

Impact of Mental Health on Personal Growth Initiative (PGI) among University Postgraduates

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Abstract

This study intends to explore the impact of mental health on personal growth initiative among university postgraduates. Personal Growth Initiative (PGI) is an active and intentional engagement in growth process and changing and developing as a better person. Mental health is defined as a syndrome of symptoms of both positive feelings and positive functioning in life. The study was conducted on a sample of 960 postgraduates from three state universities of Haryana state in India i.e. Kurukshetra University, Kurukshetra, Maharshi Dayanand University, Rohtak and Chaudhary Devi Lal University, Sirsa. The data was collected through two research instruments i.e. Personal Growth Initiative Scale-II by Robitschek et al (2009) and Mental Health Continuum-Short Form by Keyes et al (2009). The response rate of filled in questionnaire was 85% (out of 960, 818 questionnaires were completely filled in). The reliability and validity of the two instruments were established in Indian context. The Cronbach alpha coefficients for PGIS-II and MHC-SF were 0.741 and 0.771 respectively and both the scales were found to have valid factor structure in Indian context. Findings indicated that overall personal growth initiative and its three domains except 'using resources' had significant positive relationship with mental health. Further mental health found to have significant impact on total PGI through its psychological well-being dimension by explaining 9.7% of variance in overall PGI. Moreover, it was examined that psychological well-being dimension of mental health had significant impact on three dimensions of PGI i.e. 'readiness for change', 'planfulness' and 'intentional behaviour'. Further, it was revealed that 3.2%, 8.1% and 12% variance in 'readiness for change', 'planfulness' and 'intentional behaviour' was accounted for by psychological well-being dimension of mental health. From the findings, it can be concluded that psychological well-being domain of mental health was the most powerful predictor of total PGI and its three aspects viz. Readiness for Change, Planfulness and Intentional Behaviour. Social and Emotional well-being domains of mental health did not have any significant impact on total PGI as well as its different aspects. Thus, it can be said that psychological well being or fitness inspires an individual to get ready for change in the behaviour through appropriate planning and intentional engagement in the self-change process and capitalizes on opportunities for this personal development. The implications of the study were discussed later on.

Key Words- Personal growth initiative, Mental health, University postgraduates.

1.0 Introduction

1.1 Theoretical Underpinning of the Study

In the first half of 20th century, researches in psychology laid emphasis on the darker side of human nature- i.e. disorders, impairments, and mental illness. For instance, there are ample studies on negative emotions such as anger, shame, depression, or guilt (Buck, Carr and Robertson, 2008). In the second half of the 20th century also, psychology learned much about depression, racism, violence, self-esteem management, irrationality and growing up under adversity but had much less to say about character strengths, virtues and the conditions that lead to high levels of happiness or civic engagement. In one metaphor, psychology was said to be learning how to bring people up from negative eight to zero but not as good at understanding how people rise from zero to positive eight (Gable and Haidt, 2005). However, there are very few empirical studies on positive emotions such as gratitude, efficacy and positive side of mental health, admiration, initiative or moral elevation (Haidt, 2003) capacities, potentialities, capabilities, virtues and traits in the individuals like self efficacy, initiative, good mental health, self concept, self esteem etc. So, with the collective desire to bring balance to the field of psychology by encouraging researches on positive emotions and aspects long neglected by social scientists, a

new science of psychology gain a momentum in 2000, known as the **positive psychology movement**. It is the study of how human beings prosper in the face of adversity (Seligman and Csikszentmihalyi, 2000). It is the study of conditions and processes that contribute to the flourishing or optimal functioning of people, groups, and institutions (Gable and Haidt, 2005). It has been noted that in the world of growing complexities and escalating change, one can't be interested in understanding the factors that contribute to and enhance personal growth and development of the individuals. Recently personal growth initiative has emerged as a very important construct in furthering human development and personal fulfillment (Ogunyemi and Mabekoje, 2007).

