Original Article

Access this article online



Website: www.jehp.net DOI: 10.4103/jehp.jehp 1528 23

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Received: 26-09-2023 Accepted: 20-12-2023 Published: 29-08-2024

Assessment of self-satisfaction, happiness, and quality of life (QoL) among adults: An online survey

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Abstract:

BACKGROUND: Health and QoL are essential for every individual. Regardless of their psychological status, every individual needs an optimum level of Self-satisfaction, Happiness, and QoL. The paper aimed to explore the QoL of the Indian population concerning their day-to-day needs.

MATERIAL AND METHODS: The study used an online survey method to assess the QoL of Indian adults. The Questionnaires have been sent to more than 3000 participants through social media like Emails, Facebook, Instagram, Telegram, and WhatsApp. A total of 200 participants filled out the Google form completely. The data was collected from March 2022 to June 2022. The collected data was analyzed by using SPSS (version 24).

RESULTS: The Overall mean was found to be 3.25 [N = 200, Range 18-36 above, Mean = 3.25 and SD = 1.04]. A few important dimensions are mentioned, such as QoL (50% people with mean = 4.00), Self-satisfaction (38% people with mean = 4.00), enjoyment in life (45% people with mean = 4.00), sleep (42% people with mean = 4.00), sex life (36.5% people with mean = 3.00), constant strain (33.5% people with mean = 3.00), loss of self-confidence (26% people with mean = 3.00).

CONCLUSION: The study indicates low scores on self-satisfaction, QoL, and above-average scores for happiness. There must be interventions to improve the levels of psychological functioning among adults concerning these variables, which would, in turn, help improve the overall adults' functioning. The relevant interventions need to be planned to improve self-satisfaction, happiness, and QoL by improving daily activities.

Keywords:

Adults, depression and quality of life, happiness, mental health

Introduction

OcL is one of the indicators of overall well-being, including happiness and satisfaction with life.^[1] The QoL is defined as "An individual's perception of their situation in life, within the juncture of culture and value systems in which they live and in association to their goals, expectations, standards, and concerns."^[2] The QoL is an extensive conceptualization that includes interdependence, spiritual, and environmental aspects. A study indicates health and QoL have an importance on

This is an open access journal, and articles are distributed under the terms of the Creative Commons Attribution-NonCommercial-ShareAlike 4.0 License, which allows others to remix, tweak, and build upon the work non-commercially, as long as appropriate credit is given and the new creations are licensed under the identical terms. environmental factors concerning an individual's life. The study also stated, "As the environment changes, people have the opportunity to grow, develop, and transform the meaning of life for everyone."^[3] A study by Pieh *et al.* found the average psychological score of the WHOQOL-BREF questionnaire is significantly low,^[4,5] which also reported lower scores for younger adults, women, non-working individuals, and low-income populations.

A study highlighted that people who were more dissatisfied with QoL for the environmental dimension had lower

How to cite this article: Dehury RK, Gadiraju P, Singh P, Vanlalhruaii C, Dehury P, Devaraju K, *et al.* Assessment of self-satisfaction, happiness, and quality of life (QoL) among adults: An online survey. J Edu Health Promot 2024;13:312.

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adherence to containment measures. People who have perceived higher dissatisfaction with good financial resources, physical safety, and availability and quality of health and social assistance may have a more passive attitude linked to a sense of helplessness concerning personal contribution, which could spread contagion.^[6] Moreover, feelings of helplessness and passivity during a COVID-19 pandemic may result from a high perception of risk that can help promote the adoption of healthy strategies to minimize the spread of infection.^[7,8]

The general population with improper management of day-to-day activities would tend to show low self-satisfaction levels and a lack of happiness. It leads to lower QoL than the general population, who are good at managing activities on a scheduled basis and engaging themselves in happiness-seeking behaviors. People with low self-satisfaction and unhappiness might have poorer QoL than patients at risk of life-threatening diseases.^[9] Adults with proper management of day-to-day activities would tend to show good self-satisfaction levels and increased happiness.^[10]

