

Original Research Article

Life satisfaction and associated social factors among college students in Kottayam district, Kerala

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ABSTRACT

Background: Fostering youth wellbeing is a pressing concern for educators and mental health professionals. It is generally acknowledged that among many constructs, understanding and promoting social support and life satisfaction are essential to achieving this goal. This study was conducted to assess the level of life satisfaction and social support and to determine the relationship of social support and socio-demographic factors with life satisfaction among students of arts and science colleges in Kottayam district.

Methods: A cross-sectional study was conducted among 464 undergraduate students from arts and science colleges of Kottayam district selected through two stage random sampling. Data were collected from the students using a self-administered questionnaire consisting of socio-demographic questionnaire, the satisfaction with life scale and the Multidimensional Scale of Perceived Social Support (MSPSS). Data analysis was done using SPSS version 25.

Results: Among the 464 study participants, majority (74.1%) were having high social support. 51(11%) students were found to be extremely satisfied with life and 96 (20.7%) satisfied with life. The life satisfaction scores among female study participants was found to be statistically significantly higher than males ($Z=2.433$, $p=0.015$). Life satisfaction had a statistically significant positive correlation with total perceived social support (Spearman's $\rho=0.391$, $p<0.001$) and perceived support from family (Spearman's $\rho=0.394$, $p<0.001$), friends (Spearman's $\rho=0.187$, $p<0.001$) and significant others (Spearman's $\rho=0.280$, $p<0.001$).

Conclusions: Regular assessment of social support and life satisfaction of college students should be done. Steps should be taken ensure adequate social support to college students.

Keywords: College students, Life satisfaction, Social support, Socio-demographic characteristics

INTRODUCTION

Youth are the strength of any society. They are an important human resource and a healthy percentage of young people is considered essential for the development of the nation. Therefore, the health and well-being of young people are of foremost importance. Today's youth are struggling with a number of issues which affects their mental health but also physical health as well-both directly and indirectly.^{1,2} Many psychological constructs have been studied as factors affecting physical and mental health of young people. Important among these include life satisfaction and social support.

Life satisfaction refers to the cognitive, judgemental component of subjective well-being the other two being positive affect and negative affect(affective or emotional components).^{3,4} According to Shin and Johnson(1978) life satisfaction is the "global assessment of a person's quality of life according to his own chosen criteria."⁵ People's level of life satisfaction depends on a standard they have set for themselves and not on externally set standards.⁴ As life satisfaction is based on overall cognitive assessments of quality of life, it is typically less prone to change as a result of short-term emotional responses to occurrences in life as in the case of positive affect and negative affect. Therefore life satisfaction is viewed as a more stable

component and the indicator most appropriate for use in research on young people's perceptions of their life circumstances.^{6,7} It was found that young people reporting high life satisfaction had better relationships with peers and parents and less intrapersonal distress compared to those with low life satisfaction.⁸ Adolescents with high levels of life satisfaction are less likely than those with low levels of life satisfaction to engage in externalizing behaviours due to stressful events.⁹ Low life satisfaction has been associated with a higher risk of suicide.¹⁰

Social support was defined by Cobb (1976) as "Information leading the subject to believe that he is cared for and loved, esteemed and a member of a network of mutual obligations."¹¹ Cohen and Syme (1985) defined social support as "resources provided by other persons".¹² Social support from family and others have been found to protect persons from adverse and stressful events through buffering effect.^{13,14} Decreased social support was found to be associated with increased risk of mortality and morbidity due to various diseases.¹⁵ Perceived social support and family factors have the potential to change a person's cardiovascular health behaviours-smoking, regular exercise, low cholesterol diet-directly by providing resources, or by altering the person's psychological state. Negative social interactions would lead to depressive symptoms, which in turn would have a negative impact on health behaviours.¹⁶ Among adolescents and college students social support is an important determinant of physical activity.^{17,18} Youth having higher social support from family were found to be less likely to involve in risky or unsafe sexual behaviour.^{19,20} Social support was found to be inversely related to suicide ideation, depression and anxiety, and alcohol and substance abuse.^{21-24,19}

Studies on social support and life satisfaction among adolescents and young adults are few in Kerala. This study was conducted to assess the level of life satisfaction and social support and to determine the relationship of social support and socio-demographic factors with life satisfaction among students of arts and science colleges in Kottayam district.

