Methodology
The aim of the present study is to understand in a comprehensive manner, how individuals who experience a high sense of well-being cognize their stresses in terms of sources from which stress is perceived to emanate, the meaning or impact which it had for them and the methods of coping which they utilized in managing stresses. Such questions are important because rather than the concept of a total stress score, the dynamics in terms of perception and meanings, reactions and processes are needed to be understood in order to obtain a true picture of the phenomena. It was desired that understanding of stress be gained from different aspects, so that it would be possible to bring out the how high well-being and low well-being subjects differ in their perception and reaction to stresses. This necessarily entailed that wherever appropriate psychometric tests be used and wherever necessary other innovative methods like content analysis, ladder ratings etc. be utilized.

The case in favour of content analysis is very strong. Miles & Huberman (1986) noted that qualitative data, in the form of words rather than number have always been the staple of certain social sciences, like anthropology, history and political science. In the past few decades, more and more researchers in fields with a traditional quantitative emphasis (psychology,
sociology, organizational studies etc.) have shifted to a more qualitative paradigm.

Qualitative data may be extremely useful. They are sources of well-grounded, rich descriptions and explanations of processes occurring in local context. Smith (1978), argued that the findings from qualitative studies have a quality of 'undeniablity'. Words, especially when they are organized into systematic modules, have a concrete, vivid, meaningful flavor that often proves far more convincing to a reader than pages of numbers.

The investigator felt that the nature of the present study calls for a qualitative approach. The fact that this approach was being used with success in psychological research fulfilling all scientific parameters was an important consideration.

The major thrust of this study is to identify the sources of stress, its perceived impact and coping styles of individuals with reference to their sense of well-being. Thus, tools to assess all these variables were needed.

The LES, which measures life stress is available to measure stress. But although it is a good measure of positive, negative as well as total stress, it cannot capture the unique experiences and the distinctive concepts of each individual regarding the phenomena. There are many instances which compel one to ponder that it is not the mere occurrence of a stressful event which determines how the individual is going to be affected but a plethora of other
circumstances also contribute to its impact. The words of the philosopher, Nietzsche, "he who has a 'why' to live can bear with almost any 'how'" are very pertinent. They suggest that if the individual perceives an ultimate meaning in suffering it will be perceived differently than if the suffering is without purpose. Without understanding the phenomenological world of a person it is not possible to understand the intricacies of the phenomena. The total score which a person obtain on LES can definitely throw light on the quantum of stress undergone. But being human entails active efforts to interpret experiences, seeking purpose and significance in the events around us. This approach of trying to unearth the meaning which humans give to their experiences and develop understanding by evolving and integrating concepts is an important approach which contemporary psychologists are adopting more and more. Since language is an important vehicle through which meanings are created; Sarbin (1986) proposed a narratory principle which holds that a narrative reflects the thinking, perception, imaginings and actions of human beings. Assessment of certain important aspects of stress was therefore done through analysis of the detailed reaction given by the subject in his/her own words and language.

Flexibility of methodology is an important aspect of a good research. Therefore, tools were selected for our study in terms of appropriateness. For measuring sources of stress, its impact and coping, open ended questions
which led to narrative and which were analyzed through content analysis was used. The self-anchoring Ladder Scale (Cantril et al., 1965) was used to get an individual's evaluation of his continuum of stress, coping and coping efficacy. The Psychological Well-being Scale (Bhogle & Prakash, 1995) was used to measure sense of well-being, and stressful life events were measured by LES (Life Experience Survey) developed by Sarason, Johnson & Siegal (1978).

**Tools of Study**

(1) **Assessment of Stress Source, Impact and Coping Style:**

Since the researcher desired to obtain a picture of the subject's reality world in relation to the stresses perceived by him/her and its meaning, open ended questions which provoked the narrative were felt to be most appropriate. Four themes were selected to which subjects responded in the form of a detailed expression of their reactions. The following are the four questions to which subjects responded.

1. If you are asked to look into your life and record the experiences that have disturbed and distressed you most, which experiences would come immediately to your mind as the most powerful stresses in your life? Please write about it in details.

2. Is there any other notable experience sad or happy that you would like to record?
3. These experience must have affected you very strongly and probably influenced you in some lasting way. What do you think has been the impact of these experiences on you?

4. As an intelligent person you must have tried to handle distressing situation in the best possible manner. What did you do to reduce the stress and come out of the crises?

Through the above queries a life like picture of (1) nature of stressful experiences (2) the impact and meaning of these experiences and (3) method of handling and coping could be brought out realistically and clearly.

