



RELATIONSHIP BETWEEN SOCIOECONOMIC STATUS AND PSYCHOLOGICAL WELL BEING: A STUDY ON THE CONTRACTUAL COLLEGE TEACHERS OF J & K.

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Abstract

A person's or a family's socioeconomic status (SES) is an indicator of how well off they are in terms of material resources, opportunities, and social standing. It can be used to make predictions about a person's health, education, and career prospects, among other things, and is thus often regarded as a measure of economic and social well-being. In general, higher SES is linked to more advantages and privileges, while lower SES is connected with more hardship and deprivation. However, SES can be a complicated and multifaceted concept that is impacted by many factors, and its measurement can change depending on the situation. Current study is conducted to assess the correlation between socioeconomic status and psychological health. Participants for the current study were 112 college contractual lecturers from Jammu. Data was collected using simple random sampling with the help of standardised tools through survey. After the data was analysed using correlation with the help of spss 21. Findings of the study reveal a significant negative correlation between socio economic status and psychological health.

Key words: Deprivation, Psychological health, Socioeconomic status, Resource, Well-being

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Psychological Well-being:

Emotional health, contentment with one's life, satisfying relationships, and self-improvement are just some of the many facets that make up a person's psychological well-being (Ryff & Singer, 2008). It's a way of being that helps people deal with the stresses of everyday life while also allowing them to pursue their own goals and realise their own potential (Keyes, 2002). Research has demonstrated that psychological well-being is related with a wide variety of favourable outcomes, such as improved physical health, stronger resilience, higher academic accomplishment, and increased productivity (Huppert & So, 2013; Seligman, 2011). Poor psychological well-being, on the other hand, is associated with a wide variety of unfavourable outcomes, including mental diseases, substance addiction, and dysfunctional social relationships (Keyes et al., 2014; Steel et al., 2014). To enhance psychological well-being, researchers have identified various strategies and interventions, including mindfulness practices, cognitive-behavioral therapy, and positive psychology interventions (Grossman et al., 2010; Seligman et al., 2005; Sin & Lyubomirsky, 2009). These approaches aim to improve individuals' self-awareness, cognitive flexibility, emotional regulation, and interpersonal skills, thereby promoting greater resilience, happiness, and well-being (Fredrickson & Losada, 2005; Ryff et al., 2016). According to Ryff and Singer (2008), psychological well-being is a multifaceted notion that incorporates a variety of dimensions of human functioning and experience. These components include emotional stability, life satisfaction, positive relationships, and personal progress. According to Keyes (2002), it is a state of being that helps individuals to effectively cope with the problems that life throws at them and to enjoy a sense of purpose, meaning, and fulfilment in their lives. Research has demonstrated that psychological well-being is related with a wide variety of favourable outcomes, such as improved physical health, stronger resilience, higher academic accomplishment, and increased productivity (Huppert & So, 2013; Seligman, 2011). Poor psychological well-being, on the other hand, is associated with a wide variety of unfavourable outcomes, including mental diseases, substance addiction, and dysfunctional social relationships (Keyes et al., 2014; Steel et al., 2014). Researchers have found a variety of methods and interventions, such as mindfulness practises, cognitive-behavioral therapy, and positive psychology interventions (Grossman et al., 2010; Seligman et al., 2005; Sin & Lyubomirsky, 2009).

These have been shown to improve psychological well-being (Grossman et al., 2010; Seligman et al., 2005). These methods seek to increase individuals' levels of self-awareness, cognitive flexibility, emotional regulation, and interpersonal skills, with the ultimate goal of fostering greater levels of resiliency, happiness, and well-being (Fredrickson & Losada, 2005; Ryff et al., 2016). Because it is regarded as such an important component of both one's general health and one's quality of life, psychological well-being has garnered the attention of researchers in a variety of disciplines, including medicine, psychology, and public health. The World Health Organisation defines mental health as a condition of well-being when an individual is able to deal with the typical pressures of everyday life, function well in the workplace, and make a positive contribution to the community in which they live (WHO, 2021). Therefore, it is critical for both individuals and society as a whole to prioritise the promotion of psychological well-being. In recent years, this idea has also garnered a growing amount of attention, mostly as a result of the global pandemic and its influence on mental health. The COVID-19 outbreak has produced problems and stressors that have never been seen before, such as social isolation, economic instability, and uncertainty about the future (Cao et al., 2020; Galea et al., 2020). These factors have had an effect on the well-being of individuals all over the world. As a direct result of this, there is an increasing demand for efficient therapies and policies that can enhance psychological well-being and minimise the negative repercussions of the pandemic (Holmes et al., 2020; Xiang et al., 2020). In this setting, having a solid grasp of the elements that play a role in one's psychological well-being and the evidence-based tactics that can be used to improve that well-being are both essential. For this reason, continued study in this field is absolutely necessary to improve mental health and to promote general well-being in both individuals and society.