1.2 Construct of Personal Growth Initiative (PGI)

Personal Growth Initiative (PGI) as conceptualized by Robitschek (1998) is an active and intentional engagement in the process of personal growth and in changing and developing as a person. PGI is a global inclination to improve one's self through active seeking out of self-growth experiences and is an orientation toward change and growth across life domains. It is a developed skill set, including cognition, behavior, attitude and motivation that a person carries into each life experience (Robitschek and Ashton et al., 2009). When a person intentionally involves himself in the growth process, he is said to be on the path of personal growth initiative. Personal Growth Initiative is a construct that represents a person's affinity for and attention to growth and change in his or her life in general but can be applied to actual behavior within specific life domains. PGI can be thought of as a meta-cognitive construct, an awareness and control of intentional engagement in growth-enhancing cognitions and behaviours in all areas of life (Robitschek, 1998) and describes an orientation towards actively and purposefully engaging in the growth seeking process. PGI contains cognitive components e.g. motivation to change, knowledge of the change process and efficacy related to the change process and behavioral components e.g. general goals relating to personal change and plans to attain those goals (Robitschek, 2003; Martin, 2009). PGI is an acquired skill set for self-improvement across life domains. It is comprised of four components i.e. Readiness for change, Planfulness, Using Resources and Intentional Behaviour. These four components operate synergistically, rather than sequentially, to optimize personal growth (Theon and Robitschek, 2012).

1.3 Construct of Mental Health

For decades, mental health has been defined as merely the absence of mental illness. It has been hypothesized that both, mental health and mental illness, were opposite poles of a single dimension and indicating that the presence or absence of mental illness implies the presence or absence of mental health, and vice versa. In recent years, the concept of mental health has changed. Researches brought to light that both the presence of positive mind and the absence of mental illness together constitute mental health. Mental health cannot be defined as merely the absence of something negative but also the presence of something positive. Mental health is considered as a syndrome of symptoms of both positive feelings and positive functioning in life (Keyes, 2002; Joshanloo and Nosratabadi, 2009; Stahl, 2012). Mental health like mental illness is defined as an emergent condition based on the concept of syndrome. A state of health, like illness is indicated when a set of symptoms at a specific level are present for a specified duration and this constellation of symptoms coincides with distinctive cognitive and social functioning (Keyes, 2005b, 2006). During the last decennia, researchers have conceptualized, measured and studied measurement structure of mental health through the investigation of subjective well-being (Headey, Kelley and Wearing, 1993). Subjective well-being is individuals' perceptions and evaluation of their own lives in terms of their affective states and their psychological and social functioning (Keyes and Lopez, 2002). Several studies have been conducted in order to find out what composes mental health and results highlighted that it requires a combination of different forms of well-being in order to be mentally healthy. These various forms of well-being are emotional, psychological and social well-being which together makes up mental health. These three dimensions of well-being nicely fit the three core elements of the WHO (2004) definition of mental health as "a state of well-being in which the individual realizes his or her own abilities, can cope with the normal stresses of life, can work productively and fruitfully, and is able to make a contribution to his or her community" (Keyes, 2007). In other words, these three components i.e. well-being, effective functioning in individual life, and effective functioning in community life constitute mental health (Lamers and Westerhof et al, 2011).

1.4 Purpose of the study

The purpose of the study was to determine if there would be any type of relationship between personal growth initiative and mental health among university postgraduates. It also sought whether there would be any impact of mental health on overall (total) personal growth initiative and its four dimensions i.e. 'readiness for change', 'planfulness', 'using resources' and 'intentional behaviour'

1.5 Objectives of the Study

- ❖ To find out the relationship of overall personal growth initiative and its four dimensions with mental health among university postgraduates.
- ❖ To examine the impact of mental health on overall (total) personal growth initiative among university postgraduates.
- ❖ To investigate the impact of mental health on 'Readiness for Change' dimension of PGI among university postgraduates.
- ❖ To explore the impact of mental health on 'Planfulness' dimension of PGI among university postgraduates.
- ❖ To study the impact of mental health on 'Using Resources' dimension of PGI among university postgraduates.
- ❖ To explore the impact of mental health on 'Intentional Behaviour' dimension of PGI among university postgraduates.

1.6 Hypotheses of the Study

Ha₁: There exists a significant relationship between overall PGI and all the dimensions of Mental Health i.e. Emotional Well-Being, Social Well-Being and Psychological Well-Being among university postgraduates.

Ha₂: All the dimensions of Personal Growth Initiative i.e. Readiness for Change, Planfulness, Using Resources and Intentional Behaviour have significant relationships with all the three domains of Mental Health among university postgraduates.

Ha₃: All the dimensions of Mental Health have significant impact on overall PGI among university postgraduates.

Ha₄: All the domains of Mental Health have significant impact on 'Readiness for Change' dimension of PGI among university postgraduates.

