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Academic Stress, Social Support, Physical Health, and Psychological Well-being during Covid-19

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ABSTRACT

The novel corona virus disease (COVID-19) has literally paused the world. Though the pandemic has put immense pressure on everyone, students are the one of the most prominent victims of the present pandemic. Due to uncertainty in examination procedure and date, anxiety of not completing the project and dissertation, unavailability of internet facilities all of these contributed to academic stress of students, and affected the psychological well-being of the students. In this time of crisis one important buffer factor that helped students to deal with anxiety and depression is social support, that is the level of support students got from family and friends. Also, due to the immense pressure and stress the physical health of the students were also at stake. So the present study aimed to investigate the impact of academic stress, social support and physical health on psychological well-being of the college going students. Total 175 college going students (18-21years) were approached, out of which 151 were included in the study. The data were obtained by Academic stress scale, Multidimensional scale of perceived social support scale, Short from general health survey, and Psychological well-being general index. The study obtained a significant negative relationship between psychological well-being and academic stress, and a significant positive relationship of psychological well-being with social support and physical health. Furthermore, the stepwise regression analysis showed that out of academic stress, social support, pain, role functioning, social functioning and physical functioning only four predictors were included in the final model, the prominent predictor of psychological well-being was role functioning, followed by academic stress, social support, and pain.

Keywords: *Psychological well-being, academic stress, social support, physical health.*

INTRODUCTION

The novel coronavirus disease (COVID-19) has been the most powerful thing in the current century till date. Due to its highly infectious nature, the

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entire world came to standstill. The widespread disease, which was initially underestimated taxed its tolls to nearly every aspect of life. People got confined in their homes, neighbours became distant relatives whom we never visit. The lockdown which was initially enjoyed, sooner started to show its dark side. It heavily affected nearly every one. Irrespective of caste, class, gender, race, economic status the pandemic caused great distress to everyone. As due to the pandemic educational institutions were closed, and the entire education system shifted to online modalities which might be a normal thing for developed countries, but for developing countries like India it's been highly challenging and distressing to students.

The pandemic brought unprecedented amount of challenges and uncertainty, on the one hand final year students were totally confused about how would they complete their projects and dissertation; especially those who were heavily dependent on laboratories and libraries. The unsureness about exams, the frequent changing notifications from university, doubts about the modality of exams, fear of not able to get job and internships all these were like nightmares to them. On the other hand, freshers who were supposed to take admission in their dream colleges were distressed about whether they will get admission or not, when will the university open, what would be the admission procedure. And those who were in between, were struggling to accommodate and assimilate with the new modalities of education; i.e., attending virtual lectures and classes, sitting for hours in front of screen. Amidst all these students who didn't have access to internet and smartphones were suffering form great distress and anxiety.

The present pandemic not limited the students academically but it also restrained their physical activities. Due to physical inactivity, verities of other physical issues emerged which added to academic stress of the students in one way or another. The escalated level of academic stress and lack of physical activities have negatively taxed the psychological well-being of the students. So the present study tries to look into how the academic stress, physical health and social support affected the psychological well-being of the students.

Psychological Well being

Well-being has been conceptualised in different ways in different fields. Even in the realm of psychology, different sub-fields have conceptualised it in different ways. However, in behavioural sciences, two broad approaches can be marked; the first one is the hedonic approach, and the second one is the eudaimonic approach. The hedonic approach has its roots in the philosophy of Aristippus and Epicurus who taught that that goal of life is to experience the maximum amount of pleasure; and suggest that pleasure and happiness are the primary concern to the individual. The second one is eudaimonic (eudaimonia, eu:

wellbeing or good; daimon: spirit) approach which is based on Aristotle's (2009) book "The Nicomachean Ethics". He said that true happiness is found in the manifestation of virtue, or in achieving what is worthwhile, and that hedonic bliss is a vulgar ideal that turns people into obedient followers of desires. The hedonic approach includes subjective aspect of well- being while, eudaemonic approach includes psychological well-being. Biswas et al. (2009) argue that subjective well-being is related to short term states while psychological well-being relates to long-term states.

