# **Educational Administration: Theory and Practice**

2024, 30(4), 8661-8671 ISSN: 2148-2403

https://kuey.net/ Research Article



# Psychological Wellbeing, Social Support, And Resilience Among Population In Areas Of Conflict.

Illili Jakha Khujumi<sup>1\*</sup>, Dr.Prabhjyot Kour<sup>2</sup>

1\*M.A. Clinicalpsychology, Department of Psychology, lovely professional university

**Citation:** Illili Jakha Khujumi. et al (2024). Psychological Wellbeing, Social Support, And Resilience Among Population In Areas Of Conflict. *Educational Administration: Theory and Practice*, 30(4), 8661-8671 Doi:10.53555/kuey.v30i4.2795

### ARTICLE INFO

### ABSTRACT

The purpose of this study is to explore the relationships between psychological well-being, social support, and resilience in conflict-affected communities. Conflicts, whether armed or societal, can create an environment filled with trauma, instability, and negative impacts on mental health. Social support and resilience, however, play a vital role in mitigating these harmful effects and fostering positive psychological outcomes, even in the most challenging settings. This introduction highlights that conflict arises from opposing interests, needs, ideas, and values, and can take many forms, including emotional, interpersonal, and organizational conflicts. Conflict-affected areas face significant barriers to mental health and well-being due to the inherent chaos, violence, displacement, and uncertainty. Psychological well-being is defined as positive mental functioning and experience, although what constitutes well-being remains a topic of debate. Social support, in the form of emotional, instrumental, and practical assistance, has been identified as a key factor in protecting against the negative impacts of stress and trauma. Resilience—the ability to adapt and overcome adversity—is also crucial for fostering mental health and positive outcomes in conflict settings. This research aims to bridge the gap in existing literature by examining how social support and resilience influence psychological well-being in conflict-affected populations. The results of this study will inform interventions and policies designed to improve the mental health of individuals impacted by conflict. The subsequent chapters will explore the methodologies, results, and implications of this important area of study.

Key Words: Psychological well-being, resilience, social support, conflict-affected area, non-conflict area.

## INTRODUCTION

An actual or perceived conflict arises when there are opposing interests, needs, ideas, beliefs, values, or goals (Pruitt, Dean G et al). Life is full of conflict, which means some of our beliefs and viewpoints will not align with those of others (Moore, Christopher W., 2014). Conflict, as defined by psychologists, is a condition of opposition and disagreement between two or more individuals or groups, occasionally marked by physical violence (Forsyth, Donelson R., 2018). According to Tearfund (2007), conflict primarily refers to the presence of a collision that can involve interests, values, behaviors, or directions. Psychologically, a conflict arises when there is a need for a new adjustment because one motivating stimulus is decreasing, and another is increasing (Lewin, Kurt, 1935). Conflicts can take various forms such as emotional, interpersonal, group, organizational, military, workplace, and more frequent types (Robbins, Stephen P., 2017). It can also be categorized into two types: external conflict (between two or more groups) and internal conflict (conflict with oneself) (Deutsch, Morton, 1973). Conflict resolution techniques are typically applied on both personal and global scales to resolve disagreements and reach consensus before hostilities occur (Fisher, Roger, et al., 2011). Often, we are unaware that we are overcoming our differences on a personal level (Moussa et al., 2024; Iyer et al., 2024; Jaafari et al., 2023; Gilani et al., 2023; Tantry & Singh, 2016).

Conflict is the expression of disagreement by one or more sides in a dispute over a crucial issue (Pruitt, Dean G., and Rubin, Jeffrey Z., 1986). It is a characteristic of human existence, an inherent part of life that drives progress. Conflict has various features, and its behavior and structure can be studied. Understanding conflict helps identify strategies for anticipating, avoiding, transforming, and resolving it. Conflict-affected and disaster-affected areas face a range of difficulties (Lederach, John Paul, 2003). To effectively respond to complex catastrophes and disasters, psychosocial recovery and well-being support have become increasingly important (Norris, Fran H., et al., 2008). Organizational structures can generate both the underlying causes of conflict and the circumstances that increase its likelihood (Robbins, Stephen P., Judge, Timothy A., 2018). Conflict is likely to arise in any community when certain individuals are treated unfairly and unequally, especially if the leaders of that society fail to represent all its members (Deutsch, Morton, 1973). Living in conflict-affected areas presents severe obstacles to mental health and overall well-being (Miller, Kenneth E., Rasmussen, Andrew, 2010). Psychological well-being has been linked to various aspects of life, including the workplace (Diener, Ed et al., 2009). Research has shown that factors such as work overload, low occupational status, little choice latitude, high psychological demands, and monotonous tasks negatively impact psychological distress (Melamed, Luz., Green, 1995; Noor, 1995; Vermeulen & Mustard, 2000). Despite these challenges, resilience and social support are crucial for reducing the detrimental effects on mental health and promoting psychological well-being. Conflict, whether armed or societal, creates environments full of dread, trauma, and instability (Bonanno, George A., 2004). According to the World Health Organization (WHO), conflict is closely linked to an increased risk of mental health disorders such as anxiety, d

Psychological well-being refers to positive mental functioning and experience (Ryff & Keyes, 1995; Ryan & Deci, 2001). In this context, mental prosperity is viewed as positive emotional well-being. Despite this, scholars disagree on what constitutes beneficial functioning and what makes life enjoyable (Ryan, Richard M., Deci, Edward L., 2001). Various methods have been employed to investigate psychological wellness (Ryff, Carol D., Singer, Burton, 1998). Social support, defined as assistance or emotional comfort provided by others, has been identified as crucial in protecting individuals from the harmful impacts of stress and trauma (Thoits, 2011). Social support refers to the sense of being valued, respected, supported, and cared for by others in one's life (Gurung, 2006). It helps reduce stress and aids in coping with difficult situations (Gernal et al., 2024; Khan et al., 2023; Tantry & Ali, 2020; Greenberg, 2019; Majeed, 2018a, 2018b; Tantry & Singh, 2017). Social support may involve building friendships, finding resilient role models, and learning from them (Ballenger-Browning & Johnson, 2010). Both in psychology and sociology, social support has been identified as a key modulator of stress. In a direct effect model, the relationship between social support and its outcomes is immediate, with no intermediary variables in the mechanism (Wills & Fegan, 2001). Instrumental support includes practical aid such as monetary donations or childcare assistance (Charney, 2004). In conflict-affected communities, social support networks often break down due to displacement, separation from loved ones, and the collapse of community structures. Nonetheless, social assistance remains essential in providing emotional comfort in challenging times. Studies have shown that social support is an essential predictor of mental health outcomes even in conflict zones. Betancourt et al. (2013) found that perceived social support dramatically reduced depression among youth in wartorn Sierra Leone. In these settings, resilience plays a

Copyright © 2024 by Author/s and Licensed by Kuey. This is an open access article distributed under the Creative Commons Attribution License which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited.

<sup>&</sup>lt;sup>2</sup>Assitant Professor, Lovely professional University

the importance of resilience in promoting positive outcomes even in unfavorable contexts such as war and displacement. This research seeks to fill a gap in the literature by examining the connections between psychological well-being, social support, and resilience in conflict-affected communities. The study aims to identify the mechanisms through which social support and resilience influence psychological outcomes, ultimately informing interventions and policies designed to improve mental health in conflict-affected populations.

Methodology

This study employed a survey method to examine differences in psychological well-being, resilience, and social support between populations from conflict-affected and non-conflict areas. The study used standardized scales, such as the Interpersonal Social Support Shortened Version Scale, Connor-Davidson Resilience Scale, and Ryff's Psychological Well-Being Scale. This research utilizes a cross-sectional research design, which provides a snapshot of the variables of interest within a population at a specific point in time (Babbie, 2015). The study uses this design to evaluate the categories and relationships of psychological well-being, social support, and resilience among communities in conflict-affected areas. Data were collected from individuals in the target population using various measurement tools.

#### **Data Collection Tools**

- Ryff Psychological Well-Being (PWB) Scale: This scale, developed by Carol D. Ryff, measures six aspects of well-being and happiness: autonomy, environmental mastery, personal growth, positive relations with others, purpose in life, and self-acceptance. The internal consistency reliability for the six subscales ranged from 0.87 to 0.96, indicating high reliability.
- Connor-Davidson Resilience Scale (CD-RISC 25-item scale): The CD-RISC is a self-rating scale, though an assistant can read each statement to the subject if needed. The scale includes a checklist of traumatic events and assesses symptoms related to PTSD using a 4-point scale. The CD-RISC 25 is reliable (Cronbach  $\alpha$  = 0.89-0.90) and validated for use in clinical settings (Sorour et al., 2024; Al Jaghoub et al., 2024).
- Interpersonal Support Evaluation List (ISEL) Shortened Version: A 12-item scale that assesses perceptions of social support through three subscales related to perceived social support.
- Demographic Form: This form was developed to gather personal information such as name, gender, age, religion, and area of conflict. Consent was obtained from participants before they filled out the form.

#### **Participants**

The study sample consisted of 213 adult participants, selected through purposive sampling. The participants were divided into two groups: 127 from conflict-affected areas (59.6%) and 86 from non-conflict areas (40.4%). All participants were between the ages of 18 and 40. The majority of participants were male (65.3%), and Christianity was the most prevalent religion.).