Ha₅: All the domains of Mental Health have significant impact on 'Planfulness' dimension of PGI among university postgraduates.

Ha₆: All the domains of Mental Health have a significant impact on 'Using Resources' dimension of PGI among university postgraduates.

Ha₇: All the domains of Mental Health have significant influence on 'Intentional Behaviour' dimension of PGI among university postgraduates.

1.7 Delimitations of the Study

- The study was delimited to three State universities of Haryana (India) i.e. Kurukshetra University, Kurukshetra; Maharshi Dayanand University, Rohtak and Chaudhary Devi Lal University, Sirsa.
- Only four faculties and eight departments underlying these faculties were taken which were common in all the three universities.
- A sample of 960 postgraduates from three universities (320 each) was taken for the study.

2.0 Literature Review

Review of literature on the construct of PGI revealed that a lot of studies were performed across cultures, various age groups, different samples, and different educational levels regarding PGI. These studies showed that PGI is related to different variables like ways of growing (Awareness-Unintentional, Unaware-Unintentional and Awareness-Intentional), gender role orientation, psychological well-being (Robitschek, 1999), career exploration and vocational identity (Robitschek and Cook, 1999), parental alcoholism, family functioning and psychological health (Robitschek and Kashubeck, 1999), spirituality and religiosity (Caldwell, 2000), multidimensional family functioning (Whittaker and Robitschek, 2001), self-efficacy, mental health and risk-taking behaviour (Ogunyemi and Mabekoje, 2007). In some studies, PGI acted as independent variable, in some as dependent variable and in others as a moderating variable. It was found that most of the studies related to PGI were done abroad and hardly one or two studies have been conducted in Indian context. So, review indicated that PGI is an unexplored area and there is dearth of empirical studies in this area in India.

From the review related to mental health, mental health has been studied as a potential protective factor against chronic physical conditions and aging (Keyes, 2005b), related to psycho-social functioning (Keyes, 2006), evaluated the psychometric properties of MHC-SF (Keyes, Wissing, Potgieter, Temane, Kruger and Van Rooy,

2008), personality traits (Joshnloo and Nosratabadi, 2009), organizationally relevant variables (Strumpfer, Hardy, Villiers and Rigby, 2009) and personal growth initiative as a predictor of mental health. It was also found that most of the studies in India were relating mental health with one or other type of disease such as depression, insomnia, suicidal attempt and many more and hardly any study has been conducted in India regarding the positive aspect of mental health and mental health continuum scale. Thus, a research gap regarding the positive aspect of mental health was felt by the investigator in Indian context.

3.0 Research Design and Method

3.1 Design of the study

For studying the impact of mental health (predictor variable) on PGI (criterion variable), Descriptive Survey Method with Ex-Post Facto research design was used.

3.2 Population and Sample

The university postgraduates studying in three universities of Haryana State in India i.e. Kurukshetra University, Kurukshetra, Maharshi Dayanand University, Rohtak and Chaudhary Devi Lal University, Sirsa constituted the population of the study. In the present study, a sample of 960 university postgraduates was selected through purposive-cum-random sampling technique.

3.3 Tools for Data Collection

In the present study following tools were used for data collection:

3.3.1 PGIS-II by Robitschek et al (2009)-The scale included both cognitive as well as behavioural components. There are four subscales on the PGIS-II: Cognitive Components (Readiness for Change, Planfulness), Behavioural Components (Using Resources and Intentional Behavior). There are 16 items in all the four subscales and statements are presented subscale wise. All items are positively worded and given a score of '0', '1', '2', '3', '4' and '5' for Disagree Strongly, Disagree Somewhat, Disagree a Little, Agree a Little, Agree Somewhat and Agree Strongly respectively. A total score ranges from 0 to 80 showing low personal growth initiative to moderate and high personal growth initiative. The test-retest reliability of original PGIS-II ranges from .61 to .77 for American sample. The Cronbach Alpha for the current study was 0.741.