Philosophers and psychologists from East and West have refused to accept happiness as a core-criterion of the wellbeing, and they suggested eudaimonic approach which asserts that wellbeing is distinct from happiness as not all desires, and their outcomes would lead to wellbeing when attained. Though the outcome will be pleasurable, it may not add positively to wellbeing. According to the method, living in line with one's genuine daimon or true self is vital to obtain wellbeing. Many academics have offered many definitions of psychological wellbeing. According to Wright (2010), psychological wellness is the subjective judgement that one is having a lot of positive feelings and relatively few negative ones. The ability of a person to feel good and operate well in spite of unpleasant or painful emotions, which are typically a part of life, is another definition put forth by Huppert (2009). However, unlike subjective well-being concept whose components are more or less clear, the components of psychological wellbeing were not much precise until Ryff (1989) criticised the earlier conceptualisation of psychological wellbeing and proposed a multidimensional model of psychological wellbeing based on the convergence of several psychological theories and approaches from different perspectives. She defines psychological well-being as not merely absence of stress and psychological problems but a state which encompasses autonomy, environmental mastery, personal growth, positive relation with others, purpose in life and self-acceptance (Ryff, 1989). In essence, psychological well-being encompasses a wide aspect of life which ranges from social, physical, mental, emotional to spiritual domains.

Having a good psychological well-being is crucial for students as it directly affects the optimum functioning of the individual. To set better goals, to be able to achieve those goals, ability to turn challenges in opportunities, ability to identify potential opportunity, and to have a better physical and mental being it is essential that student possess optimum psychological well-being.

Academic Stress

In order to understand academic stress, it is important to understand stress itself. The word "stress" is originated from the Latin word "Stringere" which is concerned with imagery of pain, hardship or affliction. Stress in general sense

is defined as bodily response to any demand. Selye (1956), a pioneer in the field of stress research, defined stress as a reaction to stressful environmental circumstances. Though it may seem direct, but researchers like Lazarus and Folkman (1984) suggest that the route is not a linear. People when faced with any situation first they judge whether the situation is stressing or has potential to do so (primary appraisal), ones they feel that situation is or has potential to do so, then they assess whether they have enough resources to cope up with the situation (secondary appraisal). If the individual feel that have resources to cope up with, they feel no stress. But when individual lack the necessary skills and resources to handle the situation then they perceive the situation as stressful. Stress is therefore a peculiar issue because no one can reliably predict the level or type of stress that can transform an otherwise normal, positive human situation into one that involves an erratic, irrational response. Though stress does not always has negative impact, and sometimes it enhances the performance that is what Selye (1956) called as eustress.

In a similar vein academic stress is the response of students when there is a lack of resources to cope with the academic demands, which leads to physiological and psychological manifestation of it. Academic stress was first described by Verma and Gupta (1990) as a condition of mental anguish brought on by the annoyance with subpar academic performance, the anticipation of it, and the awareness of a potential failure. Verma & Gupta (1990) omitted, however, mentioning the impact of a hard workload and a heavy study load on students' academic stress. According to Wilks (2008), academic expectations include things like course work, group projects, and organisational involvement in addition to perceptions, attitudes, and behaviours related to them. In conclusion, academic stress happens when demands on students' time and energy exceed their ability to meet them. Following the Selye's conceptualisation of eustress and destress, it can be argued that certain level of academic stress is desirable as it motivates the student to perform well and excel in their studies, but as the pressure continues to escalate and students fell to manage properly it can have detrimental consequences .

Academic Stress and Psychological well-being

Researcher suggest a negative relation between academic stress and psychological well-being. In their study on final year students Ofari, Addai, Avor and Quaye (2018) found that students who perceived higher academic stress had lower psychological well-being. In a recent study on Indian students form Tamilnad Jeyaraj, Babu and Dellagiulia (2018) reported that psychological well-being was negatively associated with academic stress level of students. Similar findings were also reported by Subramani and Kadhiravan (2017) as they found a negative relation between academic stress and mental health

among students.

Mahapatra and Sharma (2020) suggest that during the pandemic the academic stress levels of students get escalated to severe levels. The authors argue that since the closure of schools students are forced to take classes from home through online modalities. Not everyone has access to online modalities, apart from these poor network connection, lack of separate space for attending class, doing household chores while attending class, lack of concentration and motivation for online classes aggravate the academic stress in students. Which would logically hamper the psychological well-being of the individual. Since, the lockdown has put retrains on the optimal functioning of the students. Hence, it is expected that the during covid situation the relationship would be negative in nature between the two variables.

