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Research Paper

A Study Exploring the Relationship between Emotional Intelligence, Loneliness, Resilience, Mental Well Being and Life Satisfaction among Residents of Alcohol and Drug Deaddiction Centers in North Bengal

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ABSTRACT

Objective: The objective of the study was to find a relationship between Emotional Intelligence, Loneliness, Resilience, Mental Well-Being, and Life Satisfaction among residents of drug and alcohol deaddiction centers. Method: There was 112 participants from drug and alcohol deaddiction centers aged 20 to 40 years for the study. Quantitative data collection was conducted using Google Forms, with participants completing five questionnaires: the UCLA Loneliness Scale, the Brief Emotional Intelligence Scale 10 (BEIS 10), the Brief Resilience Scale (BRS), and the Warwick- Edinburgh Mental Well-Being Scale. Data collection included a consent form and a general information form. Questionnaires were administered in English, and since all scales were self-administered, participants were asked to read the instructions carefully so as not to miss any items to facilitate scoring. After data collection, scores were tabulated for further statistical processing and hypothesis validation. Statistical treatment of data were Descriptive Statistics - (Mean and Standard deviation) Parametric Statistics- (Correlation and Multiple Linear Regression). **Result:** The results indicated significant correlations among these variables, leading to the rejection of the null hypotheses, which stated that there was no significant relationship among the variables. It was interpreted that there was a significant correlation between the variables among the deaddiction residents. Thus, it was quantified that any significant improvement in the predictor variables could directly impact the criterion variables.

Keywords: Emotional Intelligence, Loneliness, Resilience, Mental Well Being, Life Satisfaction, Alcohol and Drug De Addiction, North Bengal

MOTIONAL INTELLIGENCE

Emotional intelligence is the ability to observe one's own and others' emotions, distinguish between different emotions and label them appropriately, and use emotional information to guide thinking and behavior." (Salovey, P. and Mayer, J.D. (1990).

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It is the set of skills that sets apart the successful from those who are not as good in life, known as emotional intelligence. Goleman, D. (1995).

History of Emotional Intelligence

1872: Charles Darwin is known for his work in biology and especially evolution. According to him, it was not the strongest or most intelligent that survived, but rather the one who was most responsive to change.

1920: Edward Lee Thorndike, an American educational psychologist, defined social intelligence in the 1920s as the capacity to comprehend and guide intelligent interactions between men and women."

1950: Abraham Maslow described the hierarchy of needs in 1950. Most of his heirarchy and what he describes as "higher needs" are emotional needs. he suggests that things like friendship, family closeness, self-esteem and self- actualization are higher level drivers of our actions when our safety and physiological needs are met.

1985: Wayne Payne, then a graduate student at an alternative liberal arts college in the United States, wrote an unpublished dissertation with the term "emotional intelligence" in the title. Lessons Learned: Development of Emotional Intelligence Since 1985

Mid-1980s: Reuven Bar, a psychologist interested in non-cognitive skills, attempted to create a measure of social emotional intelligence. The definition of emotional intelligence is as follows: "emotional intelligence is a set of non-cognitive abilities.

1990: John Mayer, Peter Salovey and later David Carusaj tried to develop a scientific measure of the differences in people's ability to express emotions. they found that people with SPME are better at things like recognizing their own emotions, recognizing the emotions of others, and solving problems related to emotional problems. They published it in the journal "emotional intelligence"

1992: During his research for the book of emotions, Daniel Goleman came across the 1990 article by Salovey and Mayer. Goleman asked them to agree to include "emotional intelligence" in his book. The request was accepted. The focus of his earlier book seems to be "emotional literacy."

Theories of Emotional Intelligence

Ability Model (Salovey & Mayer):

- Focus: Proposed by Peter Salovey and John Mayer in 1990, this theory emphasizes emotional intelligence as a set of skills that can be learned and improved. It focuses on the cognitive processes involved in understanding emotions.
- Four key skills:
 - 1. Emotion detection: The recognition of emotion involves recognizing emotions from both the self and others, including facial expressions as well as body language and tone of voice.
 - 2. Using Emotions: Emotions can be utilized to stimulate thinking, problemsolving, directing attention, and influencing behaviour.

- 3. Understanding emotions: understanding the causes and consequences of emotions, including how emotions affect people's behavior.
- 4. Emotion regulation: is the process of managing one's emotions and others, including delaying the enjoyment of those around them.

Trait Model (Goleman):

- Focus: Daniel Goleman's 1995 theory, Emotional Intelligence: Why It Can Matter More Than IQ, views emotional intelligence as a set of interrelated characteristics or attitudes. It emphasizes the emotional and social aspects of intelligence.
- Five main parts:
 - 1. Self-awareness: recognizing your emotions and how they affect your thoughts and behavior.
 - 2. Self-regulation: Managing emotions through self-regulation, which involves delaying pleasure and managing stress.
 - 3. Motivation: Using emotions to achieve goals, maintain focus, and cope with challenges.
 - 4. Empathy: To respond to and feel the feelings of others, from their point of view.
 - 5. Social abilities: establishing connections, communicating effectively, managing conflicts and exerting influence. All of these are social skills.

Importance of Emotional Intelligence in Addiction patients

Here are impact reasons why Emotional intelligence is important for addiction patients:

Understanding Triggers and Cravings: Higher Emotional intelligence helps individuals identify and understand their emotional trigger and cravings. This self-awareness is necessary for recognizing the emotions that lead to addiction and finding healthier ways to cope.

Improving coping strategies: Individuals with higher Emotional intelligence can better manage stress anxiety and other negative emotions without resorting to substance use. they are more likely to develop and utilize effective coping strategies which are crucial for long term recovery.

Enhancing relationships: Addiction often strains relationships with family, friends, and colleagues, improving Emotional Intelligence can help individuals communicate more effectively, resolve conflict, and rebuild trust, which provides a supportive network essential for recovery.

Preventing Relapse: Emotional intelligence aids in recognizing early signs of relapse and addressing them proactively. By managing emotions effectively, individuals can systematically retain their commitment to sobriety and prevent relapse.

Improving self esteem and confidence: Higher Emotional intelligence is associated with better self esteem and confidence.

Incorporating Emotional intelligence training and development into addiction, treatment programs can provide patients with valuable tools to support their recovery journey.

Emotional regulation skills training can help chance EI and, consequently, improve recovery outcomes.

By cultivating Emotional intelligence through self-awareness, emotional regulation, empathy, and fostering a supportive environment, patients can build the emotional resilience they need to navigate the challenges of recovery. This resilience empowers them to weather the inevitable storms, find meaning and purpose in their lives, and ultimately achieve lasting sobriety.

LONELINESS

The feeling of loneliness is a complex and unpleasant emotional response that results from being alone or isolated. Loneliness is not just about physical isolation, it can also be a feeling of isolation from others or a lack of meaningful social interactions.

The contrast between a person's desired and actual social relationship causes subjective stress, which is known as loneliness." (Peplau, L. A. and Perlman, D. (1982).

The subjective feeling of social isolation causes feelings of loneliness or social pain (Cacioppo and Patrick, 2000). This disturbing combination of feelings and emotions is due to the difference between the actual and the desired social relationship.

Loneliness is now considered a public health problem - and even an epidemic - and people are researching its causes and trying to find solutions.

While loneliness seems to have been a part of human history for centuries, it appears to be the most recent example dating back to the late 16th century, when people began to feel lonely and dangerously close to each other.

Historical significance of Loneliness

In early modern Britain, to stray too far from society meant giving up the protection it offered. Distant forests and mountains created fear, and lonely space was a place where you could meet someone who could harm you and no one else would help. To discourage their congregations from sin, the preachers asked people to imagine themselves in "solitude" - places like hell, the grave or the desert.

During the17th century, books seldom contained any mention of "solitude" or "solitud e" In 1674, the naturalist John Ray compiled a dictionary of rarely used words. He added "solitude" to his list, defining it as a term used to describe places and people "away from neighbors." The lack of a clear cure for loneliness is part of the reason why it is considered so dangerous today.

Across different cultures and age brackets, loneliness is a widespread problem worldwide. Factors such as urbanization, the use of social media, and the decline of social support networks are often cited as contributing to the increase in loneliness in today's world.

Understanding the Nuances: Different Types of Loneliness

It's important to recognize that loneliness isn't monolithic. There are different types of loneliness, each with its own causes and consequences:

- Social Loneliness: A lack of social connections and relationships.
- Emotional Loneliness: Feeling a lack of emotional intimacy or close confidantes.
- Existential Loneliness: A sense of isolation and meaninglessness in the universe.

Psychological consequences of loneliness

Loneliness has significant psychological consequences that can affect a person's mental health and overall well-being in a number of ways.