3.3.2 Mental Health Continuum-Short Form by Keyes et al (2009)- The Mental Health Continuum-Short Form (MHC-SF) by Keyes et al. (2009) is derived from the long form (MHC-LF) developed by Keyes et.al (2002). The MHC-LF consisted of 40 items; the MHC-SF consists of 14 items that were chosen as the most prototypical items representing the construct definition for each facet of well-being. Respondents rate the frequency of every feeling in the past month on a 6-point Likert scale (*Never, once or twice a month, about once a week, two or three times a week, almost every day, everyday*). The scale comprised of three subscales: Emotional well-being, Social Well-Being and Psychological Well-Being. To be diagnosed with *flourishing* mental health, individuals must experience 'every day' or 'almost every day' at least one of the three signs of hedonic well-being and at least six of the eleven signs of positive functioning during the past month. Individuals who exhibit low levels (i.e., 'never' or 'once or twice' during the past month) on at least one measure of hedonic well-being and low levels on at least six measures of positive functioning are diagnosed with *languishing* mental health. Sometimes individuals scoring high on MHC-SF were taken as flourishing and individuals scoring low were considered as languishing. The Cronbach Alpha for the current study was 0.771.

3.4 Process of Data collection- The research instruments were administered personally by the investigator herself by establishing the rapport with the university postgraduates. The respondents were informed that the information given by them would be kept confidential and would be used for research purpose only. They were asked to follow the instructions given on each questionnaire. They took about 30 minutes to fill the questionnaires. The sheets were collected back on the spot. The response rate of filled in questionnaires was 85%.

3.5 Statistical Techniques- Frequency, Percentages, Pearson correlation coefficient and Stepwise regression analysis was used and data was analyzed by using SPSS 18.0 version.

4.0 Analysis and Interpretation

4.1 Demographic Characteristics

Demographic characteristics of the sample are given in the table 1 below:

Table-1

Demographic Characteristics

Characteristics of the sample		Frequency	Percentages
Gender	Male	295	36%
	Female	523	64%
	Total	818	100%
Age Group	20-24 Years	732	89%
	Above 24 Years	86	11%
	Total	818	100%
Locality	Urban	417	51%
	Rural	401	49%
	Total	818	100%
University	KUK	266	32.52%
	MDU	292	35.70%
	CDLU	260	31.78%
	Total	818	100%
Faculty	Science	238	29.1%
	Education	185	22.6%
	Social Science	173	21.1%
	Commerce & Management	222	27.1%
	Total	818	100%
Department	Mathematics	114	13.9%
	Computer Science	125	15.3%
	Education	94	11.5%
	Physical Education	90	11.0%
	Economics	101	12.3%
	Public Administration	72	8.8%
	Commerce	108	13.2%
	Business Administration	114	13.9%
	Total	818	100.0%

4.2 Relationship of Personal Growth Initiative with Mental Health among University Postgraduates

To find out the relationship between overall PGI and its four dimensions i.e. readiness for change, planfulness, using resources and intentional behaviour and three dimensions of Mental Health i.e. emotional well-being, social well-being and psychological well-being, Pearson Correlation Coefficients were computed.

Table-2

Relationship of Personal Growth Initiative with Mental Health among University Postgraduates

↓ Dimensions of PGI/Dimensions of MH →	Emotional Well- Being	Social Well-Being	Psychological Well-Being
Readiness for Change	.100** .004	.095** .007	.182** .000
Planfulness	.146** .000	.095** .007	.286** .000
Using Resources	.020 .577	-.005 .884	.034 .336
Intentional Behaviour	.171** .000	.171** .000	.349** .000
Total PGI	.161** .000	.129** .000	.313** .000

From the table 2, it is clear that total (overall) PGI had significant positive relationships with three dimensions of mental health i.e. Emotional well-being, Social well-being and psychological well-being. It was also revealed that total PGI had highest correlation coefficient with psychological well-being (0.313, $p < 0.05$). It was also examined that three dimensions of PGI i.e. Readiness for Change, Planfulness and Intentional Behaviour showed positive relationships with three domains of mental health i.e. Emotional well-Being ($r = 0.100, 0.146, 0.171$ respectively), Social Well-Being ($r = 0.095, 0.095, 0.171$ respectively) and Psychological Well-Being ($r = 0.182, 0.286, 0.349$ respectively). 'Using Resources' dimension of PGI was not found to be significantly associated with three domains of mental health. The Psychological Well-Being domain of mental health had shown highest correlations with three dimensions of PGI.

4.3 Impact of Mental Health on Total PGI and its four dimensions among University Postgraduates

For studying the impact of mental health on overall PGI and its four dimensions, stepwise regression analysis was used. Stepwise method adds the predictor variables that best correlate with the criterion variable in the regression equation.

