

SOCIAL AND PSYCHOLOGICAL WELL-BEING INDEX AMONG MALAYSIANS

Nerisha Sarah Nur Malek¹

Halimah Mohd Yusof ^{1*}

Rabeatul Husna Abdull Rahman²

¹School of Human Resources Management and Psychology, Faculty of Social Sciences and Humanities, Universiti Teknologi Malaysia, Skudai, 81310 Johor, Malaysia

(E-mail: nerishasarah@graduate.utm.my; halimahmy@utm.my)

²Fakulti Pengurusan dan Perniagaan, Universiti Teknologi MARA, Cawangan Perlis, Kampus Arau, 02600 Arau, Perlis, Malaysia

(E-mail: rabeatulhusnaa@gmail.com)

Article history

Received date : 13-3-2025

Revised date : 14-3-2025

Accepted date : 27-4-2025

Published date : 15-5-2025

To cite this document:

Nur Malek, N. S., Mohd Yusof, H. & Abdull Rahman, R. H. (2025). Social and psychological well-being index among Malaysians. *Journal of Islamic, Social, Economics and Development (JISED)*, 10 (72), 336-348.

Abstract: *Well-being is a multidimensional concept that is essential to individuals, which can be influenced by a multitude of factors including demographics. However, there are limited studies that focus on psychological and social well-being among the Malaysian demographics. The main objective of this study is to assess demographic features and psychological well-being, social well-being, and negative emotional symptoms with an instrument developed for the Malaysian context. The study recruited 382 participants from varying backgrounds including age, gender, ethnicity, number of dependants, household income, and educational level. Our overall findings presented mean differences between age and educational level for psychological well-being. While social well-being was different between gender, education, and income. Lastly, age, educational level, and income differences were demonstrated on negative emotional symptoms. Accordingly, the implications of this study may influence the government's efforts to address Malaysians' well-being disparities among different demographic groups.*

Keywords: *Malaysian Demographics, Negative Emotional Symptoms, Psychological Well-Being Index, Social Well-Being Index*

Introduction

According to Ruggeri, Garcia-Garzon, Maguire, Matz, and Huppert (2020), well-being is a phenomenon that extends beyond an individual's happiness and life satisfaction. Several well-being dimensions include positive relationships, engagement, optimism, and meaning (Ruggeri et al., 2020). Eiroa-Orosa (2020) highlighted that psychological and social well-being is greatly predisposed by personal factors such as gender, ethnicity, and socioeconomic status. Studies have emphasized on how well-being is affected by marital status, race, gender, age, and income (Chilver, Champaigne-Klassen, Schofield, Williams & Gatt, 2023; Lee, McNeely, Weziak-Bialowolska, Mooney, Cowden, and VanderWeele, 2022; Teh, 2014). Although studies on psychological and social well-being in Malaysia exist, there is a significant gap in understanding specific demographic elements that may impact these dimensions of well-being (Latiff et al., 2017). Additionally, the 2020 Malaysian Well-being Index (MyWI) indicated a 2.1% decline from the previous year (DOSM, 2021). However, the index only consists of economic and social well-being components. Hence, there is a lack of psychological well-being dimensions, particularly where mental health was not assessed in the health indicator. This suggests the need to further investigate psychological and social well-being dimensions among Malaysian demographics.

Literature Review

Well-being is assessed through objective measures including living conditions, wealth, and physical health (Ivković, Ham, & Mijoč, 2014) while subjectively, it can be measured through life satisfaction, mood, and emotional responses to specific situations (Diener, Oishi, & Lucas, 2003). According to Diener, Kesebir, and Lucas (2008), social equality, democratic institutions, high income, and effective governance are societal elements linked to increased well-being. The ICSU Planning Group (2011) outlines other factors that affect national well-being with a focus on urban areas, highlighting the process of urbanization, cost of living, employment opportunities, governance arrangements, housing and urban design, education, security, food and water, land use and transportation, crime rates, access to health services, cleanliness, and pollution.

Psychological Well-Being

Based on eudaimonic perspective, the psychological well-being model was established to promote adaptive functioning that consists of six dimensions including self-acceptance, personal growth, autonomy, positive relations with others, environmental mastery, and purpose in life (Huppert, 2009; Ryff, 1989). Additionally, spirituality and religiosity are known factors that contribute to individuals' psychological well-being (Božek, Nowak, & Blukacz, 2020; Ivtzan, Chan, Gardner, & Prashar, 2013; Ntozini & Walton, 2020; Ryff, 2021). Ryff (2021) emphasized the significance of spirituality and religion from the standpoint of how people can strengthen their psychological well-being by connecting with their environment. From a hedonic perspective, life satisfaction is another significant domain of overall psychological well-being that leads to fulfilment and flourishing (Kalaria, Garhwal, & Singh, 2023; Yeşiltepe, Sayar, & Çal, 2021).