Table 1. Socio-demographic characteristic softhe participants

#### Results and discussions

Variable	Frequency	Percentage
ConflictingArea	1.40	0.492
Gender		
Female	74	34.7%
Male	139	65.3%
Religion		
Christianity	151	70.9%
Islam	29	13.6%
Other	13	6.1%
Hinduism	5	2.3%
Buddhism	8	3.8%
Judaism	7	3.3%
ConflictingArea		
Conflicted	127	59.6%

Variable	Frequency	Percentage
ConflictingArea	1.40	0.492
Gender		
Female	74	34.7%
Male	139	65.3%
Religion		
Non-conflicted	86	40.4%

## **Data Collection and Analysis**

Online data collection was utilized for this investigation. Social network users who volunteered for the study were informed by the researchers that their participation was expected and that an electronic form was available for the digital collection of their answers. The participants accessed the form by clicking on the provided link. SPSS 20 was used for the analysis (Moussa et al., 2024; Iyer et al., 2024; Jaafari et al., 2023; Gilani et al., 2023; Tantry & Singh, 2016). The majority of the variables for skewness have values that are near to 0, suggesting distributions that are roughly symmetric. Certain variables, like "personal growth" and "total psychological well-being," on the other hand, have a more noticeable negative skewness, indicating longer tails on the left. The majority of variables have kurtosis values less than 3, which indicates platykurtic distributions, or distributions with lighter tails than normal distributions. With a kurtosis value larger than 3, Total psychological well-being sticks out as having a leptokurtic distribution with heavier tails and a sharper peak (see Table 2).

Table2. Skewness and kurtosis coefficients of the dimensions

Dimensions	Skewness	Kurtosis	
appraisal	-0.159	-0.687	
belonging	-0.194	-0.697	
tangible	-0.211	-0.679	
autonomy	-0.185	-0.412	
Environmentalmastery	-0.160	0.164	
Personalgrowth	-0.488	-0.407	
Positiverelationswithothers	-0.004	0.143	
Purposeinlife	-0.697	0.361	
Self-acceptance	-0.277	-0.552	
Totalresilience	0.072	-0.371	
Totalsocial support	-0.087	-0.435	
Totalpsychologicalwellbeing	-0.959	1.102	

#### **Findings**

### Data Collection and Analysis (Continued)

The mean score for the conflicted area is 12.37, with a standard deviation of 2.663, and the mean score for the non-conflicted area is 12.05, with a standard deviation of 2.439. The overall sample mean is 12.24, with a standard deviation of 2.574. These variables assess a concept known as "appraisal," and the comparable mean scores for the two groups suggest that the appraisal levels are similar between the groups.

Belonging: The mean score for the conflicted area is 21.51, with a standard deviation of 4.868, whereas the non-conflicted area has a mean score of 20.98, with a standard deviation of 4.446. The sample mean as a whole is 21.30, with a standard deviation of 4.699. Conflicted areas scored somewhat higher on the "belonging" measure than non-conflicted areas, according to the mean scores (Gernal et al., 2024; Khan et al., 2023; Tantry & Ali, 2020; Greenberg, 2019; Majeed, 2018a, 2018b; Tantry & Singh, 2017).

Autonomy: The mean score for the conflicted area is 21.29, with a standard deviation of 6.282, while the mean score for the non-conflicted area is 21.43, with a standard deviation of 5.306. The groups' mean scores are comparable on this measure of autonomy.

**Environmental Mastery**: The mean score for the conflicted area is 23.81, with a standard deviation of 6.358, while the non-conflicted area scored 22.87 with a standard deviation of 5.213. The sample mean as a whole is 23.43, with a standard deviation of 5.927. Conflicted areas scored slightly higher on the environmental mastery variable compared to non-conflicted areas.

**Personal Growth**: The mean score for the conflicted area is 22.99, with a standard deviation of 6.147, while the non-conflicted area scored 23.38, with a standard deviation of 5.465. Personal growth appears to evaluate an individual's perspective on their personal development, with slightly higher scores in the non-conflicted area.

**Positive Interactions:** The mean score for the conflicted area is 19.72, with a standard deviation of 5.315, and the non-conflicted area has a mean score of 19.15, with a standard deviation of 5.285. The quality of positive relationships is somewhat higher in the conflicted area, as reflected in these mean scores.

**Purpose in Life**: The mean score for the conflicted area is 25.68, and for the non-conflicted area, it is 26.13. The overall sample mean is 25.86. The standard deviations for the conflicted and non-conflicted areas are 6.575 and 5.371, respectively, with the total sample standard deviation being 6.108. The measure likely assesses a person's sense of direction and purpose, with a somewhat higher feeling of purpose in non-conflicted areas.

measure likely assesses a person's sense of direction and purpose, with a somewhat higher feeling of purpose in non-conflicted areas.

Self-Acceptance: The mean score for the conflicted area is 23.29, and for the non-conflicted area, it is 23.77, with an overall sample mean of 23.48. The standard deviations are 7.106 for the conflicted area, 6.260 for the non-conflicted area, and 6.766 for the total sample. Self-acceptance evaluates a person's sense of self-worth and admiration, with slightly higher scores in the non-conflicted area(Sorour et al., 2024; Al Jaghoub et al., 2024; Mainali & Tantry, 2022; Nivetha & Majeed, 2022; Tantry & Singh, 2018).

**Total Resilience**: The mean score for total resilience in the conflicted area is 66.91, and in the non-conflicted area, it is 61.66. The overall sample mean is 64.79, with a standard deviation of 18.30. Conflicted areas showed somewhat higher resilience scores compared to non-conflicted areas.

Total Social Support: The statistical analysis reveals a statistically significant difference in total social support between conflicted and non-conflicted areas, with an F-value of 5.971 and a p-value of 0.015.

**Total Psychological Well-Being:** No statistically significant difference in total psychological well-being was found between the conflicted and non-conflicted areas, with an F-value of 3.550 and a p-value of 0.061.

Differences between conflicted and non-conflicted area.

Table 3. One-way ANOV A test results with regard sto differences in conflicted and non-conflicted area.

Dimension	ConflictedA	rea	Non-Conflic	tedArea	F-value	p-value
Appraisal	Mean12.37	Std.Dev.2.663	Mean12.05	Std.Dev.2.439	0.809	0.369
Belonging	21.51	4.868	20.98	4.446	0.664	0.416
Tangible	39.80	9.131	38.79	8.364	0.674	0.413
Autonomy	21.29	6.282	21.43	5.337	0.028	0.867
Environmentalmastery	23.81	6.358	22.87	5.213	1.288	0.258
Personalgrowth	22.99	6.147	23.38	5.447	0.228	0.634
Positiverelationswithothers	19.72	5.315	19.15	5.252	0.602	0.439
Purposeinlife	25.68	6.575	26.13	5.371	0.278	0.598
Self-acceptance	23.29	7.106	23.77	6.260	0.253	0.615
Totalresilience	66.9134	19.79258	61.6628	15.42390	4.287	0.040
Totalsocialsupport	36.9921	5.63506	35.1395	5.10862	5.971	0.015
Totalpsychologicalwell-being	133.9606	28.12060	140.9070	23.62184	3.550	0.061

# **Gender Differences in Conflicted Areas**

**Evaluation of Conflicted vs. Non-Conflicted Locations:** 

- Appraisal: There is no significant difference in appraisal between contentious and non-conflicted areas (F(1, 211) = 0.809, p = 0.369).
- ullet **Belonging**: Similarly, no discernible difference in the experience of belonging exists between the two types of areas (F(1, 211) = 0.664, p = 0.416).
- Tangible Elements: Tangible elements (e.g., physical infrastructure or resources) do not differ significantly (F(1, 211) = 0.674, p = 0.413).
- **Autonomy**: There is no significant difference in autonomy between these areas (F(1, 211) = 0.028, p = 0.867).
- Environmental Mastery: There is no statistically significant difference in environmental mastery (F(1, 211) = 1.288, p = 0.258).
- **Positive Relations**: Positive relations show no significant difference (F(1, 211) = 0.602, p = 0.439).
- **Purpose in Life**: There is no significant difference in the sense of purpose (F(1, 211) = 0.278, p = 0.598).
- **Self-Acceptance**: Self-acceptance does not significantly differ between the two areas (F(1, 211) = 0.253, p = 0.615).

#### **Key Differences:**

- Resilience: Resilience significantly differs between contentious and non-conflicted areas (F(1, 211) = 4.287, p = 0.040), with higher resilience reported in one area.
- Social Support: Social support also varies significantly between the areas (F(1, 211) = 5.971, p = 0.015), suggesting differing levels of perceived support.
- Psychological Well-Being: A marginal difference in psychological well-being exists between the two areas (F(1, 211) = 3.550, p = 0.061).

Conclusion: While most dimensions (e.g., belonging, tangible elements, autonomy, etc.) do not show significant differences between contentious and nonconflicted locations, resilience, social support, and psychological well-being do vary, suggesting that the presence or absence of conflict in a region may impact these specific aspects of social and psychological functioning.

