

A Comparative Study of General well-Being among the Government and Non Government Students

Vishal P.Parmar
M.Phil. Forensic Psychology, IBS
Gujarat Forensic Sciences University,
Gandhinagar, Gujarat-India

Mahesh D.Makwana
Ph.D.Scholar (Psychology)
School of Psychology, Gujarat University,
Ahmadabad, Gujarat

Abstract

The purpose of the current study is to investigate general well-being among 10th Standard Students. Well-being is based on nearly every facet of our lives, physical wellness and good healths are important for a positive sense of well-being. General Well-being is a state everyone wants to achieve to live a healthy and happy life. A total 120(60 boys\60 girls) students from government and Private schools participated in this study. The qualitative data were gathered via. Questionnaires including scales of general well- being. To determine difference between general well-being among private and Government schools boys and girls. The results revealed that there is no significant difference between general well-being among boys and girls from both schools.

Key word: General Well-Being ,Government, Non Government Students

The concept of well-being originated from positive psychology. Positive psychology has Emerged from the problem of the west. The focus of positive psychology is to study the improvement in the lives of individuals. The term 'well-being' is mostly used for specific variety of goodness e.g.-living in a good environment, being worth for the world, being able to cope with life, enjoying life etc (Singh and Shyam, 2007). Sociologists use the word 'well-being' mostly in the sense of 'good living conditions'; ecologists and biologists in term of 'livability' and politicians and social reformers refer to preconceptions of what a good living environment is like, such as good standard of living and social equality (Veenhoven, 2004). Many dictionaries and Roget's new thesaurus (1980) refers to well-being using words like happiness, full of life, vital, energy, interest and prosperity as well as health.

Well-being is an emerging concept of present arena. Pollard and Lee (2003) describe well-being as "a complex, multi-faceted construct that has continued to elude researchers' attempts to define and measures it". It is a dynamic state characterized by a reasonable amount of harmony between an individual's abilities, needs and expectations and environmental demands and opportunities (Levi, 1987). It transcends the limitations of body, space, time and circumstances and reflects the fact that one is at peace with one's Self and others (Johnson, 1986). It is connotative as a harmonious satisfaction of one's desires and goals (Checola, 1975). Pender (1982) conceptualized wellness to have 5 dimensions: self-responsibility, nutritional awareness, physical fitness, stress management and sensitivity to the effects of environment on wellness. Thus well-being thus has been described as a complex, multifaceted construct (Singh and Shyam, 2007). It can be concluded that it is an intangible and amorphous concept with perception differing from person to person (Wilcock et al., 1998) and situation to situation. It can be measured by using various well-being scales. The concept of wellbeing is attracting a lot of attention in this materialistic world these days. Many researches are carried out and carrying on different aspects of well-being. It is a concept that really makes people's life happy, healthy and fulfilled in every manner. Therefore, well-being leads to attaining the World Health Organization goal of "healthy mind in a healthy body in a healthy environment" (Shri, 2007). Well- being is health, happiness and prosperity (Shri, 2007). Health is a resource of everyday life and an essential part of well-being (Allardt, 1976); not the object of living (as cited in Khan, 2007). Both as individuals and as a planet, happiness is our ultimate reason for living (Eysenck and Eysenck, 1994).

Studies (Diener, 2004; Feldman, 2004 as cited in Shri, 2007) have reported that happiness produces good results in many areas for example

- Happy people on an average have stronger immune systems, and live longer.
- Happy people are more creative, helpful, altruistic, successful and spiritual.
- Happy people are better citizens having high self esteem.
- Happy people do better in social relationships.
- Happy people are optimistic and better able to cope with difficult situations.
- Happy people like themselves and other people more, and others also like
- The concept of well-being refers to optimum psychological functioning and experiences

TYPES OF WELL-BEING:

