

SALUTARY FACTORS RESPONSIBLE FOR THE HEALTH OF BUSINESS ADMINISTRATION STUDENTS

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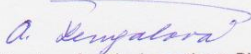
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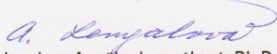
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ABSTRAKT

Zdraví většinou bývá cílem každého z nás, a jelikož je to mnohorozměrný obor, pod tímto pojmem se skrývá spousta podnětů k objevování. Zde se nachází nástin toho, jak dosáhnout vytouženého zdraví. Spolu s lepším zdravím můžeme dosáhnout také vyšší kvality života, která je zrovna jednou z mnoha složek zahrnutých v psychologii zdraví. Pro lepší kvalitu je potřeba dosáhnout dobré osobní pohody a udržovat určitý životní styl obsahující co nejvíce salutorů, neboli pozitivně působících faktorů. Pro dosažení zdravého životního stylu je zase potřeba odpovídající fyzická aktivita, zdravá strava, dobré sociální vazby a také relaxace a regenerace. Součástí práce je výzkum zjišťující kvalitu života mezi studenty Anglického jazyka pro manažerskou praxi.

Klíčová slova:

Kvalita života, psychologie zdraví, salutory, fyzická osobní pohoda, psychická osobní pohoda, duchovní osobní pohoda, sociální osobní pohoda, zdravý životní styl, sport, zdravá strava, relaxace, regenerace, pozitivní myšlení, dotazník, analýza.

ABSTRACT

Health is a priority to most human beings because generally we want to achieve the highest quality of life possible. Being that health is a multidimensional subject, there are many facets that can be analyzed. This paper presents a concept helping to achieve the desired health status. Having achieved better health, we can reach a better quality of life, which is one of many elements involved in health psychology. To elevate quality of life, we need to feel healthy and content, and we have to keep a certain lifestyle, including as many salutary factors as possible. In order to reach a healthy lifestyle, it is necessary to be physically active, follow a healthy diet and hold good social bonds. Relaxation and regeneration are vital as well. A part of the thesis is research which determines the Quality of Life among the students of English for Business Administration.

Keywords:

Quality of life, health psychology, salutary factors, physical well-being, mental well-being, spiritual well-being, social well-being, healthy lifestyle, sport, healthy diet, relaxation, regeneration, positive thinking, questionnaire, analysis.

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INTRODUCTION

While writing the thesis, I have some aims and goals I would like to achieve. Firstly, the overall objective is to penetrate into the field of *psychology, sociology and healthy lifestyle* and enrich myself with new knowledge.

Secondly, I want to familiarize people with various aspects of health and illustrate how health influences not only students studying Business Administration, but also people in general – and how it is reflected on their lives. I try to apply theoretical information and practical research which examines the quality of life among students, involving *physical, mental, spiritual and social well-being*. To draw some conclusions, I plan to analyse the results gained from the questionnaire research. One part of my work will consist in generating graphs and charts showing which level of life quality my colleagues reach. Moreover, my sample is composed of students in the first and the final year of their studies, in order to expose crucial differences in perception as well as deviating attitudes of males and females – another big issue that I want to point out. The analysis will be concluded with an explanation of possible reasons and recommendations for useful changes of lifestyle, before the thesis ends with a general summary of the whole research.

From the beginning until the very end, my work concerns health and features linked to it as this phenomenon is the most precious value in our life and it is connected to plenty of other minor factors having an effect on our well-being¹. The goal of everyone should preferably be to care about their health condition since it has a significant effect on our well-being which considerably determines the quality of our lives. Naturally, everybody desires to be happy, to feel good and to lead a meaningful life but it does not come all alone, just out of the blue. It is us who have to participate in the development of our lives, build our path and find a key to success.

I would like to mention the most significant agents which are involved in the process of life enhancement. I will focus on positive factors which help us to elevate the quality of life and make us think about our current actions. My thesis should provoke a consciousness of the health status and provide the reader with guidelines about how to treat both their body and mind. I am aware of the fact that it is beyond the limits of my thesis to introduce all the positive factors influencing people around us but I try to introduce some basic facts that will give a clear and self-contained thesis.

¹ *Well-being* simply means how good we feel. I will cover this topic in chapter 2.1.

I. THEORY

1 THE HEALTH IN GENERAL

My work concerns *health*, and because health is multidimensional it is important to define and specify what it actually covers. *Health* is a natural state of every human being, but in order to keep its pure form we need to care about ourselves and remain protected from factors having a negative influence. This human feature has a significant effect on our *well-being* and it determines the *quality of our lives*.

To get an answer or definition, our head usually gets lost in dictionaries in order to find the meaning of a term but *health* is a term which cannot be exactly explained because the meaning does not refer to objects but ideas, as R. Williams explained in 1983. According to the first theory on *health*, the statement can be conceived that every human being is determined genetically but besides that, there are people's efforts centred to a particular aim. Suggested targets represent motivational powers for our action in order to help us to move forward to our intended goal. To achieve our desired aim, we need to be strong – to have strength, which is what it means to be healthy. If we are unhealthy, we are also powerless as well as unable to accomplish our goals. From this assumption, we can say that an achievement is conditioned by a good shape. However, from another point of view, some people consider *health* itself as the aim they want to accomplish. (Žaloudíková 2009, 12; Křivohlavý 2009, 28–29)

“A healthy state of wellbeing [is that] free from disease.” (Mittelmark 2010, 10) But it is difficult to agree with this definition because *health* is not only about ‘not being ill’ but rather about enjoying positive aspects which bear upon our health and guide us towards the right path. The World Health Organization explains that it does not only concern the lack of disease: “Health is a state of optimal physical, mental and social well-being, and not merely the absence of disease and infirmity.” (Křivohlavý 2009, 37) It is a construct with a number of different spheres involved, and due to that, *health* is considered as a complex concept with multi-dimensional range. Thanks to that we can discover new matters in various areas. (Mittelmark 2010, 10–11)

Throughout centuries, *health* has been a desired state and has represented the most important value. Since the beginning of humanity, people have been trying to keep fit and be aware of what they do and eat. In ancient times, people wanted to connect the physical and mental dimension, with the idea to balance both sides. The aim was to act and live sagely but also to keep a healthy lifestyle and live in harmony. It means that it allows

working optimally and feeling good in biological, sociological and psychological areas. (Mlčák 2011, 8–9)

On the contrary, there is *disease* that is defined as an opposite term to *health*. It is recommended to prevent an illness since it is an undesirable state which everybody tries to avoid because of serious effects on the quality of life. *Disease* means disharmony in the psychological and physiological sphere as well as in the interaction with other people occurring in our environment. Today's psychology does not only involve the individual and its inner life but it has been proposed that people are parts of a bigger whole and live in a certain social community. Supposing we feel happy and satisfied, we are able to live, work, study and love. (Křivohlavý, 2009, 20–25)

What is the substantial feature that determines whether a person is healthy or not? What do we actually consider a fit condition? The understanding of *health* differs over the lifespan and is influenced by gender, age and level of education. Generally speaking, young men are regarded to be healthy when they are in a good physical condition while younger women are judged on the basis of psychic capability. Among younger people, *health* is recognised according to very high productivity and energy, whereas at the middle age period, it is evaluated by biosocial well-being. And elderly people direct their attention to *health* as a priority; they perceive it as the primary value of life. (Mlčák 2011, 10)

It is evident that there is a huge amount of factors influencing our health. At a certain level, we can say that there are two groups of elements – *genetic determinants* (inherited predispositions, immunity or tendency to diseases) and *external winds*, such as a *healthy lifestyle*, the *environment*, *health care* and *social and economic factors*. *Genetic determinants* are given and cannot be changed naturally. Here we can encompass *gender*, *age* or *inborn predispositions*; whereas the *external factors* can be partially or completely governable. (Žaloudíková 2009, 12)

From another perspective, factors can be divided into *positive* and *negative* ones. The *positive factors* are those which contribute to our joy and feeling of happiness and I will discuss them in my work. On the other hand, there is a large number of *negative factors* such as alcohol, smoking, lack of sport, excessive consumption of coffee, stress, overeating, chronic fatigue, negative attitude to ourselves, emotional exhaustion, depression, bad relationships with the family and friends and many more. It would be interesting to dig deeper into this topic and become aware of risks but the scope of this paper is limited, which is why I will devote my work only to the positive factors. (Kebza and Šolcová 2004, 22)

1.1 Salutory Factors

Salutory factors is an expression for those elements which affect us positively and have beneficial influence on our health. They are opposing powers to the negative factors and they endorse the development to a healthy being. The scientific branch concerned with positive factors is called salutogenesis and the founder of this field Dr. Antonovsky proposed that “salutory factors not only may buffer negative effects of risk factors, but also may contribute directly to health. Instead of focusing on causes of illness, salutogenic orientation seeks to understand the factors involved in maintaining or promoting the individual’s location on continuum of health.” (Umezawa 2008, 25)

