# MENTAL HEALTH IN THE POST COVID ERA

**Edited By**

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*"This book is presented to the students, professionals of Mental Health field and those who have suffered and affected COVID 19 Pandemic"*

## EDITORIAL

The COVID-19 pandemic has brought about unprecedented challenges, affecting nearly every aspect of our lives. As we gradually emerge from the pandemic, it's crucial to recognize and address the profound impact it has had on mental health worldwide. This book delves into the evolving landscape of mental health in the post-COVID era, highlighting both the challenges faced and the resilience demonstrated by individuals and communities. The economic fallout of the pandemic has been profound, with job losses, financial strain, and business closures impacting millions. The insecurities around livelihoods have taken a toll on mental well-being, leading to heightened stress levels and a sense of uncertainty about the future.

Lockdowns and social distancing measures have been essential for controlling the spread of the virus, but they have also exacerbated feelings of loneliness and isolation. Humans are inherently social creatures, and the abrupt disruption of social interactions has had a significant impact on mental health, especially for those already vulnerable. Research says around 20% of COVID-19 patients have developed mental health issues. But the fact is every one of us who witnessed and have been through this pandemic are psychologically impacted and it ranges from a mild degree symptoms like mood-swings to severe forms of Anxiety (Corona phobia) and depression.

Telehealth and digital mental health resources have played a crucial role in health services. The convenience and accessibility of virtual therapy sessions have opened up new avenues for seeking ensuring continued access to mental health services reducing barriers such as transportation and stigma associated with in-person visits. Communities also played a vital role in supporting individuals through the pandemic. Acts of kindness, mutual aid initiatives, and grassroots mental health belonging and solidarity. These initiatives campaigns have fostered a sense of have not only provided practical assistance but also served as a reminder of the collective strength in times of adversity.

Looking ahead that, we navigate the post-COVID era, it is imperative to prioritize mental health as an integral component of overall well- being. Recognizing the enduring impact of the pandemic on mental health and continuing to de stigmatize seeking help will be crucial steps in building a more resilient and compassionate society.

**The Editor**

# PREFACE

In the post-COVID era, mental health continues to be a significant concern due to the lingering effects of the pandemic. People may be dealing with heightened stress, anxiety, depression, and other mental health issues stemming from various factors such as social isolation, economic uncertainties, grief, and fear of the future. Additionally, the pandemic has highlighted existing disparities in accessing mental health services and resources. Thus, it's essential to prioritize mental health support, promote resilience, and foster a culture of empathy and understanding to navigate the challenges ahead.

Chapters in this book included different variables regarding mental health and how the individual's mental state in the post Covid era. This book reveals comprehensive examination of psychological impact of pandemic. Each chapters provides the diverse ways in which the pandemic has shaped our mental wellbeing.

The chapters of this book are written by alumni of psychology department. I sincerely thank our eminent authors for their contribution to this book and I expect it will be valuable to the mental health professionals as well as students.

**The Editor**

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# Chapter 1

## MENTAL HEALTH AND NUTRITION: AN OVERVIEW

### Bushaira. V

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## Introduction

Individuals' nutritional status and dietary habits have a significant impact on mental health and the emergence of psychiatric diseases. The majority of scientific research on mental health concerns are depression, cognitive function, and dementia; information regarding other psychiatric disorders, such as schizophrenia, is scarce. The longer people live, the more common mental illnesses become, and the greater the attention that follows. Nutrients like omega-3 fatty acids, phospholipids, cholesterol, niacin, folate, vitamin B6, and vitamin B12 may be good for mental health. Simple sugar and saturated fat are thought to be harmful to cognitive function, and blood cholesterol levels are inversely correlated with depression risk. Comfort foods provide a temporary sense of wellbeing, and they make a person feel good, by transposing it into a happy past, when it was taken care of or pampered. Researchers have found that physiological and psychological needs influence the people's attraction to a specific food.

## Mental Health and Nutrition

Mental well-being is a core component of optimal health, and is a status that individuals can manage stress from daily living and make positive achievements pursuing public interest and contribution to the community. Maintaining individual's mental health is important to improve personal life values, to reduce medical cost and other social expenses to deal with mental disorders, and to enhance national competitiveness.

Mental disorders are clusters of syndromes which disturb an individual's cognition, emotion regulation or behaviour. Several factors affecting the development of mental disorders include genetic factors, stress, diet, physical inactivity, drugs, and other environmental factors. Among these factors, dietary factors may aggravate or ameliorate symptoms and the progression of the disorders although those are not major aetiologies'.

Feeding the brain with a diet that provides adequate amounts of complex carbohydrates, essential fats, amino acids, vitamins, minerals and water can support healthy neurotransmitter activity. It can protect the brain from the effects of oxidants, which have been shown negatively to impact mood and mental health. Evidence of nutrition's protective qualities can be identified across the life course. From a young age, good nutritional intake has been linked to academic success, with a number of studies reporting that providing children with breakfast improves their academic performance. A number of published studies have shown that hungry children behave worse in school, with reports that fighting and absence are lower and attention increases when nutritious meals are provided. As the age increases, the protective effect that diet has on the brain is evidenced in research findings that a diet high in essential fatty acids and low in saturated fats slows the progression of memory loss and other cognitive problems.

Nutrition plays a key role in promoting mental health. A diet that provides all essential nutrients will prevent any deficiencies, which may contribute to mental health conditions. Proper nutrition, including adequate fibre intake, promotes healthy gastrointestinal (GI) function. Food choices can impact our mood and even future food choices.

Food choices, mood and mental health are very interwoven. Mood drives food choices. Food choices can drive mood and future choices. This impacts not only the mental health; it can lead to other chronic diseases too. When the food choices are consistently snack foods with few nutrients, increase the risk of nutrition-related diseases such as type two diabetes and hypertension. Some mental health conditions can cause changes in appetite. Skipping meals can lead to deficiencies of important nutrients. Cravings are also associated with mental health conditions. Carbohydrate cravings are correlated with low serotonin levels. Promoting healthy levels of serotonin can be accomplished by a healthy, balanced diet, which would decrease cravings.

Emotional eaters consume significantly more food when feeling sad than happy. Moreover, when people eat emotionally, they choose sweet over salty food (van Strien et al., 2013). A positive mood increases the preference for healthy foods over indulgent foods as a tendency to project long term health objectives, while a negative mood prompts for immediate, impactful goals such as mood control, leading to greater preference for indulgent foods over healthy foods (Gardner, Wansink, Kim, & Park, 2014).

Particular foods come to be associated with the relief of distress and modify or change emotional states or feelings. This shows that mood plays a significant role in food selection and comfort foods are preferred under certain circumstances, such as when individuals are experiencing illness (Locher, Yoels, Maurer, & Van Ells, 2005). People choose to eat comfort foods when they have the blues or feel lonely (Spence, 2017). Males prefer warm, hearty, meal-related comfort foods (such as steak, casseroles, and soup), while females instead choose comfort foods such as chocolate and ice cream (Wansink, Cheney, & Chan, 2003). Sweet foods high in calories - ice cream, cookies, and chocolate, for example, elevate mood due to serotonin and opiates production (Stein, 2008).

The relationship between nutrition and mental health is bidirectional: the foods we eat affect our mental health, and our mental health status affects what and how well we eat. Nutritional factors relating to mental health have a common aspect in that those factors are associated with the risk of CVD. Omega-3 FAs are famous for cardio-protective effects. Folate, vitamin B6 and B12 are parts of homocysteine metabolism, and deficiencies of these nutrients result in increased blood levels of homocysteine, which aggravate mental health. Niacin is an effective modulator to increase high-density lipoprotein cholesterol and to improve lipidomic profiles, and vitamin D is associated with the risks of CVD and metabolic syndrome. These nutrients are beneficial for mental health. Conversely, excess intake of saturated fat and sugar, which are risk factors for CVD, is detrimental to brain function. In addition, recent studies add promising evidence that specific dietary patterns including Mediterranean diet can be applied as effective strategies to prevent mental disorders.

**How does the food affect our mood?**

Food is any natural or processed product/substance that serves as nurture for maintaining life, sustaining growth, vital processes and furnishing energy. From a nutritional point of view, food contains macronutrients – carbohydrates, proteins and fats, and micronutrients – minerals and vitamins (Mahan, Escott-Stump, & Krause, 2008). Any imbalance sustained on a sufficiently long enough term can create physical and psychological disorders. As any other organ, the brain is nurtured with substances present in the diet. Therefore, the nutritional properties of food impact on brain functions related to mood and emotion. Food may spark rapid

emotions by sensory stimulation, but it can influence mood by slower changes in brain chemistry as well (Shepherd & Raats, 2006).

Eating leads to widespread opioid release in the brain, likely signalling feelings of satiety and pleasure. A study revealed that a significant amount of endorphins is released in the entire brain after eating the pizza and, surprisingly, even more are released after the consumption of the tasteless nutritional drink. The magnitude of the opioid release was independent of the pleasure associated with eating (Tuulari et al., 2017).

It is a popular belief that a bit of chocolate can give a boost of happiness and improve the mood, while a sip of coffee energizes and makes us more alert. The excitants caffeine and Theo bromine, along with the sweet taste and some psychological mechanisms contribute to enhancing the disposition, however, it has also been proved that chocolate, if eaten in sufficient amounts on an empty stomach, might encourage the synthesis of the serotonin (Shepherd & Raats, 2006).

The neurotransmitter serotonin (or 5-hydroxytryptamine; 5-HT) is formed from the precursor essential amino acid, tryptophan (TRP) in the presence of an enzyme - tryptophan hydroxylase, which converts TRP to 5-hydroxytryptophan. 5-HT has long been involved in sleep, as well as in affective disorders such as depression and anxiety (Shepherd & Raats, 2006). Serotonin and tryptophan are known to promote well-being (Rao et al., 2008).

**Role of Nutrients in Mental Health**

**Carbohydrates**

These brain chemicals' production (5-HT and TRP) is triggered by carbohydrate rich foods. Carbohydrates have been found to affect mood and behaviour. They are the macronutrients that trigger the release of insulin in the body, a hormone which enables the transformation of glucose into energy at the cellular level, and helps with facilitating the entry of tryptophan into the brain (Rao et al., 2008).

Sugars, especially sweets, can provide an immediate but short-lasting effect on the mood, nevertheless, it is rather recommended the consumption of low glycaemic index (GI) foods such as fruits and vegetables, and complex carbohydrate foods - whole grains, pasta, which bring a moderate but more enduring effect on brain chemistry, mood, and energy level (Rao et al., 2008).

Proteins:

Protein intake, due to the containing amino acids, also affect the brain functioning and mental health. The neurotransmitters that impact mood are made of amino acids – dopamine from tyrosine, serotonin from tryptophan. The limitation of these amino acids leads to poor synthesis of the neurotransmitters and hence to low mood, whereas the excess may lead to brain damage and mental retardation (Rao et al., 2008). Protein in elevated proportion was associated with higher chances of depression and arousal, whereas increased carbohydrate proportion predicted less depression and more calmness. Moreover, the reduction of TRP seems to disrupt mood and to have a greater impact than increasing the carbohydrate intake (Shepherd & Raats, 2006).

Food containing tryptophan increases serotonin levels in the brain and alters neural processing in mood-regulating neurocircuits. However, tryptophan competes with other large-neutral-amino-acids (LNAA) for transport across the blood–brain-barrier, a limitation that can be mitigated by increasing the tryptophan/LNAA ratio. The LNAA include tyrosine, threonine, methionine, valine, isoleucine, leucine, histidine and phenylalanine. The results of an experiment that increased the ratio in a customized drink suggest that this can lift disposition by affecting mood-regulating neurocircuits (Kroes et al., 2014).

**Omega-3 fatty acids**

The brain is a fat-rich organ and the lipidic brain membrane contains phospholipids, sphingolipids, and cholesterol.  It has been estimated that brain's grey matter contains 50% fatty acids that are polyunsaturated (PUFA), out of which 33% belong to the omega-3 family (Rao et al., 2008). Clinical and epidemiologic studies suggest that inadequate dietary n-3 polyunsaturated fatty acids (PUFA) may increase predisposition to several psychiatric disorders, particularly depression (McNamara, 2009). N-3 PUFAs - DHA and EPA - mitigate inflammation by modulating the level and length of the inflammatory response. Thus, n-3 PUFAs could contribute to antidepressant effects and/or resistance to depression through anti-inflammatory mechanisms (McNamara, 2009).

Docosahexaenoic acid (DHA, 22:6n-3) is the most abundant PUFA in the brain, representing approximately 15% of the total fatty acids in that tissue. These long-chain PUFAs

are synthesized endogenously from α-linolenic acid (18:3n-3) and Eicosapentaenoic acid (EPA 20n-5:3) (Levant, 2013). However, DHA and arachidonic acid (AA)-(omega 6) cannot be synthesized by mammals and they have to be supplied through the diet.  Dietary or tissue n-3 PUFAs alone do not need to cause depression in humans; however, they likely create a vulnerability that increases susceptibility to depression when the other contributing factors (specific genotypes, stressors) are also present (Levant, 2013). 1.5 to 2g of EPA per day have been shown to stimulate mood elevation in depressed patients.  However, doses of omega-3 higher than 3 g do not present better effects than placebos and may not be suitable for some patients, such as those taking anti-clotting drugs (Lakhan & Vieira, 2008). Western diets are low in omega-3 fatty acids, including the 18-carbon omega-3 fatty acid alpha linolenic acid found mainly in plant oils, and DHA, which is found mainly in fish (Innis, 2008).

**Micronutrients**

Depressive symptoms are the most common manifestation of folate deficiency. Patients with depression have 25% lower blood folate (B9) levels than healthy subjects. Vitamins B6 and B12, among others, are directly involved in the synthesis of some neurotransmitters (Rao et al., 2008). Supplementation with cobalamin (B12) improves cerebral and cognitive functions and preserves the integrity of myelin sheath of the nervous fibers; (Rao et al., 2008).

Supplementation of nine vitamins, in excess, for 1-year improved mood in all subjects, according to a study. Moreover, these changes in mood were recorded after a year, even though the blood levels reached a plateau after 3 months. The mood improvements were predominantly correlated with vitamin B1, B2 and B6 (Benton et al., 1995).

**Alcohol**

Another obvious association is that of alcohol and mood. The effect of alcohol on mood is undeniable. Alcohol has long been perceived to provide a temporarily relief of negative emotions, and to briefly increase pleasure and relaxation.  A major study - Global Drug Survey (GDS) - that interviewed 30,000 of 18-34 year-olds from 21 countries, has examined the link between the type of alcohol (spirits, red and white wine, beer) and the reactions it triggers in consumers:  feeling energized, relaxed, sexy, confident, tired, aggressive, ill, restless and tearful,

thus showing the complexity of the effects that the consumption of drugs has upon the temperament of a person (Ashton, Bellis, Davies, Hughes, & Winstock, 2017).

At low doses, ethanol is possibly useful, acting to depress brain function, very much in the style of an anaesthetic and sparking feelings of relaxation and good mood. Alcohol consumption affects neurological pathways that impact the dopaminergic, serotoninergic, γ-amino butyric acid (GABA) and glutamate pathways, enhancing reward, arousal, and addiction circuits (Banerjee, 2014).

## Antioxidants

The brain is vulnerable to oxidative stress because it has lipid-rich area especially in neuronal membrane and is metabolically active. Tight balance between oxidative stress and antioxidant system is required to maintain the structural integrity and optimal functions of brain. Vitamins A, C, and E are major non-enzymatic antioxidants in foods, and there are emerging evidences that these antioxidant vitamins are protective against cognitive decline and mental disorders including anxiety disorders, attention-deficit/hyperactivity disorder, autism, bipolar disorder, depression, schizophrenia, and substance abuse. Low blood levels of antioxidant vitamins are observed in subject with various mental disorders.

Subjects with high tertile of vitamins C and E intakes have lower risk of AD than subjects with lower intake tertiles of these antioxidant vitamins in the Rotterdam Study. Especially, amyloid-beta deposition in brain relating to increased oxidative stress is one of the major causes of AD, and low levels of vitamins C and E in blood and/or cerebrospinal fluid were observed in AD patients. Vitamin E intervention reduces amyloid-beta deposition, reactive oxygen species as well as nitric oxide synthesis, and prevents against cognitive impairment and the progression to AD.

## Mediterranean diet

A research study by Sadhukhan (2020) focused on finding a connection between nutrition and mental health. It revealed that a traditional or Mediterranean diet is beneficial for maintaining mental health. Avoiding foods with a lot of sugar, saturated fat, and processed food is important for mental wellness. Our moods can be improved by food. Food habits and food preferences can be influenced by psychological factors such as stress, mood, and eating

disorders. To maintain good mental health, wholesome diet is more vital than tasty food. Research study suggests that incorporating dietary modifications and antioxidant supplementation along with exercise into a comprehensive treatment plan may offer substantial benefits for individuals with mental health concerns and contribute to the promotion of mental well-being.

Therefore, more attention should be given to medium- and long-term diet changes and our food consumption should focus more on complex carbohydrates, plant-based foods/fruits and vegetables containing fibres that positively influence microbial composition, on good fats (omega 3) to modulate of inflammation. In this respect, given the fact that a large prospective study has found that the Mediterranean diet has a potential protective role with regard to depressive disorders, the return to a traditional Mediterranean diet is an obvious recommendation (Sánchez-Villegas et al., 2009).

As far as supplementation for healthy people is concerned, a diverse diet should weigh more than opting for supplements, as humans do not consume nutrients in isolation and foods come with a balanced composition of macro and micro nutrients, and fibres (Jacka, 2017). However, in the wake of positive result-trials, some supplements are needed and recommended especially as treatment for mental disorders, where they can successfully replace medication that comes with side effects.

The Mediterranean diet has been found to be the most beneficial diet in regard to the improvement of overall mental health as well as symptoms associated with mental health disorders.

| Includes | Excludes |
|---|---|
| A wide variety of vegetables, fruits and whole grains | Refined grains: white bread, white pasta and pizza dough containing white flour |
| Healthful fats, such as nuts, seeds and olive oil | Refined oil: Canola oil and soybean oil |
| Moderate amounts of dairy and fish | Foods with added sugars, such as pastries, sodas and candies |

| | |
|---|---|
| Very little white meat and red meat | Meats, hotdogs and other processed meats |
| Few eggs | Processed or packaged foods |
| Red wine in moderate amount | |

The Mediterranean diet is helpful because in contains several nutrients shown to decrease mental health problems

| Nutrients | Benefits | Food sources |
|---|---|---|
| Selenium | Might help improve mood and reduce anxiety | Brazil Nuts, Fish, Meat, Beans, Oatmeal, Milk products, Enriched Foods |
| Vitamin D | May help improve the systems of depression | Fortified Milk and Juices, Fatty Fish, Eggs and from the Sun |
| Omega 3 | Reduce the risk of mood disorders and brain diseases by enhancing brain function and preserving the myelin sheath that protects nerve cells | Cold-water fish, such as salmon, sardines, tuna and mackerel. Flaxseed, Chia seeds, Walnuts. |
| Antioxidants Vitamin A, C & E | Antioxidants help to remove free radicals, which are the waste products of natural bodily processes that can build up in the body. If the body cannot eliminate enough free radicals, oxidative stress can develop. A number of health problems can result, which may include anxiety and depression | Vitamin A: Sweet Potatoes, Carrots, Broccoli, Spinach, Capsicum, Apricots, Eggs and Fortified foods Vitamin C: Citrus fruits, Capsicum, Strawberries, Tomato juice, Amla and Fortified foods Vitamin E: Sunflower seeds, Almonds, Vegetable oils, Peanut butter, Fortified cereals |

| | | |
|---|---|---|
| B Vitamins<br><br>B12 & Folate | Protects and maintain the nervous system, including the brain. They may help reduce the risk and symptoms of mood disorders. | B12: Meat and Milk Products<br><br>Folate: Leafy greens, Beans, Peas, Lentils |
| Zinc | Boosts the immune system and may influence depression. Zinc levels may be lower in people with depression. | Lean meat, Poultry, Seafood, Milk, Whole grains, beans, seeds and nuts |
| Protein | Protein enables the body to grow and repair, but it may also help people with depression | Lean meat, Poultry, Eggs, Beans, Peas, Soy foods, Quinoa, nuts and seeds |
| Probiotics | May boost the levels of beneficial bacteria in the gut.<br><br>Healthy gut micro biota may reduce the symptoms and risk of depression | Yogurt, Kefir |

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## Chapter 2

## SELF-ESTEEM AND HAPPINESS AMONG FEMALE COLLEGE STUDENTS

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*&*

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### Abstract

The present study investigated the relationship between Self-esteem and Happiness among female College Students. 60 Female college students were selected as the participants of the study through purposive random sampling from Malappuram District. The participants were administered Rosenberg Self Esteem Scale (Morris Rosenberg 1965) and Oxford Happiness Questionnaire (Michael Argyle and Peter Hills 2002) to measure their self-esteem and happiness. The statistical techniques used to analyse the data were Pearson product moment correlation and independent sample t-test. The result shows that there is a significant negative relationship between self- esteem and happiness among female college students and there is no significant difference in self-esteem and happiness among family type.