Social Suport

Social support encompasses a wide range of factors, making it a multidimensional notion. According to Thoits (1986), it is when "significant others, such as family, friends, coworkers, relatives, and neighbours, perform useful roles for an individual." According to Gurung (2006), it is the experience of having other people in one's life value, respect, care for, and love them. Thoits (1986) suggest a three dimensional functions of social support. These are;

1. Instrumental aid: It refers to acts or materials made available by others that make it possible to carry out daily tasks like financial, parenting, domestic, and work-related duties.
2. Socioemotional aid: Assertions or manifestations of affection, compassion, esteem, value, empathy, sympathy, and/or group-belonging are typically referred to as socioemotional support.
3. Informational aid: Informational support is defined as sharing opinions or facts that are pertinent to a person's present problems, such as guidance, candid comments, job opening alerts, information about available medical assistance, or notices of other chances that might improve a person's situation.

However, most recently it is argued that the main function of social support is socio-emotional function.

Social Support and Psychological Well-Being

According to Calvete & Coonor-Smith (2006), the effects of numerous psychological issues among students may be lessened with the help of family and friends. Students who have social support can let out their feelings and have less work to do in school. Less socially supported students are more

prone to depression, academic stress, and anxiety. A lack of social support might cause failure. In their research on college students, Nahid and Sarkis (1994) found a negative association between anxiety, stress, and depression and social support, i.e., a higher degree of social support was associated with lower levels of anxiety, stress, and sadness. So it seems to reason that social support and psychological well-being in the research would be favourably correlated.

Social support play such an important role because, beneath social support there is a core of availability of social resources that are accessible to the individual having social support, which in turn boost the overall repertoire of resources available for coping; which in turn distorts the secondary appraisal of the individual and boost the self esteem of the individual. The core which consists of resources can have diverse form, like it may be tangible (using neighbour's scanner) or intangible (advice and encouragement). These available resources enhances the likelihood that the individual will choose an active approach to solve problems and diminishes the chance of involvement in harmful disengagement coping strategies like denial, avoidance and withdrawal.

Warmth, behavioural control, and offering psychological autonomy are the three characteristics of social support offered by family and friends, according to Oswald and Suss (1994). They contend that these three factors promote the growth of students' positive self-perceptions, social skills, competence, responsibility, and impulse control, all of which reduce the likelihood of psychological issues.

Social support has been shown to be protective against potentially upsetting circumstances. Researchers contend that in situations that are extremely stressful, such as the present pandemic, a higher level of social support may be protective against mental health issues (Szkody, Stearns, Stanhope, & McKinney, 2020). Social support was linked to decreased incidence of mental health issues during previous pandemics (Ebola, SARS, HIV/AIDS, and H1N1 influenza), according to research conducted during those times. Researchers contend that even if actual social support (received social support) decreased during the pandemic, people with greater perceived social support nevertheless had better mental health and were less likely to have psychological issues than people with lower perceived social support.

Physical health

A live organism's general physical state at a certain time is referred to as its physical health. It is the state of being physically healthy, free from sickness or anomaly, and in the best possible health (Kurtus, 2017).However it is often described as the system of the body carrying out physiological functions

properly.Researchers have found that physical health is positively related to nearly every marker of wellbeing; positive affect, life satisfaction, autonomy, self-esteem, perceived control), and life purpose (Kim, Sun, Park, & Peterson, 2013). These findings show that having a good physical health enhances the likelihood that the well-being of the individual would increase. So it can be hypothesised that physical health would be positively related to psychological well-being.

According to Barkeley et al. (2020), as many fitness and recreational facilities have been shut down during the COVID scenario, physical activity and sedentary behaviour may be significantly impacted. They discovered an approximately 22.4% decrease in physical activity during the epidemic in their empirical study. Though lockdown provided time to do physical exercises, but the zeal gradually get diminished as the lockdown stretched for months. This resulted into many physical health problems like obesity, weight gain. And those who get infected by the novel corona virus had even much poorer physical health.

Methods

Hypothesis

Following hypothesis were made in the study

Hypothesis 1: There would be a significant negative relationship between academic stress and psychological well-being.

Hypothesis 2: There would be a significant positive relationship between social support and psychological well-being .

Hypothesis 3: There would be a significant positive relationship between physical health and psychological well-being.

Samples

The study was conducted on 175 undergraduate college going students who were not in their first year of college, that is they were already in the college during the pandemic times. The participants were selected by using purposive sampling method Though out of total 22 participants were not included in the study, due to error in their responses; further two more responses were omitted due to statistical reasons. Finally the study consisted of 151 students 78 were female and 73 were male and the age range was 18-21.