Evidence found that lack of QoL was the reason for the lack of happiness.^[11] Happiness is an essential ingredient in every human's daily life and was introduced as an essential constituent of health.^[12] It is seen to have an impact on several positive aspects of life.^[13] Happiness is a notable trait for people, affects the mental health status of many, and is influenced by various mental capabilities.^[14] Numerous studies indicate the significant correlations between happiness and general health outcomes denoted in health-related QoL, such as adherence to better physical exercise, a healthy sleep schedule, and a healthy diet.^[15,16] A study indicates that individuals who engage in happiness-related activities tend to indulge in the least unhealthy behaviors and have better QoL than unhappy people who always try to engage in health-risk behaviors.^[17] A study noted that the happiest people achieve better life outcomes in better coping skills, good social relationships, more significant financial benefits, physical health, greater health-related QoL, and longevity.^[18] Another study also proved that having an extraordinarily satisfactory life, a healthy lifestyle, and the happiest and good life results in better QoL.[19]

This study measured self-satisfaction, happiness, and QoL among the Indian adult population. It identified important components concerning psychological aspects applicable to day-to-day activities. It has established the relationship between self-satisfaction, happiness, and QoL in the general population, including family, friends, and social support groups.^[20,21] Empirical studies indicate that Self-satisfaction, Happiness, and QoL are considered healthy mental health indicators.^[22] Various studies consistently indicated that Self-satisfaction is positively related to healthy aging and more positive working situations.^[23-25] The present study aims to understand the underpinnings of adults concerning their day-to-day life activities and the impact of those activities on dimensions such as Self-satisfaction, Happiness, and QoL. The study describes the level of self-satisfaction and QoL of adults. It is also assessing the level of happiness and QoL of adults. The study has explored the relationship between adults' self-satisfaction, happiness, and QoL.

Understanding the levels and determinants of self-satisfaction, happiness, and QoL can help policymakers and stakeholders tailor their efforts to improve the overall welfare of the population. At the individual level, understanding the factors contributing to self-satisfaction, happiness, and QoL can help people make informed decisions about their lives. It can guide individuals in setting priorities, making lifestyle choices, and fostering relationships that contribute to their well-being. The research on self-satisfaction, happiness, and QoL among Indian adults promotes individual well-being, fostering societal progress and informing effective policymaking. It helps in making a holistic understanding of the factors that influence happiness and QoL in a diverse and dynamic nation like India and other developing countries. The study ultimately contributes to a more prosperous and satisfied life as well as society.

Materials and Methods

Study design and setting

Self-satisfaction, happiness, and quality of life (QoL) are crucial aspects of an individual's well-being and have been of growing interest in a multidisciplinary approach. The study aims to explore the levels of self-satisfaction, happiness, and QoL among Indian adults through an online survey. The study seeks to understand the factors influencing these dimensions and the overall well-being of the Indian adult population. This study is designed as a cross-sectional survey, collecting data at a single point in time from March 2022 to June 2022. The cross-sectional survey was conducted through an online Google form for collecting data. The study gathered information from a wide and diverse group of participants conveniently.

Study participants and sampling

The study was conducted on self-satisfaction, happiness, and quality of life (QoL) among Indian adults. Two structured questionnaires were sent through social media platforms such as e-mail, Instagram, Facebook, and WhatsApp. A Google form was forwarded to various groups and online websites. The questionnaires were sent to more than 3,000 Indian adults across countries. The respondents were requested to carefully fill every section of questions with proper understanding. A total of 200 respondents filled out the Google form with accurate details. Forty-seven respondents were excluded from the analysis due to incomplete responses.

Data collection tool and technique

Two structured questionnaires were forwarded to the Indian adults through different social media platforms. The WHOQOL-BREF questionnaire's original version was the WHOQOL-100 scale, and its shorter version consisted of 26 items adopted by WHO.^[2] The tool covers four important dimensions of QoL for each individual: Physical Health (7 items), Psychological Health (6 items), Social Relationships (3 items), and environment (8 items). The remaining two items address the general health domain, requiring respondents to rate their health and overall QoL satisfaction. The 5-point Likert scale ranges from 1(very dissatisfied/very poor) to 5 (very satisfied/ very good), with higher scores indicating higher QoL.^[26] The reliability for the global scale of WHOQOL-BREF was established through Cronbach's Alpha and was found to be. 889, considered satisfactory statistical reliability. The General Health Questionnaire (GHQ) consists of 12 items,^[27] each assessing the severity of a mental problem over the past few weeks using a 4-point Likert-type scale (ranging from 0 to 3). The total score ranged from 0 to 36. The positive items were corrected from 0 (always) to 3 (never) and the negative ones from 3 (always) to 0 (never). High scores indicate a lack of good health, whereas low score indicates better health. The standardized Alpha was found to be 0.78 (Likert Method).