*Keywords: Self-Esteem, Happiness, Female college students*

### Introduction

Self-esteem is an individual's subjective evaluation of their own worth. Self-esteem encompasses beliefs about oneself as well as emotional states, such as triumph, despair, pride, and shame.

Happiness is an emotional state characterized by feelings of joy, satisfaction, contentment, and fulfilment. While happiness has many different definitions, it is often described as involving positive emotions and life satisfaction.

**Self-esteem**

Self-esteem refers to a person's overall sense of his or her value or worth. It can be considered a sort of measure of how much a person "Values, approves of, appreciates, prizes, or likes him or herself" (Adler & Stewart, 2004). According to self-esteem export Morris Rosenberg (1965) self-esteem is quite simply one's attitude toward oneself. "He described it as "favourable or unfavourable attitude toward the self".

Self-esteem has been a hot topic in psychology for decades, going about as far back as psychology itself. Even Sigmund Freud, who consider as the founding father of psychology, had theories about self-esteem at the heart of his work. Most discussions of the question regarding self-esteem pay some homage to the definition offered by William James in his principles of psychology, first published in 1890: self-esteem is success divided by pretension. The elegant simplicity of this notion contains interesting implications. Self-esteem can be increased by acquiring greater success and maintained by avoiding failures, but it can also be increased by adopting less ambitious goals: 'to give up pretensions is a blessed relief as to get them gratified'( James, 1890, p.311). James's formula is also made some vital prediction that Self-esteem cannot be predicted purely from the objective level of success a person archives, what matter is that whether success of them are relevant to their aspirations.

Self-esteem is an attractive psychological construct. Because it predicts certain outcomes, such as academic achievement, happiness, Satisfaction in marriage and relationships, and criminal behaviour. Self-esteem can apply to a specific attributes or globally. Psychologists usually regard self-esteem as an enduring personality characteristics (trait self-esteem) , through normal, short-term variations (state self-esteem) also exist. Synonyms or near -synonyms of self-esteem include: self-worth, self-regard, self-respect and self-integrity. It is a controversial term between academics due to some believing that the concept does not exist and is better measured by extraversion and introversion trait levels.

Many early theories suggested that Self-esteem is a basic human need or motivation. American psychologist Abraham Maslow included self-esteem in his hierarchy of human needs. He described two different forms of "esteem": the need for respect from others in the form of recognition, success and admiration, and the need for self-respect in the form of self-love, self-confidence, skill, or aptitude. Respect from other people was believed to be more fragile and

easily lost than inner self-esteem. According to Maslow, without the fulfilment of the Self-esteem need, individuals will be driven to seek it and unable to develop and obtain self-actualisation. Modern theories of Self-esteem explore the reasons humans are motivated to maintain a huge regard for themselves. Sociometer theory maintains that self-esteem evolved to check one's level of status and acceptance in one's social group. According to Terror Management Theory, self-esteem serves a protective function and reduces anxiety about life and death. Carl Rogers believed in the importance of giving unconditional acceptance to a client and when this was done it could improve the client's self-esteem. In his therapy sessions with clients, he offered positive regard no matter what.

**Happiness**

The term happiness is used in the context of mental or emotional states, including positive or pleasant emotion ranging from contentment to increase joy. It is also used in the context of life satisfaction, subjective well-being, eudemonia, flourishing and well-being. Since the 1960's, happiness research has been conducted in a wide variety of scientific disciplines, including gerontology, social psychology and positive Psychology, clinical psychology ,clinical and medical research and happiness economics.

Happiness in psychology a state of emotional well-being which a person experiences either in an arrow sense, when good things happen in a specific moment, or more broadly, as a positive evaluation of one's own life and accomplishments overall – that is, subjective well-being .Happiness can be distinguished both from negative emotions (such as sadness, fear, and anger) and also from other positive emotions (like affection, excitement and interest). This emotion often co-occur with a specific facial expressions: the smile.

Happiness has been the topic of discussion and debate since the ancient Greek times. Hedonism has a long history (Ryan & Desi, 2001). Science has looked closely at happiness as 'hedonically' defined-or in other words happiness is the outcome of the pursuit of pleasure over pain (Ryan & Desi, 2001).

Human beings want to be happy and Satisfied with their lives. After decades of research on the nature, causes, and effects of happiness, more social psychologists agree that our subjective well-being involves four basic components (Diener, 2001): Global life satisfaction –

feeling generally satisfied or happy with our lives, Satisfaction with important life domains-being satisfied with our work , relationships, and family, Positive feelings -experiencing positive emotions and moods often and Negative feelings – experiencing negative emotions less often than positive ones, or Preferably, rarely.

In short, happiness with our lives seems to consist of multiple, interrelated factors. To the degree these factors are present in our lives, they strongly influences how happy we are and extent to which we see our lives as meaningful and fulfilling.

College students are on their stressful young adulthood stage of life. They need to take responsibilities in their life and also need to pursue their dreams by continuing study. Female college students would go through many issues such as marriage pressure, dislikes from the society and if they are married, adjusting married life. So in order to keep the study they need to increase their self-esteem. For them it is also necessary to be happy in their college life as well as daily life in order to promote a healthy lifestyle and achieving their goals. So through these research we analysed that how much important is Self-esteem and happiness in a female college student for a successful life.

Previously there have been studies in the topic of self-esteem and happiness. Durmus Ümmet (2015) conducted a study on the topic self-esteem among college students: A study of Satisfaction of Basic Psychological needs and some variable. It was found that the satisfaction of autonomy and relatedness needs of the students significantly predicted their self-esteem, while the satisfaction of competence did not predict self-esteem. Also self-esteem of the students showed significant differences as to educational level of mother, income level and perceived parent attitudes by them, a whereas educational level of father and gender did not have effect on self-esteem. Arshad, Zaidi and Mahmood (2015) were conducted a study on Self-esteem cad Academic Performance among University Students, after arising of several behavioural and educational problems. It was found that there was a significant relationship (r=0.879, P<0.1) between self-esteem and academic performance. Moreover a significant difference was found between male and female students on self-esteem and academic Performance sores, which indicate that female students have high scores on academic performance as compared to male students and male students have high scores on self-esteem as compared to female students. Prompted significant increase in State hope and happiness, commending grateful remembering as

a practice that can bolster present happiness and hope for the future. Oley, Medredev and Lan (2018) studied on exploring constructs of well-being, happiness and quality of life. The results show high positive correlations between happiness, Psychological and health domains of quality of life, life Satisfaction, and positive affect. Social and environmental domains of quality of life were poor prediction of happiness and subjective well-being after controlling for psychological quality of life. The results revealed that happiness and self-esteem, while highly correlated (r=0.58) presented unique patterns of relations with the other measured variables.

**Method**

The present study is based on quantitative research. A self-administered questionnaire survey was done to assess significant relationship between self-esteem and happiness among female college students. The independent variable and dependent variable of the study was self-esteem and happiness respectively. Objectives of the study was To study the relationship between self-esteem and Happiness among female college students, To compare self-esteem among family type and to compare happiness among family type. Hypotheses of the study was,

H1: There is a significant relationship between Self-esteem and happiness among female college students,

H2: There is significant difference in self-esteem among family type.

H3: There is significant differences in Happiness among family type.

**Participants**

60 college Students (female) from Malappuram district, Kerala state. Including 1$^{st}$ year, 2$^{nd}$ year and 3$^{rd}$ year Students were considered as the participants for the study. Purposive random sampling, is used for sample Selection. It means the process of identifying a population of interest and developing a systematic way of selecting cases that is not based on advances knowledge of how the outcome would appear.

In the present study, made use of three instruments, personal date schedule to collect personal data of the participants or for collecting demographic details and another two scales are used. They are, Scale by Morris Rosenberg (1965) and scale by Michael Argyle and peter Hills (2002).

**Procedure**

The topic for the study was selected under guidance of the expert. Rapport was established with the participants and then the purpose of study was explained. After their concerns got, the questionnaire containing personal data schedule and scale for measuring self-esteem and happiness were give. The Participants were assured about the confidentiality and the information collected will only use for research purpose. Investigator gave proper instruction to the participants for collecting data.

Statistical techniques used in this study were Pearson product moment correlation and Independent sample t-test to find out the significance level of data through SPSS.

**Result and discussion**

This chapter deals with the result and discussions of the data collected.

*H1: There is a significant relationship b/w Self-esteem and Happiness among female College students.*

To verify the hypothesis Karl Pearson's product correlation test was used and result are showing in table 1.

Table 1: Correlation between self-esteem and happiness

| Variables | Self-esteem |
|-----------|-------------|
| Happiness | -0.476 ** |

   **significant at the 0.01 level

Table 1 shows the correlation coefficient between Self-esteem and Happiness is found to be --.476 which is statistically significant 0.01 level. This shows that there is a significant negative relationship between self-esteem and happiness among female College Students. So the hypothesis stating that, there is significant relationship between self-esteem and happiness among female college students is accepted.

The self-esteem and happiness are highly negatively correlated .When self-esteem increases happiness decreases and when self-esteem decreases happiness increases. It may be

due to when self-esteem increases the person have high self-worth and when they could not reach their goals and potentials, as a result their happiness may decreases and they could be unhappy.

*H2: There is significant difference in self-esteem among family type.*

To verify this hypothesis t-test is used and result is showing in Table 2.

Table 2: Mean, SD, t-value among nuclear and joint family type on self-esteem.

| Variable | Group | N | Mean | SD | t-value | Sig(2-tailed) |
|----------|-------|---|------|-----|---------|---------------|
| Self-esteem | Join(0) | 9 | 22.00 | 4.472 | -.538 | .593 |
| Self-esteem | Nuclear (1) | 51 | 22.59 | 2.722 | -.382 | .711 |

Table 2 can be seen that the mean score of self-esteem for Join family type is 22.00 and mean of self-esteem for nuclear family type is 22.59. The S.D of self-esteem of joint is 4.472 and that of nuclear is 2.722. The t-value of self-esteem for join is -.538 and for nuclear is -.382. The significant [two-tailed] value are .593 and .711.

So the hypothesis 2 stating that there is significant difference in self-esteem among family type is rejected. This shows that there is no difference in self-esteem among family-type. Self-esteem is same among joint and nuclear family type college students. Statistically differences on family type are not usually found in self-esteem. Because Self-esteem can be affected by many factors such as school, friends, and internal factors. So Family type does not affect self-esteem.

*H3: There is significant difference in happiness among family type.*

To verify this hypothesis t-test is used and result is showing in table 3.

Table 3 -Mean, S.D, t-value among nuclear and joint family type on happiness.

| Variable | Group | N | Mean | S.D | t-value | Sig(two-tailed) |
|----------|-------|---|------|-----|---------|-----------------|
| Happiness | Joint | 9 | 4.0300 | .72149 | .187 | .853 |
| Happiness | Nuclear | 51 | 3.9888 | .59011 | .162 | .875 |

Table 4.3 can be seen that the mean score of happiness for joint and Nuclear are 4.0300 and 3.9888 respectively. The S.D of Happiness for joint and Nuclear family type are ·72149 and .59011 respectively. The t-value is .187 for Joint and ·162 for nuclear. The significant (two-tailed) value is .853 and .875 for joint and nuclear family respectively.

So the hypothesis stating that there is significant difference in Happiness among family type is rejected. This show that there is no significant difference in happiness among family type. Happiness is same among joint and nuclear family type college students. Statistically significant differences on family type are not usually found in happiness. Because happiness is affected by many factors. Happiness is subjective in nature.. In many cases both family type has its own relevance. Not one is better to contribute more happiness.

**Summary and conclusion**

The findings show that there is a significant negative relationship between self-esteem and happiness. That is Self-esteem and happiness are highly negatively correlated which indicates that when self- esteem increases the happiness decreases and when the self-esteem decreases the happiness increases. The study also finds that statistically significant differences on family type are not found in self-esteem and happiness.

Many researchers found that high self-esteem leads to a happy life. Generally self-esteem has been found to be associated with happiness (e.g. Baumeister et al., 2003). However a research also found that the magnitude of the association between self-esteem and happiness can be affected by many factors. So in the present study we found a negative relation between Self-esteem and happiness. So we can understand that a person with low self-esteem can be experience happiness because of other factors. We can assume that the majority of Samples were extraverted in nature. Even though they have low self-esteems they are in positive mood in most of the time. They may be more social and outgoing, which boost their happiness but not their self-esteem. When people have high self-esteem they feel unhappy. It may be because of people

feel that they have not reached their goals or what they want even though they have high self-worth. So despite past research that shows high positive correlations of self-esteem and happiness our study gives further information's that they both can also be negatively correlated.

This study can be applied to many areas especially in case of students. That is this research can use to improve the self-esteem and happiness of Students by giving proper strategies from the research. It is also applicable among different relationships. Because self-esteem acts as a predictor of happiness and that affects play a mediating role in that relationship.

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<center>Chapter 3</center>

<center>ROMANTIC RELATIONSHIP AND STRESS AMONG ADOLESCENCE</center>

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<center>**Abstract**</center>

This present study investigated the relationship between romantic relationship and stress among adolescence. The study group was determined with the purposive random sampling method. 60 college students participated in this study. The data were collected by means of passionate love scale and perceived stress scale. The data were analysed by using Pearson correlation coefficient and t-test. The result shows that there is a significant relationship was observed between romantic relationship and stress among adolescence age group. Also there is no significant differences in romantic relationship among boys and girls.

*Key words: Romantic relationship, Stress*

**Introduction**

Adolescence is a transitional stage of physical and psychological development that generally occurs during the period from puberty to adulthood. Adolescence is usually associated with the teenage years, but is physical, psychological or cultural expressions may begin earlier and end later

Adolescence in relationships may experience or stress on a day to day basis than others. Stresses can range from lack or misinterpretation of communication, wondering if a relationship will last, losing your identity, and or concerns about infidelity. In adolescence, having a girlfriend or boyfriend can boost one's confidence. When relationships are characterized

intimacy and good communication, youth are happier with themselves. Young people value the support, trust and closeness they experience in romantic relationship.

All couples experience. Sometimes stress come from problems at work or with family or friends that we carry over into our relationship. Stress can also come from the couple's issues, such as an argument, differences in wants or needs, or feeling neglected. Social relationships are also important factor in regards to the general health of adolescence. Poor social relationship can affect their physical health habits and mental health habits. Which eventually leads to developmental problems so increase alcohol consumption, substance abuse, delinquent behaviors and mortality risk.

**Romantic relationship**

Romantic relationship is the defined as mutual, ongoing and voluntary interactions between two partners that is characterized by specific expressions of affection and intimacy. Separate couples display a conventional approach to marriage, but each partners operate autonomously.

Romance is ever where in western culture. We see it depicted in movies, television shows and advertisement. We hear it in music. We read about it in literature, fortune cookies and astrology. We even see romance in sports, when one partner proposes to another on the big screen. The image and words we are bombarded within media serve a purpose. To better understanding this propose, let's begin by exploring the changing definition of a romantic relationship.

Traditionally a specific events (that is a wedding) determined the status of a romantic relationship. Couples were referred to as premarital (If they were not married) or marital (If they were). This distinction also described well defined social norms that dictated acceptable behaviors and interactions for each type of couple. In recent years (and for many reasons), the lines regarding romantic relationships has blurred.

A romantic relationship is defined as mutual, ongoing and voluntary interactions between two partners that is characterized by specific expressions of affection and intimacy (Collins, et al., 2009). This definition reflects contemporary ideas about romantic relationships. For example,

marital status and partner gender is ambiguous. Instead this definition focuses on interactions (if, mutual, ongoing and voluntary) and expressions (that is, affection and intimacy).

**Factors influencing relationship formation success.**

Many factors influence the ways we form romantic relationships and the reasons behind these formations. Segrin and Flora (2019) point to factors such as upbringing, values, attractiveness and interaction patterns,

- Being Taken for Granted

    When we start to date someone special, our focus is on that person and building the relationship. It can be one of the most joyous and happy times of our lives. As time passes through, we can start to take our partners for granted assuming that they will always be around and doing the things that they have always done in the relationship. This can be the start of a destructive pattern as one person may start to feed resentful that their contribution to the relationship is not being recognized or supported by the other person.

- Communication problem

    In the beginning, we listen with eagerness to everything the other person tells us, we laugh at every in joke or anecdote and file away our minds every experience or story that we learn about their life. But, after a while, we start to tune out little as we hear repeated stories or comments. This can affect the way that we communicate with our partners by not listening to what they are saying. Poor communication causes frustration and friction in relationships.

- Intimacy

    At the start of the relationship, the two of you couldn't keep your hands of each other and the chemistry sizzled. Now, with two small children, you barely have time to greet each other in the mornings or the energy to stay awake past their bedtime. When intimacy is lacking, the relationship between the couple can often be as strained as one partner may feel that the other partner is no longer providing them with the love and reassurance that they experience at the start.

- Time poor

When you were younger and in love and didn't have a mortgage and family, you could spend hours together browsing flea markets, going to the beach and dining out. It seems that with both of you working, being parents and trying to keep up with friends and family members, as well as participating in the local football club and the school p and c- there is never any time for just the two of you. When you are both stretched and involved with other activities, a couple can often feel the strain.

- Family interference

When we become a couple, we often feel that it is just the two of us but not fair in to the relationship, we discover that our families are part of it as well. Family members can mean well but may actually end up interfering in the choices a couple make unwanted advice, although given with the best intentions, can cause problems for a couple. This can result in external pressure on the relationship and could generate a few arguments between the couple and or the other family members.

**Triangular theory of love**

The triangular theory of love explains the topic of love in an interpersonal relationship. Psychologist Robert Sternberg's theory describes types of love based on three different scales: Intimacy, passion and commitment

- Intimacy – Which encompasses feelings of attachment, closeness, connectedness and bondedness.
- Passion – Which encomposes drives connected to both limerence and sexual attraction
- Commitment – which encomposes, in the short term, the decision to remain with another, and in ling term, plans made with that other.

It is important to recognize that a relationship based on a single element is less likely to survive than one based on two or more. Different stages and types of love can be explained as different combinations of three elements. For example, the relative emphasis of each component change over time as an adult romantic relationship develops.

- Liking in this case is not used in a trivial sense. Sterberg says that this intimate liking characterizes true friendship, in which a person feels a bondedness, a warmth and a closeness with another but not intense passion or long term commitment.

- Infatuated love is often what is felt "Love at first sight". But without the intimacy and the commitment components of love, infatuated love may disappear suddenly.

- Empty love: Sometimes a stronger love deteriorates in to empty love, in which the commitment remains, but the intimacy and passion have died, in cultures in which arranged marriages are common, relationships often begin as empty love.

- Romantic love: Romantic loves are bonded emotionally (as in liking) and physically through passionate arousal

- Companionate love is often found in marriages in which the passion has gone out of the relationship, but a deep affection and commitment remain. Companionate love is generally a personal relationship you build with somebody you share your life with, but with no sexual or physical desire it is stronger than friendship because of the extra element of commitment. The love ideally shared between family members is a form of companionate love, as is the love between deep friends or those who spend a lot of time together in any a sexual but friendly relationship.

- Fatuous love can be exemplified by a whirlwind courtship and marriage in which a commitment is motivated largely by passion without the stabilizing influence of intimacy.

- Consummate love is the complete form of love, representing the idea relationship toward which many people strive but which apparently few achieve. Sternberg cautions that maintaining a consummate love may be even harder than achieving it. He stresses the importance of translating the components of love into action, "Without expression" he warns, "even the greatest of loves can be die" (1987, P.341) consummate love may not be permanent. For example, if passion is lost overtime, it may change companionate love.

The balance among Sternberg's three aspects of love is likely to shift through the cause of a relationship. A strong dose of all three components found in consummate love typifies, for many of us, an ideal relationship. However time alone does not cause intimacy, passion and commitment to occur and grow. Knowing about these components of love may help couples avoid pitfall in their relationship, work on the areas that need improvement or help them recognize when it might be time for a relationship to come to an end.

**Stress**

According to WHO stress can be defined as any type of change that cause physical, emotional or psychological strain. The term "stress", as it is currently used was coined by Hans Selye in 1936, who defined it as "the non-specific response of the body to any demand for change".

Stress is a feeling of emotional or physical tension. It come from any event or thought that makes you feel frustrated angry, or nervous. Stress is your body's reaction to a challenge or demand. In short bursts, stress can be positive, such as when it helps you avoid danger or meet a deadline. But when stress lasts for a long time, it may harm your health.