Depression

Increased Risk: loneliness is a strong indicator of depression, and it can lead to an increase in the number of people experiencing depression

Hopelessness: Feelings of loneliness can lead to a pervasive sense of hopelessness and sadness.

Stress

Chronic Stress: Loneliness is associated with elevated stress levels, which can become chronic and impact both mental and physical health.

Cortisol Levels: The body's primary stress hormone cortisol can be heightened by loneliness, leading to adverse bodily reactions that can result in chronic health issues.

Increased Risk of Substance Abuse

Coping Mechanism: Loneliness can lead to substance abuse as individuals seek different ways to cope up with their emotional pain and social isolation.

Addiction Risk: There is an increased risk of developing addiction due to the dependency on substances for temporary relief from loneliness.

Loneliness in Addiction Patients

Loneliness is a significant factor in the lives of individuals struggling with addiction. It can both contribute to the development of addiction and result from it.

Emotional Pain: Loneliness often leads to emotional pain and distress, which individuals may try to alleviate through substance use.

Lack of Social Support: Individuals with limited social networks or poor-quality relationships may turn to substances as a coping mechanism.

Social Isolation: Loneliness can lead to social isolation, creating a cycle where the individual withdraws further and becomes more reliant on substances for comfort.

Loneliness as a Risk Factor:

- Emotional Vulnerability: Loneliness can create a breeding ground for negative emotions like depression, anxiety, and despair. These emotions can trigger cravings for substances that offer a temporary escape.
- Coping Mechanism: For some, substances become a way to cope with the pain of loneliness. So for any problem caused they will cope it with one solution that is drug intake to reduce the feeling of problem
- Social Isolation: Addiction can lead to social isolation, as relationships become strained or broken due to substance use.

Loneliness as a Barrier to Recovery

- Lack of Support: Effective recovery from addiction requires the presence of strong social networks. Loneliness can make it difficult to build and maintain these supportive relationships.
- Relapse Trigger: Feeling isolated and alone can be a major trigger for relapse. Without a support network, patients may struggle to cope with cravings.

Breaking the Cycle: Addressing Loneliness in Addiction Recovery

- Building Supportive Networks: Addiction treatment programs should emphasize building healthy social connections. Support groups, therapy sessions, and family involvement can all play a role.
- Developing Social Skills: Many people struggling with addiction may have difficulty forming healthy social connections. Therapy can help them develop communication.
- Addressing Underlying Issues: Sometimes, loneliness stems from unresolved emotional issues like trauma or anxiety. Therapy can address these underlying issues, promoting emotional well-being.

By recognizing the importance of loneliness and implementing strategies to address it, treatment programs can empower patients to build stronger social connection, manage difficult emotions, and ultimately achieve the lasting recovery.

RESILIENCE

Most people understand resilience as the ability to bend over backwards, but still hang on and, if possible, recover from negative life events. It forms the basis of their thinking. According to the American Psychological Association (2014), resilience is the ability to adapt effectively to adversity, trauma, tragedy, danger or significant sources of stress. Despite its practicality, the definition fails to accurately represent the intricate nature of resilience. (Southwick, Douglas-Palumberi, & Pietrzak).

The ability to bounce back from stress, hardship, failure or trauma is known as resilience. It's not about avoiding stress, it's about learning to thrive within it." (Harvard Business Review, 2016)

The dynamic ability of an individual or system to cope, adapt and strengthen in response to internal or external adversity using inherent strengths and learned coping mechanisms, thus turning challenges into personal or systemic opportunities and development."

Historical Background of Resilience

"Resilience" is originated from the Latin word "resilire" which means "to return or retreat." This story embodies the core concept of resilience, which is the ability to bounce back from setbacks or adversity.

The origin of the word was in English in the 17th century and was mostly used to refer to physical objects.

In the 19th century, the concept of durability spread to the fields of technology and mechanics. Think of a bridge that can withstand strong winds without collapsing.

The middle of the 20th century was a turning point.Psychology initiated the use of resilience to describe human conduct. Pioneering researchers such as Norman Garmezy and Michael Rutter studied children who were successful despite facing significant challenges in their education.

Types of Resilience Psychological Resilience

The process of coping well in the face of adversity, trauma, tragedy, danger, or significant sources of stress." (American Psychological Association, 2014).

Social Resilience

Adger and his team believe that collective response to external stresses and disturbances caused by social, political, and environmental change is crucial for coping with these factors. N. (2000).

Emotional Resilience

EMOTIONAL RESILIENCE- Emotional resilience is the ability to adapt to stressful situations or crises. Individuals with greater resilience are capable of adjusting and managing difficulties without succumbing to them. (American Psychological Association, 2021).

Learning about history and diversity can equip us with the knowledge to confront life obstacles. Resilience research contributes to advance by exploring underlying mechanisms, identifying protective factors that promote resilience, and developing interventions to increase resilience in individuals and communities. This research has applications in many areas, including mental health, education, disaster preparedness and environmental sustainability.

Importance of Resilience in Addiction Patients

The presence of flexibility is a crucial defense against addiction. Addiction is a complex disease characterized by relapse. Patients who exhibit exceptional resilience are better equipped to handle these difficulties and maintain a strong commitment to recovery.

Survival Craving: Craving is a powerful addict. Patients with strong resistance can control these urges more effectively.

Relapse management: Addiction recovery often involves relapses. In contrast, resistant patients perceive relapses as short term failures rather than long lasting reasons for quitting.

Stress Management: Life throws balls and addicts are no exception. Relapses are frequently caused by stress.

Building a Foundation for Recovery:

Motivation and determination: recovery is a marathon, not a sprint. Resilience builds the motivation and determination needed to stay on track even when faced with challenges.

Positive Outlook: Addiction can develop negativity and self-doubt. Resilient patients maintain a more positive outlook, believing in their ability to overcome addiction.

Self-Efficacy: Resilience fosters a sense of self-efficacy. This self-confidence is essential for patients to trust their own strength and find the challenges of recovery.

Building Resilience in Recovery:

- Mindfulness Practices: Activities like meditation and yoga can help patients develop self-awareness and emotional regulation skills, improving their ability to manage difficult emotions without resorting to substance use.
- Building a Healthy Lifestyle: Focusing on healthy habits like exercise, proper nutrition, and quality sleep can improve overall well-being.

By cultivating resilience, addiction patients can develop the inner strength and coping mechanisms needed to navigate the challenges of recovery and build a life free from addiction. It's a journey of growth, self-discovery, and learning to bounce back from setbacks in life and life related issues, ultimately emerging stronger.

MENTAL WELLBEING

A Journey Through time: The Evolving story of Mental Well Being

Spiritual well-being has a long and fascinating history, steeped in cultural beliefs and discoveries made by scientists.

Spiritual Explanations: In early civilizations, mental health problems were often associated with supernatural forces such as demons or imbalances in body fluids. Therapy included rituals, prayers, and appeasement of the gods.

Philosophical reflection: Ancient Greek philosophers such as Plato and Aristotle began to explore the mind-body relationship, emphasizing the importance of moderation and balance for mental well-being.

Moral Framework: Early moral codes such as Confucianism and Stoicism emphasized selfcontrol, reason and virtue as keys to spiritual well-being.

Religious Influence: The rise of Christianity offered a new perspective. Mental illness can be seen as demonic possession or punishment for sin. Exorcism and prayer became common practice.

Rise of Reason: During the Enlightenment, scientific explanations for mental health problems began to be introduced. Thinkers such as Thomas Hobbes and John Locke emphasized the role of reason and experience in shaping mental well-being.

Moral Treatment: Pioneering reformers such as Philippe Pinel and William Tuke advocated more humane treatment of the mentally ill.

The 20th century witnessed a transformation in mental health:

Psychoactive drugs: The discovery of medications like antidepressants, Ssris anti psychotics offered new treatment options.

Community Mental Health Movement: A shift towards community-based care helped to provide accessible mental health services outside of hospitals.

Mental Health Awareness: Growing awareness and advocacy efforts destignatised mental illness and encouraged open conversations about mental well being.

Prevention and Early Intervention: The emphasis is now on preventing mental health problems through promoting resilience, mindfulness, and social support.

Technology and Innovation: Technology plays a growing role in mental health care, with the rise of tele therapy apps and online support groups.

Looking ahead, the focus is creating a more supportive and psycho educational society that gives important to mental well being. This includes:

- Promoting mental health literacy and self-care practices.
- Has knowledge of various social factors that impact mental health, including poverty and social isolation.

By understanding the history of mental well being, we gain valuable insights for shaping a future where mental health is valued and prioritized. It's a journey of continuous learning, de stigmatize, and developing strategies to enhance mental well-being.