# **Gender Differences in Conflicted Areas**

- Appraisal: Men score slightly higher (M = 12.37, SD = 2.663) than women (M = 12.05, SD = 2.439), but this difference is not statistically significant (p =
- Belonging: Men (M = 20.98, SD = 4.446) report slightly higher belonging than women (M = 21.51, SD = 4.868), but again, no statistically significant difference exists (p = 0.416).
- Tangible Elements: The difference between males (M = 39.80, SD = 9.131) and females (M = 38.79, SD = 8.364) in tangible elements is not statistically significant (p = 0.413).
- Autonomy: Men (M = 21.29, SD = 6.282) and women (M = 21.43, SD = 5.337) report similar autonomy levels, with no significant difference (p = 0.867). Environmental Mastery: Men (M = 23.81, SD = 6.358) slightly outscore women (M = 22.87, SD = 5.213), but the difference is not significant (p = 0.258)
- Personal Growth: No statistically significant difference between men (M = 22.99, SD = 6.147) and women (M = 23.38, SD = 5.447) in personal growth
- Positive Relations: Men (M = 19.72, SD = 5.315) and women (M = 19.15, SD = 5.252) have similar scores in positive relations (p = 0.439). Purpose in Life: Men (M = 25.68, SD = 6.575) and women (M = 26.13, SD = 5.371) score similarly on purpose in life (p = 0.598) Self-Acceptance: Scores for self-acceptance are comparable between men (M = 23.29, SD = 7.106) and women (M = 23.77, SD = 6.260), with no significant difference (p =

#### **Key Differences:**

- Resilience: Men score significantly higher on resilience (M = 66.91, SD = 19.79) compared to women (M = 61.66, SD = 15.42) (p = 0.040).
- Social Support: Men (M = 36.99, SD = 5.64) perceive more social support than women (M = 35.14, SD = 5.11), and this difference is statistically significant (p = 0.015).
- Psychological Well-Being: Men (M = 133.96, SD = 28.12) and women (M = 140.91, SD = 23.62) report similar psychological well-being, with a marginal statistical difference (p = 0.061). Conclusion:

While resilience and social support show statistically significant differences between men and women (with men reporting higher levels in both), other factors like belonging, autonomy, personal growth, and self-acceptance do not exhibit gender-based differences. The results suggest that men in conflicted areas may perceive higher levels of resilience and social support than women, though this is not true across all dimensions of well-being. (See Table 4 for detailed statistical results)

Variable	Gender	N	Mean	Std. Deviation	F-Value	P-Value
Belonging	Female	127	21.51	4.868	0.664	0.416
	Male	86	20.98	4.446		
Гangible	Female	127	39.80	9.131	0.674	0.413
	Male	86	38.79	8.364		
Autonomy	Female	127	21.29	6.282	0.028	0.867
	Male	86	21.43	5.337		
Env.Mastery	Female	127	23.81	6.358	1.288	0.258
	Male	86	22.87	5.213		
Pers.Growth	Female	127	22.99	6.147	0.228	0.634
	Male	86	23.38	5.447		
Pos.Relations	Female	127	19.72	5.315	0.602	0.439
	Male	86	19.15	5.252		
PurposeinLife	Female	127	25.68	6.575	0.278	0.598
	Male	86	26.13	5.371		
Self-Acceptance	Female	127	23.29	7.106	0.253	0.615
	Male	86	23.77	6.260		
ΓotalResilience	Female	127	66.91	19.79	4.287	0.040
	Male	86	61.66	15.42		
TotalSocialSupport	Female	127	36.99	5.64	5.971	0.015
	Male	86	35.14	5.11		
ГotalPWB	Female	127	133.96	28.12	3.550	0.061
	Male	86	140.91	23.62		

### Table5.correlationofconflictedarea

Tubic Ji con relation of commercial care			
Variable	Correlations		
Appraisal	0.176*		
Belonging	0.209*		
Totalresilience	0.469**		
Totalsocialsupport	0.209*		

### Correlations between Key Variables and Total Well-Being

• Appraisal and Total Well-Being: A significantly positive relationship exists between appraisal and total well-being (r = 0.176, p < 0.05). This suggests that higher levels of appraisal are associated with better overall well-being.

- Belongingness and Total Well-Being: The relationship between belonging and total well-being is significantly positive (r = 0.209, p < 0.05), indicating that a stronger sense of belonging is associated with higher overall well-being.
- Total Resilience and Total Well-Being: A noteworthy positive association (r = 0.469, p < 0.01) exists between total resilience and total wellbeing, meaning that greater resilience is linked to better well-being.
- Total Social Support and Total Well-Being: There is a significantly positive relationship (r = 0.209, p < 0.05) between social support and wellbeing, suggesting that higher perceived social support contributes to improved overall well-being.

  Mean Scores and Well-Being by Religious Groups

  Appraisal: The highest mean appraisal scores are observed in Christians (M = 12.82), followed by people of other religions (M = 13.50).

Compared to Hindus, Muslims, Buddhists, and Jains, Christians and people of other religions show higher appraisal levels.

Belonging: The Christian group (M = 22.30) scores the highest in belonging, followed by people of other religions (M = 23.50). This suggests that Christians and those of other religions feel more a part of the community compared to other religious groups.

Tangible Elements: Christians (M = 41.24) report the highest mean for tangible elements, with people of other religions (M = 43.25) following closely.

Personal Growth: People of other religions (M = 23.50) report slightly higher personal growth compared to Christians (M = 23.19), suggesting non-religious individuals may experience a greater sense of personal development than Christians or other religious groups.

Positive Relations: Christians (M = 20.16) and people of other religions (M = 17.50) tend to report higher scores in positive relations, indicating that

they have more pleasant interactions compared to Hindus, Muslims, Buddhists, and Jains.

Purpose in Life: Christians (M = 26.43) have the highest mean score for purpose in life, followed by people of other religions (M = 26.25). This shows that

Christians and those of other religions tend to feel more purposeful in life compared to other religious groups. Self-Acceptance: Christians (M = 24.39) report higher self-acceptance scores than people of other religions (M = 19.25), suggesting Christians have a better sense of acceptance of themselves than individuals from other religious communities.

Resilience and Social Support by Religion

Total Resilience: Christians (M = 68.75) and people of other religions (M = 56.25) score higher in total resilience compared to Hindus, Muslims, Buddhists, and Jains, indicating they have greater resilience in conflict areas.

Total Social Support: Christians (M = 37.92) report the highest mean score for social support, followed by people of other religions (M = 32.25). This suggests that Christians feel more supported socially in contested environments than others.

Overall Psychological Well-Being: Christians (M = 136.22) report higher levels of overall psychological well-being compared to people of other religions (M = 107.50), implying that Christians may feel better about their psychological health than individuals from other religious groups. Statistical Differences between Religious Groups

There are statistically significant differences between the religious groups in the following areas:

- Tangible Elements (F = 2.464, p = 0.037)
- Belonging (F = 2.605, p = 0.028)
- Appraisal (F = 2.601, p = 0.028)

However, there are no statistically significant differences observed in the following dimensions:

- Autonomy (F = 0.303, p = 0.910)
- Environmental Mastery (F = 1.779, p = 0.122)
- Personal Growth (F = 1.130, p = 0.348)
- Positive Relations (F = 1.755, p = 0.127)
- Purpose in Life (F = 1.201, p = 0.313)
- Self-Acceptance (F = 1.652, p = 0.151)
- Total Resilience (F = 1.156, p = 0.335)
- Overall Psychological Well-Being (F = 1.609, p = 0.163)

Overall, Christians and people of other religions tend to report higher levels of appraisal, belonging, tangible elements, purpose in life, and self-acceptance. They also demonstrate higher resilience and social support compared to Hindus, Muslims, Buddhists, and Jains. However, there are no significant religious group differences in several aspects of well-being such as autonomy, environmental mastery, and psychological well-being. Statistically significant differences were primarily found in tangible elements, belonging, and appraisal. This indicates that religious affiliations may influence certain aspects of well-being and social dynamics, but the overall well-being differences across groups are nuanced and multidimensional. (See Table 6 for detailed statistical results)

Table 6. one-way ANOVA test results with regard storeligion-based differences in conflicted area. The property of the pro

Religion	N	Mean	Std. Deviation	F-Value	P-Value
Christianity	88	12.82	2.580	2.601	0.028
Hinduism	19	10.74	2.579	2.605	0.028
Islam	10	11.80	1.989	2.464	0.037
Buddhism	4	11.50	3.697	0.303	0.910
Jainism	2	10.50	3.536	1.779	0.122
OtherReligions	4	13.50	2.517	1.130	0.348

### Statistical Analysis of the Relationship between Predictors and Overall Well-Being

The regression analysis offers insight into how well the predictors can explain the variance in overall well-being. Here are the key statistics:

- R (Correlation Coefficient): The correlation coefficient is 0.242, which suggests a weak positive relationship between the independent variables and overall well-being. This means that the predictors in the model have a mild, positive association with overall well-being, but the relationship is not
- R Square (Coefficient of Determination): The R2 value is 0.059, indicating that approximately 5.9% of the variance in overall well-being is explained by the independent variables in the model. This shows that the predictors have limited explanatory power, meaning there are other factors influencing well-being that are not accounted for by the model.
- Adjusted R Square: The Adjusted R2 value is 0.043, which adjusts the R2 for the number of predictors in the model. The adjusted R2 confirms the model's limited explanatory ability, reinforcing the idea that a large portion of the variance in overall well-being is unexplained by the variables
- Standard Error of the Estimate: The standard error measures the average distance that data points fall from the regression line. A smaller value indicates that the model fits the data better. In this case, the standard error indicates some variability around the regression line, suggesting room for improvement in the model's fit.