Factors including mental health problems, poverty, and sociodemographic variables have been found to reduce psychological well-being (Hiremath, 2021; Rojas, 2015; Steptoe, Deaton, & Stone, 2015). A study suggests that psychological well-being significantly improved among individuals who participated in a poverty reduction program in Ethiopia, Ghana, Honduras,

India, Pakistan, and Peru (Banerjee et al., 2015). These results are consistent with earlier studies that demonstrate the detrimental effects of poverty on psychological health (Cobb-Clark & Kettlewell, 2021; Macours, Schady, & Vakis, 2012). Contrastingly, Nepomuceno et al. (2016) reported that there was a lack of association between low life satisfaction and low income. In terms of demographic factors, Steptoe et al. (2015) discovered that psychological well-being was associated with life expectancy and that it was correlated with age, gender, education, mental health, and physical health. Therefore, psychological health may be a protective factor that encourages living a longer and better life. Although studies have shown modest levels of well-being among the general population in Malaysia (Norimah, Azila, & Alias, 2017). Aziz, Ahmad, and Haniff (2011) found that poorer well-being is evident in Johor due to a lack of accessible services and low income. An earlier study among elderly revealed that older age, being unmarried, and poverty were elements that predicted lower psychological well-being (Mumtaz et al., 2011). Studies among university students in Malaysia demonstrated high levels of psychological well-being in Malaysia, possibly indicating a relationship between educational attainment and psychological well-being (Ooi, Hamzah, & Thien, 2022; Panahi et al., 2014; Roslan et al., 2017). Nonetheless, further research is required to identify the diverse factors influencing psychological well-being among Malaysians.

Social Well-Being

Psychological and social well-being are interdependent, yet both are vital for achieving personal growth and social integration. Social well-being refers to a sense of belonging to a community, social relationships, and sufficient access to local facilities and support (Aked et al., 2008). A significant factor influencing social well-being is the disparity between living expenses and income. A study in the US found that poor families living in areas with high living costs were slightly disadvantaged compared to those living in other cities, particularly if their fathers had low educational attainment and were immigrants (Chien & Mistry, 2013). This suggests that a lack of access to education leads to lower employment opportunities, which negatively impacts social well-being. Previous studies have also shown how social exclusion and a lack of social support are associated with lower well-being (Dahlberg & McKee, 2018; Nóbrega et al., 2022). For example, in Mexico, Flores-Verduzco, Fraijo-Sing, and Tapia-Fonllem (2020) found that high school students' social well-being was strongly affected by a positive school environment with supportive teachers and friends, bullying-free relationships, and family support. Thus, having access to educational institutions is advantageous towards an individuals' well-being in addition to fostering academic success.

Moreover, a healthy and accessible living environment and stronger social bonds also play vital roles in social well-being. Poor housing conditions and physical environment has negatively impacted the quality of life and social well-being among Malaysians (Abu Bakar et al., 2015; Zainal et al., 2012). In Abu Bakar et al.'s (2015) study, social well-being was measured using the Malaysian Well-Being Index, which has limited aspects of well-being. For instance, its housing indicator measures allocations of low-cost housing units rather than the house ownership rate. Therefore, an updated well-being index is needed to measure the social well-being of Malaysians more extensively.

Methodology

Participants

This study was a cross-sectional study that recruited individuals aged 20 years old and above through snowball sampling technique. There was a total of 382 participants who completed the survey, with 229 females and 153 males. The participants were Malaysians from diverse socio-demographic backgrounds including age, race, educational level, household income, and location.