General Well-being

General well-being as a construct refers to the harmonious functioning of the physical as well as psychological aspects of the personality, giving satisfaction to the self and benefit to the society (Siwach, 2000). General Well-Being has been defined as encompassing people's cognitive and effective evaluations of their lives (Karatzias et al., 2006). Other terms have been used, interchangeably with the general well-being term, included health (Emmons and Kings, 1988) and quality of life (Quality of Life Wikipedia, 2010). In general well-being, main emphasis is given to the health because health is the general condition of a person in all aspects. It is a level of functional and/or metabolic efficiency of an organism, often implicitly human (<http://en.wikipedia.org/wiki/Health>). World Health Organization (1948) defined health as "a state of complete physical, mental, and social well-being and not merely the absence of disease or infirmity". In 1986, the WHO, in the Ottawa Charter for Health Promotion, said that health is "a resource for everyday life, not the objective of living. Health is a positive concept emphasizing social and personal resources, as well as physical capacities". The spiritual dimension on health was added much later in the WHO definition (Dalal et al., 2006).

Psychological Well-being

Psychological well-being is one component of health, which like psychological skills falls under the broad category of psychology (Edwards, 2007). Psychological Well-Being refers to positive mental health (Edwards, 2005). Psychological Well-Being or positive mental health extensively researched over the last two decades (Conway and Macleod, 2002; Ryff, 1989b; Wising and Van Eden, 1998). It is a diverse multidimensional concept (MacLeod and Moore, 2000; Riff, 1989; Wising and Van Eden, 1998), which develops through a combination of emotional regulation, personality characteristics, identity and life experience (Henson and Srivastava, 2001 as cited in Edward, 2007). McCulloch (1991) has shown that satisfaction, morale, positive effect, social support etc. constitute psychological well-being. A person high in psychological well-being not only carries higher level of life satisfaction, self-esteem, positive feelings, and attitudes, but also manages tensions, negative thoughts ideas and feelings more efficiently (Singh and Shyam, 2007). Psychological Well-Being can increase with age, education, extraversion and consciousness and decrease with neuroticism (Keyes et al., 2002). There are six distinct components of psychological well-being having a positive attitude towards oneself and one's past life (self-acceptance); having goals and objectives that give life meaning (purpose in life); being able to manage complex demands of daily life (environment mastery); having a sense of continued development and self-realization (personal growth); possessing caring and trusting ties with others (positive relations with

Spiritual Well-being

Recently, another dimension of well being that require sue consideration is the concept of spirituality, that has been considered by the World Health Organization an important aspect of health, in addition to Physical., Psychological., and Social health (Yogesh et al., 2004 cited in Samantaray and Tripathi, 2010). It is a concept derived from the holistic approach, in which a person is viewed as a multifaceted totality of body, mind, and spirit (Ben-Arye and Steinmetz, 2007). The first recorded expression of the term "Spiritual Well-Being" is attributed to the National Interfaith Coalition on Aging (NICA, 1975 cited in Samantaray and Tripathi, 2010) which suggested "Spiritual Well-Being" is the affirmation of life in relationship with God, self, community and environment that nurtures and celebrates wholeness (Ellison, 1983 cited in Samantaray and Tripathi, 2010). Moberg (1971) has conceptualized Spiritual Well-Being as two faceted, with both vertical and horizontal components. The vertical dimension refers to our sense of life well-being in relation to God (Paloutzian and Ellison, 1982). The horizontal dimension refers to a sense of life purpose and life satisfaction, with no reference to anything especially religious (as cited in Samantaray and Tripathi, 2010).