4.3.1 Impact of Mental Health on Total PGI among University Postgraduates

Table- 3

Regression Model Summary for Studying the Impact of Dimensions of Mental Health on Total PGI among University Postgraduates

Model	R	R ²	Adjusted R ²	Std. Error of the Estimate	Durbin-Watson
1	.313 ^a	.098	.097	10.17216	1.492

a. Predictors: (Constant), Psychological Well-Being
 Criterion Variable: Total PGI Score

In the table 3, R indicates the multiple correlations between the dependent variable and the independent variables entered. The R² value identifies the portion of the variance accounted for by the independent variables. The R² is an accurate value for the sample drawn and is considered an optimistic estimate for the population value. The Adjusted R² is considered a better population estimate and adjusts for the bias in R² (George and Mallery, 2008). In the table 3, regression model made it clear that only one dimension of mental health i.e. psychological well-being was contributing to 9.7% of variance in total PGI. The two dimensions of mental health i.e. social and emotional well-being were excluded by stepwise regression analysis as these dimensions were not showing significant impact on PGI. The Durbin-Watson value (1.492) was lying between the acceptable limit (1 to 3) which showed that there was an independence of errors in the table.

Table-4

ANOVA Summary of Regression Model for Studying the Impact of Dimensions of Mental Health on Total PGI among University Postgraduates

Model	Sum of Squares	Df	Mean Square	F	Sig.
1 Regression	9194.683	1	9194.683	88.861	.000 ^a
Residual	84433.866	816	103.473		
Total	93628.549	817			

a. Predictors: (Constant), Psychological Well-Being

Criterion Variable: Total PGI Score

In the ANOVA summary table 4, regression statistics is related to the explained portion of the variance and residual statistics is related to the unexplained portion of the variance (George and Mallery, 2008). It is clear from the ANOVA table 4.48 that explained variance in the scores of total PGI by the psychological well-being was not by chance as F-value was significant (F= 88.861, p=0.01). Hence it can be said that the variance caused by psychological well-being was not due to chance factor but it really influenced the total PGI scores among university postgraduates.

Table-5

Coefficient Summary for Studying the Impact of Dimensions of Mental Health on Total PGI among University Postgraduates

Model	Unstandardized Coefficients		Standardized Coefficients	t	Sig.	Collinearity Statistics	
	B	Std. Error	Beta			Tolerance	VIF
1 (Constant)	40.304	1.876		21.488	.000		
Psychological Well-Being	.605	.064	.313	9.427	.000	1.000	1.000

Dependent Variable: Total PGI Score

In the coefficient table 5, the unstandardized coefficients B column gives the coefficients of the independent variables in the regression equation. In order to know the importance of psychological well-being dimension of mental health, standardized Beta weights were computed. The Beta weight is the average amount the dependent variable increases when the independent variable increases by one standard deviation (All other independent variables are held constant). From the table 5, the value of beta coefficient was significant which meant that psychological well-being (r= .313) had significant influence on variance in total PGI score. The tolerance value was above 0.1 and VIF was below 10 which meant that there was not any Multicollinearity in the data.

4.3.2 Impact of Mental Health on 'Readiness for Change' Dimension of Personal Growth Initiative among University Postgraduates

Table-6

Regression Model Summary for studying the Impact of Mental Health on 'Readiness for Change' Dimension of PGI among University Postgraduates

Model	R	R ²	Adjusted R ²	Std. Error of the Estimate	Durbin-Watson
1	.182 ^a	.033	.032	3.36796	1.490

a. Predictors: (Constant), Psychological Well-Being

Criterion Variable: Readiness for Change

From the regression model in the table 6, it was analyzed that psychological well-being domain of mental health alone caused 3.2% of variance in readiness for change dimension of PGI. Other two dimensions of mental health i.e. social and emotional well-being were excluded by stepwise regression analysis as these were not showing any influence on this dimension of PGI.

Table-7

ANOVA Summary for studying the Impact of Mental Health on ‘Readiness for Change’ Dimension of PGI among University Postgraduates

Model	Sum of Squares	Df	Mean Square	F	Sig.
1 Regression	318.052	1	318.052	28.039	.000 ^a
Residual	9256.021	816	11.343		
Total	9574.073	817			

a. Predictors: (Constant), Psychological Well-Being

Criterion Variable: Readiness for Change

The ANOVA summary in the table 7 shows that the variance explained by the regression model was significant as F-value was significant (F=28.039, p<=0.000). Thus we can say that variance caused by psychological well-being domain of mental health on readiness for change dimension of PGI was not by chance but it existed in reality.

