudaimonic well-being, key messages from Aristotle's *Nicomachean Ethics* are revisited. Also examined are ideas about the positive human functioning from existential and utilitarian philosophy as well as clinical, developmental, and humanistic psychology. How these perspectives were integrated to create a multidimensional model of psychological well-being (Ryff, 1989a) is described, and

empirical evidence supporting the factorial validity of the model is briefly noted. Life course and socioeconomic correlates of well-being are examined to underscore the point that opportunities for eudaimonic well-being are not equally distributed. Biological correlates (cardiovascular, neuroendocrine, immune) of psychological well-being are also briefly noted as they suggest possible health benefits associated with living a life rich in purpose and meaning, continued growth, and quality ties to others. They conclude with future challenges in carrying the eudaimonic vision forward.

Psychological well-being: Interventional perspective.

Ruini et al. (2009) studied the efficacy of a new school intervention program for the promotion of psychological well-being. In this study a school program for promoting psychological well-being was compared to an attention-placebo intervention in a high school setting. They used samples of nine classes (227 students) were randomly assigned to: a) Well-Being intervention (5 classes) and b) attention-placebo (4 classes). The assessment was performed at pre and post-intervention, and after six months using: 1) Symptom Questionnaire (SQ), 2) Psychological Well-Being Scales (PWB) and 3) Revised Children's Manifest Anxiety Scale (RCMAS). The researchers found a significant effect of WB school intervention in improving Personal Growth (PWB), and in decreasing distress (Somatization (SQ), Physical Well-being (SQ), Anxiety (SQ), and RCMAS-Physiological Anxiety) emerged. They concluded that the school intervention based on promoting positive emotions and well-being was effective not only in increasing psychological well-being among adolescents, but also in decreasing distress, in particular anxiety and somatization.

Awareness of 'roles we play' is one of the crucial exercises to understand self awareness and enhanced self-esteem. The following research highlights on multiple roles and psychological well-being. Ahrens and Ryff (2006) observed that research on multiple roles has supported the enhancement hypothesis, but it is unclear if benefits of multiple role involvement exist across all segments of the population. This study was designed to examine whether the role enhancement hypothesis suits both men and women with varied education levels. A further goal was to determine whether perceived control moderates associations between multiple role involvement and well-being. This sample included 2,634 individuals from the Midlife in the United States (MIDUS) survey who occupied up to eight roles each. Psychological well-being was measured in six dimensions (autonomy, environmental mastery, personal growth, positive relations with others, purpose in life, and self-acceptance); positive and negative affect were also measured. Results of hierarchical regression analyses supported the role enhancement hypothesis, as greater role involvement was associated with greater well-being; however, the findings suggest that it was only well educated women with multiple roles who showed higher levels of autonomy. Perceived control was also found to moderate some of the obtained linkages.

2.2 On Life Skills Training: Efficacy, Effectiveness and Outcomes

One of the earlier researches on life skills training for adolescents was conducted by Danish (1997). The project is known as Going for the Goal (GOAL). It is a school based sports program taught by senior high school students to their juniors through an interactive classroom sessions. It focuses on the process of attaining the goal but not on the desired outcome. They were taught to identify the positive life goals and apply

general problem solving model to reach the goal. The trainers connect goal attaining behaviours with health promoting and health compromising behaviours. The former will facilitate the goal attainment and the latter would impede the goal attainment process respectively. Seeking and creating social support and transferring learned skills to another life context were other strategies in this model. In SUPER (Sports United to Promote Education and Recreation) program, college student-athlete leaders were used to teach life skills for adolescent students. This project inspired later life skills training programs on positive psychological functioning and well-being.

Fagan and Mihalic (2003) conducted a study to understand the issues in the implementation of life skills training program in the school set up. They opined that widespread implementation of effective programs is unlikely to affect the incidence of violent crime unless there is careful attention given to the quality of implementation, including identification of the problems associated with the process of implementation and strategies for overcoming these obstacles. They described the results of a process evaluation focused on discovering common implementation obstacles faced by schools implementing the Life Skills Training (LST) drug prevention program.

After 2 years of program implementation, the process evaluation of a large-scale replication of the LST drug prevention program demonstrated high rates of implementation success. Based on written feedback from classroom observers and LST instructors, as well as interviews with these parties, school administrators, and on-site coordinators, the results indicate that teachers delivered the majority of the lessons, in a manner consistent with the goals of the program, and with generally high levels of support from key participants. Despite this success, we also identified problems

encountered to varying degrees by schools implementing the program. Such obstacles included a lack of support from on-site coordinators, school administrators, and LST instructors; lack of attendance during training workshops; high teacher turnover; problems integrating the program into the school's infrastructure; and teacher deviation from the core curriculum.