These powers help us to fight with problems and troubles and to overcome difficult moments throughout the life course. Among the positive aspects that can be involved include: a meaning of all the activities we are doing, belief in value of what we are heading to and recognition or acclaim by people we respect. And we cannot be satisfied with a definition which covers only ‘lack of risk factors’ because it is not intended to lower the amount of negative elements but to actively search for the good and balance both sides of the scale. (Mittelmark 2010, 7)

We could call these elements *uplifts* because they can considerably boost our mood and improve our overall condition. We can also say there might be included: hearing some good news or something pleasant being done by an (for us) important person, no matter if it is a member of the family, the best friend or the partner. (Křivohlavý 2009, 170)

1.2 Healthy Lifestyle

While in the past most of the people died of infectious diseases, at the beginning of the 21st century a vast majority of people die of diseases linked to their unhealthy lifestyle. There are illnesses such as cancer or cardiovascular diseases. Recently, organisations concerned with health have strongly focused on healthy lifestyle and the sphere of healthy living. These days, to turn to a healthy lifestyle is considered a wise and fashionable step forward. If we have a look at what healthy lifestyle means indeed, we can discover there are various aspects involved: chiefly healthy diet, sleep, physical activity, working, managing time, relationships in our environment, and a way of coping with stress and absence of addictions. According to some professional presumptions, it was said that lifestyle can affect our behaviour, attitudes and actions nearly from fifty to sixty percent. (Žaloudíková 2009, 6)

To maintain a balanced lifestyle, it is important to be able to equally combine the physical situation with the emotional. A desirable situation is suggested when we can easily balance negative factors with our skills to cope with them. A smooth alternation of tension and calmness, work and rest are resources of a healthy lifestyle without overburdening our mental and physical state. (Mičák 2011, 20)

A healthy lifestyle is closely connected to our well-being and if we keep up a healthy lifestyle, it contributes to our subjective well-being even though it is not the deciding factor. Nowadays, we are living in a busy world and on a regular basis, people are exposed to a great amount of stress and especially university students are pushed by deadlines, by duties to make presentations, write seminar papers or to deliver a speech in front of an audience. A crucial point of all the stress comes before an examination period. People under pressure should really respect the advice a healthy lifestyle because in these moments of being stressed-out, a proper lifestyle plays the most important part. It is recommended to *sleep* enough, not less than seven hours per night, *not to smoke* and *drink alcohol*, to keep regular *breaks* and *to rest*, to *work out* twice a week at least, to try to keep nearly *the same body weight* and *eat* in smaller servings *regularly*. (Fialová 2007, 19–20)

The principal state that is always underestimated is a good sleep. We are biologically determined to sleep in the range from seven to nine hours. Nevertheless, some people think they can save some time by sleeping less. It can be enough for a period of time but we must not forget it is a biological need which has to be satisfied (law of nature). What is more, lack of sleep causes fatigue and sourness and eventually, it does not save time at all because we are not able to be highly productive while feeling exhausted. To avoid problems of being sleepy, it is advised to run just five minutes in the morning to boost the body. Then to keep the good mood, it is recommended to have five minutes of running three times in the evening. (Bartko 1990, 292–305)

People in the Czech Republic are used to having bad habits, they have adopted poor attitudes. In most cases, they consume excessive food, lack physical activity, drink a lot of coffee and alcohol and they smoke. It is clear that these habits are not conducive to a healthy lifestyle; on the contrary, after some time it can happen that our system will not be able to put up with tough situations and recovery will be more difficult for the body – and this is the point when some health problems can start occurring. (Fialová 2007, 19)

1.2.1 Sport

Sport is well known for its positive outcomes. We can do sport to relax our mind. While doing a physical activity, the blood circulation is faster and the brain oxidation is enhanced as well. Exercise helps us to 'forget' daily issues and to set our mind free of all sorrows for a while – it means that physical exhaustion brings relief to our mind, we relax physically as well as mentally. Sport is considered to contribute to an important part of our life thanks to its ability to let hormones flow out into the veins.

Chiefly, aerobic workouts have a great impact on our cardiovascular system and prevent heart diseases and cancer. Sport is also a very good in reducing or keeping optimal body weight. It loosens up our mind and fights against depression and states of anxiety. Studies have proved that people who are doing any aerobic workout (jogging, exercising, gym classes...) are not prone to develop deeper depressions – on the contrary, it helps to diminish them. What is quite interesting is that sport goes hand in hand with self-evaluation and self-confidence. Moreover, workout improves the rapport with ourselves. (Červinková 2008, 22–24)

One seldom gets tired physically, in most cases the majority of population is more likely exhausted mentally. Sport develops and ameliorates the functioning of the organs and the strength of the muscles, so that we resist tiredness better. Furthermore, it puts us in a good mood. And when we are smiling and thinking positively, our life takes direction to a better quality of life, as it is one of the most important determinants. Being optimistic, self-confident and happy are features displayed in our flexibility, agility, raised muscular tonus (tension in muscles), upright posture, healthy appetite and the fact that we are very fond of going to work or school. Even Galenos, in ancient times, sent round and pudgy Romans to dig and hoe on the field. He knew they would lose some weight and be balanced emotionally. Moreover, sleepiness and moroseness are transformed into freshness, optimism and it leads to a higher productivity. Sport strengthens us physically as well as mentally and because of that it is perceived as a psychogenic factor – contributing to the health. As well as youngsters do sports, there are no bigger barriers for older people and one should practise a physical activity the whole life up to the time when it is not possible anymore, until health constraints occur. But as we can conclude from different surveys, an activity is very beneficial even for those people who suffer from mental disorders. (Bartko 1990, 206–214, 354–360)

It is great to love the job we are doing but when we put too much effort and passion in it, it takes more energy and afterwards we are very tired. And what is an interesting fact is

that women are more resistant to fatigue than men are. In this case, for both sexes, it is crucial to know how to relax and rest. (Bartko 1990, 206–218)

Generally, thirty minutes of physical activity in moderate rate are recommended. But not only running is encompassed, there are a lot of daily routine activities included – walking to school or work, gardening, leisure sports activities and going shopping, for example. But this does not mean everybody has to do an activity for half an hour without break because the length of different activities can be counted together. Even those who are not able to do sport for thirty minutes straight can get used to do activities in small portions at first and then to start raising the number of minutes. (Miley 1999, 16)

1.2.2 Relaxation

In comparison with sport, relaxation is practised mentally and leads to the same result – to release a pushed-to-the-breaking-point situation. In general, relaxation levels off serenity and tension in our body and is accompanied by several changes, for example: decline of muscle tenseness, decrease of breathing, blood pressure and metabolism go down, secretion of hormones is higher and brain activity is much stronger.

As passive relaxation we could consider aromatherapy and wellness procedures like massages, whirlpool, sauna and so on. A different way of relaxation is yoga, which started to be popular in the Czech Republic about fifteen years ago, while it has been being practiced for ages in Asian countries. It is an Indian philosophy and study connecting us with ourselves and focusing on deep breathing and becoming calm. Furthermore, pursuit of spirituality helps to find the right attitude to life. (Friedman 1997, 3–18; Žaloudíková 2009, 24)

I guess, everybody has experienced some relaxing procedures on their own and you probably remember how good you felt on the physical and emotional level afterwards. No doubt your body perceives a release, you feel uplifted and mentally fresh, which contributes to better alertness and perception. It increases self-confidence, memory and concentration and helps to improve the quality of studying. It follows that students are highly recommended to relax – physically and mentally, on a regular basis.

1.2.3 Healthy Diet

For keeping the overall health, it is important to pay attention to a healthy diet as an aspect of healthy lifestyle and be careful about what and how we eat. A healthy diet is beneficial

due to effects on bones, skin or power supplies and moreover it lowers the risk of dental caries, malnutrition, eating disorders or iron deficiency. (U.S. Department of Health, Human Services, and U.S. Department of Agriculture 2005, 2)

There is no universal diet for everyone to follow because everybody has different health needs and genetic predispositions. Nevertheless, I will offer several tips on how to keep yourself healthy from a food perspective. Currently, the world population struggles with obesity. A number of reasons are often discussed, but the most visible ones are: excessive intake of food in one serving, unsuitable selection of meals with a great deal of saturated fat, and that people break the schedule of regular eating. Our diet should consist of lots of fruits and vegetables and we should sustain on regularity and eat five times a day in moderate proportions. Our major food intake should be in the morning and in the afternoon, in the first half of the day, and low-caloric dishes should be consumed in the evening. Then the body can cope with processing even a bit heavier stuff during the day and we can get rid of calories by doing some sport. It is recommended not to eat later than four hours before sleeping because we keep our body busy digesting and, the generated energy cannot be transformed.