Table-8

Coefficient Summary for Studying the Impact of Mental Health on ‘Readiness for Change’ Dimension of PGI among University Postgraduates

Model	Unstandardized Coefficients		Standardized Coefficients	T	Sig.	Collinearity Statistics	
	B	Std. Error	Beta			Tolerance	VIF
1. (Constant)	11.013	.621		17.735	.000		
Psychological Well-Being	.112	.021	.182	5.295	.000	1.000	1.000

Dependent Variable: Readiness for Change

From the coefficient table 8, it was found that contribution made by psychological well-being to the variance in the scores of readiness for change dimension of PGI was noteworthy as t-value for beta coefficient was significant (Beta=0.182, t= 5.295, p=0.000).

4.3.3 Impact of Mental Health on ‘Planfulness’ Dimension of Personal Growth Initiative among University Postgraduates

Table-9

Regression Model for Studying the Impact of Mental Health on ‘Planfulness’ Dimension of PGI among University Postgraduates

Model	R	R ²	Adjusted R ²	Std. Error of the Estimate	Durbin-Watson
1	.286 ^a	.082	.081	4.44368	1.526

a. Predictors: (Constant), Psychological Well-Being

Criterion Variable: Planfulness

From the regression model in the table 9, it was found that psychological dimension of mental health caused 8.1% (Adjusted $R^2 = .081$) of variance in Planfulness domain of PGI. The Durbin-Watson value was 1.526 (lie in acceptable range) which meant that there was an independence of errors in the above table.

Table-10

ANOVA Summary for Studying the Impact of Mental Health on ‘Planfulness’ Dimension of PGI among University Postgraduates

Model	Sum of Squares	Df	Mean Square	F	Sig.
1 Regression	1437.271	1	1437.271	72.787	.000 ^a
Residual	16112.988	816	19.746		
Total	17550.259	817			

a. Predictors: (Constant), Psychological Well-Being

Criterion Variable: Planfulness

The ANOVA summary in the table 10 showed that the variance explained by the regression model was significant as F-value was significant ($F=72.787$, $p<0.01$). Thus we can say that the explained variance was not by chance but it really existed.

Table-11

Coefficient Summary for Studying the Impact of Mental Health on ‘Planfulness’ Dimension of PGI among University Postgraduates

Model	Unstandardized Coefficients		Standardized Coefficients	t	Sig.	Collinearity Statistics	
	B	Std. Error	Beta			Tolerance	VIF
1 (Constant)	11.256	.819		13.738	.000		
Psychological Well-Being	.239	.028	.286	8.532	.000	1.000	1.000

Dependent Variable: Planfulness

In the table coefficient table 11, the beta coefficient and t-value ($Beta=.286$, $t=8.532$, $p=0.000$) for psychological well-being indicated that psychological well-being was contributing significantly to the variance in the score of Planfulness dimension of PGI. The collinearity statistics indicated no Multicollinearity among variables in the data.

4.3.4 Impact of Mental Health on ‘Intentional Behaviour’ Dimension of Personal Growth Initiative among University Postgraduates

Table-12

Regression Model for Studying the Impact of Mental Health on ‘Intentional Behaviour’ Dimension of PGI among University Postgraduates

Model	R	R ²	Adjusted R ²	Std. Error of the Estimate	Durbin-Watson
1	.349 ^a	.121	.120	3.48267	1.714

a. Predictors: (Constant), Psychological Well-Being

Criterion Variable: Intentional Behaviour

From the table 12, it was found that psychological well-being domain of mental health explained 12% of variance in intentional behaviour dimension of PGI. Other two dimensions of mental health i.e. social and emotional well-being were excluded by stepwise regression analysis as these were not showing any significant

impact on the ‘intentional Behaviour’ dimension of PGI. The Durbin-Watson value is 1.714 which indicated that there was an independence of error in the table.

Table-13

ANOVA Summary for Studying the Impact of Mental Health on ‘Intentional Behaviour’ Dimension of PGI among University Postgraduates

Model	Sum of Squares	Df	Mean Square	F	Sig.
1 Regression	1368.292	1	1368.292	112.812	.000 ^a
Residual	9897.249	816	12.129		
Total	11265.542	817			

a. Predictors: (Constant), Psychological Well-Being

Dependent Variable: Intentional Behaviour

The ANOVA summary table 13 showed that the variance explained by psychological well-being in the regression model was remarkable as F-value was significant (F=112.812, p=0.000). Thus, it can be concluded that the variance in intentional behaviour domain of PGI by psychological well-being was not by chance but it really existed.