Rahmati et al. (2010) studied the effectiveness of life skills training on social adjustment in children through life skills training in 4th grade elementary school. The sample for this study was chosen randomly and both experimental and control groups consisted of 20 participants who had been matched on the basis of age and intensity of social adjustment. Social adjustment was assessed by Tahmasian peer rejection test and Mattson social skills test. Results from statistical methods like analysis of covariance, block analysis of variance, and *t* test showed that life skills training to children promote their social adjustment. It is concluded that life skills training program of personal and social skills required for the acceptance of social responsibility and functionality. While affecting influential factors of social adjustment including learning social skills, enhancing the individual's social position in the group, magnetizing self-confidence and self-efficacy, life skills promote an individual's level of social adjustment.

Sobhi-Gharamaleki and Rajabi (2010) conducted an experimental work. The aim of their study was to find the effect of life skills training in providing mental health and self esteem of university students. They used before- after test design with control group. The statistical society of the present study comprised all boys' students accepting at 2009 and studying at University of Mohaghegh Ardabili in 2009. Also, this study was conducted only on the individuals who gained 28 or more in DASS questionnaire (which

evaluates three subscales of anxiety, depression, and stress), (n=210). At the next stage the needed sample (i.e. 40 boy students {20 individuals in the control group and 20 individuals in experimental group}) were randomly selected and distributed to two mentioned groups. Then, life skills were taught to experimental group for 8 sessions in four weeks) and no training was exposed to control group during this period. At the end, 3 individuals from experimental group were omitted; finally the achieved data from 37 individuals was analyzed by descriptive statistics methods (frequently and percentage) as well as inferential statistics methods (independent t test, MANOVA). The results showed that life skills training affects on decreasing mental disorders symptoms especially anxiety, depression and stress of students suspected to the mental disorder. This study showed that life skills training is a good method in decreasing mental disorder symptoms among the students suspected to the mental disorder.

Sadr-Mohammadi, Kalantari and Molavi (2014) studied the efficacy of life skills training on subjective well-being (SWB) among high school females in Iran. Their population study comprised all female high school of Rafsanjan, Iran, in 2008-2009. Thirty students with the lowest scores according to the Molavi's SWB questionnaire were considered eligible. At the next stage, the required sample of 30 students were selected randomly and divided into two groups of experimental (15 subjects) and control (15 subjects). Then, life skills training sessions were started for the experimental group (eight sessions in a 4-week period). The control group did not receive any intervention. The method of data processing at a descriptive level was through using central tendency indicators, dispersion, frequency, and percentage. Student's t-test was used for analysis of independent variables. The Results suggest that the greatest R^2 (0.48) was observed for

SWB. The R^2 coefficients for neurosis, stress-depression, vitality, and life determination were 0.27, 0.15, 0.20, and 0.09, respectively. They concluded that life skills training showed the greatest effect regarding SWB of the students.

One of the systematic reviews on life skills or psychosocial skills training from randomized control trials (RCT) was conducted by Sancassiani et al. (2015). They said that the aim of the research was to describe the main features and to establish the effectiveness of universal school-based RCTs for children and the youth, aimed to promote their psychosocial wellbeing, positive development, healthy lifestyle behaviours and/or academic performance by improving their emotional and social skills. They adopted systematic review by searching for relevant papers on key words. The interval was set from January 2000 to April 2014. Overall, the interventions targeted social and emotional competencies and attitudes about oneself, the others and the school. The main aim of these interventions was enhancing these skills and/or the healthy behaviours of the students (i.e. to prevent substance abuse) and/or promoting their psychological wellbeing (i.e. regarding mood and affects) and/or improving their academic performance. They found that 1,984 papers were identified through the search. Out of them 22 RCTs were included. While most interventions were characterized by a whole-school approach and SAFE practices, few studies only used standardized measures to assess outcomes, or had collected follow-up data after ≥ 6 months. The results of all these trials were examined and discussed. They further observed that in this sense, the effectiveness of Life Skills Training (LST) as well as of other kinds of intervention on outcomes such as healthy lifestyle behaviours, academic performance, psychological wellbeing, with or without assessment of emotional and social skills reliably is a critical point. Other variables than

life skills could affect the findings. These issues regard also those studies where the mediating effects of social and emotional skills on the main outcomes were postulated but not tested. They concluded that universal school-based RCTs to enhance emotional and social skills showed controversial findings, due to some methodological issues mainly. Nevertheless, they show promising outcomes that are relatively far-reaching for children and youth wellbeing and therefore are important in the real world.