METHODS

A cross-sectional study was conducted among undergraduate students of arts and science colleges in Kottayam district between August 2022 and November 2022. 464 participants were selected through two-stage (random) sampling. Undergraduate students of both gender of age 18 or above were included in the study. Students who refused to give consent and blind students were excluded.

Clearance from institutional ethics and research committee and permission from respective colleges were obtained. Informed written consent and participant information sheet was obtained from the participant before the onset of study. Participants were clearly

explained about the aspects of study before data collection and confidentiality was maintained at all stages of the study. All financial expenses were borne by the researcher.

Data collection tools and techniques

A semi-structured, self-administered questionnaire consisting of socio-demographic characteristics, Multidimensional scale of perceived social support and the satisfaction with life scale was used. Socio-economic status was assessed using modified Kuppaswamy scale (2022).

Multidimensional Scale of Perceived Social Support (MSPSS) by Zimet, Dahlem, Zimet and Farley, 1988) was used as the measure of social support among study participants. It is divided into 3 subscales- friends, family and significant other. The scale contains 12 items rated on a 7 point likert-type scale ranging from 1- very strongly disagree to 7-very strongly agree. The mean scores of each subscale is calculated by adding items and dividing by 4 while the total mean score is calculated by adding all items and dividing by 12. To calculate mean scores: 1) Significant Other Subscale: Sum across items 1, 2, 5, and 10, then divide by 4, 2) Family Subscale: Sum across items 3, 4, 8, & 11, then divide by 4, 3) Friends Subscale: Sum across items 6, 7, 9, and 12, then divide by 4, 4) Total Scale: Sum across all 12 items, then divide by 12.

A mean score ranging from 1 to 2.9 is considered as low support, score ranging from 3 to 4.9 is considered to be moderate support and a score of 5.1 to 7 as high support.^{25,26}

The satisfaction with life scale (Diener et al- 5 items). A 5-item scale designed to measure global cognitive judgments of one's life satisfaction. The Satisfaction With Life Scale (SWLS; Diener, Emmons, Larsen, & Griffin, 1985) was used as a measure of the judgmental component of subjective well-being (SWB). Participants indicate how much they agree or disagree with each of the 5 items using a 7-point scale that ranges from 7- strongly agree to 1- strongly disagree. Scoring is kept continuous. Scores are between 5 and 35. Score are classified as- extremely satisfied (30-35), satisfied (25-29), slightly satisfied (20-24), slightly dissatisfied (15-19), dissatisfied (10-14), extremely dissatisfied (5-9).^{27,28}

Operational definitions

Satisfaction with life

Life satisfaction is the global assessment of a person's quality of life according to his own chosen criteria.⁵ Life satisfaction is the cognitive, global appraisal of life as a whole. Life satisfaction is seen as one element of subjective well-being. It is distinct from, but related to, psychological well-being.²⁹

Perceived social support refers to how individuals perceive friends, family and others as sources available to provide material, psychological and overall support during times of need.³⁰ Aided colleges refers to colleges receiving funds from government. Unaided colleges refers to colleges that do not receive any funds or aid from government.

Data analysis

Data was entered into Microsoft excel and analysed using SPSS version 25. Mean and standard deviation was calculated for continuous variables. Normality of the data was tested using Shapiro Wilk test. Categorical variables were expressed as frequency and percentage. Spearman’s

correlation was used to determine the relationship between social support and life satisfaction and non-parametric tests (Mann Whitney test, Kruskal Wallis test) were used to assess if there is a significant difference in life satisfaction between independent categorical variables.

RESULTS

Socio-demographic characteristics of the participants

The mean age of the study participants was 19.06 (SD 1.121) and median 19, ranging from 18 to 25 years. Majority of the study participants were females (55.2%).

Table 1: Distribution of the study participants based on socio-demographic profile.