Social and Psychological Well-Being Index

The questionnaires implemented for this study were developed with seven experts from the related field through two focus group discussions based on existing scales and past literature. Accordingly, the questionnaire items and dimensions were then further validated by three other experts. The items have been IP registered, suggesting the appropriateness and suitability of the items for the Malaysian population. The survey consisted of demographic questions, social well-being, psychological well-being, and negative emotional symptoms. There was a total of 81 questions with a 5-point response scale ranging from *1-Strongly disagree* to *5-Strongly agree*. Social well-being was assessed over 13 dimensions: process of urbanization, governance maintenance, housing and urban design, pollution, transportation, safety and crime rates, healthcare, education, living cost, cleanliness, eating habits, physical health, and social support. Whereas psychological well-being was assessed over three dimensions: spirituality, personal growth, and life satisfaction. Lastly, negative emotional symptoms were adapted from the Depression, Anxiety, and Stress Scale (DASS; Lovibond & Lovibond, 1995) with 18 items. In the psychological well-being index, the five-item Satisfaction with Life Scale (SWLS; Diener et al., 1985) was adapted for the life satisfaction dimension. Items were rated using a 7-point Likert scale ranging from *1-Strongly disagree* to *7-Strongly agree*. A pilot study of an initial set of questions was conducted on 30 people and gathered 27 valid responses to measure reliability. Some modifications were made based on the results of expert reviews and the pilot study.

Cronbach's alpha values were calculated to assess the internal consistency of the questionnaire. The values for total social and psychological well-being scores suggested high internal consistency $\alpha = 0.915$ and $\alpha = 0.785$, respectively. Most of the dimensions also showed good internal consistency, ranging from 0.7 to 0.9. Some, namely physical health ($\alpha = 0.551$), safety and crime rates ($\alpha = 0.635$), and education ($\alpha = 0.658$) showed lower values. As for the DASS, stress, anxiety, depression, and the overall negative emotional symptoms indicated high internal consistency ranging between 0.81 to 0.94. Pallant (2020) notes, however, that reliability scores over 0.5 are acceptable if a factor has fewer than 10 items.

Procedure

The questionnaire was distributed using the online survey platform, SurveyMonkey. Respondents were recruited through online platforms including WhatsApp, Facebook, and Instagram. Some respondents were approached in person and participated by scanning a QR code. Participants were given the option to provide their telephone numbers to enter a prize draw as compensation for completing the survey. Informed consent was provided through the survey form. The data were collected between April 2022 and August 2022. We calculated descriptive statistics of demographic characteristics, social well-being, the psychological well-

being index, and the negative emotional symptoms scale. Mann-Whitney U and Kruskal-Wallis tests were implemented to observe the mean differences in the demographic groups.

Results

Demographics

Overall, there are slightly more females than males in this study, and most of the respondents were between the ages of 45 and 49 years old. Most of the respondents identified as Malay, and the majority of the sample are married. For educational level, almost half of the respondents had obtained a Bachelor's degree. Among the main cities, Johor Bahru presented the highest response; however, most of the respondents are located in varying states of Malaysia, such as Perak, Melaka, Kelantan, Penang, Pahang, Selangor, Sarawak, Kedah, and Negeri Sembilan. The majority of the participants had no dependants. Most of the respondents identified as earning between RM7,000 and RM10,969 monthly. Lastly, more than half of the respondents live in their own homes.

Descriptive Analysis

Normality tests were conducted on psychological well-being dimensions, social well-being dimensions, and the negative emotional symptoms scale to identify outliers. Results of a Shapiro-Wilk test indicated that responses deviated from a normal distribution with a significant value of $p < 0.05$ for all dimensions. This was expected, as questionnaires often skew in one direction. No outliers were identified among the responses.

For social well-being, the dimensions of "cleanliness" ($M = 4.55$, $SD = 0.46$) received a notably high rating, with "food habits" ($M = 4.06$, $SD = 0.59$) and "social support" ($M = 4.06$, $SD = 0.56$) following closely behind, while 'transportation' dimension obtained the lowest score, with $M = 3.01$, $SD = 0.81$). All dimensions of psychological well-being presented high mean scores, which include, spirituality ($M = 4.45$, $SD = 0.50$), personal growth ($M = 4.13$, $SD = 0.61$), and life satisfaction ($M = 4.67$, $SD = 1.09$). However, the overall negative emotional symptoms presented a low mean score of 2.30, $SD = 0.72$.

Mean Comparison

Table 1 below presents the Mann Whitney U and Kruskal-Wallis mean ranks highlighting the differences in psychological well-being, social well-being, and negative emotional symptoms on the demographic groups. For psychological well-being, the only demographic variables that presented statistical significance are age, $H(9, n = 382) = 20.65$, $p = 0.014$ and education, $H(7, n = 382) = 30.88$, $p < 0.001$. The mean rank suggests that those between the ages of 30 to 44 years old and those with Masters and PhD educational levels presented better psychological well-being, particularly those between the ages of 35 and 39 years old. The results indicated that there was a statistical difference in social well-being between genders, with females presenting a higher mean rank ($z = -3.02$, $p = 0.003$). Additionally, education also indicated a statistical difference, with higher education groups showing higher mean ranks, particularly those with Masters and PhD, $H(7, n = 382) = 16.26$, $p = 0.023$. Lastly, social well-being was statistically different between household income groups, with the highest income group presenting the highest mean rank, $H(10, n = 382) = 21.49$, $p = 0.018$. For negative emotional symptoms, statistical significance was found for age [$H(9, n = 382) = 45.21$, $p < 0.001$], education [$H(7, n = 382) = 15.23$, $p = 0.033$], and household income [$H(10, n = 382) = 27.18$,