Data analysis

The Google form data was exported to SPSS (Version 24) to analyze the results. The frequency of demographic details such as age, gender, religion, educational levels, marital status, occupation, and residence were presented [Table 1]. Descriptive statistics were calculated for the three studied variables: self-satisfaction, happiness, and QoL among adults. Frequency and mean scores for both measures (WHOQOL-BREF-26 and GHQ-12) were calculated [Table 2]. Correlations of important sub-dimensions from two questionnaires for the participants' self-satisfaction, happiness, and QoL have been presented. However, there were four important dimensions in the WHOQOL-BREF-26 scale. The study considered every item from both scales as an individual entity in explaining three dependent variables: self-satisfaction, happiness, and QoL, which can be observed in correlation Tables 3 and 4.

Ethical consideration

The University of Hyderabad ethics committee (UH/IEC/2021/2) approved for ethical clearance. The committee members have cleared both the questionnaire and informed consent. Each participant has obtained informed consent. Respondents are given the right to

withdraw and not to answer the questions if they are uninterested. The confidentiality and anonymity of information were kept carefully.

Results

The details of demographic representation was analyzed. Table 1 shows the distribution of respondents' demographic characteristics (gender, age, education, marital status, education, occupation, and place of residence). In all, 200 Indian adults aged 18 years and above were administered the questionnaire.

The study presents that 53% of the respondents were male. The age of respondents is divided into three categories. Most respondents (50.5%) are between 18 and 25 years old. About 42% of respondents are in the 26-35 age group, and only 7.5% are in the 36 and above age groups. Based on educational status, 11.5% of respondents had intermediate qualifications. Nearly 89% of the respondents had graduated. The respondents' occupation shows that 30.5% were employed, and half of the respondents were students. The marital status of the respondents shows 69.5% were unmarried. Based on the residences, 57.5% stayed in urban areas.

Table 2 shows that the overall mean of 3.25 [N = 200, Range 18-36 above, Mean = 3.25 and SD = 1.04]. Among 38 items from both the constructs, a few important dimensions necessary for the current study are mentioned here. Around 13 dimensions such as QoL, health-related satisfaction, presence of meaning in life, daily energy levels, problems facing ability, sleep satisfaction, self-satisfaction, work capacity, support from friends, persuasions, body appearance, transportation satisfaction, and decision making are shown to be positive and effective in the daily lives of participants with the appreciable response score ranging between 70% and 76.50% with the mean score above 3.50 to 4. Subsequently, nine dimensions such as enjoyment in life, healthy physical environment (surroundings), ability to concentrate, satisfaction with personal relationships, safety in life, monetary support, informational availability, spending time in leisure activities, and feelings of reasonable happiness, are shown to be helpful for participants performing at an average level of responses ranging from 54% to 67% with the mean score around 3.5 in their day-to-day activities. Finally, almost seven dimensions, such as loss of confidence, unhappiness, depression, negative feelings and low mood, sex life satisfaction, loss of sleep over worry, constant strain, and self-worthlessness, are performing at abysmal levels ranging from 23.50% to 41%, with the mean score around 2.50 t0 three concerning participants daily life activities. The other nine dimensions are internally correlated to the existing 29 dimensions very closely.

Demographic variables	Categories	Frequency	Percentage	Total
Gender	Male	106	53.0	200
	Female	94	47.0	
Age	18-25 Years	101	50.5	200
	26-35 years	84	42.0	
	36 years and above	15	7.5	
Education	Up to 12 th (Intermediate)	23	11.5	200
	Graduation and above	177	88.5	
Occupation	Students	100	50.0	
	Employee	61	30.5	
	Researcher	22	11.0	
	Business person	17	8.5	
Marital status	Married	61	30.5	200
	Single/Unmarried	139	69.5	
Place of residences	Urban	115	57.5	200
	Rural	85	42.5	