Socio-demographic factor		Frequency	Percentage (%)
Age	19 and below	338	72.8
	Above 20	126	27.2
Gender	Male	208	44.8
	Female	256	55.2
Course of study	Arts	209	45
	Science	255	55
Year of study	First year	144	31
	Second year	216	46.6
	Third year	104	22.4
Type of college	Aided	335	72.2
	Unaided	129	27.8
Type of family	Joint/extended	93	20.0
	Nuclear	371	80.0
Regular participation in sports activities	Yes	126	27.2
	No	338	72.8
Participation in extra-curricular activities	Yes	231	49.8
	No	233	50.2
Socio-economic status	Upper	109	23.5
	Lower	355	76.5

Table 2: Distribution of study participants based on level of perceived social support.

Social support	High support (%)	Moderate support (%)	Low support (%)
Level of perceived social support(total)	344 (74.1)	113 (24.4)	7 (1.5)
Level of perceived social support from family	343 (73.9)	103 (22.2)	18 (3.9)
Level of perceived social support from friends	336 (72.4)	117 (25.2)	11 (2.4)
Level of perceived social support from significant others	309 (66.6)	115 (24.8)	40 (8.6)

Among the study participants, majority were from aided colleges (72.2%) and belonging to nuclear families (80%). While only 27.2% participated in sports activities regularly, nearly half of the participants were involved in other extra-curricular activities. Among the study participants, 6 were from upper class, 103 (22.2%) were from upper middle class, 273 (58.8%) lower middle class, 81 (17.5%) from upper lower and one participant from lower class. For further analysis upper and upper middle class were grouped as upper (109, 23.5%) and lower

middle, upper lower and lower class were grouped as lower (355, 76.5%) (Table 1).

Social support of the study participants

Mean score of total perceived social support of the study participants was 5.63 (1.03) and median 5.83, range of 4.91 and interquartile range 1.5. The mean score of perceived family support was 5.72 (1.28) with median of 6.25. Mean score of perceived friends support was 5.67

(1.17) with median of 6. Mean score of perceived support from significant others was 5.50 (1.58), median 6. The distribution of data was found to be non-normal according to Shapiro-Wilk test ($p < 0.05$).

Among the study participants, majority (74.1%) were having high perceived social support (total). They also showed high perceived social support from family (73.9%), from friends (72.4%) and from significant others (66.6%) (Table 2).

Life satisfaction of the study participants

In the study the mean score of life satisfaction was 21.22 (6.315) and median 22 range of 30 and interquartile range 9. The distribution of data was found to be non-normal according to Shapiro-Wilk test ($p < 0.05$).

Table 3 shows distribution of study participants based on life satisfaction. Among the study participants, only 11% were found to be extremely satisfied with life and 20.7% satisfied with life, while a significant portion were either slightly satisfied (28%) or slightly dissatisfied (25.9%).

Table 3: Distribution of study participants based on life satisfaction.

Life satisfaction	Frequency	Percentage
Extremely satisfied	51	11.0
Satisfied	96	20.7
Slightly satisfied	130	28.0
Slightly dissatisfied	120	25.9
Dissatisfied	46	9.9
Extremely dissatisfied	21	4.5
Total	464	100.0

Relationship between life satisfaction and social support

Table 4 shows that there was a statistically significant positive correlation between perceived social support (total) (Spearman’s rho (rs) =0.391, $p < 0.001$), perceived support from family (rs = 0.394, $p < 0.001$), perceived support from friends (rs =0.187, $p < 0.001$) and perceived social support from significant others (rs =0.280, $p < 0.001$) (Table 4).

Table 4: Correlation between social support and life satisfaction.

Correlation between social support and life satisfaction	Spearman’s rho(rs)	P value
Perceived social support(total) and life satisfaction	0.391	<0.001
Perceived family support and life satisfaction	0.394	<0.001
Perceived support from friends and life satisfaction	0.187	<0.001
Perceived support from significant others and life satisfaction	0.280	<0.001

Table 5: Life satisfaction and socio-demographic factors.