$p = 0.002$]. Negative emotional symptoms mean rank was the highest among those between the ages of 60 and 65, followed by the younger age groups in their 20s. Those who obtained the education level of STPM or similar presented the highest mean in relation to negative emotional symptoms. Lastly, the lower income category, particularly those earning below RM800 monthly, displayed the indicated highest mean rank in relation to negative emotional symptoms.

Table 1: Mean Comparison Between Psychological Well-being (PWB), Social Well-being (SWB), and Negative Emotional Symptoms (NES) on Demographic Indicators

N (382)		PWB		SWB		NES	
Indicator		Mean Rank	Sig.	Mean Rank	Sig.	Mean Rank	Sig.
Gender	Men (153)	199.82	0.071	205.45	0.003*	194.94	0.456
	Women (229)	179.04		170.62		186.35	
Age	20 – 24 (46)	151.03	0.014*	204.64	0.165	258.17	< 0.001*
	25 – 29 (54)	172.16		171.87		243.45	
	30 – 34 (43)	211.31		213.55		158.88	
	35 – 39 (51)	238.47		199.64		152.72	
	40 – 44 (47)	206.66		189.26		166.51	
	45 – 49 (58)	177.99		205.01		197.66	
	50 – 54 (53)	187.14		173.22		169.07	
	55 – 59 (21)	196.11		182.07		168.12	
	60 – 64 (4)	161.88		232.25		226.00	
	65 and above (5)	188.60		75.20		164.90	
Education	SPM or similar (29)	195.79	< 0.001*	201.36	0.023*	184.78	0.033*
	STPM or similar (11)	128.14		152.18		278.36	
	Certificate (13)	136.15		178.88		198.81	
	Diploma (81)	166.38		156.41		206.45	
	Bachelor's Degree (182)	189.43		198.20		190.37	
	Master's (49)	235.63		222.97		174.89	
	PhD (16)	286.06		220.91		126.00	
	No formal education (1)	219.50		113.00		192.50	
No. of dependants	1 (108)	195.49	0.206	208.57	0.175	219.27	0.098
	2 (5)	176.44		192.22		171.9	
	3 (67)	182.03		197.21		188.4	
	4 (60)	185.75		195.83		186.63	
	5 (50)	197.67		167.21		185.11	
	6 (52)	214.15		175.65		171.82	
	7 (23)	182.43		189.07		182.63	
	8 (11)	180.41		186.91		126.23	
	9 (4)	30.50		87.38		220.00	
	11 (1)	179.50		75.50		28.50	
Household income (Monthly)	> 10 dependants (1)	316.00	0.066	380.00	0.018*	104.50	0.002*
	Below RM800 (18)	144.08		210.47		254.28	
	RM800 to RM1000 (10)	158.66		92.95		212.4	
	RM1000 to RM1499 (12)	134.54		121.13		252.96	
	RM1500 to RM2199 (26)	150.81		189.19		232.48	

RM2200 to RM3599 (54)	173.85	175.66	211.39
RM3600 to RM4849 (36)	209.26	210.47	151.81
RM4850 to RM6999 (69)	209.22	178.36	195.86
RM7000 to RM10969 (72)	208.35	212.74	160.76
RM10970 to RM11999 (22)	204.11	191.88	163.89
RM12000 to RM17999 (22)	201.59	192.55	193.75
≥ RM18000 (41)	198.91	217.57	183.79

*Significance level: p -value < 0.05

Discussion

The primary aim of this study was to develop a psychological and social well-being index for the Malaysian population and explore how these two forms of well-being are associated with demographic indicators.

