

**URBAN-RURAL DIFFERENCES IN PSYCHOLOGICAL WELL-BEING: A  
STUDY OF DARBHANGA, BIHAR, INDIA**

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**ABSTRACT**

*The present study examines the role of urban-rural in determining psychological well-being among respondents of Darbhanga District of Bihar, India. For this purpose, a sample of 200 respondents aged 25-55 years was randomly selected. Psychological well-being scale developed by Ryff (1989) was used to assess the well-being of respondents. Data was analysed using Analysis of Variance (ANOVA). Results indicated significant difference across the Urban-rural groups in overall well-being scores. Significant differences were also found in different dimensions of psychological well-being in respect of urban-rural background.*

**Keywords:** Psychological well-being, urban-rural.

**INTRODUCTION**

Psychological well-being refers to positive mental health (Edwards, 2005). Research has shown that psychological well-being is a diverse multidimensional concept, which develops through a combination of emotional regulation, personality characteristics, identity and life experience (Helson & Srivastava, 2001). Psychological well-being may increase with age, education, extraversion and consciousness and decreases with neuroticism (Keyes et al., 2002).

The concept of the psychological wellbeing has been used in various dimensions and contexts. Ryan and others (2008) have related psychological well-being with the fulfillment of life potential and happiness, while Diener et al. (1900) have linked well-being with personal experience of individuals or with the accomplishment of goals, as well as the participation in fascinating activities. According to Ryff et al. (1989, psychological well-being refers to the extent to which people feel that they have meaningful control over their life and their activities.

There are two approaches to study well-being-1. Hedonic 2. Eudemonic. Hedonic approach focuses on maximizing pleasure and minimizing pain and finding out good or bad elements of life in this regard (Kahneman, Diener & Schwarz 1999). Diner and Lucas (1999) have given the concept of subjective well-being (SWB). Subjective well-being refers to people's affective and cognitive evaluations about their live. Eudemonic view refers to two things –first, to know yourself, and second, to become what you are (Aristotle 1925, Bradburn 1969)

In Indian context, many researchers have explored the relationship of well-being with different psycho-social and demographic factors (Patrick, 2001; Mojoyilana, 2007; Stuart et al. 2013 and Watson, 2010). Psychological well-being has been studied in relation to different factors and context. Urban-rural background has been studied mostly in relation to stress, mental disorders and mental health (Flax et al., 1979, Jaco's 1960, Dohrenwend's 1975 and Georg Simmel 1964). These studies had been done in western context. Very little efforts have been done to explore the relationship in the Indian context.

In today's context, wherein the Indian society is developing rapidly at both level-Urban and rural context. Living standards of both the backgrounds are very much changing due to government policies and concerns. Due to fast urbanization, cities are becoming much crowded and demanding. And villages are equipping with many facilities-electricity, internet, Cable, hospitals etc.

With this background and line of reasoning, the present research aims at exploring the differences in psychological well-being in context of urban-rural background. For the purpose of the present study, sample of the respondents comprised of 200 male equally divided into urban and rural background.

### **Objectives:**

- To study the effect of urban-rural background on overall psychological well-being of respondents from Darbhanga District of Bihar, India.
- To examine the effect of urban-rural background effects on various sub-dimensions of well-being of respondents from Darbhanga District of Bihar, India.

## **II. METHOD**

**Sample:** The sample comprised 200 randomly selected urban and rural respondents aged 25-55 years equally divided into Urban (N=100) and Rural (N=100). The mean and standard deviation of the sample is 39.82 and 6.58 respectively.

**Measures:** Psychological well-being was measured by Ryff scale (Ryff, 1989): This scale comprises six distinct components: self-acceptance, personal growth, purpose in life, positive relations with others, environmental mastery and autonomy. The 42 item version has been used for this study. It is a 6 point likert scale with options ranging from 1 (strongly disagree) to 6 (strongly agree). The sub scores from each scale are added to get an overall score, with higher score reflecting high psychological well-being. Internal consistency values (coefficient alpha) for each dimension ranged between 0.86 and 0.91 indicating high reliability of the scale. Correlation coefficients varied between 0.83 and 0.99 indicating higher level of validity for the scale.

**Procedure:** The participants for the study were personally contacted and requested for cooperation after briefly introducing the aim of the study. Some participants obliged to complete the measures immediately thereby allowing the investigator to ensure that the participant gave responses to all the items. Instructions were given to the participants only after forming adequate rapport.

**Results:**

Present study is an attempt to study the effect of urban-rural background on psychological well-being of respondents from Darbhanga, Bihar. For this, 200 participants (from Urban-rural background) are being selected for studying their psychological well-being. The psychological well-being scale of Ryff (1989) was administered on all the participants. Respondents' responses on 6 point rating scale.

Table 1 shows mean and ANOVA scores of Urban-rural effects on overall psychological well-being of respondents from Darbhanga, Bihar.