There are two main types of stress:

- **Acute Stress:** This is a short term stress that goes away quickly. You feel it when you slam on the brakes, have a fight with your partner, or ski down a steep slop. It helps you manage dangerous situations. It also occurs when you do something new or exciting. All people have acute stress at one time or another.
- **Chronic Stress:** This is stress that lasts for a longer period of time. You may have chronic stress if you have money problems, an unhappy marriage, or trouble at work. Any type of stress that goes on for weeks or months is chronic stress that you didn't realize it is a problem. If you don't find ways to manage stress, it may lead to health problems. When you have chronic stress your body stays alert, even though there is no danger overtime. This puts you at risk for health including,

**Symptoms of chronic stress**
- High blood pressure
- Heart disease
- Diabetes
- Obesity
- Depression or anxiety
- Skin problems like acne or eczema
- Menstrual problem

**Theoretical contribution to stress**
- Fight or flight response:

The earliest contribution to stress research was Walter Cannon's (1932) description of the fight or flight response. Cannon proposed that when an organism perceives a threat, the body is rapidly aroused and motivated via the sympathetic nervous system and the endocrine system. This concentrate physiological response mobilizes the organism to attack the threat or to flee, hence it is called fight or fight response. Fight refers to aggressive responses to stress, such as getting angry or taking action etc.

- Selye's General adaptation syndrome:

Hans Selye work on the general adaptation syndrome. Selye exposed rats to a variety of stressors, such as extreme cold and fatigue, and observed their physiological response. All of them produced the same pattern of physiological change. They all led to an enlarged adrenal cortex, shrink thymus and lymph gland, and ulceration of the stomach and duodenum. From these observation, Selye (1956) developed the general adaptation syndrome. He argued that when a person confronts a stress or, it mobilizes itself for action. Then person will respond with the same physiological pattern of reactions. The general adaptation syndrome consist of 3 phases. Alarm phase, Resistance phase and exhaustion phase.

- Tend-be-friend.

S.E. Taylor and colleagues developed the Tend be friend. Theory maintains that, in addition to fight or flight people and animals respond to stress with social affiliation and nurturing behavior toward off spring. These response to stress may be especially true of women.

Tend be friend is a behavior exhibited by some animals, including humans, in response to threat. It refers to protection of offspring (tending) and seeking out their social group for mutual defense (be friending)

**Need and significance of the study**

This study is conducted to identify how romantic relationship and stress effect on the adolescence. This study is important in these days because romantic relationships as well as stress of the adolescence are increasing day by day. Adolescent romantic relationships are important. As well as aiding identity development, adolescent romantic relationships - both short term and long term – can provide positive learning experience about the self, for example through influencing self-esteem and beliefs about attractiveness and self-worth, and raising status

in the peer group stress can negatively impact on relationships. Often people keep their stress to themselves, which makes it difficult for their partners to understand what they are going through and to provide support. So in this study let us try to explore how much romantic relationships are affected by the stress.

**Key terms**

- Romantic relationship
- Stress

**Method**

The procedure pertaining to the present study romantic relationship and stress among adolescents.

Methodology has its own importance in scientific investigation because objectively in many research investigation cannot be obtained unless it's carried out in a very systematic way and planned manner. This chapter deals with the approach and way this research has been conducted. It maps the methods and materials utilized for this research.

**Objectives**

The present study has a set of following objectives:

- To examine the relation between romantic relationship and stress among adolescents.
- To examine how romantic relationship effect on adolescent age
- To examine how stress effect among adolescent use group.

**Hypothesis**

The present study has a set of following hypothesis:

- **H1**: There is a significant relationship between romantic relationship and stress among adolescent use groups.
- **H2**: There is a significant difference in romantic relationship among boys and girls

**Research design**

Correlation analysis is used in this study.

A sample of 60 adolescents are taken. The data was collected from college students and non-college students.

- **Inclusion criteria:**

    Subjects who are adolescent

- **Exclusion criteria:**

    Subjects who are not married

## Measures

Only questionnaire measure were used in the present study. All measures employed are widely used ones in psychological research, with well-established psychometric properties.

## Tools

## Passionate love scale

Passionate love scale was develop   by Hatfield and Walster (1978). The passionate love scale has 30 items. The instrument is designed to measure an individual's level of passionate love toward another person. The scale usually require 30 minutes of respondents time where respondent answer on passionate love scale.. The questions are open to interpretation making this scale suitable for adolescents with a range of background. A series of studies indicated that PLs is highly reliable, coefficient of alpha was 0.94 for 30 item version. The construct validity of passionate love scale is reveals that, this has excellent internal consistency and correlation. The validity of PLS is 0. 53.

## Scoring

For the passionate scale, the possible responses to each item ranged from

1   2   3   4   5   6   7   8   9

The individual items are simply summed to produce a total score. The interpretation are

- 106-135 point = Wildly, even recklessly in love
- 86-105 point = Passionate, but less intense
- 66-85 point = Occasional bursts of passion
- 45-65 point =  Tepid, infrequent passion

- 15-44 point = The thrill is gone

**Perceived stress scale**

Perceived stress scale was developed by Cohen et al. (1983). The perceived stress scale is a 10 item questionnaire it is widely used to assess stress levels in young people and adults. It evaluate the degree to which an individual, has perceived life as unpredictable, uncontrollable and overloading over the previous month. Internal consistency reliability for perceived stress scale is alpha 0.82. The convergent validity of perceived stress scale is 0.64

**Scoring**

For Perceived stress scale, firstly reverse score for questions 4, 5, 7&8. On these 4 questions, change the scale like this 0=4, 1=3, 2=2, 3=1, 4=0. Then add scores for each item to get a total score. Individual scores on the perceived stress scale can range from 0 to 40 with higher scores indicating higher perceived stress.

Interpretation of perceived stress scale are

- Score ranging from 0-13 would be considered low stress
- Scores ranging from 14-26 would be considered moderate stress.
- Score ranging from 27-40 would be considered high perceived stress

**Procedure**

The researcher went to the various colleges in Manjeri and Perinthalmanna. The permission to conduct the study was obtained from the college and concerned departments. The details of instruction were printed in the first page of each scale. The participants were asked to read the instruction carefully given on the top of each scale. A concern form was also given with scale. The data was collected through direct method giving the questionnaire directly to the subject. After having collected the data, it was tabulated very carefully for analyzing the data. So that the result can be interpreted and briefly communicated in the comprehensive manner. Descriptive statistics and crobachs alpha for each scale were also determined.

**Statistical analysis done in the study**

**Pearson correlation coefficient**

A coefficient of correlation is simple index represent the relation between two variable can be computed in the different ways depending on the nature of data. The standard kind of correlation coefficient of correlation and one of the most computed is Pearson product moment coefficient (Pearson). Generally the value of a vary from the value of +1 which indicate perfect positive correlation (ie, x increases y also increase). Although zero indicate the complete independence or on correlation whatever and down to -1.00 means perfect negative correlation. (ie, x increase, y is decrease). If two variable correlate with each other there is a reason to believe in the existence of common relationship development be interfered from this information alone. Additional criteria would be required.

**T-test**

A t test is a statistical test that is used to compare the means of two groups. It is often used in hypothesis testing to determine whether a process or treatment actually has an effect on the population of interest, or whether two groups are different from one another. A t test is appropriate when the collected sample is small, random sample from some statistical "population" and want to compare the mean from your samples to another value. The value for comparison could be a fixed value. (eg:10) or the mean of a second samples The t value is the score obtained when you perform t-test. It represents the difference between the mean or average scores of two groups, while taking into account any variation in scores.

**Result and discussion**

In a design report, the results and discussion involve an evaluation of the research design or method used. In a feasibility or case study, the results and discussion section would involve the feasibility or evaluating the success of one or more solutions. The scale used in this study is passionate love scale and perceived stress scale.

The study on romantic relationship and stress among adolescence conducted among the adolescent boys and girls in Malappuram district. The sample was collected from 60 college students. The scales used in this study are passionate love scale and perceived stress scale. The passionate love scale was developed by Hatfied and Walster in (1978) and it consist of 30 items. The perceived stress scale is a 10 item questionnaire originally developed by Cohen et al. (1983).

Table-1 Demographic variables

| Demographic factors | | Number | Percentage |
|---|---|---|---|
| Gender | Male | 31 | 51.667 |
| | Female | 29 | 48.33 |
| Age | 15-21 | 60 | 100 |

Table-1 shows the demographic variables of the present study. This study is conducted among 60 college students. The selected samples are currently pursuing graduation in different colleges at Manjeri and Perinthalmanna. The sample contain a total of 31 males and 29 female. The corresponding percentage of males is 51.667 and that of females is 48.333 respectively.

Table-2 the correlation between romantic relationship and stress.

| | | Romantic relationship |
|---|---|---|
| | Pearson correlation | 0.280* |
| Stress | Significance (2-tailed) | 0.030 |
| | N | 60 |

 * Correlation is significant at the 0.05 level (at 2-tailed)

Table-2 shows the correlation between romantic relationship and stress among adolescence. The Pearson correlation co-efficient of romantic relationship and stress is +0.280 at 0.05 level significance. It means that there is a positive correlation existing between these variable. Hence if the romantic relationship is increasing the level of stress also increase. Likewise if the romantic relationship is decreasing, the stress level is also decreasing among adolescent age group. There for, the hypothesis there is a significant relationship between romantic relationship and stress among adolescence is accepted. Hence the factors influencing on romantic relationship formation may affect in the success of the relationship.

There is a significant relation between romantic relationship and stress. The romantic relationship provides an opportunity learning how to maintain intimacy, relationship and build positive self-concept. As well as aiding identity development, adolescent romantic relationship-both short- term and long term- can provide positive learning experience about the self. For example through influencing self-esteem and beliefs about attractiveness and self-worth, and rising status in the peer group.

There is a study on the topic the 'influence of adolescent's romantic relationship on individual development 'conducted by Jin Honghao et. al in 2021. The study analyzes the effect of adolescent's romantic behavior on individual development. The result shows that adolescents, romance distracts adolescent's academic attention and lower academic performance. Hence the stress is increasing. Likewise in the normal life of adolescence, the romantic relationships always leads to more stressful situations. It affect academics, work, family environment, healthy social interactions. In extreme cases may leads to toxic relationships and greater consequences.

Table-3 mean, t value, and significance (2-tailed)

|  | Gender | N | Mean | t-value | Significance 2-tail |
|---|---|---|---|---|---|
| Score in | 1 | 31 | 180.68 | -0.422 | 0.674 |
| Romantic | 2 | 29 | 174.76 | -0.422 | 0.675 |
| relationship |  |  |  |  |  |

Table-3 shows the mean, t value and level of significance. The mean of score of romantic relationship of males is 180.68 and that of females is 174.76. The corresponding t-value is -0.422 and -0.422 respectively. The level of significance of boys is 0.674 and girls is 0.675 respectively. In this study the t value is negative. Hence there is no significant difference in romantic relationship among boys and girls. So the hypothesis there is a significant difference in romantic relationship among boys and girls is rejected.

In this study we found that there is no significant difference in romantic relationship among boys and girls. Generally boys are more focused on passion and fun in the relationship than girls are. Girls tend to be more focused on keeping it light and fun.Here this study contradict with these general assumptions.

I can't find any other study to support the present study. Here, it is clear that there is no significant difference in romantic relationship among boys and girls. It is because that, now a days the adolescent aged girls and boys are try to overcome their comfort zone. As result these aged girls and boys express their romantic relation with their opposite sex. When compare the current adolescent age group with a 10 years back adolescent age group, we can see so many

differences. The present adolescents always feel free to ask anything and everything at anywhere, irrespective of their status and prestige. They have no limits to express their emotions with others. They just want to express what is come to their mind. So, this study got such an outcome.

**Summary and conclusion**

The study on romantic relationship and stress among adolescence was conducted with the following objectives:

- To examine the relation between romantic relationship and stress among adolescents.
- To examine how romantic relationship effect on adolescent age
- To examine how stress effect among adolescent age group.

The study was conducted among college students in Malappuram district. 60 college students were selected by convenient sampling. The study was carried out by using passionate love scale by Hatfield & Walster (1978) and Perceived stress scale by Cohen et al (1983). The age of the sample ranged from 15-21 years. Passionate love scale was used to assess the level of romantic relationship and Perceived stress scale was used to assess the level of stress.

**Conclusion**

- Very significant relation was observed between romantic relationship and stress among adolescenceage group. There for, the hypothesis "There is a significant relationship between romantic relationship and stress among adolescentage group" is accepted.
- Very low level difference was observed in romantic relationship between boys and girls. Therefore the hypothesis "There is a significant difference in romantic relationship among boys and girls" is rejected.

**Limitations**

- The data collection was done in few colleges in Malappuram district and the result may vary in other parts of the district.
- The sample size was too small.
- The period of research study was short.
- The interest of the subjects was very low. So, the responses given by the respondent may not fully accurate.

**Recommendation**

- Premarital counseling sessions can be conducted in order to maintain good romantic relationship between partners.
- We can conduct yoga and meditation to minimize the stress of adolescents.

**Suggestion for further research**

- Google forms can be used for more easier date collection
- The study might be conducted in different districts for comparison purpose.

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## Chapter 4

## LONELINESS AND LIFE ORIENTATION AMON OLDER ADULTS

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### Abstract

The present study aimed to examine the relationship of loneliness and life orientation among older adults. Many older people can experience loneliness due to living alone or lack of close family relationship. This increased loneliness can lead to negative life orientation. A total of 60 participants were used for the study that are above 60 ages. The tools used for the present study were life orientation scale-revised (Scheier, 1994) and revised UCLA loneliness scale (Russell, 1996). Statistical techniques used were Pearson product moment correlation and T-test. The results of the study revealed that there is correlation between loneliness and life orientation. The current study also found that there is a significant negative correlation between loneliness and life orientation among older adults.

*Key words: loneliness, life orientation, older adults*

### Introduction

The term "older adults" is used in the field of social sciences to describe such individuals who are 65 years and older and is a preferred term by social scientists to describe the elderly. The previously used word, i.e., "elderly" had a connotation with being white-haired and physically frail. Since many individuals aged 65 and older do not have grey hair and have an

exceptionally healthy lifestyle, the term "older adult" has a more positive connotation and is therefore used to refer to individuals belonging to this age group. Additionally, the World Health Organization (2001) has defined older adults as individuals who are 60 years and older.

The study of the perceived elderly population is large and growing due to advancement of health care education. These people are faced with numerous physical, psychological and social role changes that challenge their sense of self and capacity to live happily. Many people experience loneliness and depression in old age, either as a result of living alone, or due to lack of close family ties and reduced connections with their cultures of origin. This results as an inability to actively participate in the community activities and that they find it more difficult to initiate new friendships and to belong to new networks. The present study is planned to investigate the effect and relationships among subjective well-being, loneliness and social support in elderly people.

## 1. Loneliness

Loneliness is a state of mind as people can live rather solitary lives and not feel lonely, or they can have many social relationships and still feel lonely. Loneliness has also been described as the distress due to the inconsistency between ideal and perceived relationships, which, in turn, has a great impact on health and the quality of life. Persistent loneliness is detrimental to the well-being of an individual. Loneliness is found to be a precursor to psychological disorders, mental health problems, depression, and even suicide.

Based on the definition that loneliness is a perceived discrepancy between the quality and quantity of relationships that people *have* versus those that they *want* (e.g., de Jong Gierveld, 1987; Peplau & Caldwell, 1978; Perlman, 2004), it follows that changes to people's actual and/or desired relationships could cause changes in loneliness (Dykstra, van Tilburg, & de Jong Gierveld, 2005). For example, Dykstra et al. (2005) posited that as people age, they may gain or lose friends and partners as well as opportunities to socialize due to changes in health. At the same time, older people might experience drops in desire for relationships or an increase in the quality of relationships. Aartsen and Jylha (2011) discussed loneliness being caused by losses or gains in personal resources (e.g., health) or social resources (e.g., social activity).

A substantial body of research has linked loneliness to low self-esteem, depression, and physical illness (Hawkley & Cacioppo, 2007; Sorkin, Rook, & Lu, 2002). Risk factors for

loneliness increase with advanced age (Dykstra, 2009; Pinquart & Sörensen, 2001), as relationship losses mount due to the death, poor health, or residential relocation of close social network members and as opportunities for socializing become restricted due to declines in older adults' own health and mobility (Drennan et al., 2008; Rook, 2000). Such findings underscore the importance of efforts to understand the nature of loneliness and the kinds of relationship experiences that give rise to loneliness in later life. In late adulthood, loneliness is associated with sex, marital status, having a migration background, household composition, income and education level, self-reported health, functional status, mental health, volunteering, informal care giving, having a local support network, and the quality of social relationships (Carr et al., 2018; Cohen-Mansfield et al., 2016;).

**Types of loneliness some**

Important types of loneliness are given below:

1) Interpersonal Loneliness:

Interpersonal loneliness occurs when a person loss a very close person with whom he remained attach. This loss can be in the form of temporary separation or in the form of permanent separation (Buswell, 2013).

2) Social Loneliness:

Social loneliness arises when a person is disqualified or rejected by a group due to a number of reasons which creates a sense of being rejected, unworthy and lonely (Buswell, 2013).

3) Intellectual Loneliness:

Intellectual loneliness occurs when a person is not equal in education or educationally lowers than his friends or peer group. It can also be occurred when a person feels incompetent among his siblings and starts feeling him intellectually low (Buswell, 2013).

4) Psychological Loneliness:

Psychological loneliness is different from other types. It occurs when a person experiences a traumatic event in his life and after that event the person starts feeling himself

different from others and considers that he is the only one who experienced this. It separates him from others and this state is not understandable because it is internal state (Buswell, 2013).

5) Existential or Cosmic Loneliness:

Existential or cosmic loneliness is related to death. When a person is near to death due to chronic disease or a person face the death of loved one, it creates a sense of loneliness in this person. The fear of being dead or loss someone socially isolates that person who experienced it (Buswell, 2013).

**Theories of loneliness**

One theory of loneliness posits that perceived social isolation is tantamount to feeling unsafe, and this sets off implicit hyper vigilance for (additional) social threat in the environment. Unconscious surveillance for social threat produces cognitive biases: relative to non-lonely people, lonely individuals see the social world as a more threatening place, expect more negative social interactions, and remember more negative social information. Negative social expectations tend to elicit behaviors from others that confirm the lonely persons' expectations, thereby setting in motion a self-fulfilling prophecy in which lonely people actively distance themselves from would-be social partners even as they believe that the cause of the social distance is attributable to others and is beyond their own control This self-reinforcing loneliness loop is accompanied by feelings of hostility, stress, pessimism, anxiety, and low selfesteem and represents a dispositional tendency that activates neurobiological and behavioral mechanisms that contribute to adverse health outcomes (Cacioppo et al., 2006). Some other theories of loneliness are as follows:

1) Psychodynamic Models:

A psychodynamic understanding of loneliness is based on the infant's attachment to the mother. Through this attachment the child experiences emotional bonds and how to connect with others, but also the feeling of loneliness when significant others are out of sight. Loneliness, which is the exceedingly unpleasant experience connected with inadequate discharge of the need for human intimacy, for interpersonal intimacy. It begins in infancy with an integrating tendency that we only know by inference from pathology material late, a need for contact with the living (Sullivan, 1955).

2) Roger's Phenomenological Perspective:

Roger (1961) explains loneliness in the context of his "self-theory". He explains that loneliness occurs when a person thought that his real self is unloved or rejected from society. These thoughts and fear keep peoples to have an empty sense of self and to be locked in their loneliness. (Roger, 1961).

3) The Interactionist View:

An Interactionist approach is based on loneliness being multidimensional, meaning that there are different kinds of loneliness, including emotional- and social loneliness. Loneliness is caused not by being alone but by being without some definite needed relationship or set of relations… In many instances it is a response to the absence of provision of a close, indeed intimate, attachment. It also may be a response to the absence of the provision of a meaningful friendship, collegial relationship, or other linkage to a coherent community (Weiss, 1973).

4) General System Theory:

General system theory says that loneliness is the feedback of our internal mechanism for making optimal social contacts that is useful for the well being of society and individual (Flader, 1982).

5) Discrepancy Model of Loneliness:

Perlman and Paplau in 1998 developed discrepancy model of loneliness. Although the experience of loneliness is different for each individual but common elements in loneliness can be identified. Figure 1 presents a model for understanding loneliness and the phenomena associated with it. Central to this discrepancy model is the idea that loneliness occurs when there is a significant mismatch between a person's actual social relationships and his or her needed or desired social relations. A man who longs to be married but who is still single will feel lonely. Loneliness theorists differ in how they conceptualize the nature of this discrepancy.

**Factors contributing to loneliness**

Cicioppo and Patrick describe (2008) factors of loneliness and it help to understand because feelings of lonely people are combination of three factors.

1) Vulnerability:

A human being has many instincts and has a different genetic inclination for certain things. Like every person has different standard and need for social connection. Some people are more social than others. If a person has high tendency for social connection, there are many difficulties to fulfil that need which results into loneliness (Ciccioppo & Patrick, 2008).

2)  Ability to Regulate the Emotions Associated with Feelings of Isolation:

Everyone has an innate need for social connection, if that need remain unfulfilled; it causes distress to person. The person starts to remain alone, remain detach from social gatherings. If this isolation continues for long time, it becomes a cause of upset mood for the person who is experiencing it. Then this constant sad mood leaves negative impact on person and he became unable to access correctly other people concerns for him. The person perceives other people are distant from him and they do not care for him. But it is only because of his wrong perception (Ciccioppo & Patrick, 2008).