Friedman (1994) constructed a well-being scale. It is a self-reported scale consisted of a series of 20 opposite adjectives (e.g. angry and calm), designed to measure adult wellbeing. Respondents rate themselves by indicating the extent that each of the adjectives applies to them using a 10-point semantic differential-type scale. The rating ranges from 1 (e.g. very angry) to 10 (e.g. very calm). The Friedman Well-being Scale (FWBS) contains five subscales as follows: emotional

stability (ES; 10 items); self-esteem/self confidence (SE; 3 items); joviality (10; 3 items); sociability (SO; 3 items) and happiness (HA; 1 item). The scale provides both a total score reflecting the Friedman Well-being Composite (FWBC) and separate scores for each of its subscales. The reported internal consistency reliability estimates of the FWBS ranged from .92-.98. Split half reliability with college students ranged from .69 - .96. Test-Retest of the FWBC scores ranged from .73 for students and .83 for patient samples. The FWBS manual reports more than 100 correlations with clinical indexes as well as with measures of personality and emotional stability. It can easily be used to track changes over time during psychotherapy or during other intervention modalities such as addiction, self-help groups, personal growth of self-esteem programs etc. It serves as an excellent outcome measure of change in the current health environments.

Sandhu and Gupta (2001) created a well-being scale especially for the teachers in Navodaya Vidyalayas. It is a five point scale consisted of 50 items: 10 in five dimensions each- physical, mental, social, emotional and spiritual with very much, rather so much, average, to some extent and not so much responses. The well-being scale can be scored by hand by attributing the values 5, 4, 3, 2, 1 to response categories of positive items, and 1, 2, 3, 4, 5 to the negative items. High score on the scale indicates enhanced sense of well-being and low score denotes diminished sense of well-being. From the results of coefficient (.98), it can be said that this scale has a highly positive and significant correlation. The split-half reliability of the scale was found .96. Thus the results of content and concurrent validity and coefficient of correlation validate the well-being scale and ensured safe application.

Objective of the study:

The main objectives of the study were as under:

- To study difference between general well-being among government and Non-government schools.
- To study difference between general well being of boys and girls from both the schools.
- To study difference between general well being government school boys and girls.
- To study difference between general well being of non-government school girls and boys.

Hypothesis:

Ho₁ : There is no significant difference between general well-being among government and non-government schools

Ho₂ : There is no significant difference between general well being of boys and girls from both the schools

Ho₃ : There is no significant difference between general well being government school boys and girls

Ho₄ : There is no significant difference between general well being of non-government school boys and girls

Method:

Sample:

The present study was carried out on The initial sample for the present study consisted of 120 students studying in different senior secondary schools of government and non government schools of Ahmedabad. The sample included both Male and Female teenage students of 10TH standard student. A random sampling technique was used to collect the data.

Tool :

In the present investigation measure the As per the requirement of the study, the following tools were employed:

General Well-being Scale: General Well-being Scale (GWBS) is constructed and Standardized by investigator and supervisor (Kaila and Deswell, 2011). The scale consisted of 55 items represented in four sub-scales: physical well-being, emotional wellbeing, In the present investigation measure the general well-being scale was “general well-being scale was (GWBS) ” (Kaila and Deswell, 2011) was used. The scale consisted of 55 items represented in four sub-scales: physical well-being, emotional wellbeing, The reliability The measure of first half of the scale was then correlated with the measure of the other half. The correlation coefficient was found to be .989 for these “halves”. If the scores of the respondents on both halves have a high correlation, there is enough evidence of consistency in the test (De La Rey, 1978). Then the reliability coefficient of the total scale was calculated using Spearman-Brown Prophecy formula (Guilford, 1956): $rtt = 2r/1+r$ Where rtt = corrected reliability coefficient of the total test r = the reliability coefficient of the split half Hence $rtt = 2*.989/1+.989$ $rtt = 1.978/1.989 = .994$ Thus the obtained reliability scores through split-half and spearman-brown methods seem to be quite high for the General Well-being Scale. The construct validity of the scale was worked out by calculating the correlation of Different sub-scales of the general well-being scale with total scale score. The correlations ranged from .639 to .715. These high significant correlations Demonstrate that the subscales have high validity.

Procedure:

The boys and Girls who were studying in Secondary School of different Government and non-government Secondary School in Ahmedabad , were randomly selected & General Well-being Scale (GWBS) is constructed and Standardized by investigator and supervisor (Kaila and Deswell, 2011). was give & data was collected. The obtain data form 120 boys and girls were analyzed with the help of mean, SD and ‘t’ test.