Plenty of discussions were led about the importance of breakfast. It is vital for a good start of the new day and it is proved that it is an agent which helps to keep an optimal weight. And as research shows, the omission of breakfast can even deteriorate the performance of verbal fluency and tasks concerning arithmetic and visual stimulus. An American study says that “attributes of the breakfast meal, such as its composition, size, and time of consumption, can induce several metabolic alterations, including changes in blood glucose, insulin, and neurotransmitter concentrations, and therefore it is plausible that characteristics of the meal itself may influence cognitive function.” (Mathews and Pollitt 1998, 8) It means that we should not minimise the value of breakfast and should set aside a couple of minutes in the morning and have a breakfast. It was also examined if there is a difference between cooked and cereal-and-toast breakfast and in both cases there were noted only changes in mood. When having a proper cooked morning meal or a low-fat, high-carbohydrate breakfast², you will likely have a better mood. (Mathews and Politt 1995, 8–10)

² A *high-carbohydrate breakfast* is a meal containing a high percentage of carbohydrates, for example: cereals, fruits, cookies, bread, jam or potatoes.

2 QUALITY OF LIFE

Quality of life is linked to health and fulfilment in life. We will come across the term *well-being* that is bound to health, fulfilment and quality of life, too. Since quality of life and well-being (the following chapter is devoted to this topic) are firmly connected, someone could simply claim these terms are the same. It is not easy to clearly differentiate these two expressions. Quality of life is defined as an appraisal of subjective well-being. (Diener, Lucas, and Oishi 2005, 63; Greene-Shortridge and Odle-Dusseau 2009, 817)

According to Cummins, the “quality of life is both objective and subjective, each axis being the aggregate of seven domains: material well-being, health, productivity, intimacy, safety, community, and emotional well-being. Objective domains comprise culturally-relevant measures of objective well-being. Subjective domains comprise domain satisfaction weighted by their importance to the individual.” (Cummins 1997, 6)

Personal quality of life reveals how satisfied a certain person is, how much they are supported socially, and how they perceive joy, balance, harmony and well-being. One of the considerate effects is the achievement of set goals and the further way of life development. (Greene-Shortridge and Odle-Dusseau 2009, 817–818)

And why are we actually talking about the quality of life? In recent decades, longevity has increased, and a lot of new inventions have been implemented with the purpose to save lives. People are aware they will live long and they want to enjoy it and do everything to live as happily as it is possible. They are interested in improving the quality of life and due to the fact of trying to lead a better life, the trend has jumped forth on the scale of human interests. Nowadays, there are plenty of techniques how to elevate the quality and we should really invest our money and time for keeping ourselves healthy and satisfied. Of course, it is impossible to avoid aging and to be able to have a vital life forever, but we can use promotions which help to prolong the life. We can consume vitamins and minerals, honey products with bee pollen, and we can be inspired by far western countries and drink ginseng tea, practise yoga or meditation, and be on the right way to a long life. (Friedman 1997, 3–18)

2.1 The Term *Well-being*

I have already mentioned the term *well-being* and now I am going to engage more in this phenomenon. It could be said that well-being is the evaluation of our lives. Whether a person does like their life or not is the fundamental aspect for rating one’s life. It is

difficult to come to only one explanation because even when asking experts, they are not able to unify a single definition. But in this case, specialists have agreed on one matter: it concerns *a long-term emotional state where the life satisfaction is reflected*. They also agree that well-being is measured through *cognitive constituents* – like life satisfaction or morale for example – and through an *emotional part* where both positive feelings and negative emotions are involved. But there is encompassed much more, well-being also includes: *wellness* or *fitness* (physical well-being), *welfare* (material well-being), *success* (achievement and getting recognition), as well as *friendship* and *happiness*. (Kebza and Šolcová 2004, 21)

According to Ryff and Keyes, the structure of well-being is divided into six fundamental dimensions:

1. Self-acceptance
2. Positive rapports with others
3. Autonomy
4. Environmental mastery (zvládání životního prostředí)
5. Meaning of life
6. Personal growth

But it would not be complete without specific social areas like *social interaction* (how a person is able to integrate into a society or community), *social acceptance* (how the society is perceived in the eyes of an individual), *social contribution* (how an individual can be of benefit to society), *social actualisation* (how the society utilizes its potential for its development) and *social coherence* (how firm or compact the society is). (Havlíčková 2009, 63)

Schmuck and Sheldon study well-being from the perception of life goals which are our motivation. We rely on them and head our lives towards the future with them. Two principal distinctions which contain the most important information have to be differentiated:

- 1) *Long-term life goals* are more closely connected to well-being than those related to the short-run.
- 2) *Self-concordance* is very important for well-being because a goal must be according to a person's values and hobbies. (Schmuck and Sheldon 2001, 1–6)

“People who have important goals tend to be more energetic, experience more positive emotions, and feel that life is meaningful.” (Diener, Lucas, and Oishi 2005, 66) What is very interesting is that we are considerably influenced genetically. To some extent, we tend

to be happy or unhappy by nature. Wilson stated that a happy person is a “young, healthy, well-educated, well-paid, extroverted, optimistic, worry-free, religious, married person with high self-esteem, job morale, modest aspirations, of either sex and of a wide range of intelligence.” (Diener, Lucas and Shigehiro 2002, 67)

Furthermore, it has to be pointed out that it is not important what the circumstances are like but how a particular person realises and perceives the world around. In 1975, Csikszentmihalyi proposed that people are happier if they can practise those activities which they are interested in and which are fitting to their skills. (Nakamura and Csikszentmihalyi 2009, 90–91)

Wellness is sometimes used as a substitute for well-being and represents a concept which is bound to the acceptance of a certain lifestyle heading to optimal physical and mental health. Such behaviour demands proper habits like enough sleep, non-smoking, no alcohol, a healthy diet and adequate physical activity. (Kebza and Šolcová 2004, 21–32)

2.2 Positive Thinking

At first, experts were concerned about the reasons causing diseases and unwanted states of mind and about the way how to fight and prevent them. Those specialists were psychologists and sociologists who started examining the mental health and studying positive factors (salutary factors) after some time. They were interested in how people manage to feel good and be healthy and came up with principal techniques like *coping with stress*, *means of relaxation* and applying *positive thinking*, this is a broadly taught method these days. (Parks-Sheiner 2009, 61; Žaloudíková 2009, 21)

“Psychology is not just the study of disease, weakness, and damage; it also is the study of strength and virtue. Treatment is not just fixing what is wrong; it also is building what is right.” (Seligman 2002, 4) A positive psychology concerns positive subjective experience that is differentiated on the basis of a time level:

- Well-being and satisfaction when considering past times
- Flow, joy and sensual pleasures and happiness when evaluating presence
- Optimism, hope, and faith are determinants of the future (Rashid 2009, 72)

Moreover, a program was developed to improve people’s happiness. It is a concept where participants accept characteristics or features as to hold a busy schedule, to have things organised neatly, to socialise more with others and try to create a positive outlook, and to work on a healthy individuality. Then there was an experiment carried out in which

pupils at elementary school were taught how to think positively and always to see the bright side of life. After the test, the results were compared to a control group and it was found that the treatment was successful and the ‘positive group’ was less depressed than the other one. (Diener, Lucas, and Oishi 2005, 5–6, 69)

2.3 Determinants influencing Well-being

Some factors have more effect on our well-being and some less. The following factors are the most significant ones. Levin and Chatters rank following elements here:

- The *health status* is measured by objective indicators of physical function and overall health.
- *Social-economical status: Financial evaluation* is considered as substantial component which determines the level of sufficiency and the resulting satisfaction or dissatisfaction. It does not mean that money makes us necessarily happy but it is linked and it plays a role. Income does not strongly correspond with well-being. Nevertheless, people living in richer countries are considered to be the happiest. But more than just money might be contributing to this perception, since those nations also have a different level of human rights and more equality, and they are surrounded by people who can live a long life. Ryff and Singer claim the higher the *level of education* that we have, the higher is our well-being.
- *Age* is a quite important aspect of the quality of our well-being. Generally speaking, older people reach a higher well-being than youngsters.
- *Religious involvement* is one of the most discussed topics and there is no clear outcome because it is difficult to justify who is a religious person – who is profoundly immersed and is absolutely honest and serious about this fact.