The Indian study pertaining to effectiveness was carried out by Ghasemian and Kamal (2015). They conducted with the purpose of investigating life skills training effects on fostering the rate of mental health among adolescent students. This study is the experimental type in which pre-test and post-test design were used with control group and random assignment of subjects. The statistical population of study consisted of 80 students in first-grade of high school in Bangalore city after the screening 24 subjects who score their tests above the cut point was higher than normal were selected randomly in two groups of 12 subjects and replaced in experimental and control groups. The experimental group was trained in life skills about 10 two-hour sessions, once a week. The tools used in this research were based on Goldberg General Health Questionnaire GHQ-28 and the practical guide to life skills Instruction were used in this research. The validity of the questionnaire was 0.84 based on Cronbach's alpha method. The data analysis was carried out through the implementation of the questionnaire in SPSS software in two parts of descriptive (average, median, variance, standard deviation, frequency distribution tables and graphs) and deductive (covariance analysis). Findings showed that life skills training can be considered a supportive method for reducing the symptoms of anxiety, depression, physical and social issues.

2.3 On Psychology of Visual Impairment

With respect to research studies on visual impairment, it is quite unsatisfactory and is miniscule in the Indian subcontinent. The principal works in the global literature on visual impairment is reviewed and then focused on the psychology of blind and blindness in the Indian context.

Mansberger et al. (2005) says that little information exists regarding the causes of visual impairment and the most common eye problems in American Indians/Alaska Natives. They have studied randomly sampled American Indians/Alaska Natives older than 40 years from 3 tribes within the Northwest region. They found that a higher prevalence of visual impairment and normal-tension glaucoma, as well as a lower prevalence of ocular hypertension, in American Indians/Alaska Natives compared with previous results in other racial/ethnic groups. They concluded that American Indians/Alaska Natives have a need for vision correction. Future interventions in American Indians/Alaska Natives should include providing spectacles for refractive error, detecting glaucoma, and preventing visual impairment from age-related maculopathy and cataracts.

In India, Hornby et al. (2000) conducted a study in six districts of Andhra Pradesh. They wanted to determine the anatomical site and underlying causes of severe visual impairment and blindness in children in special education and to compare the causes of blindness in two different regions in the state. Children in 6 schools for the blind and in 3 integrated education programmes were examined by one ophthalmologist, and were refracted and assessed for LVDs by an optometrist. The major anatomical site and underlying etiology of severe visual impairment and blindness (SVI/BL; <6/60 in the

better eye) were recorded using the standardized WHO reporting form. They found that two hundred and ninety one students under 16 years were examined, and after refraction, 267 (91.7%) were classified as being severely visually impaired or blind. The most common anatomical sites of SVI/BL were retina in 31.1% children; cornea in 24.3%; and whole globe in 20.2%. The etiology was unknown in 38.2%, hereditary in 34.8% and childhood causes in 24%. 114 children (39.2%) had a functional low vision (i.e. visual acuity <6/18 to light perception with navigational vision). In this group, 36 children improved with spectacles and 16 benefited by LVDs. 41 children (15.4%) were able to read N10 point, though they were studying Braille. Hornby and others concluded that overall 37.4% of the children had "avoidable" causes of blindness. The major avoidable causes were vitamin-A deficiency and cataract. Vitamin-A deficiency and congenital anomalies were more common in the dry plateau areas of the state. One in seven children could read normal print with optical support.

Lifshitz, Hen and Weisse (2007) studied the differences in self concept. The self-concept and quality of friendship, of 40 adolescents with visual impairments (20 in public schools and 20 in a residential school) were compared to those of 41 sighted adolescents. The findings indicate a similar self-concept profile in sighted adolescents and adolescents with visual impairments, although the scores of the participants with visual impairments were higher in all domains except their fathers' concept of them.

