

Correlates of life satisfaction

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ABSTRACT

Life satisfaction is an overall assessment of feelings and attitudes about one's life at a particular point of time. The present study was designed to investigate the differences in the level of various components of life satisfaction on the basis of certain demographic variables i.e. gender, age, family type, and background. Life Satisfaction Scale (Alam &Srivastava, 2001) measuring six components of life satisfaction i.e. Health Satisfaction (H.S.), Personal Satisfaction (P.S.), Economic Satisfaction (E.S.), Marital Satisfaction (M.S.), Social Satisfaction (S.S.), Job Satisfaction (J.S.) and overall Life Satisfaction was used to measure Life Satisfaction. The sample of study consists of 240 subjects in the age range of 18-32 years. ANOVA was used to analyse the data. The results of the study indicate that Health Satisfaction is affected by gender and age; Personal Satisfaction is affected by family type, Economic Satisfaction and Marital Satisfaction are not affected by any of the variables in the study; Social Satisfaction is affected by gender, age, and background; and Job Satisfaction is affected by age, and family type. However the groups did not differ significantly on overall Life Satisfaction score in any of the demographic determinants of the study.

FULL TEXT

Headnote

Life satisfaction is an overall assessment of feelings and attitudes about one's life at a particular point of time. The present study was designed to investigate the differences in the level of various components of life satisfaction on the basis of certain demographic variables i.e. gender, age, family type, and background. Life Satisfaction Scale (Alam &Srivastava, 2001) measuring six components of life satisfaction i.e. Health Satisfaction (H.S.), Personal Satisfaction (P.S.), Economic Satisfaction (E.S.), Marital Satisfaction (M.S.), Social Satisfaction (S.S.), Job Satisfaction (J.S.) and overall Life Satisfaction was used to measure Life Satisfaction. The sample of study consists of 240 subjects in the age range of 18-32 years. ANOVA was used to analyse the data. The results of the study indicate that Health Satisfaction is affected by gender and age; Personal Satisfaction is affected by family type, Economic Satisfaction and Marital Satisfaction are not affected by any of the variables in the study; Social Satisfaction is affected by gender, age, and background; and Job Satisfaction is affected by age, and family type. However the groups did not differ significantly on overall Life Satisfaction score in any of the demographic determinants of the study.

Keywords: life satisfaction, demographic correlates

Life satisfaction is an overall assessment of feelings and attitudes about one's life at a particular point of time. According to Diener et al. (1985) life satisfaction refers to the overall cognitive judgmental aspects of subjective wellbeing and is likely to influence to everything around us. The life satisfaction indicator is a subjective proxy measure of quality of life that complements more objective indicators. People judge or evaluate how content they are with their general circumstances by comparing it to a standard that they deem appropriate for themselves. Furthermore, life satisfaction is not unidimensional, i.e., when assessing life satisfaction, individuals' overall