And there could be included other determinants such as: *ethnicity, widowhood, parenthood, social support, life events and changes, losing parents* and *self-esteem*. (Diener, Lucas, and Oishi 2005, 67; Žaloudíková 2009, 27–28)

2.4 Social Well-being

Social factors, such as social support, are especially strong predictors for all people and we judge our life satisfaction on this basis. The most crucial point lies in *interaction*. The most important piece of information about ourselves comes from our closest environment, which

is the *family*. Family support is the basic social group, a great source of assistance or the core of a burden on the other hand. If children are neglected, it often leads to conflicts and it increases the probability of some other stress situations which may result in chronic stress in combination with some other difficulties. Ideally, the family should represent a great support protecting the children from negative influences and contributing to a social health promotion. (Vašina 2009, 67; Hayes 2003, 13–14)

Another important unit is the *peer group*, the group of people in our company. We consider them being similar to our personality. The members from this group can be very influential, particularly in the teenage period of change and in the young adulthood years. Sometimes the peer group is not strong enough or we do not identify ourselves with our close environment. We might have different aspirations and for that reason, we tend to stick to the behaviour highly influenced by another group – the *reference group*. The core of social interaction lies in social identification. We do not affect each other only as individuals acting according to some prescribed roles but we identify ourselves with some social groups where we belong to as well as, and it is a means of interaction with other people. Social identification develops firstly, because of the tendency to categorise and make groups and secondly, because of the pursuit of something that could help us to raise our self-esteem. (Hayes 2003, 13–14)

We can differentiate several social dimensions referring to well-being. Křivohlavý states them as the following:

- *Social acceptance* is the dimension of having a positive relationship towards other people, respecting and accepting them although not agreeing with their behaviour.
- *Social actualisation*: It is supposed that the society as itself is good in the core, has implemented something prosperous and is able to grow.
- *Participation in social activities* means that we feel we have something to offer and we believe that we contribute to all by our own behaviour. The way we live is considered as a valuable part of the entire society.
- *Social coherence* is the assumption that life is built on logical principles. People try to be actively involved in the community life.
- *Social integration* is a sphere where we consider ourselves as a constitutive element of society and we feel being compared by community and society. We share what is similar. (Ložičáková 2010, 16)

Although adolescents mostly estrange trying to find their own way to individuality and independence, they realise that social interaction is a more or less crucial and it is needed for them to live happily. In this case, social bonds are not framed, no matter if a contact is only with one person or more of them. This model is developing since childhood, a little kid requires a connection with its mother, a pupil wants the attention of a teacher as well as an adult needs a person besides them. It does not have to implicitly be a partner but if it is so, the better for both partners it is. One tries not only to enhance their own life displayed in their aspirations, but they also want to make lives of their beloved better.

II.

ANALYSIS

3 THE QUALITY OF LIFE AMONG THE STUDENTS

Having studied the theoretical background, I can move on to the practical part of my paper where I want to engage in the real outcomes of my study. To obtain data relevant for my thesis, I conducted a research with the goal to determine the quality of life (further only QOL) among students of Business Administration. I want to compare “how happy” students of the first and third year feel about their life when considering a long-term perspective. Their satisfaction in different areas is reflected in their evaluation of the QOL hereafter. I have decided to compare the first- and third-year students with the assumption that there could be some significant differences possibly determined by obvious factors having an impact. Moreover, it is interesting to see a woman’s perspective and a man’s approach. And I would like to draw attention to conceivably problematic factors and suggest potential solutions to these issues.

3.1 Objectives

My aim is to determine the level of the QOL among students of the programme English for Business Administration. Beside the overall quality of their lives, I would like to point out some other interesting facts being of concern for students at the Tomas Bata University in Zlín. I have set some goals I would like to reach and highlight in the analytical part of the paper. The intended aims of the research is the following:

1. To compare the polarity of the QOL between males and females.
2. To determine the overall QOL level.
3. To compare the QOL between the first- and third-year students.
4. To show the most problematic spheres and illustrate a possible difference between the first and third year.
5. To find out which sphere is best-evaluated.
6. To point out miscellaneous findings from the survey which are striking.
7. To think of possible reasons and solutions for improving the quality of life at each matter.

3.2 Collection and Sampling

The common way for conducting a research is an interview, but in my case I picked a quantitative mean of collection, considering a great number of respondents. I chose a

questionnaire where students should have marked numbers on the measure scale from 1 to 5. You can see the division and description of each point in the following two figures:

Figure 1: Scale of Importance

1	2	3	4	5
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
not very important	a little important	important	quite important	very important

Figure 2: Scale of Satisfaction

1	2	3	4	5
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
not very satisfied	a little satisfied	satisfied	quite satisfied	very satisfied

My respondents were first- and third-year students at the Tomas Bata University in Zlín. I have skipped studying the quality of life among second-year students intentionally, with the idea to highlight a possibly bigger difference on results of first- and third-year students. I asked first-year students to fill in the questionnaires in their lecture of American studies and my adviser Mgr. Kateřina Voráčová spread out some of the questionnaires among the students in her classes of Presentation skills. Concerning students of the third year, I have created an online version of the questionnaire and asked them to fill it in online. The survey was being carried out between 26.3.–5.4.2012. I have gained 45 questionnaires from first-year students and 35 of them from my classmates in the third year of study. To have a valid sample representing the students, I would need to ask everyone studying the programme which was being examined, and that is nearly impossible. Altogether, I gathered 70 questionnaires, what does not represent a real image of the QOL of students of English for Business Administration. But the inability to obtain the desirable number of answers was caused by the lack of interest among them. It was not so easy to gain relevant material. It seems that students are highly uninterested in matters connected to their QOL. A possible explanation could be their immaturity and that interest is yet to come when they start living their own lives.

The form consists of 48 inquiries altogether. The students were asked 24 questions encompassing matters from different spheres, and they were to mark the importance they attribute to these issues. In the second part they were asked identical questions covering the same dimensions, but this time they should mark their satisfaction with these issues. Those two parts were compared afterwards in order to get the Quality of Life. While creating the form, I was inspired by a Canadian research regarding the QOL, and I used the majority of

questions just from the questionnaire available online for a broader public on Quality of Life Websites. The basis of the study is the comparison of importance and satisfaction concerning issues important for the QOL.

Having examined the items in the online research, I have selected only those spheres which were important for my aspired findings; therefore I have covered *Physical*, *Mental*, *Spiritual* and *Social Well-being*. But I have dropped some of the domains involved in the former survey because they were not crucial for my intended outcomes. In comparison with the Canadian version, I left out *Physical Belonging* because the region of living is unimportant for my study, and also *Community Belonging* as communities are perceived rather negatively in the Czech Republic. Furthermore, I dropped *Practical*, *Leisure* and *Growth Becoming*. These questions covering becoming would be very interesting to analyse but it would go beyond the scale of my thesis and moreover, they are not so relevant for my survey. I adopted the questionnaire to my needs, so that it would fit to my intended aims. In the Table 1 there are the dimensions I have covered in my poll and the areas which students were asked.

Table 1: Dimensions Covered in the Questionnaire and Areas of Questions Asked

<i>Dimension</i>	<i>Areas of questions asked</i>
Physical	Health condition, healthy diet, appearance, working out, basic needs, sleeping
Psychic	Mental status, independence, self-acceptance, mood, worries, feeling about themselves
Spiritual	Meaning of life, future, religion & beliefs, need to help, morality, celebrating of special events
Social	Closeness to family, environment, need of a special person, being a part of larger group

4 FINDINGS FROM THE RESEARCH

The calculation and score interpretation were taken over from the Canadian study of the QOL. I followed their patterns and measured obtained scores by using the formula: $[(\text{Importance of the item}/3) * (\text{Satisfaction of the item}/-3)]$. For interpreting the final figures I used a range and description stated in the table below.

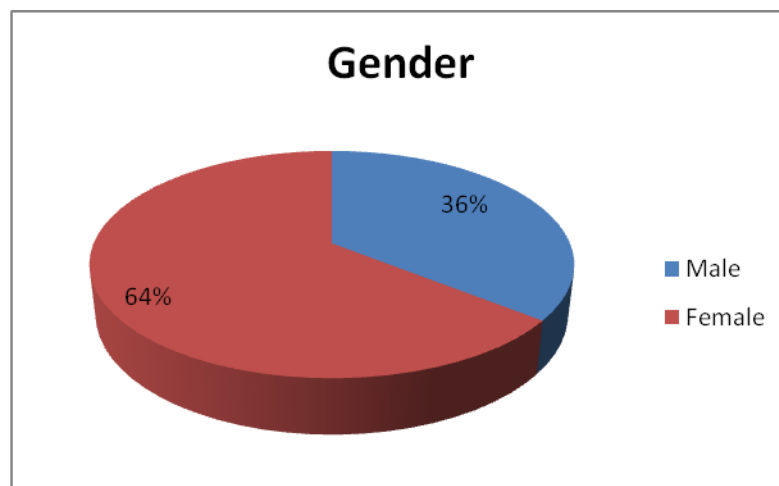
Table 2: Interpretation of the Scores

Score	Interpretation
> 1,50	Excellent
0,51 – 1,50	Acceptable
(-0,50) – (+0,50)	Adequate
(-0,51) – (-1,50)	Problematic
< -1,50	Very problematic

4.1 Outcomes gained from the Survey

Out of 70 respondents, 64% were females and 36% males. When we have a look at the particular years of study, we find out that in the first year, the representation of females was 56%, and 44% males. In the third year of study, there were 72% females willing to help with the research as the vast majority and only 28% males. The idea could be suggested that women are more willing to fill in some surveys and polls, while males do not care so much.