Zahren (1965) found that there is no significant difference between blind children and normal sight students with respect to some of the personality characteristics. Tillman and Osborne (1969) observed that the blind children were superior on short term memory

and attention. Kool and Raina (1979) concluded that the performance of blind was poorer on tactual short term memory than the normal group. However, the study revealed that initially blind students did better than the other group and later their performance was lower due to delay in recalling. In arithmetic problem solving, students with visual impairment do better compared to normal population (Venderlock, 1982). In another interesting study, Lal (1992) observed that there is a significant difference between students with blindness and normal in the areas of vocational interest and anxiety. This study also found differences in the gender with respect the above variables except mutual perception. Sharma (1998) observed that persons with visual impairment were more frustrated than of persons with normal vision. The study also pointed out that visually impaired students were low in study involvement.

The study by Kaplan (2000) indicated that blind subjects evaluate themselves from indirect vague comparisons. Galati et al. (2003) found that the frequency of certain facial movements was higher in the blind children to that of the normal children and social influences were evident only in the expressions of the sighted children who often could hide their negative emotions. The study also revealed that there is no difference in the emotional facial expressions of children with congenital blindness and sighted children. In another noteworthy study, Eddy and Mellalieu (2003) found that visual impairment does not restrict the ability to use mental imagery in athletics. Sharma (2006) found that visually disabled children with high emotional stability have better study habits than their counterparts with low emotional stability.

Social support is the one of the predictor of many positive psychological variables including well-being. This has been studied by Hadidi and Al-Khateeb (2014). They

observed that research to date on social support for adolescents with visual impairments (that is, blindness or low vision) has been primarily carried out in developed countries, and very little is known about the social support systems that are available for such adolescents in developing countries such as those in the Arab world. In the present study, social support among adolescents with and without visual impairments was investigated in Jordan, which is considered a developing country. The participants included 86 adolescents with visual impairments and 73 sighted adolescents. The instrument used to collect information in this study was an Arabic version of the Multidimensional Scale of Perceived Social Support (MSPSS). They found that the level of social support reported by adolescents with visual impairments was higher than that reported by sighted adolescents. In all three domains of the MSPSS (family, friends, and significant others), students with visual impairments reported receiving more social support than those without impairments. However, there was no statistically significant effect for gender. The results of the study are not consistent with findings of previous studies, all of which were conducted in Western countries. The disparities in the experiences of adolescents with visual impairments in developed and developing countries may be attributed to differences in cultural values as well as to the conceptualization of support by those involved. Special education teachers need to be aware of the cultural backgrounds of their students and to develop and implement culturally appropriate programs for them.

Some researchers are questioning the psychological maladjustment of visually impaired students. A research done by Ammerman, Van Hasselt and Hersen (1986) suggest that visually impaired people are at high risk for psychological maladjustment, but there are many mediating variables that are confounding the findings.

Tarannum and Khatoon (2009) studied self-esteem and emotional stability of visually challenged students and concluded that gender emerged as the significant predictor of emotional stability of visually challenged students and none of the demographic variables (age, class, family system and area of living) emerged as predictors of self-esteem of these students.

Obaikor and Stile (2001) conducted a study on comparing visually impaired children with normal children for self concept differences. Contrary to the popular notion that visually impaired middle school children showed higher scores in 4 out of 12 subscales on student self-assessment inventory.

Another aspect of positive psychological functioning is based on identity development. Pinquart and Pfeiffer (2013) studied this variable. They assessed the exploration of identity and commitment to an identity in German adolescents with and without visual impairments. In total, 178 adolescents with visual impairments (blindness or low vision) and 526 sighted adolescents completed the Ego Identity Process Questionnaire. They found out that the levels of identity exploration and making commitments, as well as the distribution of identity statuses, did not differ between the two groups. However, adolescents with congenital visual impairments showed lower levels of identity exploration than their peers with acquired visual impairments. In addition, more severe disability was associated with less exploration of identity. Furthermore, levels of identity exploration and commitment varied by age, parental education, levels of social support, and levels of problem behavior. The findings indicate that adolescents with visual impairments do not fall behind sighted adolescents in developing a sense of identity. Adolescents who are congenitally blind or have a high

level of disability may need support in exploring and accessing information on future opportunities.