Results & Discussion

The main objective of present study was to do study of general well-being of The secondary school students among boys and girls. In it statistical' method was used and their correlation was measured. Results discussions of present study are as under:

Table 1: Mean, SD and 't' value of general well-being in government and non-government school students

Variable	No.	Mean	SD	Mean diff	SED	't'	Sig
Government	60	230.43	17.36	1.95	1.15	1.70	NS
Non-Government	60	228.48	16.61				

Non significant at 0.05 level.

The above result table 1 we can see that 't' test was used to know the representing type of schools, number of student (30 male's \ 30 females) from Both the schools. In governmen school we had taken 60 students as samples and mean of this Samples government mean was 230.43 and SD was 17.36 & SED was 1.15. In non-government school same ratio of sample was taken mean was 228.48, SD was 16.61, and 't' value Was 1.70 , which is smaller than tabulated value. Therefore HO is accepted, hence there is no significant difference between general well-being among government and non-government schools. Both schools requires a certain number of credits In core subjects in order to graduate both schools administrators had putted Childs safety on top of their list of priorities. Thus, from this it was concluded that there is no significant difference between general well-Being among government and non-government school students.

Table 2: Mean, SD and 't' value of general well-being among boys & girls from both the schools

Variable	No.	Mean	SD	Mean diff	SED	't'	Sig
Boys	60	230.43	17.36	2.16	1.24	1.73	NS
Girls	60	228.27	16.70				

Non significant at 0.05 level.

The above result table 2 we can see that 't' test was used to know the representing gender (girls\boys) from both schools. Boys mean was 230.43, SD was 17.36 & SED was 1.24. girls mean was 228.27 and SD was 16.70 and 't' value was 1.73, which is smaller than tabulated value. Therefore Ho is accepted, hence there is no significant difference between general well-being among boys and girls from both schools. This is because students are mature enough and they have ability to deal with various conditions effectly .thus, from this it was concluded that there is no difference between general well -being boys and girls.

Table 3 : Mean, SD and 't' value of general well-being in government school boys and girls.

Variable	No.	Mean	SD	Mean diff	SED	't'	Sig
Boys	30	215.50	8.80	0.97	0.91	1.06	NS
Girls	30	214.53	10.13				

Significant at 0.05 level.

The above result table 3 we can see that 't' test was used to know the representing from government boy and girls. Boys mean was 215.50 and SD was 8.80 and SED was 0.91. girls Mean was 214.5 & SD was 10.13 and 't' was 1.06. which is smaller than tabulated value. Therefore Ho is accepted, there is no significant difference between general well-being Among government school boys and girls. Because the subject has positive attitude toward The self, accepts his or her good and bad qualities and feels positive past life. Thus, it concluded that there is no significant difference in general well-being among government boys and girls.

Table 4: Mean, SD and 't' value of general well-being in non-government school boys and girls

Variable	No.	Mean	SD	Mean diff	SED	't'	Sig
Boys	30	213.57	12.62	1.93	1.58	1.23	NS
Girls	30	215.50	8.80				

Non significant at 0.05 level.

The above result table 4 we can see that 't' test was used to know the representing non-government boys and girls. boys mean was 213.57 and SD was 12.62 & SED was 1.58. girls mean was 215.50 and SD was 8.80 and 't' value was 1.23, which is smaller than tabulated Value .therefore Ho is accepted .There is no difference in general well-being in non-government boys and girls .Because subjects has warm and relationships with others known purpose of their life. Thus it is concluded no significant difference in general well-being in non-government boys and girls.

Conclusion :

We can conclude by data analysis as follows:

1. There is no significant difference between general well-being among government and non-government students.
2. There is no significant difference between general well- being of boys and girls from Both schools.
3. There is no significant difference between general well-being of government school Boys and girls.
4. There is no significant difference between general well being of non-government school boys and girls.