Importance of Mental Well Being in Addiction patients

Successful addiction recovery is dependent on mental health. Just as a strong foundation is needed to gradually build a building, it takes a healthy mind to overcome addiction and it takes a positive attitude to live a purposeful life in recovery. Here, we dive into why mental wellness is important for people with addiction.

The Root Connection

Addiction & Mental Illness: addiction and mental health problems go together. Many people struggling with addiction also have co-occurring mental disorders such as depression, anxiety. These mental health problems can contribute to substance use as a way to cope with difficult emotions.

Emotional Triggers: Patients remain vulnerable to emotional triggers if patients do not address emotional well-being. Stress, anxiety or feelings of isolation can be powerful relapse triggers.

The Benefits of Mental Well-being:

- Emotional Regulation: Strong mental well-being equips patients with healthy coping mechanisms to manage difficult emotions. They can learn to handle stress, anxiety and craving without resorting to substance use.
- Building Resilience: Mental well-being fosters resilience the ability to bounce back from setbacks. This is crucial in recovery, as there may be challenges and relapse along the way.
- Motivation & Goal Setting: Good mental well-being fosters motivation and the ability to set realistic goals. This is essential for staying committed to the long-term process of recovery.

Enhancing Mental Well-being in Recovery:

- Mindfulness Practices: Activities like meditation, yoga, and deep breathing can improve self-awareness and emotional regulation, promoting relaxation and stress reduction.
- Building a Healthy Lifestyle: Focusing on healthy habits like regular exercise, balanced nutrition, can improve overall well-being, both physically and mentally.

Unique Determinants of Mental Well-Being

Nature Connection: The extent to which individuals interact with natural environments, which has been shown to reduce stress, enhance mood, and promote overall well-being. Studies suggest that exposure to nature can improve cognitive functioning and emotional regulation.

Sense of Belonging: The feeling of being valued and accepted within social ecosystems or communities. A strong sense of belonging contributes towards emotional stability, resilience, and overall life satisfaction.

Personal Determinants

Genetics & Biology:

Genetic Predisposition: Family history of mental health conditions can increase susceptibility to similar issues.

Neuro chemistry: Imbalances in neurotransmitters can affect mood and behavior.

Psychological Factors

Self-Esteem & Self-Concept: Positive self-esteem and a healthy self-concept contribute to better mental well-being.

Coping Skills: Effective stress management and coping strategies can mitigate the impact of stress and adversity.

Social Determinants

Relationships & Social Support:

1. Community Engagement: Active participation in community activities fosters a sense of belonging and purpose.

Social Networks:

Social Connectedness: Feeling connected to others reduces the risk of mental health issues.

Psychological & Behavioral Determinants

Resilience & Adaptability:

- Stress Management: Effective stress management techniques help individuals cope with challenges.
- Emotional Regulation: The ability to manage and express emotions appropriately is crucial for mental well-being.

Mindset & Attitudes:

Positive Thinking: An optimistic outlook and positive thinking can enhance mental health.

Growth Mindset: Belief in the ability to grow and improve fosters resilience and motivation.

Effective addiction treatment recognizes the interconnectedness of physical and mental health. By considering both aspects, patients can build a strong foundation for sustainable recovery. Mental well-being is not just the absence of mental illness; it's a state of positive mental health that empowers individuals to manage their emotions, cope with stress, and live fulfilling lives. In the context of addiction recovery, prioritizing mental well-being empowers patients to overcome the challenges of addiction and build a positive life for further quality of living.

LIFE SATISFACTION

The term life satisfaction is a cognitive process that involves evaluating one's own quality of life by using criteria." Diener, E., Emmons, R.A., Larsen, R.J., and Griffin, S. (1985).

Life satisfaction is a general assessment of feelings and attitudes at a certain moment in a person's life, from negative to positive." Veenhoven, R. (1996)

The Quest for Complacency: A history of Life Satisfaction

Life satisfaction, the feeling of contentment or fulfillment with one's life, is a concept that's been pondered by philosophers and everyday people for millennia. Let's delve into the historical journey of understanding life satisfaction:

Focus on Meaning and Virtue: Early civilizations, like those in Mesopotamia and Egypt, emphasized living a life aligned with moral principles and fulfilling one's role in society. Happiness was seen as a byproduct of living virtuously.

Philosophical Inquiry: Greek philosophers like Socrates and Aristotle began dissecting the concept of a good life. They explored themes of reason, virtue, and purpose as key ingredients for a fulfilling life.

Holistic Approach: Eastern philosophies like Confucianism & Buddhism offered a more holistic perspective. They emphasized achieving harmony between oneself, Spiritual Attainment: Concepts like Nirvana in Buddhism and Dao in Taoism focused on achieving a state of inner peace and enlightenment, leading to a sense of lasting fulfillment.

Shifting Focus: The Age of Enlightenment ushered in a new perspective. Thinkers like John Locke and Jeremy Bentham emphasized individual happiness and well- being as a core human pursuit.

Utilitarianism: The philosophy of utilitarianism argued for maximizing happiness for the greatest number of people, influencing social and political reforms.

Psychology Emerges: With the rise of psychology in the 19th century, scientists began exploring ways to measure and understand subjective well-being, including life satisfaction.

Modern Research: The 20th and 21st centuries saw a surge in research on life satisfaction. Pioneering figures like Ed Diener developed methods to measure and analyze factors influencing life satisfaction across cultures and demographics.

The Evolving Landscape:

- Multifaceted Concept: Today, life satisfaction is recognized as a complex concept influenced by various factors like:
 - Personal values and goals
 - Social relationships
 - Economic security
 - Physical and mental health
 - Cultural background
- Global Focus: Research on life satisfaction now explores its variations across cultures and socioeconomic backgrounds, aiming to understand how social and economic factors influence well-being.

Understanding the history of life satisfaction offers valuable insights for promoting wellbeing in the modern world. This includes:

- Developing strategies to address social inequalities that can negatively impact life satisfaction.
- Encouraging positive psychology interventions that can increase life satisfaction.

By learning from the past and continuing research, we can create a future where everyone has the opportunity to experience a fulfilling and satisfying life.

Determinants of Life Satisfaction

Life satisfaction is influenced by a variety of factors, encompassing personal, social, economic, and environmental determinants. Here are the key determinants:

Personal Determinants

Personality Traits: Optimism: Positive outlook on life.

Self-Esteem: Confidence in one's worth and abilities.

Neuroticism: People who tend to experience fewer negative emotions and have lower levels of neuroticism often report higher life satisfaction.

Health:

Physical Health: Good health and absence of chronic illnesses.

Mental Health: Psychological well-being and absence of mental health issues.

Social Determinants

Relationships:

Family: Strong, supportive family bonds. Friends: Close friendships and social networks. Romantic Relationships: Satisfying and supportive partnerships. Social Support:

Community Engagement: Participation in community activities and feeling of belonging.

Social Connectivity: Frequency and quality of social interactions.

Psychological and Behavioral Determinants

Life Goals and Values:

Purpose and Meaning: Having clear goals and a sense of purpose.

Alignment with Values: Living in accordance with personal values and beliefs. Resilience and Adaptability:

Ability to Adapt: Flexibility in coping with change and adversity. Gratitude and Mindfulness:

Practice of Gratitude: Regularly reflecting on and appreciating positive aspects of life. Mindfulness Practices: Engaging in mindfulness and meditation.

Importance of Life Satisfaction in Addiction patients

Life satisfaction plays a crucial role in addiction recovery, acting as a powerful motivator for staying sober and building a fulfilling life.

A Motivational Force:

- Fueling Change: Low life satisfaction can be a significant driver of addiction. People who feel dissatisfied with their lives may turn to substances as a way to escape or cope with negative emotions. life satisfaction can provide a strong incentive to stay sober and build a life worth living.
- Building a Positive Future: When patients experience a sense of satisfaction with their lives, they are more likely to see recovery as an investment in a brighter future.

A Buffer Against Relapse:

- Reduced Cravings: Life satisfaction can act as a buffer against cravings. When patients feel fulfilled, they are less likely to turn to substances as a coping mechanism for difficult emotions.
- Resilience in the Face of Challenges: Recovery is not always smooth sailing. A strong sense of life satisfaction equips patients with greater resilience to navigate these challenges without resorting to relapse.

Enhancing Life Satisfaction in Recovery:

- Goal Setting and Achievement: Setting realistic and achievable goals can provide a sense of accomplishment and boost life satisfaction. This can involve goals related to education, career, relationships, or personal growth.
- Building Healthy Habits: Focusing on healthy habits like exercise & quality sleep can improve physical and mental well-being, leading to a greater sense of life satisfaction.
- Developing Supportive Relationships: Strong social connections are essential for well-being. Building supportive relationships with friends, family members & support groups can provide a sense of belonging and purpose, enhancing life satisfaction.