Figure 3: Percentage of Males and Females in the Survey

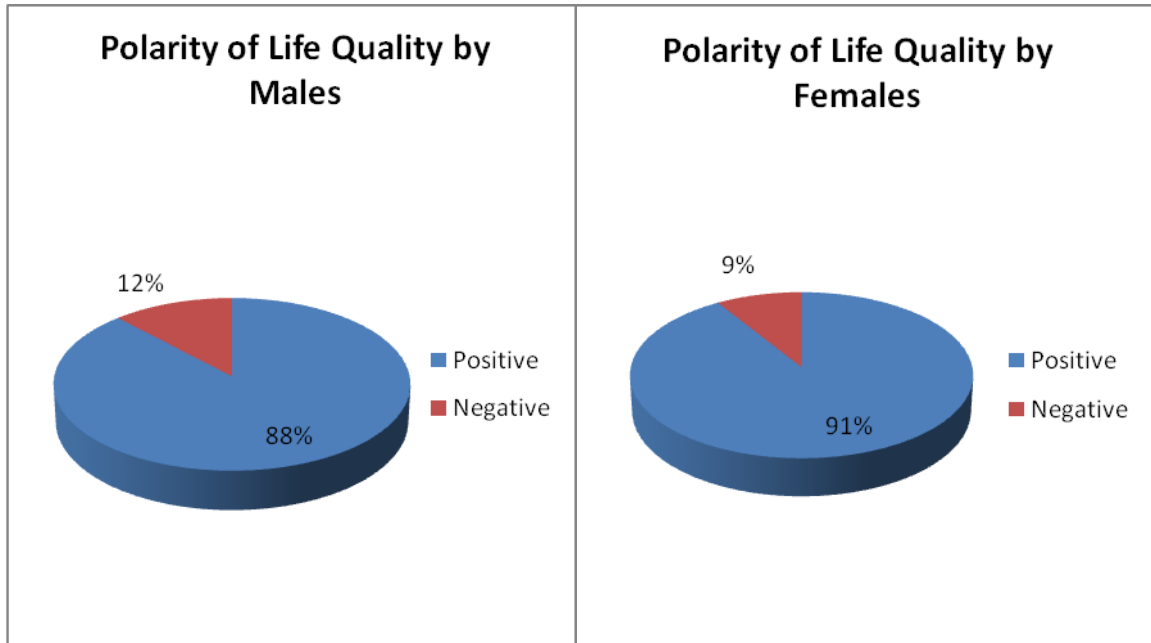


4.1.1 Polarity of Life Quality by Females and Males

Even when I was creating the questionnaire, I was really interested which gender tends to be happier and shows a higher QOL. It is said that women are more emotional and critical to themselves, and due to that they tend to achieve lower QOL. And here you can see a simple comparison (Positive/Negative Polarity) between my samples of males and females.

Figure 4: Polarity of Life Quality by Males

Figure 5: Polarity of Life Quality by Females



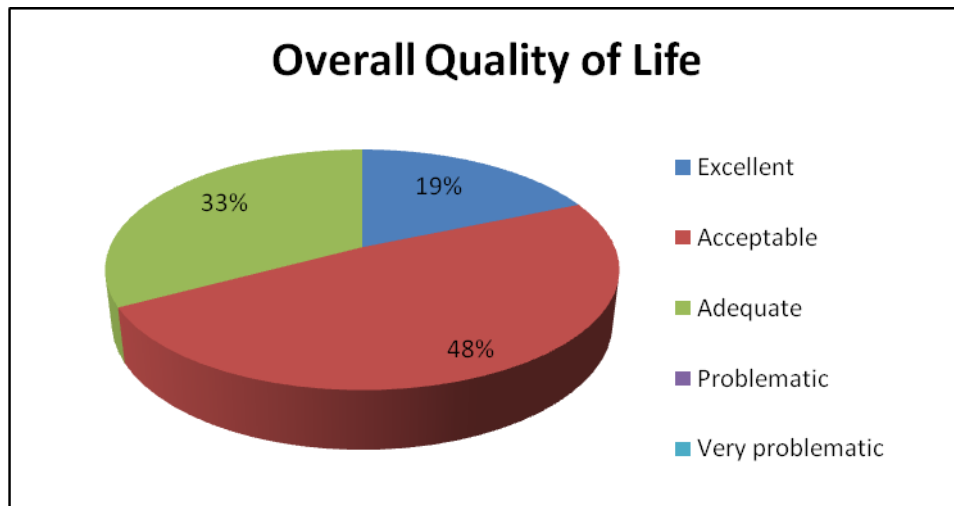
My initial presumption of the higher QOL determined by males was tested, but not confirmed. In the graphs, we can clearly see that men achieve a lower QOL – 88% of them reach a Positive life quality, while 91% of the women have a Positive QOL. This clash might have been given by the little representation of this gender, since only 36% out of all the respondents were men. Another possible reason might be that men are not interested in questionnaires at all, unlike some of the women, and because they were annoyed by the survey, they crossed whatever they liked, no matter if it was true or not.

A group of a few psychologists had a similar idea as well; they wanted to find out if women are happier than men. But they have just come up with the argument that *happiness* as such is not as deciding as an evaluation of the whole complex of elements – the subjective well-being. And because of that, it is not correct to claim that men are happier than women. (Diener, Lucas, and Oishi 2005, 68)

4.1.2 Quality-of-Life Level

To be more precise, it is important to examine the results of the real Quality of Life and to find out what category they are ranked into. As we can see in the figure below, 19% of students evaluate their QOL as Excellent, 33% as Adequate and nearly half of the respondents say that they reach an Acceptable QOL what is an average but I do not find it as wanted results.

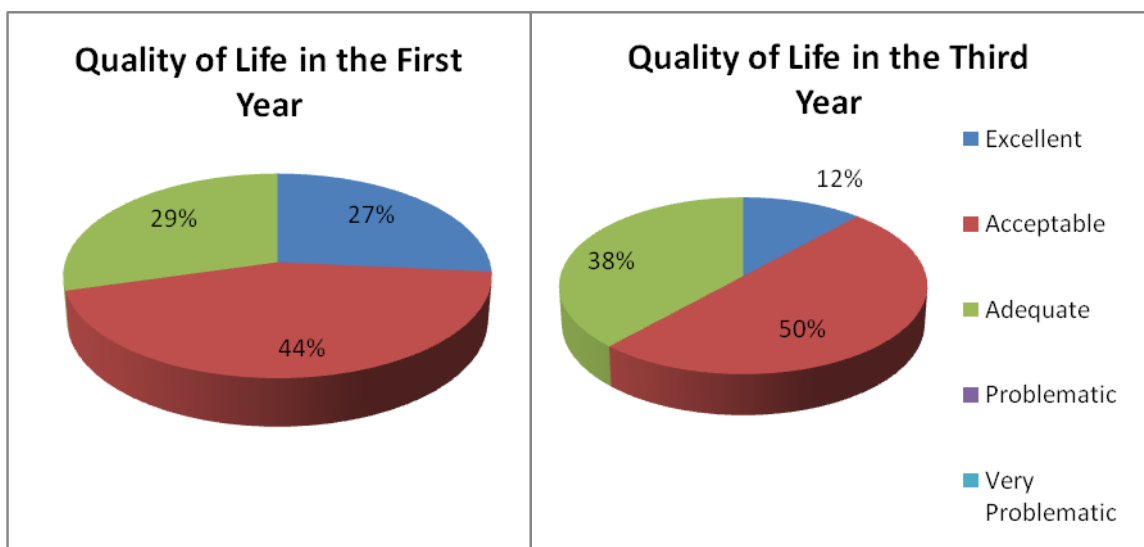
Figure 6: Overall Quality of Life



When comparing the years specifically, 27 % of the first-year students reach an Excellent QOL, whereas only 12% of the third-year students, this is a considerable difference. But on the other hand, nobody shows a Problematic or Very problematic QOL, fortunately.

Figure 7: QOL in the First Year

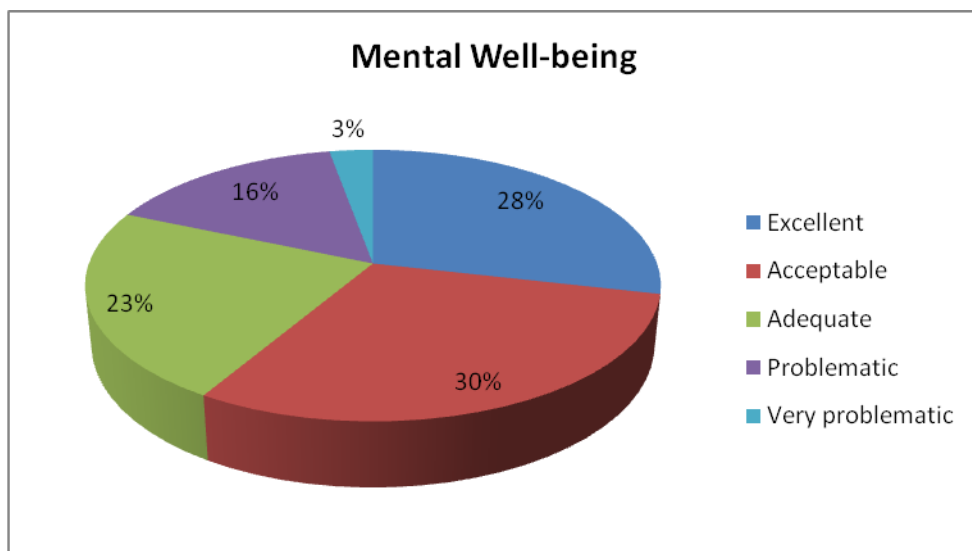
Figure 8: QOL in the Third Year



4.1.3 Problematic Spheres of the QOL

When having a look at particular spheres of the QOL, we can say that the *Mental dimension*, where the study participants were asked questions about their mood, worries, self-acceptance, feeling about themselves, independence and mental health, was the most problematic one. 3% showed a Very problematic situation and the large number of 16% of the people marked their mental state as Problematic which can be considered as alarming. 23% of the respondents marked their life as Adequate, 30% as Acceptable and 28% as Excellent, which is represented in the Figure 9.