3)  Mental Representations as Well as Expectation and Reasoning about Others:

It does not mean that the person who is feeling lonely has lack of social skills. But when a person feels lonely, this feeling stops him to use that skill. He perceives that he is unable to start or maintain relationships as well as what he doing for others is useless and other are not responding his efforts. This causes frustration in him and result in low mood. He started blaming himself or others if someone disapproves his act (Ciccioppo & Patrick, 2008).

**Life orientation**

Life Orientation Life orientation defines as the tendency to view and interpret the events in life in positive or negative terms. In other words, it stands for an individual's disposition and learned responses to exhibit an optimistic or pessimistic approach towards life. Research has shown that life orientation can be better understood in relevance to dispositional optimism. It is viewed as the positive psychology construct that is inborn and contributes towards the well-being and psycho-social functioning of individuals (Monzani, Steca & Greco, 2014; Vecchoine, Alessandri, Caprara & Tisak, 2014). It has also been found that life orientation encompasses social support, optimism and life satisfaction. It is critical to note that life orientation of an individual has a considerable amount of impact on the psychological well-being and life satisfaction among individuals. Another definition of life orientation is that it is the explanatory

style (positive vs. negative) that an individual uses in relevance to the different areas of life. Apart from these definitions, life orientation has been studied in relation to the attribution styles of individuals which can be internal or external (Monzani, Steca & Greco, 2014; Vecchoine, Alessandri, Caprara & Tisak, 2014).

An individual's overall outlook about life and perception regarding different events, fortunes and misfortunes of life is termed as life orientation. Optimistic individuals have positive outlook about perceptions regarding their life. Individuals experiencing positive life orientation tend to be happier, contended and physically and psychologically healthy while the individuals with negative life orientation experience tough, stressful, perplexing and less contented life (Dean, 2011).

The empirical evidences prove that optimistic people are happier, strong and more contented than pessimistic individuals. Optimistic individuals are characterized problematic life events as temporary, situational, limited in its effects and not entirely their fault. Pessimistic individuals consider the problematic life events as rather permanent, difficult to overcome (Khan, 2006).

Optimism is a generalized positive expectation for occurrence of good things in almost all cases (Seligman, 2007). Scheier and Carver (1992) describe optimism as tendency of expecting the best. According to Turkum (2001), optimism is the basic tendency for perceiving positive rather than negative cases. Optimism is evaluated as an important way for having positive feelings for life, high morale, determination, effective problem solving, academic, military and vocational success, being popular, healthy long life, and getting rid of depression and trauma (Seligman, 2007).

**Types of life orientation**

There are two types of life orientation i.e., optimism and pessimism.

1) Optimism:

Optimism has been defined as hopeful cognitive pattern characterized by the anticipation of achieving positive outcome (Scheier & Carver, 1985). They tend to expect positive and healthy future despite problems in present life. They tend to use positive explanatory style for previous life events. They believe that they are responsible for leading appositive life in present

and in future. They Aram high and tend to respond appropriately at positive outcomes (Dean, 2011). Khan (2006) stated that optimism has a strong relationship with other positive qualities and aspects of life. Optimists tend to experience higher well-being, resilience, positive emotions, healthy and adaptive stress management, achievements, adjustment and physical healthy. Their coping with trauma leads to positive and healthy outcomes and they experience more positive emotions afterwards. Optimistic people experience less health issues. The rate of heart and cardiovascular issues is lower in such people.

2) Pessimism

Second type of life orientation is pessimism. Pessimistic individuals tend to generally think of negative outcomes and perceived present problematic situation in a negative way (Scheier & Carver,1985). Their negative thinking madness healthy coping and stop them from actively engaging in actions that yield positive results (Khan, 2006). They are higher risk of developing chronic illnesses and mortality rate is also higher in pessimists. According to previous alliterative hypertension, anxiety and depressive symptoms are common in such people (Dean, 2011).

Characteristics of Optimistic Individuals:

Optimists are thankful for the blessings they already have. According to Alan Loy McGinnis tough-minded optimists usually predict outcomes in positive way tend to find out constructive solutions to the problems which lead to positive outcomes. They 'control their future and fate'. Even during the darkest hour, they cannot stop imagining success. They explore themselves and believe in self- actualization and tend to reach their maximum level of potential. Optimists believe in love. They are more likely to accept what cannot be changed rather than falling in denial (Trathen, 2015).

Characteristics of Pessimistic Individuals:

Pessimistic tend to be less happy despite having less troublesome life. They always find mistakes and negativity in different things. They do not even ignore minor mistakes and also cannot speak about their problems. Future apprehensions regarding health and fear of being sick make it difficult for them to enjoy their present status of health. They always expect that bad

would happen. They even believe that good will always happen with an aversive outcome. They are less thankful for what they have got and often complain about the poor past (Trathen, 2015).

**Life orientation theories**

There are few life orientation theories which are discussed below:

1) Relational Regulatory Theory of Interpersonal Support:

This theory has been designed to assess the perceived effects of social support and mental health for never married individuals and also for those individuals who have been abandoned by their families. It has been found that perceived social and interpersonal support has direct effects on the mental health of individuals who are never married (Monzani, Steca & Greco, 2014; Vecchoine, Alessandri, Caprara & Tisak, 2014). In this regard, some findings have shown that never married individuals might indicate problems in becoming linked with another person. It might be due to their disruptive attachment styles during childhood, due to lack of availability of a proper partner, due to financial and social constraints etc. It is important to note that loneliness is a depressive and aversive state that results from the inability of becoming connected with someone else and due to the unfulfilled needs of being close to someone or as a consequence of abandonment by another individual. It is also due to insecure attachment styles of individuals due to which they are not able to form, maintain or think about being in a relationship (Goldberg, Muir & Kerr, 2013; Holmes, 2014).

2) Expectancy Model of Life Orientation:

Expectancy value models begin with the idea that the behaviour is aimed at attaining desired goals (Carver, 2001). Goals are final outcomes that are either desired or undesired. People have to modify their behaviour to aim and strive for the desired goals and to avoid the undesired ones. Theoretically, the goal should be realistic and attainable in order to take step in the right direction. The panning to achieve the goals should be realistic. Expectancy means the degree to which the individual believe that the desired goal will be achieved. If they believe is not strong enough, desired action will not be taken by the individual and the goal will not be achieved. The trust in one's own capabilities that the desired goal will be achieved will lead to desired outcomes. Optimistic people have more confident that they will achieve the desired outcome as compared to pessimistic individual (Carver, 2001).

## 1.2 Need and significance

The study on older adults is significant. It is the stage in life they feel lonely and most dependent on others. While most have good mental health, many older adults are at risk of developing mental disorder, neurological disorder or substance. There maybe multiple risk factors for mental health problems at any point of life. Most of their mental disorder are left without diagnosis and treatment. In the case of older adults, they are more prone to mental disorders and have depression, loneliness which can have a negative effect on life orientation. So, it is important to study and make people aware of older adult's mental health and problems. Gender needed to be added as a 'master category' to one's study on loneliness and life orientation since these two variables differ significantly between the genders.

## 1.3 Statement of the problem

The study is titled as loneliness and life orientation among older adults.

## 1.4 Operational definition

An operational definition is how the researchers decides to measure the variables in present study. Following are the variables in present study. Following are operational definitions of variables in present study.

### Loneliness

Loneliness is reviewed as a complex emotional response to isolation. The lack of social bonds and the lack of interpersonal relations trigger this emotional response.

### Life orientation

Life orientation defines as the tendency to view and interpret the events in life in the positive or negative terms.

### Method

Research Method is a termused to describe how onegoes about conducting a certain scientific study. Each research method is a standardized and acceptable practice. Method and data collection are the tools used to obtain the raw materials of hypothesis testing. The guiding principle of method selection is that it must be detailed enough for other researchers to read it and be able to replicate the study (APA, 1994). The researcher method followed for the present

investigation is discussed in detail in this chapter. Basically, it comprises the section of sample, method of data collection, statistical analysis and ethical issues etc.

## 3.1 Design of study

The present study was a descriptive study using a quantitative method. A self-administered questionnaire survey was done among older adults using standardized tools to assess significant relationship between loneliness and life orientation among older adults.

## 3.2 Sample design

In the study a total of 60 participants were selected as the sample. The participants were aged above 60. Purposive random sampling was used for collecting the data.

### 3.2.1 Inclusion criteria

- The age of respondents must be above 60.

- The respondents must be married.

- The respondents should be a native of Kerala.

### 3.2.2 Exclusion criteria

- The age of respondents must not be below 60.

- The respondents must not be unmarried.

- The respondents must not be confined to bed.

## 3.3 Tools of data collection

### 3.3.1 Revised UCLA loneliness scale

Revised UCLA Loneliness Scale was developed by Dr. Russell in 1996. This is a 20-item measure used for the purpose of assessing subjective feelings of loneliness as well as the variable feelings linked with social isolation. The participants are required to rate each item on a scale of 1 (never) to 4 (often). The scale is a revised version of the original UCLA scale. The revision was done for the purpose of simplifying the wording used.

**Reliability and validity**

The development of the UCLA Loneliness Scale, a short, 20-item general measure of loneliness is reported. The measure has high internal consistency (coefficient alpha = .96) and a test-retest correlation over a two-month period of .73. Concurrent and preliminary construct validity are indicated by correlations with self-reports of current loneliness and related emotional states, and by volunteering for a "loneliness clinic."

**Scoring**

In the UCLA Loneliness scale-revised each statement are as follows, never, rarely, sometimes and often and their scores are 1, 2, 3 and 4 respectively. For the items 1,5, 6,9,10,15,16,19 and 20 are reverse scored.

### 3.3.2 Life Orientation Test Revised (LOT-R)

Life Orientation Test Revised (LOT-R) was developed by Scheier in 1994. This test is a 10-item measure for the purpose of assessing optimism and pessimism. Of the 10 items, 3 are used for measurement of pessimism, 4 are used as fillers and 3 for optimism. The respondents are asked to respond on a 4-point scale 0=strongly agree till 0=strongly disagree.

**Reliability and validity**

Schemer and Carver (1985) assessed their scale's internal consistency and test-retest reliability. Reliability was assessed by calculating Cronbach's alpha (0.76), revealing an acceptable level of internal consistency. To confirm the scale's convergent validity, Schererville and Carver (1985) tested whether the scale correlated in appropriate directions, with conceptually related scales. Validity correlation scale analyses positively the measure of internal locus of control and self-esteem. The scale negatively related to measures of hopelessness, depression, stress and social anxiety.

**Scoring**

Each statement indicates strongly disagree, disagree, neutral, agree and strongly agree with scores 0, 1, 2, 3 and 4 respectively. Items 3, 7 and 9 are reverse scored (or scored separately as pessimism measure). Items 2, 5, 6 and 8 are fillers and should not be scored. Scoring is kept continuous, there is no benchmark for being an optimist/ pessimist.

### 3.4 Procedure

The topic was selected for the study under guidance of the expert. After getting permission from the authority, visited Pakal Veed in Karikkad, Malppuram for the purpose of data collection. Rapport was established with the participants and the purpose of study was explained. After getting their consent the questionnaire containing scales for measuring loneliness and life orientation was given. The participants were requested to answer the questions sincerely and assured them the information collected will remain confidential and will be used only for the research purpose.

## 3.5 Ethical consideration

Ethical refers to the correct rules of conduct necessary when carrying out research. Research has the moral responsibility to protect research participants from harm. Informed consent with respect to participation was obtained through consent forms which ensured that the participants were willing to participate and could quit the tests at any point. The participants were given a briefing on the subject of the study and any queries they had were duly cleared by researchers before beginning with the test. Confidentiality has been maintained in keeping and not sharing the data. Only necessary demographics were obtained from the participants so that identities were kept hidden. The participants were asked that the data would be used for research purpose only.

## 3.6 Statistical analysis

The statistical techniques were selected based on the objectives and hypotheses formulated. The statistical techniques used are as follows.

## 3.6.1 Pearson product moment correlation

The Pearson product-moment correlationcoefficient (or Pearson correlation coefficient, for short) is a measure of the strength of a linear association between two variables and is denoted by r. The Pearson correlation coefficient, r, can take a range of values from +1 to -1. A value of 0 indicates that there is no association between the two variables. A value greater than 0 indicates a positive association; that is, as the value of one variable increases, so does the value of the other variable. A value less than 0 indicates a negative association; that is, as the value of one variable increases, the value of the other variable decreases. In Pearson product moment correlation, the hypothesis used is, there is significant relationship between loneliness and life orientation.

**3.6.2 T-test**

A t-test is a statistical test that is used to compare the means of two groups. It is often used in hypothesis testing to determine whether a process or treatment actually has an effect on the population of interest, or whether two groups are different from one another. Using the formulas values are calculated and compared against the standard values. The assumed null hypothesis is accepted or rejected accordingly. If the null hypothesis qualifies to be rejected, it indicates that data readings are strong and are protected due to chance. The hypothesis used in this t-test is loneliness and life orientation is expected more on females than in males.

**Result and discussion**

This chapter deals with the result and discussion of the data. The data is statistically analysed to discuss and interpret the results. The statistical methods are based on the objectives of the study. The data are collected from "Pakal Veed" in Karikkad. The main objective is to find out the significant relationship between loneliness and life orientation among older adults. The collected data deals with loneliness scale and life orientation scale. The data were tabulated, analysed and interpreted here.

**4.1 Section I**

The result is based on the relationship between lonelinessand life orientation among older adults and high loneliness and negative life orientation is expected more in females than in males.

Table 4.1: Relationship of study variables.

| LOT R Pearson Correlation | 1 | -.604** |
| | | .000 |
| Sig: (2-tailed) | 60 | 60 |
| N | | |
| UCLA Pearson Correlation | -.604** | 1 |
| | .000 | |
| Sig: (2-tailed) | 60 | 60 |
| N | | |

**Correlation is significant at the 0.01 level (2-tailed)

Table-1 Shows the correlation between loneliness and life orientation among older adults. In reference to the table there is high correlation between loneliness and life orientation. There is negative correlation among the loneliness and life orientation. As loneliness increases life orientation decreases (pessimism) and as the loneliness decreases life orientation increases (pessimism). So the hypothesis "there is significant relationship between loneliness and life orientation.

## 4.2 Section II

Table 4.2: Mean, Standard Deviation, t value among male and female on loneliness and life orientation.

| Variable | Group | N | Mean | SD | t value | Significant (2-tail) |
|---|---|---|---|---|---|---|
| Loneliness | 2 Male | 30 | 49.57 | 10.321 | 0.956 | 0.343 |
| | 1 Female | 30 | 48.87 | 11.530 | 0.956 | 0.343 |
| Life orientation | 2 Male | 30 | 12.03 | 3.709 | 0.936 | 0.353 |
| | 1 Female | 30 | 12.90 | 3.458 | 0.936 | 0.353 |

Table 2 shows the standard deviation, Mean and t-value of loneliness from this table it can be seen that there is no significant difference in loneliness among male and female. The mean and standard deviation of loneliness in male is 49.57 and10.321 respectively and in female is 48.87 and 11.530 respectively. The t-value of loneliness is 0.956 and significant 2 tailed of loneliness is 0.343.

Overall, the loneliness has no much difference in male and female. Therefore, the hypothesis is "There is significant difference in loneliness among male and female" is rejected. Table 2, also shows the standard deviation, Mean and t-value of life orientation. From this table it can be seen that there is no significant difference in life orientation among male and female. The mean and standard deviation of life orientation in male is 12.03 and 3.709 respectively and in females is 12.09 and 3.458 respectively. The t-value life orientation is - 0.936 and significant 2-tailed is 0.353. Here overall the life orientation has no much difference in male and female therefore the hypothesis "There is significant difference in life orientation among male and female" is rejected.

## 4.3 Discussion

The aim of the experiment is to find out the significant relationship between loneliness and life orientation. There is significant difference in loneliness among male and female and there is significant difference in life orientation among male and female. The results showed there is significant relationship between loneliness and life orientation. Also, there is no gender difference in loneliness and life orientation. Results also showed there is high negative correlation among loneliness and life orientation i.e., high level of loneliness leads to negative life orientation.

Leary (1990) studied the relationship among loneliness and life orientation. The study was conducted on adults. The result had shown that loneliness leads to negative mental health consequences. Also, such individuals tend to have negative, pessimistic orientation towards life in general. According to this study, there is high correlation between loneliness and life orientation in older adults. Based on the above study also, there is correlation between loneliness and life orientation in adults. So, by analysing it, regardless of the population there is correlation between these two variables. The factors that affect loneliness and life orientation include social support, personality, life orientations, technology and social media use, cultural and societal factors and mental health.

Overall, addressing the various factors that can affect loneliness and life orientation requires a multifaceted approach that consider individual, social, cultural and environmental factors. This may involve interventions aimed at improving social support, building resilience, promoting positive coping strategies and addressing underlying mental health concerns. Rabia

Karim, Mahwesh Aroof Naz (2017) conducted a study on life orientation, fear of negative evaluation and loneliness among women with burn, cancer and serious dermatological issues. The results of the study revealed that life orientation, fear of negative evaluation and loneliness with each other among all three populations. There is inverse relationship. Life orientation has inverse relationship with loneliness and fear of negative evaluation.

As we can see from the above study, there is high negative correlation among loneliness and life orientation along with a third variable fear of negative evaluation. Life orientation has high negative correlation with fear of negative evaluation. Loneliness has high correlation with fear of negative evaluation. From the above study and the study conducted by us, we can clearly see that regardless of population, loneliness always had a high negative correlation with life orientation. The reason for inverse relationship is that life orientation is a positive variable whereas loneliness is a negative variable. Fear of negative evaluation is also a negative variable. So, the relationship of a positive and negative variable is always inverse.

So, from the above mentioned two studies and the study conducted by us, we can clearly see that loneliness is always having a negative correlation with life orientation. The inverse relationship is because the life orientation is a positive variable and loneliness is a negative variable. Then according to the results of second hypothesis, there is no significant difference in loneliness among male and female. While loneliness is experienced by all who walk on this earth, the literature is unequivocal as to how it is experienced by males and females. Loneliness is expected to be influenced by early life experiences, experiences in adulthood and by the individuals present in the situation.

Studied found that when other factors such as marital status, health, age, living arrangements are controlled, there is no significant agenda difference in loneliness experience. However, when loneliness was explored indirectly, it clearly indicated that men were lonelier than women (Aartsen and Jylha, 2011). Once again, men's reluctant to admit here by lonely, is used as an explanation to those conflicting results. This Aartsen and Julha claiming "was found in all age groups, men were more socially lonely than women or put differently, it was easier for men to admit to a lack of social contacts than to emotions of missing contact. It was also found that woman one more emotionally lonely than men in the two oldest age groups (50-64 & 65-81), which would be expected, since women generally lose their partner easily than men and live

alone for a longer time (P.251) Dong and Chen (2017) stated that most of the research suggested that older women were more likely than men to experience loneliness. Piquart and Corsen(2001) found that older women experience had more loneliness than older men. It was explained by observing that since women enjoy a longer life than men, they are more prone to remain widowed and thus experience more loneliness. In contrast other studies found that no significant gender difference in loneliness among older adults (Singh and Misra, 2009, Wison & Moulton, 2010), while still others found that loneliness is more prevalent in older men than women (Wang elal, 2011). In participants without a partner, Beutel etal (2017) found, loneliness was more pronounced in women who lived alone, and without children. According to the study conducted by our group, there is no gender difference in loneliness. Individual experience of loneliness can vary greatly and factors, such as age, relationship status and social support can all play a role in how lonely someone feel. Additionally, societal expectations and gender roles may impact how men and women perceive and express loneliness.

Then, according to the third hypothesis, results showed that there is no gender difference in life orientation. While some research has suggested that there may be some gender differences in life orientation, it is important to note that individual differences in life orientation can vary widely and are influenced by a variety of factors beyond the gender. Personal experiences, social support and cultural norms can all impact an individual's overall outlook on life. Additionally, measures of life orientation may not capture the full complexity of an individuals, beliefs and expectations about their future. Overall, while there may be some gender differences in life orientation, these differences are likely influenced by a variety of factors and may not be consistent across all individuals or cultures.

Sadia Yasmin, Sadia Firdous, Sheeba Saqib and et al conducted a study on fear of negative evaluation, loneliness, and life, orientation of never married men and women. It was hypothesized that there would be a significant relationship among those variables and there would be gender differences among the participants. Results show that there is significant positive relationship between fear of negative evaluation and loneliness and a significant negative relationship between loneliness and life orientation. Result also showed that there is gender difference among participants for loneliness and life orientation.

From the above study, we can see that there is gender difference in loneliness and life orientation in never married men and women. But the study conducted by our group shows that there is no gender difference in loneliness and life orientation. So, from both studies the gender difference in variables change by changing the populations. Also, the gender difference on the variables may depend on various factors.