Increasing life satisfaction through addiction treatment can initiate a positive cycle. As patients feel more fulfilled, they gain motivation to maintain sobriety, enabling them to pursue their goals and build a better future. This cycle helps them break free from addiction and live a meaningful and purposeful life.

Life satisfaction is not merely a goal in recovery; it's an ongoing journey. By integrating strategies to boost life satisfaction during treatment, patients can find the inner strength and motivation necessary for lasting recovery and creating a life they truly cherish."

Rationale of the Study

High Prevalence of Substance Abuse: India faces a significant challenge with substance abuse, including alcohol, tobacco, and other drugs. My research directly addresses a prevalent and pressing issue in the country.

Relevance to a Critical Issue: My research addresses a critical issue—addiction recovery. Substance abuse is a significant public health concern, and my focus on understanding psychological factors in recovery is both timely and relevant.

Benefit to the Field of Psychology: My research contributes to the broader field of psychology by expanding our understanding of the psychological factors influencing addiction recovery. This has the potential to inform not only de addiction programs but also psychological interventions in various contexts.

Addressing Under explored Areas: My research fills a gap by exploring the interplay of these specific psychological variables in the context of addiction recovery. This nuanced approach contributes to the understanding of how emotional and psychological factors influence long-term recovery outcomes.

REVIEW OF LITERATURE

1. Related literature review of Emotional Intelligence and Mental Well being

Ioannis Tsaousis, Ioannis Nikolaou (2005) conducted a study titled 'Exploring the relationship of emotional intelligence with physical and psychological health functioning' This study examined the association of emotional intelligence (EI) traits such as observing, managing, using and understanding emotions with physical and psychological health. The study was conducted with 365 and 212 working adults over two sessions. The results confirmed that there is a negative correlation between general health and emotional

intelligence, a negative correlation between emotional intelligence and smoking and drinking, and a positive correlation between exercise and emotional intelligence.

Syeda Raizia Bukhari, Maryam Riaz, Rimsha Khan, Syeda Zahra Gillani (2023) Conducted a study "EI and Religiosity as predictors of Mental Well-being among drug addicts." The purpose of this study is to examine the role of EI and religiosity as predictors of mental health in drug users. 100 people aged 18-60 years from different districts of Islamabad and Rawalpindi Pakistan were recruited using purposive sampling. Here, emotional intelligence scale, religiosity index and depression-anxiety scale were used to measure mental health. The results showed that the relationship between emotional intelligence and religiosity is positive among drug addiction variables. Additionally, EI was found to have a positive relationship with mental health.

2. Related literature review of Emotional Intelligence and Life Satisfaction

Orhan Kocali (2021) conducted a study titled 'Does emotional intelligence increase satisfaction with life during Covid 19? The mediating role of depression'

The study discovered how an individual's level of emotional intelligence affected depression and life satisfaction during the Covid-19 period. The study was designed to be quantitative and cross-sectional, reaching 578 adult participants online. The tools were emotional intelligence trait scale, depression sub scale (DASS 21), life satisfaction scale. The results confirmed that emotional intelligence had a positive relationship with life satisfaction and a negative relationship with depression.

Maryam Al Zyadat, Musa Jebreel (2015) conducted study titled "The Efficacy of a training program based on Emotional intelligence in improving Life Satisfaction among substance abusers" The purpose of this study was to examine the effectiveness of an Emotional intelligence-based training program in improving life satisfaction in drug addicts. The sample size consisted of 30 drug addicts with poor ratings on the life satisfaction scale. Subjects were randomly sorted into the shortest number of groups (experimental, control) The experimental group received a training program of (17) training sessions for three months, while the control group did not receive any training. They found that the independent variable was a training program, and the dependent variable were their performance in terms of on the life satisfaction scale. To achieve the goal of the research, a training program based on emotional intelligence and life satisfaction scales was built. The scale was administered as after and next scale. In this study, using one-way analysis of covariance, the results showed that there was a statistically significant difference (α = 0.05) in the items of the experimental group. This shows that a training program based on Emotional Intelligence was effective in improving the Life Satisfaction of drug addicts.

3. Related literature review of Loneliness and Mental Well being

Seydi Ahmet Satici(2019) conducted a study titled 'Facebook addiction and subjective wellbeing: A study of the mediating role of shyness and loneliness on 280 Turkish university students. The study examined whether shyness and loneliness mediated the relationship between Facebook addiction and subjective well-being. The instruments were the Facebook Addiction Scale, the Satisfaction Scale, the Positive and Negative Affect Schedule, the Shyness Scale and the UCLA Loneliness Scale. The results emphasized the role of

adolescent shyness and loneliness in explaining the relationship between Facebook addiction and subjective well-being.

4. Related literature review of Loneliness and Life Satisfaction

Ying-Jia Yang, Yan-Min Xu, Wen-Cai Chen, Jun-Hong, Jin Lu, Bao-Liang Zhong(2017) conducted a study on "Loneliness and its impact on quality of life in Chinese heroin dependent patients receiving methadone maintenance treatment"

This study determined the prevalence and social demographic and clinical correlated of loneliness ad its impact on quality of life in Chinese heroin dependent patients receiving methadone maintenance treatment. A total of 603 patients were consecutively recruited from three cities clinics and administered standard questionnaire to collect social demographic and clinical data. loneliness and quality of life were assessed using single item self report question and world health organization scale respectively. lonely heroine dependent patients had significantly poorer physical and psychological quality of life than not lonely heroin dependent patients.

Eetu Marttila(2021) conducted a study titled ' Does excessive social media use decrease subjective well being? A longitudinal analysis of the relationship between problematic use, loneliness and life satisfaction among 5000 Finnish social network users. Quantitative analysis showed that problematic social media use was negatively correlated with life satisfaction. Increased loneliness further predicted decreased life satisfaction.

5. Related literature review of Resilience and Mental Well being

Lin et al, (2023) conducted a study titled 'Association between Instagram addiction and well being: The role of resilience and self- esteem' Among 441 students in Taipei, Taiwan who use convenience. A quantitative data collection method was used, using different standard scales for each variable. The results confirmed that Instagram addiction was negatively associated with life satisfaction. College students with higher Instagram addiction reported lower psychological well-being, and resilience and self-esteem showed moderate effects.

6. Related literature review of Resilience and Life Satisfaction

Eman Mohammed Ibrahim EI-Genady (2020) conducted a study on "Perceived Social Support and Resilience. Life Satisfaction and Stress Tolerance" Substance Abuse Patients Among 100 Male Substance Abuse Patients in Elis. Abbassi Mental Health Hospital (AMHH). The study aimed to evaluate the effect of perceived social support and tolerance on life satisfaction and stress in patients with substance use disorders and the association of these factors with absence and relapse. A quantitative data collection method with different standard scales was used for each variable. The results confirmed that patients with substance use experience have lower resilience, life satisfaction and stress tolerance than the general population. Social support and resilience are important for life satisfaction.

Ho Nguyen Nguyen Tran (2023) conducted a study on "Resilience fully mediated in the link between risk of smartphone addiction and life satisfaction among college students" This study examines the mediating effect of persistence on the relationship between the risk of smartphone addiction (RSA) and life satisfaction among college students. Method: A cross-sectional research design was used. Four hundred and twenty-three Vietnamese university students (Mean = 18.78, SD = 0.925) completed the Smartphone Addiction Scale - Short

Version (SAS - SV), the Connor-Davidson Resilience Scale (CD-RISC -10) and the Life Satisfaction Scale (SWLS). SPSS 20 and PROCESS 3.5 (model 4) were used to test the hypotheses. Results: Results showed that RSA did not predict the life satisfaction of Vietnamese students (B=- 0.052, SE=0.035, p>0.05, 95% CI=[-0.120, 0.017]). More importantly, resilience fully mediated the relationship between RSA and life satisfaction (B = -0.020, SE = 0.010, 95% CI = [-0.041, -0.004]).

7. Related literature review of Emotional Intelligence and Loneliness

Thomas Lawrence Thomas (2020) conducted a study on "A study on relationship between emotional intelligence and loneliness among young adults during lockdown period" This study examined the relationship between emotional intelligence and loneliness in young adults during the withdrawal period. This was a quantitative study where the "Emotional Intelligence Scale and the UCLA Loneliness Scale" were administered to 60 participants; includes 30 men and 30 women. A convenience sampling method was employed to choose samples from the population. It was hypothesized that young adults' Emotional Intelligence would be linked to loneliness during the lockout period, and there would also be a substantial gender gap in both emotional Intelligence and loneliness. Karl Pearson correlation and independent sample "t" test were used to analyze the data. The result showed that there is a negative moderate relationship between emotional intelligence and loneliness.