Table '	1: Demographic	characteristics	of the	study	population
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Table 2: Various important dimensions from WHOQOL-BREF (26 – Items) and GHQ -12

Dimensions	Mean Score	Percentage (%) of responses
Quality of life	3.97	75.50
Health-Related Satisfaction	3.91	72
Enjoyment in life	3.81	67
Presence of meaning in life	3.96	74.5
Healthy physical environment	3.81	66
Daily energy levels	4.02	76
Problems facing ability	3.84	71.50
Sleep Satisfaction	3.97	76.50
Self-satisfaction	3.99	75.50
Ability to concentrate	3.67	61.50
Work Satisfaction	3.95	73
Satisfaction with personal relationships	3.79	63
Support from friends	3.97	73.50
Persuasiveness	3.83	70
Safety in life	3.72	63.50
Loss of confidence	2.57	27
Unhappy and depressed	2.67	26
Bodily Appearance	3.89	70.50
Transportation Satisfaction	3.91	70.50
Negative feelings and low mood	2.82	31.50
Monetary Support	3.60	58
Informational Availability	3.90	68
Spending time in leisure activities	3.53	54
Sex life Satisfaction	3.26	41
Loss of sleep over worry	2.78	32
Constantly under strain	2.84	29.50
Self-worthlessness	2.36	23.50
Decision making	3.99	73
Reasonable happiness	3.77	65

Discussion

The present study explores the Indian adults concerning Self-satisfaction, Happiness, and QoL. This study describes how necessary it is to have good QoL and its enriching dimensions to identify ways to enhance QoL. The study investigates the QoL of the general population in India and the physical, psychological, and socio-emotional attributes contributing to QoL. This study also indicates fewer correlation scores on Self-satisfaction, Happiness, and QoL, which is inconsistent with various studies.^[10,28,29] The interventions need to improve psychological functioning among adults concerning the study variables. The study results help foster the overall adults' functioning and their QoL.^[30,31] The present study shows a positive relation between self-satisfaction and happiness, consistent with various studies on self-satisfaction and happiness as positive indicators of increased QoL.[32-34] Furthermore, Self-satisfaction and Happiness have been proven to efficiently contribute to better QoL among the adult population of both genders.^[35,36]

Research shows that the 13 dimensions such as QoL^[37] Health-related Satisfaction,^[38] presence of meaning in life,^[39] Daily energy levels,^[40] Problems facing ability,^[41] Sleep Satisfaction,^[42,43] Self-satisfaction,^[44] Work capacity,^[45] support from friends,^[46] Persuasiveness,^[47] Bodily Appearance,^[48] Transportation Satisfaction,^[49] and Decision making,^[50] are shown to be positively correlated with Self-satisfaction, Happiness, and QoL of the Indian adults. Consequently, nine dimensions such as enjoyment in life,^[2,51] Healthy physical environment,^[6,52] ability to concentrate,^[46] satisfaction with personal relationships,^[53] safety in life,^[54] Monetary Support,^[55] Informational Availability,^[56] Spending time in leisure activities^[57] and Reasonable Happiness^[58] are shown to be correlated with self-satisfaction, happiness, and QoL. Seven dimensions such as loss of confidence,^[59] Unhappy and depression,^[60] Negative feelings and low mood,^[61] Poor sex life Satisfaction,^[62] Loss of sleep over worry,^[63] and constantly under strain^[64] and Self-worthlessness^[65] are performing at poor and abysmal levels shown to