REFERENCES:

1. Aknin, Lara B.; Norton, Dunn (2009). "From wealth to well-being? Money matters, but less than people think". *The Journal of positive psychology* 4 (6): 523–527.
2. Anderson, C.; Kraus, M. W.; Galinsky, A. D.; Keltner, D. (31 May 2012). "The Local-Ladder Effect: Social Status and Subjective Well-Being". *Psychological Science* 23 (7): 764–771.
3. Bouchard, Thomas J., Jr.; Loehlin, J.C. (2001). "Genes, evolution, and personality". *Behavior Genetics* 31 (3): 243–273. doi:10.1023/A:1012294324713.
4. Diener, Ed; Suh, E.M.; Lucas, R.E. & Smith, H.L (1999). "Subjective well-being: Three Decades of Progress". *Psychological Bulletin* 125 (2): 276–302.
5. Diener, E.; Chan, M.Y. (1984). "Happy People Live Longer: Subjective Well-Being Contributes to Health and Longevity". *Applied Psychology: Health and Well-Being* 3: 1–43.
6. DeNeve, Kristina M.; Cooper, Harris (1998). "The Happy Personality: A Meta-Analysis of 137 Personality Traits and Subjective Well-Being". *Psychological Bulletin* 124 (2): 197–229..
7. Diener, Ed (2000). "Subjective well-being: The Science of Happiness and a Proposal for a National Index". *American Psychologist* 55 (1): 34–43.
8. Fowler, J. H; Christakis, N. A (4 December 2008). "Dynamic spread of happiness in a large social network: longitudinal analysis over 20 years in the Framingham Heart Study". *BMJ* 337 (dec04 2): a2338–a2338. doi:10.1136/bmj.a2338. PMC 2600606. PMID 19056788.
9. Graham, Michael C. (2014). *Facts of Life: ten issues of contentment*. Outskirts Press. ISBN 978-1-4787-2259-5.
10. Lykken, David; Tellegen (1996). "Happiness Is a Stochastic Phenomenon". *Psychological Science* 7 (3): 186.
11. McGue, Matt; Bacon, Steve & Lykken, David (1993). "Personality stability and change in early adulthood: A behavioral genetic analysis". *Developmental Psychology* 29 (1): 96–109.
12. Mayer, J. D. & Salovey, P. (1997). What is emotional intelligence? In P. Salovey & D. Sluyter (Eds). *Emotional Development and Emotional Intelligence: Implications for Educators* (pp. 3-31). New York: Basic Books.
13. Norton, M.I., Dunn, E.W., & Aknin, L.B. (2009). From wealth to well-being: Spending money on others promotes happiness. Invited talk at the Society for Personality and Social Psychology, Tampa, FL
14. Okun, M. A.; Stock, W. A.; Haring, M. J.; Witter, R. A. (1984). "Health and subjective well-being: a meta-analysis". *The International journal of aging & human development* 19 (2): 111–132.
15. Røysamb, E., Harris, J., Magnus, P., Vittersø, J., & Tambs, K. (2002) Subjective well-being. Sex-specific effects of genetic and environmental factors. *Personality and Individual Differences*, 32, 211–223.
16. Smith, T; Eikeseth, Klevstrand & Lovaas (1997). "Intensive behavioral treatment for preschoolers with severe mental retardation and pervasive developmental disorder". *American Journal on Mental Retardation* 102 (3): 238–249.
17. Seligman, Martin E. P.; Csikszentmihalyi (2000). "Positive psychology: An introduction". *American Psychologist* 55 (1): 5–14.
18. Weiss, A.; Bates, T. C.; Luciano, M. (2008). "Happiness is a personal(ity) thing: The genetics of personality and well-being in a representative sample". *Psychological Science* 19 (3): 205–210. doi:10.1111/j.1467-9280.2008.02068.x. PMID 18315789.
19. Wilson, RM; Runciman, WB; Gibberd, RW; Harrison, BT; Newby, L; Hamilton, JD. (1995). "The quality in Australian health care study". *Med J Aust* 163: 458–471.