8. Related literature review on loneliness and resilience

Shahla pakdaman, Seyed Hassan saadat, Shima Shahzad khodabaksh Ahmadi Milad hosseinialhashemi (2016) conducted a study on "The Role of Attachment Styles and Resilience in Loneliness" This study examined attachment styles and tolerance for loneliness among students. In this 2011 correlational study, 200 students were selected using a multi-age cluster sample. data were collected using scales which were the Attachment Style Scale, the Flexibility Scale and the Loneliness Scale. data were analyzed using Pearson's correlation coefficients, and regression analysis was performed. The results of this study highlight the fact that providing the conditions and context necessary for safe delivery and building resilience can effectively reduce student loneliness.

9. Related literature review of Emotional Intelligence and resilience

Zummuna Zonzanna Davis, Walden University (2021) conducted a study on "Emotional Intelligence, Resilience, and Stress Among Women in Treatment for Substance Disorders" The purpose of this study was to examine resilience as a mediator between EI and stress, a risk factor for chemical dependency treatment in women. The theoretical framework of this study was based on Salovey and Mayer's model of EI. A sample of 109 female volunteers diagnosed with drug use disorders and living in a long-term care facility completed an online survey. The instruments used in this study were the Self-Rated Emotional Intelligence Scale, the Connor Davidson Resilience Scale and the Perceived Stress Scale-4. Multiple linear regression analyzes were conducted to test the proposed mediation model. There was a significant relationship between EI and flexibility and between flexibility and stress, but contrary to predictions. Stress scores were unusually high in this sample. This study has implications for positive social change and understanding how EI and resilience predict distress in women with substance/dependence disorders. It can also help identify individual risk factors that can be targeted for therapeutic interventions.

10. Related literature review on Mental Well-being and Life Satisfaction

D Dahiya, SS Saini, S Jha, M Uddin, P Tyagi, K Kumar (2021) conducted a study on "Psychological Well-Being and Life Satisfaction in Patients with Multiple Psychoactive Substance Use" The study aimed to explore psychological well-being and life satisfaction in patients with multiple psychoactive substance use. the study was conducted among 30 patients fulfilling icd 10 criteria. Data was collected with the help of pgi general well-being scale and life satisfaction scale. positive correlation (r= .421) was observed between psychological well being and life satisfaction.

METHODOLOGY

Problem Statement

To study the relationship between Emotional intelligence, Loneliness, Resilience, Mental Well-being and life satisfaction among Residents of deaddiction center

Objectives

- 1. To find out if there's a relationship between emotional intelligence and mental wellbeing in residents of deaddiction centers.
- 2. To find out if there's a relationship between emotional intelligence and life satisfaction in residents of deaddiction centers.
- 3. To find out if there's a relationship between loneliness and mental well-being in residents of deaddiction centers.
- 4. The find out if there's a relationship between loneliness and life satisfaction in residents of deaddiction centers.
- 5. To find out if there's a relationship between resilience and mental well-being in residents of deaddiction centers.
- 6. To find out if there's a relationship between resilience and life satisfaction in residents of deaddiction centers.
- 7. To find out if there's a relationship between emotional intelligence and loneliness in residents of deaddiction centers.
- 8. To find out if there's a relationship between Loneliness and resilience in residents of deaddiction centers.
- 9. To find out if there's a relationship between emotional intelligence and resilience in residents of deaddiction centers.
- 10. To find out if there's a relationship between mental well being and life satisfaction in residents of deaddiction centers.
- 11. To find out if emotional intelligence, loneliness and resilience can predict mental well-being in residents of deaddiction centers.
- 12. To find out if emotional intelligence, loneliness and resilience can predict life satisfaction in residents of dedication centers.

Hypothesis

- Hypothesis 1 There is no significant relationship between emotional intelligence and mental well-being in residents of deaddiction centers.
- Hypothesis 2 There is no significant relationship between emotional intelligence and life satisfaction in residents of deaddiction centers.
- Hypothesis 3 There is no significant relationship between loneliness and mental well- being in residents of deaddiction centers.

- Hypothesis 4 There is no significant relationship between loneliness and life satisfaction in residents of deaddiction centers.
- Hypothesis 5 There is no significant relationship between resilience and mental wellbeing in residents of deaddiction centers.
- Hypothesis 6 There is no significant relationship between resilience and life satisfaction in residents of deaddiction centers.
- Hypothesis 7 There is no significant relationship between emotional intelligence and loneliness in residents of deaddiction centers.
- Hypothesis 8 There is no significant relationship between loneliness and resilience in residents of deaddiction centers.
- Hypothesis 9 There is no significant relationship between emotional intelligence and resilience in residents of deaddiction centers.
- Hypothesis 10 There is no significant relationship between mental well-being and life satisfaction in residents of deaddiction centers.
- Hypothesis 11 Emotional intelligence, loneliness and resilience can't predict mental well-being in residents of deaddiction centers.
- Hypothesis 12 Emotional intelligence, loneliness and resilience can't predict life satisfaction in residents of deaddiction centers.

Plan of the Study

Predicting Variables

A predictor variable, also known as an independent variable, is a variable in a research study or statistical model that is likely to affect another variable, called the dependent variable or outcome variable. The predictor variables are:

- EMOTIONAL INTELLIGENCE
- LONELINESS
- RESILIENCE

Criterion Variables

A criterion variable, also known as a dependent variable or outcome variable, is a variable in a research study or statistical model that is affected or predicted by another variable, the predictor variable. Criterion variables are:

- MENTAL WELL-BEING
- LIFE SATISFACTION

Controlled Variables

Controlled variables, also called constant variables, are elements of research that are intentionally kept constant to isolate the effect of an independent variable (predictor variable) on a dependent variable (criterion variable). These are not the main focus of the study, but if they are not controlled, they can significantly affect the results.

- AGE 20 TO 40 YEARS
- SEX MALE ONLY
- EDUCATION QUALIFICATION MINIMUM XXII AND ABOVE
- PERIOD OF STAY 5 TO 15 WEEKS
- SOCIO ECONOMIC STATUS MIDDLE INCOME GROUP
- FAMILY TYPE NUCLEAR OR JOINT

Selection of Variables and its Justification

Emotional intelligence: Emotional intelligence is the ability to observe one's own and others' emotions, distinguish between different emotions and label them appropriately, and use emotional information to guide thinking and behavior." (Salovey, P. and Mayer, J.D. (1990). Emotional intelligence plays a crucial role in the treatment and recovery of individuals struggling with addiction, which involves the ability to recognize, understand manage, and use emotions effectively, can significantly impact various aspects of addiction recovery.

Loneliness: The feeling of loneliness is a complex and unpleasant emotional response that results from being alone or isolated. Loneliness is not just about physical isolation, it can also be a feeling of isolation from others or a lack of meaningful social interactions. Loneliness is a significant factor in the lives of individuals struggling with addiction. It can both contribute to the development of addiction and result from it.

Resilience: Most people understand resilience as the ability to bend over backwards, but still hang on and, if possible, recover from negative life events. It forms the basis of their thinking. According to the American Psychological Association (2014), resilience is the ability to adapt effectively to adversity, trauma, tragedy, danger or significant sources of stress. The presence of flexibility is a crucial defense against addiction. Addiction is a complex disease characterized by relapse. Patients who exhibit exceptional resilience are better equipped to handle these difficulties and maintain a strong commitment to recovery.

Mental Well Being: The mental state is a state of awareness in which an individual recognizes their strengths, manages daily life demands, engages in productive work, and contributes to society." (World Health Organization, 2001) n Mental well-being refers to a state of prosperity in various areas of life, and it includes emotional, psychological and social health. Successful addiction recovery is dependent on mental health. Just as a strong foundation is needed to gradually build a building, it takes a healthy mind to overcome addiction and it takes a positive attitude to live a purposeful life in recovery. Here, we dive into why mental wellness is important for people with addiction.

Life Satisfaction: The term life satisfaction is a cognitive process that involves evaluating one's own quality of life by using criteria." Diener, E., Emmons, R.A., Larsen, R.J., and Griffin, S. (1985). Life satisfaction is a general assessment of feelings and attitudes at a certain moment in a person's life, from negative to positive." Veenhoven, R. (1996).Life satisfaction plays a crucial role in addiction recovery, acting as a powerful motivator for staying sober and building a fulfilling life. Increasing life satisfaction through addiction treatment can initiate a positive cycle. As patients feel more fulfilled, they gain motivation to maintain sobriety, enabling them to pursue their goals and build a better future. This cycle helps them break free from addiction and live a meaningful and purposeful life.