perception of life or their satisfaction with life as a whole must be considered (Diener et al., 1985). Based on the findings of a longitudinal study, Headey and Wearing (1989) concluded that individuals have a 'set point' for their subjective well being. While the level of life satisfaction could be negatively affected by certain life events this appeared to be temporary; over time, these participants reverted to their original base line level of life satisfaction. Life satisfaction comes from many different sources which are unique and different for every person. Life satisfaction can shift all the time from events, situations, family and friend implications and many different things that must be taken into consideration. It is frequently included as an outcome or consequence variable in work-family research (Hasnain, Ansari, Ali, & Sharma, 2012). Life satisfaction research with adults has shown that positive levels of life satisfaction are not just an epiphenomenon, that is a simple by-product of positive life experiences, personality characteristics, and so forth. Rather, many benefits accrue to those who typically experience high levels of life satisfaction. These benefits include positive outcomes in intrapersonal, interpersonal, vocational, health, and educational arenas (King, Lyubormirsky, & Diener, 2005). Low levels of life satisfaction are similarly predictive of a variety of negative outcomes, including mental and physical health problems (a review by Frisch, 2000). Life satisfaction is manifested through health, personal, economic, social and marital satisfaction. Life satisfaction scores vary by demographic variables, like gender, age, marital status, education, income, and work status. According to analysis of the data from the World Values Survey for countries in the Organisation for Economic Co-operation and Development (OECD), on an average in the OECD, life satisfaction is marginally higher among men, in the age group under 25 years and over 65 years. It is significantly higher among married than unmarried. In addition to this more education, higher incomes, and employment are also found to be predictors of higher life satisfaction. There is considerable disagreement in the literature regarding whether women report higher or lower levels of wellbeing than men. While some cross-country studies have found women to be happier than men (Telia, MacCulloch, & Oswald 2003; Easterlin, 2003; Blanchflower & Oswald, 2004), others find gender to be uncorrelated with levels of self-reported happiness (Kahneman & Krueger, 2006), and yet others find that women are less happy than men (Mroczek & Kolarz, 1998). In India Kant (1996) observed significant difference between males and females regarding life satisfaction, with females experiencing lower life satisfaction than men. Gender differences were also observed in the case of coping strategies when life dissatisfaction was high in females and low in males (Reddy & Srinivas, 1996) and in adjustment problems (Balachandran & Raju, 1997). To some extent, this might be related to the measures being used. Thus, in a recent review of the literature, Paul Dolan, Tessa Peasgood, and Mathew White (2008) find that women tend to report higher happiness (Alesina, Telia, & MacCulloch, 2004) but show worse scores on the happiness questions included in the General Health Questionnaire (Clark & Oswald, 1994). In this context, Frey and Stutzer (2002) argue that women may have a higher tendency to report both being very happy and very unhappy. This may be due to either their higher capacity for emotions or their greater expressivity of them (Wood, Rhodes, & Whelan, 1989). They also find that the gender effect often disappears when examining specific subgroups of the population, as for example those who cannot participate in paid work due to health problems (Oswald & Powdthavee, 2008) or those who provide informal care for others (Dolan, Peasgood, & White, 2008). Marcelli and Easterlin (2005) also find that happiness varies across the life cycle, rising for men and declining for women over the adult life cycle. Blanchflower and Oswald (2004) and Frey and Stutzer (2002), on the other hand, find a U-shaped pattern across the life cycle. More recently, Stevenson and Wolfers (2009) identify a falling trend since the 1970s in women's subjective well-being across industrialized countries, both in absolute terms and relative to men's. They put forward a set of possible explanations: the fact that women's life satisfaction has become harder to achieve, with aspirations across multiple and possibly conflicting domains; the rise in their aspirations and the possible concomitant change in reference groups; and wider socioeconomic forces that might have gender-biased impacts such as decreased social cohesion, increased anxiety and neuroticism, and increased household risk. Regarding the ruralurban differences in life satisfaction Sorensen (2013) in his study used the data from the European Values Study 2008 to investigate ruralurban differences in life satisfaction across the European Union. Rural dwellers were found to have a significantly higher life satisfaction than city dwellers when holding socio-economic factors constant. This is systematically observed

across three European Union country clusters defined by their level of affluence (gross domestic product (GDP)). The studies cited above reveal contradictory results on the role of demographic factors in Life Satisfaction depending on the economic and cultural aspects of the country. Therefore, a need was felt to carry out a study in the Indian context.

The present study was conducted with the aim to investigate the influence of certain demographic factors in determining the Life Satisfaction.

Method

Participants

The study was conducted on 240 subjects aspiring to get commission in armed forces coming from different parts of the country. This included 140 males and 100 females. The age range varied from 18 to 32 years. Educational qualification varied from 10+2 to Post Graduation. The stratified random sampling method was used for selection of sample.

Instruments

Life Satisfaction Scale (Alam & Srivastava, 2001): was used to measure the Life Satisfaction of the subjects. It is a 60 items scale comprising of six dimensions of Life Satisfaction i.e. Health Satisfaction, Personal Satisfaction, Economic Satisfaction, Marital Satisfaction, Social Satisfaction and Job Satisfaction. The subjects were required to rate themselves in form of 'Yes' or 'No'. 'Yes' response indicates satisfaction and is awarded a score of 1, whereas 'No' score indicates dissatisfaction and is awarded a score of 0. Hence the range of scores on the test could be between 1 to 60. Test retest reliability of the scale is .84. Criterion validity with Saxena's Adjustment Inventory is .74.

Statistical analysis

The scores of the subjects on various dimensions of Life Satisfaction as well as overall Life Satisfaction were compared in terms of gender, age, education, family type and background with the help of F test.