Our findings indicated that the mean differences for psychological well-being were significant for age and education demographics, particularly respondents aged 30 to 44 years old and those with a Masters or PhD, respectively. Typically, as individuals get older, so does their income, which subsequently influences their overall levels of life satisfaction (Bartram, 2021). Past studies show that low psychological well-being is a natural occurrence among older individuals. In accordance with our results, Steptoe et al. (2015) and Pourebrahim & Rasouli (2019) found that older individuals from ages 45 to 60 years old presented lower levels of psychological well-being. Hence, it may be important for individuals to enhance other sociodemographic factors to protect their well-being from declining. Additionally, studies found that education is significant towards overall psychological well-being among emerging adults and undergraduate students in Spain (Matud, Bethencourt, Ibáñez, Fortes, & Díaz, 2022; Navarro-Carrillo, Alonso-Ferres, Moya, & Valor-Segura, 2020). Accordingly, our findings highlighted that negative emotional symptoms were high among the oldest individual groups, those with low levels of education, and lower household income. High negative emotional symptoms among older individuals may be related to our findings on low psychological well-being within the older age groups.

Furthermore, our results presented that social well-being was high among females, higher educational levels, and higher household income. Similarly, in a study among older adults in Kenya, social well-being was greater among females during the COVID-19 restrictions (Thuku, 2022). However, Abdullahi, Orji, and Kawu (2019) found that males showed higher levels of social well-being in Nigeria. It was highlighted that this may be due to the culture in which men in Nigeria build social relationships with each other to protect women and children in their communities (Abdullahi et al., 2019). Evidence from previous studies further support our findings as elderly people in India and individuals in Australia with higher educational attainment, particularly tertiary degrees, were associated with greater social well-being (Singh & Kiran, 2015; Povey, Boreham, & Tomaszewski, 2016). It was also noted that the educated elderly were more socially aware and active in receiving social support when needed (Singh & Kiran, 2015). According to Pankova et al. (2017), higher education is linked to social well-

being as it promotes social and cultural development. Educational institutions do not only provide formal knowledge but also offer social development. Our findings may suggest that respondents with higher educational attainment are more knowledgeable about the importance of social factors such as the healthcare system, urbanization, transportation, and pollution. Consequently, individuals with higher education typically have greater employment opportunities with higher income. Higher income associations with greater social well-being are in line with findings from Brazil, the US, and Australia (Kakwani & Son, 2015; Killingsworth, 2021; Povey et al., 2016). Higher income is acknowledged as a key indicator in expanding opportunities to enhance well-being including quality housing, quality education, quality healthcare, healthy foods, reliable transportation, and quality daycare (Livingston, Jackson-Nevels, & Reddy, 2022). In line with our study, the social well-being dimensions (e.g., healthcare, education, eating habits, housing and urban design, and transportation) are the indicators that contribute to the overall social well-being.

Strengths and Limitations

The development of the social and psychological well-being index allowed us to measure a range of factors that are relevant to well-being, particularly for the Malaysian context. The current existing Malaysian Well-Being Index only assesses economic and social well-being. The indices utilized in this study may be useful for the development of the national Well-Being Index, with a recommendation to include markers of psychological well-being and expand the measurement of social well-being. In addition, this research extends the well-being research by measuring negative emotional symptoms as distinctive to psychological well-being. Nonetheless, there are several limitations that should be considered. This research implemented a cross-sectional study in which causality between variables are challenging to attain. Despite the overall sample presenting moderate to high levels of well-being, it should be noted that the majority of respondents were educated, financially stable, and had one dependant. However, the sample obtained may not have been generalizable throughout the country as there may be disparities of socioeconomic backgrounds between varying states or geographical location in relation to social and psychological well-being factors that were not accounted for in this study. Further studies should greatly consider a more rigorous sampling method to ensure the sample reflects the population holistically. Additionally, this study was conducted at the beginning of the endemic phase in Malaysia. Hence, it is important to acknowledge the possible influence of the COVID-19 pandemic on the participants' reactions.

Implications

In comparison to Western and East Asian countries, there have been fewer published articles on the well-being field among Southeast Asian countries (Bernado, Mateo, & Dela Cruz, 2022). Although it has been highlighted that Malaysia is emerging as one of the leading countries in Southeast Asia to produce well-being research, most of the studies are often within industrial or educational settings (Bernado et al., 2022). Therefore, our findings may contribute to the development of the well-being literature in Malaysia, particularly with regard to the importance of psychological and social well-being. Bernardo et al. (2022) note that marginalized groups are often underrepresented in Southeast Asian studies of well-being. Future studies should further explore the vulnerable populations in Malaysia, such as the socioeconomically disadvantaged. Our assessment of demographic characteristics in relation to well-being provides new insights into well-being on different demographic factors. The results of the study indicated that education has a crucial role in promoting psychological and social well-being.