Selection of Samples Sample Criteria

Inclusion Criteria

- 1. Age falling between 20 to 40 years
- 2. Period of stay in the center between 5 weeks to 15 weeks
- 3. Nature of family either nuclear family or joint family
- 4. Education qualification minimum class 12 graduate

- 5. Gender only male
- 6. Financial status either middle income group or high income group.

Exclusion Criteria

- 1. Age range below 20 years and above 40 years.
- 2. Period of stay in the center less than 5 weeks more than 15 weeks.
- 3. Nature of family broken family.
- 4. Education qualification below class 12 graduate.
- 5. Gender female and others.
- 6. financial status below middle income group.

Sampling Technique

Purposive sampling

Sample Size

112

Sample Source

Sample source will be the residents of alcohol and drug de Addiction centre within Siliguri.

Measures Used in Study

UCLA LONELINESS SCALE (VERSION 3)

The UCLA Loneliness Scale, developed by Daniel Russell and colleagues in 1978, is a widely used measure of subjective feelings of loneliness. The full form UCLA in this context refers to the University of California, Los Angeles, where the scale was developed. The UCLA Loneliness Scale (Version 3) has been shown to be reliable in terms of test-retest reliability when compared with one. - annual period.

Psychometric properties

Cronbachs Alpha is 0.87(Internal Consistency) Test Retest Reliability is 0.82

Administration - Its a self administered Scale

Scoring Q1, Q5, Q6, Q9, Q10, Q15, Q16, Q19 and Q20 should be evaluated in reverse order. Reverse scoring is designed in the opposite direction to what the scale measures. THE UCLA PERSONALITY SCALE IS AN EMOTIONAL 4- POINT LIKERT SCALE ranging from 1 (I NEVER FEEL THIS WAY) to 4 (I FEEL

THIS A LOT; e.g., "I feel miserable doing so many things alone" and "I feel isolated". others")

NORMS		
LONELINESS SCORE	INTERPRETATION	
20 to 40	low to moderate	
40 to 60	moderate to high	
above 60	very high	

BRIEF RESILIENCE SCALE

The Brief Resilience Scale (BRS) was developed by Dr. Bruce D. Smith and Dr. Alex J. in 2008. The BRS is a researched tool that measures your resilience after trauma or stress. There are several such tools that are publicly available; BRS is exactly what our team uses.

BRS is a one-page function where you rate a series of sentences 1-5. The points (added and divided by the number of statements) determine your personal BRS score.

Psychometric properties

Cronbachs Alpha is 0.91(Internal Consistency)

Test Retest Reliability is 0.67 Administration its a self administered scale

Scoring the Brief Resilience Scale Add the scores for each of the six questions and divide by six to determine the BRS score. BRS is assessed by reverse coding items 2, 4, and 6 and averaging the six items. The BRS likert scale is as follows: 1 = Disagree, 2 = Disagree, 3 = Neutral, 4 = Agree, 5 = Strongly agree.

NORMS:

BRS score	Interpretation
1.00-2.99	Low resilience
3.00-4.30	Normal resilience
4.31-5.00	High resilience

BRIEF EMOTIONAL INTELLIGENCE SCALE

The Brief Emotional Intelligence Scale (BEIS-10; Davies et al, 2010) is an abbreviated selfreport measure of emotional intelligence based on the conceptualization of Salovey and Mayer (1990). It is a short, 10-item version of the 33-item Emotional Intelligence Scale (EIS; Schutte et al., 1998). Test-retest reliability over a 2-week period was also determined. (APA PsycTest database entry). An important advantage of the BEIS-10 is that it provides the ability to rapidly capture EI while maintaining acceptable psychometric properties. With only 10 items, the measure is significantly shorter than any other trait EI measure, taking an average of one to two minutes to complete. We suggest that the BEIS-10 may be particularly useful for collecting data on populations and in situations where time is an issue.

Psychometric Properties

Cronbachs Alpha is 0.86(Internal Consistency) Test Retest Reliability is .769

Administration - its a self administered scale

Scoring The dimensions include: (1) Appraisal of own emotions (e.g., I know why my emotions change), (2) Appraisal of other's emotions (e.g., I can tell how other people are feeling by listening to the tone of their voice), (3) Regulations of own emotions (e.g., I seek out activities that makes me happy), (4) Regulation of others' emotion (e.g., I arrange events others enjoy), and (5) utilization of emotion (e.g., when I am in a positive mood, I am able to come up with new ideas). The BEIS-10 response format ranging between 1 = strongly disagree to 5 = strongly agree. Individual's global score (obtained by summing up his/her responses to the items) ranged between 10 to50 with higher scores indicating higher emotional intelligence.

NORMS		
BEIS 10 SCORE	INTERPRETATION	
16 AND BELOW	LOW	
16 TO 32	NORMAL	
32 AND ABOVE	HIGH	

WARWICK- EDINBURGH MENTAL WELLBEING SCALE (WEMWBS)

WEMWBS was created by Tennant et al in It consists of 14 items rated on a 5-point Likert type scale ranging from 1 (never) to 5 (always). The highest and lowest scores are 14 and 70, respectively. All WEMWBS items are positively worded and cover both emotional and functional aspects of mental well-being.

Psychometric Properties

Cronbachs Alpha is 0.89(Internal Consistency) Test Retest Reliability is 0.83 Administration its a self administered scale with total 14 item

Scoring The total score is obtained by adding the scores of each 14 points. Each item has a score of 1-5 and a total score of 14-70. For additional help in scoring the WEMWBS, see the User's Guide available on the website's Resources page after you have registered to use the scale.

INORINIS		
MENTAL WELLBEING SCORE	INTERPRETATION	
0-32 points	very low	
32-40	below average	
40-59	average	
59-70	above average	

NORMS

SATISFACTION WITH LIFE SCALE (SWLS)

The SWLS is a widely used and well-established measure of life satisfaction, assessing individuals' overall judgment of their lives. The Satisfaction with Life Scale (SWLS) was developed by psychologist Ed Diener and colleagues in the year 1985. The swls is a short 5 item instrument designed to measure global cognitive Judgement of satisfaction with one's life. The scale usually requires only about one minute of a respondent's time, where respondents answer one a likert scale.

Psychometric Properties

Cronbachs Alpha is .79 to .89 Test Retest Reliability is .84 Administration - its a self administered scale

Scoring The total score is calculated by adding the scores for each item. The possible score is 5-35, where a score of 20 represents the neutral point of the scale. Scores 5-9 indicate that the respondent is very dissatisfied with life, while scores 31-35 indicate that the respondent is very satisfied.

NORMS

scores consist of a raw score (between 5 & 35). Higher scores represent higher life satisfaction. Scorers can be assigned into six well-being categories & interpretive text in provided for each.

LIFE SATISFACTION SCORE	INTERPRETATION
30- 35	Extremely satisfied
20-24	slightly satisfied
15-19	slightly dissatisfied

LIFE SATISFACTION SCORE	INTERPRETATION
10 - 14	dissatisfied
5-9	extremely dissatisfied

Procedure

Quantitative data collection was conducted using Google Forms, with participants completing five questionnaires: the UCLA Loneliness Scale, the Brief Emotional Intelligence Scale 10 (BEIS 10), the Brief Resilience Scale (BRS), and the Warwick-Edinburgh Mental Well-Being Scale. Data collection included a consent form and a general information form. Questionnaires were administered in English, and since all scales were self-administered, participants were asked to read the instructions carefully so as not to miss any items to facilitate scoring. After data collection, scores were tabulated for further statistical processing and hypothesis validation.