Bak (2012) focused on the personality differences between visually impaired students with that of normal's. The study designed to determine whether there were significant differences in the frequency and preference scores of personality functions and the frequency of personality types, as measured by the Myers-Briggs Type Indicator (MBTI), by gender, school level, and level of visual function, of students with visual impairments in South Korea. Ninety-eight South Korean students with visual impairments who were enrolled in special junior high and high schools for students with visual impairments answered the MBTI. Chi-square analyses examined the frequencies of preference functions and personality types by gender, school level, and level of functional vision. Independent-samples t tests were conducted to examine the differences in preference scores by the independent variables for personality functions. They got the result that only gender differences were found in the frequency of preference functions between the Thinking-Feeling functions. Significant differences were not found in the frequencies of preference scores and personality types by gender, school level, or functional vision. They observed that the students with visual impairments were more likely to think of themselves along the indicators of Extraversion, Sensing, and Perceiving. More male students than female students preferred Thinking over Feeling. Educators need to understand the way in which each gender group prefers to use perception and judgment as decision-making functions. Personality traits vary among persons who are visually impaired as much as they do among those who are sighted. Implications for practitioners: South Korean adolescents with visual impairments differ

on their personality types in a way similar to sighted students. Learning more about the personality characteristics of children with visual impairments may help educators to teach more effectively.

Visual impairment: Training outcomes.

Sacks and Gaylord-Ross (1989) studied peer mediated and teacher directed social skills training for visually challenged students. The study revealed that peer mediated group produced significant acquisition, generalization, and maintenance of the social behaviors. While the teacher-directed group displayed the highest acquisition scores, it failed to show substantive generalization or maintenance. The control group, in general, showed no changes in any of the phases of learning.

The study conducted by Kef and Dekovi (2004) shows that peer and parental support have significant importance for the well-being of both adolescents with a visual impairment and sighted adolescents. Whereas in the group of adolescents with a visual impairment, a positive linear relationship exists between peer support and well-being, in the group of adolescents without an impairment well-being appears not be affected by peer support. Parental support is more strongly related to well-being of adolescents without impairments than of adolescents who are blind or visually impaired.

Children with visual impairment have difficulty in learning social skills effectively is due to their inability to observe and imitate the social behavior in the environment (Sacks & Silberman, 2000), which in turn affect developing other skills in them (Farrel, 1990; Ferrel, Shaw & Dietz, 1998; Warren, 1984, 1994).

Salleh and Zainal (2010) Proposes some skills training for students with visual impairment like peer-mediated social skills training, behaviour contract, physical skills

and assertiveness training. They also emphasize that any training program for visually impaired should be individual student specific and tailor made modules.

Psychological well-being of students with visual impairment.

Visual impairment has its own impact on the psychosocial development of children and adolescents. The research indicates that relatively consistent pattern of problems in social adaptation, probably associated with insufficient attachment between mother and the blind child (Van Hasselt, 1983). Researches also indicated that visually impaired adolescents exhibited deficits on selected verbal components of social skills (Van Hasselt et al., 1985).

The recent meta analysis study integrated the results from 198 studies that compared psychological well-being of visually impaired individuals with unimpaired control groups or population norms. The study reveals that on average, visually impaired people showed a strong decline of vision-specific psychological well-being. However, declines in vision-unspecific measures were only small. Furthermore, declines of psychological well-being were stronger in studies with convenience samples (rather than probability samples) and in studies that used population norms as standard for comparison (rather than control groups), in individuals with greater vision loss, in patients with age-related macular degeneration as compared to glaucoma, in adults as compared to children (Pinquart & Pfeiffer, 2011).

Huierre and Aro (2000) have done a comparative study between the psychosocial well-being of 115 adolescents with visual impairments to that of 44 adolescents with chronic conditions and 607 adolescents with no disabilities. It was found that the adolescents with visual impairments, especially those who were blind, had more

difficulties in their relationships with friends than did the other two groups, but had fewer problems with psychological well-being than did the adolescents with chronic conditions.

2.4 Critical Review of Reported Literature on the Present Work

Bond, Lusher, Williams, and Butler (2014) study provides us some explicit clues within the dynamics of mental illness and psychological well-being. Relational dissonance concept reveals these dynamics and facilitate the intervention. It can be applied as part of self awareness and interpersonal relationship skills in life skills training model to enhance the psychological well-being. Singh and Sahu (2013) study needs to be explored further to understand the psychological well-being and emotional well-being. They found significant gender differences in emotional intelligence, but not in psychological well-being. Our present study also provides gender difference in psychological well-being after life skills training, which will be discussed in the later chapters. This relationship between emotional intelligence and well-being was measured Extremera et al. (2011). Their study helps us to understand that there may be a link between outcome of life skills training and psychological well-being, which is part of the present research.