Table 3: Correlation of all dimensions of WHOC	QOL-BRE	F (26 iter	ns) for se	elf-satisfa	iction and	I QoL of	the parti	cipants				
	QoL1	8	ო	4	S	9	7	8	6	10	4	12
QoL 1	-											
Health-Related Satisfaction 2	0.557**	-										
Physical Pain 3	-0.079	-0.074	-									
Medical Needs 4	-0.027	-0.137	0.410**	-								
Concertation levels 5	0.493**	0.487**	-0.174*	-0.206**	-							
Enjoyment in life 6	0.574**	0.438**	-0.130	-0.140*	0.694**	÷						
Presence of meaning in life 7	0.552**	0.460**	-0.133	-0.081	0.607**	0.678**	-					
Safety in life 8	0.476**	0.402**	-0.300**	-0.175*	0.557**	0.574**	0.555**	÷				
Healthy physical environment 9	0.487**	0.428**	-0.087	-0.057	0.535**	0.538**	0.542**	0.602**	-			
Daily energy levels 10	0.439**	0.526**	-0.177*	-0.203**	0.606**	0.596**	0.577**	0.492**	0.593**	-		
Bodily Appearance 11	0.427**	0.371**	-0.108	-0.146*	0.517**	0.396**	0.458**	0.508**	0.473**	0.613**	-	
Monetary support 12	0.333**	0.196**	-0.032	0.000	0.365**	0.399**	0.357**	0.500**	0.298**	0.237**	0.455**	-
Informational Availability 13	0.342**	0.316**	0.048	-0.057	0.413**	0.336**	0.392**	0.392**	0.370**	0.308**	0.359**	0.440**
Spending time in Leisure activities 14	0.299**	0.288**	-0.018	-0.013	0.357**	0.238**	0.295**	0.358**	0.441**	0.337**	0.392**	0.380**
Persuasiveness 15	0.298**	0.250**	-0.085	-0.184**	0.420**	0.304**	0.373**	0.350**	0.453**	0.408**	0.424**	0.292**
Sleep Satisfaction 16	0.426**	0.420**	-0.165*	-0.217**	0.530**	0.423**	0.440**	0.523**	0.429**	0.549**	0.505**	0.355**
Everyday Life Satisfaction 17	0.468**	0.404**	-0.165*	-0.209**	0.470**	0.460**	0.480**	0.512**	0.406**	0.517**	0.557**	0.426**
Work Satisfaction 18	0.443**	0.449**	-0.122	-0.171*	0.488**	0.460**	0.475**	0.478**	0.468**	0.539**	0.552**	0.391**
Self-satisfaction 19	0.467**	0.497**	-0.055	-0.113	0.546**	0.521**	0.466**	0.494**	0.521**	0.455**	0.502**	0.504**
Satisfaction with personal relationships 20	0.479**	0.358**	-0.019	-0.121	0.478**	0.501**	0.435**	0.409**	0.351**	0.389**	0.439**	0.425**
Sex life Satisfaction 21	0.218**	0.236**	0.098	0.073	0.189**	0.316**	0.177*	0.093	0.154*	0.160*	0.150*	0.262**
Support from friends 22	0.324**	0.431**	-0.058	-0.221**	0.459**	0.396**	0.343**	0.362**	0.487**	0.523**	0.460**	0.255**
Satisfaction with Place of Living 23	0.479**	0.431**	-0.108	-0.193**	0.563**	0.524**	0.416**	0.451**	0.513**	0.492**	0.512**	0.440**
Satisfaction with Health Services24	0.491**	0.466**	0.052	-0.107	0.504**	0.442**	0.502**	0.371**	0.406**	0.443**	0.478**	0.502**
Transportation Satisfaction 25	0.346**	0.406**	0.079	-0.163*	0.442**	0.407**	0.415**	0.346**	0.342**	0.463**	0.444**	0.427**
Negative feelings, low mood, Anxiety, and Depression 26	-0.235**	-0.265**	0.287**	0.484**	-0.275**	-0.267**	-0.294**	-0.227**	-0.151*	-0.310**	-0.271**	-0.116
	13	14	15	17	7 18	SS 19	20	21	22	23	24	25 26
QoL 1												
Health-Related Satisfaction 2												
Physical Pain 3												
Medical Needs 4												



Contd...

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Healthy physical environment 9 Daily energy levels 10 Bodily Appearance 11