Table-14

Coefficient Summary for Studying the Impact of Mental Health on ‘Intentional Behaviour Dimension of PGI among University Postgraduates

Model	Unstandardized Coefficients		Standardized Coefficients	t	Sig.	Collinearity Statistics	
	B	Std. Error	Beta			Tolerance	VIF
1 (Constant)	8.769	.642		13.655	.000		
Psychological Well-Being	.233	.022	.349	10.621	.000	1.000	1.000

Dependent Variable: Intentional Behaviour

In the table 14, the beta weights made clear that psychological well-being was significantly contributing (beta=.349, t= 10.621, p=0.000) to the variance in the scores of intentional behaviour dimension of PGI as t value for beta coefficient was found to be significant.

5.0 Discussion of Results

☛ H_{a1} viz. “There exists a significant relationship between overall PGI and all the dimensions of Mental Health i.e. Emotional Well-Being, Social Well-Being and Psychological Well-Being among university postgraduates” was accepted as total PGI had a significant positive relationship with all the three dimensions of mental health. It was found that total PGI was showing highest correlation with psychological well-being (r= 0.331, p=0.000) dimension of mental health followed by emotional well-being (r= 0.161, p=0.000) and then social well-being (r= 0.129, p=0.000) among university postgraduates. This finding supported the previous researches in which PGI had shown significant relationship with mental health (Ogunyemi and Mabekoje, 2007) and psychological well-being (Robitschek and Kashubeck, 1999; Ayub and Iqbal, 2012).

☛ H_{a2} viz. “All the domains of Personal Growth Initiative i.e. Readiness for Change, Planfulness, Using Resources and Intentional Behaviour have significant relationships with all the three dimensions of mental health among university postgraduates” was retained as three domains of PGI except one i.e. using resources had significant relationships with all the three dimensions of mental health. It was found that Readiness for Change, Planfulness and Intentional Behaviour domains of PGI were significantly and positively correlated with three dimensions of mental health i.e. emotional well-being (r= 0.100, 0.146, 0.171 respectively; p< 0.05), social well-being (r= 0.095, 0.095, 0.171 respectively; p< 0.05) and psychological well-being (r= 0.182, 0.286, 0.349 respectively; p< 0.05). It is clear that intentional behaviour domain of PGI had the highest correlation with psychological well-being.

☛ H_{a3} viz. “All the dimensions of Mental Health have significant impact on overall PGI among university postgraduates” was not strongly supported as one dimension of mental health i.e. psychological well-being had a significant impact on overall PGI among university postgraduates. It was found that psychological well-being predicted 9.7% of variance in overall PGI. Other two dimensions of mental health were not found to have significant impact on overall PGI. The finding is inconsistent with Ogunyemi and Mabekoje (2007) who found that mental health was not a good predictor of PGI.

☛ H_{a4} viz. “All the domains of mental health have significant impact on ‘Readiness for Change’ dimension of PGI among university postgraduates” was not fully supported as only one dimension of mental health i.e. psychological well-being had a significant impact on ‘Readiness for Change’ domain of PGI among university postgraduates. Results showed that 3.2% of variance in readiness for change dimension of PGI was accounted for by the psychological well-being dimension of mental health. Emotional and social well-being did not seem to have significant impact on this domain of PGI among university postgraduates.

☛ H_{a5} viz. “All the domains of mental health have significant impact on ‘Planfulness’ dimension of PGI among university postgraduates” was strongly supported for one dimension of mental health i.e. psychological well-being and other two dimensions were not found to have significant impact on this domain of PGI. Results showed that psychological well-being dimension of mental health caused 8.1% of variance in Planfulness domain of PGI among university postgraduate students.

☛ H_{a6} viz. “All the domains of Mental Health have a significant impact on ‘Using Resources’ dimension of PGI among university postgraduates” was rejected as the dimensions of mental health were not found to have significant impact on using resources domain of PGI among university postgraduates. Thus, alternate hypothesis was rejected.