However, it is evident that there has been a decline in the level of interest in pursuing higher education among school leavers in Malaysia (Mutalib, 2022). Furthermore, this phenomenon is also seen among low-income families, particularly in the aftermath of the COVID-19 pandemic (Awang, 2023). Therefore, these data may be valuable for governmental and corporate entities seeking to conduct interventions aimed at improving the psychological and social well-being of the Malaysian population as a whole, as well as particular target groups.

Conclusion

To conclude, the purpose of this study was to examine social and psychological well-being index among Malaysian demographics. Despite Malaysia's current economic instability, the findings revealed high levels of social and psychological well-being among respondents. The findings suggested that psychological well-being was high among middle aged individuals and those from high household income. While social well-being was greater among the female gender, a high level of education, and greater household income. The results also indicated that negative emotional symptoms were highest among the oldest age group, higher education, and higher income. Further studies may be required to understand the relationship between well-being and the demographic factors. The outcomes of this study may have value for those creating policies to improve social and psychological well-being among Malaysians.

References

- Abu Bakar, A., Mohamed Osman, M., Bachok, S., Ibrahim, M., & Mohamed, M. Z. (2015). Modelling economic wellbeing and social wellbeing for sustainability: a theoretical concept. *Procedia Environmental Sciences*, 28, 286-296. <https://doi.org/10.1016/j.proenv.2015.07.037>
- Abdullahi, A. M., Orji, R., & Kawu, A. A. (2019). Gender, age and subjective well-being: towards personalized persuasive health interventions. *Information*, 10(10), 301. <https://doi.org/10.3390/info10100301>
- Aked, J., Marks, N., Cordon, C., & Thompson, S. (2008). *Five ways to well-being: The evidence*. London: New Economics Foundation.
- Aziz, W. N. A. W. A., Ahmad, F., & Hanif, N. R. (2011). Pembasmian Kemiskinan Bandar ke arah Bandar Inklusif dan Sejahtera: Cabaran Kuala Lumpur. *Journal of Surveying, Construction and Property*, 2(1).
- Banerjee, A., Duflo, E., Goldberg, N., Karlan, D., Osei, R., Pariente, W., Udry, C. (2015). A multifaceted program causes lasting progress for the very poor: Evidence from six countries. *Science*, 348(6236), 12 60799–1– 1260799–16.
- Bernardo, A. B. I., Mateo, N. J., & Dela Cruz, I. C. (2022). The psychology of well-being in the margins: voices from and prospects for South Asia and Southeast Asia. *Psychological Studies*, 67(3), 273–280. <https://doi.org/10.1007/s12646-022-00676-5>
- Božek, A., Nowak, P. F., & Blukacz, M. (2020). The relationship between spirituality, health-related behavior, and psychological well-being. *Frontiers in Psychology*, 11, 1997. <https://doi.org/10.3389/fpsyg.2020.01997>
- Chien, N. C., & Mistry, R. S. (2013). Geographic variations in cost of living: associations with family and child well-being. *Child Development*, 84(1), 209–225. <https://doi.org/10.1111/j.1467-8624.2012.01846.x>
- Chilver, M. R., Champaigne-Klassen, E., Schofield, P. R., Williams, L. M., & Gatt, J. M. (2023). Predicting wellbeing over one year using sociodemographic factors, personality, health behaviours, cognition, and life events. *Scientific Reports*, 13(1), 5565. <https://doi.org/10.1038/s41598-023-32588-3>
- Cobb-Clark, D. A., & Kettlewell, N. (2021). Psychological, social and cognitive resources and the mental wellbeing of the poor. *PloS One*, 16(10), e0258417. Available at: <https://doi.org/10.1371/journal.pone.0258417>.
- Dahlberg, L., & McKee, K. J. (2018). Social exclusion and well-being among older adults in rural and urban areas. *Archives of Gerontology and Geriatrics*, 79, 176-184. <https://doi.org/10.1016/j.archger.2018.08.007>.
- Department of Statistics Malaysia, (2021b). *Malaysian well-being index 2020*. Department of Statistics Malaysia. <https://www.dosm.gov.my/v1/index.php?r=column/pdfPrev&id=a0EzVVRiRGg3U0hISnFMWUdJa3E4dz09>
- Diener, E., Emmons, R. A., Larsen, R. J., & Griffin, S. (1985). The Satisfaction with Life Scale. *Journal of Personality Assessment*, 49, 71-75.
- Diener, E., Kesebir, P., & Lucas, R. (2008). Benefits of accounts of well-being for societies and for psychological science. *Applied Psychology: An International Review*, 57, 37–53.
- Diener E., Oishi S., & Lucas, R. E. (2003). Personality, culture, and subjective well-being: Emotional and cognitive evaluations of life. *Annual Review of Psychology*, 54, 403–425.