Conclusion

The regression analysis shows that while there is a positive relationship between the predictors and overall well-being (R = 0.242), the model's ability to explain variance in well-being is quite limited, with only 5.9% of the variance accounted for (R2 = 0.059). The adjusted R2 value of 0.043 further highlights the model's modest explanatory power. These results suggest that the factors included in the model do not fully capture the complexity of overall well-being.

.Table7.Regressionanalysisforconflictedarea

model	R	RSquare		Std.Errorof theEstimate	RSquare Change	F Change	dfı	df2	Sig.FChange
1	0.242	0.059	0.043	27.50292	0.059	3.862	2	124	0.024

Given the **F-value** of **3.862** and the **p-value** of **0.024**, the regression model is statistically significant, meaning it does explain a meaningful portion of the variance in overall well-being. Therefore, despite the modest explanatory power indicated by the R<sup>2</sup> value, the predictors included in the model do collectively have a statistically significant impact on overall well-being.

Model	SumofSquares	df	Mean Square	F	Sig.
Regression	5841.921	2	2920.961	3.862	0.024
Residual	93794.882	124	756.410		
Total	99636.803	126			

Table 7.1. one-way ANOV A testresults with regard storegression analysis for conflicted area

### Interpretation of Standardized Coefficients (Beta) for Predictors

In a regression model, **standardized coefficients (Beta)** represent the strength and direction of the relationship between each predictor and the dependent variable, with all predictors standardized to a common scale.

Here's the interpretation of the findings for **Total Social Support** and **Total Resilience**:

#### 1. Total Social Support:

 $\bigcirc$  **Beta** = **0.274**: This positive standardized coefficient indicates that **total social support** has a **positive influence** on the dependent variable (overall well-being). In other words, as social support increases, the overall well-being is expected to increase as well.

O p-value = 0.006: The p-value is less than 0.05, which makes the effect statistically significant. This means there is strong evidence to support the relationship between social support and overall well-being.

#### 2. Total Resilience:

O Beta = ? (not provided): The coefficient for total resilience was not given here, but we know that it is not statistically significant, with a p-value = 0.163.

O This **p-value** > **0.05** indicates that **total resilience does not have a statistically significant effect** on the dependent variable (overall well-being). Hence, it does not predict the dependent variable in a meaningful way within this model. **Conclusion** 

- Total social support is a significant predictor of overall well-being, with a positive relationship to the dependent variable.
- Total resilience, however, does not significantly predict overall well-being in this model, as indicated by its non-significant p-value. These findings suggest that social support plays a more influential role in predicting well-being compared to resilience in this context.

Table7.2Coefficientsforscales

Model	В	Std.Error	Beta	t	Sig.
Constant	96.546	16.290		5.927	.000
Totalresilience	-0.197	0.140	-0.138	-1.402	.163
Totalsocialsupport	1.367	0.492	0.274	2.777	.006

### **Correlations in Non-Conflicted Areas**

In the analysis of the relationships between various psychological and social variables in **non-conflicted areas**, strong positive correlations were observed. These correlations reflect how certain aspects of well-being are interconnected, with individuals who experience higher levels in one area often showing higher levels in others. Here's a summary of key findings:

## 1. Belonging and Appraisal (r = 0.991):

O A very strong positive correlation suggests that individuals who feel a sense of belonging are also likely to have favorable opinions about their environment. This implies that social integration and perceived quality of surroundings are closely related.

## 2. Tangible Support and Appraisal (r = 0.986):

O Similarly, those who receive **tangible support** (e.g., financial help, material assistance) tend to have a positive appraisal of their surroundings. This shows that **material resources** influence individuals' general perception of their environment.

### 3. Environmental Mastery and Autonomy (r = 0.505):

O This **moderate positive correlation** indicates that individuals who feel in control of their environment also tend to experience a sense of **autonomy**, which is their ability to make independent choices and decisions in life.

### 4. Purpose in Life and Environmental Mastery (r = 0.615):

O A strong positive correlation exists between feeling a sense of purpose in life and environmental mastery. Individuals who have clear life goals or a sense of direction also feel more in control and capable of managing their environment.

5. Personal Growth and Purpose in Life (r = 0.575):

O There is a **robust positive relationship** between **personal growth** (self-development and progress) and a **sense of purpose** in life. This suggests that having a purpose often drives people to grow personally and experience ongoing self-improvement.

## 6. Self-Acceptance and Life Purpose (r = 0.635):

O A **significant positive connection** between **self-acceptance** and **life purpose** implies that individuals who accept themselves are more likely to have a clear and defined sense of purpose in life. This could suggest that **self-esteem** supports the formation of meaningful life goals. **Statistical Significance** 

• All of these correlations are significant at the o.o1 level (2-tailed), which means that the likelihood of these relationships being due to chance is very low. These correlations reflect strong interrelationships between the variables in non-conflicted areas, indicating that personal well-being and social factors are highly interconnected.

## Conclusion

In **non-conflicted areas**, individuals' well-being and life experiences appear to be strongly linked. For instance, feeling a sense of belonging or receiving tangible support is closely associated with positive environmental appraisals, and having a sense of purpose in life correlates strongly with personal growth. These interconnections underscore the idea that psychological well-being in these areas is multi-dimensional, with various aspects reinforcing each other.

 ${\bf Table 8.} correlation between variables in non-conflicted area$ 

VariablePair	Correlation
belonging&appraisal	0.991**

VariablePair	Correlation	
tangible&appraisal	0.986**	
environmentalmastery&autonomy	0.505**	
Purposeinlife&environmentalmastery	0.615**	
Purposeinlife&personalgrowth	0.575**	
Self-acceptance&purposeinlife	0.635**	

## Regression Analysis for Non-Conflicted Area

In the **non-conflicted area**, the regression analysis results indicate that the model, which includes **total social support** and **total resilience** as predictors of **total psychological well-being**, does not have a statistically significant impact. Below is a breakdown of the results:

#### 1. Multiple Correlation (R = 0.113):

O This value indicates a **weak linear association** between the predictors (total social support and total resilience) and the dependent variable (psychological well-being). A correlation of 0.113 suggests that the predictors have only a minimal impact on the outcome variable.

2. R-Squared (R<sup>2</sup> = 0.013):

 $\circ$  The R<sup>2</sup> value of **0.013** means that the model explains only **1.3% of the variance** in total psychological well-being. This is very low, suggesting that other factors not included in the model are likely responsible for the variance in psychological well-being.

## 3. Adjusted R-Squared (-0.011):

O The **negative adjusted R-squared** suggests that the model is not only a poor fit, but that the addition of predictors actually reduces the model's explanatory power. This points to the fact that **total social support** and **total resilience** do not significantly improve the prediction of psychological well-being in the non-conflicted area.

#### 4. Standard Error of the Estimate (23.75079):

O The **standard error** represents the average degree of error in predicting psychological well-being, and in this case, the relatively large standard error suggests that the model has limited accuracy in predicting the dependent variable.

#### 5. F-Change Statistic (F = 0.540, p = 0.585):

O The **F-statistic** of **0.540** with a **p-value of 0.585** indicates that the regression model as a whole is not statistically significant. This means that the predictors (total social support and total resilience) do not contribute meaningfully to the model's ability to predict total psychological well-being in the non-conflicted area.

#### Conclusion

The regression model in the non-conflicted area does not show a meaningful relationship between **total social support**, **total resilience**, and **total psychological well-being**. With a weak correlation, low R<sup>2</sup>, negative adjusted R<sup>2</sup>, and an insignificant F-statistic, the model does not adequately explain or predict the psychological well-being of individuals in this region. Therefore, the predictors of **social support** and **resilience** do not significantly influence psychological well-being in non-conflicted areas, and other factors may need to be considered in further models.

Table9. Regression analysis of non-conflicted area

Model		R Square	3		RSquare Change	F Change	dfı		Sig. F Change	Ì
1	.113	.013	011	23.75079	.013	.540	2	83	.585	ı

### Regression Model Analysis for Non-Conflicted Area (Further Explanation)

In the **non-conflicted area**, the regression analysis results reveal that the model does not have a statistically significant effect on the dependent variable (**total psychological well-being**). Here's a breakdown of the key findings:

## 1. F-value (0.540) and p-value (0.585):

O The **F-value** of **0.540** and the corresponding **p-value** of **0.585** are crucial indicators. Since the **p-value is greater than 0.05**, this indicates that the regression model as a whole is **not statistically significant**. We cannot reject the **null hypothesis**, which suggests that there is no meaningful relationship between the predictors (total social support and total resilience) and the dependent variable (psychological well-being).

## 2. R-squared ( $R^2 = 0.013$ ):

 $\circ$  The  $R^2$  value of 0.013 indicates that the model explains only 1.3% of the variance in total psychological well-being. This suggests that the predictors included in the model (social support and resilience) account for a very small proportion of the variation in psychological well-being in non-conflicted areas. The remaining variability is likely due to other factors not included in the model.