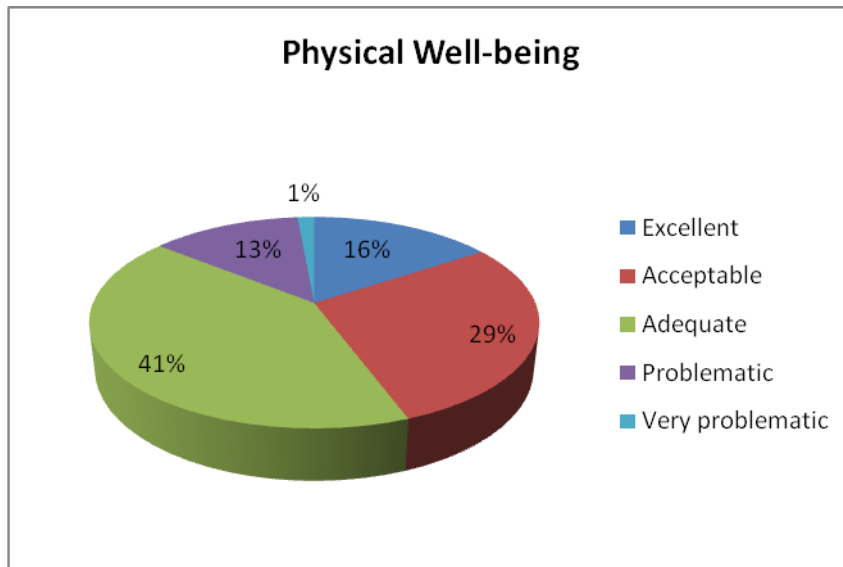
Figure 9: Mental Well-being



In my opinion, the reason might be that students are stressed out while having plenty of deadlines and duties ahead and from my perception a lot of students may not know how to put up with them properly. A possible solution might be a bigger promotion of the school psychologist who is available after a prior appointment but it is not publicised among the students, nearly no one knows about this service and in case they do, not so many people dare to utilize this option. From my point of view, it would be worth promoting this service as well as the other ones which the university provides with.

According to the outcomes, the second toughest part is the *Physical dimension* and there were questions concerning sleep, physical condition, workout, healthy food, appearance and sex life. 1% have a Very problematic QOL in this sphere, 13% are Problematic, 41% Adequate, 29% Acceptable and 16% Excellent.

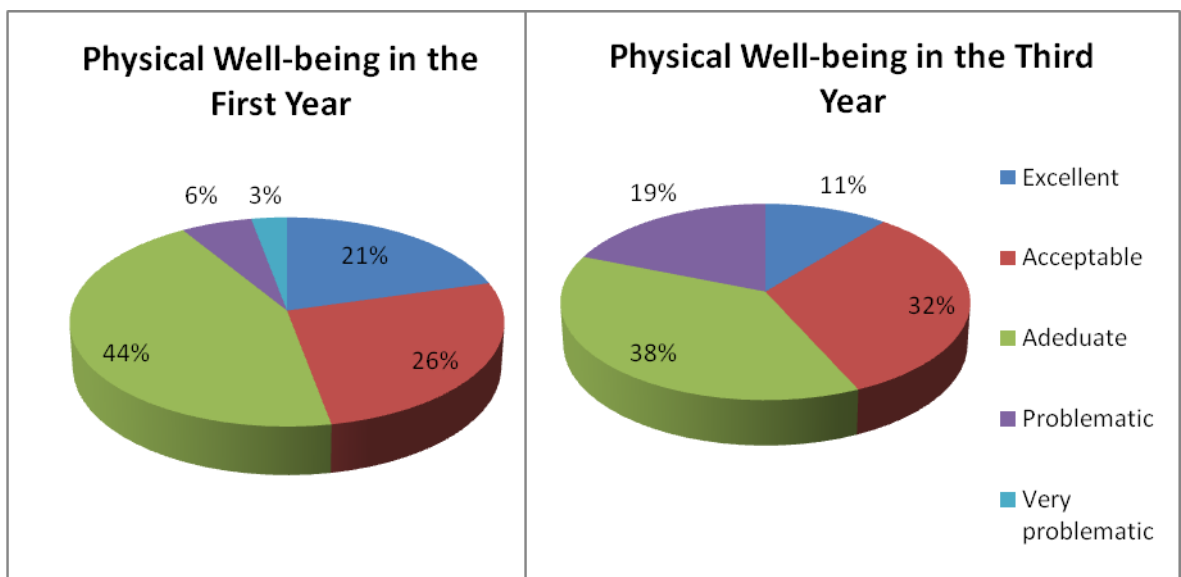
Figure 10: Physical Well-being



In the following graphs, we can see how the physical well-being is changed when examining the first-year compared to the third-year students.

Figure 12: Physical Well-being in the First Year

Figure 11: Physical Well-being in the Third Year

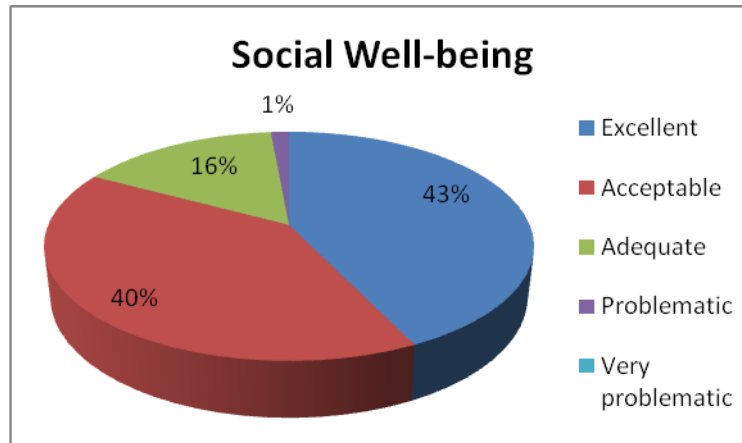


As people are snowed under with many tasks, they push sport aside with the justification it is not so important anymore, while there are more serious activities yet to do. The other idea of mine is the lack of promotion and of opportunities to be engaged in some sport activities. I could experience a five month study period in a foreign university and I can say that there could be much more to be provided with here and students could be treated better, referring to this occasion.

4.1.4 A Positive Dimension of the QOL

On the other side, there is a sphere evaluated very positively in most of the cases. It seems that students are good at getting well with others because 83% cover a very positive evaluation (43% Excellent; 40% Acceptable), 16% refer to an Adequate result and only 1% belong to the Problematic group.

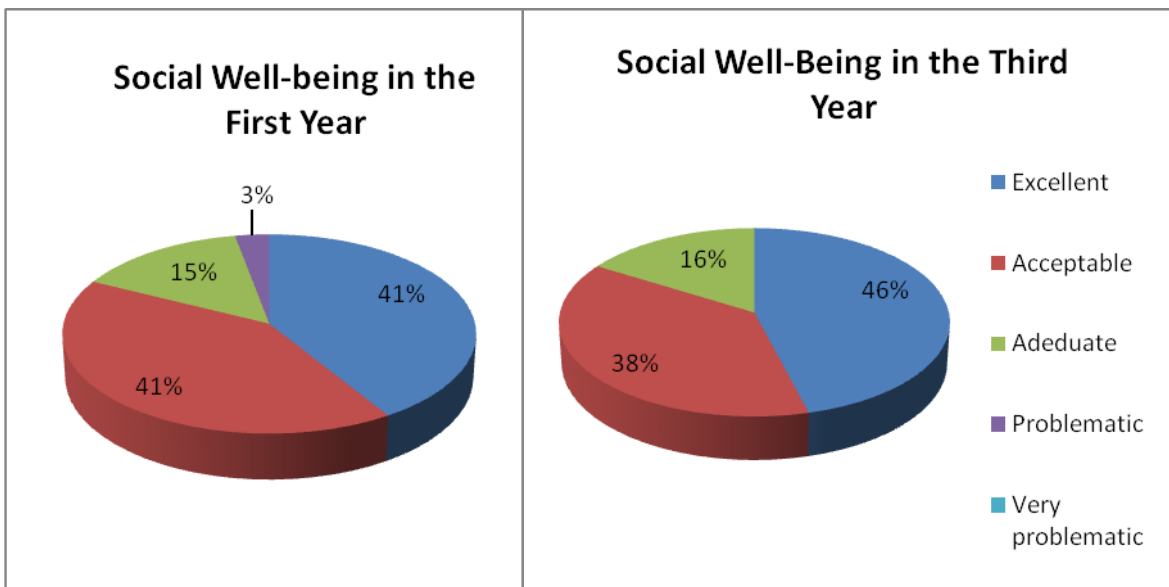
Figure 13: Social Well-being



On the basis of the survey, we can say that third-year students are more satisfied with their social well-being, what might be caused by a richer experience during course of the studies where they are taught how to present and what to communicate. It gives them a great deal of assertiveness, self-confidence and as they are used to live more independently, it is reflected in their approach to other people and their interactions.