'Thanal Maram' is an initiative by the Kerala Government for the elderly population. It aims at providing leisure activities and engage with people of the same age. It aims at providing consistent social engagement, so they wouldn't feel left out from the society. We collected the samples from 'Thanal Maram' of different areas. This elderly people were relatively enthusiastic, energetic and welcoming. As the samples were collected from them the loneliness word comparatively lower, and life orientation was comparatively higher from other elderly people. Also, despite the gender difference all of them were active and equally engaged in various leisure activities. So, there was no gender difference in loneliness and a life orientation.

## 4.4 Conclusion

The first hypothesis "There is no significant relationship between loneliness and life orientation". The results show there is high negative correlation among loneliness and life orientation.

The second hypothesis is "There is significant difference in loneliness among male and female". The results showed that there is no significant difference in loneliness among male and female.

The third hypothesis is "There is significant difference in life orientation among male and female". The results showed that there is no significant difference in life orientation among male and female.

## Summary and conclusion

This chapter mainly deals with major findings, tenability of the hypothesis, implications of the study and suggestions for future

## 5.1 The major objective of the study

To find out the relationship between loneliness and life orientation among older adults.

The major hypothesis of the study is

H1: There is a significant relationship between loneliness and life orientation.

H2: There is significant differences in loneliness among men and women.

H3: There is significant difference in life orientation among men and women

The study sample contains 60 samples that are above 60 ages. The participants were randomly selected and the data were collected from Thanal maram. The participants were informed about the purpose of the study and were included in the sample after obtaining their informed consent. They were well informed about the research and given the assurance to each participants about the confidentiality of their identity and obtained result. In the present study following tools were used for collecting the data,

- Life orientation test-revised

- Revised UCLA loneliness scale

As the data were normally distributed the following statistical techniques were used: Karl Pearson product moment correlation and T test.

## 5.2 Major Findings of the Study

- There is a significant relationship between loneliness and life orientation.

- There is no significant difference in loneliness among men and women.

- There is no significant difference in life orientation among men and women.

## 5.3 Tenability of Hypothesis

H1: There is significant relationship between loneliness and life orientation. The result revealed that there is significant relationship between loneliness and life orientation. The hypothesis is accepted.

H2: There is significant difference in loneliness among men and women. The result revealed that there is no significant difference in loneliness among men and women. The hypothesis is rejected.

H3: There is significant difference in life orientation among men and women.

The result revealed that there is no significant difference among men and women. The hypothesis is rejected

**5.4 Implications of the Study**

- Findings of the study is that there is correlation between loneliness and life orientation.

- If this study was conducted on a large population and other than Thanalmaram there would have been gender differences.

- There is a high negative correlation between loneliness and life orientation

- Findings of the research may helpful in Geriatric counselling

- The study may be a reference for the future research on the same topic

**5.5 Limitations**

- The present study has been conducted only in a small sample size.

- The study was only conducted in a short period of time.

- The samples were only taken from Thanalmaram of different localities.

- Participants of the study included literate and illiterate people.

- The response of the illiterate people may affect the result of research

**5.6 Suggestions**

- The current study would have been more accurate if the sample size was expanded.

- The study could've been conducted on all around the world.

- If the study has been conducted far long period of time study would've been more accurate and precise.

- A comparative study can be done among adults and older adults.

- More variables could've been included in measuring the relationship among older adults

**5.7 Conclusion**

The present study was an investigation about the relationship between loneliness and life orientation among older adults. Today most of the people can expect to live into their sixties and beyond. Many older people can experience loneliness due to living alone or lack of close family relationship. This increased loneliness can lead to negative life orientation. Thus loneliness and life orientation among older adults is one of the significant topic. Empirical studies shows that there is a correlation between loneliness and life orientation. The current study also found that there is a significant negative correlation between loneliness and life orientation among older adults.

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# A STUDY ON RELATIONSHIP BETWEEN WORKPLACE STRESS AND LIFE SATISFACTION AMONG WORKING WOMENS

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## Abstract

The study aimed to investigate the relationship between workplace stress and life satisfaction among working women's. A convenient sample of 60 working women's were collected from various institutions in Malappuram district. The participants completed a self-report measure of satisfaction with life scale and The workplace stress scale. Correlation analysis were carried out and the result revealed that there is a significant relationship between workplace stress and life satisfaction among working women. It shows when workplace stress and life satisfaction are negatively correlated.

*Keywords: Workplace stress, life satisfaction, working women.*

## Introduction

In the history of human development, women have been as vital in the history making as men have been. In fact higher status for women vis-a-vis employment and work performed by them in a society is a significant indicator of a nation's overall progress. Undoubtedly, without the active participation of women in national activities the social, economic, or political progress of a country will deteriorate and become stagnant. But ironically and tragically women employees in general are not taken very seriously by their superiors, colleagues, or society at large. Many high level positions in companies are filled by men even though the workforce in developed countries is more than 50% female. Nowadays there is a debate concerning the ability of women to hold high level positions in companies. A growing body of opinion recommends

allocations of fixed 0ercentage of these positions to women. It can discuss some different views related to this issue.

It's undeniable the women in the time being have the ability to be qualified either educationally or practically to attain success in different branches and fields. Therefore it's quite fair to get higher positions in their career. Although this makes practical sense, it ignores a lot of social and physical obstacles that women face and interfere with the efficient performance of them in such heavy duties. Such obstacles need gross exerted by both the family and government to provide immanent support to women to achieve success in their practical life. It's advisable to give up the chance for women to share equally with men in the development of the community by reaching all the positions whatever these are. However, it's my belief that women should get positions based on their efficiency not by making low decisions.

**Traditional role of women**

Some people believe in the traditional idea that women should stay at home while others say that the idea is outdated and that women should play an increasingly important role in the workplace.

Primitively women role in connected to have work but others believe that women have more exemplary capacity to work outside home. In today's society it's clearly seen that women play a big role not only in nurturing her family with love and care but also to excel in her fields of interest. Women are capable of giving birth and that is natural occurrence that differ them from men. Experiencing the whole course of pregnancy plus labor and delivery put them into great danger , stress , and pain. But women can overcome all of this because of their innate courage and braveness. It's a clear evidence that women can surpass such a great test.

In conclusion women play a huge part in society not only to take care of their family inside her home. But also she has a position to work in a civilized society.

**Workplace stress**

According to Canadian Mental Health Association "stress is a reaction to a situation it is not about the actual situation. We usually feel stressed when we think that the demands of situation are greater than our resources to deal with those situations. For example, someone who feels comfortable speaking in public may not worry about giving a presentation while someone

who is not confident in their skill may feel a lot stress about an upcoming presentation. Common sources of stress may include major life events like mourting or changing jobs. Long term worries like a long term illness or parenting can also feel stressful. Even daily hassles like dealing with traffic can be sources of stress".

Workplace stress is then the harmful and emotional responses that can happen when there is a conflict between job demand on the employee and the amount of control an employee has over meeting these demands.  In general, the combination of high demands in a job and low amount of control over the situation can lead to stress.

Stress in the workplace can have many origins or come from one single event. It can impact both employers and employees alike. It's generally believed that some stress is okay, but when stress occurs in an amount that you cannot handle, both mental and physical changes may occur.

**Causes of workplace stress;**

There is no one cause of stress in the workplace. Every worker is an individual with their professional and personal lives bringing different factors that may influence their reaction to conditions in the workplace that have been shown to influence feelings of stress in the workplace. Some include,

- Workload (overload and under load)
- Pace/variety/meaning fullness to work.
- Adequate time to complete a task
- Autonomy
- shift work / hours of work
- skills/abilities do not match job demand
- Role conflict
- Level of responsibility
- Under/over promotion
- Job security/insecurity
- Supervisors (Conflict or lack of support)
- Co-workers ( Conflict or lack of support)

- Lack of trust

- Role /responsibility conflicts

- Family, exposed to work-related hazards

**Effect of stress;**

Stress can have an impact on your overall health. Our bodies are designed pre-programmed if you wish, with a set of automatic responses to deal with stress. The problem is that our bodies deal with all type of stressors for same way. Experiencing Stress for long period of time will activate this system, but it does not get the chances to turn off.

The common effects include;

- Headache

- Muscle tension / pain

- Increased heart rate and blood pressure.

- Chest pain

- Weakened immune system

- Fatigue/Insomnia

- High blood sugar

- Increased cholesterol

Stress can affect our mood or thinking by,

- Increased forgetfulness, anxiety, restlessness, irritability, defensiveness, mood swings.

- Decreased ability to think clearly or focus.

There are many ways or strategies that can help to control stress and reduce the impact to a person or in the workplace. Since the cause of workplace stress varies greatly, so do the strategies to reduce or prevent it where stress in the workplace is caused, for example by a physical agent, its best to control measures to deal with the noise should be implemented wherever possible. If you are experiencing pain from repetitive strain, Workstation can be redesigned to reduce repetitive strenuous movements.

Job design is also an important factor. Good job design accommodates an employee's mental and physical abilities.

**Life satisfaction**

According to Ellison, life satisfaction is cognitive assessment of an underlying state thought to be relatively consistent and influenced by Social factors.

Life Satisfaction is a bit more complex than it seems. The term is sometimes used interchangeably with happiness, but they are indeed two separate concepts. Life satisfaction is the evaluation of one's life as a whole, not simply one's current level of happiness. There are few different working distinctions of life satisfaction. Including wellbeing and life satisfaction researchers' ad Dieners:-

[A] an overall assessment of feeling and attitude about one's feelings at a particular point in time ranging from negative to positive.

According to Buetell, 2006 life satisfaction comes from another highly recorded life satisfaction scholar, Lite satisfaction is the degree to which a person positively evaluates the overall quality of his/her life as a whole. In other words, how much the person likes the life he/she leads.

Theories of Life Satisfaction:-

There are two main type of theories about life Satisfaction;

1- Bottom-up theory:-

Life satisfaction as a result of satisfaction in many domains in life.

2- Top-down theory:

Life Satisfaction as an influencer of a domain specific satisfaction.

Bottom-up theories hold that we experience satisfaction in many domains of life, like Work, relationships, family, friends, personal development and health and fitness. Our satisfaction with our lives in these areas combined to create our overall life satisfaction.

**Need of the study**

This study is conducted to identify how workplace stress and life satisfaction affect working women. The study is more relevant these days because work life balance is needed for

an individual. Work-life balance out to achieve an ideal behaviour between a person's working life and private life. It's a concept in which the maximum happiness of an employee acts as the fuel for productive and fulfilling work, for which both employee and employees are responsible. So in this study we are looking at how much stress a working woman does and how their life is going, satisfied or not.

## Method

The procedure pertaining to the present study, work place stress and life satisfaction among working women's. Methodology has its own importance in scientific investigation because objectivity in many research investigations cannot be obtained unless it is carried out in a very systematic way and planned manner. This chapter deals with the approach and way this research has been conducted. It maps the methods and materials utilized for this research. This chapter include,

## Objectives

The present study has set of following objectives;

To examine the relationship between workplace Stress and life satisfaction among working women.

To examine how workplace stress affects working women.

To examine the life satisfaction among working women.

## Hypothesis:

The present study has set of following hypothesis;

H1: There is a significant relationship between workplace stress and life satisfaction among working women.

H0: There is no significant relationship between workplace stress and life satisfaction among working women.

## Research design:

Correlation analysis is used in this study. A Sample of 60 working women's are taken. The data was collected from the various colleges and hospitals in Malappuram.

Inclusion criteria:

Subject who are currently working

Exclusion criteria:

Subjects who are not currently working

**Measures:**

Only questionnaire measures were used in the present study. All measures employed are widely used ones in psychological research, with well-established psychometric properties.

Tools:

Satisfaction with life Scale:-

Satisfaction with life scales were developed by Dienner, Emmons, Lavsen and Griffith (1985). The satisfaction with life scale is a short 5-item instrument designed to measure global cognitive Judgment of Satisfaction with one's life. The scale usually requires only about 1 minute of a respondent time, where the respondent answers on likert scale. The questions are open to interpretation making this scale suitable for adults with a range of backgrounds. The scale has strong internal consistency and moderate temporal stability with cronbach alpha of 0.87 and test retest reliability of 0.82. The convergent validity was established through high correlation with other well-being measures.

**Scoring:**

Life satisfaction scale:-

Score consists of a raw score (between 5% and 35%). Higher scores represent higher life satisfaction. Scores can be assigned into 6 well-being categories and Interpretation provided.

- 30-35 extremely satisfied
- 25-20- Satisfied
- 20-24- Slightly satisfied

- 15-19- Slightly dissatisfied

- 10-14 Dissatisfied

- 5-9 - Extremely dissatisfied.

Workplace Stress Scale:-

The workplace Stress scale was developed by martin company, North Haven, en USA, & the American institute of Dress Yonkers, NY, USA (2001). The workplace stress scale consists of 8 items describing how often a respondent feels towards his or her job. The validity of scale by seeking the opinion of oncology nurses as experts in current study, we reported a cronbach's alpha reliability coefficient of 0.80 for the entire workplace stress scale.

Scoring of workplace stress scale:-

Add the raw score, question number 7, 8, 9 are reversely scored, high score represents high stress. Total score of 15 or lower indicates chilled out and relatively calm. 16-20 scores show fairly low stress. The 21-25 score shows moderate stress. 26-80 scores show severe stress. 31-40 core indicates stress level is potentially dangerous.

**Procedure:**

The researcher went to various institutions in Malappuram district. The permission to conduct the study was obtained from college and concerned officers. The details of instruction were printed on the first page of each scale. The participants were asked to read the instructions carefully given on the top of each scale. A concerned form was also given with scale. The data was collected through a direct method. Giving a questionnaire to the subject directly. After collecting the data it was tabulated very carefully for analysing the data, so that the result can be interpreted and briefly communicated in a comprehensive manner. Descriptive statistics and cronbach alpha for each scale were determined.

Statistical analysis done in the study

Pearson Correlation Coefficient:

A coefficient of correlation is a simple index representing the relationship between two variables that can be computed in different ways depending on the nature of data. The standard kind of coefficient of correlation and one of the most computed is pearson's product moment

coefficient (pearson). Generally the value can vary from the value of +1 (which indicates perfect positive correlation that indicates if X increases Y also increases) to -1 (which indicates perfect negative correlation that if X increases Y decreases).

**Result and discussion**

This study is about workplace stress and life satisfaction among working women. This is conducted among working women who are working in different institutions in Malappuram district. The sample was collected from 60 working women's. The tools used for this study are workplace stress scale by Martin company, North haven, CI, USA and the American institution of stress, Yonkers , NY , USA (2001) and Satisfaction with life scale developed by Diener , Emmons , Lassens and Grifith (1985).

Table 1: Distribution of sample.

| Sample | Number |
|--------|--------|
| Working women | 60 |

Table 1 shows the distribution of sample. For the present study a total sample of 60 working women were taken, the sample is selected from various institutions of Malappuram district.

Table 2: Correlation between workplace stress and life satisfaction among working women's.

| Variable | Life satisfaction |
|----------|-------------------|
| Workplace stress | -0.307 |

Correlation is significant at 0.05 level (2 tailed)

Table 2 shows the correlation between workplace Stress and life satisfaction among working women -0.307 at 0.05 significance level. So it shows there is a relationship between workplace stress and life satisfaction among working women. Therefore the hypothesis, there is

a significant relationship between workplace stress and life satisfaction among working women is accepted.

Here, overall workplace stress and life satisfaction have high correlation, so that there is a significant relationship between these two variables. These two variables are negatively correlated. It means if one variable increases another variable decreases. If workplace stress increases then life satisfaction decreases, or if there is high life Satisfaction then workplace stress is low. Therefore factors that affect workplace stress may also affect life satisfaction.

There is a significant relationship between workplace stress and life satisfaction. Also the finding showed that the longer the length of work experience, the more workers get satisfied with their lives. But if the working environment is not peaceful and calm, it will decrease the life satisfaction. If they are stressed out in their working environment it will affect the quality of their life and it will lead to low life satisfaction. But if their workplace is peaceful and there is enjoyment in their workplace, it will lead to high life satisfaction.

I couldn't find any studies related to workplace stress and life satisfaction. So a study having similar variables that is Occupational stress and life satisfaction is taken.

Beebr and Newman (1978) defined occupational Stress as "A condition arising from the interaction of people and their jobs and characterized by changes within people that force them to deviate from their normal functioning.

The study related to occupational stress and life satisfaction is;

Shehnaz Bano conducted a study in 2014 on the topic effect of occupational stress on life satisfaction among private and public school teachers. The sample consists of 200 school teachers from private and public school. Questionnaire are used to assess the response of the teacher. They used occupational role stress and Satisfaction with life scale as the tool of the study. The result of the study reveal that the higher the occupational stress is related to lower satisfaction in life.

**Summary and conclusion**

The Study on workplace stress and life satisfaction among working women were conducted with certain objectives, they are:

- To examine the relationship between workplace stress and life satisfaction among working women's.
- To examine how workplace stress effect working women's.
- To examine life satisfaction among working women's.

This study was conducted among working women's who work under various institutions in Malappuram district. A total of 60 sample were taken for this study by convenient sampling. And the sample was assessed by the satisfaction with life scale developed by Diener, Emmons, Lasson and Griffith (1985) and workplace stress scale by Martin Company, North Haven, CT, USA (2001). This scales were used to assess the workplace stress level and level of life satisfaction and I used coefficient method with the help of spss software.

## Conclusion

The level of workplace stress and life satisfaction is assessed, therefore the hypothesis 'There is significant relationship between workplace stress and life satisfaction in working women" is accepted.

The hypothesis "There is no significant relationship between workplace stress and life satisfaction among working women's" is rejected.

## Limitations

- The period of research study was too short
- The study has been conducted in a small  geographical area
- The study has been done in illiterate and literates. Response of illiterate people may be affect the result of research.

## Recommendation

- Use a large population for the study to get a good conclusion.
- Use literate people because response of illiterate people may be affect the result of research.

## Suggestions for future research:

- Expand population to other areas to compare.

- Use alternative age group in order to understand the effect of selected variable.
- The research study has been conducted in short period of time. If it is conducted in a long period of time, it will lead to more accurate results.

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## Chapter 6

## STUDY ON THE RELATIONSHIP BETWEEN JOB SATISFACTION AND PSYCHOLOGICAL WELL-BEING AMONG PROFESSIONAL WORKERS

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### Abstract

Job satisfaction is highly important not only for professional workers, but also for the organization as a whole and also need a positive state of mind that enables a person to function effectively within society. The aim of the study was to investigate the effort of job satisfaction and Psychological Well-Being on professional workers. The data for this purpose was collected from sixty participants, of which 50 were professional males and 50 were professional females from Malappuram District. As for the assessments, the self-reporting questionnaire Job Satisfaction Scale (Dr. T R Sharma and Amar Singh, 1986) and Psychological Well-Being Scale (Dr. Devendra Singh Sisodia and Ms. Pooja Choudhary) were used. The statistical methods used to analyze data are Carl Pearson's Coefficient of Correlation and Student t-test. Result shows that there is positive relationship between Job Satisfaction and Psychological Well-Being and there is significant difference in Job Satisfaction and Psychological Well-Being between gender differences.

*Key words: Job satisfaction, Psychological Well-being*

**Job satisfaction and psychological well-being among professional workers**

Job satisfaction is considered as the amount or degree of gratification and contentment that an employee fosters towards his/her overall job, factoring into that equation his/her satisfaction with the job itself, the peers at the job, the super- visors, and the policies at work. Various research studies have highlighted the importance of focusing on the issue of employee job satisfaction, as it plays a critical role in overall firm success or demise. Additionally, the

importance of employee job satisfaction has been largely emphasized in the literature because of its positive affect on employee job performance. The productivity of the work force, in any organization, is a major driver which leads to achieving organizational goals. This stresses on the importance of further focusing on job satisfaction as an essential concern for family firms and large corporations equally.

Research workers differently describe the factors. Contributing to job satisfaction anal job dissatisfaction. Heppock describes job satisfaction as, "any combination of psychological, physiological and environmental circumstances that cause. And person truthfully to say I'm satisfied with my job. According to Locke [1969] suggested that job satisfaction was a positive or pleasurable reaction resulting from the appraisal of one's job achievement or job experience.

According to Vroom [1982] defined job satisfaction as cookert emotional orientation terward their current job risks ammiliony Schultz [1982] stated that job satisfaction is essentially the psychological disposition of people toward their work. Finally Lofquist and Davis [1991], defined job satisfaction as arv individuate positive affective reaction of the target environment as a result of the individual's approval of the extent to which his or her needs are fulfilled by the costumaccent-

Job satisfaction is important for employees to stay in the organization. Understanding generational differences among different generations and their perception of job satisfaction is of huge and utmost importance. Organizations must know what actually satisfies a person to stay in the organization, since a satisfied employee will work for the interest of the organization, which in turn leads to better overall work performance. Moreover, based on the findings of a research study conducted by Acharrya , there are four aspects which contribute to the satisfaction of millennial: training, commitment of the organization to developing employees, career development, and career opportunities.