Monetary support 12 Informational Availability 13

Enjoyment in life 6 Presence of meaning in life 7 Safety in life 8

Concertation levels 5

Table 3: Contd														
	13	14	15	16	17	18	SS 19	20	21	22	23	24	25	50
Spending time in Leisure activities 14	0.650**	-												
Persuasiveness 15	0.444**	0.558**	-											
Sleep Satisfaction 16	0.374**	0.401**	0.479**	-										
Everyday Life Satisfaction 17	0.395**	0.303**	0.394**	0.646**	-									
Work Satisfaction 18	0.376**	0.358**	0.405**	0.600**	0.785**	-								
Self-satisfaction 19	0.410**	0.398**	0.479**	0.611**	0.669**	0.711**	-							
Satisfaction with personal relationships 20	0.406**	0.378**	0.394**	0.534**	0.604**	0.572**	0.644**	-						
Sex life Satisfaction 21	0.278**	0.153*	0.173*	0.204**	0.285**	0.361**	0.406**	0.493**	-					
Support from friends 22	0.320**	0.228**	0.308**	0.421**	0.552**	0.537**	0.518**	0.444**	0.225**	-				
Satisfaction with Place of Living 23	0.370**	0.391**	0.436**	0.560**	0.579**	0.645**	0.612**	0.590**	0.341**	0.580**	-			
Satisfaction with Health Services24	0.426**	0.336**	0.388**	0.535**	0.561**	0.557**	0.571**	0.470**	0.300**	0.465**	0.657**	-		
Transportation Satisfaction 25	0.326**	0.361**	0.410**	0.507**	0.486**	0.457**	0.459**	0.449**	0.295**	0.418**	0.629**	0.712**	-	
Negative feelings, low mood, Anxiety, and Depression 26	-0.008	-0.004	-0.143*	-0.221**	-0.238**	-0.205**	-0.230**	-0.118	0.016	-0.153*	-0.225**	-0.202**	-0.215**	-
Correlation is significant at the 0.01 level (two-tailed). QoL denotes for various important dimensions of the participants' self-satisfaction low self-satisfaction contributing to a diminished level QoL in gene Concentration levels (.493), Enjoyment in life (.574**), Presence of Monetary support (.333**), Informational availability (.342**), Spendi satisfaction (.443**), Self-satisfaction (.667**), Satisfaction with pers Health Services (.491**) and Transportation Satisfaction (.346**) and The dimensions which are positively correlated with the confidence in Presence of meaning in life (.466**), safety in life (.476**), Healthy pi Spending time in Leisure activities (.398**), Persuasiveness (.479**) Satisfaction (.406**), support from friends (.518**), Satisfaction with pain (.0.055), medical needs (.0.113) and Negative feelings, low mo	s Quality of i and QoL i erral people of meaning in sonal relatin sonal relatin sonal relation of the negatin hysical en), Sleep sati Place of Li Place of Li	Life, and S: n Table 3. It The dimen n life (.552* Leisure activ prompts (.455* Leisure activ Driships (.452* dironment (. sisfaction (.6 sisfaction (.6 ving (.612***	S denotes { indicates a sions which the start in the dare Ph Self-satisfa 487**), Dail 11**), Eve Ssion (-23	Self-satisfa to positive au in are positive in are positive in (494***********************************	ction. *Corr, id negative ely correlative i, Heatthy p i, Heatthy p i, C18*,2 on (218*,2 on (218*,2 on (218*,2 on (218*,2 on (218*,2 on (218*,2 on (218*,2) m (-0.079), m ot (138*,2) on (218*,2) m (-0.079), m ot (138*,2) m (-0.079), m (-0.079), m (-0.079)	elation is s relationsh ted with th hysical en 98**), Slee 98**), Slee edical nee edical nee edical nee edical nee 0, Body ap 0, Body ap 0, 6571**) s (.571**)	ignificant a ip between e confidence vironment vironment riends ds (-0.027) lated satisfi pearance (ork satisfa and Transp	t the 0.05 le the self-sat se interval o in (.521*1), Da ion (.426*'s (.324**), Sa and Negati storen (.711*' outation Sa	vel (two-tail isfaction an if 95% for thi if 95% for thi if energy le if energy le if energy supp ve feelings, **), Concent netary supp netary supp), Satisfaction (.4	ed). Pearso d QoL of act ve B QoL of act ve B QoL strend verse action verse action low mood, tration leve ort (.504**) on with per 59**) and t	on's correla dults, which Health-relat Health-relat Stion (467 f Living (477 Anxiety, ar Anxiety, ar (546**), , informatic sonal relati he negative	tions were c r can be inter- pearantes (c.), Work 8"*), Satisft d Depressic fanjoyment i nal availabi onships (.6. onships (.6.	alculated as inculated arpreted as ion (.557**), 427**), 427**), action with on (-235**). In life (.521**), inty (.410**), inty (.410**), 44**). Sex lift d are Physic	sal e ,