Figure 14: Social Well-being in the First Year

Figure 15: Social Well-being in the Third Year



4.2 Interesting Outcomes of Specific Questions

4.2.1 Importance of Physical Condition as ‘Very Important’ & Regular Workout as ‘Important’

What was a bit surprising for me was that the physical condition is ‘5 – very important’ for our students but they value a regular workout at 3, as ‘important’ only. From my perspective, physical condition is closely connected to exercising. If we want to keep fit, we should do something for that. What we can say from this outcome is that they are very mindful of a very good physical condition but on the other hand they are not interested in physical activity or making an effort to deserve it. As we covered previously, physical activity on a regular basis is more than necessary not only to keep in shape, but as well for a good mood or brain activity. Additionally I know from my companions that not so many people work out regularly and for some people it is much easier to care about food servings in order to keep the optimal weight but they would not go running at any case.

But I would personally welcome more sport programmes offered to the students by the university and most of the classes should be free to make them available for those people who do not have an obligatory sport activity. I believe that after a while, when people get used to this system, they would be more motivated to do some sports which would have a positive impact on school results.

4.2.2 Importance of Healthy Diet as ‘3 – Important’

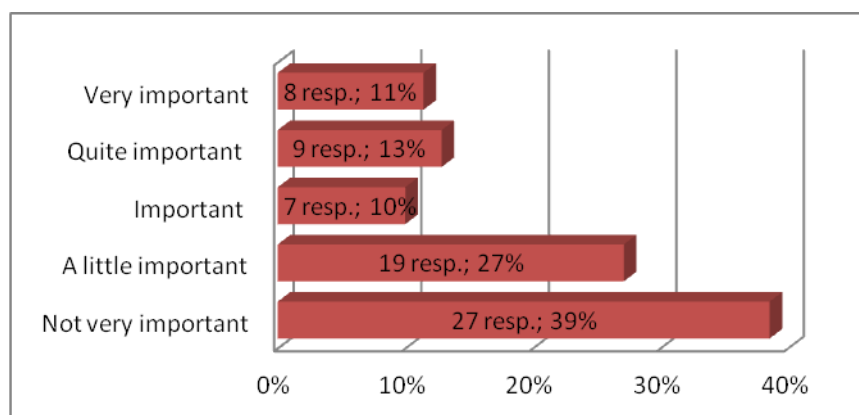
What we can see from the results is that a healthy diet is not so important for students possibly caused by the ‘student lifestyle’ that most of them lead. The majority of the students try to live low-cost because they mostly do not have their own budget and a permanent job with a stable income. They are usually dependent on their parents although they are actually grown-ups. Due to that they try to save as much money as possible but on the wrong thing. They save money for buying packet soups from the supermarket, avoiding vegetables and fruits because they do not saturate them so much and cost a bit more and basically they eat the same food more or less. They do all the things in order to save money, being not aware of the real importance. However, they may know but there is something more important what pushes the healthy diet aside. If we interviewed people around the importance of money, I believe they would answer ‘5 – very important’ in most cases.

4.2.3 Importance of Religious or Spiritual Beliefs as ‘2 – a Little Important’

The spiritual domain involves various spiritual activities and they are mostly fulfilled by religious activities of people who usually go to church and believe in God. But this sphere does not concern only religion but as well as any beliefs in the meaning of value which is ‘a higher law’ and we judge our deeds on its basis. They assist us with keeping ourselves on track and direct to personal growth. (Vašina 2009, 67)

It seems that this question was misinterpreted because it was clearly stated ‘how important for them is to have religious or spiritual beliefs’, nonetheless this issue was evaluated with the lowest average mark of 2 out of 5, which says ‘a little importance’. In the chart below it is displayed how many respondents (resp.) ticked a particular matter and its percentage.

Figure 16: The Numbers and Percentage Voting for the Importance of Religious and Spiritual Beliefs



Probably the statement that the Czech Republic is one of the most atheist countries in the world is not so far from the truth. Considering that some of the people might have been misled by religious practice and dismissed the pure spiritual beliefs, yet there are too many negative answers which may lead to the conclusion that local students do not have energy to move forward because they miss something to believe in. But on the other side, they do have hope as the study shows. Moreover, to have some beliefs contributes to a better mental health that was actually quite problematic as well. This idea was nicely expressed by Friedman: “Living in accordance with one’s beliefs enhances mental health. It gives meaning and purpose to life, which in turn improves outlook and increases zest for life.” (Friedman 1997, 6)

4.2.4 Satisfaction with Mood as ‘3 – Satisfied’

Being in a good mood is the fundamental condition of a good day. The mood we have in the morning usually accompanies us the whole day if no special event or news occurs. What I have experienced is that people are not used to being in a good mood just because a new day has started and they have an opportunity to walk to school and enjoy the sun, for example. Firstly, they frown because they just got up and then because they do not want to do anything but they have to go to school, moreover walk and furthermore they may find it obtrusive that the sun shines into one’s eyes. I know from my own experience, it is not so easy to keep smiling all the time and especially in the period of all the stress from writing the thesis and studying for the final state exams. But usually a good mood is ‘contagious’, which means that one person smiles a lot and another person unconsciously adopts smiling as well or at least they stop being as annoyed by things around as they had been before. A positive attitude is incredibly strong, when a person sparkles and spreads a lot of energy into their environment.

4.2.5 Satisfaction with Worries as ‘3 – Satisfied’

From the results of the satisfaction with the amount of worries it is obvious that students have worries and unfortunately they will do in the future, too, it is one of inevitable things that are just a part of our lives. It was interesting to compare the evaluation of the first- and third-year students. A lot of issues connected with the end of the final semester are displayed in the answers of the third-year students who marked the matter as ‘2 – a little satisfied’ while those studying the first year checked it as ‘3 – satisfied’.

4.2.6 Satisfaction with Closeness of Family

As previously mentioned, family support is the most important element in our development and future dealing with various situations. That was why I tried to examine if the negative evaluation of ‘Closeness of family’ in the questionnaire was reflected on some other evaluations as well. I have found ten instances when people lack the closeness of the family, they ticked ‘1 – not very satisfied’ or ‘2 – a little satisfied’. And their overall QOL reached ‘Adequate’ in seven cases and ‘Acceptable’ in three cases, which signifies that people who have a bad relationship within the family or who are not close to them for any reason generally do not reach such a high quality of life. I see that it is not based on a

genuine research concerning just this issue but this small analysis more or less supports the hypothesis.

4.3 Limitations and Clarification

I am aware that my bachelor thesis contains some points which are not perfect and could have been more robustly analyzed. To some extent, it might seem to be unclear and open which might be considered as a flaw but it is not always possible to follow all the rules. I have tried very hard to get all the required foreign language literature, to find as many students as possible and it would have been great if I could have created my own questionnaire or have made an interview, but I came across some constraints I had to cope with somehow.

4.3.1 Lack of Respondents

It was my main goal to get as many responses from the English for Business Administration students as possible. However, when I started to distribute my questionnaires among the people with a polite request to fill them out, they were annoyed, and some of them refused to do it. It is a voluntary activity however, I am quite surprised that they do not have any interest. Due to that, I got only 38 responses from the third year and 45 from the first year. Altogether 70 questionnaires, what is a quite poor number when considering that there are about 70 students only in the third year and about 100 of them in the first one. It means I got only 27 % of responses from the third-year students and 45% from the first year.

4.3.2 A Very Broad Topic

My topic is also very broad and it would be possible to write pages and pages on it, but unfortunately our faculty does not specialise in psychology, sociology and this topic at all. Therefore, it was difficult to look for relevant sources that would provide not so detailed and scientific information. I was allowed to cover only basic facts without digging so deep in order to give an idea to every single man who does not have any clue about the topic. My aim was to introduce the main message which was to make it understandable for everyone.

4.3.3 Literature

Another limitation is linked with the previous one. Due to the university specialisation in management and economics, there are not so many sources for my thesis available in the library and moreover in English. That is the reason why the majority of my sources are online. I have gone through a lot of them but I had to select plenty of them out because they did not meet my requirements. Nevertheless, books in print from the library are in Czech and English sources were often obtained online.

4.3.4 Description of the Scale Not in Every Question

There is one significant matter I would change for the next time. Respondents were given a scale at each question and they should have marked a number corresponding to a description (not very important, a little important...) stated only on the very top. And I have noticed that people forgot what the scale was like, they checked '1' for the best satisfaction instead of '5', for example. From the responses, I could see they realised after a while and they ticked the complete opposite at a few questions above. Moreover, I believe people would answer in a slightly different way if they were given a description of the scores at each question.