- Eiroa-Orosa F. J. (2020). Understanding psychosocial wellbeing in the context of complex and multidimensional problems. *International Journal of Environmental Research and Public Health*, 17(16), 5937.
- Flores-Verduzco, G. R., Fraijo-Sing, B. S., & Tapia-Fonllem, C. O. (2020). School environment as a mediating variable between family support and social wellbeing in high school students. *International Journal of Emotional Education*, 20(2), 26-40. <https://www.um.edu.mt/library/oar/bitstream/123456789/65121/1/v12i2tm2.pdf>
- Huppert, F. A. (2009). Psychological well-being: Evidence regarding its causes and consequences. *Applied Psychology: Health and Well-Being*, 1(2), 137-164. <https://doi.org/10.1111/j.1758-0854.2009.01008.x>.
- Ivtzan, I., Chan, C. P., Gardner, H. E., & Prashar, K. (2013). Linking religion and spirituality with psychological well-being: Examining self-actualisation, meaning in life, and personal growth initiative. *Journal of religion and health*, 52, 915-929. 10.1007/s10943-011-9540-2
- Kakwani, N., & Son, H. H. (2016). Income Inequality and Social Well-Being. In N. Kakwani & H. H. Son, *Social Welfare Functions and Development* (pp. 139–190). Palgrave Macmillan UK. https://doi.org/10.1057/978-1-137-58325-3_6
- Kalonia, N., Garhwal, K., & Singh, V. (2022). Life satisfaction and resilience as a predictor of psychological well-being among youth. *International Journal of Indian Psychology* 10(4),1004-1010. 10.25215/1004.098
- Killingsworth, M. A. (2021). Experienced well-being rises with income, even above \$75,000 per year. *Proceedings of the National Academy of Sciences*, 118(4), e2016976118. <https://doi.org/10.1073/pnas.2016976118>
- Latiff, L. A., Tajik, E., Ibrahim, N., Bakar, A. S. A., & Ali, S. S. A. (2017). Psychosocial problem and its associated factors among adolescents in the secondary schools in Pasir Gudang, Johor. *Malaysian Journal of Medicine and Health Sciences*, 13(1), 35-44.
- Lee, M. T., McNeely, E., Weziak-Bialowolska, D., Ryan, K. A., Mooney, K. D., Cowden, R. G., & VanderWeele, T. J. (2022). Demographic predictors of complete well-being. *BMC Public Health*, 22(1), 1687. <https://doi.org/10.1186/s12889-022-13769-7>
- Livingston, V., Jackson-Nevels, B., & Reddy, V. V. (2022). Social, Cultural, and Economic Determinants of Well-Being. *Encyclopedia*, 2(3), 1183-1199. <https://doi.org/10.3390/encyclopedia2030079>
- Lovibond, S.H. & Lovibond, P.F. (1995). Manual for the Depression Anxiety & Stress Scales. (2nd Ed.) Sydney: Psychology Foundation.
- Macours, K., Schady, N., & Vakis, R. (2012). Cash transfers, behavioral changes, and cognitive development in early childhood: evidence from a randomized experiment. *American Economic Journal: Applied Economics*, 4(2), 247–273. Doi: 10.1257/app.4.2.247
- Matud, M. P., Bethencourt, J. M., Ibáñez, I., Fortes, D., & Díaz, A. (2022). Gender differences in psychological well-being in emerging adulthood. *Applied Research in Quality of Life*, 17(2), 1001-1017. <https://doi.org/10.1007/s11482-021-09943-5>
- Mutalib, H. (2022, July 31). 72.1% lepasan SPM tidak sambung belajar. Utusan Malaysia. <https://www.utusan.com.my/nasional/2022/07/72-1-lepasan-spm-tidak-sambung-belajar/>
- Navarro-Carrillo, G., Alonso-Ferres, M., Moya, M., & Valor-Segura, I. (2020). Socioeconomic status and psychological well-being: Revisiting the role of subjective socioeconomic status. *Frontiers in Psychology*, 11, 1303. <https://doi.org/10.3389/fpsyg.2020.01303>
- Nepomuceno, B. B., Cardoso, A. A. V., Ximenes, V. M., Barros, J. P. P., & Leite, J. F. (2016). Mental health, well-being, and poverty: A study in urban and rural communities in