The Psychology of Wellbeing offers readers tools to navigate their own wellbeing and understand what makes a 'good life'. Using self- reflection and storytelling, it explores how trust affects psychological and emotional wellbeing, considers how stress and inequality impact our psychological wellbeing, and how trends such as positive psychology influence our understanding of happiness. In a world where the 'wellness economy' is big business, The

Psychology of Wellbeing shows how we can question and make sense of information sources and sheds light on the wellness, self-care, and self-help industry.

Psychological well-being is very important for individual whether living in the community, at work or dealing with a crisis in life. In working to improve psychological well-being, in addition to preventing and treating mental and behavior disorders, efforts are needed to reduce common environmental or mental stress. While nurses are in a unique position to monitor and prevent psychological problems such as depressions and anxiety in vulnerable population, their own psychological well-being impact greatly on their work performance. Psychological well-being refers to inter and intra individual levels of positive functioning that can include one's relatedness with others and self-referent attitudes that include one's sense of mastery and personal growth.

Subjective well-being reflects dimensions of affect judgment of life satisfaction.

Job satisfaction influenced by many factors. Many researchers found complex finding regarding role of quality of life in job satisfaction. Most researchers concluded that there is significant difference according their profession, age, economic level, marital status, duration of work life and position at work (Gulcer Cimete, Nimet Sevgi Gencalp, Gulbahar keskin (2003)). But some researchers reported that teachers who had higher self-esteem were more satisfied In Job than teachers who scored lower. (Dr. Nimisha Beri & Supriya Arora (2016)). Some researcher reported that enjoy working nurses with residents and their cow-workers but are less satisfied with Pay.

Similarly psychological well-being also influenced by many factors such as marital adjustment gender, self-esteem, age etc. most of the studies revealed that age decreases psychological wellbeing increases and as age increases psychological well-being decreases in the couples of post parental stage Of ( kumar. P. Saleel (2015)) Studies suggested that self-esteem have significant relationship with Psychological well-being of student.(chimezie Benedict Nwankwo et al. (2015))

Some researchers conducted study on relationship between psychological well-being and Job satisfaction among teacher's .This shows there is a significant difference in the well-being and Job Satisfaction. Among government and private school teachers (Zahoor, Zeenath (2015)). Other studies shows that psychological well-being have a significant influence in

coping strategies with Job satisfaction as well as stress on other psychological health. (Mobel Dahlan et al (2015) Mohel Dablam et al [2015] conducted study coping strategies on job satisfaction and Psychological well-being among fire fighters. This examined to a questionnaire survey of 614 malaysian fire fighters. Job satisfaction Survey [JSS] by spector and Ryff's The Psychological well-being surveys are used as measurements. The result shows that psychological well-being have a significant influence in coping strategies with job satisfaction in as well as stress or other psychological health.

Still the studies are. Conducting based on the topics Psychological well-being and job satisfaction among profession al workers. Many scholars are keeping forward this conclusions based on the topic. Still studies are progressing to find the relationship between these two variables.

**Objectives**

- To study the relationship between job satisfaction and psychological well-being among professional workers.
- To find out the influence of gender on job satisfaction among professional workers
- To find out the influence of gender on psychological well-being among professional workers

**Hypotheses**

- There is a significant relationship between Job satisfaction and psychological well-being.
- There is a significant difference between Job Satisfaction of males and females.
- There is a significant difference between psychological well-being of males and females.

**Method participants**

100 professional workers from Malappuram district, Kerala including teachers, pharmacist, engineers, architects, doctors etc. were considered as the participants for the study. The sample of study consist 50 females and 50 males. Purposive random sampling is used for sample selection. It means the process of identifying a population of interest and developing a systematic way of selecting cases that is not based on advanced knowledge of here the

outcome would appear.

**Instruments**

Personal data schedule: Personal data schedule means any information related to an identified or unidentified individual. In the study which include marital status, sex, qualifications, date of birth, designation and occupation of the participants.

Job satisfaction scale: Job satisfaction Scale [ISS] developed by Dr. Amar singh and T.R sharma. [1986] incorporating 30 items of both intrinsic and extrinsic aspects of the job.The Reliability of scale is test retest reliability works out to be 0.97 with N=52 and a days. · gap of 25 Validity of the scale is the scores compares favourably with Muthayya's Job satisfaction questionnaire giving a validity co efficient of 0.74

Psychological well-being scale: Psychological Well-Being Scale the scale is developed by Dr. Devendra singh sisodia & M.S Pooja chaudhary using Likert technique. The final form of scale was thus prepared comprising of 50 statements with a view to measure several aspects of well-being like. Satisfaction efficiency, sociability, mental health and interpersonal relation. The reliability of the scale was determined by test re-test method and internal consistency method. The test re-test reliability was 0.87 and the consistency for the scale is 0.90.

**Procedure**

The study is related to fob satisfaction and Psychological well-being among professional workers. For this study Go professional workers are und as job satisfaction scale. [JSS] and Psychological well-being [PWBS] are used as questionnaire to measure Variable problem. The data were collected from professional workers from Malappuram district.

The samples were collected only after giving the assurance about the confidentiality. The instruments are administrated to the subject individually by the investigator for each participants instruction were given Very well for collecting data.

**Results and Discussion**

To have a general idea of the result obtained in the study and their expectation. In order to meet the objectives, three hypothesis were formulated. Out of these the first, hypothesis intended to examine the relationship between job satisfaction and psychological well-being, second hypothesis intended to examine the influence of gender on job satisfaction and third

hypothesis intended to examine the influence of gender on anxiety.

H1: There is a significant relationship between job-satisfaction and psychological well-being. To verify the hypothesis 1, Karl Pearson's.

Product moment of correlation test was used and result are showing in table I.

Table I: Correlation between job satisfaction and Psychological well being

| Variable | Job Satisfaction |
|---|---|
| Psychological wellbeing | 0.942 |

Table I shows the Correlation coefficient between job satisfaction and Psychological well- being is found to be 0.942 which is statistically significant at 0.01 level. This shows. That there is a significant positive relationship. Between job satisfaction and psychological well-being. So the hypothesis 1 is accepted. They are highly correlated when job satisfaction. Increases psychological well-being also increases. When job. Satisfaction decreases psychological well-being also decreases

H2: There is a significant difference between Job Satisfaction. On male and female.

|  | N | Mean | S.D | t |
|---|---|---|---|---|
| Male | 50 | 94.54 | 14.672 | - 1.056 |
| Female | 50 | 91.62 | 12.938 | |

Table 2: Mean, SD and I-value among male and Female on Job Satisfaction

The table II can be seen that the mean score of Job satisfaction for male 94.54 and mean of job. Satisfaction of female is 91.62. The SD of Job satisfaction of male 15 14672 and SD of job. Satisfaction of female 12-938 and the 1.056 t-value respectively. It is not significant so hypothesis is rejected.

H3: There is a significant relationship between Psychological well-being on male and female.

Table Mean, SD and t-value among male and female on psychological well-being.

|  | N | Mean | S.D | t |
|---|---|---|---|---|
|  |  |  |  |  |

| | | | | |
|---|---|---|---|---|
| Male | 50 | 207.50 | 55.887 | - 0.358 |
| Female | 50 | 203.58 | 53.508 | |

The table III can be seen that the mean score for psychological well-being for male 207.50 and mean of psychological well-being for female 203-58. The SD of psychological well-being in. male is 55.887 and SD of psychological t-value is - .358 respectively It is not significant so hypothesis is rejected.

## Conclusion

This study helps to know about fob satisfaction and psychological well-being among professional workers. The present study shows the correlation between Job Satisfaction and psychological wellbeing among professional workers. This implies that of people provide favorable working conditions, equal rewarding, satisfactory in economical affiliation etc. Can increase satisfaction is job which also increase psychological well-being.

The variable used to the study were job satisfaction and Psychological well-being 'Both are important individual's life. This study can be applied to many areas especially in case of adult men and women. That is, this research can use to improve mental health of the individual ty giving proper strategies from the research. Job satisfaction prince the individual to live a better life by providing with. Social and family support. By achieving the satisfaction in Job, the individual can attain. Psychological well-being will lead the individual to attain good health, social support from the society, financially independent etc. In addition, programs in the variables. Can contribute to form proper awareness about Job Satisfaction and psychological well-being. It give awareness class t Sovety, how it affect the professional workers. It helps to reduce mental problems, stress etc. This study helps the participants to know more about job Satisfaction and psychological well-being. Through this study, it shows that males and females have no differences I job satisfaction and the Males and females have no differences in psychological well-being

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# Chapter 7

# ACHIEVEMENT MOTIVATION AND SELF EFFICACY AMONG COLLEGE STUDENTS

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## Abstract

The main objective of the study is to find the correlation between self-efficacy and achievement motivation among college students. For this purpose, data from 60 students of different colleges of India were taken. Among the collages we selected 17 males and 43 females. The study was conducted among college students who use age in between 18 to 23. Two scales were administered, Achievement motivation scale by Immanuel Thomas and Muthee J.M to measure achievement motivation & Academic self-efficacy scale by Abdul Gafoor and Ashraf Muhammad to measure self-efficacy. The result found that no correlation between Achievement Motivation and Self Efficacy among college students.

*Key words: Achievement Motivation, Self-Efficacy & College Students*

## Introduction

India has the highest youth population in the world. Youth play the most important role in shaping any nation's development be it economic, political or social. Therefore, it is necessary to provide quality education to the students especially the higher education. It is believed that the attainment of the highest education standards is important for the dynamic development of science and technology. It significantly impacts the social, cultural, and economical and political development of the nation.

Lot of difficulties that people experience throughout their lives is closely related with

their beliefs about themselves. Students' failures in academics, as well as the misdirected motivation and lack of commitment is largely because of the beliefs those students develop about themselves and about their ability to exercise a measure of control over their environments. Education system must aim for the development of academic competence. It is the responsibility of schools and colleges to prepare self-assured and fully-functioning individuals who are capable of pursuing their hopes and their ambitions. According to Albert Bandura, "educational practices should be gauged not only by the skills and knowledge they impart for present use but also by what they do to [students'] beliefs about their capabilities, which affects how they approach the future. Students who develop a strong sense of self-efficacy are well equipped to educate themselves when they have to rely on their own initiative".

Motivation is of great importance for students. It directs behaviour toward particular goals. It determines the specific goals toward which people strive, thus, affecting the choices students make. It also leads to increased effort and energy. Whether a student will pursue a task (even a difficult one) with enthusiasm or a lack buster attitude, is determined by their level of motivation. It increases the initiation and persistence of activities and is an important factor affecting their learning and achievement. Motivated students are more likely to pay attention and try to understand the material instead of simply going through the motions of learning in a superficial manner.

How to motivate students has been a long-standing issue with educators. Motivating students to learn in school is a topic of great concern for educationist today. Motivating students so that they can succeed in life is one of the greatest challenges of this century. Lack of motivation is a big hurdle in learning and a pertinent cause in the deterioration of education standards. It has been recognized that there is a strong relationship between achievement motivation, self-efficacy and self-esteem. It is argued that self-efficacy is an important determinant of student's motivation. Current research findings reveal that, when properly assessed, students' self-concept and self-efficacy beliefs are each related to, and help mediate the impact of other motivation constructs on, academic achievement. As per Bandura (1986), both self-beliefs "contribute in their own way to the quality of human life."

**Achievement motivation**

Achievement motivation refers to an individual's drive to succeed and attain goals. It is characterized by a desire for competence, mastery, and accomplishment, and is often associated with a need for achievement, power, and status. People with high achievement motivation tend to be highly driven, ambitious, and persistent in their pursuit of success. They may also be more likely to take on challenging tasks and set high goals for themselves. Conversely, people with low achievement motivation may be less motivated to succeed and may be more likely to avoid challenging tasks.

When an individual expects that his or her performance will be evaluated on the basis of some standard of excellence. Such behavior is called being achievement-oriented. 'Achievement motivation is affect in connection with evaluated performance in which competition with a standard of excellence was paramount'. In the workplace, achievement motivation leads some people to be high performers who desire success— and fear failure. They seek out tasks that they can successfully complete while avoiding responsibilities or tasks where they might fail. Achievement motive also drives them to persist, putting in long hours and hard work, at goals they know they can accomplish. They are driven to seek out roles where they can be successful, receive feedback and feel a sense of accomplishment. In other words, people motivated by achievement prefer moderately difficult tasks where they can succeed and feel competent. They avoid very difficult tasks where they might fail and easy tasks that don't give them a sense of satisfaction when completed.

Achievement motivation is part of McClelland's Human Motivation Theory. This theory was proposed by social psychologist David McClelland.

**McClelland's Achievement Motivation Theory**

McClelland's Achievement Motivation Theory also called Three-Need Theory was originated from the investigations into the relationship between hunger needs and the extent to which imagery of food dominates the thought process.

The theory was developed by David McClelland and his associates, as they identified the following three main arousal-based and socially developed motives:

- Need for Achievement (n-Ach): This is the drive which some people have to pursue and attain goals. An individual with this drive is achievement oriented and wants to

undertake set of jobs or activities where one can excel and advance up in the ladder of success. The need for achievement is a desire to succeed. Many people have the drive towards achieving something better to differentiate themselves from others. This urge can be defined to overcome obstacles, to exercise power, to strive to do something difficult and even do it as quickly as possible.

- Need for Power (n-Pow): This is the desire to be influential— to make impact on others, do something that can change situations, and add value to life. Individuals with high power especially organizational managers make a greater impact on the behaviour and performance of others at the workplace. The need for power can be summarized as the desire to influence others and control environment. Such power ultimately culminates in increased motivation amongst members of the workplace and fulfilment of organizational goals.

- Need for Affiliation (n-Aff): The need for affiliation is the desire to establish friendly and close relationships with others and to interact socially. McClelland observed that people with a high need for affiliation get motivated to express their feelings and emotions to other people as part of their normal behaviour and strongly desire to be liked and accepted by others.

In this way, they resent and discourage conflicts and confrontations in their day-today relationships and, by nature and constant practice, feel motivated to emphasize friendship and cordiality

**Atkinson's Achievement Motivation Theory**

The concept of achievement motivation dates back to the forties where various works on success and failure along with ego-involvement provided the early foundation for what would become John W. Atkinson's Achievement Motivation Theory (AMT) in 1966.

AMT explains the integral relationship between an individual's characteristics and their need to achieve something in life. It also takes into account the kind of competitive drive a person has to achieve and set goals. For me, this was the drive to put up a good time in the workout. Other examples you may relate to are how you perform at work, school, or even a local bowling league.

In all cases, there are various forces at work. An essential component to note is the

presence of internal and external factors, which play a role in motivation. The theory explains that the motivation one has to achieve something in life is closely governed by these factors.

**Features of Achievement Motivation**

Achievement motivation is the drive to accomplish tasks and achieve goals. Some features of achievement motivation include:

- Goal-oriented behaviour: People with high achievement motivation tend to set specific and challenging goals for themselves, and work hard to achieve them.
- Persistence: They are willing to put in sustained effort to achieve their goals, even in the face of obstacles and setbacks.
- Need for achievement: They have a strong internal drive to achieve success and to be recognized for their achievements.
- Competitiveness: They are often competitive with others and strive to be the best in their field.
- Self-evaluation: They are self-motivated and rely on self-evaluation and self-reward.
- Risk-taking: They are willing to take risks to achieve their goals and are not afraid of failure.
- Self-efficacy: They have a high level of self-efficacy, or belief in their own abilities to achieve their goals.
- Need for control: They have a need to control their own environment and to direct their own lives.

These features are not exclusive and may vary among individuals, but overall, people with high achievement motivation tend to be proactive, self-motivated, and goal-driven.

**Factors Affecting Achievement Motivation**

There are several factors that can affect achievement motivation, including: Personal characteristics: Factors such as personality traits, self-esteem, and self-efficacy can influence a person's level of achievement motivation.

- Social and cultural factors: The expectations and values of one's family, peers, and culture can influence achievement motivation.

- Environmental factors: The availability of resources, such as education and opportunities, can affect a person's level of achievement motivation.
- Goal characteristics: The specificity, difficulty and relevance of the goal can influence the level of motivation to achieve it.
- Feedback and reinforcement: Feedback from others and rewards for achieving goals can increase motivation.
- Stress and anxiety: High levels of stress and anxiety can decrease achievement motivation.
- Past experiences: Past experiences, both positive and negative, can shape a person's beliefs about their abilities and the likelihood of achieving success.
- Role models: Seeing others successfully achieving similar goals can inspire and increase motivation to achieve the same.

It is important to note that the effect of these factors on achievement motivation can vary among individuals and across different situations.

**Self-efficacy**

Self-efficacy is the belief in one's own abilities to accomplish tasks and achieve goals. It is a concept in psychology that refers to a person's level of confidence in their ability to perform a specific task or accomplish a specific goal. High self-efficacy is associated with better performance and more persistence in the face of challenges, while low self-efficacy is associated with less confidence and more difficulty in achieving goals. Self-efficacy can be influenced by a variety of factors, including past experiences, social support, and cognitive and emotional factors.

It is considered to be people's beliefs about their capabilities to produce designated levels of performance that influences events that affect their lives. Self-efficacy beliefs affect how people feel, think, motivate themselves and behave. Such beliefs produce these diverse effects through cognitive, motivational, affective and selection processes.

**Social cognitive theory**

The theory of self-efficacy lies at the heart of Bandura's social cognitive theory that has emphasized the role of observational learning and social experience in the development of

personality. The main idea in social cognitive theory is that in almost every situation the actions that individual has observed in others influences his every actions and reactions. Self- Efficacy is an important aspect of social cognitive theory as it is developed from external experiences and self-perception and plays an important role in determining the outcome of many events. Self-efficacy is a representation of the personal perception of external social factors. People with high self-efficacy-that is, those who believe they can perform well are more likely to view difficult tasks as something to be mastered rather than something to be avoided.

Social Cognitive Theory of Albert Bandura shows how cognitive, behavioural, personal, and environmental factors interact to determine motivation and behaviour. Human functioning results from the interaction among all three of these factors, as has been depicted in Bandura's Triadic Reciprocal Determinism model. It may seem to us that one factor is the majority, or lead reason, there are numerous factors that playing a role in human behaviour. Moreover, the factors that influence are neither of equal strength, nor do they all occur concurrently. For example, the way the workers themselves are affected (cognitive factors) influences their performances (behavioural factors) by organizational strategies (environmental factors). People who high self-efficacy assign for them challenging goals and are strongly committed to them. When they experience failure, they heighten and sustain their efforts. They are quick in recovering their sense of efficacy after failures or setbacks. Failure is attributed to insufficient effort or deficient knowledge and skills which can be acquired. Threatening situations are approached with assurance that they can be controlled. Such an outlook leads to personal accomplishments reduces stress and low down vulnerability to depression.

**Features of Self-efficacy**

Self-efficacy is the belief in one's ability to successfully execute tasks and achieve goals.

Some key features of self-efficacy include:

- Perceived control: Individuals with high self-efficacy believe that they have control over their own actions and outcomes.
- Sense of mastery: High self-efficacy individuals have a sense of mastery over their own abilities and skills.
- Resilience: High self-efficacy individuals are able to bounce back from setbacks and failures, and persist in the face of adversity.

- Optimism: High self-efficacy individuals tend to have a positive outlook and believe that their efforts will lead to success.
- Goal-oriented: High self-efficacy individuals are more likely to set challenging goals for themselves and take the necessary steps to achieve them.
- Adaptability: High self-efficacy individuals are able to adjust their approach to different situations, and are more open to trying new things.

**Factors affecting Self-efficacy**

There are several factors that can influence self-efficacy, including:

- Past experiences: Past successes and failures can have a big impact on self-efficacy. Individuals who have had positive experiences and have been successful in the past are more likely to have high self-efficacy, while those who have failed or struggled may have lower self-efficacy.
- Social persuasion: Feedback and encouragement from others can have a big impact on self-efficacy. Positive feedback and encouragement can increase self-efficacy, while negative feedback or criticism can decrease it.
- Emotions: Negative emotions like anxiety and depression can decrease self-efficacy, while positive emotions can increase it.
- Physical health: Physical health can also affect self-efficacy. People who are in poor physical health may have lower self-efficacy, while those who are in good health may have higher self-efficacy.
- Cognitive appraisals: The way we think about our abilities and the tasks we need to do can have a big impact on self-efficacy. An individual who sees a task as challenging and achievable will have higher self-efficacy than one who sees the same task as impossible or too difficult.
- Role models and vicarious experiences: Observing others who are similar to oneself and who are successful in dealing with similar situations can increase one's self efficacy.

**Need and significance**

Achievement motivation and self-efficacy is very much important for students. In students, self-efficacy can affect achievement motivation in both positive and negative ways.

Achievement motivation of students influence their psychological and behavioural characteristics such as hope of success copying with failure persistence in adversity and willingness to take more challenging courses, which ultimately have an impact on their academic.

Self-efficacy is the extent or strength of one's believes in one's own ability to complete tasks and reach goals. It is the most important variable that affect academic performance. It is beloved that higher self-efficacy and self - esteem results in higher level of motivation in students.

Achievement motivation of students influence their behavioural and psychological characteristics. Self-efficacy has been influencing physical and mental health of students. So the study about achievement motivation and self-efficacy among college students is more important in this modern educational system.