☛ H_{a7} viz. “All the domains of mental health have significant influence on ‘Intentional Behaviour’ dimension of PGI among university postgraduates” was strongly retained for only one domain of mental health i.e. psychological well-being among university postgraduate students. It was examined that Psychological well-being domain of mental health had a significant impact on intentional behavior dimension of PGI and 12% of variance in this domain of PGI was accounted for by the psychological well-being among university postgraduate students. The two dimensions of mental health i.e. social and emotional well-being was not showing any significant impact on this domain of PGI.

6.0 Findings of the Study

1) The findings of the study showed that the total (overall) PGI had significant positive relationship with three dimensions of mental health i.e. Emotional Well-Being, Social Well-Being and Psychological Well-Being among university postgraduates. Moreover, total PGI showed highest relationship with psychological well-being. It meant that an individual’s well-being, effective individual’s functioning and effective social functioning lead an individual to move on the path of intentional self-change.

2) The results indicated that three domains of PGI i.e. Readiness for Change, Planfulness and Intentional Behaviour were significantly positively correlated with emotional, social and psychological well-being among university postgraduates. Using resources aspect of PGI was not found to be significantly associated with mental health. The correlations of three domains of PGI with social and emotional well-being domains were overshadowed by highest association of psychological well-being dimension of mental health. It can be said that good psychological well-being will help an individual to be ready for bringing intentional change in behaviour by proper planning of change process.

3) It was examined that only one dimension of mental health i.e. psychological well-being had a significant impact on total PGI and 9.7% of variance in total PGI was caused by psychological well-being among university postgraduates. The two dimensions i.e. social and emotional well-being did not show any significant impact on overall (total) PGI. Thus, psychological well-being was the most important predictor of total PGI.

4) It was also investigated that only psychological well-being dimension of mental health was found to have significant impact on ‘Readiness for Change’ domain of PGI and 3.2% of variance in ‘Readiness for Change’ domain of PGI was accounted for by psychological well-being among university postgraduates. Social and Emotional well-being dimensions were not found to have significant impact on this domain of PGI among university postgraduates.

5) The results also indicated that one dimension of mental health i.e. psychological well-being had significant influence on ‘Planfulness’ domain of PGI among university postgraduates. Further, it was found that psychological well-being significantly caused 8.1% of variance in ‘Planfulness’ domain of PGI among university postgraduates.

6) Results also revealed that all the three dimensions of mental health did not have any significant impact on 'Using Resources' domain of PGI.

7) It was also examined that only psychological well-being domain of mental health found to have a significant impact on 'Intentional Behaviour' dimension of PGI. Additionally, it was found that 12% of variance in Intentional Behaviour was contributed by psychological well-being among university postgraduate students.

7.0 Conclusions

A. From the findings, it can be concluded that psychological well-being domain of mental health was the most powerful predictor of total PGI and its three aspects viz. Readiness for Change, Planfulness and Intentional Behaviour. Social and Emotional well-being domains of mental health did not have any significant impact on total PGI as well as its different aspects. Thus, it can be said that psychological well being or fitness inspires an individual to get ready for change in the behaviour through appropriate planning and intentional engagement in the self-change process and capitalizes on opportunities for this personal development.

B. From the findings, it can be concluded that the university postgraduates who acknowledge themselves more, perceive more purpose in life, have healthier relationships with others, have a superior sense of self-sufficiency, mastery over their environment, have a better feeling of association to their society, a superior sense of contributing to their society, more thoughtful of society around them, a progressive perception of the world, satisfaction in life and feel happier were supposed to be more active and intentional participation in the process of making themselves a better person and more intended in self-enhancement.

8.0 Implications of the study

a. From the findings, it was also found that total PGI as well as its domains had significant positive relationships with three dimensions of mental health i.e. emotional well-being, social well-being and psychological well-being. Further, it was found that psychological well-being had significant positive impact on PGI and its dimensions. Thus, it is suggested to university postgraduates that they should work on different aspects related to psychological well-being i.e. improving their personality, managing responsibilities of daily life in an appropriate way, having warm and trusting relationships with others, learning from their previous experiences, expressing their ideas frankly and without hesitation and setting goal in life to provide direction to life. If the students improve upon above said aspects, they would definitely found themselves engage intentionally in growth process.

b. Findings also revealed that psychological well-being is a strong predictor of PGI. Therefore, psychologists and counselors should design intervention programmes to foster psychological well-being of university postgraduates.

c. Intentional Growth Training Programmes should be organized so that orientation regarding personal growth initiative could be given to students and that would enhance the initiative for personal growth and students would be more engaging in growth process intentionally.

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