Comparison of scores on the basis of gender revealed significantly higher scores of male subjects on two dimensions of Life Satisfaction i.e. Health Satisfaction and Social Satisfaction indicating higher level of Life Satisfaction among males in these areas. Gender differences do exist because of biological and psychological differences. The level of satisfaction with Life among males and females can differ. When these differences interact with environment or situations they can lead to different outcomes, women are more satisfied with their lives when discriminatory practices were less prevalent in society. Being equal to their male counterparts is still a far cry for Indian women. A new report on "Men and Women in India 2012" brought out by the ministry of statistics and program implementation says that 46% of women (15-19 years) are not involved in any kind of decision making. Around 40% women have no access to money. The urban women take only 29.7% decisions regarding access to healthcare and 10.4% for purchasing major household items, and only 12.2% can decide whether to visit family and friends (Times of India, 4th Dec. 2012).

Age was found to be significantly affecting the level of Life Satisfaction in the areas of Health Satisfaction, Social Satisfaction and Job Satisfaction. The subjects in the age group of 18-26 years scored higher on Health Satisfaction and Social Satisfaction, whereas Job Satisfaction level was higher among the subjects above 26 years. The subjects in the age bracket of 18-26 years are the people with maximum energy and vigor, with lesser commitments at home and can afford to spend more time in maintaining social relationships. The subjects with more than 26 years of age tend to suffer unintended social losses brought about by increased commitments at home because of spouses and small children, as well as increased demands at the workplace. As a result older subjects appear to intentionally cull their peripheral social partners to focus on closer and more meaningful relationships. Regarding job satisfaction Herzberg et al. found a U-shaped relationship between age and time in the organization and job satisfaction. Job satisfaction was found to be high when people started their first job, but it subsequently declined until people reached their late twenties or early thirties, when it began to rise. Once satisfaction levels increased, they did so for the remainder of the work career. Herzberg's explanation for these findings was that initially high work expectations were not fulfilled, with a resultant drop in job satisfaction.

Increasing maturity and work experience led the employee to adjust his ambitions and work expectations to a more realistic level.

The findings on family type indicated that the subjects from joint families revealed higher level of Personal Satisfaction and Job Satisfaction than the subjects from nuclear families. An individual's life satisfaction is heavily influenced by his or her family's dynamic and characteristics. Family bonding, family flexibility, parental support are all huge factors into the individual's life satisfaction. The more bonding, flexibility, and support is there within a family the higher the individual's life satisfaction. In nuclear families due to high cost of living in the cities, both the parents pursue a career of their own. This may leave the children unguided. They find no one for advice or discussion. They spend their childhood without the much needed love and company of their parents. Infants spend their time in crèches. Overcrowded, poorly ventilated buildings and apathetic staff of the crèches have a negative influence on the well-being of the children. With working parents sometimes, the youth receives no guidance from the parents. In the joint family system the grandparents and other family members act as better substitute of parents than the servants in nuclear families. The older members are likely to guide the young ones. Being old and experienced, they are able to provide solutions to their problems. Therefore the older generation should be revered. They are an asset to the society.

The scores of subjects from urban and rural background did not reveal a significant difference in the level of Life Satisfaction except in the area of Social Satisfaction, where the subjects from rural background scored significantly higher than the subjects from urban background. Classic and contemporary sociological theories suggest that social interaction differs in rural and urban areas. Intimate, informal interactions (strong ties) are theorized to characterize rural areas while urban areas may possess more formal and rationalized interactions (weak ties). Visiting with friends, neighbors, or relatives turns out to have a stronger positive effect on subjective well-being of adults living in rural areas than those living in urban areas.

Conclusion

The findings of the study reveal that none of the demographic variables have a significant effect on the overall Life Satisfaction Score. However, certain domains of Life Satisfaction are significantly affected by the demographic determinants. The females revealed lower satisfaction than males in Health and Social domains. The younger age group revealed higher satisfaction in Health and Social domains, whereas Job satisfaction was higher among the older group. So far the family type are concerned the subjects from Joint families scored higher on Personal and Job Satisfaction domains. The findings on urban/rural background reveal a higher level of social satisfaction among the subjects from rural background in comparison to their urban counterparts (Carta, Eguglia, Caraci, Osso, &Sciascio, 2012).

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