**Key Terms**

Achievement motivation: The term achievement motivation refers to a desire to perform well or a striving for success

Self-efficacy: Self-efficacy refers to the extent to which one believes in one's own ability to complete tasks and reach goals.

**Methodology**

The procedure pertaining to the present study Achievement motivation and Self efficacy among college students.

Methodology has its own importance in scientific investigation because objectivity in many research investigations cannot be obtained unless it's carried out in a very systematic way and planned manner. This chapter deals with the approach and way this research has been conducted. It maps the methods and materials utilized for the research.

**Objectives**

The present study has out of following objectives:

- To examine the relationship between achievement motivation and self-efficacy among college students.
- To examine how achievement motivation effect among college student
- To examine how self-efficacy effect college students.

**Hypothesis**

The present study has set of following hypothesis:

$H_1$: There is a significance relationship between achievement motivation and self-efficacy among college students

$H_2$: There is a significant difference between male and female participants on achievement motivation

**Research design**

Correlation analysis is used in this study. A sample of 60 college students are taken.

The data was collected from the various colleges in Kerala.

Inclusion criteria

Subjects who are currently studying in colleges

Exclusion criteria

Subjects who are not currently studying in colleges.

**Measures**

Only questionnaire measures were used in the present study. All measures as widely used ones in psychological research with well-established psychometric properties.

**Tools**

**Achievement Motivation Inventory**

Achievement motivation inventory was developed by Immanuel Thomas and Muthee J.M in 2009. The scale is intended to assess the achievement motivation among learners. The inventory consist of 32 items in total were 18 items positively worded and 14 items were negatively worded. These items are arranged in random orders. A systematic procedure was followed by the researcher for the development of achievement motivation inventory.

**Scoring**

In achievement motivation inventory the scale has 32 items in total were 18 items were positively worded and 14 items were negatively worded items with positive and negative items are arranged randomly in final scale. The serial numbers of items with positive wording are 3,4,5,6,11,13,14,16,17,20,23,24,26,28,29,30,31 and 32. The serial numbers of items with negative wording are 1,2,7,8,9,10,12,15,18,19,21,25 and 27. The responses to the items are marked at a five point Likert format. The points are completely agree, mostly agree, agree to some extent, mostly disagree and completely disagree. The scoring weights given to these responses were 5,4,3,2 and 1 respectively for positively worded items and 1,2,3,4 and 5 respectively for negatively worded items. This scoring schemes ensured that higher score indicate higher level of achievement motivation and lower scores indicates lower level of achievement motivation

**Reliability and validity**

The reliability of achievement motivation inventory has been computed using Cronbach's alpha, which was found to be 0.749. At the same time, validity for the scale is claimed on the basis of systematic methodology followed by the researcher during development and standardization of the test.

**Academic Self Efficacy Scale**

Academic self-efficacy scale is prepared assessing the academic self-efficacy of secondary school students. Academic self-efficacy scale was proposed by Abdul Gafoor and Ashraf Muhammed in 2006. It is based on the self-efficacy theory of Albert Bandura [1977] who placed it within the framework of social cognitive theory. The scale is based on the idea that the efficacy of the students in each of the elimination of academic work would contribute to the overall academic self-efficacy.

**Scoring**

Subjects have to respond to each of the statements by choosing any one of the five alternatives "exactly true, nearly true, neutral, nearly false, exactly false''. The subject has to enter ''X'' mark on any one of the 5 alternatives, which suits his/her response best. For the positive statements five scores were provided for exactly true,4 for nearly true,3 for neutral,2 for nearly false and 1 for exactly false. Negative statements were scored in the reverse order.

**Reliability and validity**

The reliability and validity of academic self-efficacy scale depends on several factors including the quality of the items and the sample used to test it. Test retest coefficient of correlation=.85(N=30) split half reliability of the scale=.90(N=370)    Content validity was assured through the expert judgments of the face validity and inclusion of representative items from all dimensions of the construct (learning process, reading, comprehension, memory, curricular activities, time management, teacher student relationship, peer relationship, utilization of resources, goal orientation, adjustment and examination). Concurrent validity against general self-efficacy scale (Mattheas&Ralt Schwarzer 1979) r=.68(N=58)

**Procedure**

The researcher sent that the questionnaire to the students of various institution through the Google form. Questionnaire includes two scales: Achievement motivation inventory and Academic self-efficacy scale. Achievement motivation inventory includes 32 questions and academic self-efficacy scale includes 40 questions. The details of instruction were added in the first stage of each scale and participant were asked to read instructions carefully. A concern form was also given with the scale. The data collected through indirect methods with the help of Google form. After having collected data it was tabulated very carefully for analysing data. After the scoring the result can be interpreted and briefly communicated in the comprehensive manner.

**Statistical analysis done in the study**

**Pearson Correlation Coefficient**

A coefficient of correlation is simple index represent the relation between two variables can be computed in the different ways depending on the nature of data. The standard kind of correlation coefficient of correlation and are of the most computed is Pearson product moment coefficient (Pearson). Generally, the value can vary from the value of +1, which indicates perfect positive correlation (i.e., x increases then y also increases). Although (0) indicate the complete independence or all correlation methods ever and down to -1.00 means perfect negative correlation (i.e., x increases then y decreases). If 2 variable correlate with each other

there is a reason to believe in the existence of common relationship development be interfered from this information alone. Additions criteria would be regained.

**T-Test**

T-Test is a statistical test that compares the means of two samples. It is used in hypothesis testing with a null hypothesis that the difference in group means is zero and an alternative hypothesis that the difference in group means is different from zero. One sample, two sample, paired, equal and unequal variance are the types of t-test use for mean comparisons. T-Test is appropriate to use when you have collected a small, random sample from some statistical population and want to compare the mean from your sample to another value.

**Result**

The study on achievement motivation and self-efficacy was conducted among college students who use age in between 18-23. The tools used for the study were achievement motivation and self-efficacy scales.

Table 1: Demographic factors

| Demographic Data | | Number | Percentage |
|---|---|---|---|
| **Gender** | Male | 17 | 28% |
| | Female | 43 | 72% |
| **Age** | 18-23 | 60 | 100% |

Table 1 shows the demographic data of the subjects (collage students) were used as population. The subject consisted 28% male and 43% females. The age was in between 18-23 years. All the subjects are under this age group.

Table 2: Correlation between achievement motivation and self-efficacy among college students

| | | Achievement motivation |
|---|---|---|
| **Variable** | Pearson correlation | 0.253 |
| **Self-efficiency** | Sig(2 tailed) | 0.051 |
| | N | 60 |

Table 2 shows the correlation between achievement motivation and self-efficacy among college students. In reference to the table, it shows that there is no correlation between achievement motivation and self-efficacy among college students. There is no correlation between achievement motivation and self-efficacy, so the hypothesis ' there is a significant relationship between achievement motivation and self-efficacy among college students ' is rejected.    The self-efficacy has no role in determining the achievement motivation of student. There is no relationship between achievement motivation and self-efficacy in any way. Achievement motivation and self-efficacy are two distinct aspects. That is zero or no correlation.    A correlation of zero means there is no relationship between the two variables. In other words, as one variable move one way, the other moved in another unrelated direction. There is weak correlation between achievement motivation and self-efficacy, the study found that there was a significant zero correlation between self-efficacy and achievement motivation. Achievement motivation and self-efficacy are uncorrelated and there is no linear relation between them. However, they are Independent.

We can't find a study conducted on zero correlation between achievement motivation and self-efficacy. Different situational factors such as task difficulty; social support were influence the result of the study. In conclusion the relationship between achievement motivation and self-efficacy is complex multifaceted. Further research is needed to fully understand this relationship and the factors that influence it.

Table 3: Standard deviation, mean and t values of the achievement motivation.

| Gender | | N | Mean | Std deviation | t | Sig.2 tailed |
|---|---|---|---|---|---|---|
| | 1 | 43 | 10063 | 11.214 | 1.504 | .138 |
| Achievement Motivation | 2 | 17 | 9618 | 7.519 | 1.781 | .082 |

Table 3 shows standard deviation, mean, and t values of achievement motivation of male and female college students. The mean and standard deviation of achievement motivation of females are 100.63 and 11.214 respectively. The mean and standard deviation of achievement motivation of males are 96.18 and 7.519 respectively. The t value of achievement motivation is 1.504 in females and 1.781 in males.

The significant 2 tailed values or achievement motivation is 0.138 in females and 0.082 in males. Here overall the achievement motivation has no much difference in male and female. Therefore, the hypothesis 'there is a significant difference in achievement motivation in between male and female 'is rejected.

This result shows the gender is not valid in this study. Everyone have their own level of achievement motivation. The gender has no influence on achievement motivation. In addition, there are finding in studies, in this field which doesn't have effect on academic motivation. According to Pala (2019) the points in all the dimensions in academic motivation scale don't exhibit a significant difference by gender.

In general, this study is important in analysing the effect of gender on academic motivation. There are many studies conducted on this topic. This study presents an integrated conclusion to the study.

**Summary**

The study on "achievement motivation and self-efficacy among college students'' was conducted with the following objectives

- To examine the relationship between achievement motivation and self-efficacy among college students.
- To examine how achievement motivation effect college students.
- To examine how self-efficacy effect college students.

The study was conducted among college students in Kerala, India .60 students were selected by convenient sampling. The sample include both male and female. The age of the sample ranged from (18-23). Achievement motivation scale and self-efficacy inventory were used to assess the variable.

The relationship between achievement motivation and self-efficacy is complex and multifaceted. Further research is needed to fully understand this relationship and the factor that influence it. The evidence to suggest that achievement motivation does not significantly contribute to gender differences other factors such as socialization and cultural expectations may play a larger role in explaining gender differences in achievement motivation

**Conclusion**

There is no significant relationship between achievement motivation and self-efficacy among college students and there are no significant differences between male and female participants on achievement motivation.

**Limitations**

- Data collected mostly from one university.
- The data collection was done only in small region of Kerala.
- The number of questions is high.
- Period of research was short.
- The sample size is small for data collection

**Recommendation**

- Set specific and challenging goals setting clear and ambitious goals can provide a sense of direction and motivation to achieve them.

- Practice self-reflection regularly reflecting on one's strength and accomplishments can help to build self-awareness and confidence.
- Surround yourself with supportive people.
- Get feedback and improve yourself.
- Use self-assessment.

**Suggestions for further research**

- Longitudinal research can be conducted on larger sample of students.
- Research might be expanded to different universities and district. May reduce the number of questions.

**Personal reflection of the researcher**

This project is fresh to me and patience was the crucial and essential factor that was needed in such a project to complete. So undertaking a research project can be a rewarding and fulfilling experience to me, but it can also be interesting and challenging too. Communication was another extremely significant factor. It was essential to communicate and discuss with mates regularly because of the group project.

Firstly we need a topic to start a project, therefore finding a topic was our first and challenging part of our project. So we group members unite and select a topic from a lot of series of topics. Then we discuss with our guides related to our topic and she directed to find the tools for the topic and also its reliability and also validity. So we work for it and search for the tools in both online and offline. We got our tool from a study in internet. Then we check the reliability and validity. So we get the finding that it is highly reliable and also valid. So we select the topic entitled "Achievement motivation and self-efficacy among college students"

As we were classmates, we know to each other and we were excited to work together, but different people with different views may not always agree with one another. All of us worked effectively and made a team work to be a good outcome, we share ideas and discuss on it and took each one's suggestions and took the best one of it. We had seek help from internet and our guide. Although there were disagreement on some aspects, finally all of us had a great work together.

Apart from these, our guide was the one who made our project easier to complete and to make it a better one. She explain each and every processes to put forward .we had lot of mistakes and she make it clear and she had played a great role as guide. So with the help of guide we complete it successfully.

Talking about our project, it was aimed to examine the achievement motivation and self-efficacy among the college students. From this we claimed that the 2 variables are not correlated each other so the hypothesis was reject .There were other studies also showing similar results. As I believe that, our project was a successful one and can be used for future purpose. We got a good output through a successful teamwork.

Overall self-reflection is a personnel experience and it is a essential part of the research processes. It allows us to learn from our experience and improve our research approach, interactions and impact. I feel that personally and I have benefited significantly from this task as it has highlighted my strength and weakness and also has prepared me on how to approach future group work.

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# INTERNET ADDICTION AND SHYNESS AMONG ADOLESCENTS

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## Abstract

This study examines the mental health and quality of life using quantitative technique. An attempt was made to comparative study of internet addiction and shyness among adolescence. The sample of this study comprised 60 adolescence (30 male and 30 female adolescence.) drawn from malappuram district, Kerala. Instruments used for data collection were Personal Data Schedule, Internet Addiction Test (IAT) and Shyness Assessment Scale (SAT). The statistical technique Pearson product moment and t-test are used in the present study. The result indicates that there is no relationship between internet addiction and shyness among adolescence.

*Key words:* Internet addiction, shyness, adolescence.

## Introduction

Adolescence is the phase of life between childhood and adulthood, from ages 10 to 19. It is a unique stage of human development and an important time for laying the foundations of good health. Adolescents experience rapid physical, cognitive and psychosocial growth.

Internet Addiction is a new phenomenon, while shyness is not. Much of the time people use the Internet as a way to escape from reality or as a way to communicate with others without

having to worry about social consequences. The more frequent and common Internet use becomes, the more prevalent Internet Addiction will become.

This study is not attempting to prove the existence of internet addiction or shyness, but rather the correlation between the two. There have been many papers published about Internet Addiction (Hughes, Johansson & Gotestam, Tsai& Lin etc ...). Many have been published about relationships between Internet Addiction and social problems such as anxiety and depression (Johansson & Gotestam, Kaltial-Heino, Lintonen, & Rimpela) but it is difficult to find relationships between shyness and Internet Addiction. Of these published studies, many of them discuss the Internet problems concerning high school and college students. Middle school students are a very different group of students, whereas it is a very awkward stage and these students are developing mentally as well as socially. The internet does not have an age requirement and many adolescents have unlimited access to the internet. These adolescents are going through many changes, both physically and emotionally and it is generally considered a very awkward age, especially when it comes to communicating with others. I believe that it is this awkwardness that will make them susceptible to shyness and Internet Addiction.

## Internet addiction

The Internet has profoundly changed our everyday experience. Although initially conceptualized as a telecommunications standard to interconnect military computers worldwide it has become an integral part of modern life. We use the Web to find information and perform many activities, although for a great majority of Internet users the primary purpose for going online is to connect with others. The Internet has become a part of our daily lives, and who we are determines how we use it.

There are several activities that can be performed on the Internet: surfing, e-mailing, downloading, social networking, blogging, navigating in virtual worlds, gaming, chatting, and others. All of these can be used for work, leisure or interpersonal communication. Despite its inherent benefits, the Internet is not without its problems, especially when its use becomes excessive. Over the last decade, in parallel to the flourishing popularity of the Internet, the number of research studies addressing the addictive potential of the Internet has steadily increased. Regardless of this fact, there is still controversy whether addiction to the Internet is a

real, unique problem or just a transient social phenomenon that all modern technologies have gone through.

Internet addiction is when a person has a compulsive need to spend a great deal of time on the Internet, to the point where other areas of life (such as relationships, work or health) are allowed to suffer. The person becomes dependent on using the Internet and needs to spend more and more time online to achieve the same 'high'.

There is a range of behaviours that can be referred to as Internet addiction. Other terms for this addiction include Internet addiction disorder (IAD) and net addiction. Generally speaking, surveys suggest that males who are addicted to spending time online tend to prefer viewing pornographic websites, while females are attracted to chat rooms for making platonic and cyber sexual relationships.

**Signs of Internet addiction**

According to the American Psychiatric association, Internet addiction can include three or more of the following:

- The user needs to spend ever-increasing amounts of time online to feel the same sense of satisfaction.
- If they can't go online, the user experiences unpleasant withdrawal symptoms such as anxiety, moodiness and compulsive fantasising about the Internet. Using the Internet relieves these symptoms.
- The user turns to the Internet to cope with negative feelings such as guilt, anxiety or depression.
- The user spends a significant amount of time engaging in other activities related to the Internet (such as researching internet vendors, internet books).
- The user neglects other areas of life (such as relationships, work, and school and leisure pursuits) in favour of spending time on the Internet.
- The user is prepared to lose relationships, jobs or other important things in favour of the Internet.

**Problems/Effects of Internet addiction**

Internet addiction paves way for the following problems:

Saisan et al. (2010), has identified the various risk factors for Internet addiction.

- One suffers from anxiety: One may utilize the Internet to distract oneself from worries and fears. An anxiety disorder like obsessive-compulsive disorder may also result in a person's repeated use of internet to check e mails.

- One is depressed: The use of Internet may serve as an escape from the feelings of depression, but over use of internet can make things worse. Internet addiction further leads to isolation, stress, and loneliness.

- Presence of any other addictions: Many Internet addicts suffer from other addictions, such as drugs, gambling, alcohol, and sex.

- One lacks social support: Internet addicts frequently utilize social networking sites, instant messaging, or online gaming as a safe way of establishing new relationships and more confidently relating to others.

- One is an unhappy teenager: One might be wondering where one fits in and the Internet might feel more comfortable than real life friends.

- One is less mobile or socially active than one are used to: For example, one may be coping with a new disability that limits ability to drive. Parenting very young children can make it hard to leave the house or connect with old friends.

- One is stressed: While some people utilize the Internet to relieve stress, it can have a counterproductive effect. The longer spend online, the higher stress levels will be.

- Relationship Troubles: In almost 75% of the cases, Internet Addicts make use of applications such as chat rooms, instant messaging or online gaming as a safe way of establishing new relationships and more confidently relating to others (Rizk et al2007).

- Occupational Problems: Misuse of Internet among employees is a matter of serious concern among managers. A survey from the nation's top 1,000 companies exposed that 55% of executives believed that time surfing the Internet for nonbusiness purposes is undermining their employees' effectiveness on the job (Robert Half International, 1996).

Young (1996), identified that 53% of internet addicts surveyed reported serious relationship problems. Marriages, dating relationships, parent-child relationships, and close friendships have been noted to be seriously disrupted by "net binges."

**Different Types of Addiction**

The categories of Internet addiction include:

- Sex - The person uses the Internet to look at, download or swap pornography or to engage in casual cybersex with other users. This results in neglect of their real-world sex life with their partner or spouse.

- Relationships - The person uses chat rooms to form online relationships ('online dating') at the expense of spending time with real-life family and friends. This could include having online affairs ('cyber adultery').

- Games - This can include spending excessive amounts of time playing games, gambling, shopping or trading. This can lead to severe financial troubles..

- Information - The user obsessively searches for and collects information.

**Shyness**

Shyness is a sense of awkwardness or apprehension that some people consistently feel when approaching or being approached by others. Shyness is a response to fear, and research suggests that although there is a neurobiology of shyness -the behavioural repertoire is orchestrated by a specific circuit of neurons in the brain-it is also strongly influenced by parenting practices and life experiences.

Shyness is a feeling of fear or discomfort caused by other people, especially in new situations or among strangers. It's an unpleasant feeling of self-consciousness - a fear of what some people believe others are thinking. This fear can inhibit a person's ability to do or say what they want. It can also prevent the formation of healthy relationships.

Shyness is often linked to low self-esteem. It may also be one of the causes of social anxiety.

**Types of Shyness**

Shyness can vary in strength. Many people feel mild feelings of discomfort that are easily overcome. Others feel extreme fear of social situations, and this fear can be debilitating. Inhibition, withdrawal from social activities, anxiety, and depression can result from shyness. Shyness encompasses a broad spectrum of behaviours. It's normal for children to sometimes feel

shy in new situations. Perceptions of shyness may also be cultural. Some cultures, such as many of those in the United States, tend to regard it negatively. Others, such as some Asian cultures, tend to regard shyness more positively.

## Sub Types of Shyness

There are two categories of problematic shyness as suggested by Buss (1995), Fearful shyness and Self- conscious Shyness.

Anxious Shyness, develops in the first year of life and may involve a genetic component in the form of emotional reactivity. Emotional reactivity may lead the shy children to be more susceptible to negative social conditioning and to display fear and inhibition around others.

Self- Conscious Shyness, on the other hand, is a later developing form of shyness, which emerges around five to six years of age and coincides with the child's development of self and the ability to take on the perspective of others. These shy people are primarily aware of themselves as social objects and are comfortable in interpersonal situations where public aspects of the self are evaluated. He further hypothesized that self- conscious shyness develops from an excess of parental evaluation and negative comments about publicly observable aspects of the child.

On the other hand, Zimbardo (1977), recommended that two types of shy people exist: public and private. Publicly Shy, people don't make eye contact or smile, they blush a lot, they stutter, their posture is poor. They fit the stereotype of shyness. Privately shy, person hides it. They are typically bored or snobbish, poised or extroverted. These people cover up their internal anxieties very well.