Statistical Treatment of Data

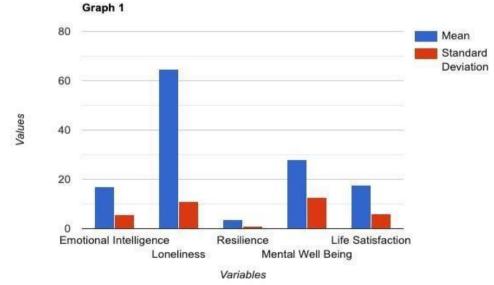
- A. Descriptive Statistics Mean and Standard deviation
- B. Parametric Statistics- Correlation and Multiple Linear Regression

RESULTS

Descriptive Statistics

Table 1 representing mean and standard deviation of the variables E.I., loneliness, resilience, mental well-being, life satisfaction

Variables	Mean	Std. Deviation	Ν	
Emotional Intelligence	16.9464	5.63106	112	
Loneliness	64.6518	11.04268	112	
Resilience	3.5392	.88658	112	
Mental Well Being	27.9107	12.80945	112	
Life Satisfaction	17.5089	6.10272	112	



Graph 1 Showing the Mean and Standard Deviation of The Variables

		Emotional Intelligence	Mental Well Being
	Pearson Correlation	1	.498**
Emotional	Sig. (2-tailed)		.000
Intelligence	Ν	112	112
	Pearson Correlation	.498**	1
Mental Well Being	Sig. (2-tailed)	.000	
	Ν	112	112

 Table 2 Depicting Correlation between Emotional Intelligence and Mental Well Being

 Correlation

**. The correlation is significant at the 0.01 level (2-tailed).

For the above table it can be noticed that there is a Pearson correlation of .498 between the variables Emotional Intelligence and Mental Well being. Correlation is significant at the 0.01 level. Thus Hypothesis 1 is rejected and there is a significant positive correlation between Emotional intelligence and Mental Well Being r = .498, (p < .01)

 Table 3 Depicting Correlation Between Emotional Intelligence and Life Satisfaction

 Correlations

		Emotional	Life Satisfaction
		Intelligence	
	Pearson Correlation	1	.745**
Emotional	Sig. (2-tailed)		.000
Intelligence	Ν	112	112
	Pearson Correlation	.745**	1
Life Satisfaction	Sig. (2-tailed)	.000	
	Ν	112	112

**. The correlation is significant at the 0.01 level (2-tailed).

From the above table it can be noticed that there is a Pearson correlation of .745 between the variables Emotional Intelligence and Life satisfaction. Correlation is significant at the 0.01 level. Thus Hypothesis 2 is rejected and there is significant large positive correlation between Emotional Intelligence and Life Satisfaction r = .745, (p < .01).

 Table 4 Depicting Correlation Between Loneliness and Mental Well Being

 Correlations

		Loneliness	Mental Well Being
Loneliness	Pearson Correlation	1	724**
	Sig. (2-tailed)		.000
	Ν	112	112
Mental Well	Pearson Correlation Sig.	724**	1
Being	(2-tailed)	.000	
_	Ν	112	112

**. The correlation is significant at the 0.01 level (2-tailed).

From the above table it can be noticed that there is a Pearson correlation of -.724 between the variables Loneliness and Mental Well Being. Correlation is significant at the 0.01 level. Thus Hypothesis 3 is rejected and there is a significant large negative correlation between Loneliness and Mental Well Being r = .724, (p < .01)

		Loneliness	Life Satisfaction
Loneliness	Pearson Correlation	1	282**
	Sig. (2-tailed)		.003
	Ν	112	112
	Pearson Correlation	282**	1
Life	Sig. (2-tailed)	.003	
Satisfaction	Ν	112	112

Table 5 Depicting Correlation Between Loneliness and Life Satisfaction Correlations

**. The correlation is significant at the 0.01 level (2-tailed).

From the above table it can be noticed that there is a Pearson correlation of -.282 between the variables Loneliness and Life Satisfaction. Correlation is significant at the 0.01 level. Thus Hypothesis 4 is rejected and there is a significant negative correlation between Loneliness and Life Satisfaction r = .282, (p< .01)

Table 6 Depicting Correlation Between Resilience and Mental Well Being Correlations

		Resilience	Mental Well Being
Resilience	Pearson Correlation	1	.293**
	Sig. (2-tailed)		.002
	N	112	112
Mental Well	Pearson Correlation	.293**	1
Being	Sig. (2-tailed)	.002	
	Ν	112	112

**. The correlation is significant at the 0.01 level (2-tailed).

From the above table it can be noticed that there is a Pearson correlation of .293 between the variables Resilience and Mental Well Being. Correlation is significant at the 0.01 level. Thus Hypothesis 5 is rejected and there is a significant positive correlation between Resilience and Mental Well Being r = .293, (p < .01)

Table 7 Depicting Correlation Between Resilience and Life Satisfaction Correlations

		Resilience	Life Satisfaction
Resilience	Pearson Correlation	1	.218*
	Sig. (2-tailed)		.021
	Ν	112	112
Life Satisfaction	Pearson Correlation	.218*	1
	Sig. (2-tailed)	.021	
	N	112	112

*. Correlation is significant at the 0.05 level (2-tailed).

From the above table it can be noticed that there is a Pearson correlation of .218 between the variables Resilience and Life Satisfaction. Correlation is significant at the 0.05 level. Thus Hypothesis 6 is rejected and there is a significant positive correlation between Resilience and Life Satisfaction r = .282, (p<0.05)

Table 8 Depicting Correlation Between Emotional Intelligence and Loneline	ss
Correlations	

		Emotional Intelligence	Loneliness
Emotional	Pearson Correlation	1	295**
Intelligence	Sig. (2-tailed)		.002
_	N	112	112
Loneliness	Pearson Correlation	295**	1
	Sig. (2-tailed)	.002	
	N	112	112

**. The correlation is significant at the 0.01 level (2-tailed).

From the above table it can be noticed that there is a Pearson correlation of -295 between the variables Emotional Intelligence and Loneliness. Correlation is significant at the 0.01 level. Thus Hypothesis 7 is rejected and there is significant negative correlation between Emotional Intelligence and Loneliness r = .295, (p<0.01)

Table 9 Depicting Correlation Between Loneliness and Resilience Correlations

		Loneliness	Resilience	
	Pearson Correlation	1	371**	
Loneliness	Sig. (2-tailed)		.000	
	Ν	112	112	
	Pearson Correlation	371**	1	
Resilience	Sig. (2-tailed)	.000		
	Ν	112	112	

**. The correlation is significant at the 0.01 level (2 tailed).

From the above table it can be noticed that there is a Pearson correlation of -.371 between the variables Loneliness and Resilience. Correlation is significant at the 0.01 level. Thus Hypothesis 8 is rejected and there is a significant negative correlation between Loneliness and Resilience r = .371, (p < .01)

Table 10 Depicting Correlation Between Emotional Intelligence and Resilience Correlations

		Emotional Intelligence	Resilience
Emotional	Pearson Correlation	1	.227*
Intelligence	Sig. (2-tailed)		.016
	Ζ	112	112
Resilience	Pearson Correlation	.227*	1
	Sig. (2-tailed)	.016	
	Ν	112	112

*. Correlation is significant at the 0.05 level (2-tailed).

From the above table it can be noticed that there is a Pearson correlation of .227 between the variables Emotional Intelligence and Resilience. Correlation is significant at the 0.05 level. Thus, Hypothesis 9 is rejected there is a significant positive correlation between Emotional Intelligence and Resilience r = .227, (p <.05)

Table 11 Depicting Correlation Between	n Mental Well Being and Life Satisfaction
	Correlations

		Mental Well Being	Life Satisfaction
Mental Well	Pearson Correlation	1	.222*
Being	Sig. (2-tailed)		.019
	Ν	112	112
Life	Pearson Correlation	.222*	1
Satisfaction	Sig. (2-tailed)	.019	
Sanshaction	Ν	112	112

*. Correlation is significant at the 0.05 level (2-tailed).

From the above table it can be noticed that there is a Pearson correlation of .222 between the variables Mental Well Being and Life Satisfaction. Correlation is significant at the 0.05 level. Thus Hypothesis 10 is rejected and there is significant positive correlation between Mental Well Being and Life Satisfaction r = .222, (p<.05)

Table 12 showing multiple regression analysis of emotional intelligence, loneliness, resilience as predictor variable for mental well-being as a criterion variable (using enter method)

R	R Square	Adjusted R Square	F	dt	Sig.
.783 ^a	.612	.602	56.900	3	.000 ^b

*Indicates significance at 0.01 level

a. Predictor variable: (constant) Emotional intelligence, Loneliness, Resilience

b. Dependent variable: Mental well being

From the above table it can be noted that Hypothesis 11 is rejected. The predictor variables Emotional intelligence, Loneliness, Resilience can successfully predict 60% of the criterion variable Mental Well being(p<0.01)

Table 13 Showing multiple regression analysis of emotional intelligence, loneliness, resilience as predicting variables for life satisfaction being criterion variable (using enter method)

R	R Square	Adjusted R Squ	are F	df	Sig.
.748 ^a	.560	.560	45.865	3	.000 ^b

*Indicates significance at 0.01 level

a. Predictor variable: (constant) Emotional intelligence, Loneliness, Resilience

b. Dependent variable: Life satisfaction

From the above table it can be noted that Hypothesis 12 is rejected. The predictor variables Emotional intelligence, Loneliness, Resilience can successfully predict 56% of the criterion variable Life satisfaction(p<0.01).

DISCUSSION

The primary objective of the study was to find the relationship between Emotional intelligence, Loneliness, Resilience (predicting variables) with that of Mental Well Being and Life satisfaction as criterion variables.

The results indicate a significant correlation among these variables, leading to rejection of the null Hypotheses, which started that there is no significant relationship among the variables.