Socio-demographic factor	N	Mean rank	Median	U	Z	P value
Age	19 and below	338	229.53	21	20291.500	0.781
	Above 20	126	240.46	21		
Gender	Male	208	215.72	20	23133.500	2.433
	Female	256	246.13	22		
Course of study	Arts	209	239.21	22	25246.000	0.976
	Science	255	227.00	21		
Type of college	Aided	335	236.97	21	20111.500	1.157
	Unaided	129	220.90	21		
Type of family	Nuclear	371	232.56	21	17228.500	0.02
	Joint/extended	93	232.25	21		
Regular participation in sports activities	Yes	126	246.03	22	19589.500	1.328
	No	338	227.46	21		
Participation in extra-curricular activities	Yes	231	244.51	22	24136.500	1.924
	No	233	220.59	20		
Socio-economic status	Upper	109	241	22	18420.500	0.758
	Lower	355	229.89	21		

Life satisfaction and socio-demographic factors of study

The life satisfaction scores among female study participants was found to be statistically significantly

higher than males ($Z = 2.433$, $p = 0.015$) (Table 5). There was no statistically significant difference in the life satisfaction scores between first, second and third year of study ($H = 0.246$, $p = 0.889$) (Table 6).

Table 6: Life satisfaction and year of study.

Year of study	N	Mean rank	Median	H	P value
First year	144	231.88	22		
Second year	216	230.22	21	0.246	0.889
Third year	104	238.09	21		

DISCUSSION

The current study was conducted among 464 undergraduate college students of Kottayam district from four aided and two unaided colleges, to assess the level of life satisfaction and social support and to determine the relationship of social support and socio-demographic factors with life satisfaction among students of arts and science colleges in Kottayam district. A two stage random sampling technique was used. Data was collected using a self-administered proforma.

In our study mean score of perceived social support of the study participants was 5.63 (1.03) and the mean score of life satisfaction was 21.22 (6.315). This is comparable with the results of study conducted in Jordan among university students by Alorani and Alradaydeh.³¹ The perceived social support from family was higher than the perceived social support from friends and significant others. This can be attributed to the cultural peculiarities of our country where family bonds are generally strong and parents support their children financially and emotionally. This is consistent with the results obtained by Alorani and Alradaydeh in Jordan where cultural and family factors are similar to our country.³¹

The results of the current study indicates that there is a positive correlation between perceived social support of the study participants and life satisfaction ($r=0.391$, $p<0.001$). Perceived social support from family ($r=0.394$, $p<0.001$), friends ($r=0.187$, $p<0.001$) and significant others ($r=0.280$, $p<0.001$) were also positively correlated with life satisfaction. Parpoochi, Ahmadi and Sohrabi in Iran found that social support had a positive effect on life satisfaction ($p<0.01$).³² Similar result was obtained by Ahamar Khan in India. ($p<0.01$).³³

The difference in life satisfaction based on socio-demographic variables. Age, gender, course of study, year of study, type of college, type of family, regular engagement in sports activities, involvement in other extracurricular activities and socio-economic status were the factors under consideration. The life satisfaction among female gender was statistically significantly higher than among males ($Z=2.433$, $p=0.015$). This similar to the findings of previous studies by Kaya, Tansey, Melekoğlu, Çakıroğlu in Turkey and studies conducted in North India.³⁴⁻³⁶ A study conducted by Jaisri M. in Thrissur showed higher level of life satisfaction among females.³⁷ In the current study, there was no statistically significant difference in the life satisfaction based on any other socio-economic variable.

This study has some limitations. The study used a self-administered questionnaire and therefore susceptible to response bias due to self-reporting of responses. Being a cross-sectional study, the temporality of the relationship between the variables under study could not be established.

CONCLUSION

The mean age of the participants was 19.06 (1.121) ranging from 18 to 25 years. Among the study participants, majority (74.1%) were having high social support. Only 11% were found to be extremely satisfied with life and 20.7% satisfied with life, while 4.5% were extremely dissatisfied with life and 9.9% were dissatisfied with life. Majority were slightly dissatisfied with life (25.9%) or were slightly satisfied with life (28%). Therefore there is a scope for improvement in the level of life satisfaction of the college students. It was found that life satisfaction had a positive correlation with total perceived social support social support and perceived family support, friends support and support from significant others. The females were found to have higher life satisfaction compared to males.

Recommendations

Periodic assessment and screening of psychosocial health indicators of students to identify those with low social support and life satisfaction should be done in colleges. Provision of counselling services at all colleges should be made mandatory. Student self-help groups, mentorship programs involving faculty and senior students and active involvement of PTA can help in ensuring social support and thereby life satisfaction of the students. Further studies should be conducted to identify factors associated with psychosocial correlates of youth.

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