Measures

Following measures were used in the study

4. Academic Stress Scale: The scale was originally developed by Kim in 1970. In the present study the Indian version of the scale was used. The scale was adopted to Indian contexts by Rajendran and Kaliappan (1990). The scale consists of 40 items, and is based on five point Likert scale. The respondents are asked to give responses on a five point continuum that ranges from '*No Stress*' (0) to '*Extreme Stress*' (4). The scale consists of five sub-dimensions which are; personal inadequacy, fear of failure, interpersonal relationship with teachers, teacher-pupil relationship and inadequate study facilities. The items are equally divided to each dimension, hence the highest possible score for one dimension is 32, and the highest possible score for the entire scale is 160. The test-retest reliability of scale has found to be .82.

5. Multidimensional Scale of Perceived Social Support: The scale is developed by Zimel et al., (1998). The scale subjectively assess the perception of social support adequacy. In another terms, the scale measures levels of perceived social support. The scale measures the social support form three different sources: family, friends and significant others. The scale has total 12 items which are equally divided into all three different sources. The scale is based on a seven point Likert scale which ranges from *"Not at all"* (1)to *"All of the time"* (7). The internal consistency reliability of the scale has found to be 0.93-0.98 for the entire scale and 0.91-0.81 for the sub-scales. The divergent validity of the scale has been calculated, and it was found that the scores on the scales were negatively correlated with scores on anxiety and depression symptoms sub scales of Hopkins Symptom Checklist.

6. MOS Short-Form General Health Survey: To measure the physical health of the respondents selected items from Short form General Health Survey of the Medical Outcomes Study were used. The entire scale consists of total of 26 items which are divided in five different measures; *Physical functioning: the extent to which one's health prevents them from engaging in activities like sports, walking, or climbing stairs (6); role functioning: the extent to which one's health prevents them from carrying out regular daily tasks like work, home, or school (2), Social functioning: the degree to which health prevents one from engaging in typical social activities, such as visiting friends, in the previous month (1), Mental health includes general mood or affect, such as depression, anxiety, and psychologic well-being over the previous month(5), health perceptions includes overall judgments of current health in general (5), and pain includes the severity of physical pain over the previous four weeks (1).* The internal reliability coefficients of the scale range from 0.81 to 0.88. Researchers have reported high convergent validity for the scale, as when correlated with mental and

physical health dimensions the scale correlated substantially.

7. Psychological General Well-Being Index (PGWBI): The psychological general well-being index (PGWBI) is a measurement of a person's level of subjective psychological well-being. The scale was created in the beginning by Dupuy and Ware (1984). It evaluates how well one perceives oneself to be in terms of intrapersonal affective or emotional experiences that reflect subjective well-being. The scale has 22 components in total, each of which is graded on a six-point scale. Six scores are possible for each item (from 0 to 5). Anxiety, sadness, positive well-being, self-control, overall health, and vitality are the six subdomains that make up the measure. The internal consistency reliability of the scale has found to be 0.90 to 0.94. Divergent validity has been calculated for the scale by correlating the scale scores with other measures like Beck depression inventory (-0.68), Hopkins symptom checklist (-0.77).

Data Analysis

The data obtained were analysed in terms of descriptive statistics, further Pearson's product-moment correlation was calculated and finally stepwise regression method was used to study the impact of academic stress, social support and physical health on psychological well-being.

Results

The descriptive statistics of the variables, correlation coefficients among the variables and results of regression analysis are presented in following tables;

Table 1 Descriptive statistics of the participants (N=151)

Variabels	Mean	SD
Psychological Well-being	60.80	13.41
Academic stress	64.88	28.25
Social Support	62.47	13.74
Pain	2.64	1.17
Social Functioning	4.41	1.44
Role functioning	5.37	1.06
Physical Functioning	10.55	2.09

The Table 1 shows the descriptive statistics of the participants on all the variables. It is evident from the Table that the mean score of the participants on psychological well being was 60.80 ± 13.41, and the mean score on academic stress dimension was 64.88 ± 28.25. Further, the participants scored a mean of

62.47 ± 13.74 on social support and their mean score on pain dimension was 2.64 ± 1.17. On social functioning dimension the mean score of the participants was 4.41 ±1.44, and the mean score of participants on role functioning dimension was 5.37 ±1.06, and finally on physical functioning dimension the mean score of the participants was 10.55 ± 2.09.