(2) Measuring subjects, evaluation of stress and coping:

Self Anchoring Ladder Scale

An important methodological problem which confronted the investigator was that of devising some means to get a picture of where the individual places himself in terms of the severity of stress experienced by him, (which is an aspect of the individual’s own reality world), in his own terms, yet in a manner that allows for quantitative comparisons.

It may be recalled that a similar problem was confronted by Cantril (1965) in his study of the patterns of human concerns, which aimed at studying the fears and aspirations of people belonging to different countries, the Self-Anchoring Striving Scale which was devised by Cantril, Kilpatrick and Lloyd.
Free was used in that study. The scale has been discussed extensively by the authors in the “Journal of Individual Psychology (November 1960)” The American Behaviour Scientist” (October 1962) and “Scientific American” (February 1963). Its applicability to a wide variety of problems, particularly those which involve discovering the spectrum of subjective evaluations a person is preoccupied or concerned with, has been strongly suggested.

It was felt that this device would enable us to measure the individual’s evaluation of stress intensity adequately. Provided the agent knows what a phenomena means and is not faced by problems of comparison, it is difficult to conceive any one better place than himself to the determine whether he feels or does not feels stressed. Barrow (1980) has supported this viewpoint after evaluating critically varying opinions in the context of measuring happiness (Mc Peck 1978, Von Wright 1963).

Retaining the concept contained in Cantril’s scale but modifying it in consonance with the concept we are studying, the self-anchoring device was used. The permissibility of such modifications, where essential concept is retained has been upheld by the authors.

The first step in the administration of the scale is to ask the person to define on the basis of his own assumptions and experiences the two extreme or anchoring points of the spectrum on which some scale measurements is desired. In this case subject was asked to define on the basis of his her own
experiences as well as assumptions (i) the top of the scale (highest level of stress) the bottom of the scale (lowest level of stress) and (ii) for measuring coping efficacy the top of the scale (most successful and effective coping) and the bottom of the scale (least successful and least effective coping). Through this a “self-defined continuum” as Cantril calls it, comes into existence.

The defining and probing into reality world prepares the subject for the next phase and is an important precursor to it, since it helps him to form a somewhat cogent picture of his reality world which he may not otherwise have given thought to. This next phase is presenting a non-verbal ladder device (see appendix-I), symbolic of the “ladder of life” and asking him where he thinks he/she lies on it in terms of stress level, the top rung indicating the highest and bottom rung the lowest level, with reference to his definition of them. The experimenter moves the finger up and down rapidly while asking him this question. The subject indicates his position on the ladder with a tick mark.

To measure subject’s estimate of his coping efficacy the same procedure was repeated with query regarding coping put to the subject. The investigator’s choice of instrument is thus in consonance with the nature of the variable studied as well as the merit of it as a measuring device. Cantril’s scale has been used in almost twenty six countries, and valuable information with regard to aspirations, happiness, fears and concerns as existing in different nations have been obtained through it.
In the present investigation, the subject’s estimation of his level of stress and his evaluation of coping used by him was obtained through ladder rating.

(3) Life Experience Survey – LES

Stress research has given birth to a number of scales and inventories for its measurement. For example, Subjective Stress Scale (Kerle & Bialek, 1958): a self report on adjective check list, during and after exposure. Hassles scale developed by Kanner et al. (1981) indicating which event made the respondent to ‘feel hassled’, etc.

We have used Life Experience Survey (LES) developed by Sarasen, Johnson and Siegel (1978). The LES over existence greatly to SRE - Schedule of Recent Experience (Holmes & Rahe 1967), which was widely used to measure life stress. This 43 event scale is a self-administered questionnaire in which subjects are asked to check those events that they have experienced during previous 6 months or 1 year. However, it has been criticized by several scholars on different grounds, Brown (1974). It was primarily to overcome these shortcomings that Sarason, Johnson and Siegel (1978) developed 57-item self-reported measure “Life Experience Survey” (LES).

The LES includes a list of events experienced with at least some degree of frequency in the population being investigated. Respondents themselves rate the desirability or undesirability of the events. It allows individualized ratings of the personal impact of the event experienced. These characteristics share the
objective of the present study. Therefore the investigator found it an appropriate measure to obtain total scores of stress and impact experienced by the respondents.

The scale has two portions: Section I and Section II with 47 and 10 specific events respectively. In addition to 47 specific events in section I, three blank spaces are also given to indicate those events which the respondent did not found in the existing list but he or she has experienced them. This section refer to changes that common to individuals in a whole variety of situations. Section 2 deals specifically with changes experienced in the academic environment.

In the construction of LES several events have been used from the existing life events scales. 34 events are similar in content to those found in the SRE. However in LES these events were made more specific. Other events were included after judging that they might exert a significant impact on the lives of persons experiencing them.