**Table 1: Shows Mean and ANOVA scores of Urban-rural effects on overall well-being.**

	Gender	N	Mean	F	Sig.
<b>Psychological well-being (Overall)</b>	Urban	100	161.73	5.38	.05
	Rural	100	191.41		

Table 1 depicts that Rural participants showed more psychological well-being scores (Mean=191.41) in comparison to Urban participants (Mean=161.73). Table also depicts that both groups are significantly different at .05 level in respect of overall psychological well-being (F-value=5.38, significant at .05 level).

**Table 2: Shows Mean and ANOVA scores of urban-rural effects on sub-dimensions of well-being.**

	Gender	N	Mean	F	Sig.
<b>Autonomy</b>	Urban	100	37.19	4.37	.05
	Rural	100	32.43		
<b>Environmental Mastery</b>	Urban	100	31.17	5.08	.05
	Rural	100	38.16		
<b>Personal Growth</b>	Urban	100	35.18	.87	NS
	Rural	100	36.18		
<b>Positive Relations</b>	Urban	100	31.54	5.68	.05
	Rural	100	38.75		
<b>Purpose of Life</b>	Urban	100	37.21	.59	NS
	Rural	100	38.38		
<b>Self-acceptance</b>	Urban	100	33.29	5.77	.05
	Rural	100	38.17		

Table 2 depicts that Urban Participants showed significantly more psychological well-being scores on Autonomy (Urban: Mean=37.19) in comparison to rural participants, (Rural: Mean =37.43), table 2 also exhibits that rural participants showed significantly more psychological well-being scores on environmental mastery (Rural: Mean=31.17, Mean (Urban: Mean=38.16), Positive relations (Rural: Mean =38.75, Urban=31.54) and self-acceptance (Rural: Mean =38.14, Urban=33.29) sub-dimension of well-being.

## **DISCUSSIONS:**

In the present research, objective was to explore the effects of urban-rural background on psychological well-being of participants from Darbhanga district of Bihar, India.

Results clearly indicated that Urban-rural participants are significantly different on overall psychological well-being. Rural participants exhibited more psychological well-being in comparison to urban participants.

Many studies have clearly showed urban-rural differentials in stress and mental health. Wirth's (1938) theory of urbanism was considered major support for his thesis that the stress of city life affected the people who lived there. In 1960, then, the fact of higher rates of mental illness in urban areas was not only a universally accepted empirical generalization; it had strong grounding in theory.

Traditional wisdom supports the belief that urban living is more stressful than living in rural areas (Flax et al., 1979). Jaco's (1960) found higher rates of psychosis in urban areas. Dohrenwend's 1975 study also reviews eight studies that compare urban and rural rates of

psychiatric disorders, rather than treatment rates, and concludes that urban residents show more disorder in all but two cases. Tonnies (1887) term *Gesellschaft*, which literally means association, refers to the modern, industrial, urban society. Tennes says that people in urban areas are largely driven by economic self-interests. They have a tendency to work with their own goals in mind and are, thus, less likely to know and care about other people. For this reason, urban areas are characterized by a more impersonal, isolated atmosphere. Georg Simmel (1964) speculates that the reason for these differences is that the city contains so many people and situations that a single person is not able to become familiar with everyone. To cope with this overstimulation, Simmel says that people withdraw and only pay attention to the things that are of personal importance. Milgram (1970) elaborates on Simmel's argument and states that people in cities are faced with immense sensory and mental demands which lead to psychological distress. Louis Wirth (1938) proposes a theory of urbanism based on the negative effect that urban life has on the individual. This is called "determinist theory" by Fischer (1976). Wirth defines a city as a "relatively large, dense and permanent settlement of socially heterogeneous individuals." The heterogeneity, size, and density of the population are central to Wirth's argument in that he asserts that these factors contribute to the problem of developing intimate personal relationships. According to Wirth, these factors lead to isolation, impersonality and superficial relationships which, in turn, contribute to poor interpersonal relationships.

United Nations, Department of Economic and Social Affairs (2014) say nowadays, more than 50% of the population worldwide lives in urban areas. This number might rise to more than 70% by 2050. Burdett, R.; Taylor, M.; Kaasa, A. (2011) conclude that cities provide some of the worst as well as some of the best environments for health and well-being. Challenges posed by rapid global urbanization, are caused by increasing environmental stressors or increasing socioeconomic disparities and are associated with urban health and urban well-being. On the other side the so-called "urban advantages" describe the health and well-being benefits by living in cities as opposed to rural regions [Galea, S. et. al. (2005), Rydin, Y. et. al. (2005) and Vlahov, D.; Galea, S. (2003)].

## **CONCLUSION:**

This study makes an important contribution in understanding psychological well-being of urban-rural participants. It can be concluded from the findings of the present study that in spite of more rapid change in different facilities and advancements urban people are living in more stress and less well-being state. In Indian context these differentials is seen more in collectivistic and

individualistic culture sense. Rural society is still collectivistic in nature that provides more social support and social anchors to deal with life problems and stress. This very support is very much lacking in urban society which is mostly individualistic in nature. This is very true in culturally rich and less advance city like Darbhanga, Bihar, India. Future research could explore more of subjective factors such as nature of family support, personality traits etc. critical in determining psychological wellbeing amongst urban-rural context.

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