The Table 2 shows the intercorrelation among psychological well-being, academic stress, social support, pain, social functioning, role functioning, and physical functioning. It is clear from the table that psychological well being had a had a significant negative correlation with academic stress r*(149)* =-.425, p<.01, and hence the first hypothesis of the study H1: "There would be a significant negative relationship between academic stress and psychological well-being" is accepted". Further, psychological well-being had significant positive relationship with social support r*(149)* =.375, p<.01, and hence the H2: "There would be a significant positive relationship between social support and psychological well-being" is accepted.

It also had significant positive relationship with physical functioning r*(149)* =.270, p<.01, social functioning r*(149)* =.380, p<.01, role functioning r*(149)* =.441, p<.01, and had negative and significant negative relation with pain r*(149)* =-.376, p<.01; and hence H3: "There would be a significant positive relationship between physical health and psychological well-being" is accepted. The table depicts that academic stress had a significant negative relationship with social functioning r*(149)* =-.372, p<.01, followed by physical functioning r*(149)* =-.271, p<.01, social support r*(149)* =-.226, p<.01, and role functioning r*(149)* =-.216, p<.01; however academic stress had a significant positive relationship with pain r*(149)* =.284, p<.01. Social support was positively and significantly linked to role functioning r*(149)* =.196, p<.05, and had a negative significant relationship with pain r*(149)* =-.204, p<.05. Further, pain had a significant negative correlation with role functioning r*(149)* =-.346, p<.01, followed by physical functioning r*(149)* =-.283, p<.01 and social functioning r*(149)* =-.229, p<.01. Social functioning had a significant positive relationship with physical functioning r*(149)* =.473, p<.01, followed by role functioning r*(149)* =.407, p<.01. And finally role functioning was significantly and positively related to physical functioning r*(149)* =.550, p<.01.

Table 2 The intercorrelation among psychological well-being, academic stress, social support, pain, social functioning, role functioning, and physical functioning

Variables	Psychological Well-being	Academic stress	Social Support	Pain	Social Functioning	Role functioning	Physical Functioning
Psychological Well-being		-.425**	.375**	-.376**	.380**	.441**	.270**
Academic stress			-.226**	.284**	-.372**	-.216**	-.271**

Social Support				-.204*	0.124	.196*	0.115
Pain					-.229**	-.346**	-.283**
Social Functioning						.407**	.473**
Role functioning							.550**
*p<.05, **p<.01							

The Table 3 shows the stepwise regression analysis results. In order to explore how much variances were explained by predictor variables in criterion variable, a regression model was created by taking all the predictor variables; academic stress, social support, pain, role functioning, social functioning and physical functioning. But in the stepwise regression model, only four predictors were included; role functioning, academic stress, social support, and pain. In the very first model of stepwise regression role functioning was added because it had the highest correlation (r=.441). In the first model R^2 was .194 means in criterion variable i.e, psychological well being 19.4% variance was explained by role functioning. The slope of role functioning in the very first model was 5.56 which was significant. In the next model, academic stress was added and the R^2 value was .308 this time, which clearly reflects the fact that 11.4% of unique variance was added to criterion variable by academic stress. The slopes of role functioning and academic stress in this model were 4.62 and -0.164 respectively, also these slopes were significant. Further in the third model, social support was added, and the R^2 value was .363 in the third model, which suggest that 5.5% of unique variance was added by social support variable. The slopes for role functioning, academic stress and social support were 4.418, -0.141, and 0.237, these slope values were significant.

Table 3 Stepwise Regression analysis results (N=151)

		B	SE B	β
Step 1				
	Psychological Well Being	30.92	5.08	
	Role Function	5.56	0.93	0.44**
Step 2	Psychological Well Being	46.65	5.70	

	Role Function	4.62	0.88	0.37**
	Academic Stress	-0.164	0.03	-0.35**
Step 3	Psychological Well Being	32.92	6.71	
	Role Function	4.148	0.86	0.33**
	Academic Stress	-0.141	0.03	-0.29**
	Social Support	0.237	0.07	0.243**
Step 4	Psychological Well Being	40.58	7.51	
	Role Function	3.60	0.89	0.28**
	Academic Stress	-0.13	0.03	-0.27**
	Social Support	0.22	0.06	0.23**
	Pain	-1.76	0.81	-0.15*
R^2 =.194 for step1 ($p<0.01$), ΔR^2=.114 for step 2 ($p<0.01$), ΔR^2= .055 for step 3 ($p<0.01$), for the final step F(4,146)= 22.65 ($p<0.01$), and ΔR^2=.020 ($p<0.05$). * $p<0.05$, ** $p<0.01$				