The events of LES can be categorized as follows:

Family related events: death, illness, losses, gains, changes in closeness of the family members.

Events related to person himself include major personal illness, change in eating, sleeping, social and recreational activities, working and living conditions.
Events related to friend: death or illness of friend and breaking up and reconciliation with friend.

Marriage, divorce, health and working conditions of spouse, changes in interpersonal relationships, sexual difficulties are the events related to marital and sexual relationships.

Finance related events include losses, gains, borrowing and investing in recreational activities.

Section 2 fully represents the academic events, such as beginning a new school experience, failing an exam, dropping a course, being dismissed from dormitory or other residence, financial problems concerning academics.

After a test retest of LES the authors report correlation coefficient for positive change score as 0.19 and 0.53 (P < .001), for negative change score as 0.56 (P < .001) and 0.88 (P < .001) and for total (positive and negative) score as 0.63 and (P < .001).

LES enables the subjects to rate in terms of stress of the events they have experienced during the past one year. The subjects rate only those events which they have experienced and leave unanswered those events which he or she has not gone through. Unanswered events score zero. The events are rated on a 7-point scale which indicates ranges from -3 to +3, -3 indicating a rating of extremely negative and +3 a rating of externally positive. The summing of the ratings of the negatively perceived events indicate the negative change.
score. Similarly the summing of the ratings of positively perceived events provide us the positive change score. After combining both negative and positive change scores the total change score, in obtained.

LES has been developed in USA. However it has been found suitable for Indian culture also. (Lone, 1990). For the present study too, the investigator found this scale as an appropriate measure.

(4) Assessment of Psychological Well-Being:

In a major shift during the last few decades, researchers have paid greater attention to the concept of ‘well-being’ than the traditional aspects of ‘ill-being’. A number of researchers had been conduct to identify and explore different aspects of well-being which resulted in development of number of questionnaires, tools and tests for the related field. These measures of well-being include, single item scales such as ‘Self-anchoring Ladder’ (Cantril, 1965), ‘Delighted-Terrible Scale’ (Andrews & Withey 1976), multi-item geriatric scale like, ‘Philadelphia Geriatric Center Morale Scale - PGCMS’ (Lawton 1975), ‘Life Satisfaction Index - LSI’ (Neugarton; Havighurst & Tobin 1961), multi-item general use scales like Differential Personality Questionnaire - Well-Being sub-scale (Tellegen 1979), Index of General Affect (Campbell; Converse & Rodgers 1976), Self-Description Inventory (FORDYCE 1978), Happiness Measures (FORDYCE 1977), Affect Intensity Measure (LARSON 1983), Satisfaction with Life Scale (DIENER; Emmons; LARSON & Griffin 1983)
etc. After rigorous testing and retesting in different settings these questionnaires are now used as valid tools for further research.

In the Indian context Verma et al (1983), Moudgil et al. (1986) and Verma & Verma (1989) constructed PGI General Well-Being Measure in simple Hindi for the use in clinical population. Nagpal & Sell (1985) developed a scale for assessment of all the dimensions of Well-Being, but it is too lengthy for the research purpose. Bhogle & Parkash (1993) proposed that self-report measures are reliable and valid measures of Psychological Well-Being. They observed that satisfaction variables are closely related to Well-Being, while psychological distress and meaninglessness are negative aspects indicative of ill-being.

In the present study Psychological Well-Being Scale, developed by Bhogle & Parkash (1995) is used, because the investigator aims to consider over all well-being of the participants. This instrument seems to be most suitable as it contains the items which provides the general information about the well-being of the respondents.

The authors of the scale have taken all the empirical steps in the developing of Psychological Well-Being Scale. The items were pooled on the basis of existing methods of assessing psychological well-being and literature review. Five point Likert-type scales has been used to assess perceived satisfaction in different life settings, such as peer relationship, marriage, health
social support and satisfaction with support. G.H.Q-28 of Goldberg & Hillier (1979) was used to measure psychological distress. General life satisfaction was measured by LSI-8 of Steinkamp & Kelley (1987). Several other factors like perceived personal control (Pitcher et al 1987) self esteem (Umberson & Gove, 1989) positive affect (Bradburn, 1969) meaninglessness (Umberson & Gove, 1989) were added to the rating scales.

The seventy item pool was administered to a normal adult sample of 20-58 years. The participation was purely voluntary basis. Factor analysis of the responses, using principals component method, yielded 12 factors with eight values greater than 1.00 accounting for 6.8% of the variance.