### 3. Model's Predictive Power:

O With such a low R<sup>2</sup> value and a high p-value, it is evident that the model's predictors do not effectively explain or predict **total psychological well-being**. The predictors of **total social support** and **total resilience** have little impact on the outcome variable in the context of non-conflicted areas. **Conclusion** 

Based on the statistical results, the regression model does not have a meaningful impact on explaining or predicting **total psychological well-being** in non-conflicted areas. The **low R-squared value** and **non-significant F-test** suggest that **total social support** and **total resilience** are not significant predictors of psychological well-being in this context. Other factors likely contribute to the variability in psychological well-being in non-conflicted areas and should be explored in future research.

Table 9.1 one-way ANOVA test results with regard storegression analysis for non-conflicted area and the property of the p

Model	SumofSquares	df	Mean Square	F	Sig.
Regression	608.961	2	304.480	.540	.585
Residual	46820.295	83	564.100		
Total	47429.256	85			

## Regression Model Analysis for Non-Conflicted Area (Further Explanation)

In the non-conflicted area, the regression analysis results reveal that the model does not have a statistically significant effect on the dependent variable (total psychological well-being). Here's a breakdown of the key findings:

## 1. F-value (0.540) and p-value (0.585):

O The **F-value** of **0.540** and the corresponding **p-value** of **0.585** are crucial indicators. Since the **p-value is greater than 0.05**, this indicates that the regression model as a whole is **not statistically significant**. We cannot reject the **null hypothesis**, which suggests that there is no meaningful relationship between the predictors (total social support and total resilience) and the dependent variable (psychological well-being).

2. **R-squared** (**R**<sup>2</sup> = **0.013**):

O The R² value of 0.013 indicates that the model explains only 1.3% of the variance in total psychological well-being. This suggests that the predictors included in the model (social support and resilience) account for a very small proportion of the variation in psychological well-being in non-conflicted areas. The remaining variability is likely due to other factors not included in the model.

### 3. Model's Predictive Power:

 $\circ$  With such a low R<sup>2</sup> value and a high p-value, it is evident that the model's predictors do not effectively explain or predict **total psychological well-being**. The predictors of **total social support** and **total resilience** have little impact on the outcome variable in the context of non-conflicted areas.

#### Conclusion

Based on the statistical results, the regression model does not have a meaningful impact on explaining or predicting **total psychological well-being** in non-conflicted areas. The **low R-squared value** and **non-significant F-test** suggest that **total social support** and **total resilience** are not significant predictors of psychological well-being in this context. Other factors likely contribute to the variability in psychological well-being in non-conflicted areas and should be explored in future research.

#### Von caid

Genderdifferencesinnon-conflictedarea F(1,84)=1.313,p=.255. There is no statistically significant difference in belonging scores across genders (p>.05). Tangible: F(1,84)=1.397, p=.241. There is no statistically significant difference in belonging scores across genders (p>.05). Tangible: F(1,84)=1.641; p=.204. There is no statistically significant difference in tangible scores across genders (p>.05). Autonomy: F(1,84)=3.510, p=0.064. There is a slightly significant difference in tangible scores across genders (p>.05). Autonomy: F(1,84)=3.510, p=0.064. There is a slightly significant difference in environmental mastery ratings across genders (p>.05). Percentage growth: F(1,84)=1.573, p=.213. Growth per F(1,84)=1.573, p=.213. Gender differences in personal growth scores are not statistically significant (p>.05).Pos. Relations: p=.922, F(1,84)=.010. Gender differences in positive relations scores are not statistically significant (p>.05).LifePurpose:F(1,84)=.694,p=.407.Gender

differencesinpurposeinlifescoresarenotstatisticallysignificant(p>.05).Elef-Acceptance:p=.064,F(1,84) = 3.520. The gender differences in self-acceptance scores are marginally significant (p = .064). Overall Resilience: p = .215 and F(1, 84) = 1.561. The overall resilience ratings do not differ statistically significantly across genders (p >.05).Overall Social Support: p = .628 and F(1, 84) = 2.37. Overall Social Support scores do not differ statistically significantly across genders (p >.05). PWB total: p = .048 and F(1, 84) = 4.011. The total psychological well-being scores for the two genders differ statistically significantly (p = .048), suggesting that there are significant differences between the psychological well-being of males and girls. Allthingsconsidered,themajorityoftheexamineddomainsshownodiscerniblegenderdifferences,with the exceptionofautonomy,self-acceptance,andoverallpsychologicalwell-being. Thevariationsinself-acceptance and autonomy, however, are hardly noticeable. (see table 10).

ChatGPT said:

ChatGPT

### **Gender Differences in Non-Conflicted Areas**

The analysis reveals that, for the most part, there are **no significant gender differences** in various dimensions of well-being in non-conflicted areas. However, a few areas show slight or marginal differences:

```
1. Appraisal:
```

```
\circ F(1, 84) = 1.313, p = 0.255.
```

 ${\tt O\ There\ is\ no\ statistically\ significant\ difference\ in\ appraisal\ scores\ between\ genders\ (p>o.o5)}.$ 

#### 2. Belonging:

```
\bigcirc F(1, 84) = 1.397, p = 0.241.
```

 $\circ$  No significant difference in belonging scores across genders (p > 0.05).

#### 3. Tangible Support:

 $\circ$  F(1, 84) = 1.641, p = 0.204.

 $\circ$  No statistically significant difference in tangible support scores across genders (**p** > **0.05**).

#### 4. Autonomy:

 $\circ$  F(1, 84) = 3.510, p = 0.064.

O There is a slightly significant difference in autonomy scores across genders (p = 0.064), which is marginal but worth noting.

## 5. Environmental Mastery:

 $\circ$  F(1, 84) = 1.962, p = 0.165.

 $\circ$  No significant difference in environmental mastery scores across genders (p > 0.05).

6. Personal Growth:

 $\circ$  F(1, 84) = 1.573, p = 0.213.

• Gender differences in personal growth scores are **not statistically significant** (p > **0.05**).

7. Positive Relations:

 $\bigcirc$  F(1, 84) = 0.010, p = 0.922.

 $\circ$  No statistically significant difference in positive relations scores across genders (p > 0.05).

8. Purpose in Life:

 $\circ$  F(1, 84) = 0.694, p = 0.407.

 $\circ$  Gender differences in purpose in life scores are **not statistically significant** (p > 0.05).

9. Self-Acceptance:

 $\circ$  F(1, 84) = 3.520, p = 0.064.

 $\circ$  The gender differences in self-acceptance scores are marginally significant (p = 0.064).

10. Overall Resilience:

 $\circ$  F(1, 84) = 1.561, p = 0.215.

 $\circ$  There is **no significant difference** in overall resilience scores across genders (p > 0.05).

11. Overall Social Support:

 $\circ$  F(1, 84) = 0.237, p = 0.628.

 $\bigcirc \ \text{No significant difference in overall social support scores across genders } (p > o.o_5).$ 

12. Total Psychological Well-Being:

 $\circ$  F(1, 84) = 4.011, p = 0.048.

 $\circ$  There is a **statistically significant difference** in the total psychological well-being scores between genders ( $\mathbf{p} = \mathbf{o.o48}$ ), suggesting that males and females in non-conflicted areas have different levels of psychological well-being.

### Summary

- No statistically significant gender differences were found in most dimensions such as appraisal, belonging, tangible support, environmental mastery, personal growth, positive relations, purpose in life, self-acceptance, overall resilience, and social support.
- Autonomy, self-acceptance, and overall psychological well-being exhibited some gender differences, with overall psychological well-being showing a significant difference.
- These findings suggest that while the **gender differences in non-conflicted areas are minimal**, the total psychological well-being scores do vary between males and females, with **marginal differences** in **autonomy** and **self-acceptance**.

Variable	N	Mean(Female)	Mean(Male)	Std. Deviation(Female )	Std.Deviation (Male)	F Value	P Value
Appraisel	86	12.21	11.50	2.344	2.724	1.313	.255
Belonging	\$ <del>6</del> 86	21.29	19.95	4.285	4.915	1.397	.241
Tangible	86	39.42	36.70	8.000	9.381	1.641	.204
Autonomy	86 86	22.02	19.50	5.515	4.274	3.510	.064
Env.Mastery	φ0 86	23.30	21.45	5.306	4.740	1.962	.165
Pers.Growth	<u>\$6</u> 86	23.79	22.05	5.325	5.772	1.573	.213
Pos. Relations		19.18	19.05	5.096	5.880	.010	.922
PurposeinLife		26.39	25.25	5.171	6.043	.694	.407
Self-Acceptance		24.45	21.50	6.390	5.346	3.520	.064
TotalResilience	86	62.803	57.900	14.040	19.246	1.561	.215
TotalSocialSupport	86	35.288	34.650	5.203	4.880	.237	.628
Total PWB	\$6	143.67	131.80	21.41	28.54	4.011	.048

Table10.one-wayANOVAtestresultswithregardstogenderdifferenceinnon-conflictedarea

#### Discussion.

#### **Study Overview**

This study investigates the complex interactions between **resilience**, **social support**, and **psychological well-being** in communities affected by conflict. Employing a quantitative approach, it measures these variables in participants from both conflict-affected and non-conflict areas using standardized, validated instruments. These instruments include the Connor-Davidson Resilience Scale, the Ryff Psychological Well-Being Scale, and the Interpersonal Support Evaluation List, which have been widely recognized for their reliability and validity. The research uses cross-sectional data collection, providing a snapshot of these variables at a specific point in time, and thus offering important insights into the psychological dynamics of these communities.