Socioeconomic status:

A person's or a family's socioeconomic status refers to their relative economic and social standing in the larger society. High, moderate, and low are the three categories into which a family's or an individual's socioeconomic standing can be placed. A person's or family's income, level of education, and line of work can all be taken into account when classifying them into one of these groups (Wikipedia). Income and other measures of social status are associated with a wide range of health outcomes; findings also suggest that health care access, and psychological distress,

educational attainment, and financial wealth remain strong predictors of mortality risk (Saydah, Imperatore, & Beckles, 2013). Social structure and the position people occupy in that structure and the treatment they get in that particular position have a deep impact on one's well-being (Pearlin, 1989). There are also the evidences that lower economic status is associated with higher levels of psychological distress (Ross, 2017). High-socioeconomic status network context protects our mental health (Song, 2011). Many researchers have focused on different dimensions of socioeconomic status, what is lacking is the cumulative effect of socioeconomic status on psychological well-being; present study will definitely address this gap. Socioeconomic status is also a prime factor which also affects a nation's health as per capita income of a citizen decides socioeconomic status of the citizen that can have direct effect on nation's health. A healthy socioeconomic status make sure that, that particular individual will afford and utilize health care facilities, thus lower socioeconomic status can also effect psychological well-being indirectly too.

Literature review:

To determine if socioeconomic status heightens the impact of psychological distress on all-cause mortality, Lazzarino et al. (2013) conducted a study. Using stratified sampling, researchers identified 66518 adults aged 35 and above from the Health Survey for England who did not have cancer or cardiovascular disease at the time of enrollment and who were residents of private households in England between 1994 and 2004. The study found that people in lower socioeconomic categories had higher mortality rates when they reported higher levels of psychological anguish, and that people in higher socioeconomic categories had lower mortality rates even when they reported higher levels of psychological distress. A study of home-dwelling seniors (Ben, H., Dalgard, O. S., & Bjertness, 2012) found that income is an independent determinant for psychological distress while controlling for somatic health problems and socio-economic determinants. After controlling for all objective markers of socioeconomic status, health, depression, and long-term disease or disability were found to have a substantial relationship with SSS (Hackman, D. A., Farah, M. J., & Meaney, M. J., 2010). Reviewing research on the up side of well-being (Huppert, F. A., 2009), the authors found that demographic and socioeconomic factors are major determinants of psychological well-being due to their positive effects on cognitive

functioning, health, and social relationships. Low income is connected with both low life appraisal and low emotional well-being, whereas great income buys life satisfaction but not happiness, as found by (Diener, E., & Ryan, K., 2009). Researchers found a significant correlation between mean income over nearly three decades and all five measures of subjective well-being (Kaplan, G. A., Shema, S. J., & Leite, C. M. A., 2008). According to research (Dalgard, O. S., 2008), the prevalence of psychological distress increases with declining socioeconomic standing. An empirical study of the relevance of relative income to subjective well-being or happiness was conducted by Ferrer-i-Carbonell, A. (2005). A self-reported measure of life satisfaction is used in the analysis as a proxy for happiness. The GSOEP, a sizable German panel, provided the information used here. The study found that a person's happiness increased in proportion to their income relative to that of a reference group, meaning that both factors were equally relevant. Comparison of psychological discomfort among single mothers and married women in Germany using a cross-sectional study design (Franz, M., Lensche, H., & Schmitz, 2003). When compared to a control group, single mothers have lower income and lower levels of education, and they also have higher levels of psychological distress as measured by the SCL-90-R. Many researchers have examined the correlation between economic status and psychological wellbeing. The meta-analysis conducted by Li and Yang (2021) revealed a favourable relationship between socioeconomic status and psychological well-being, with greater socioeconomic status being associated with better mental health outcomes. Evidence for this link can be found in studies spanning many different populations and cultural contexts, such as those conducted by Goodman, Slap, & Huang (2003) and Sasson, Hayward, Wong, & Simon (2016). However, financial stress can also have an effect on mental health. Pikhartova, Pikhart, and Kubinova (2021) found a correlation between financial stress and negative psychological effects. This held true regardless of the researchers' attempts to control for factors including age, gender, and education. People from lower socioeconomic statuses have a harder time gaining access to mental health services, which may contribute to inequalities in mental health outcomes (Lim et al., 2021). Studies have shown that the relationship between socioeconomic status and happiness is moderated by characteristics such as social support, coping methods, and life events (Liem & Cavell, 2021; Williams et al., 2017). But

exactly how socioeconomic status affects mental health is still unclear. Some research (Sasson, Hayward, Wong, & Simon, 2016) has found that higher socioeconomic status is associated with better mental health outcomes because of greater access to educational and medical opportunities. Some studies have found that people who are better off financially are better able to deal with the negative effects of stress because they have access to more social support and coping mechanisms.