The studies by Schmutte and Ryff (1997), Garcia (2011) and Moreira et al. (2014) explored the relationship between personality factors and psychological well-being. Also the link between psychological well-being construct, emotional intelligence and Big Five personality factors become evident. Due to its significant relationship, intervention will be approximately the same and easier. This is also true with altruism and prosocial behaviours, both are similar personality dimensions have a significant relationship with

psychological well-being factors or dimensions like positive relations with others and purpose of life (Schwartz, Keyl, Marcum and Bode, 2009; Kumar, 2014).

Self awareness is the core of life skills training. The goal is not just becoming aware of oneself; being accepted on its multifaceted parts. Ryan, Lalguardia and Rawsthorne (2005) works helps us in this direction. They studied the self-complexities and authenticity on well-being and clear the conflict between multiple role self-awareness and self acceptance.

Gross and John (2003) study provide interventional strategy for coping with stress and managing emotion dimensions on psychological well-being and its impact. The role reappraisal and suppression in experiencing higher positive emotion and lesser negative emotions were studied in their research work.

Andrew and Daniel's work (2010) would provide a clear link between psychological well-being and problem solving skills in social and interpersonal relationship. Eshaghnia et al. (2014) studied the relationship between self-efficacy and psychological well-being. This would help in focusing personal specific goal setting with self-awareness skills are essential in enhancing psychological well-being. The similar hypothetical association can be made on research work conducted by Yeager, Bundick and Johnson (2012). They explored the adolescent's identity development and their self-oriented and beyond the self-oriented motives for their future work goals with experiences of purpose and meaning in life. These findings would facilitate in life skills training of self awareness, goal setting, problem solving and decision making skills.

Harrington and Loffredo (2011) worked on dispositional private self-focused attention and psychological well-being. Their findings would strengthen our emphasis on

insight and self-awareness are necessary factors in enhancing psychological well-being. Their work is significant in differentiating self-reflectiveness and rumination during intervention.

Maria et al. (2013) explored the associations between assertive behavior, self-esteem and psychological well-being. This study would provide evidence on the role of assertive behavior in maintaining the positive relations with others and managing emotions in a positive and adaptive way.

Kitamura and Kishida (2004) worked on psychological well-being and life history correlates. This study provides insights on the role of early experiences and later relationships have a significant role in psychological well-being. The study is also useful in understanding the factors, which affect psychological well-being components. Davoren, Fitzgerald, Shiely, and Perry (2013) study throws light on culture also plays a significant role in determining the positive mental health and psychological well-being. However, this study with its unusual lifestyle of the participants, need to be taken with a word of caution.

Psychological well-being construct is still under progress of validating in all cultures and sub groups. This way, the every work in validating and replicating the factors are necessary as well as warrants further research. Ruini et al. (2009) work is significant in understanding the practical aspect of psychological well-being, where they have been tested for efficacy of an intervention program in enhancing psychological well-being.

Life skills training is effective in enhancing various personality dimensions. The study by Fagan and Mihalic (2003) highlights the issues faced during the intervention.

Rahmati et al. (2010) work on effectiveness of life skills training on social adjustment; Sobhi-Gharamaleki and Rajabi's (2010) work on effect of life skills training on self-esteem and reducing mental health symptoms; Sadr-Mhammedi, Kalantari and Molavi's (2014) research on the efficacy of life skills training on subjective well-being, all these works would strengthen our belief in life skills training as an interventional model in mitigating human challenges and facilitating positive and adaptive behavior. Sancassiani et al. (2015) and Ghasemian and Kamal (2015) works are significant in a different way; one was evaluating the randomized trials and the later was experimental work by itself, both the studies are strengthening the role of life skills training in a psycho-social intervention model.

The literature review on visual impairment is focused on causal factors (Mansberger et al., 2005; Hornby et al., 2000), which differs from Americans Indians/Alaska natives to districts in Andhra Pradesh, India. The prevalence of vitamin A deficiency reveals that there is a significant number people with visual impairment in India are from underprivileged sections and considered as 'avoidable'.

Social support factors contribute to one's well-being. This has been investigated by Hadidi and Al-Khateeb (2014). This study would provide some insight on the amount of social support for visually challenged adolescents are lesser in developing countries compared to developed countries. It can be increased through intervention practices.

On a nutshell, the reviewed literature focuses on many aspects of personality, behavior of visually impaired adolescents with normal. On some variables, the visually impaired children are par with others and in some studies they show significant deficits in their personality and behavior. However, there is no available literature on life skills

training for visually challenged adolescents to enhance their psychological well-being, which has been undertaken by the present research scholar.