The rotated factor matrix was then analyzed since the number of items loading on each factor differed, a final form 4 the questionnaire was developed which contained the two items which loaded the highest on each factor this yielded 24 items. To this were added the over all rating indices for satisfaction in the four areas of life, marriage, peer comparison and health, and thus in all the final questionnaire contained 28 items (Bhogle & Prakash, 1995).

When put on test, PWB questionnaire (Bhogle & Prakash, 1993) shows an internal consistency of 0.84 and split half coefficient of 0.91 in retest using the same questionnaire after three months 0.72 correlation was observed. The questionnaire had high correlation of 0.62 with subjective well-being.
questionnaire of Nagpal & Sell (1985) and 0.48 with general well-being questionnaire of Verma & Verma (1989).

Sample and Procedure:

The sample consists of 127 adults selected through purposive sampling. Originally 150 subjects were selected for the study, but due to incomplete questionnaires, twenty three subject were not included in the sample, which resulted in total subjects being 127.

The sample consisted of respondents in the age group of 20-40 years. Participation in the study was completely on a voluntary basis.

Since the present study was not concerned merely with the administration of some questionnaires but involved in the obtaining of a detailed reaction to various issues, it had to be undertaken with great care. Only subjects who, where willing to participate, willing to give time and felt motivated enough to write out their individual experiences, were selected. Data collection was not conducted in one stretch but in view of the detailed information required a minimum of two sessions were conducted with each subject.

The following was the order in which the various tools of study were given to the subjects.

1. The subjects were presented with the Self-ANCHORING Ladder Scale to place himself/herself on the ten point scale in terms of stress. This
involved defining the extreme points of the continuum and this helped the subject to orient himself/herself about stress experiences this would facilitate the next phase where detailed information about stress experience was required.

2. After Ladder rating on intensity of stress had been given by the subjects, the open ended questions regarding stress, its impact and coping were given to the subjects. This was the lengthiest part of the subjects contribution but subjects participated with interest. For them it served also as an opportunity to collect in a focussed way their thoughts and experiences on a matter of great personal concern. It was reassuring to observe that subjects responded with willingness and motivation, thus indicating that information given by them was reflective of their reality.

3. The subjects rating on the ladder scale were taken in terms of extent to which he/she had successfully managed that is, coped with the stress.

4. The life experience survey (LES) and psychological well-being (P.W.B) scales were administered to the subjects.

The above order was maintained in order to ensure that subject becomes focussed on the issue to which we require responses. Subjects evaluation of coping was taken later because the concept of what coping was, and how he/she had coped became more clear after writing about these aspects in the detailed questionnaire.
On the basis of scores of Well-being, subjects were divided into three groups: (i) High Well-Being, (2) Moderate Well-Being and (3) Low Well-Being. Each of the three groups were compared in terms of:

a) Extent of stress perceived (through ladder rating).
b) Perception of effective coping (again through ladder rating).
c) Sources of stress (through content analysis).
d) Impact of stress (through content analysis).
e) Coping styles (through content analysis).
f) Stress scores of L.E.S. (positive, negative, and total separately).

Analysis

The most challenging part of the analysis was analysis of the narrative data provide by the subjects. The technique of content analysis was used to generate the categories of stress, impact and coping from the reported experiences of the respondents. Such analysis is always undertaken as a collaborative effort so that research does not lose its scientific credentials by limiting itself to a single person’s evaluation. The following steps were taken to ensure and maintain objectivity and empiricism in procedure.

Five teachers and research scholars of the Department of Psychology A.M.U. participated in the process of evolving a coding system through which categories could be created to process the responses given by the subjects. The
purpose of the study and the procedure of the content analysis was discussed in
detail with other coders. Ten response sheets were randomly selected for
analysis. The coders were asked to go through each section of the narrative and
give their evaluation of what the respondent has indicated to be his stress
source, its impact and coping strategy. Raters were asked to give their
assessment of the descriptive answers on the response sheets. Every rater
analysed all the ten questionnaires independently. All the analysed codes (of
stress, impact and coping) formulated by the scholars were then matched and
discussed. In a few cases there were slight difference which were discussed
and this actually led to a better system of coding.

The respondents have reported a number of sources of stress, impact of
these stressors and coping strategies. On the basis of nature and perception of
these variables (stress, impact and coping), they were categorized under some
major headings. At first instance for every variable a miscellaneous category
was also used but later on after reconsidering and reexamining these limited
number of responses, were accommodated in other existing categories.

Finally eight categories of sources of stress, five of perceived impact
and seven of coping strategies, were identified. A brief description of these
categories is as follows.
Sources of Stress:

1. **Bereavement:**

   This category included all those situations where death had occurred (e.g., natural, custodial and accidental etc.)