4.3.5 Research Changed and Edited in Order to Fit to my Requirements

In the last part of my chapter, I would like to make clear why I have chosen the Quality of life questionnaire and why I used most of the questions from the Canadian questionnaire. Because I have covered several topics, it was up to me which exact phenomenon I would study. I might also have studied only students' well-being but from my point of view, the QOL is more interesting because it encompasses well-being from different perspectives and moreover, there are outcomes stating the person's quality of life.

CONCLUSION

I believe I have covered the most significant factors having an impact on the life enhancement, as well as involving selected minor factors having a considerable effect on the lifestyle and our subsequent contentment. Because I am highlighting the importance of the positive way of thinking in the progress to a better life, I do not include negative elements. My paper is focused on salutary factors that are considered as uplifting powers directing us to the right way of living and assisting us with the elevation of the quality of life. I wanted to provide general guidelines and show that following some pieces of advice or instructions is a possible path to satisfaction. It should give an idea on how to improve single units of health and raise the overall QOL.

Apart from health in general, which was the starting point, I specialise in constituent elements such as *quality of life*, *well-being*, *healthy lifestyle*, *healthy diet*, *sport* or *relaxation* being involved. Different components of health are properly described, but they include only basic facts being understandable for a broad public. If a person wants to be happy and really enjoy life, it is important to participate in the process in some way. And the thesis could serve as a guidebook for an inspiration and realisation of the need for change.

I conducted research to be aware of the QOL level among the students of my programme because I myself am apart of this. I examined how happy my colleagues feel and how satisfied with life they are through the evaluation of different parts of well-being such as *physical*, *mental*, *spiritual* and *social well-being*. I got a lot of absorbing findings which I transformed into graphs and charts. I have chosen the most interesting facts to be shown in the analytical part, added a description explaining why it happened and enriched the statistics with my ideas, to be understood only as recommendations. I was looking for relevant arguments to prove some theoretical information and be sure that the theory is really applicable in practice.

I have to say that some presumptions which were suggested have also been confirmed. For example, the substantial impact of the family on the children's later development and their putting up with troubles was clearly displayed in my results. A few people reached a lower QOL than those who stated that their family bonds are very good. Then from the findings, we can watch some negative influences on the third-year students, which actually makes perfect sense when considering what those students deal with right now – a lot of stress and pressure linked to the end of the studies. But on the other side, there was such a

thing as higher optimism or bigger happiness evaluated by males, proved wrong or at least not testified in my research. A shocking discovery for me was to find out that young people do not have beliefs, they are not important for them and it seems they practically do not need them for their life, what is not possible from my point of view. Just to wake up the next morning requires a certain belief. And I do not completely understand their concept of physical condition. What we can say according to the outcomes, people care about their physical condition a great deal but they are not so willing to take on a healthy diet and preferably do some sport. I guess they would like to be healthy without making any effort, but as well as in real life, we have to deserve things, it does not fall into our hands like a ripe plum.

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APPENDIX

P Questionnaire

APPENDIX P: QUESTIONNAIRE

Hi, for my Bachelor Thesis, I am conducting a research to determine a **QUALITY-OF-LIFE** level among the students of the English for Business Administration study programme. I would be grateful if you answered the questions below.

Gender: Male Female **Year of Study:** 1 2 3

Quality of life is how you perceive your subjective well-being (osobní pohoda) consisting of the **physical, psychological, spiritual** and **social** sphere. Simply, at which level you express **your happiness** with the life. And I will compare **importance** of various issues with your **satisfaction**.

IMPORTANCE:

At first there will be questions examining how **IMPORTANT** for you following matters are. You will judge on the scale form **1-5**, while **1** means **NOT VERY IMPORTANT** and **5** **VERY IMPORTANT**

	1 <input type="checkbox"/> not very important	2 <input type="checkbox"/> a little important	3 <input type="checkbox"/> important	4 <input type="checkbox"/> quite important	5 <input type="checkbox"/> very important
--	--	--	--	---	--

- | | | | | | |
|-------------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|
| 1. Being in a good health condition | 1
<input type="checkbox"/> | 2
<input type="checkbox"/> | 3
<input type="checkbox"/> | 4
<input type="checkbox"/> | 5
<input type="checkbox"/> |
| 2. Sleeping well and enough | 1
<input type="checkbox"/> | 2
<input type="checkbox"/> | 3
<input type="checkbox"/> | 4
<input type="checkbox"/> | 5
<input type="checkbox"/> |
| 3. Regular working out | 1
<input type="checkbox"/> | 2
<input type="checkbox"/> | 3
<input type="checkbox"/> | 4
<input type="checkbox"/> | 5
<input type="checkbox"/> |
| 4. Eating healthy food | 1
<input type="checkbox"/> | 2
<input type="checkbox"/> | 3
<input type="checkbox"/> | 4
<input type="checkbox"/> | 5
<input type="checkbox"/> |
| 5. Good appearance | 1
<input type="checkbox"/> | 2
<input type="checkbox"/> | 3
<input type="checkbox"/> | 4
<input type="checkbox"/> | 5
<input type="checkbox"/> |
| 6. Sex life | 1
<input type="checkbox"/> | 2
<input type="checkbox"/> | 3
<input type="checkbox"/> | 4
<input type="checkbox"/> | 5
<input type="checkbox"/> |
| 7. Acceptance the way I am | 1
<input type="checkbox"/> | 2
<input type="checkbox"/> | 3
<input type="checkbox"/> | 4
<input type="checkbox"/> | 5
<input type="checkbox"/> |
| 8. My mood | 1
<input type="checkbox"/> | 2
<input type="checkbox"/> | 3
<input type="checkbox"/> | 4
<input type="checkbox"/> | 5
<input type="checkbox"/> |
| 9. Independent acting | 1
<input type="checkbox"/> | 2
<input type="checkbox"/> | 3
<input type="checkbox"/> | 4
<input type="checkbox"/> | 5
<input type="checkbox"/> |
| 10. No worries and pressure | 1
<input type="checkbox"/> | 2
<input type="checkbox"/> | 3
<input type="checkbox"/> | 4
<input type="checkbox"/> | 5
<input type="checkbox"/> |

11. How I feel about myself
1 2 3 4 5
12. My mental health
1 2 3 4 5
13. Celebration of special events in my life
1 2 3 4 5
14. The meaning of life
1 2 3 4 5
15. Hope for the future
1 2 3 4 5
16. Religious or spiritual beliefs
1 2 3 4 5
17. Helping others in need
1 2 3 4 5
18. My own ideas of right and wrong
1 2 3 4 5
19. Being close to my family
1 2 3 4 5
20. Having a person of special importance beside me
1 2 3 4 5
21. Having friends
1 2 3 4 5
22. Speaking with acquaintances
1 2 3 4 5
23. Socializing within small groups
1 2 3 4 5
24. Thinking of myself as a part of a larger group
1 2 3 4 5

SATISFACTION:

Secondly, there will be questions examining how SATISFIED you are with the following matters. You will judge on the scale form **1-5**, while **1** means NOT VERY SATISFIED and **5** VERY SATISFIED

- | | | | | | |
|--|--------------------------|--------------------------|--------------------------|--------------------------|--------------------------|
| 1. Being in a good health condition | 1 | 2 | 3 | 4 | 5 |
| | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Sleeping well and enough | 1 | 2 | 3 | 4 | 5 |
| | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Regular working out | 1 | 2 | 3 | 4 | 5 |
| | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Eating healthy food | 1 | 2 | 3 | 4 | 5 |
| | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Good appearance | 1 | 2 | 3 | 4 | 5 |
| | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Sex life | 1 | 2 | 3 | 4 | 5 |
| | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 7. Acceptance the way I am | 1 | 2 | 3 | 4 | 5 |
| | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 8. My mood | 1 | 2 | 3 | 4 | 5 |
| | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 9. Independent acting | 1 | 2 | 3 | 4 | 5 |
| | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 10. No worries and pressure | 1 | 2 | 3 | 4 | 5 |
| | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 11. How I feel about myself | 1 | 2 | 3 | 4 | 5 |
| | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 12. My mental health | 1 | 2 | 3 | 4 | 5 |
| | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 13. Celebration of special events in my life | 1 | 2 | 3 | 4 | 5 |
| | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 14. The meaning of life | 1 | 2 | 3 | 4 | 5 |
| | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |
| 15. Hope for the future | 1 | 2 | 3 | 4 | 5 |
| | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

16. Religious or spiritual beliefs
1 2 3 4 5
17. Helping others in need
1 2 3 4 5
18. My own ideas of right and wrong
1 2 3 4 5
19. Being close to my family
1 2 3 4 5
20. Having a person of special importance beside me
1 2 3 4 5
21. Having friends
1 2 3 4 5
22. Speaking with acquaintances
1 2 3 4 5
23. Socializing within small groups
1 2 3 4 5
24. Thinking of myself as a part of a larger group
1 2 3 4 5

Thank you for your help!