- Northeastern Brazil. *Journal of Prevention & Intervention in the Community*, 44(1), 63-75. Available at: <https://doi.org/10.1080/10852352.2016.1102590>.
- Norimah, M. D., Azila, A. S., Alias, A. (2017). An analytical study of Malaysia's quality of life indicator. *Journal of Business and Economics*, 8(6), 488-498.
- Ntozini, A., & Walton, K. (2020). The relationship between religion/spirituality and the general psychological well-being of the elderly institutionalised population in the Eastern Cape, South Africa. *J Psychiatry*, 23(4), 23-470. DOI: 10.35248/2378-5756.20.23.470
- Okechukwu, P. C., Odinika, A. J., & Uzuomaka, E. A. (2022). income and coping strategies as predictors of wellbeing among teachers of Enugu state college of education (Technical). *Escet Journal Of Educational Research And Policy Studies*, 2(1), 77-90.
- Ooi, H. X., Hamzah, A., Thien, L. M. (2022). Gender and university support towards psychological well-being: an exploratory study in Malaysia. *International Journal of Academic Research in Progressive Education and Development*, 11(2), 879 – 894. <http://dx.doi.org/10.6007/IJARPED/v11-i2/13853>
- Pallant, J. (2020). *SPSS survival manual: A step by step guide to data analysis using IBM SPSS*. Routledge.
- Panahi, S., Md Yunus, A. S., Abdul Kadir, R., Wan Jaafar, W. M., & Panahi, M. S. (2014). Relationship between psychological well-being and age amongst Malaysian graduates. *International Journal of Current Research*, 6(3), 5487-5490. <https://journalcra.com/sites/default/files/issue-pdf/4428.pdf>
- Pankova, N. M., Pogukaeva, N. V., Korovkin, M. V., & Bolgova, D. L. (2017). Education as a Condition for Social Well-being of Human. In F. Casati, G. A. Barysheva, & W. Krieger (Eds.), *Lifelong Wellbeing in the World - WELLSO 2016*, vol 19. *European Proceedings of Social and Behavioural Sciences* (pp. 563-568). Future Academy. <https://doi.org/10.15405/epsbs.2017.01.76>
- Pourebrahim, T., & Rasouli, R. (2019). Meaning of life and psychological well-being during adult, older adult and oldest old. *Elderly Health Journal*. 5(1), 40-46.
- Povey, J., Boreham, P., & Tomaszewski, W. (2016). The development of a new multi-faceted model of social wellbeing: Does income level make a difference? *Journal of Sociology*, 52(2), 155–172. <https://doi.org/10.1177/1440783313507491>
- Report of an ICSU Planning Group (2011). *Health and Wellbeing in the Changing Urban Environment: A Systems Analysis Approach, An Interdisciplinary Science Plan*. International Council for Science, Paris.
- Roslan, S., Ahmad, N. A., Nabilla, N., & Ghiami, Z. (2017). Psychological well-being among postgraduate students. *Acta Medica Bulgarica*, 44, 35–41. <https://doi.org/10.1515/amb-2017-0006>
- Ruggeri, K., Garcia-Garzon, E., Maguire, Á., Matz, S., & Huppert, F. A. (2020). Well-being is more than happiness and life satisfaction: A multidimensional analysis of 21 countries. *Health and Quality of Life Outcomes*, 18(1), 192. <https://doi.org/10.1186/s12955-020-01423-y>
- Ryff, C. D. (2021). Spirituality and well-being: theory, science, and the nature connection. *Religions*, 12(11), 914. 10.3390/rel12110914
- Ryff, C. D. (1989). Happiness is everything, or is it? Explorations on the meaning of psychological well-being. *Journal of Personality and Social Psychology*, 57(6), 1069-1081. Available at: <https://doi.org/10.1037/0022-3514.57.6.1069>.
- Steptoe, A., Deaton, A., & Stone, A. A. (2015). Psychological wellbeing, health and ageing. *Lancet*, 385(9968), 640-648. [https://doi.org/10.1016%2FS0140-6736\(13\)61489-0](https://doi.org/10.1016%2FS0140-6736(13)61489-0)

Singh, B., & Kiran, U. (2015). Impact of educational status on social well being of elderly. *International Journal of Research*, 2, 350–356.

Zainal, N. R., Kaur, G., Ahmad, N. A., & Khalili, J. M. (2012). Housing conditions and quality of life of the urban poor in Malaysia. *Procedia-Social and Behavioral Sciences*, 50, 827-838.