Hypothesis 1 is rejected and there is a significant positive correlation (r = 0.498) between E.I and Mental Well Being (p < .01). It aligns with a previous study "EI and Religiosity as predictors of Mental Well-being among drug addicts" conducted by Syeda Raizia Bukhari, Maryam Riaz, Rimsha Khan, Syeda Zahra Gillani and the results showed EI was found to have a positive relationship with mental health. High EI is associated with the use of adaptive coping strategies (e.g., problem-solving, seeking social support) rather than maladaptive ones (e.g., avoidance, denial), leading to better mental health outcomes.

Hypothesis 2 is rejected and there is significant large positive correlation (0.745) between Emotional Intelligence and Life Satisfaction (p < .01). It aligns with a previous study "Does emotional intelligence increase satisfaction with life during Covid 19? The mediating role of depression" conducted by Orhan Kocali (2021) and the results confirmed that Emotional intelligence had positive relationship with life satisfaction.High EI individuals often feel a greater sense of control over their lives, leading to increased autonomy and life satisfaction.

Hypothesis 3 is rejected and there is a significant large negative correlation (r = .724) between Loneliness and Mental Well Being (p < .01). It aligns with a previous study "Facebook addiction and subjective well-being: A study of the mediating role of shyness and loneliness on 280 Turkish university students conducted by Seydi Ahmet Satici(2019) and the results confirmed that there is relationship between Loneliness and Mental Well Being. The significant large negative correlation between loneliness and mental well-being in my study can be attributed to the multifaceted impact of loneliness on social support, emotional states, self-esteem, behaviors, and physiological stress response.

Hypothesis 4 is rejected and there is a significant negative correlation (r=.282) between Loneliness and Life Satisfaction (p<.01). It aligns with a previous study "Does excessive social media use decrease subjective well being? conducted by Eetu Marttila (2021) and the results confirmed that Increased loneliness further predicted decreased life satisfaction. Life satisfaction is often closely related to the quality and quantity of social connections. Humans have an inherent need for social interaction and connection. Loneliness can cause individuals to withdraw and isolate themselves further, perpetuating a cycle of dissatisfaction.

Hypothesis 5 is rejected and there is a significant positive correlation (r = .293) between Resilience and Mental Well Being (p < .01). Resilient people are better at regulating their emotions, reducing the likelihood of experiencing severe anxiety, depression, or other mental health issues. Provide valuable insights into the psychological factors that influence well-being in this drug affected population.

Its just like very few people came out of the trauma or resilience from covid 19. It somewhere still triggers our traumatic memories.

Hypothesis 6 is rejected and there is a significant positive correlation (r = .282) between Resilience and Life Satisfaction (p<0.05). It aligns with a previous study "Perceived Social Support and Resilience Life Satisfaction and Stress Tolerance" Substance Abuse Patients Among 100 Male Substance Abuse Patients in Elis. Abbassi Mental Health Hospital (AMHH) conducted by Eman Mohammed Ibrahim EI-Genady (2020) and the results confirmed that there is a relationship between Resilience and life Satisfaction. Resilient individuals are often better at seeking and maintaining supportive relationships, which provide emotional and practical support during difficult times. This confidence in one's capabilities contributes to a greater sense of control and satisfaction in life.

Hypothesis 7 is rejected and there is significant negative correlation (r = .295) between Emotional Intelligence and Loneliness (p<0.01). It aligns with a previous study "A study on relationship between Emotional intelligence and Loneliness among young adults during lockdown period" conducted by Thomas Lawrence Thomas and the results confirmed that there is a significant relationship between Emotional intelligence and Loneliness. Individuals with high Emotional intelligence are better at forming and maintaining meaningful relationships, reducing feelings of loneliness.

Emotional intelligence facilitates clearer and more effective communication.

High emotional intelligence allows individuals to empathize with others, fostering deeper and more supportive relationships. This empathy reduces social isolation and loneliness by improving overall well-being, particularly among vulnerable populations.

Hypothesis 8 is rejected and there is a significant negative correlation (r = .371) between Loneliness and Resilience (p < .01). Resilience is often associated with a positive outlook on life, even in difficult circumstances. This optimism can buffer against loneliness by promoting a sense of hope and possibility for meaningful social interactions.

Hypothesis 9 is rejected there is a significant positive correlation (r = .227) between Emotional intelligence and Resilience (p < .05). It can be noticed that there is a Pearson correlation of .227 between the variables Emotional Intelligence and Resilience. Correlation is significant at the 0.05 level. It aligns with a previous study "Emotional Intelligence, Resilience, and Stress Among Women in Treatment for Substance Disorders" conducted by Zummuna Zonzanna Davis, Walden University and the results showed how EI and resilience predict distress in women with substance/dependence disorders. Hence in this study findings there was a relationship between E.I. and Resilience. Emotional Intelligence also includes interpersonal skills like empathy and communication, which facilitate positive relationships and social support networks. These relationships can enhance resilience by providing emotional and practical assistance during challenging times. Enabling them to cope with stressors and adversities more resiliently.

Hypothesis 10 is rejected and there is significant positive correlation (r = .222) between Mental Well Being and Life Satisfaction (p<.05). Its aligns with a previous study "Psychological Well-Being and Life Satisfaction in Patients with Multiple Psychoactive Substance Use" conducted by D Dahiya, SS Saini, S Jha, M Uddin, P Tyagi, K Kumar and

results confirmed that there was a positive correlation between Mental Well Being and Life Satisfaction. Mental Well-Being encompasses emotional, psychological, and social aspects of health it includes factors such as self-esteem, optimism, and the ability to manage emotions effectively, which are crucial for overall sense of purpose in life, all contributing to higher Life Satisfaction.

Multiple Regression analysis of Emotional Intelligence, Loneliness, Resilience as predictor variables for Mental Well Being as criterion variable (using enter method) It can be noted that Hypothesis 11 is rejected. The predictor variables Emotional intelligence, Loneliness, Resilience can successfully predict 60 % of the criterion variable Mental Wellbeing(p<0.01). Higher Emotional intelligence may lead to better emotional regulation and coping mechanisms, contributing positively to Mental Well-Being. Higher levels of loneliness can negatively impact Mental Well-Being, affecting emotional stability and overall life satisfaction. Individuals with higher resilience tend to have better coping strategies and emotional regulation, thereby promoting better Mental Well-Being.

Multiple Regression analysis of Emotional Intelligence, Loneliness, Resilience as predictor variables for Life Satisfaction as criterion variable (using enter method) It can be noted that Hypothesis 12 is rejected. The predictor variables Emotional intelligence, Loneliness, Resilience can successfully predict 56% of the criterion variable Life satisfaction(p<0.01). Higher EI is associated with better emotional regulation and interpersonal relationships, which can enhance overall Life Satisfaction. Higher levels of loneliness are often linked to lower Life Satisfaction due to reduced social support and emotional well-being. Individuals with higher resilience tend to perceive challenges as manageable, which can positively impact their Life Satisfaction despite difficult circumstances.

Does it can be interpreted that there is a significant correlation between the variables among the deaddiction residents. Thus, it can be quantified that any significant improve in the predictor variables can directly impact the criterion variables.

If proper training and psycho education regarding Emotional intelligence, Loneliness and Resilience can significantly impact there Mental Well Being and Life satisfaction as the predictor variables can successfully predict 78.8% and 74.8% of the criterion variables which will further help in impactful changes in the recovery process for alcohol and drug deaddiction residents through the finding of my research and how this psycho social variables play a crucial in understanding recovery process and a impactful life related changes from this multidimensional perspective of this relation of the variables.

CONCLUSION

In conclusion, this study demonstrated significant correlations between Emotional intelligence, Loneliness, Resilience with that of Mental Well Being and Life satisfaction. All the Null Hypotheses was successfully rejected. Stating that this psycho social variables play a significant and crucial role among alcohol and drug de addiction residents. These findings highlight the complex interplay between these variables and suggest that targeted interventions could have multifaceted benefits and this study provides valuable insights for future researches to explore these relationships further to enhance the understanding and application of these findings in educational and psychological contexts for addiction recovery process.

Limitations

- Study was conducted on over 8 deaddiction centers of one region, more vast geographic location is needed for more advanced empirical evidence.
- Greater sample size should have been used
- Cultural Sensitivity some scales may not be culturally sensitive or appropriate for all participants, potentially affecting the accuracy of the data.

Future Avenues

- Neurobiological Correlates: Explore the neuro biological mechanisms underlying these relationships, such as how emotional intelligence might correlate with brain function or structure changes in deaddiction patients.
- Effectiveness of Existing Programs: Evaluate the effectiveness of existing deaddiction programs in improving emotional intelligence, reducing loneliness, and enhancing resilience and overall well-being.

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Conflict of Interest

The author(s) declared no conflict of interest.

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