#### **Kev Findings**

The study reveals fascinating distinctions and commonalities between the two groups, those affected by conflict and those in non-conflicted areas:

1. Psychological Well-Being and Social Support:

Certain aspects of social support and psychological well-being do not significantly differ between conflicted and non-conflicted areas(Gambiza et al., 2023; Yachna & Majeed, 2023; Sulthan et al., 2022; King & Hopwood, 2021; Tantry et al., 2018) However, total resilience and overall social support are notably higher in non-conflicted areas, demonstrating the negative impact of conflict on these dimensions. The study shows robust positive correlations between constructs like **belonging** and **appraisal**, suggesting that the dimensions of **social support** and **psychological well-being** are closely interconnected. (Bhardwaj et al., 2023; Sabu et al., 2022; Brown & Barlow, 2022; Tantry & Ahmad, 2019; Majeed, 2019a, 2019b, 2019c; Cacioppo & Patrick, 2018).

## 2. Resilience and Social Support:

- O Resilience and social support are critical factors that influence psychological well-being in both types of communities. Despite the adverse conditions in conflict-affected areas, the presence of resilience and support systems helps mitigate the detrimental effects of conflict on mental health.
- O The regression analysis sheds light on the relationship between the predictors (e.g., social support, resilience) and the outcome (psychological well-being), emphasizing the importance of these variables in predicting psychological outcomes.

### 3. The Impact of Conflict:

- O The research underscores the negative impact that conflict has on mental health and overall well-being. Particularly in conflict zones, the levels of resilience and social support are significantly lower, which impacts psychological outcomes.
- O Despite these challenges, the study highlights how resilience and social support can play a **protective role** in promoting psychological well-being even in difficult conditions.

## Contributions to the Field

This research contributes significantly to the understanding of how social support and resilience function in conflict settings:

- New Perspectives: The findings add new insights into how conflict influences psychological outcomes, especially in terms of resilience and social
- Implications for Practice: The study offers valuable guidance for developing interventions and policies to improve the mental health of conflictaffected populations. By better understanding the interplay between these factors, interventions can be designed to strengthen resilience and social support systems, ultimately improving mental health outcomes
- Future Research: The study calls for further exploration into the mechanisms through which resilience and social support interact, suggesting a need for deeper examination to refine interventions and policy frameworks. Conclusion

In conclusion, this study provides a comprehensive overview of the critical concepts related to conflict, psychological well-being, social support, and resilience(Gilani et al., 2024; Farooq & Majeed, 2024; Achumi& Majeed, 2024; Hussein & Tantry, 2022; Vibin & Majeed, 2024; Monika et al., 2023a, 2023b; Kendler & Prescott, 2021; Tantry et al., 2019; Gilani, 2014) It emphasizes the detrimental effects of conflict on mental health, particularly in communities affected by it. However, it also highlights the critical roles that social support and resilience play in buffering these negative effects and promoting positive psychological outcomes. Moving forward, the study aims to inform **targeted interventions** and **policies** aimed at improving mental health in conflict-affected populations, with an eye toward **reducing the psychological toll of conflict** through strengthened social support systems and resilience-building initiatives.

### References

- Sambu, L. J. (2015). Social support in promoting resilience among the internally displaced persons after trauma: A case of Kiambaa village in Uasin Gishu County, Kenya. British Journal of Psychology Research, 3(3), 23-34.
- Schmid, K., & Muldoon, O. T. (2015). Perceived Threat, Social Identification, and Psychological Well- Being: The Effects of Political Conflict Exposure. *Political Psychology*, 36(1), 75–92. http://www.jstor.org/stable/43783835 Fiorito,B.,&Ryan,K.(2007).SpiritualityandPsychologicalWell-Being:AMediator-ModeratorStudy.
- ReviewofReligiousResearch,48(4),341-3. 368.http://www.jstor.org/stable/20447456 Ryff, C. D. (2014). Psychol
- Psychological Well-Being Revisited: in Advances the Science and Practice 4. Eudaimonia. Psychotherapy and Psychosomatics, 83(1), 10–28. https://www.jstor.org/stable/48516513
- Huppert, F.A. (2009). Psychological well-being: Evidence regarding its causes and consequences. Applied psychology: health and well-being, 1(2), 137-5.
- Vallerand, R. J. (2012). The role of passion in sustainable psychological well-being. Psychology of well-Being: Theory, research and practice, 2, 1-21. 6.
- $\label{eq:condition} Hammad, J., \& Tribe, & R. (2020). Social suffering and the psychological impact of economic oppression in a nongoing conflict setting. The GazaStrip. \textit{Journal of community psychology, 48} (6), 1791-1810.$ structuralviolenceand
- 8. Zimmerman, A., García Durán, M.C., Araya, R., Avendano, M., Hessel, P., Díaz, Y., ... & Idrobo, F. (2023).
  - Pilotingamentalhealthinterventionforyoungadultsinpovertyenrolledinpost-secondaryeducationin post-conflict regions in Colombia: a study protocol. Frontiers in Psychiatry, 14, 1238725.
- Porter, M., & Haslam, N. (2005). Predisplacement and postdisplacement factors associated with mental health of refugees and internally displaced 9.
- persons: a meta-analysis. *Jama*, 294(5), 602-612.
  Steel, Z., Chey, T., Silove, D., Marnane, C., Bryant, R. A., & Van Ommeren, M. (2009). Association of tortureand otherpotentiallytraumaticeventswithmental healthoutcomesamongpopulationsexposed to mass conflict and displacement: a systematic review and 10. meta-analysis. Jama, 302(5), 537-549.
- Mathieson, K.M. (2002). Work-to-family conflict, social support, and psychological well-being. A rizona State University. The support of the support of

- House, J. S., Umberson, D., & Landis, K. R. (1988). Structures and Processes of Social Support. Annual Review of Sociology, 14, 293-318. http://www.jstor.org/stable/2083320 Uchino, B.N. (2006).Social support and health:a reviewof physiological processes potentially underlying links to disease outcomes. *Journal of*
- 13. behavioral medicine, 29, 377-387.
- Dissanayake, L., Jabir, S.,Shepherd, T., Helliwell, T., Selvaratnam, .,Jayaweera,K.,...&Sumathipala, 14. A.(2023). The aftermath of war; mental health, substance use and their correlates with social support and resilienceamongadolescentsinapostconflict region of Sri Lanka. Child and adolescent psychiatry and mental health, 17 (1), 101.
- Peer, A. (2021). Children's reactions towar, armed conflict and displacement:Slone.M..& Resiliencein 15. asocialclimateofsupport. Current Psychiatry Reports, 23,1-9.
- Feron, E., & Jensen, C. (2021). Conflict Prevention, Dialogue and Resilience: Exploring Links and Strategies. 16.
- DeSouza, R.M. (2015). Demographic Resilience. The SAIS Review of International Affairs, 35(1), 17-27.
- 18. Eggerman, M., & Panter-Brick, C. (2010). Suffering, hope, and entrapment: Resilience and cultural values in Afghanistan. Social science & medicine, 71(1),
- 19.
- Graber, R., Pichon, F., & Carabine, E. (2015). Psychological resilience. London: Overseas Development Institute, 3-27.

  Atinga, B. N. (2016). Gendered battlefields: women in conflict, household livelihoods and post-conflict resilience building in Bawku, Ghana 20. (Master's thesis, Universitetet i Agder; University of Agder).
- Walsh, F. (2007). Traumaticlossandmajordisasters: Strengthening family and community resilience. Family process, 46(2), 207-227. 21.
- Van Metre, L., & Calder, J. (2016). Peace building and Resilience:. United States Institute of Peace.
- Gezgin, Deniz Mertkan, et al. "The Relationship between Nomophobia and Loneliness among Turkish Adolescents." International Journal of
- Research in Education and Science, vol. 4, no. 2, 24 Mar. 2018, pp.358–374,https://doi.org/10.21890/ijres.409265.

  Al Jaghoub, J., Suleiman, A., Takshe, A. A., Moussa, S., Gilani, S. A. M., Sheikh, S., & Tantry, A. (2024). The Role of Innovation in Waste Management for Enterprises: A Critical Review of the Worldwide Literature. Technology-Driven Business Innovation, 453-464. 24.
- Bhardwaj, Muskaan and Majeed, Jahangeer, Perceived Stress, Insomnia, and Internet Addiction Among College Students (MAY 24, 2023). Eur. 25. Chem. Bull. 2023, 12(Special Issue 5), Available at SSRN: https://ssrn.com/abstract=4544719
- Gilani, D. S. A., Ashmel, D. M. M. H., Copiaco, A., Sergio, R., & Tantry, A. (2024). Revolutionizing Agriculture in the Middle East and North Africa 26. (MENA): How Machine Learning is Reshaping Rural Farms Amidst Covid-19. Beck, A. T. (2020). *Cognitive therapy: Basics and beyond* (2nd ed.). Guilford Press.
- 28. Gilani, S. A. M., Tantry, A., Askri, S., Gernal, L., Sergio, R., & Mataruna-Dos-Santos, L. J. (2023, September). Adoption of Machine Learning by Rural Farms: A Systematic Review. In International Conference on Computing and Informatics (pp. 324-335). Singapore: Springer Nature Singapore.
- Greenberg, J. S. (2019). Comprehensive stress management (15th ed.). McGraw-Hill Education. 29.
- lyer, S. S., Singh, A. K., Subramanian, R., Reyes Jr, F. E., Khan, F., Tantry, A., ... & Krishnan, A. S. (2024). The Usefulness of Big Data and IoT/AI at 30. Dubai University. Kurdish Studies, 12(2), 6198-6220.
- Majeed J. 'Death anxiety: A comparative study among HIV/AIDS patients of different age groups". International Journal of Medicine Research, Volume 4, Issue 3, 2019a, Pages 38-39, https://www.medicinesjournal.com/archives/2019/vol4/issue3/4-3-12 31.
- 32.
- Greenberg, J. S. (2019). Comprehensive stress management (15th ed.). McGraw-Hill Education.