views important dimensions from QUO 10 for henringes of the participants

Table 4: Correlation of	various	mport	ant dime	ensions	from G		or napp	mess o	i ine pa	rucipant	5	
	1	2	3	4	5	6	7	8	9	10	11	RH 12
Ability to concentrate 1	1											
Loss of sleep over worry 2	-0.009	1										
Playing a Useful Part 3	0.542**	-0.061	1									
Decision making 4	0.510**	-0.176*	0.639**	1								
Constantly under strain 5	-0.141*	0.457**	-0.083	-0.142*	1							
Unable to Overcome Difficulties 6	-0.140*	0.522**	-0.023	-0.196**	0.610**	1						
Ability to enjoy day-to-day Activities 7	0.562**	-0.177*	0.419**	0.628**	-0.263**	-0.273**	1					
Ability to Face Problems 8	0.219**	-0.116	0.300**	0.446**	-0.137	-0.169*	0.455**	1				
Unhappy and depressed 9	-0.276**	0.499**	-0.167*	-0.278**	0.695**	0.633**	-0.317**	-0.080	1			
Loss of confidence 10	-0.203**	0.395**	-0.185**	-0.371**	0.569**	0.564**	-0.371**	-0.109	0.736**	1		
Self-worthlessness 11	-0.159*	0.421**	-0.193**	-0.324**	0.410**	0.567**	-0.273**	-0.101	0.588**	0.717**	1	
Reasonable Happiness 12	0.461**	-0.256**	0.475**	0.566**	-0.187**	-0.162*	0.570**	0.241**	-0.271**	-0.225**	-0.247**	1

Correlation is significant at the 0.01 level (two-tailed). RH denotes Reasonable Happiness. *Correlation is significant at the 0.05 level (two-tailed). Pearson's correlations were calculated for various essential dimensions of the participants' happiness in Table 4. This presents a positive and negative relationship between adults' happiness. The dimensions which are positively correlated with the confidence interval of 95% for the ability to concentrate (.461), playing a useful part (.475**), decision making (.566**), ability to enjoy day-to-day activities (.570**), ability to face problems (.241**) and the negatively correlated are loss of sleep over worry (-.256**), constantly under strain (-.187**), unable to overcome difficulties (-.162*), unhappy and depressed (-.271**), loss of confidence (-.225**), self-worthlessness (-.247**)

be negatively correlated concerning self-satisfaction, happiness, and QoL in Indian adults day-to-day life activities. The results of the present study show a positive relationship between Self-satisfaction, Happiness, and QoL.

Limitations and recommendations

Table A. Convolation

Owing to the pandemic situation, only an online survey was performed. The search was restricted to three databases in English language studies only. Due to the less sample size with the sampling method, the study focused on few available participants. So, it is difficult to generalize results. There is a need for funding to explore more paradigms in QoL. Research is also needed to focus more on adults' self-satisfaction, happiness, and QoL. This futuristic and predictive study must look into the various existing challenges and their contributing positive and negative consequences. So that researchers can design specific interventions to minimize the adverse effects, if any are foreseen or identified in the study. Therefore, there is a need for specific programs in healthcare settings that address the population's needs at all walks of life, helping foster healthy lifestyles and greater QoL. The study could not reach the adults living in remote parts without access to mobile and internet facilities.

Conclusion

The literature, however, invariably shows the unique needs of Indian adults, indicating a tendency toward healthcare aspects of day-to-day life. The study concludes that self-satisfaction, happiness, and QoL must be improved further to foster the well-being of adults. The key dimensions in the measurement help find the participants' personal preferences. There is a need for more scientific work to take place to understand more in this area so that one can gain a broader perspective on various factors associated with these unhealthy behaviors, which are hampering satisfaction, happiness, and QoL, including the various vital parameters in life such as well-being and health-related QoL.

Acknowledgments

The Ministry of Education (GOI) provides the grant under IoE-UoH grants to the University of Hyderabad (Grant no. UoH/IoE/RC1-20-030Dated 07.12.2020). There is no role of a grant agency in the study.

Financial support and sponsorship

Institute of Eminence grant, University of Hyderabad.

Conflicts of interest

There are no conflicts of interest.

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