2. **Interpersonal relations:**

   Under this category were coded all stressful experiences relating to the individuals, interaction with others: like broken relationships, peer group experiences, relations with family etc.

3. **Health related issues:**

   Frequent illness, accidents, injuries, noise pollution and other health related matters were included under this category.

4. **Social injustice:**

   Many subjects had experienced as source of stress phenomena like despotism, moral degradation (of society/family), corruption, deceitfulness, discrimination (on social/religious grounds) etc. They were coded under category of social injustice.
5. **Profession/occupation:**

This category includes problems like unemployment, getting fired from a job, not getting salary, employers' negative attitude etc.

6. **Low and Order:**

Terrorism, robbery, being uprooted from homeland, torture, threat to life, and kidnapping etc. were coded under this category.

7. **Academic:**

This category includes, for example, academic set backs (break) failure, fear of unfair low evaluation of performance, delay in exams, and academic pressure etc.

8. **Negative feelings:**

Negative self-concept, guilt feelings, and pessimism about future, feeling unlucky, etc. were coded in this category.

9. **No Stress:**

A few respondents report no stress, were put under this category.
Impact of the Stressful Events/Experiences:

1. *Event was learning experience for future:*

   Responses like enriching of experiences, ability of facing such events positively in future, getting real image of life, developing insight, broadening vision about life, becoming life conscious and careful, were put under this category.

2. *Event gave opportunity for psychological growth:*

   This category includes responses like, shaping of personality, becoming mature and idealistic, developing sense of responsibility, tolerance, patience, sociability, confidence, competence, commitment, determinism, courage, control and management.

3. *Event had psychologically negative impact:*

   Inferiority complex, guilt, disgust, worry, fear, anger, revenge, hopelessness, hot temper, disturbance, isolation, insecurity, not believing other, and sinking into apathy, etc based responses were proposed for this category.
4. *Event had pathological consequences:*

Responses like physical illness, weakness, dizziness, mental disturbance, memory loss, becoming sentimental, shocked, anxious and cowardice, etc were studied under this category.

5. *Event caused turning to God:*

This category considers responses like, religiosity, religious altruism, and firm belief in God, etc.

6. *Event resulted in poor performance:*

Responses like academic stagnation, academic set back, failure, in competence, etc were treated under this category.

7. *Event had no specific impact:*

Responses like no impact or not much impact were studied under this category.

**Coping Strategies:**

1. *Sublimation:*

Activities like engaging oneself in some other activity, listening to music, playing, reading, diverting oneself towards pleasurable activities and enjoying nature were considered to reflect sublimation.
2. **Accepting and compromising:**

Tolerating, feeling that time will heal, adapting to the situation with sobriety and patience were coded in this category.

3. **Spiritualism:**

Responses like worship, prayer, meditation, altruism, religiosity, believe in God, and optimism were coded under spiritualism.

4. **Confronting/facing by strengthening the self:**

Commitment, sense of challenge, self-management and control, working hard, increasing competence, and self centred opting etc were considered under this category.

5. **Problem solving:**

Responses of considering alternatives, seeking pertinent information (help), thinking positively, behaving flexibility, and redefining a situation so as to make it more solvable etc were put under 'problem solving'.

6. **Getting social support:**

Sharing problems with others, seeking and providing help, self-disclosures, etc were considered as getting social support.
7. *Helplessness/giving up:*

When responses were like feeling out of control, in action, isolation, weeping, smoking etc, they were considered under category of helplessness/giving up.

8. *No Specific Coping:*

Responses like do nothing etc. were treated under this category.

The above content analysis gave us very vital information. This information was further analysed in the following manner.

i. The frequency with which subjects belonging to each of the three well-being groups attributed source of stress in each of the eight categories depicting stress source was calculated in terms of percentage. The three groups were compared in terms of significance of difference between percentages. Although in social science research mostly 0.05 is selected as the significance level, but as the present study is largely based on a qualitative data we consider even 0.10 as the significance level for the obtained results. A graphic representation of the data was also made for a ready reference.
In the same manner the three groups were analysed in terms of impact of the stress experienced by the subjects and with reference to their coping and management of stress.

ii. The three groups were also compared in terms of scores obtained on the Life Experience Survey (LES). Inter group comparisons were made by calculating values with reference to total stress score, positive event score, and negative event score.

iii. The three groups were also compared with regard to ratings given on self-Anchoring Ladder Scale with regard to continuum of stress experienced by them and success in terms of coping.

iv. In terms of the ideographic orientation which the researcher considers extremely important the researcher made a detailed analysis of the total picture presented by subjects falling at the extreme ends of the well-being scale.