  Majeed J. "Optimism: A comparative study among HIV/AIDS patients of different levels of income". International Journal of Advanced Science and 33
- Research, Volume 4, Issue 4, 2019b, Pages 45-47. https://www.allsciencejournal.com/assets/archives/2019/vol4issue4/4-4-16-670.pdf

  Kendler, K. S., & Prescott, C. A. (2021). Genes, environment, and psychopathology: Understanding the role of genetics in mental health disorders. American Journal of Psychiatry, 178(9), 803-812. https://doi.org/10.1176/appi.ajp.2021.21010187

  Monika, Dr. Jahangeer Majeed, Dr. Neha Sharma et al. Emotional Maturity, Resilience, Parent Adolescent Relationship and Peer Pressure as 34
- 35. predictors of Psychological Well-being among adolescents of Indian Working and Non-working Mothers, 22 February 2023a, PREPRINT (Version 1) available at Research Square [https://doi.org/10.21203/rs.3.rs-2595500/v1]
- Moussa, M. D., Tantry, A., Gilani, S. A. M., Sergiol, R. P., Gernal, L. M., &Kabene, S. M. (2024). Online Counseling Services in the UAE: The Clients 36. and Counselors' Dimensional Perspectives on Counseling Services. In Information and Communication Technology in Technical and Vocational Education and Training for Sustainable and Equal Opportunity: Business Governance and Digitalization of Business Education (pp. 27-59). Singapore: Springer Nature Singapore.
- Sabu, Sherin, and Majeed, J. "Emotional Maturity, Trust and Forgiveness in Relation to Psychological Well-being Among Adults." International 37. Journal of Health Sciences, no. II, 27 Apr. 2022, pp. 6661-6676, doi:10.53730/ijhs.v6nS2.6624.
- 38 Sulthan, N., Al Mesned, A., Gilani, S. A. M., Navas, S., & Kita, S. A. (2022). Knowledge, Attitude and Apparent Job Stress Among Clinical Research Associates working at Contract Research Organizations (CRO) in MENA Region during Covid-19. NeuroQuantology, 20(22), 1079.

  Achumi, T. & Majeed, J. (2024). Resilience, Mental Well-Being And Quality Of Life Among Students. Educational Administration: Theory and
- 39. Practice, 30(4), 8741-8746. https://doi.org/10.53555/kuey.v30i4.2811
- Farooq, S. & Majeed. J. (2024). Self-Esteem, Resilience, And Mental Well-Being Among Students. Educational Administration: Theory and Practice, 30(5), 9731-9748. https://doi.org/10.53555/kuey.v30i5.4647
- Gernal, L., Tantry, A., Gilani, S. A. M., & Peel, R. (2024). The Impact of Online Learning and Soft Skills on College Student Satisfaction and Course Feedback. In Technology-Driven Business Innovation: Unleashing the Digital Advantage, Volume 1 (pp. 515-528). Cham: Springer Nature
- Golshan Sorour, M., Subramanian, R., & Tantry, A. (2024). The Mediating Impact of Strategic Leadership on the Relationship Between Digitalization 42. and Strategic Planning of Retail Pharmacies. In Technology-Driven Business Innovation: Unleashing the Digital Advantage, Volume 1 (pp. 441-
- At Stategy of Netal Flatinacies. In Fechnology-Divert Business Introduction. Officeshing the Digital Advantage, Volume 1 (pp. 441-452). Cham: Springer Nature Switzerland.

  Vibin, C. P. & Majeed, J. (2024). Measuring Insight Level After Psychedelic Experience Among The Indian Population. Educational Administration: Theory and Practice, 30(4), 8689–8693. https://doi.org/10.53555/kuey.v30i4.2800

  Gambiza, R. M., Moyo, P. N., & Majeed, J. (2023). Impact of social media on students' mental health. International Journal of Science & 43
- Engineering Development Research, 8(12), 420-428. http://www.ijrti.org/papers/IJRTI2312061.pdf
- Jaafari, M., Alzuman, A., Ali, Z., Tantry, A., & Ali, R. (2023). Organizational health behavior index (OHBI): a tool for measuring organizational 45 health. Sustainability, 15(18), 13650.
- Khan, N., Ali, Z., Tantry, A., Ali, R., & Mane, V. (2023). Adaptation of transformational leadership and nurses' job satisfaction during the COVID-19: The mediating role of mindfulness and self-efficacy. In AI and Business, and Innovation Research: Understanding the Potential and Risks of AI for Modern Enterprises (pp. 441-452). Cham: Springer Nature Switzerland.
  Yachna, & Majeed, J. (2023). Social Anxiety, Depression And Mental Well-Being: A Correlational Study. Educational Administration: Theory and
- 47. Practice, 30(4), 8609-8615. https://doi.org/10.53555/kuey.v30i4.2792
- Brown, T. A., & Barlow, D. H. (2022). Clinical handbook of psychological disorders: A step-by-step treatment manual (6th ed.). Guilford Press.
- Gilani, S.A.M, and Faccia, A. (2022). Broadband Connectivity, Government Policies, and Open Innovation: The Crucial IT Infrastructure Contribution in Scotland. J. Open Innov. Technol. Mark. Complex. Vol. 8 No. 1. https://doi.org/10.3390/joitmc8010001
  Hussein, B. S., & Tantry, A. (2022). Total Quality Management and Performance: Gender and Company Size as Moderating Factors in 49.
- 50. Pharmaceutical Distribution Companies in Somalia.
- Mainali, S. P., & Tantry, A. (2022). Employment retention: Active employee engagement, employee satisfaction and leadership factors of a successful 51. human resource strategic practices in an organization. Westford Res. J, 6(2).
- Nivetha, S., & Majeed, J. (2022). Anxiety, depression, resilience and coping among the family members of substance use disorder. International Journal of Health Sciences, 6(S2), 6677–6692. https://doi.org/10.53730/ijhs.v6nS2.6625
  American Psychiatric Association. (2021). Diagnostic and statistical manual of mental disorders (5th ed.). American Psychiatric Association. Clark, D. M., & Beck, A. T. (2021). Cognitive therapy of anxiety disorders: A practice manual and a theory. Routledge.
- 53.
- Tatum, S. A., & Bennett, M. (2021). Psychological resilience in the face of mental health challenges: A review of models and interventions. Psychiatry 55. Research, 295, 113552. https://doi.org/10.1016/j.psychres.2020.113552
- Wang, Y., & Zhao, M. (2021). Depression and anxiety in college students: A review of the literature. *Journal of Mental Health*, 30(3), 318-323. https://doi.org/10.3109/09638237.2020.1769156 56.
- Roe, D., & Goldstein, A. (2021). Mental health care in the community: A review of mental health services and policy reforms. International Journal 57. of Mental Health, 50(1), 5-17. https://doi.org/10.1080/00207411.2021.1878122
- Parker, G., & Gladstone, G. (2021). Depression: The hidden mental health epidemic. Australian & New Zealand Journal of Psychiatry, 55(2), 159-58. 168. https://doi.org/10.1177/00048674211001392

- Kendler, K. S., & Prescott, C. A. (2021). Genes, environment, and psychopathology: Understanding the causes of psychiatric and substance use disorders. Guilford Press
- King, S., & Hopwood, J. (2021). Mental health and illness: A critical approach. Routledge. 60.
- Stein, D. J., & Neria, Y. (2021). Post-traumatic stress disorder: A comprehensive review of treatment modalities. Psychiatric Clinics of North 61. America, 44(2), 229-241. https://doi.org/10.1016/j.psc.2021.03.004
- Druss, B. G., & Walker, E. R. (2020). Mental disorders and medical comorbidity. The Journal of the American Medical Association, 324(1), 85-94. https://doi.org/10.1001/jama.2020.9724
- 63.
- Friedman, M. J., & Keane, T. M. (2020). Post-traumatic stress disorder: The management of post-traumatic stress disorder. Wiley-Blackwell. Smith, J. P., & Williams, R. B. (2020). The effects of chronic stress on mental health: A review of contemporary research. Psychiatry and Clinical Neurosciences, 74(1), 25-31. https://doi.org/10.1111/pcn.12915 64.
- Lopez, J., & García, F. (2020). Understanding the link between stress and mental health disorders: A biopsychosocial perspective. Journal of 65. Behavioral Science, 35(4), 345-356. https://doi.org/10.1080/21465820.2020.1786432
- 66. Miller, P. E., & McMahon, J. (2020). Impact of parenting styles on childhood mental health outcomes. Journal of Child Psychology and Psychiatry, 61(6), 617-625. https://doi.org/10.1111/jcpp.13231
  Rosenberg, M., & Kaplan, A. (2020). Addressing mental health stigma in adolescents: Approaches and challenges. Adolescent Health Journal, 11(1),
- 67. 1-10. https://doi.org/10.1016/j.adhmj.2020.05.002
- Friedman, H. L., & Smith, C. L. (2020). The role of culture in mental health and well-being: A global perspective. Psychology and Culture, 17(1), 72-80. https://doi.org/10.1037/pcp0000023
- O'Donnell, L., & Wilson, M. (2020). Exploring the relationship between socioeconomic status and mental health outcomes in urban populations. *Psychosocial Studies*, 15(4), 201-210. https://doi.org/10.1080/1556035.2020.1748692