## Causes of Shyness

About 15 percent of infants are born with a tendency toward shyness. Research has shown biological differences in the brains of shy people. But a propensity for shyness also is influenced by social experiences. It's believed that most shy children develop shyness because of interactions with parents. Parents who are authoritarian or overprotective can cause their children to be shy. Children who aren't allowed to experience things may have trouble developing social skills. A warm, caring approach to rearing children usually results in them being more comfortable around others. Schools, neighbourhoods, communities, and culture all shape a child.

Connections a child makes within these networks contribute to their development. Children with shy parents may emulate that behaviour.

In adults, highly critical work environments and public humiliation can lead to shyness. A teen who has had negative experiences when trying new things, speaking up, or when approaching people, may become less outgoing over time. Teens who grow up with overprotective parents may also be more likely to be shy.

**Components of Shyness**

There are three important components of shyness According to Vander Molen (1990).

- Fear (anxiety or arousal): People with shyness are strongly motivated to escape from social interactions because of the anxiety and negative arousal experiences in such situations. Cheek and Melchior (1990), identified that 40% to 60% of shy high school and college students have trouble with multiple symptoms of anxiety.

- Social Skills deficit (Behavioural inhibition): A common symptom of shyness is associated behavioural inhibition. Pilkonis (1977), found that compared with non-shy participants, shy participants spoke less frequently and allowed more silences to occur in their conversation. And broke silence less often compared with non-shy participants. Awkward bodily movements, gaze aversion and general social unresponsiveness are typical Behaviour patterns of shy individuals (Buss, 1984).

- Irrational thoughts (unrealistically maladaptive attributions of past interpersonal failures and negative anticipations of future interpersonal performance): Compared with shy individuals, non-shy individuals, display a self-defeating attribution style in which positive self- relevant events are considered due to luck and other unstable characteristics and negative self-relevant events are considered due to ability and other stable characteristics (Anderson & Amoult, 1985).

**Need and significance of the study**

Today, the budding generation is relying on technology more than ever for nearly everything; they are making the world come closer. Cyberspace is a fascinating world with lots of features, places, activities, people and subcultures to explore, and adolescents love it because

they get to experience it first hand, within the reach of their fingertips. But its dependence is making the adolescent groups to get aggressive in this realm. Due to the online un-inhibition effect, people argue, criticize, berate and insult others without much provocation. Cyberspace make adolescents more shyness and may push towards feeling discomfort in social.

A major downside of adolescents using these new age instruments is addiction combined with their immature social skills, this segment is then particularly vulnerable to the risks associated with failing to protect their privacy. The general consensus among psychologists says that addictions in past, such as substance abuse or addiction to television, can lead to addictive behaviours in future. Addictive behavior breeds addiction. Because internet addiction reduce social interaction and it may be lead shyness among adolescence.

## Statement of the problem

The present study is an attempt to know Internet addiction and Shyness among adolescence. Hence, the project is entitled as "Internet addiction and Shyness among Adolescents".

## Definition of key terms

Internet addiction

A Severe disorder that affects a person's ability to think rationally.

Shyness

Emotion that affect how a person feels and behaves around others.

Adolescence

Adolescence is the phase of life between childhood and adulthood from age 10 to 19.

## Method

Methodology can be defined as; it is used to provide a clear cut idea on what the investigator is carrying out his or her research. In order to plan in a right point of time and to advance the research work methodology makes the accurate platform to the investigator to mapping out the research work in relevance to make solid plans.

## Research design

The present study was based on quantitative research, quantitative research deals in numbers, logic and an objective stance. Quantitative research focus on numeric and unchanging data and detailed convergent reasoning rather than divergent thinking,(i.e., the Generation of a variety of ideas about a research problem in a spontaneous, free flowing manner)

Present study determine the relationship between internet addiction and shyness among adolescents .Data are collected the data from 30 males and 30 females adolescents .Data are collected through questionnaire to collect numerical data .The data was collected from Malappuram district.

## Variables

The following are the variables of the present study,

Interdependent variable: In this present study, interdependent variables is internet addiction.

Dependent variable: dependent variable of the study is shyness

## Objectives

- To study the relationship between internet addiction and shyness among.

- To compare internet addiction and shyness with respect to Gender.

- To compare internet addiction and shyness with respect to family type.

## Hypothesis

H1: There is a relationship between internet addiction and shyness among adolescents

H2: There is a difference on internet addiction with respect to Gender

H3: There is a difference on shyness with respect to family type

## Participants

60 adolescents from Malappuram district, Kerala including High school, higher secondary and college first year students (age limit 12 – 19) were considered as the participants of the study .purposive random sampling is used for sample selection. It means the process of

identifying a population of Internet and developing a systematic way of selecting cases that is not based on advance knowledge of how the outcome would appear.

Inclusion criteria

- Male and female adolescents are included.

- High school, higher secondary and college first year students were included.

Exclusion criteria

- Age below 12 and above 19 are excluded.

- People who do not use Internet are excluded.

**Instruments used**

In the present study, three instruments were used, personal data schedule to collect personal data of the participants and another two scales are used that is, internet addiction scale by Kimberly Young (1998) and shyness assessment scale by D'Souza (2006).

**Personal Data schedule**

Personal data schedule means any information relating to an identified or unidentified individual. In the study which include Name, age, Gender, family type, and area of participants.

**Internet addiction scale**

Internet addiction Test (IAT) was developed by Kimberly Young,(1998) and it consists of 20 questions was adopted to evaluate the respondent's level of Internet addiction. Each item is scored using a five point Likert scale,a graded response can be selected (0="does not apply" to 5 ="always") .it covers the degree to which internet use affect daily routine,  social life , productivity, sleeping pattern , and felling .The minimum score is 20 while the maximum is 100 and the Higher the score the greater the level of Internet addiction  .The instruments has exhibited good psychometric properties in previous researchers. For the adopted scales, reliability coefficient Cronbach alpha was calculated as 0.90 and spearman Brown value was

calculated as 0.86. Exploratory factor analysis was used to confirm the construct validity; and confirmatory factor analysis used to determine whether the factor model was correct.

**Scoring**

The IAT total score is the sum of the ratings given by the examine for the 20 item responses. Each item is rated on a 5 -point scale ranging from 0to 5 .The maximum score is 100 points. The IAT total score ranges, with the higher score representing the higher level of severity of Internet compulsivity and addiction. Total score <20 indicate normal users .The scores ranging from 20 to 49 indicate minimal users, while scores from 50 to 79 indicate moderate users and the scores from 80 to 100 indicate excessive users. The minimal users were classified as problematic internet users, while moderate and excessive users were categorized as internet addicts.

**Shyness Assessment Scale**

Souza(2006),of Maharajas college , University of Mysore, developed the shyness assessment test. . It consists of 54 items and requires the subject to indicate his /her response by marking yes/no / can't say .The items in the pertain to three domains of shyness cognitive/affective (32items) ,physiological ( 11 items) , item analysis of the scale using SPSS program resulted in Cronbach's alpha coefficient of 0.7119.further ,the scale had sufficient high validity.

The reactions for shyness can occur at cognitive, effective, physiological and behavioral ways and it may be triggered by a variety of arousal cues (Henderson & Zimbardo ,1998).

The physiological domain: physiological expressions of shyness include excessive perspiration, blushing, increased heart and pulse rate, dry mouth, trembling and uneasy feeling in the stomach.

The cognitive domain: At the cognitive domain, manifestation of shyness may include, fear of negative evaluation and rejections, self -consciousness, worry and rumination and self – blaming. Attributions.

The affective domain: Affective symptoms of shyness may include feelings of self-consciousness, embarrassment, insecurity and feelings of inferiority.

Behavioural component: It may include Reticence, speech dysfluencies, passivity and reduced eye contact, maintaining physical distance, lack of appropriate responses and avoidance of situations.

Table 4.1: The reliability indices of the domains were calculated by split half method, which are as follows;

| Sl. No | Domain | Reliability Index |
|--------|--------|-------------------|
| 1. | Cognitive/ Affective | 0.826 |
| 2. | Physiological | 0.792 |
| 3. | Action Oriented | 0.726 |

Table  4.2 Internal consistency

| Domains | Cognitive/Affective | Physiological | Action- Oriented |
|---------|---------------------|---------------|------------------|
| Cognitive/Affective | - | 0.51 | 0.53 |
| Physiological | - | - | 0.59 |
| Action – Oriented | - | - | - |

**Scoring**

The questionnaire requires the subjects to respond by marking yes/no/can't say. For scoring items , responses scored 2 for yes , 1 for can't say , 0 for no for positively worded items and scoring was reversed for negative items .High scores indicate high level of shyness and low score indicate low levels of shyness . Depending on the scores of the subject were classified into three levels of shyness-High, medium, and low.

Scores for all the statement were cumulated and if the subject scored 81 and above he / she is considered as having high levels of shyness.

**Procedure**

The present study is related to internet addiction and shyness among adolescents. For this study 60 adolescents (30 male and 30 female) are used. Internet addiction scale (IAT) and shyness assessment scale (SAT) are used as questionnaire to measure variable problem. The data were collected from adolescents (age limit 12-19) from Malappuram district.30 samples were collected through online and 30 through direct method.

The samples were collected only after giving the assurance about the confidentiality .The instruments are administrated to the subject individually by the investigator for each participants instruction were given very well for collecting data .

**Administration of instrument**

At the time of conducting internet addiction test investigator should establish the rapport and confidentiality was provided by convincing them the data .They would provide be used only for research purposes and their names would never be knowing to anyone .Then questionnaire is given to the  participants and the investigator gave the following instructions;

"The following questionnaire consists of 20 statements. After listening to the statement carefully , based upon the 5 -point  Likert scale ,please select the response (0,1,2,3,4,or 5)which best describe you on the low side ,0 indicates the statement is not applicable to your life , 1 indicates that the statement is something that you occasionally Engage in , 3 indicates that the statement is something you frequently engage in ,4 indicates that the statement is something you often engage in , and 5 indicates that the statement is something that you always engage in .If two choices seem to apply equally well , circle the choice that best represents how you are most of the time during the past  month . .Be sure to read all the statement carefully before making your choice. The statement refer to offline situations or actions unless otherwise specified."

At the time of conducting shyness assessment test, rapport were established and confidentiality was provided. Be used only for research purposes and their names would never be known to anyone. Instruction given, read each statement carefully and tick anyone option you find most appropriate. There have positively worded items and negativity worded item should read it carefully. Do not spend too much of the time on any statement. But be sure to read all the statement carefully before making your choice .After answering every statement, collect back the questionnaire and check it carefully and scored.

**Data analysis**

Data analysis is the collection and interpretation of the data in order to uncover patterns and trends .It can be used in the situation like gathering research interpretation, statistical modeling or Designing surveys and studies. Statistical technique used in this test were t-test and Pearson correlation co-efficient with the help of SPSS software.

**Pearson Product Moment Correlation**

Pearson product moment correlation was calculated to find out the relationship among two study variables.. The correlation co-efficient is a measure of linear associated between two variables, usually Karl Pearson's correlation is used. Values of correlation are always between-14+1 .For correlation co-efficient+1 indicates that two variables are perfectly related in a negative linear sense and a correlation co-efficient of zero indicates that there is no linear relationship between the two variables.

**Independent Sample t-test**

T-test is statistical significance indicate Confidentiality is that whether or not differences between the two groups. We use their list for comparing the mean of two samples even if they hence different no of replication in simple terms, the test compares the actual difference between two means in the relation to the variation in the data (expressed as the standard deviation of difference between the means) independent same t-test compares the means of two independent groups in order to determine whether there is statistical evidence that the associated population means are statistically different.

**Ethical consideration**

- Confidentiality has been maintained in keeping and not sharing the data.

- The participants were asked that the data would be used for research purposes only.

**Result and discussion**

The result chapter section simply and objection reports when you found, without speculating on why you found these results. The Discussion intercepts the meaning of the results, puts in context and explains why they matter. The chapter represents the result obtained in the

study and their expectations in order to meet the objectives and 3 hypothesis. The Statistical technique used were Pearson's product moment Correlation and t- Test.

For the present study of a total space consists of 60 samples 30 males and 30 females. The sample collected from the area of Malappuram district of Kerala.

H1: There is a significant relationship between Internet Addiction and Shyness among adolescents.

To verify the hypothesis, Karl Pearson's product moment Correlation test was used and result are showing in table 4.1

Table 4.1 Correlation between Internet addiction and Shyness

| | | **Shyness** |
|---|---|---|
| Internet Addiction | Pearson's Correlation | 0.193 |
| | Sig (2 tailed) | 0.139 |
| | N | 60 |

Table 4.1 shows the correlation coefficient between Internet addiction and Shyness is found to be 0.193 and significant 2 tailed value is 0.139 .This shows that there is no relationship between Internet addiction and Shyness. The hypothesis states that there is a significant relationship between Internet Addiction and Shyness among Adolescents. So, the hypothesis H1 is rejected. This shows that there is no relationship between Internet addiction and Shyness.

Significant 2 tailed value shows that there is no statistically significant relationship between two variables. It is important to note that while there may not be a significant correlation between Internet addiction and Shyness there may be still other factors that contribute to internet addiction, such as boredom, stress or depression. It is also possible that an individual's level of Shyness may related to other factors such as social anxiety or introversion.

This has been proven by a study conducted by Scealy et. al. (2002) who were surveyed internet use survey. The result of the study was that the shy and anxious people did not use

internet anymore. Although the study was not able to conclude Shyness was a contributing factor to Internet Addiction.

H2 : There is a difference on Internet Addiction with respect to Gender.

To verify this Hypothesis, t- Test is used and result is showing in table 4.4.

Table 4.2  Mean, SD, t- value  on Internet Addiction among Gender

| Variable | Group | N | Mean | SD | t-value | Significant (2 tailed) |
|----------|-------|-----|-------|--------|---------|-----------------------|
| IAT | Male | 30 | 41.79 | 15.091 | 1.694 | 0.096 |
| | Female | 30 | 36.03 | 11.062 | 1.677 | 0.100 |

Table 4.2 can be seen that the mean of Internet addiction for male is 41.79 and the main of internet addiction for female is 36.03. The SD of Internet addiction of male is 15.091 and female is 11.062 and the t- value is 1.694 and 1.677 for male and female respectively. The Significant 2 tailed value is 0.096 and 0.100 respectively for male and female. The hypothesis states that there is a difference on internet addiction with respect to gender. This shows that there is no difference on internet addiction with respect to gender. So, the hypothesis H2 is rejected.

There is some debate among experts about whether or not there is a significant difference in internet addiction between genders. One possible explanation for this discrepancy is that different studies use different definitions and criteria for what constitutes internet addiction internet. Additionally, factors such as cultural background, age and social economic status may play a role in development of internet addiction. Although internet addiction can affect anyone regardless to gender.

This has been proven by a study conducted by Sode and Jaimala Ashok (2020) on internet use and addiction among college students on 360 participants. (180 male and 180 Female). The result of the study shows that there was no gender differences in terms of internet addiction among college students. Both are using same level of internet.

H3: There is a difference on Shyness with respect to Family type.

To verify this Hypothesis t- Test is used and result is showing in table 4.3

Table 4.3 Mean, SD, t- value on Shyness among Family Type

| Variable | Group | N | Mean | SD | t-value | Significant (2 tailed) |
|---|---|---|---|---|---|---|
| Shyness | Joint | 13 | 52.15 | 23.115 | 1.435 | 0.157 |
| | Nuclear | 47 | 44.89 | 13.762 | 1.081 | 0.298 |

Table 4.3 can be seen that the mean score of Shyness for joint and nuclear are 52.15 and 44. 89 respectively. The SD of Shyness for joint and nuclear family type are 23.115 and 13.762 respectively. The t value is 1.435 for joint and 1.081 for nuclear. The Significant 2 tailed value is 0.157and 0.298 for joint and nuclear respectively. So, the hypothesis state that there is a significant difference in Shyness among Family type. This shows that there is no significant difference in Shyness among family types. So, this Hypothesis is rejected.

Family type  may refers to various factors such as single- parent families, two parent families , blended families or families with different number of children. Shyness on the other hand, refers to a personality trait characterized by discomfort or anxiety in social situations. Which may lead to avoidance or withdrawal. Family type is not a strong predictor of Shyness. Other factors such as genetics, individual temperament, life experiences or culture may play a more significant role in shaping once level of Shyness. However, it is important to note that one study alone cannot provide definitive answers and further research is needed to confirm or refute this finding.

## Summary and conclusion

A research summary is a professional piece of writing that describes research to some prospective audience. Main priority of a research summary is to provide the reader with brief overview of all study .A researcher summary generally contains the articles structures in which it is written.

The topic of the study is the Internet Addiction and Shyness among adolescence.  Studies have done on related to Internet addiction and a shyness. The study was designed to examine the

hypothesis there is a relationship between Internet addiction and shyness among adolescents, there is a significant difference between internet addictions with respect to Gender and there is a significant difference between Shyness with respect to family type. The following are the Objectives,

- To know whether any relationship between internet addiction and Shyness among adolescents.

- To know whether any difference between internet addiction and Shyness with respect to gender.

- To know whether any difference between internet addiction and shyness with respect to family type.

60 adolescents (30 males and 30 females) from Malappuram district, Kerala with age 12-19 were considered as participants for the study. In the present study made use of three tools. Personal data schedule, Internet Addiction Test (IAT) by Kimberly Young in 1995 and Shyness Assessment Test (SAT) by D ' Souza in 2006.

This that is Statistical techniques used for the data analysis in the study are Pearson Product Moment Correlation and Independent Sample t-test. The data analysed and interpreted in the basis of the test result.

**Tenability of hypothesis**

Table 5.1: Test Tenability of Hypothesis

| Sl. no | Hypothesis | Tenability |
|--------|------------|------------|
| 1. | There is a relationship between Internet Addiction and Shyness among adolescents. | Rejected |
| 2. | There is a difference on Internet Addiction with respect to gender | Rejected |

| 3. | There is a difference on Shyness with respect to Family type | Rejected |
|---|---|---|

**Major findings of the study**

The major findings of the study are to be found that

- There is no relationship between internet addiction and shyness among adolescence

- There is no difference on Internet Addiction with a respect to Gender

- There is no difference on Shyness with respect to Family Type.

**Implications of the study**

The Findings shows that there is no significant relationship between internet addiction and Shyness. That is Internet addiction and shyness are zero correlated. Which indicate that the amount of time an adolescent spend an internet does not have any effect on the level of Shyness. While considering the study internet addiction can manifest differently in male s and females. Cultural and social factors may play a role in development of internet addiction. Shyness in family type indicates that Family type can vary widely and different types of family structures may have different effects on Shyness.

The variables used In the study were internet addiction and shyness internet addiction and shyness can have significant implications for an individual health, social functioning and overall well-being. Internet addiction refers to excessive and problematic use of Internet, which can lead to negative consequences such as decreased social interactions academic or work performance and physical health problems. Internet addiction can also lead to mental health issues, such as depression, anxiety and low self-esteem.

Shyness on other hand, refers to Feeling of discomfort or anxiety in social situations, which can result in avoiding social interactions altogether. Shyness can limit an individual's ability to develop social connection, build relationships and engage in activities that promote personal growth.

The possible implications are shyness may not be a significant factor in development of Internet addiction. The lack of correlation between Internet addiction and shyness suggest that shyness may not be a significant factor in development of Internet addiction. This means other factors such as social anxiety loneliness or low self-esteem may not be more important in predicting Internet addiction. Another implication is Internet addiction may not necessarily be a consequence of shyness. Assumptions that Internet addiction is a consequence of social isolation may not hold true. Adolescence who are shy may not necessary be isolated or lacking in social connection, which explain that the lack of correlation between Shyness and Internet addiction.

Apart from these two implications, other factors may be more important in predicting Internet addiction. The lack of correlation between Internet addiction and shyness suggest that other factors such as impulsivity, emotional regulations and coping strategies may be more important in predicting Internet addiction among adolescents. The findings may not be generalized to all populations. It is important to note that lack of correlation between Internet Addiction and Shyness, Cultural and social factors may influence the relationships between Shyness and Internet Addiction and further research may be needed to explore these relationships in different contexts.

Internet Addiction and Shyness can be applied in various contexts. It can be applied in School settings. Studies can be conducted to define how internet addiction and shyness affect academic performance, socialization and overall well-being in students. In context of Family Dynamics, studies can be conducted to determine how internet addiction and Shyness affect Family relationships, Communications and Bonding. In context of Social Media and Online Communication, Researchers can explore how internet addiction and Shyness affect social media use, online communication pattern and social interactions.

Moreover, Psychology and Mental health Context, Researchers can study the relationship between Internet addiction and shyness in individuals who are seeking treatment for mental health disorder such as anxiety and depression.

Overall both Internet addiction and Shyness can significant impact on Adolescents lives, and it is essential to address these issues early to prevent further negative consequences.

**Limitations**

1. Biases: The participants may not be fully aware of their level of internet addiction or Shyness. They may not report their behaviours truthfully.

2. Sample characteristics: The sample (adolescents) which may not be representative of general population.

3. Period and Culture

4. Small Sample Size

**Suggestions for the study**

1. Increasing the sample size can have a better Result

2. It is better to conduct study in different Districts.

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