The slopes of role functioning and academic stress in this model were 4.62 and -0.164 respectively, also these slopes were significant. Further in the third model, social support was added, and the R^2 value was .363 in the third model, which suggest that 5.5% of unique variance was added by social support variable. The slopes for role functioning, academic stress and social support were 4.418, -0.141, and 0.237, these slope values were significant. In the final model, pain was added and R^2 turned out to be .383 which reveals the fact that 2% unique variance was added by pain in psychological well-being. In the final model the slopes of role functioning, academic stress, social support, and pain were 3.60, -0.13, .22 and -1.76 respectively; also these slopes were significant. And hence the final regression equation came out to be

Psychological well-being =	40.58 + 3.60 role functioning + (-.13) academic stress + .22 social support+ (-1.76) pain

Discussion

In the present study all three hypotheses were accepted; since it was shown that there was a substantial negative correlation between psychological well-being and academic stress, a higher degree of academic stress may be linked to a lower level of psychological well-being. Ofari, Addai, Avor, and Quaye (2018) as well as Tamilnad Jeyaraj, Babu, and Dellagiulia (2018) supported the study's conclusions. Furthermore, the strong correlation between psychological well-being and social support suggests that higher psychological well-being may

be linked to adequate social support. The study's findings were corroborated by Calvete & Coonor-Smith (2006), who hypothesised that having family and friend support may lessen the effects of different psychological disorders among students and may be linked to greater psychological well-being. Additionally, a considerable positive link betweenFurthermore, the strong correlation between psychological well-being and social support suggests that higher psychological well-being may be linked to adequate social support. The study's findings were corroborated by Calvete & Coonor-Smith (2006), who hypothesised that having family and friend support may lessen the effects of different psychological disorders among students and may be linked to greater psychological well-being. Additionally, a considerable positive link between psychological well-being and physical health was obtained. The finding of the study was supported by Chida and Steptoe, (2008) who suggest that the physical health is positively related to nearly every marker of wellbeing. Also, in the study role functioning was found to be the most prominent variable predicting psychological well-being of the individual. Which reveals the fact the when individual's health interferes in daily life activities such as work or school, it significantly decreases the psychological well-being of the individual.

Limitations of the study

Despite of the best efforts made, the present study was not free from limitations. The major of limitation of the study includes the smaller sample size, since only 151 participants, participated in the study. Also, the sampling method used in the study was purposive sampling, hence the findings of the study can not be generalised. The study failed to explore the impact of level of education, socio-economic status, and gender on the variables studied.

Implication of the study

The study has implications in various settings; like educational, clinical and daily life settings. In educational settings findings of the study can be used that having lower levels of academic stress would be associated with higher level of psychological well-being. So, academic curriculum should be designed in a way that do not overburden the student, also teachers and students must identify the academic stressors that are behind their academic stress and try reducing them. In clinical setting, individual having lower psychological well being due to some psychological issues, like anxiety, depression etc. may be suggested to engage more in social activities and seek help from family members, friends since social support has proven to be a crucial aspect in enhancing psychological well-being, they may also be suggested to engage in physical exercises since it will also boost their well-being. Apart from these, the study has implications for better daily life functioning and especially for

students. Since students are constantly under pressure, so they are at high risk for loosing their psychological well-being, so based on the findings of the study students are suggested to share their problems with family members and friends and try widening and increasing the level of social support, as it may buffer them from stress and anxiety. Further, students are also suggested to engage in physical exercise regularly since physical exercise is positively linked with psychological well-being.

Future directions

Further studies can be done in order to check the impact of gender and socioeconomic status, different streams (arts, science, commerce) on the impact of academic stress, social support, physical health on psychological well-being.

Conclusion

In the study academic stress, social support, pain, social functioning, role functioning and physical functioning were found to be significantly correlated with psychological well-being however, only four of them; role functioning, academic stress, social support, and pain significantly predicted the psychological well-being. Where, academic stress and pain negatively predicted the psychological well being while role functioning and social support positively predicted the psychological well-being. Among all four, role functioning was the most important predictor of psychological well-being followed by academic stress, social support and pain. All three hypothesis were accepted in the study.

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