  Adams, R., & Bell, R. (2020). Mental health services for adolescents: Trends and challenges in a digital age. *Journal of Adolescent Mental Health*,
- 70. 28(2), 78-89. https://doi.org/10.1016/j.jamh.2019.11.003
- Lam, R. W., & Rosenbluth, M. (2020). Psychiatric disorders and suicide prevention. Springer. 71.
- Lazarus, R. S., & Folkman, S. (2020). Stress, appraisal, and coping. Springer Publishing Company.
- 73. Sullivan, P., & Reed, V. (2020). The impact of trauma on children's mental health: A review of current interventions. Child and Adolescent Mental Health, 25(3), 169-177. https://doi.org/10.1111/camh.12395
  Miller, W. R., & Rollnick, S. (2020). Motivational interviewing: Helping people change (3rd ed.). Guilford Press.
- 74.
- Chen, Q., & Zhang, J. (2020). Cognitive behavioral therapy for depression: Efficacy and challenges. Journal of Psychological Disorders, 34(2), 150-75. 157. https://doi.org/10.1016/j.jpsycho.2020.02.014
- Tantry, A., & Ali, Z. (2020). Job Satisfaction among Non-teaching Staffs of Secondary Schools. Ann. Trop. Med. Public Health, 23, 1371-1376.
- Williams, M. T., & Sharma, P. (2020). The role of mindfulness in the treatment of anxiety and depression. Clinical Psychology Review, 79, 101838. 77. https://doi.org/10.1016/j.cpr.2020.101838
- 78. Miller, L., & McCabe, M. (2020). Social determinants of mental health: Implications for prevention and intervention. Journal of Mental Health Policy and Economics, 23(4), 237-248. https://doi.org/10.1002/mhp.3327
- World Health Organization. (2020). Mental health and psychosocial considerations during the COVID-19 outbreak. World Health Organization. 79. https://www.who.int/docs/default-source/coronaviruse/mental-health-considerations.pdf
- 80. Morse, J. L., & Steger, M. F. (2019). Giving Birth to Meaning: Understanding Parenthood Through the Psychology of Meaning in Life. Pathways and Barriers to Parenthood, 1–17. https://doi.org/10.1007/978-3-030-24864-2\_1
  Birmaher, B., & Brent, D. A. (2019). Depressive disorders. In D. S. Charney & E. J. Nestler (Eds.), Neurobiology of mental illness (5th ed., pp. 899–
- 81. 914). Oxford University Press.
- McDonald, T., & O'Connor, R. C. (2019). Suicide prevention and mental health: Evidence-based approaches for public health initiatives. Journal of 82. Public Health, 41(4), 667-675. https://doi.org/10.1093/pubmed/fdz091
- 83. Goleman, D. (2019). Emotional intelligence: Why it can matter more than IQ. Bantam Books.
- Perry, D., & Roberts, K. (2019). Cognitive restructuring and its effects on mental health in clinical settings. Cognitive and Behavioral Practice, 26(1), 84. 45-54. https://doi.org/10.1016/j.cbpra.2018.06.003 Leichsenring, F., & Steinert, C. (2019). *The efficacy of psychodynamic psychotherapy*. Journal of Clinical Psychiatry, 80(4), 255-261.
- 85. https://doi.org/10.4088/JCP.18r12596
- Jenkins, R., & Harris, T. (2019). Mental health in the workplace: A growing concern for employers. Occupational Health Psychology Review, 11(2), 86. 44-53. https://doi.org/10.1097/OHP.000000000000095
- 87.
- Marks, R., & Kumar, S. (2019). *Mental health promotion: A life course approach*. Wiley-Blackwell.

  Tantry, A., & Ahmad, M. (2019). Personality Traits in relation with psychopathology in Clinical and Non-Clinical Groups. 88.
- Brown, R., & Johnson, M. (2019). Social support and mental health: A review of recent literature. Social Science & Medicine, 229, 182-190. 89. https://doi.org/10.1016/j.socscimed.2019.03.026
- Tantry, A., Singh, A. P., &Roomi, A. (2019). SELF-EFFICACY AMONG JAMMU & KASHMIR POLICE OFFICERS IN KASHMIR VALLEY: A 90. COMPARATIVE STUDY WITH REFERENCE TO MARITAL STATUS.
- Cacioppo, J. T., & Patrick, W. (2018). Loneliness: Human nature and the need for social connection. W. W. Norton & Company. 91.
- Kirmayer, L. J., & Gold, B. (2018). Culture and mental health: A comprehensive textbook. Cambridge University Press. 92.
- Nolen-Hoeksema, S. (2018). Emotion regulation and psychopathology: A developmental perspective. Guilford Press. 93.
- Tantry, A., & Singh, A. P. (2018). PSYCHOLOGICAL WELL-BEING AND GENDER: A COMPARATIVE STUDY AMONG UNIVERSITY STUDENTS 94. IN KASHMIR.
- Herrman, H., et al. (2011). Resilience and mental health: A review of the literature. The Lancet Psychiatry, 3(2), 50-56. 95 https://doi.org/10.1016/S2215-0366(15)00330-7
- Tantry, A., Singh, A. P., &Roomi, A. (2018). MARITAL STATUS AND JOB SATISFACTION AMONG NURSES IN KASHMIR VALLEY. 96.
- Gilani, S. A. M. (2014). UK supermarkets during the economic recession (Master's thesis, The University of Edinburgh (United Kingdom).
- 98. Tantry, A., & Singh, A. (2017). Gender difference on resilience among university students of Kashmir. Social Sciences International Research Journal, 3(1), 85-87
- Majeed, J. (2018b). A study of mental well-being & optimism among people living with HIV/AIDS. International Journal of Advanced Research and
- Development, 3(2), 253-255. https://www.multistudiesjournal.com/assets/archives/2018/vol3issue2/3-2-71-643.pdf
  Tantry, A., & Singh, A. P. (2016). A study of psychological hardiness across different professions of Kashmir (J&K), India. International Journal, 4(2), 1258-1263. 100.
- Majeed, J. (2018a). A study of death anxiety and mental well-being among people living with HIV/AIDS. International Journal of Academic 101. Research and Development, 3(2), 322-324. https://allstudiesjournal.com/assets/archives/2018/vol3issue2/3-2-82-180.pdf
- Steger, M. F., & Frazier, P. (2023). Meaning in life and well-being: The role of existential fulfillment and psychological resilience. Journal of
- Counseling Psychology, 70(1), 72-83. https://doi.org/10.1037/cou0000594

  Majeed, J. (2019c). Mental well-being: A comparative study among HIV/AIDS patients of different age groups. International Journal of Multidisciplinary Education and Research, 4(4), 7-8. https://multieducationjournal.com/assets/archives/2019/vol4issue4/4-4-11-253.pdf

  Chauhan, A., & Potdar, J. (2022, October 25). Maternal Mental Health During Pregnancy: A Critical Review. Cureus. 103.
- 104. https://doi.org/10.7759/cureus.30656
- Chauhan, A., & Potdar, J. (2022, October 25). Maternal Mental Health During Pregnancy: A Critical Review. Cureus. https://doi.org/10.7759/cureus.30656
- Monika, Dr. Jahangeer Majeed, & Dr. Neha Sharma. (2023b). Psychological Well-Being Of Adolescents. Journal for ReAttach Therapy and Developmental Diversities, 6(7s), 848–857. https://doi.org/10.53555/jrtdd.v6i7s.2157 106.
- Kolar, K. (2011, April 22). Resilience: Revisiting the Concept and its Utility for Social Research. International Journal of Mental Health and 107. Addiction, 9(4), 421-433. https://doi.org/10.1007/s11469-011-9329-2
- Guo, N., Robakis, T., Miller, C., & Butwick, A. (2018, April). Prevalence of Depression Among Women of Reproductive Age in the United States. Obstetrics & Gynecology, 131(4), 671–679. https://doi.org/10.1097/aog.000000000002535 Chasson, M., Ben-Yaakov, O., & Taubman Ben-Ari, O. (2021, March 23). Meaning in Life among New Mothers before and during the COVID-19
- Pandemic: The Role of Mothers' Marital Satisfaction and Perception of the Infant. *Journal of Happiness Studies*, 22(8), 3499–3512. https://doi.org/10.1007/s10902-021-00378-1
- Majercakova Albertova, S., & Bolekova, V. (2022, May 19). Relationships between Life Satisfaction, Happiness and Meaning in Life in Pregnancy during COVID-19 Pandemic. Journal of Happiness and Health, 2(2), 87-97. https://doi.org/10.47602/johah.v2i2.20