Negative Relationship between SES and Psychological Well-being:

Although some research has found a positive correlation between socioeconomic status and mental health, other studies have discovered the opposite. Constraints on one's financial resources have been linked to poorer mental health results. Financial stress has been linked to worse mental health outcomes, according to research by Pikhartova, Pikhart, and Kubinova (2021). This was the case even after the researchers accounted for demographic variables such as age, gender, and level of education. The COVID-19 pandemic has exacerbated economic inequality and put additional financial hardship on many individuals and families, making this study all the more important. Disparities in mental health outcomes may also occur because people from poorer socioeconomic origins may have trouble getting the help they need. Individuals with lower socioeconomic status were found to be less likely to seek and complete mental health treatment (Lim et al., 2021). Possible causes include insufficient funding for mental health services and a lack of awareness or acceptance of the need for such services among the general public.

Complex Relationship between SES and Psychological Well-being:

Overall, there are many elements that shape the complex relationship between socioeconomic status and mental health. Higher socioeconomic status is linked to improved mental health outcomes, however this association is not always clear. Social support, coping strategies, and life events may buffer the effect of socioeconomic status on mental health (Williams et al., 2017). One can have better mental health outcomes, for instance, if they originate from a lower socioeconomic status background but have strong social support and efficient coping methods than if they come from a higher socioeconomic status background but lack these resources.

Objectives:

To assess the cumulative effect of socioeconomic status on Psychological Well-being.

Hypothesis:

There will be a significant positive correlation between socioeconomic status and psychological well-being.

Sampling:

Sample will consist of 103 college teachers working on contract basis in Government colleges of kathua and Billawar. Sampling technique used to extract the sample is Purposive.

Tools Used:

To assess psychological well-being Psychological Well-being scale developed by (Spitzer RL, Williams JBW, Kroenke K, et al., 2000) is used. It is a 8 items scale measuring psychological health on 3 point likert scale.

Socioeconomic status (SES):

Socioeconomic status is assessed using Kuppuss wamyscales updated version.

Results and discussions:

Table 1 Descriptive Statistics

	Mean	Std. Deviation	N
PWB	7.0484	4.65187	124
SES	16.9919	6.42340	124

Mean for psychological wellbeing is 7.04 and SD=4.65, similarly socio-economic status is having M=16.99 and SD=6.42.

Table 2 Correlation between psychological health and socio-economic status

Variable	PHQ	SES
PHQ	1	-.303**
SES		1

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

Table 2 demonstrates the correlation matrix among psychological wellbeing and socio economic status. Psychological wellbeing are negatively correlated with socioeconomic status ($r=-.303^{**}$ $p < 0.01$). Results are in line with the previous studies and are suggesting that socioeconomic status (often referred to as SES) is connected with the outcomes of mental health conditions. Studies have demonstrated that a lower socioeconomic status is connected with greater incidence of mental health issues such as depression, anxiety, and substance misuse (Adler & Stewart, 2007; Dohrenwend, Levav, Shrout, Schwartz, & Naveh,

1992; Lorant et al., 2003). These findings have been seen in a variety of different populations. For instance, Lorant and colleagues (2003) discovered that people with lower socioeconomic status had a higher prevalence of common mental diseases, such as depression and anxiety, in comparison to those with better socioeconomic status. Individuals with lower socioeconomic status had a higher prevalence of alcohol and drug use disorders, as was discovered by Dohrenwend and colleagues (1992) in a study that investigated the relationship between SES and substance use disorders. Exposure to chronic stresses, lack of access to resources and social support, and limited chances for social and economic mobility are some of the probable mechanisms that have been hypothesised to explain the association between socioeconomic status and mental health outcomes (Adler & Stewart, 2007). However, it is important to keep in mind that the connection between socioeconomic status and mental health is intricate and multidimensional, and that not all studies have discovered a direct link between the two (Bjorkenstam, Burstrom, Brannstrom, Vinnerljung, & Bjorkenstam, 2018).

Limitation:

Studies like this needs to focus on the causal factors also. This study is only based on the relationships hence it does not provide a direct connection between SES and mental health. Cross sectional design of the study is another limitation. Lack of support of authentication from subjects regarding the socio economic status can be another limitation.

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